

STATEMENT OF SERVICES RENDERED

Friendly Smiles Dental Care - Odessa
 17805 Gunn Highway
 Odessa, FL 33556

 (813)440-6869

| CHART NO. | PAGE NO. |
|-----------|----------|
| HU0034 | 1 |

| BILLING DATE |
|--------------|
| 03/07/2024 |

GUARANTOR NAME AND MAILING ADDRESS

Greg D Hutchenson
 19119 Rogers Rd
 Odessa, FL 33556

| PATIENT | TOOTH | SURF | DESCRIPTION | CHARGE | CREDIT |
|---------|-------|------|---------------------------------|--------|--------|
| Greg | | | D0140:Limited oral evaluation | 37.00 | |
| Greg | 13 | | D0220:Intraoral Periapical Imag | 12.00 | |
| Greg | 13 | | D7210:Extract, erupted th, rem | 149.00 | |

| PRIOR BALANCE | CURRENT CREDITS | CURRENT CHARGES | NEW BALANCE | DENTAL INS. EST. | PLEASE PAY |
|---------------|-----------------|-----------------|-------------|------------------|------------|
| 0.00 | - | 0.00 | + | 198.00 | = |
| | | | | 198.00 | - |
| | | | | 198.00 | = |
| | | | | | 0.00 |

| PATIENT | DATE | TIME | REASON |
|---------|------|------|--------|
| | | | |