

## Medical Record Request



## INSURANCE CLAIM TEST

Date: Jan 29, 2026

Time: 12:13 pm

Attn: Null Conestoga View Snf Operations Llc  
Address: 900 E KING STREET, LANCASTER, PA 17602

Phone: -  
Fax: (71-7) -7352115

Re: Anna Leonard

**REQUESTING MEDICAL RECORDS FROM YOU**  
Release of Information**URGENT****Appointment Details**

Patient: Anna Leonard \*

Appointment Date: May 01, 2025

Amount: \$3352

We are requesting medical records related to the above appointment in order to complete and process an insurance claim on behalf of the patient.

Please include the following documents if available:

- Visit summary / encounter notes
- Diagnoses (ICD-10 codes)
- Procedures performed (CPT codes)

Go to <https://pablo-dev.vercel.app/api/s/D9bQZ1Ms> or  
scan the QR code and enter code below to submit

**262840**