

300000 113377

SEPIDEH ZAHEDY KAPUSTA MD INC

2094 W LA HABRA BLVD
LA HABRA, CA 90631-5007
Forward Service Requested



For Billing Inquires
714-266-0133

023494

NEX10K 1708526 795824938
SUBHASHINI JAGANNATHAN
3320 Topaz Ln Apt B15
Fullerton, CA 92831-2680



Please complete payment information.

Account No	Statement Date	Previous Balance	Amount Due
JAGSU000	02/18/2020	0.00	8.07
Mail Pay	Enter Payment Amount \$		
by Check	Payable To: SEPIDEH ZAHEDY KAPUSTA MD INC	Check No.	
by Card	Select Card: <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> DISC <input type="checkbox"/> AMEX		
Card No.		Exp. Date	
Signature		3-4 Digit Sec. Code	

SEPIDEH ZAHEDY KAPUSTA MD INC
2094 W LA HABRA BLVD
LA HABRA, CA 90631-5007



Check if your billing information has changed. Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Messages

- THANK YOU FOR YOUR PROMPT PAYMENT

Statement Detail		Statement Date 2/18/2020				Account No JAGSU000		
Date	Name	Description	Charge	Paid by Insurance	Deductible	Paid by Guarantor	Adjustments	Remainder
01/16/20	SUBHASHINI J	PREG TEST	10.00				-1.93	8.07

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Account No	Statement Date	Previous Balance	Amount Due
JAGSU000	06/19/2020	0.00	138.98
Mail Pay	Enter Payment Amount		\$
by Check	Payable To: SEPIDEH ZAHEDY KAPUSTA MD INC	Check No.	
by Card	Select Card: <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> DISC <input type="checkbox"/> AMEX		
Card No.	Exp. Date		3-4 Digit Sec. Code
Signature			

For Billing Inquires
714-266-0133

012549

NEX10K 1867110 852928288
SUBHASHINI JAGANNATHAN
3320 Topaz Ln Apt B15
Fullerton, CA 92831-2680

SEPIDEH ZAHEDY KAPUSTA MD INC
2094 W LA HABRA BLVD
LA HABRA, CA 90631-5007



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Messages

- THANK YOU FOR YOUR PROMPT PAYMENT

Statement Detail			Statement Date 6/19/2020				Account No JAGSU000	
Date	Name	Description	Charge	Paid by Insurance	Deductible	Paid by Guarantor	Adjustments	Remainder
03/04/20	SUBHASHINI J	NT	500.00				-361.02	138.98

Account Summary	Previous Balance	New Charges	Payments & Credits	Adjustments
	0.00	500.00	0.00	-361.02

Amount Due
138.98

Aging	Past Due 30	Past Due 60	Past Due 90
	0.00	0.00	0.00

SEPIDEH ZAHEDY KAPUSTA MD INC 2094 W LA HABRA BLVD LA HABRA, CA 90631-5007
For Billing Inquires 714-266-0133

SEPIDEH ZAHEDY KAPUSTA MD INC

2094 W LA HABRA BLVD
LA HABRA, CA 90631-5007
Forward Service Requested



For Billing Inquires
714-266-0133

014152

NEX10K 1954668 881238371
SUBHASHINI JAGANNATHAN
3320 Topaz Ln Apt B15
Fullerton, CA 92831-2680



Please complete payment information.

300000 113377

Account No	Statement Date	Previous Balance	Amount Due
JAGSU000	08/24/2020	138.98	616.42
Mall Pay	Enter Payment Amount		\$
by Check	Payable To: SEPIDEH ZAHEDY KAPUSTA MD INC	Check No.	
by Card	Select Card: <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> DISC <input type="checkbox"/> AMEX		
Card No.			Exp. Date
Signature			3-4 Digit Sec. Code

SEPIDEH ZAHEDY KAPUSTA MD INC
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LA HABRA, CA 90631-5007



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Messages

- PAST DUE 60 DAYS - PLEASE PAY UPON RECEIPT

Statement Detail			Statement Date 8/24/2020				Account No JAGSU000	
Date	Name	Description	Charge	Paid by Insurance	Deductible	Paid by Guarantor	Adjustments	Remainder
06/18/20	SUBHASHINI J	7 OR MORE VISITS	1,050.00	-318.30			-254.26	477.44

Account Summary	Previous Balance	New Charges	Payments & Credits	Adjustments
	138.98	1,050.00	-318.30	-254.26

Amount Due
616.42

Aging	Past Due 30	Past Due 60	Past Due 90
	477.44	138.98	0.00

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For Billing Inquires 714-266-0133