



HILLTOP MEDICAL CLINIC

Suite 140 15321 – 16th Avenue, Surrey, B.C. V4A 1R6
Phone: 604-531-5575 Fax: 604-535-0126

Dr. J. Nolte	Dr. F. O'Brien	Dr. J. G. Scott	Dr. R. Balakrishna	Dr. E. Baasch	Dr. P. Mukheibir
Dr. M. Lebl	Dr. B. Tyrell	Dr. M. Cooner	Dr. A. Lamprecht	Dr. J. O'Brien	Dr. C. Niemand
Dr. I. Amankwe		Dr. A. Benitez-Gomez		Dr. A. Bredenkamp	

Payment Form (Records)

Dear Patient,

We have received your request for your chart to be transferred to another doctor. This service is not covered by the medical services plan, so to recover our costs there is a fee. We charge all fees in accordance with the BCMA recommended fee schedule.

Payment can be made in the office at the time you pick up your records, or alternatively you can complete the form below and fax or email to our clinic. We will then send directly to your new doctor or hold for you to pick up, please indicate below.

Thank you for your co-operation

Sincerely,
Hilltop Medical Clinic

Visa/MasterCard Information

Cardholder's Name (please print):

Patient's Name (please print):

Credit Card Number:

Expiry Date (MONTH/YEAR):



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Invoice Total:

\$ _____

Cardholder's Signature:

Records to be (Circle one)

HELD AT THE OFFICE/SENT TO MY NEW DOCTO