



Telephone:  
MSB #  
Attorney for

CERTIFICATE OF SERVICE

I, \_\_\_\_\_, of counsel to Defendant, \_\_\_\_\_, M.D., hereby certify that I have this day mailed, via United States mail, postage prepaid, a true and correct copy of the above and foregoing Supplemental Response to Interrogatories to:

DATED this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

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