

ARBOR PLACE
17 LOUIE AVENUE
LODI CA 95240
(209)369-8282

Statement Date: 07/14/2014
Account Number: 2107

Tiffany Anderson	Resident: PARVIN, MARY	Medical Rec No: 1435
	Admitted: 06/27/2014	Discharged:
Pay this Amount: \$6,293.33		
Make checks payable to: ARBOR PLACE		

PARVIN, MARY 1435 **Statement Date:** 07/14/2014 **Account Number:** 2107

Date	Description of Service	Current	Balance
07/01/14	BALANCE FORWARD		0.00
	PAYMENTS	0.00	0.00
	ROOM CHARGES		
07/01-07/31/14	R&B Semi-Private	2,950.00	2,950.00
	ADJUSTMENTS		
06/27-06/30/14	R&B Semi-Private	393.33	3,343.33
	ADVANCE BILLING		
08/01-08/31/14	ADV R&B Semi-Private	2,950.00	6,293.33
	BALANCE DUE		6,293.33

Visa _____ Master Card _____ Sec Code _____
 Expiration Date _____