

# **SAMPLE – LOG TEMPLATE**

*To be printed on Company's Letterhead*

Date: \_\_\_\_\_

To: KK Women's and Children's Hospital  
100 Bukit Timah Road  
Singapore 229899

## **LETTER OF GUARANTEE (LOG) FOR HOSPITALISATION BILL**

Name of Patient : \_\_\_\_\_  
NRIC / Passport No.: \_\_\_\_\_  
Admission Date : \_\_\_\_\_  
Class of Entitlement: \_\_\_\_\_

We hereby undertake to bear the hospital charges, fees, costs and expenses in connection with the hospitalisation and treatment of the patient up to S\$5,000.00 (or \$10,000.00 where applicable). We acknowledge that payment by Medisave\* will be deducted first and undertake to reimburse such medical expenses, contractually obligated, back to the same Medisave account.

We also undertake to pay to KK Women's and Children's Hospital (the Hospital) upon demand by the Hospital or within 30 days of receiving the invoice, and in accordance with such terms of payment as may be prescribed by the Hospital, the hospitalisation charges incurred by the patient.

This undertaking is to be a continuing guarantee and our liability under it shall not be affected by your giving time or any indulgence to the above named person.

The Hospital reserves the right to reject this LOG as it deems fit. Full settlement of the hospital bill will have to be made by the patient if this LOG is rejected.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Company Stamp

\_\_\_\_\_  
Name

\_\_\_\_\_  
Designation

\_\_\_\_\_  
NRIC

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Email Address

\* applicable only for Singapore Citizens and Permanent Residents