

FORM DI 7

APPLICATION FOR DOCTORS INDEX REFERENCE NUMBER

FROM: 482

THE ADMINISTRATOR	
<u>HAMPSHIRE</u>	FPC
<u>FRIARSGATE,</u>	
<u>WINCHESTER, HANTS</u>	

SO F.P.C.
- 4 MAR 1980
RECEIVED

TO:

DEPARTMENT OF HEALTH AND SOCIAL SECURITY
Statistics and Research Division (SR Fylde D)
Room 7122
Norcross, Blackpool FY5 3TA

PLEASE INFORM ME OF THE DOCTORS INDEX NUMBER FOR THE
MEDICAL PRACTITIONER NAMED BELOW WHO ~~JOINED~~ WILL JOIN
THE COMMITTEE'S LIST ON 1st April 1980 (DATE)

SIGNATURE

Code A

DATE 28.2.80

SURNAME	BARTON		
MAIDEN NAME (if married woman)			
FORENAMES	JANE ANN		
DATE OF BIRTH (in figures)	DAY	MONTH	YEAR
	Code A		

DOCTORS INDEX NUMBER

Code A