

(PRO) AZ PAIN MANAGEMENT

Payment Receipt

Date Printed: 09/23/2008 03:38PM

Patient: SMITH, SUSAN (PRO.83044)

Appointment: 07/14/2008 09:00AM

Payment Type	Payment Amount	Payment Method
Copay	\$100.00	Cash
Copay	\$25.00	Check

Total Payments: \$125.00