

FEE SCHEDULE



		Pages	Extra
REQUEST TYPE	Fee	included	pages

REQUESTITE	гее	included	pages
Patient requests includes the following:			
Copy of record (up to 20			
pages) + 3.90 HST	\$33.90	20	\$.25/pg
CD Copy of DI Images =			
1.30 HST	\$11.30		
CD Copy of DI Images	\$33.90		
with reports + 3.90 HST			
Proof of birth + 3.90 HST	\$33.90		
Time of birth + 3.90 HST	\$33.90		
Dates of attendance +	\$33.90		
3.90 HST			
Proof of death + 3.90 HST	\$33.90		
Blood type + 3.90 HST	\$33.90		