Test Clinic 3835 SE Center St. Portland, OR 97202

Phone: (503) 234-1120, Fax: (503) 234-1119

Krusty Klown 123 Main Street Portland, OR 97202

INVOICE

PATIENT DEMOGRAPHICS	GUARANTOR AND INSURANCE INFORMATION
Klown, Krusty Date of Birth: 05/13/2010	Moda; ID: 1231; Group: 12412; Klown, Krusty
	Crazy; ID: 20223; Group: 235023; Klown, Krusty
	ODS; ID: 2302; Group: 250352; Klown, Krusty

DATE OF SERVICE	DATE OF INVOICE
August 16th, 2013	February 14th, 2014

DIAGNOSES	PROVIDER
Secondary diabetes mellitus not stated as uncontrolled, or unspecified [249.00]	Michael Chen, MD

Total Charges: \$1,278.79
Total Payments: \$0.00

Remaining Balance: \$1,278.79

Please send a check payable to Test Clinic and mail it to: 3835 SE Center St. Portland, OR 97202