

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	Account Balance	Payment Due
MS1	02/10/20xx	x.00	x.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 Sec.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. It's fast, easy, and convenient.

Messages

- Optional ? up to 5 messages can be added here.

Statement Detail Statement Date 02/10/20xx Chart Number MS1

Date	Name	Description	Charge	Paid by Insurance	Deductible	Paid by Guarantor	Adjustments	Remainder
1/06/xx	Sally Smith	Office Visit Est. Patient EEL Please call your Insurance Company to insure payment.	x.00					x.00
1/06/xx	Sally Smith	Urinalysis, Routine	x.00					x.00

Account Summary	Previous Balance	New Charges	Payments & Credits	Adjustments	Pending	Payment Due
	x.00	x.00	x.00	x.00	x.00	x.00