

FROM

OUTGOING ENVELOPE
RETURN ADDRESS HERE

STATEMENT DATE

COMPUTER GENERATED
POSTAL INDICIA
HERE

PATIENT NAME

DATE

DOCTOR

CODE

DESCRIPTION

AMOUNT

PATIENT NAME

STATEMENT DATE

MESSAGE
AREA

ACCOUNT NUMBER

OVER 30

OVER 60

OVER 90

OLD BAL

CREDITS

CURRENT

ACCOUNT NUMBER

RETURN TO

RETURN ENVELOPE
ADDRESS HERE

TO

OUTGOING ENVELOPE
ADDRESS HERE

TOTAL

PLEASE PAY
THIS AMOUNT

\$

AMOUNT PAID

HC2-601

PRINTED IN THE U.S.A.

PCMA