



KITA KONGSI SDN BHD, C/O WEWORK
LEVEL 18, EQUATORIAL PLAZA, JALAN
SULTAN ISMAIL, 50250 KUALA LUMPUR
W.P. KUALA LUMPUR MALAYSIA.

+6011-1303 3131 | info@wekongsi.com

SHARING REPORT DEC 2023

Period : 7th Nov 2023 to 6th Dec 2023

Total Members	Active Members <i>(Pass 90 days waiting period)</i>	Total Approved Cases	Total Medical Cost
1447	813	1	RM8,484.10

Total Medical Cost	RM8,484.10
Last Month Extra Shared	RM3.27
Last Month Unsettlement Balance	RM0.00
Active Members <i>(Pass 90 days waiting period)</i>	813
Each Member Share (Before rounding)	RM10.4315
Each Member Share (After rounding)	RM10.44
Total Share	RM8,487.72
Extra bring to Next Month	RM6.89
Unsettlement Cost to Carry Forward	RM0.00

Case 1

Member Name : MUHAMMxxxxxxxxxxxxx
Member NRIC : 1606xxxxxxxxx
Approved Amount : 8,484.10
Hospital Name : Hospital Islam Az-Zahrah
Diagnosis : Exudative Tonsillitis with Dehydration
Admission Date : 18/10/2023
Discharge Date : 22/10/2023



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Supporting Documents



27/10/2023

Hospital Islam Az-Zahrah

TEL : +60 3 8921 2525 ext 104

FAX NO : +60 03 8921 2569

ATTN : BILLING DEPT

C.C : NIK ROSENORLEYANEY BINTI NIK IBRAHIM

Dear Sir/Madam/Ms,

RE: FINAL GUARANTEE LETTER (FGL) – INPATIENT TREATMENT(AMENDED)

PATIENT'S NAME:	MUHAM [REDACTED]	DATE OF ADMISSION:	18/10/2023
PATIENT'S ID:	1606 [REDACTED]	ENTITLEMENT OF R&B:	RM 150.00 per day
INSURED NAME:	[REDACTED]	CLAIM REF NO:	76314081
POLICY NO:	IP101109-00	TREATING DOCTOR:	NIK ROSENORLEYANEY BINTI NIK IBRAHIM

CONFIRMATION OF GUARANTEE

This is to confirm that we are providing the MEDICAL EXPENSES GUARANTEE for the above-mentioned patient to your Hospital / Medical Centre up to RM 8484.10 on behalf of KITA KONGSI SDN. BHD.(1492373D). This FGL will supersede all other types of guarantee letter previously issued for this admission.

ITEMS	GROSS INCURRED AMOUNT (RM)	EXPENSES PAYABLE (RM)	EXPENSES NOT PAYABLE (RM)
[REDACTED]			