

McLaren Print System Order

Order No: 60550 Reprint Previous Order No: 5301 Order Date: 2021-02-23 User: TINA PLAUTZ Phone: 248-674-2259

Ship Location: MCLREN OAKLAND WATERFORD MEDICAL ASSOCIATES 5210 Highland Rd, Suite 201 WATERFORD, MI 48327

Forms Quantity: 100 Paragon Dept No: 73000 Dept Name: Waterford Medical Associates Company Number: 810

Order Total Price: 11.80

Item Number: MM-52 Item Description: Bill as Self Pay Revision Date: 10/2010 Print: 1 sided black and white Paper: 2 Part (White, Yellow) Size: 8.5 x 11 Fold: Finish: Drill: None Misc Info:

McLaren Medical Group

BILL AS SELF PAY

L	, elect to not use my health insurance
(patient name)	
coverage for charges incurre	d as a result of services on
. i un	dersfand the charges in full are my
(date of service)	
responsibility and I agree to	pay in full today.

Signature of Patient/Parent/Legal Guardian

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Bill AS SELF PAY Organi-Med Tex. Opp/Tabled