

## SUPPLEMENTARY SHEET / HELAIAN TAMBAHAN

If you answered "yes" to questions 6, 7, 8 and 9 in the proposal form and the space is insufficient, please provide the full details, documentation, your signature below and enclose it with the Proposal Form.

Jika anda menjawab "ya" kepada soalan 6, 7 dan 8 dan kekurangan ruang di dalam borang cadangan, sila berikan butir-butir yang lengkap, dokumentasi, tandatangan di bawah dan lampirkannya bersama borang cadangan.

Question no / No soalan: \_\_\_\_\_ Name / Nama: \_\_\_\_\_

Type of medical condition / illness / disability / Jenis keadaan perubatan / penyakit / hilang upaya: \_\_\_\_\_

Date of onset / Tarikh bermula: \_\_\_\_\_ Date of treatment / Tarikh rawatan: \_\_\_\_\_

Last date of treatment / Tarikh rawatan terakhir: \_\_\_\_\_

Current condition / Keadaan semasa: \_\_\_\_\_

Medication(s) / Ubat-ubatan: \_\_\_\_\_

Name and address of the treating doctor and hospital / Nama dan alamat doktor dan hospital yang merawat anda: \_\_\_\_\_

Please enclose your medical, blood test, histopathology reports and any other reports for the investigations performed.

Sila sertakan laporan perubatan, ujian darah, histopathologi anda dan apa-apa laporan lain berkenaan penyiasatan yang telah dilakukan.

Question no / No soalan: \_\_\_\_\_ Name / Nama: \_\_\_\_\_

Type of medical condition / illness / disability / Jenis keadaan perubatan / penyakit / hilang upaya: \_\_\_\_\_

Date of onset / Tarikh bermula: \_\_\_\_\_ Date of treatment / Tarikh rawatan: \_\_\_\_\_

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Medication(s) / Ubat-ubatan: \_\_\_\_\_

Name and address of the treating doctor and hospital / Nama dan alamat doktor dan hospital yang merawat anda: \_\_\_\_\_

Please enclose your medical, blood test, histopathology reports and any other reports for the investigations performed.

Sila sertakan laporan perubatan, ujian darah, histopathologi anda dan apa-apa laporan lain berkenaan penyiasatan yang telah dilakukan.

\_\_\_\_\_  
Date of Signature / Tarikh Tandatangan

\_\_\_\_\_  
Signature of Proposer / Tandatangan Pencadang /  
Authorised Signature and Company Stamp / Tandatangan  
Sah dan Chop Syarikat