

Medical Record Request



INSURANCE CLAIM TEST

Date: Jan 29, 2026

Time: 08:07 am

Attn: **Carl Rountree**Address: 5875 BREMO RD SUITE 303,
RICHMOND, VA 23226Phone: -
Fax: ((804)-2877285Re: **Velma Jackson**

REQUESTING MEDICAL RECORDS FROM YOU

URGENT

Release of Information

Appointment Details

Patient: Velma Jackson *

Appointment Date: May 26, 2025

Amount: \$10224.54

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/v01rdN4g> or
scan the QR code and enter code below to submit

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