

**የተከበርክ/ሽ**  
Dear

**እባክህን/ሽን ያዘሙ ና/ነዬ**  
Please bring your

**ልጅህን/ሽን**  
Child

**ልጆችህ/ሽ**  
Children

(state names)

**በዚህ እንዲመረመሩ**  
To see the

**ዶክተር**  
Doctor

**ነርስ**  
Nurse

**የጤንነት ጠያቂ**  
Health Visitor

**ቴራፒስት**  
Therapist

**በ**  
at the

**ቀዶ ጥገና ክፍል**  
Surgery

**ሆስፒታል**  
Hospital

**ክሊኒክ**  
Clinic

**ትምህርት ቤት**  
School

**በ**  
on

**ሰኞ**  
Monday

**ማክሰኞ**  
Tuesday

**እርብ**  
Wednesday

**ሐሙስ**  
Thursday

**ዓርብ**  
Friday

**ቅዳሜ**  
Saturday

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

**ጥር**  
January

**ለካቲት**  
February

**መጋቢት**  
March

**ሚያዝያ**  
April

**ግንቦት**  
May

**ሰኔ**  
June

**ሐምሌ**  
July

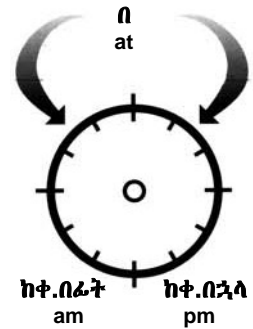
**ነሀሴ**  
August

**መስከረም**  
September

**ጥቅምት**  
October

**ሐዳር**  
November

**ታህሳስ**  
December



**አድራሻችንና የስልክ ቁጥራችን በዚህ ደብዳቤ ላይ ተጽፎ ይገኛል።**  
Our address and telephone number are at the top of this letter.

**ቆጠራው ትጠብቀው/ቁው ዘንድ በጣም አስፈላጊ ነው። እባክህን/ሽን ለመምጣት የማይችሉ/ሽ ከሆነ**  
It is important that you keep this appointment. If you are unable to attend please

**በስ.ቁ.ደውለህ/ሽ**  
telephone

**ቀጥሎ የተጻፈውን ሰው ያነጋግሩ**  
and ask for

**ከልብ**  
Yours sincerely

**አስተርጓሚ ለማቅረብ እንሞክራለን**  
We will try to provide an interpreter

**ክብ ውስጥ ያለውን፡ አንተን/አንቺን የሚመለከት ነው**  
The Circled information applies to you