

**F-G-7, Block F, Parklane Commercial Hub, Jalan SS7/26, 47301 Kelana Jaya, Selangor Tel No. : 03-7884 1818 Fax No.:03-7809 9222**

Insured:	<a href="#">Lena Fairbank</a>	Plan Type:	<a href="#">M674</a>	Member No:	<a href="#">AE7412_1</a>
Patient:	<a href="#">Lena Fairbank</a>	Payor :	<a href="#">AY</a>	Claim No :	<a href="#">AE8521</a>
		Curent Pol. Eff			
Hospital:	<a href="#">PARKCITY MEDICAL CENTRE SDN BHD</a>	Date :	<a href="#">23/03/2018</a>	Policy No :	<a href="#">502-5100646</a>
	<a href="#">COLITIS</a>				
Disability:	<a href="#">GASTRITIS</a>	ICD Code :	<a href="#">K52, K29</a>	X-Ref Claim No:	<a href="#">-</a>
Remarks		DOA	<a href="#">10/04/2023</a>		
Group					
Company		DOD	<a href="#">10/04/2023</a>	Follow-up Date :	<a href="#">-</a>

### Other Not Claimable Items

Pay To :	Lena Fairbank
Bank:	
Account No :	
Note :	

Approved by: EUMI  
Date : 31/07/2023