From:<special_needs@rccl.com>To:<ddefendi@bellsouth.net>Sent:Tuesday, July 12, 2016 6:17 PMSubject:RE: Guest Special Needs Form - (Booking # 6631242) | MJ 29/Aug/2016Hello Dennis,

Thank you for contacting us with this inquiry. We will provide you with the distilled water and an extension cord, at no extra cost.

Best regards,

Jenneth Access Advocate

[THREAD ID:1-5VRWED7]

-----Original Message-----

From: ddefendi@bellsouth.net Sent: 07/12/2016 12:22:39 PM To: <u>special_needs@rccl.com</u> Subject: Guest Special Needs Form - (Booking # 6631242) | MJ 29/Aug/2016

DEFENDI,DENNIS Email Address: <u>ddefendi@bellsouth.net</u> Country of Residence: USA Phone: 8438195799

Ship: MJ Sail Date: 29/Aug/2016 Booking ID: 6631242

Accommodations:

Stateroom:

Hotel:

Bringing Equipment: CPAP/BIPAP Machine

Oxygen/Dialysis: N/A Vendor Name: Vendor Number: N/A Vendor Name: Vendor Number:

Medical: Ensure® Quantity (8 oz cans):

Other: