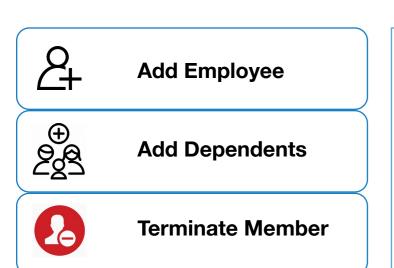
Manually Enter Member Movement

Please choose Member Action below:











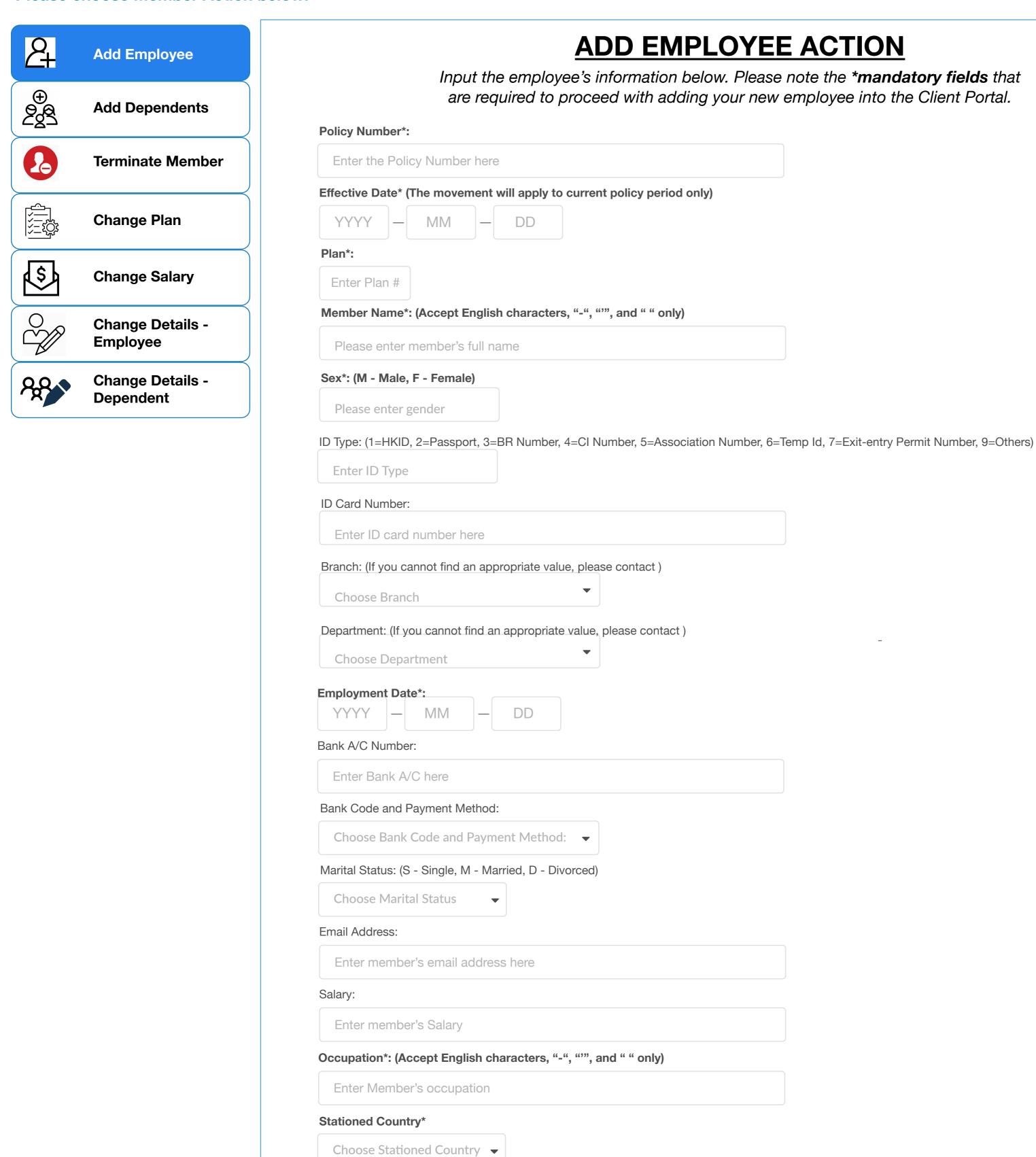
Change Details - Dependent

PLEASE CHOOSE MEMBER ACTION OPTION

Home Policies Benefits Members Member Actions Billings Claims Shortfalls More ✓

Manually Enter Member Movement

Please choose Member Action below:



Back

Nationality*:

Staff Number:

Alias:

Choose Nationality

Enter member's staff number here

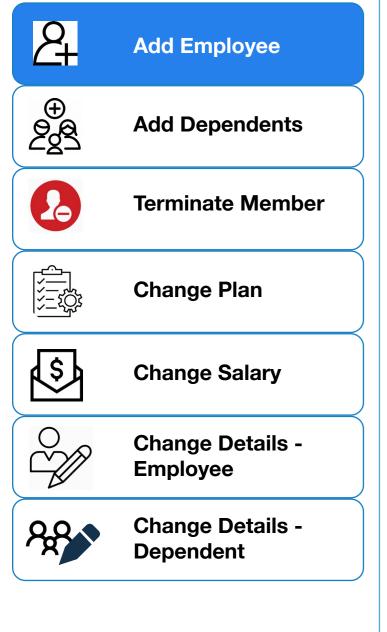
Enter member's Alias here

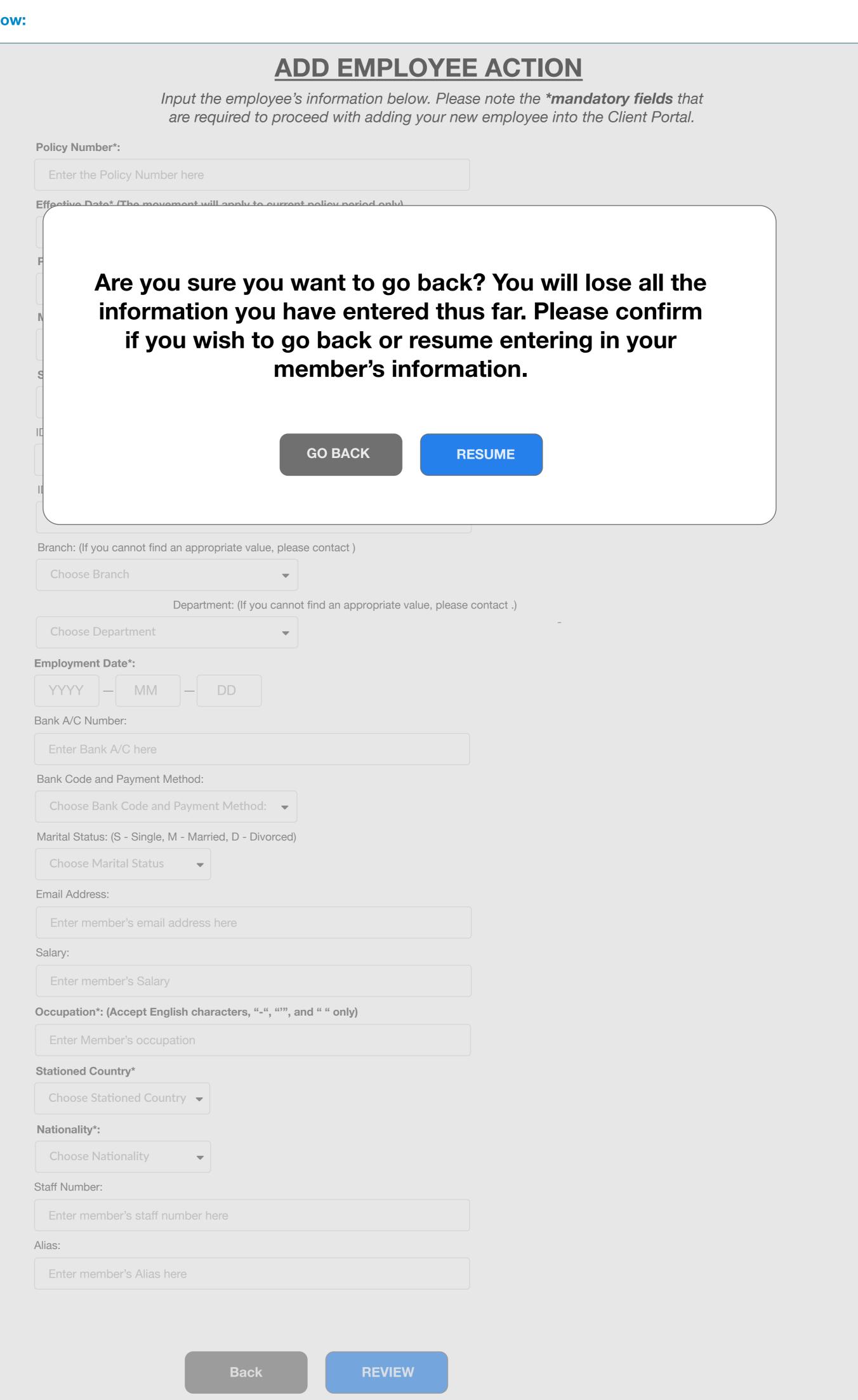
REVIEW

Home Policies Benefits Members Member Actions Billings Claims Shortfalls More ✓

Manually Enter Member Movement

Please choose Member Action below:

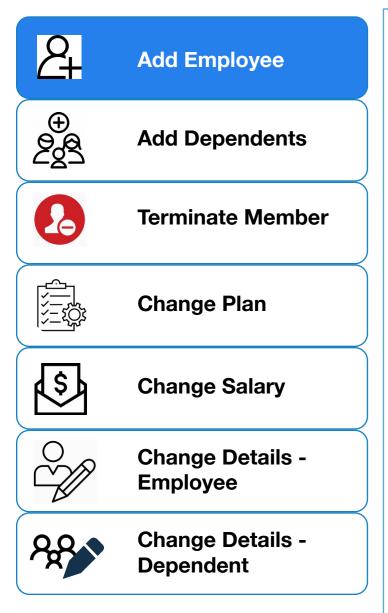




Home Policies Benefits Members Member Actions Billings Claims Shortfalls More ✓

Manually Enter Member Movement

Please choose Member Action below:



REVIEW EMPLOYEE INFORMATION

Please review the information you have entered. If everything is correct please click CONFIRM, if you need to edit the details please click BACK.

Policy Number: 198213

Effective Date: 2021-02-20

Plan: 02

Member Name: James Chow

Sex: Male

ID Type: Blank ID Card: Blank Branch: Blank

Department: Blank

Employment Date: 2020-12-23

Bank A/C Number: Blank

Bank Code and Payment Method:

Maritial Status: Blank

Email Address: JChow@cccc.com

Salary: Blank

Occupation: Head of Sales

Stationed Country: Hong Kong

Nationality: USA

Staff Number: Blank

Alias: Blank

EDIT

CONFIRM