

1 Mayo Surgical, LLC 600 Chastain Road, Suite 220 Kennesaw, GA 30144 2 866-411-2525 PHONE 800-865-8691 FAX						James Clement 345 So. Harvey Street, Florida Jacksonville, 35048 (904) 654-7415 Contact						3a PAT. CNTL# b.MED REC # 5 FEED TAX No.			6 STATEMENT COVERS PERIOD FROM THROUGH			4 TYPE OF BILL 7											
8 PATIENT NAME a Gordon Hollingsford b Gordon Hollingsford						8 PATIENT ADDRESS a 1242 Hearty Drive b Davisberg c AR d 58475 e																							
10 BIRTHDATE 07-26-1983 12-06-2015		11 SEX		12 Date		13 HR		14 TYPE		15 SRC		16 DHR		17 SAT		CONDITION CODES 18 19 20 21 22 23 24 25 26 27 28										29 A CDT STA TE		30	
31 OCCURRENCE CODE DATE		32 OCCURRENCE CODE DATE		33 OCCURRENCE CODE DATE		34 OCCURRENCE CODE DATE		35 OCCURRENCE CODE FROM THROUGH		36 OCCURRENCE CODE FROM THROUGH		37																	
Gordon Hollingsford 1242 Hearty Drive Arkansas Davisberg, 58475 Mob. No.(654) 854-7895 Office. No.(654) 852-1548						a b c d		VALUE CODES CODE AMOUNT				VALUE CODES CODE AMOUNT				VALUE CODES CODE AMONT													
42 REV. CD. 97300 12234 5 99212		43 DESCRIPTION Back Surgery Description Office Visit, Established, Problem Focused						44 HCPCS/R ATE/HIPPS CODE 97300 122345 99212		45 SERV. DATE 31-12-69 31-12-69 31-12-69		45 SERV. UNITS		47 TOTAL CHARGES 23,000.00 0.00 0.00		48 NON-COVERED CHARGES		49											
Page ____1____ of ____1____						CREATION DATE 12-06-15		TOTAL		23,000.00		00		0		00													
50 PAYER NAME				51 HEALTH PLAN ID		52 REL INFO		53 ASG. BEN		54 PRIOR PAYMENT		55 EST. AMOUNT DUE		56 NPL		57 OTHER PRV ID													
58 INSUREDS NAME				59 P. REL		60 INSUREDS UNIQUE ID		61 GROUP NAME		62 INSURANCE GROUP NO.																			
63 TREATMENT AUTHORIZATION CODES						64 DOCUMENT CONTROL NUMBER						65 EMPLOYER NAME																	
66 DX						68																							
69 ADMIT DX		70 PATIENT REASON DX		71 PPS CODE		72 ECI		73																					
7 4		PRINCIPAL PROCEDURE		a OTHER PROCEDURE		b OTHER PROCEDURE		75		76 ATTENDING		NPL		QUAL															
		CODE DATE		CODE DATE		CODE DATE				LAST Clement		FIRST James																	
7 4		OTHER PROCEDURE		a OTHER PROCEDURE		b OTHER PROCEDURE				77 OPERATING		NPL		QUAL															
		CODE DATE		CODE DATE		CODE DATE				LAST Clement		FIRST James																	
80 REMARKS		81 CC		a		b		c		d		78 OTHER		NPL		QUAL													
				a		b		c		d		LAST Clement		FIRST James															
				c		d				79 OTHER		NPL		QUAL															
				d						LAST Clement		FIRST James																	