Medical Practice Monthly Tracker

Period				Ref #				
Date	**Day**	**N/P**	**Visits**	**Charges**		**Payments**		**A/R Total**
	Mon							
	Tue							
	Wed							
	Thu							
	Fri							
	Sat							
Weekly Total								
	Mon							
	Tue							
	Wed							
	Thu							
	Fri							
	Sat							
Weekly Total								
	Mon							
	Tue							
	Wed							
	Thu							
	Fri							
	Sat							
Weekly Total								
	Mon							
	Tue							
	Wed							
	Thu							
	Fri							
	Sat							
Weekly Total								
	Mon							
	Tue							
	Wed							
	Thu							
	Fri							
	Sat							
Weekly Total								
Monthly Total								
		N/P	**Visits**	**Services**	**Services Total**	**Collections**	**Collections Total**	**A/R**
Year to Date								