Gastroenterology and GI Surgery • Gynecology • Nephrology • Pulmonology



Statement Date 07/21/2014 Billing Statement for JASON KREBS Patient Name **JASON KREBS**

Thank you for choosing Cox Medical Center for your healthcare needs. This is a summary statement showing new accounts now due by you. If you have any questions regarding these charges, wish to request an itemized statement, or would like to discuss paying your balance in monthly installments, please call our Patient Financial Services office at (417)865-7300 or (866)309-5836. Please see the reverse side for additional information.

PATIENT SERVICES

Cox Urgent Care Phys	\$209.00
CoxHealth Urgnt Care	\$699.00
CS Pharmacy CS	\$188.36

YOUR ACCOUNT SUMMARY

Account Number	
Visit Number	
Service Date(s)	06/28/2014 to 06/28/2014
Charges	\$1,096.36
Adjustments	(\$15.90)
Insurance Payments Recei	ived \$0.00
Patient Payments Receive	d (\$15.00)
Amount Pending with Inst	urance \$887.36

Amount due by you: \$178

For your convenience, you may pay online through
CoxHealth Express at www.CoxHealth.com