

## Online Claim Submission

Code: RKU  
Employer: Roku, Inc.  
EmpID: 607649821  
EmpName: Mendoza, Donna  
Submitted: January 23, 2023  
Batch: 29991985  
Claim Total: \$710.00  
Attachments: 6

Line	Service Date(s)	Type	Cost	Notes
1	10/1/2022	MASSAGE	\$600.00	Provider: Verde Touch. For whom: Donna Mendoza. massage
2	8/23/2022	GENERAL	\$80.00	Provider: Sutter health. For whom: Donna Mendoza. prenatal lab copay
3	10/12/2022	GENERAL	\$20.00	Provider: RAMBLC Pediatric. For whom: Elijah mendoza. sick visit copay for Elijah mendoza
4	10/12/2022	RX	\$10.00	Provider: CVS Pharmacy. For whom: Elijah mendoza. Rx Elijah mendoza antibiotics for ear infection



1800 SARATOGA AVE  
SAN JOSE, CA 95129  
FS: 408.253.3352

REG#14 TRN#6779 CSHR#2246845 STR#9498

Helped by: ANDREA

ExtraCare Card #: \*\*\*\*\*7347

F 1 RX #: \*\*\*\*8620000 10.00N

TOTAL 10.00  
CHARGE 10.00

\*\*\*\*\*6829 CH  
VISA CREDIT \*\*\*\*\*6829  
APPROVED# 65506D REF# 147796  
TRAN TYPE: SALE AID: A0000000031010  
TC: 3B8B90E64596A1D0 TERMINAL# 84280100  
NO SIGNATURE REQUIRED CVM: 1E0300  
TVR(95): 8080008000 TSI(9B): 6800

CHANGE .00



3509 4982 2856 7791 47  
State law may prohibit the return  
of prescriptions. Please consult  
your pharmacist.  
Returns with receipt, subject to  
CVS Return Policy, thru 12/11/2022  
Refund amount is based on price  
after all coupons and discounts.

OCTOBER 12, 2022 6:35 PM



F=FLEXIBLE SPENDING ACCT SUMMARY (FSA)  
Prescription Eligible Total 10.00

\*\*\*\*\*  
FSA summary above includes items  
(and tax) that may be eligible for plan  
reimbursement. Restrictions may apply.  
\*\*\*\*\*

THANK YOU. SHOP 24 HOURS AT CVS.COM  
ExtraCare Card balances as of 09/10  
Year to Date Savings 83.78

Fill 10 prescriptions Get \$5EB  
Pharmacy and Health ExtraBucks  
Quantity Toward this Reward 1  
Quantity Needed to Earn Reward 9

Pharmacy & Health Rewards Enrollment Status  
Active Members 1

\*\*\*\*\*

Access all coupons & rewards, and  
track your 2% earnings in the CVS



**RAMBLC Pediatric  
Medical Group, Inc.**

14880 LOS GATOS BOULEVARD  
Los Gatos, CA  
95032

October 12, 2022  
3:45 PM

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Receipt: NeAl  
Authorization: 83001D

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VISA CREDIT  
AID A0 00 00 00 03 10 10

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Pitts-Davis	\$20.00
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<b>Total</b>	<b>\$20.00</b>
Visa 6829 (Chip)	\$20.00
Ronald A Mendoza	



Patient Name: **Donna Mendoza**  
Guarantor Name: Donna Mendoza  
Guarantor Account #: 18728196  
Bill Date: 10/03/22

Page 1 of 2

**PHYSICIAN SERVICES BILL SUMMARY**

Previous Balance	\$ 80.00
New Charges	0.00
Payments/Adjustments	0.00
<b>New Balance</b>	<b>\$ 80.00</b>

**Payment Due**

Your Insurance Has Been Billed.  
Your Responsibility To Pay Is

**\$ 80.00**

Please Pay In Full By  
**10/31/22**

Thank you for choosing Palo Alto Medical Foundation. The amount due represents your responsibility.

**Insurance Information On File**

Primary: Cigna  
Secondary: No Secondary Insurance



**Pay Online (Recommended)**

myhealthonline.sutterhealth.org or scan



**Set Up Automated Payment Plan**

myhealthonline.sutterhealth.org



**Pay By Phone (24/7)**

Call (877) 252-1777.



**Pay By Mail**

Send your **check(s) only** using the coupon below.



**Billing Help**

Call (877) 252-1777, Billing Representatives are available 7:00am - 5:00pm, Monday through Friday. When asked, please provide your account number, which is **18728196**.



**Financial Assistance**

Call (877) 252-1777. Please tell us if you cannot pay your bill in full and let us help you. Monthly payment plans and other financial assistance programs are available for patients that meet certain financial criteria. To learn more, visit [www.sutterhealth.org/for-patients/financial-assistance](http://www.sutterhealth.org/for-patients/financial-assistance).



Please See Reverse Side for Account Detail.



If your insurance or address has changed,  
please update online or call (877) 252-1777.

2331 1 AB 0.488

  
DONNA MENDOZA  
1916 VILLARITA DR  
CAMPBELL, CA 95008-1524

2331

Guarantor Account #	18728196
Due Date	10/31/22
<b>Payment Due</b>	<b>\$ 80.00</b>
Amount I am paying	\$ <input type="text"/>



Pay online at [myhealthonline.sutterhealth.org](http://myhealthonline.sutterhealth.org) or by phone at (877) 252-1777. We accept Visa, MasterCard, Discover, and American Express.

**Make Checks Payable to:**  
**Palo Alto Medical Foundation**  
PO Box 278420  
Sacramento, CA 95827-8420



Patient Name: **Donna Mendoza**  
Guarantor Name: Donna Mendoza  
Guarantor Account #: 18728196  
Bill Date: 10/03/22

## ① Laboratory/Pathology

**Date of Service** 08/24/22 **Provider:** Edmund W Tai MD, Laboratory Medicine

Charges	\$ 1,716.00	<u>Insurance Remarks</u>
Patient Payments	0.00	A
Insurance Payments/Adjustments	- 1,656.00	
Amount You Will Need To Pay	<b>\$ 60.00</b>	

## ② Procedure/Monitoring

**Date of Service** 08/30/22 **Provider:** Edmund W Tai MD, Laboratory Medicine

Charges	\$ 37.00	<u>Insurance Remarks</u>
Patient Payments	0.00	A
Insurance Payments/Adjustments	- 17.00	
Amount You Will Need To Pay	<b>\$ 20.00</b>	

**Payment Due \$ 80.00 Please Pay In Full By 10/31/22**

Insurance Remarks  
A-Co-payment Amount

## My Health Online

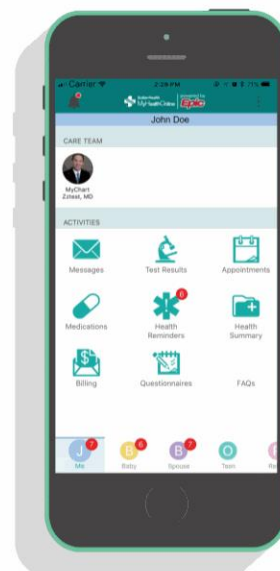
**Paying your bill is easy with Sutter Health's My Health Online. Sign up today!**

Log in or enroll at [myhealthonline.sutterhealth.org](https://myhealthonline.sutterhealth.org)

With My Health Online, you can also:

- View the details of your bill
- Book appointments
- Email your doctor
- View your health records and lab results - and more!

or scan



• Pay as Guest: <https://myhealthonline.sutterhealth.org/mho/billing/guestpay>

**[Verde Touch]**

# INVOICE

210 E Main St #6107  
Los Gatos, CA 95030  
650-933-6866

INVOICE # 623  
January 23, 2023

**TO:**

Donna Mendoza  
1916 Villarita Dr  
Campbell, CA 95008  
Phone: 408-313-3230

**COMMENTS OR SPECIAL INSTRUCTIONS:**

MASSAGE THERAPIST: THERESA & DAVID

DATE	DESCRIPTION	TIP	TOTAL
10/17/2022	90 min full body massage \$200		200
11/04/2022	90 min full body massage \$200		200
12/03/2022	90 min full body massage \$200		200
SUBTOTAL			600
PAID VIA CC 6605			600
BALANCE DUE			0

**THANK YOU FOR YOUR BUSINESS!**



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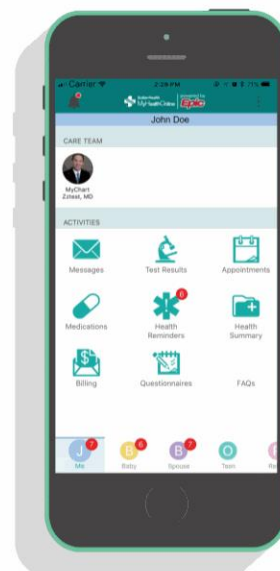
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