



SELECT CARD BEING USED FOR PAYMENT:

MASTERCARD
 VISA
 DISCOVER
 AMEX

CARD NUMBER		SECURITY CODE
SIGNATURE		EXPIRATION DATE
STATEMENT DATE 1/14/2020	PAY THIS AMOUNT \$578.86	PATIENT ID # 4226927
LAST PAYMENT AMOUNT:		AMOUNT YOU ARE PAYING:

Please check box if address is incorrect or insurance information has changed, and indicate change(s) on reverse side.



Anthony Marinaro T10 P1
 6800 SW 15th St
 Des Moines IA 50315-5433

MAKE CHECKS PAYABLE TO:

GI Pathology
P.O. Box 1000 DEPT 461
Memphis, TN 38148-0001

PLEASE DETACH & RETURN TOP PORTION WITH YOUR PAYMENT.

On 11/04/2019, you visited your referring provider, Christina Hendricks. At that time, your doctor performed a procedure that included a specimen for laboratory testing. Christina Hendricks determined that it would be best for your care if your medical specimens were sent to GI Pathology laboratory in Memphis, Tennessee for expert diagnosis made by one of our pathologists (Dr. KINSEY) who specializes in this field of medicine.

After your procedure, GI Pathology billed your health insurance for the diagnosis we made on your specimens. In conjunction with your insurance provider, it has been determined that you owe the following balance on your bill. Please provide payment as indicated below. For your convenience we accept all major credit cards at no additional charge. Please complete the boxes above if you wish to pay by one of these methods. You can also view your balance and pay your bill online by logging into our website at www.poplarhealthcare.com and clicking the *Pay My Bill* button in the upper corner of the website. Please make checks payable to GI Pathology. Should you have any questions, please feel free to contact us at 1-888-274-7956 or 901-473-0678. Thank you.

Date	Patient Name	Doctor	Description	Charges	Adjustments	Payments	Balance	Ins. Pen.		
11/04/2019	ANTHONY MARINARO	CHRISTINA HENDRICKS	Infectious agent detectio	750.00	171.14	0.00	578.86			
Statement Date	PATIENT ID NUMBER	CURRENT	30 DAYS	60 DAYS	90 DAYS	120 DAYS	TOTAL BALANCE	INSURANCE PENDING	TOTAL BALANCE	
1/14/2020	4226927	0.00	0.00	578.86	0.00	0.00	578.86		\$578.86	
									INSURANCE PENDING	0.00
									AMOUNT DUE NOW	\$578.86