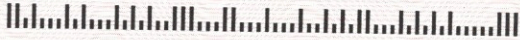


P.O. Box 8669
Calabasas, CA 91372-8669

Address Service Requested

#BWNFTZF #GWW9744144508048#



R02 - CHWP90 / 005795316 / 060
STEPHANIE EBEL
59 CAMINO REAL DR
LODI CA 95240-0726

IF PAYING BY CREDIT CARD, FILL OUT BELOW.		
CHECK CARD USAGE FOR PAYMENT		
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD		
CARD NUMBER	EXP DATE	
SECURITY CODE (3 digit code on the back of card)	BILLING ZIP CODE	
SIGNATURE	DATE April 1, 2008	
Current Balance (+ \$3.95): \$1,583.16	Account No: CHWP90/005795316/060	Amount Paid

Grant & Weber
P.O. Box 8669
Calabasas, CA 91372-8669



For: ST. JOSEPH'S MEDICAL CENTER
Our Account No.: CHWP90/005795316/060
Call: S. GREEN
(818)871-7921

Amount: \$1,569.40
Interest: \$13.76
Total: \$1,583.16
Date: April 1, 2008

How Can You Avoid This Being Reported To The Credit Bureau

Dear Stephanie Ebel,

We have previously notified you of our desire to settle this claim in an amicable fashion. **YOUR ACCOUNT IS STILL UNPAID** and you are forcing us to take advanced steps to collect this account.

We Have Provided 4 Convenient Ways For You To Pay:

1. Pay by Credit Card, use the form at the top of this letter. Choosing to pay by credit card shall be your agreement to also pay a \$3.95 transaction fee which shall be added to the amount authorized above.
2. Send check or money order in the enclosed envelope.
3. Call our office at (800) 333-1656 Ext. 7921 if you need additional time.
4. Visit our On-Line Payment Center at <https://secure.grantweber.com/payment>

If you fail to take advantage of the offers above, you will leave us no choice. We may place this account on file with all applicable Credit Reporting Agencies.

This is an attempt to collect a debt by a debt collector. Any information obtained will be used for that purpose.

GRANT & WEBER
"A Professional Collection Corporation"
26575 W. Agoura Road ● Calabasas, CA 91302 ● (818)871-7921 Ext. 7921
(800) 333-1656 Ext. 7921
Member of Experian