



Choose an item.

September 12, 2019

Dear _____,

We are refunding your payment for the following patient due to the reason indicated below.

Patient Name:

Account Number:

Amount of Refund: \$

Reason for Refund:

Choose an item.

Dates of Service:

Comments:

Please call our office at the number listed at the top of the page if you have any questions regarding this refund.