

Northwest Suburban Anesthesiologist, Ltd

Do not send mail to below address. For USPS use only.
P. O. Box 1259, Dept. 92667
Oaks, PA 19456



For more information about your statement, contact
Patient Accounts at 1-800-709-2715, or visit our website
at www.patientaccounts.net

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To pay via credit card please call 1-800-709-2715 or

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Statement Date	Pay This Amount	Account #
07/16/2012	\$1,365.00	71265382
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08/13/2012		



95156-1225

PAUL DULBERG
4606 HAYDEN CT
MCHENRY IL 60051-7918

Northwest Suburban Anesthesiologist Ltd
8163 Solutions Center
Chicago IL 60677-8001



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Due Date: 08/13/2012

Date	Description	Case #	Insurance Balance	Patient Balance												
07/09/2012	Anesthesiology Services by Dr. S. SINGH for Dr. S. Sagerman CPT Code: 64718 Billed To Patient	13180035		\$1,365.00												
<table><thead><tr><th>ACCOUNT CONDITIONS</th><th>CURRENT</th><th>30 DAYS</th><th>60 DAYS</th><th>90 DAYS</th><th>120 DAYS</th></tr></thead><tbody><tr><td></td><td>\$1,365.00</td><td>\$0.00</td><td>\$0.00</td><td>\$0.00</td><td>\$0.00</td></tr></tbody></table>					ACCOUNT CONDITIONS	CURRENT	30 DAYS	60 DAYS	90 DAYS	120 DAYS		\$1,365.00	\$0.00	\$0.00	\$0.00	\$0.00
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IMPORTANT MESSAGE ABOUT YOUR ACCOUNT			Total Balance	\$1,365.00												
This is a bill for services not included on your Hospital bill. Please call our office with questions concerning your bill. If payment has been made please disregard this bill. Thank you.			Insurance Pending	\$0.00												
			Amount You Owe	\$1,365.00												

Make Checks Payable To: Northwest Suburban Anesthesiologist Ltd
Call 1-800-709-2715

For Billing Questions Call
1-800-709-2715 (En Español 1-888-850-1446)
Mon - Fri 8:00AM to 7:30PM ET



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