



SOUTH METRO FIRE RESCUE FIRE PROTECTION
DISTRICT
PO BOX 1280
OAKS, PA 19456-1280
(844)378-2134
TAX ID: 84-0828892

Statement

DATE: 03/21/2024

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TAMARA ANDERSON
6730 TULLAMORE DR
COLORADO SPRINGS, CO 80923

▼ Payment Address ▼

SOUTH METRO FIRE RESCUE FIRE
PROTECTION DISTRICT
PO BOX 911585
DENVER, CO 80291-1585

Patient Name ANDERSON, TAMARA	Date Of Service 02/05/2024	ePCR # 24-SM-005300	Invoice # DSMET190242	AC ID # 143790
Origin Address ALT RESIDENCE I25 NB CASTLE ROCK, CO 80108		Destination Address SKY RIDGE MEDICAL CENTER 10101 RIDGEGATE PKWY LONE TREE, CO 80124		
Payer	Description	Action Date	Transaction	Amount
PATIENT PRIVATE PAY PATIENT	A0429RH-BLS EMERGENCY		Charges	\$1,374.02
PATIENT PRIVATE PAY PATIENT	A0425RH-MILEAGE (11.0 Units)		Charges	\$192.61
WE HAVE BEEN UNABLE TO OBTAIN YOUR AUTO LIABILITY INSURANCE. PLEASE FORWARD YOUR AUTO LIABILITY INSURANCE. IF YOU DO NOT HAVE INSURANCE, YOUR PAYMENT OF THIS BALANCE IS APPRECIATED. THANK YOU.			Total Charges	\$1,566.63
			Total Payments	
			Total Adjustments	
			Total Refunds Issued	
			Balance Due	
The balance due is an estimate based on the information provided and is subject to change.				