



Reading School District Physical Credit Form

Verification of Annual Physical Examination

Date of examination must be between July 1, 2021 and June 30, 2022.

I hereby certify that I have examined the individual referenced below at his/her request for a routine physical examination.

Patient's Name: _____

Employee ID Number: _____

Date of Examination: _____

Physician's Name (printed): _____

Physician's Signature: _____

Please remit this form to:

Benefits Office
800 Washington Street
Reading, PA 19601
or
Fax to 610-371-5919

This form or an itemized bill showing services rendered for a routine physical/gynecological examination must be received by August 1, 2022 in order to qualify for the contribution credit. Forms will not be accepted after August 1, 2022.



P: (484) 258-7000, Option 4
F: (610) 371-5919



800 Washington Street
Reading, PA 19601



ReadingSD.org/benefits