



1000 Main St. Ossining, NY 10562

Joshua Jensen
1 Main St
Phoenix, AZ 85012

Reference # 123456

Statement Date

02/06/2019

Statement ID

987654

Due Date

UPON RECEIPT

Guarantor Name

Joshua Jensen

Amount Due \$46.00

Account Statement

This bill represents the charge for your visit to Open Door Family Medical Centers. If you would like to speak to a Customer Service Representative, please call (914) 200-3292.

Other Information

Please let us know if the address on this statement is incorrect or your insurance information has changed by calling (914) 200-3292.

Date	Service Description	Charges	Payments/ Adjustments	Balance
Account #: 291929 PATIENT: MARCIA JENSEN LOCATION: Sleepy Hollow Open Door				
CHARGES				
08/16/2017	PAST DUE - 99213 OFFICE VISIT. EST PT.. LEVEL 3	\$185.00		
	Total Charges	\$185.00		
	Adjustments		-\$139.00	
	Amount Due			\$46.00

Detach Lower Portion and Return with Payment

Additional Payment Options

Pay on-line with a check, debit/credit, and HSA/FSA card using the below Payment ID.

Pay Online odfmc.youraccountcenter.com

Payment ID 01-123456

Pay By Phone (914) 200-3292

Financial Assistance

You may qualify for financial assistance. Visit odfmc.youraccountcenter.com or contact (914) 200-3292 for details.

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Please make checks payable to
Open Door Family Medical Centers

Open Door Family Medical Centers

PO Box 780548

Philadelphia, PA 19178-0548