

STATEMENT OF ACCOUNT

Frisco Dentistry for Kids
8380 Warren Parkway
Ste 400
Frisco, TX 75034-4253
(214)387-0399

CHART NO.

PAGE NO.

E40001

BILLING DATE

GUARANTOR NAME AND MAILING ADDRESS

AMOUNT ENCLOSED

\$

TO ENSURE PROPER CREDIT, PLEASE DETACH AND RETURN THIS PORTION OF THE STATEMENT WITH YOUR PAYMENT

PLEASE RETAIN THIS PORTION OF THE STATEMENT FOR YOUR RECORDS

DATE	DESCRIPTION	PATIENT'S NAME	CHARGES	CREDITS
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