

Wellness Exam

We encourage all employees to visit their family doctors for a wellness exam, but if you are on the Garner Trucking, Inc. Health Care Plan, and you complete a wellness exam between by **December 31, 2017**, you will receive $100.00 for the completion of the exam.

If your spouse is also on the company health care plan and they complete a wellness exam by December 31, 2017, as well, you will receive an additional $100.00.

The form below must be completed by your doctor’s office and returned to Human Resources (HR) to qualify for the $100.00. A separate copy of the form must be completed and turned in to HR for your spouse to receive the additional $100.00 incentive

If you have any questions or concerns in regards to the wellness exam, please contact HR at 419-422-5742.

Please cut and return completed bottom section to HR



Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse Name (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Wellness Exam Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office Use Only:**

EOB Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted to Accounting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Processed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_