

Martin Family Chiropractic, Inc.  
831 Garden Avenue  
Myerstown PA 17067  
(616) 894-9455

# Patient Statement

Wednesday, August 17, 2011

RPS-476: R hip pain (Commercial Insurance )

Tammy Alspaugh  
Box 206  
Newmanstown, PA 17073

**Amount Due \$0.00**

Please enter Check # or Credit Card # / Exp. Date

Paid Amount \$\_\_\_\_.\_\_\_\_

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**Service Date - 01/10/11, Invoice #10577 (Pending Insurance)**

|                 |         |         |          |        |                      |               |
|-----------------|---------|---------|----------|--------|----------------------|---------------|
| Balance Forward | Charges | \$94.00 | Payments | \$0.00 | Balance              | \$0.00        |
|                 |         |         |          |        | <b>Total Balance</b> | <b>\$0.00</b> |

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# Patient Statement

Wednesday, August 17, 2011

RPS-1549: Hip Pain (Cash)

Janeen Beck  
921 Schubert Road  
Myerstown, PA 17067

**Amount Due \$29.00**

Please enter Check # or Credit Card # / Exp. Date

Paid Amount \$\_\_\_\_.\_\_\_\_

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**Service Date - 06/08/11, Invoice #15515**

|                 |         |         |          |        |         |                      |                |
|-----------------|---------|---------|----------|--------|---------|----------------------|----------------|
| Balance Forward | Charges | \$29.00 | Payments | \$0.00 | Balance | \$29.00              |                |
|                 |         |         |          |        |         | <b>Total Balance</b> | <b>\$29.00</b> |

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# Patient Statement

Wednesday, August 17, 2011

RPS-181: Low Back Pain (Commercial Insurance )

Evelyn Anson  
8521 Old 22  
Myerstown, PA 17505

**Amount Due \$15.00**

Please enter Check # or Credit Card # / Exp. Date

Paid Amount \$\_\_\_\_.\_\_\_\_

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**Service Date - 05/26/11, Invoice #15511**

|                 |         |         |          |         |         |                      |                |
|-----------------|---------|---------|----------|---------|---------|----------------------|----------------|
| Balance Forward | Charges | \$94.00 | Payments | \$79.00 | Balance | \$15.00              |                |
|                 |         |         |          |         |         | <b>Total Balance</b> | <b>\$15.00</b> |