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## Payment History for file 139694743, BOYCE, JOSHUA

Date	06/17/16
Type	Charge
Creditor	LAKESHORE MEDICAL CLINIC, LLC
Amount	136.60
Account #	139694743
Date	11/17/16
Type	Charge
Creditor	WHEATON FRANCISCAN - FRANKLIN HOSP
Amount	25.00
Account #	21119945
Date	12/02/16
Type	Charge
Creditor	WHEATON FRANCISCAN - FRANKLIN HOSP
Amount	25.00
Account #	21119945
Date	01/04/17
Type	Charge
Creditor	WHEATON FRANCISCAN - FRANKLIN HOSP
Amount	25.00
Account #	21119945

<b>Date</b>	02/02/17
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	03/02/17
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	04/04/17
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	05/02/17
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	06/02/17
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	07/05/17
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	19.00
<b>Account #</b>	61286307
<b>Date</b>	07/05/17
<b>Type</b>	Charge

<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	6.00
<b>Account #</b>	61286305
<b>Date</b>	08/02/17
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	09/05/17
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	10/03/17
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	6.80
<b>Account #</b>	61286307
<b>Date</b>	10/03/17
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	18.20
<b>Account #</b>	61286306
<b>Date</b>	11/02/17
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	10.60
<b>Account #</b>	61286306
<b>Date</b>	11/02/17
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	14.40

<b>Account #</b>	61270228
<b>Date</b>	01/26/18
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	34.40
<b>Account #</b>	61270228
<b>Date</b>	02/02/18
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	25.00
<b>Account #</b>	61352702
<b>Date</b>	03/02/18
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	25.00
<b>Account #</b>	61352702
<b>Date</b>	04/03/18
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	25.00
<b>Account #</b>	61352702
<b>Date</b>	05/02/18
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	25.00
<b>Account #</b>	61352702
<b>Date</b>	06/04/18
<b>Type</b>	Charge
<b>Creditor</b>	MEDICAL COLLEGE OF WISCONSIN
<b>Amount</b>	25.00
<b>Account #</b>	61352702
<b>Date</b>	07/03/18

Type	Charge
Creditor	MEDICAL COLLEGE OF WISCONSIN
Amount	25.00
Account #	61352702
Date	08/02/18
Type	Charge
Creditor	MEDICAL COLLEGE OF WISCONSIN
Amount	25.00
Account #	61352702
Date	08/15/18
Type	Charge
Creditor	MEDICAL COLLEGE OF WISCONSIN
Amount	75.80
Account #	61352702
Date	09/04/18
Type	Charge
Creditor	WHEATON FRANCISCAN - FRANKLIN HOSP
Amount	25.00
Account #	21119945
Date	10/02/18
Type	Charge
Creditor	WHEATON FRANCISCAN - FRANKLIN HOSP
Amount	25.00
Account #	21119945
Date	11/02/18
Type	Charge
Creditor	WHEATON FRANCISCAN - FRANKLIN HOSP
Amount	25.00
Account #	21119945
Date	12/03/18
Type	Charge
Creditor	WHEATON FRANCISCAN - FRANKLIN HOSP

<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	01/03/19
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	02/04/19
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	03/04/19
<b>Type</b>	Charge
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	25.00
<b>Account #</b>	21119945
<b>Date</b>	03/07/19
<b>Type</b>	Check
<b>Creditor</b>	WHEATON FRANCISCAN - FRANKLIN HOSP
<b>Amount</b>	2,139.01
<b>Account #</b>	21119945

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This is an attempt to collect a debt from a debt collection agency, any information obtained will be used for that purpose.

**Americollect, Inc.**

1851 S Alverno Rd  
PO Box 1566  
Manitowoc, WI 54221-1566

**Lobby Hours**

Mon-Fri 8am-5pm

☎ Phone: 1-800-838-0100

✉ [info@americollectpay.com](mailto:info@americollectpay.com)

(If you are emailing our office, you are granting us express permission to use email to communicate with you.)



**BBB  
Rating:  
A**

as of 3/11/2019

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