

# Electronic Transaction Attachment Scanning Sheet

You must complete and attach this sheet to each document to be scanned.  
Enter the requested information below to have the scanned document properly filed in the eMedNY Image Repository.

<b>01</b>	<b>2</b>	PA NUMBER <input type="text"/>	ATTACHMENT NUMBER <input type="text"/>	<b>T</b>
PROVIDER NUMBER <input type="text"/>	CLIENT ID <input type="text"/>			

Date of Request:

PA Review Office Code:

Forward this form and the attached document to Data Management at:

eMedNY  
P.O. BOX 4600  
Rensselaer, NY 12144  
or Fax to: 1-800-210-7442

**Priority / Expedited Shipping:**

eMedNY  
327 Columbia Turnpike  
ATTN: Box 4600  
Rensselaer, NY 12144

DO NOT WRITE BELOW THIS LINE. FOR INTERNAL USE ONLY

## ATTACHMENT STICKER:

← ↑ ALIGN TOP AND LEFT EDGES OF STICKER ATTACHMENT NUMBER
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**OVERSIZED**

**TYPE OF ATTACHMENT:**

- X-Ray/Film
- Oversized Paper
- Mold
- Other