

Health USA  
 125 MAIN STREET  
 STE 118  
 SERVICE CITY MA 99999  
 Return Service Requested

For Billing Inquiries Call:  
 (999)999-9999  
 Visit OurWebSiteURL.com

SALLY SMITH  
 16 ELM STREET  
 SERVICE CITY MA 99999

Please complete payment information.

Chart Number	Statement Date	Insurance Balance	Patient Balance
LY5	01/08/20xx	xx.00	xx.00
Credit Card	Select Card <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> AMEX		
	Card No.	Exp. Date	
Signature		3-4 Digit Security Code	
Check	Check No.	Amount Paid	

Make checks payable to:

Health USA  
 125 MAIN STREET  
 STE 118  
 SERVICE CITY MA 99999

Check if your billing information has changed. Provide update(s) above or on reverse side

Please detach and return top portion with payment.

Schedule your next appointment at [www.OurWebSiteURL.com](http://www.OurWebSiteURL.com). It's fast, easy, and convenient.

**Messages**

- Aging message(s) will print here.
- Optional, up to 4 additional messages can be added here

**Statement Detail** Statement Date 01/21/20xx Chart Number LY5

Date	Procedure	Description	Charges	Paid by Ins.	Paid By Pat	Adj.	Balance
08/12/03	99213	OFC/OUTPT E&M ESTAB LOW-MOD 15	xx.00				xx.00
08/16/03	99213	OFC/OUTPT E&M ESTAB LOW-MOD 15	xx.00				xx.00
02/21/08	99213	OFC/OUTPT E&M ESTAB LOW-MOD 15	xx.00				xx.00
04/07/08	10120	INCISION&REMOVAL FBSUBQTISS; SMPL	xx.00	xx.00			xx.00
04/07/08	10080	I&D OF PILONIDAL CYST; SIMPLE	xx.00	xx.00		-xx.00	xx.00
05/05/08	99213	OFC/OUTPT E&M ESTAB LOW-MOD 15	xx.00	xx.00	xx.00	-xx.00	
		MIN					
05/05/08	90396	IMMUNE GLOBULIN IM	xx.00	xx.00			xx.00
10/06/08	10121	INCISION&REMOVAL FBSUBQTISS; COMP	xx.00				xx.00
10/06/08	10140	I&D HEMATOMA SEROMA/FL	xx.00				xx.00
Sample Statement Message, can be added and printed for any transaction.							

Account Summary	Last Pay Date	Last Pay Amount	Total Charges	Total Payments
	10/13/20xx	xx.00	xx.00	xx.00

Insurance Balance	Patient Balance
xx.00	xx.00

Aging	1-30 Days	31-60 Days	61-90 Days	91-120 Days	121+ Days
	xx.00	xx.00	xx.00	xx.00	xx.00