Medical Record Request

INS CLAIM

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Date: Jan 08, 2026 Time: 11:16 am

Attn: **Madison Brandt**
Address: 653-1 W 8TH ST # L17, JACKSONVILLE, FL 32209
Phone: -
Fax: (904)-4)-2444059

Re: **Alexander Mcguire**

REQUESTING MEDICAL RECORDS FROM YOU

Release of Information

URGENT

Appointment Details
Patient: Alexander Mcguire * 1952-03-19
Appointment Date: Dec 22, 2025
Amount: $200

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)

Submit by fax at 3233213333 or email to smalafiia@osdb.io