

Payment Details

Name on Credit Card	MEGHANATH REDDY BOBBALA
Practice	OB/GYN Associates of Montgomery
Location	Montgomery at Taylor Road
Credit Card Type	Visa
Credit Card Number	*****3236
Amount Charged	\$246.64
Reference Number	844646960
Authorization Code	02353D
Date / Time	06/15/2022 10:20 AM
Patient Name	RAMASAHYAM
Patient DOB	
Account Number	127898
Email Address	

Payment Details

Name on Credit Card	MEGHANATH REDDY BOBBALA
Practice	OB/GYN Associates of Montgomery
Location	Montgomery at Taylor Road
Credit Card Type	Visa
Credit Card Number	*****3236
Amount Charged	\$246.64
Reference Number	1152169703
Authorization Code	09562D
Date / Time	07/15/2022 09:37 AM
Patient Name	MEGHANATH REDDY BOBBALA
Patient DOB	
Account Number	127898
Email Address	

Payment Details

Name on Credit Card	MEGHANATH REDDY BOBBALA
Practice	OB/GYN Associates of Montgomery
Location	Montgomery at Taylor Road
Credit Card Type	Visa
Credit Card Number	*****3236
Amount Charged	\$246.64
Reference Number	1408311678
Authorization Code	01751D
Date / Time	08/09/2022 04:16 PM
Patient Name	HARSHINI
Patient DOB	
Account Number	127898
Email Address	

Payment Details

**Name on Credit Card
Practice**

MEGHANATH REDDY BOBBALA
OB/GYN Associates of Montgomery
Montgomery at Taylor Road

Location

Visa

Credit Card Type

*****3236

Credit Card Number

\$246.64

Amount Charged

1682532253

Reference Number

08682D

Authorization Code

09/07/2022 09:15 AM

Date / Time

RAMASAHAYAM

Patient Name

Patient DOB

Account Number

127898

Email Address

Payment Details

Name on Credit Card

MEGHANATH REDDY BOBBALA
OB/GYN Associates of Montgomery
Montgomery at Taylor Road

Practice Location

Credit Card Type

Visa

Credit Card Number

*****3236

Amount Charged

\$246.64

Reference Number

1946898600

Authorization Code

04889D

Date / Time

10/05/2022 09:58 AM

Patient Name

RAMASAHAYAM

Patient DOB

Account Number

127898

Email Address

Payment Details

Name on Credit Card	MEGHANATH BOBBALA
Practice	OB/GYN Associates of Montgomery
Location	Montgomery at Taylor Road
Credit Card Type	Visa
Credit Card Number	*****3236
Amount Charged	\$246.64
Reference Number	250080509
Authorization Code	09977D
Date / Time	11/21/2022 09:39 AM
Patient Name	RAMASAHAYAM
Patient DOB	
Account Number	127898
Email Address	

Payment Details

Name on Credit Card MEGHANATH BOBBALA
Practice OB/GYN Associates of Montgomery
Location Montgomery at Taylor Road
Credit Card Type Visa
Credit Card Number *****3236
Amount Charged \$246.64
Reference Number 398499976
Authorization Code 05119D
Date / Time 12/08/2022 09:20 AM
Patient Name RAMASAHAYAM
Patient DOB
Account Number 127898
Email Address