

FORM 45 (2017)	PROBATION OFFICER'S REPORT	DATE ISSUED	NO. OF PAGES
PROBATION OFFICER'S REPORT	PROBATION OFFICER'S REPORT	1/1/2017	10 PAGES (INCLUDES)

PROBATION OFFICER'S REPORT

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FORM 42 (2017)	PROSTATECTOMY (C17.02)	DATE OF OPERATION	NO.
		15/11/14	100
PROSTATECTOMY	PROSTATECTOMY - Radical prostatectomy (R17.0)		DATE OF RECEIPT
CLASSIFICATION			
ICD-10	R17.0		
ICD-9	58.2		
ICD-8	58.2		
ICD-7	58.2		
ICD-6	58.2		
ICD-5	58.2		
ICD-4	58.2		
ICD-3	58.2		
ICD-2	58.2		
ICD-1	58.2		
ICD-0	58.2		

SECTION 1 - INFORMATION ON THE PATIENT'S HEALTH RECORD

1.1. Name of patient: Mr. J. D. Smith
 1.2. Date of birth: 15/11/14
 1.3. Sex: Male
 1.4. Address: 123 Main Street, London, UK

SECTION 2 - INFORMATION ON THE PATIENT'S HEALTH RECORD

2.1. Name of patient: Mr. J. D. Smith
 2.2. Date of birth: 15/11/14
 2.3. Sex: Male
 2.4. Address: 123 Main Street, London, UK

SECTION 3 - INFORMATION ON THE PATIENT'S HEALTH RECORD

3.1. Name of patient: Mr. J. D. Smith
 3.2. Date of birth: 15/11/14
 3.3. Sex: Male
 3.4. Address: 123 Main Street, London, UK

SECTION 4 - INFORMATION ON THE PATIENT'S HEALTH RECORD

4.1. Name of patient: Mr. J. D. Smith
 4.2. Date of birth: 15/11/14
 4.3. Sex: Male
 4.4. Address: 123 Main Street, London, UK

SECTION 5 - INFORMATION ON THE PATIENT'S HEALTH RECORD

5.1. Name of patient: Mr. J. D. Smith
 5.2. Date of birth: 15/11/14
 5.3. Sex: Male
 5.4. Address: 123 Main Street, London, UK

SECTION 6 - INFORMATION ON THE PATIENT'S HEALTH RECORD

6.1. Name of patient: Mr. J. D. Smith
 6.2. Date of birth: 15/11/14
 6.3. Sex: Male
 6.4. Address: 123 Main Street, London, UK

SECTION 7 - INFORMATION ON THE PATIENT'S HEALTH RECORD

7.1. Name of patient: Mr. J. D. Smith
 7.2. Date of birth: 15/11/14
 7.3. Sex: Male
 7.4. Address: 123 Main Street, London, UK

SECTION 8 - INFORMATION ON THE PATIENT'S HEALTH RECORD

8.1. Name of patient: Mr. J. D. Smith
 8.2. Date of birth: 15/11/14
 8.3. Sex: Male
 8.4. Address: 123 Main Street, London, UK

SECTION 9 - INFORMATION ON THE PATIENT'S HEALTH RECORD

9.1. Name of patient: Mr. J. D. Smith
 9.2. Date of birth: 15/11/14
 9.3. Sex: Male
 9.4. Address: 123 Main Street, London, UK

SECTION 10 - INFORMATION ON THE PATIENT'S HEALTH RECORD

10.1. Name of patient: Mr. J. D. Smith
 10.2. Date of birth: 15/11/14
 10.3. Sex: Male
 10.4. Address: 123 Main Street, London, UK

FORM 990 (2017)	OMB No. 1545-0047	DOE FORM 990 (2017)	OMB No. 1545-0047
Department of Energy	Department of Energy	Department of Energy	Department of Energy

Section 501(c)(3) Organizations

- 4.1. **Check the appropriate box(es) for the organization's type:**
 - (a) Charitable: (b) Educational: (c) Religious: (d) Scientific, technological, or literary: (e) Historic preservation: (f) Conservation: (g) Environmental: (h) Other:
- 4.2. **Check the appropriate box(es) for the organization's status:**
 - (a) 501(c)(3) organization: (b) 501(c)(29) organization:
- 4.3. **Check the appropriate box(es) for the organization's type of activity:**
 - (a) Charitable: (b) Educational: (c) Religious: (d) Scientific, technological, or literary: (e) Historic preservation: (f) Conservation: (g) Environmental: (h) Other:
- 4.4. **Check the appropriate box(es) for the organization's type of activity:**
 - (a) Charitable: (b) Educational: (c) Religious: (d) Scientific, technological, or literary: (e) Historic preservation: (f) Conservation: (g) Environmental: (h) Other:
- 4.5. **Check the appropriate box(es) for the organization's type of activity:**
 - (a) Charitable: (b) Educational: (c) Religious: (d) Scientific, technological, or literary: (e) Historic preservation: (f) Conservation: (g) Environmental: (h) Other:
- 4.6. **Check the appropriate box(es) for the organization's type of activity:**
 - (a) Charitable: (b) Educational: (c) Religious: (d) Scientific, technological, or literary: (e) Historic preservation: (f) Conservation: (g) Environmental: (h) Other:

Section 501(c)(3) Organizations

FORM NO. 1013	ISSUE DATE: 01/15/14	REV. 01/15/14
ISSUED BY: [Redacted]	ISSUED TO: [Redacted]	ISSUED FOR: [Redacted]

SECTION 1: PERSONAL INFORMATION

NAME (Last, First, Middle)	DATE OF BIRTH	SEX
[Redacted]	[Redacted]	[Redacted]
ADDRESS (Street, City, State, ZIP)		
[Redacted]		

SECTION 2: EMPLOYMENT INFORMATION

EMPLOYER NAME	EMPLOYER ADDRESS	EMPLOYER CITY/STATE/ZIP
[Redacted]	[Redacted]	[Redacted]
EMPLOYER PHONE	EMPLOYER FAX	EMPLOYER EMAIL
[Redacted]	[Redacted]	[Redacted]

SECTION 3: EDUCATION INFORMATION

SCHOOL NAME	SCHOOL ADDRESS	SCHOOL CITY/STATE/ZIP
[Redacted]	[Redacted]	[Redacted]
DEGREE	MAJOR	GRADUATION DATE
[Redacted]	[Redacted]	[Redacted]

SECTION 4: FINANCIAL INFORMATION

NET WORTH	ANNUAL INCOME	DEBT TO INCOME RATIO
[Redacted]	[Redacted]	[Redacted]
ASSETS	LIABILITIES	NET WORTH
[Redacted]	[Redacted]	[Redacted]

SECTION 5: REFERENCES

NAME	ADDRESS	PHONE
[Redacted]	[Redacted]	[Redacted]
NAME	ADDRESS	PHONE
[Redacted]	[Redacted]	[Redacted]

SECTION 6: DECLARATION

I, the undersigned, hereby declare that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am not aware of any information which might render the foregoing statements misleading or incomplete.

Signed: [Redacted]

Date: [Redacted]

Print Name: [Redacted]

Signature: [Redacted]

Address: [Redacted]

City: [Redacted]

State: [Redacted]

ZIP: [Redacted]

Phone: [Redacted]

Fax: [Redacted]

Email: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

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Attachments: [Redacted]

Other: [Redacted]

Comments: [Redacted]

Notes: [Redacted]

Attachments: [Redacted]

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Other: [Redacted]

Comments: [Redacted]

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Other: [Redacted]

Comments: [Redacted]

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Attachments: [Redacted]