INS CLAIM

1255 Hwy 46, Shelby, AL 35143, USA

Phone: -

FAX COVER SHEET

FAX NUMBER
(972)-532-9272

SUBMISSION CODE
717506

FAX RETURN NUMBER
(551)-261-4566

PATIENT REFERENCE IDENTIFIER
resp-id-oVkrjXmgyMcp

PROVIDER NAME
Daniel King

DATE OF REQUEST
Feb 20, 2026

CLAIM NUMBER
252960122R

Medical Record Request

MIDSTATE Claim Solutions

INS CLAIM

1255 Hwy 46, Shelby, AL 35143, USA
smailafiia@osdb.io
samtestsite.com

Date: Feb 19, 2026 Time: 07:43 pm Response identifier: resp-id-oVkrjXmgyMcp

Attn: **Daniel King**
Address: PO BOX 217, LANDRUM, SC 29356 Phone: -
Fax: (972)-532-9272

Re: **Sandra Papke**

REQUESTING MEDICAL RECORDS FROM YOU

Release of Information

URGENT

Appointment Details

Patient: Sandra Papke *

Appointment Date: Oct 30, 2025

Amount: $7.58

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 1233455666 or email to smailafiia@osdb.io