Pay To: Byung S Lim, MD PC, Po Box 606, Massena, NY, 13662-0606, (315) 842-3211

☐ Card ☐ Cash ☐ Check Date : IF PAYING BY CREDIT CARD, FILL OUT BELOW Card Number Exp. Date : MM / YY Amount Paid 07/13/2019 ACCT 2179 Authorized Signature

Patient Name: BRITTANY BONNER

Responsible Party Name	Practice Address
BRITTANY BONNER,	Byung S Lim, MD PC,
12 HULL STREET,	14 Hospital Drive,
COLTON NY 13625.	Massena, NY,13662-1019,
	(315) 842-3211.

☐ Please check the box if your address is incorrect or insurance info has changed

-----Please detach and send above with payment------

Dear Patient,

The balance mentioned in the statement is the remaining amount after your insurance(s) have processed and it's your responsibility.

Statement											
Date Of Service	Provider	Location	Procedure	Charge	Primary Insurance Payment	Secondary Insurance Payment	Patient Payment	Open Balance	Remark		
03/26/2019	Byung Lim	Byung S Lim, Md Pc	99213	\$190.00	\$38.85	\$0.00	\$0.00	\$25.00			
03/27/2019	Byung Lim	Byung S Lim, Md Pc	99213	\$190.00	\$38.85	\$0.00	\$0.00	\$25.00			
03/28/2019	Byung Lim	Massena Memorial Hospital Op	19318	\$10000.00	\$1330.95	\$0.00	\$0.00	\$50.00			

Grand \$100.00 **Total**

*NOTE: Some or all of this payment may be applied to a closed visit that does not appear on this statement

Total Balance Due \$100.00

EXPLANATION OF BALANCES: Copay

ADDITIONAL REMARK:

Balance is due upon receipt. Please call (315) 842-3211 for billing inquiries and payment options.