

KLINIK FAMILI DENAI ALAM  
NO.29G, JALAN ELEKTRON U16/100,  
SEKSYEN U16, DENAI ALAM,  
40160 SHAH ALAM, SELANGOR.  
TEL: 03-7734 5373

## MEDICAL CERTIFICATE

MC70586

Dengan ini diperakui bahawa

This is to certify that **MOHD HAFFIZ BIN ISMAIL**

931109015747

tidak berupaya melakukan

kerja biasa selama \_\_\_\_\_ hari (dari \_\_\_\_\_ hingga \_\_\_\_\_ )

will be unfit on duty for 1 day(s) (From 23/Apr/2021 To 23/Apr/2021 )

akan menjalankan peperiksaan pada \_\_\_\_\_

akan bermula kerja pada \_\_\_\_\_

He / She is to be re-examined on \_\_\_\_\_

He / She is able to resume duties from \_\_\_\_\_

Aduan / Complaints \_\_\_\_\_

Diagnosis **MIGRAINE**

Majikan / Employer \_\_\_\_\_

Butiran Tambahan / Remak \_\_\_\_\_

DR. ZAINAL ABIDIN B. AHMAD  
(MD UKM : MMC 39143)  
KLINIK FAMILI DENAI ALAM  
No. 29G, Jln Elektron U16/N  
40160 Denai Alam, Shah Alam.  
Tel/Fax : 03 7734 5373

Tarikh/Date **23/Apr/2021**

**DR ZAINAL ABIDIN BIN AHMAD**  
(MMC:39143)



# KLINIK FAMILI DENAI ALAM

Company No. 2310050760711

## RECEIPT

Received from :  
MOHD HAFFIZ BIN ISMAIL

Receipts No: 5769395

Date: 23/4/2021

Payment Method: Cash

Amount in English: Sixty-Nine Ringgit Only

RM69.00

Patient / Customer : MOHD HAFFIZ BIN ISMAIL

### Payment Particulars

Invoice#/Acct.#:	Inv. Date/Acct Name	Original Amount	Allocation Amount
4-1010	Medical Service - Cash		RM69.00

KLINIK FAMILI DENAI ALAM  
NO. 29-G, JALAN ELEKTRON U16/N  
SEKSYEN U16, DENAI ALAM,  
40160 SHAH ALAM, SELANGOR.  
TEL/FAX-03-77345373

On behalf of Klinik Famili Denai Alam

ADDRESS : No. 29G Jalan Elekron NU 16/N, Seksyen U16, Denai Alam, 40160 Shah Alam Selangor  
Tel : Fax :

Generated by Finance Klinik Famili De  
Al: