

North Dallas Dermatology Associates

6820 Preston Road, Suite 300 · Plano, TX 75024
(972) 555-0132 · Tax ID 47-0000002 · NPI 1000000027
Provider: Daniel K. Osei, MD

Patient Statement

Statement date: 08/20/2026
Account #: M-44810
Statement #: ST-2026-10744

PATIENT

Alex R. Sample
4110 Bishop Avenue
Dallas, TX 75204
Date of birth: 11/02/1979

RESPONSIBLE PARTY

Alex R. Sample
Relationship: Self
Plan: Dallas ISD Medical (self)
Member ID: SAMPLE-44810

DATE OF SERVICE	CODE	DESCRIPTION OF SERVICE	CHARGE
08/19/2026	99203	Office visit, new patient — low/moderate complexity	\$240.00
08/19/2026	11102	Tangential biopsy of skin — single lesion	\$145.00
08/19/2026	88305	Pathology exam of tissue (level IV)	\$120.00

Total charges	\$505.00
Insurance paid	-\$360.00
Contractual adjustment	-\$50.00
Patient responsibility	\$95.00
Patient payment received	-\$95.00
Account balance	\$0.00

PAYMENT RECEIVED

Date: 08/26/2026 Method: Mastercard ending 7781 Amount: \$95.00 Status: Paid in full

Itemized statement of medical services actually rendered — date of service, CPT procedure codes and descriptions, provider, patient, and amount paid out of pocket. Retain for HSA/FSA reimbursement.