



LETA YA WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
(ISHAMI RISHINZWE IMIBANIRE NA SERIVISI Z'UBUZIMA)

**Aged, Blind, or Disabled (ABD) Program Medical Treatment Participation
(Porogaramu y'Abakuze, Abafite Ubumuga bwo kutabona, cyangwa Abafite
Ubumuga)**

Itariki

Nomero y'Ufashwa:

Itariki y'Amavuko:

Ururimi:

Muraho _____,

Kugira ngo ukomeze kwemererwa Aged, Blind, or Disabled (Porogaramu y'Abakuze, Abafite Ubumuga bwo kutabona, cyangwa Abafite Ubumuga, ABD), ugomba:

Kwitabira ubuvuzi bwo mu mutwe bw'ubumuga bwawe hagendwe kuri WAC 388-449-0200.

Kwitabira ubuvuzi bw'ubumuga bwawe hagendewe kuri WAC 388-449-0200.

Nutitabira ubuvuzi udafite impamvu yumvikana, ubufasha uhabwa na ABD bushobora kurangira.

Nyandikira bitarenze _____ tuganire ku buvuzi uri guhabwa. Niba ukeneye ubuafsha bwo guhabwa ubuvuzi cyangwa kubona uguhu ubuvuzi, bimenyeshe nzagerageza kugufasha.

Numpamagara, tuzaganira ku bikurikira:

1. Uburwayi buri gutuma gukora bikugora.
2. Abatanga ubuvuzi bari kubuguha.
3. Ugirana randevu n'uguha ubuvuzi kangahe.
4. icyo nakora kugira ngo ngufashe mu buvuzi uhabwa.

Urakoze. Niteze cyane kubonana na we.

INZOBERE MU BUMUGA

NOMERO ZA TELEFONE

COMMUNITY SERVICES OFFICE (IBIRO BISHINZWE SERIVISI
Z'ABATURAGE)