

M'Chigeeng Health Centre

P.O. Box 308, M'CHIGEENG, ONTARIO P0P 1G0
TELEPHONE : (705)377-5347
FAX: (705)377-5090



Health Canada Santé Canada

First Nations & Inuit Health Branch, Health Canada
Thunder Bay Zone
981 Balmoral Street
THUNDER BAY, Ontario
P7C 6E7

Please complete this form as confirmation that the patient has attended his/her appointment as stated in the Medical Transportation Policy framework for the Non-Insured Benefits Program.

Sec.6.1 When accessing medical transportation benefits, confirmation that the client has accessed a medically required health service must be obtained from the health care professional or his/her representative and submitted to FNIH or a First Nations or Inuit Health Authority or organization.

Payable to: _____	Year: 2021
P.O. Box _____ M'Chigeeng, ON P0P 1G0	Tracking : # _____

CONFIRMATION OF APPOINTMENT

This is to confirm that: _____

was seen by: _____

(Doctor or Health Care Provider)

on date: _____ at: _____

at: _____

Signature/Stamp of Doctor or Health Care Provider

NIHB Approval #