



To : **MSP Department  
FOMEMA Sdn. Bhd.**

Employer Name :  
Address :

Tel. No. : Date :

**Dear Sir / Mdm,**

**REQUEST TO OPEN THE TRANSMISSION TO TRANSMIT THE ONLINE RESULT**

As subject mention, I'm ....., the employer of the below-mentioned worker/s:

- 1. ....
- 2. ....
- 3. ....

who underwent a medical examination at the .....(clinic name) on .....(date) would like to request to open the transaction of mention foreign worker/s medical examination for the doctor or laboratory to transmit and the doctor to certify the result in the system.

Authorised signature

.....

Name : .....

NRIC : .....

Employer's Stamp (For Company only):

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