BRUCE KOVACS MD PO BOX 3389 SEAL BEACH CA 90740

Billing Inquiries: (866) 986-3212 or Email: info@elitemd-services.com

SUBHASHINI JAGANNATHAN 3330 TOPAZ LANE APT C07 FULLERTON, CA 92831

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Statement Date	
8/28/2020	
Chart Number	
12648258	
ACCEPTABLE PAYMENT:	
☐ CASH ☐ CHECK	

	TO ENSURE PROPER CREDIT, DETACH AND RETURN TOP PORTION IN THE ENCLOSED ENVELOPE.									
Date of Last Payment: 6/27/2016		Amount: -66.11		Previous Balance:		0.00				
Patient:	SUBHASH	INI JAGANNATHAN	Chart Number: 126482	Number: 12648258 Case: CIGNA		VA WHI				
Dates	Procedure	Procedure	Charge	Amount Paid by Insurance	Paid By Guarantor	Adjustments	Remainder			
04/16/20	76811	Svc Prv Office	373.96	0.00	N. 480. 11. 11.	-115.52	258.44			
06/11/20	76815	Svc Prv Office	217.00	0.00		-116.92	100.08			
07/23/20	76815	Svc Prv Office	217.00	0.00		-116.92	100.08			

Comment: THE AMOUNT DUE HAS BEEN APPLIED TO MEMBERS DEDUCTIBLE/COPAY RESPONSIBILITY.

Past Due 30 Days	Past Due 60 Days	Past Due 90 Days	Balance Due
			458.60
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