

(DETACH AND RETAIN THIS BEFORE DEPOSITING CHECK)

OX-7 5121
Just say cash is ready to
be picked up in Ins. Branch
(use no name)
GOVERNMENT EMPLOYEES HEALTH ASSOCIATION
REMITTANCE STATEMENT

In payment of the following under policy number 139 :

Claim Other (explain): _____
Premium Refund _____

KIND OF POLICY:

Mutual Hospitalization Specified Diseases Remarks: In order to consider blood
United Benefit Life Ins. Income Replacement test at hospital and Dr. Didner's bill,
WAEPA Life Insurance Emergency Travel Plan we will need itemized bills.
Travel-Matic Insurance CONTRACT HOSP _____
(OTHER)

Hospitalized _____ (DATE) thru _____ (DATE)

Hospital Room _____ days @ \$ _____ (actual \$ _____) \$ _____

Hospital Extras (actual \$ _____) \$ _____

Doctor's Fee (actual \$ _____) \$ _____

TOTAL \$ _____

THIS COPY SHOULD BE RETAINED FOR INCOME TAX PURPOSES

*Received. Marok Goodson
18 April 67*

DECLASSIFIED AND RELEASED BY
CENTRAL INTELLIGENCE AGENCY
SOURCE METHOD EXEMPTION 3B2B
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2006