FMLA OR OTHER CERTIFICATION PAPERWORK SERVICE AGREEMENT

Printed Name: _____ Date of Birth: DD MM YY

Practice Name: YASMIN MALDONADO-STITT, MD

Due to volume of requests and time required to adequately review and fill out documentation, we require a fee to fill out FMLA or other certification paperwork. Please see below for full details.

Oregon Notice

- Under Oregon Revised Statutes (ORS) and standard medical practice, administrative paperwork (including FMLA forms) may be charged as a separate fee and is not typically covered by insurance.

Service Fee & Payment

- Completion of FMLA or other medical certification forms is a non-covered administrative service.
- A flat fee of $45.00 is required. Payment must be made in full before paperwork will be completed. Fees are non-refundable once work has started.

Processing Time

- Please allow 5-7 business days for completion after payment is received, and all required forms are submitted. Expedited requests may not be available.

Patient Responsibilities

- Submit **complete and legible forms** (patient sections filled out). Include employer contact information and delivery instructions. Incomplete forms will delay processing.

Medical Determination

- Forms are completed based on the provider's medical judgment and documentation.
- Completion does not guarantee approval of leave or other accomodations.
- The provider will not change or falsify medical information.

Authorization & Agreement

I understand and agree to the terms above, including payment in advance. I authorize the release of necessary medical information to complete these forms.

_____ Date: DD MM YY

Patient Signature

_____ Date: DD MM YY

Office Representative