

MAKE CHECKS PAYABLE TO:

123 Hospital Address St,
Richardson TX, 77384

2784-q284

RETURN SERVICE REQUESTED

BILLING QUESTIONS, CALL:



4660579
614

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

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

CHECK CARD USING FOR PAYMENT

MasterCard

☐

MASTERCARD

DISCOVER

DISCOVER

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DISCOVER

VISA

VISA

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VISA

AMERICAN EXPRESS

AMEX

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AMEX

CARD NUMBER

CVV CODE

SIGNATURE

EXP DATE

STATEMENT DATE

PAY THIS AMOUNT
\$29312.24

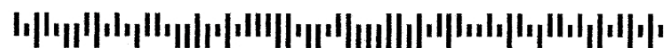
ACCT.#

PAGE: 1 OF 1

SHOW AMOUNT
PAID HERE
\$0.00

653585(610)

ADDRESS:



5423 Bill Address Road,
Richardson TX, 77384

REMIT TO:



123 Hospital Address St,
Richardson TX, 77384



View your statements and pay your bill online at www.dentalBillPay.com

Online Enrollment Id:64277-9zuu

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

STATEMENT

9294-LxqM*xEoZRC0bR1vF

						BALANCE FORWARD: \$0.00	
DATE	PATIENT		CODE	DESCRIPTION			AMOUNT
05/16/23	John Doe		78102	Bone marrow imaging ltd			\$678.32
05/16/23	John Doe		78258	Esophageal motility study			\$390.99
05/16/23	John Doe		50551	Kidney endoscopy			\$6502.12
05/16/23	John Doe		30160	Removal of nose			\$5212.85
05/16/23	John Doe		24635	Treat elbow fracture			\$6302.21
05/16/23	John Doe		21240	Reconstruction of jaw joint			\$6000.21
05/16/23	John Doe		21088	Prepare face/oral prosthesis			\$3013.12
05/16/23	John Doe		21421	Treat mouth roof fracture			\$1212.42
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