

Clineva Urgent Care - Lake Forest
 29100 Portola Pkwy Ste B
 Lake Forest, CA 92630-8713

IF PAYING BY CREDIT CARD, FILL OUT BELOW

<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> VISA	<input type="checkbox"/> DISCOVER	<input type="checkbox"/> AMEX
CARD #		EXP DATE	
CSV SECURITY CODE		AMOUNT PAID	
STATEMENT DATE 11/23/2015	ACCT# 28447		
SIGNATURE			

BASE PATIENT
 1234 S TEST AVE
 SIOUX FALLS, SD 57106

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 Lake Forest, CA 92630-8713

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

Please detach and send above with payment.

ACCOUNT SUMMARY

LAST PATIENT PAYMENT

\$0.00 11/23/2015 *NOTE: Some or all of this payment may be applied to a closed visit that does not appear on this statement.

The Insurance Companies on file for these visits:

BASE PATIENT
 BCBS

Out to insurance: \$0.00
 You have paid \$0.00 as copays that are still pending.

 You have \$25.00 currently in your responsibility.
 You have \$0.00 available as a credit.
You owe \$25.00 today.

**This is your Visit ID
 Please enter it on the online
 bill pay form**

Visit Date: 11/05/2015
 Visit ID: 51183
 Patient: BASE
 Location: Clineva Urgent Care - Lake Forest
 Physician: Doctor Docutap, MD

	CHARGES	INSURANCE PAYMENT	CONTRACT SAVINGS	PATIENT PAYMENT	ADJUSTMENT	BALANCE	RESPONSIBLE PARTY	DENIAL CODE
71101 RIBS, W/ PA CHEST, UNIL MIN 3 VIEWS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
99203 OFFICE EVALUATION AND MANAGEMENT SERVICES, NP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
71010 CHEST-1 VIEW	\$25.00	\$0.00	\$0.00	\$0.00	\$0.00	\$25.00	Patient	
	\$25.00	\$0.00	\$0.00	\$0.00	\$0.00	\$25.00		

Explanation of outstanding balance(s):

PATIENT OWES:	\$25.00
INSURANCE OWES:	\$0.00