



KootenaiClinic

This is Your Clinic Statement

208-625-6199 or 1-888-974-1235

www.kootenaihealth.org

\$30.00	Balance Due
02-05-15	Statement Date
Upon Receipt	Due Date
00000000000000	Account Number
Valued Client	Patient Name

Thank you for choosing Kootenai Clinic for your recent medical services. We have processed all available third party resources and the balance below is your responsibility and due in full. This statement may not reflect your total financial obligation to Kootenai Clinic at this time.

Payment is due now. For your convenience Kootenai Clinic offers the following methods of payment::

- On-line at <http://www.kootenaihealth.org>
- Pay by mail. Simple detach the below stub and send with check, money order or credit card information.
- Pay by phone. (208) 625-6199 or (888) 974-1235, AND speak with a customer service representative regarding payment or make alternate arrangements.
- Financial assistance may be available on the listed accounts if the patient/guarantor meet specific income requirements.

Payment will be applied to the oldest date of service first.

Encounter #	Provider	Service Date	Total Charges	Ins.Pmts./Adj.	Patient Pmts.	Amount
9999999	ROUSSEAU MD, LEANNE	12/09/2014 - 12/09/2014	\$286.00	\$256.00	\$0.00	\$30.00

TOTAL CHARGES	\$286.00
INSURANCE PAYMENTS/ADJUSTMENTS	\$256.00
PATIENT PAYMENTS	\$0.00
AMOUNT DUE	\$30.00



KootenaiClinic

2003 KOOTENAI HEALTH WAY
COEUR D'ALENE, ID 83814-6051



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

IF PAYING BY MASTERCARD, DISCOVER, OR VISA, PLEASE FILL OUT BELOW

<input type="checkbox"/> MasterCard	<input type="checkbox"/> DISCOVER	<input type="checkbox"/> VISA	<input type="checkbox"/> AMERICAN EXPRESS
CARD NUMBER			EXP. DATE
PRINTED NAME			CVV2 CODE
SIGNATURE			
STATEMENT DATE	PAY THIS AMOUNT	DUE DATE	
02-05-12	\$30.00	Upon Receipt	
ACCOUNT #	SHOW AMOUNT PAID HERE \$		
00000000000000			

Remit payment to:

KOOTENAI HEALTH
PO BOX 84468
SEATTLE, WA 98124-5768

VALUED CLIENT
1234 MAIN STREET
ANYWHERE, US 12345



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