



Laboratory Corporation of America Holdings  
PO Box 2240  
Burlington, NC 27216-2240  
Telephone: 1-800-845-6167  
Toll Free Fax: 1-866-227-2939  
Web Site: <http://www.labcorp.com/billing>

18369243/PSCC



DIPTARKA SAHA  
1318 E ALGONQUIN RD APT 3T  
SCHAUMBURG, IL 60173

Date: 12/8/2017

Invoice Number: 18369243

Dear Patient:

Thank you for your recent payment to LabCorp. This letter is to confirm your authorization provided on 11/09/2017 for balances due on this date of service to be charged to the credit card provided, 8871.

The details of this transaction are:

Payment amount: \$102.99  
Date payment is effective: 12/07/2017  
Confirmation number: 00020171207317489884  
Amount outstanding: \$0.00

On 12/05/2017, LabCorp received notification from your insurance company of patient responsibility. Please reference the explanation of benefits from your insurance company for this date of service for further detail or contact your insurance company directly.

If you have any questions, please call our Patient Billing Department at 1-800-845-6167.

Sincerely,

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LabCorp - Patient Billing Department