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HEALTHCARE, USA  
1234 MAIN STREET  
ANYTOWN, USA 12345-0000

ADDRESS SERVICE REQUESTED

ANY QUESTIONS PLEASE CALL 999-555-1212  
**TAX ID:** 123456789  
PATIENT: PATIENT, STEVE A.

IF PAYING BY MASTERCARD, DISCOVER, VISA OR AMERICAN EXPRESS, FILL OUT BELOW.

CHECK CARD USING FOR PAYMENT

MASTERCARD   
  DISCOVER   
  VISA   
  AMERICAN EXPRESS

CARD NUMBER	AMOUNT
SIGNATURE	EXP. DATE
STATEMENT DATE 00/00/0000	PAY THIS AMOUNT 107.60
ACCT. # 03128482	

PAGE NO. 1

SHOW AMOUNT PAID HERE \$

500005A

ADDRESSEE:

REMIT TO:

JOHN Q. PATIENT  
202 MAIN STREET  
ANYTOWN, USA 12345-0000

HEALTHCARE, USA  
1234 MAIN STREET  
ANYTOWN, USA 12345-0000

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Please check box if your address is incorrect or insurance information has changed, please indicate change(s) on reverse side.

**STATEMENT**

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR

DATE	PATIENT	CPT	DESCRIPTION OF SERVICE	CHARGE	RECEIPT	ADJUSTMENT	LINE ITEM BALANCE
00/00/00	STEVE	99212	EST. PATIENT LEVEL 2	50.00	0.00	0.00	50.00
00/00/00	STEVE	99213	EST. PATIENT LEVEL 3	7.60	0.00	0.00	7.60
00/00/00	STEVE	91104	OFFICE VISIT FOLLOW-UP	50.00	0.00	0.00	50.00
ACCOUNT NO.		CURRENT	30 DAYS	60 DAYS	90 DAYS	120 DAYS	TOTAL ACCOUNT BALANCE
031284 82		107.60	0.00	0.00	0.00	0.00	\$107.60

MESSAGE:  
WE WANT TO ANNOUNCE THE APPOINTMENT OF WALTER A. TURNER, M.D. TO OUR STAFF.  
HE WILL BE ACCEPTING NEW PATIENTS IMMEDIATELY.

PLEASE PAY THIS AMOUNT **◆◆◆◆** \$107.60

