

Dubin Orthodontics, PA  
 1648 Route 130  
 North Brunswick, NJ 08902

Statement Number      Statement Date  
 492037                      2/28/18

Ms. Saisree Savarala  
 274 Kings Highway  
 Clarksboro, NJ 08020

“Brace” yourself for SPRING!!!

Activity Since Last Statement—Insurance Not Shown

Date	Patient	Description	Payment	Fee
02/01/18		Previous Due Amount		
02/01/18	Tarosh	Scheduled Contract Fee		160.00
02/28/18	Tarosh	Late-Payment Fee		2.40
Past Due Amount ->				162.40
Patient	Balance	Remaining Expected Insurance	Charge Date	Monthly Due
Tarosh	727.40	(375.00)	03/01/18	160.00
<b>Please Pay Total Amount Due -&gt;</b>				<b>322.40</b>

DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT

Pay This Amount	Statement Number	Statement Date
322.40	492037	2/28/18

Ms. Saisree Savarala  
 274 Kings Highway  
 Clarksboro, NJ 08020

Please make payment to:

Dubin Orthodontics, PA  
 1648 Route 130  
 North Brunswick, NJ 08902

Patient	Chart ID	Apply how much to
Tarosh Gurramkonda	160168	_____
		_____
		_____
		_____
		_____