



PSC MEDICAL GROUP
 P.O. BOX 703
 VALLEY FORGE, PA 19482-9913

For all billing questions, please call
PSC at: (610) 650-3900

Tax ID #: 23-1234567
 Page: 1 of 1

SEND TO:

PAUL N PATIENT
 321 MAIN STREET APT 102
 ANYTOWN USA 12345



IF PAYING BY VISA, MASTERCARD, DISCOVER OR AMERICAN EXPRESS, FILL OUT BELOW

VISA MCO MASTERCARD DISCOVER AMER. EXP.

CARD NUMBER: _____ EXP. DATE: _____ AMOUNT: _____

SIGNATURE: _____ MUST INCLUDE 3 DIGIT SECURITY CODE FROM BACK OF CARD

| STATEMENT DATE | PAY THIS AMOUNT | ACCOUNT NO. |
|----------------|-----------------|-------------|
| 03/01/01 | \$131.00 | 000123-00 |

CHARGES AND CREDITS MADE AFTER STATEMENT DATE WILL APPEAR ON NEXT STATEMENT.

SHOW AMOUNT PAID HERE \$

REMIT TO:

PAUL N PATIENT
 321 MAIN STREET APT 102
 ANYTOWN USA 12345

09504 137510 02 1 3 016065

STATEMENT

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT IN ENCLOSED ENVELOPE

Please check box if above address is incorrect or insurance information has changed, and indicate change(s) on reverse side.

| Date | Procedure Code | Patient Name | Description | Diagnosis | Charge | Credit | Balance |
|----------------------------------|----------------|--------------|---|---------------|--------------------|----------------------|------------------|
| BALANCE FORWARD | | | | | | | \$106.00 |
| 12/15/00 01/17/01 | 99212 | John | Office/Outpatient Visit, Est Plan Payment: 0071723150 The Guardian | 465.9 | \$45.00 | \$-36.00 | \$9.00 |
| 12/27/00 02/01/01 02/01/01 | 99212 | John | Office/Outpatient Visit, Est Plan Payment: 0075687757 The Guardian Adj: Guardian Write-off The Guardian | 461.9 | \$45.00 | \$-28.00 \$-10.00 | \$7.00 |
| 01/02/01 02/01/01 | 99212 | Jillian | Office/Outpatient Visit, Est Plan Payment: 0071723149 The Guardian | 915.2 | \$45.00 | \$-36.00 | \$9.00 |
| 02/01/01 | 10160 | Jillian | Puncture Drainage of Lesion | 915.2 | \$0.00 | | \$9.00 |
| Current | | | | | Amount Due: | | \$ 131.00 |
| \$16.00 | 31-60 Days | 61-90 Days | 91-120 Days | Over 120 Days | | | |
| | \$9.00 | \$0.00 | \$106.00 | \$0.00 | | | |

PSC Medical Group
 P.O. Box 703
 Valley Forge, PA 19482-9913
 (610) 650-3900
 Tax ID #: 23-1234567
 Account No.: 000123-00

YOUR INSURANCE HAS PAID ITS PORTION FOR SERVICES. PLEASE REMIT BALANCE PROMPTLY.

YOUR ACCOUNT IS SERIOUSLY PAST DUE, PLEASE CALL OUR OFFICE AT (610) 650-3900

