



**KAISER PERMANENTE®**

**Kaiser Foundation Health Plan, Inc.  
Southern California Region**

Prefix

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Medical Record No.

0022177612

Date of Birth

01 11

Name: First M Last

KAI J TAYLOR

Gender

M

For information about your Health Plan benefits:

**1-800-464-4000/TTY 1-800-777-1370**

[kp.org](http://kp.org)