



The PLD Group
 31-265 Reserve Dr
 Thousand Palms CA 92276-6611

Billing Questions: 760-343-0700
 Billing Fax: 760-692-9507
 Appointment Phone: 877-210-9377

IF PAYING BY CREDIT CARD PLEASE FILL OUT BELOW		
CHECK CARD USING FOR PAYMENT		
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		
CARD NUMBER	3 DIGIT SECURITY CODE	
SIGNATURE	EXP. DATE	
NAME ON CARD	ZIP CODE	
PATIENT NAME	Joe Patient	AMOUNT ENCLOSED/CHARGED
STATEMENT DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
2/11/2021	\$2580.00	12345678

To pay your bill online visit <https://youronlinebillpay.com>

CONFIDENTIALLY ADDRESSED TO:

1 SP manifest key line *****Endorsement Line*****

Joe Patient
 2345 Guarantor St
 Anytown, US 12345

000001000001



MAKE CHECKS PAYABLE AND MAIL TO:

Your Clinic Here
 123 Main St
 Anytown, US 12345

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

To ensure proper credit, please detach and return top portion with your payment.

Date of Service	Visit ID	Description	Charge	Insurance Payments	Patient Payments	Adjustments	Balance
01/07/2019	236425994	RECONSTRUCTION AMP	\$2,050.00				\$2,050.00
01/10/2019	237311386	HOSPITAL ADMISION	\$530.00				\$530.00

Important Message from our Billing Department

Thank you for selecting Your Clinic Here for your healthcare needs. This statement represents your most recent charges, as well as the balance now due. Patient balance is due in full upon presentation of this statement. As a courtesy, we have billed your insurance company. Any charges denied or not paid by your insurance company will be transferred to patient responsibility. If you have questions as to how your insurance paid or elected not to pay, please call the insurance company directly.

For questions regarding your account not related to insurance, please call our billing office 877-210-9377 Monday - Friday 9:00 am to 5:00 pm or email your questions to thepldgroup@thepldgroup.com

Thank you!

ACCOUNT SUMMARY

Patient: Joe Patient
 Account: 12345678
 Statement Date: 2/11/2021
 Patient Balance Now Due: \$2580.00

Check us out on the web at:
www.thepldgroup.com

Amount Now Due
\$2580.00

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Samples Provided by
The PLD Group, Inc.

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