Carolinas Vision Group OD PLLC 15640 Don Lochman Lane Suite C Charlotte, NC 28277-3177 (704) 943-5110

To: Haja Burhan

Statement of Charges and Payments

Fee Slip Number:

71873

Date Printed:

9/25/2018

Provider:

Amanda Rickher

Office Phone:

(704) 943-5110

License:

NC 2477

NPI Number:

1639623853

Patient: 185931

Haja Burhan

Chart #: **Home Phone: Next Appt:**

8426 Penton Place Harrisburg, NC 8075 Date of Birth:

Date of Service	Ord # S	KU# Qty	Description		СРТ	Diagnosis	Amount	Patient Balance
09/25/2018	0	1		ı Includes \$10.00 Copay)	92014	H52.13	142.00 (142.00)	
09/25/2018	0	1	Copay Refraction Billed Eyemed		92015	H52.13	10.00 75.00 (75.00)	
09/25/2018	0	1	Contact Lens Ev Billed Eyemed (1	aluation (ncludes \$40.00 Copay)	92310	H52.13	70.00 (70.00) 40.00	
09/25/2018	40284	2	Copay Air Optix Aqua Billed Eyemed		V2520	H52.13	102.00 (67.50)	
09/25/2018	40284	2	Air Optix Aqua Billed Eyemed		V2520	H52,13	102.00 (67.50)	
				Total Current Charges			119.00	
09/25/2018	Paym	nent Applied by Master	Card at Ballantyn	e Total Payments			(119.00)	
				Balance Due				0.00
	7			Other Open Items NO PAYMENT NECESSARY			_	0.00

Total Charges (Pat. Total + Ins. Total) = 491.00

NOTE: Billed to Insurance: \$372.00 plus Sales Tax of 0.00 = \$372.00

Thank you for your confidence and trust.

Total Due 0.00 Patient # 185931 Statement Date 9/25/2018 Patient Haja Burhan Amount Enclosed Check # Chart #

Carolinas Vision Group OD PLLC 15640 Don Lochman Ln. Suite C Charlotte, NC 28277-3177

Haja Burhan 8426 Penton Place Harrisburg, NC 8075

Carolinas Vision Group OD PLLC Print Date: 09/25/2018 Exam Date: 09/25/2018 15640 Don Lochman Lane Suite C Expiration Date: 09/25/2019 Charlotte, North Carolina 28277-3177 Phone: (704) 943-5110 FAX: (704) 943-4449 **Final Contact Lens Rx** Patient: Haja Burhan Age: 47 8426 Penton Place DOB: Harrisburg, NC 8075 Phone: (864) 905-4810 RT: 0 Qty: **Product:** BC Dia **Sphere** Cylinder Axis Add Tint: AIR OPTIX AQUA 8.60 14.20 -2.75SPH. Clear LT: Qty: 0 **Product:** BC Dia **Sphere** Cylinder Axis Add Tint: AIR OPTIX AQUA 8.60 14.20 -4.25 SPH. Clear Wear Schedule Replenishment DOT NONE Care Regimen

License #: NC 2477

Notes

Provider:

Amanda Rickher