

HILLCREST HEALTHCARE SVCS, INC

119 W. HOUSTON • SHERMAN TX 75090

RETURN ADDRESS REQUESTED

Hospital owned an operated physician office bill.

You can pay by credit card.

Make Check Payable to: Hillcrest Healthcare Svcs, inc
070299 00490

Make check payable to "The Group."

John Doe
1234 Your Street
Sherman, TX 75090-7212

Detach and send in reply envelope.

CARD NO.	EXP. DATE
PRINT NAME	AMT.\$
SIGNATURE	

M/C VISA

Hillcrest Healthcare Svcs, Inc
c/o Guy Gross, MD
119 W Houston
Sherman TX 75090

Physician in the group.

TOTAL AMOUNT DUE \$000.00
ACCOUNT NUMBER 0000001234
STATEMENT DATE 00/00/99
PHYSICIAN NAME GUY H GROSS, M.D., P.A.

AMOUNT ENCLOSED \$ _____

Detach and return stub with payment

STATEMENT

DATE	PATIENT	CPT	DESCRIPTION	ICD9	CHARGE	PAYMENTS	ADJUST.	INS.
00/00/99	JOHN DOE	56300	LAPAROSCOPY	000.00	000.00	00.00		.00
						TOTAL AMOUNT DUE	000.00	

Phone # is to your physicians account representative.

Messages left by 4pm will be returned the same day.

If you have questions please call (903) 892-6633

Payment due on receipt. Thank you.

TOTAL AMOUNT DUE \$000.00 :
ACCOUNT NUMBER 0000001234 :
STATEMENT DATE 00/00/99 :
PHYSICIAN NAME GUY H GROSS, M.D., P.A.

Message for additional information.