

1-800-266-0613 Fax: 1-800-266-5044

6990	10/30/2023	6750365-03-01
ACCOUNT NO:	INVOICE DATE:	INVOICE NO:

Federal Tax I.D. No. 44-0657294 Professional Photocopier ID #: 551

Terms: Cash Only

Bill To: Nicole Jones

Manning & Kass, Ellrod, Ramirez, Trester LLP

One California Street, Suite 900 San Francisco, CA 94111 Ship To: Nicole Jones

Manning & Kass, Ellrod, Ramirez, Trester LLP

One California Street, Suite 900, San Francisco, CA 94111

PERTAINING TO: Diva Abdul Mansour

CASE TITLE: Diva Abdul-Mansour / City of Los Angel

CASE NUMBER: 21STCV34919

FIRMS NUMBER: 7858-70039

INSURED:

DATE OF LOSS: 9/25/2020

CLAIM/ POLICY#: /

DESCRIPTION OF SERVICES RENDERED	QUANTITY	UNIT PRICE	AMOUNT
ProHealth Advanced Imaging/Radiology			
Los Angeles,CA			
Fee Advance Charge - per payment	1.00	5.00	5.00
Notice to Consumer			5.00
Shipping and Handling	1.00	11.50	11.50
Subpoena Preparation			12.50
Witness Fee			15.00
CD Duplication	1.00	5.00	5.00
Basic Fee - Subpoena			37.00
Trip Charge	2.00	15.00	30.00
X-Ray Report			24.00
X-Ray Fee - Custodial			240.00
Regarding: Diva Abdul Mansour at ProHealth Advanced Imaging/Radiology Lo	os Angeles	1	
		SUB-TOTAL	385.00
Please note, films were previously shipped. kpf		SALES TAX	24.62
Thank you for choosing ABI Document Support Services! For billing inquiries, please contact our Client Service Department at 1-800-266-0613.		TOTAL DUE	409.62

FOR PROPER CREDIT, PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT.

Remittance Copy

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TOTAL DUE:

\$ 409.62

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