

Send all referrals to: **admin@jmcmail.com**.

**Leon County  
AUTHORIZATION  
FORM**

**1838 Jaclif Court  
Tallahassee, FL 32308  
(850) 889-1234 Fax: (850) 273-6495  
HOURS: Mon-Friday 8:00am-5:00pm**

Please accept this letter as authorization to perform the following services for the following new hire candidate or employee:

**Employee /** new hire candidate name: \_\_\_\_\_

- Work-related Injury • Date of Injury: \_\_\_\_\_ Specify Injury
- \_\_\_\_\_
- Post-accident drug screen      10 panel instant
- Pre-employment drug screen      10 panel instant
- Random drug screen      10 panel instant
- Reasonable cause drug screen      10 panel instant
- Fitness for Duty
- COVID- 19 Testing
- Other \_\_\_\_\_

**NOTICE TO EMPLOYEE (S) OR NEW HIRE CANDIDATES**

All persons are to bring **photo ID**. Persons under 18 must bring parent guardian. Please **DO NOT BRING CHILDREN** to our office unless another adult is with you to supervise them while you are being examined.

**Drug Screen Donors: Do Not Call Jet Medical Center for Drug Screen Results.** All negative drug screen results are communicated directly to the company. All positive drug screen results are phoned to donor via phone number given above. This letter has been issued and authorized by the following individual.

Signature and Title: Shelley Cason Risk Manager, Leon County      Print Name Shelley L. Cason

Date: February 19, 2025

**NOI@CRM-su.com**

Cathy Weiser, Senior Claims Supervisor  
Commercial Risk Management, Inc.  
P.O. Box 18366, Tampa, FL 33679  
Main Phone Number: 813-289-3900

