



Worthington Regional Hospital

1018 6TH AVE PO BOX 997
WORTHINGTON MN 56187

CUSTOMER SERVICE:
Toll Free: 877 629-2999
Local: 507 372-2941

A

IF PAYING BY MASTERCARD, VISA, DISCOVER, OR AMERICAN EXPRESS,
PLEASE FILL OUT BELOW.

MASTERCARD
 VISA
 DISCOVER
 AMERICAN EX.

| | | |
|----------------|-----------------|-----------|
| CARD NUMBER | | AMOUNT |
| SIGNATURE | | EXP. DATE |
| STATEMENT DATE | PAY THIS AMOUNT | ACCT. # |
| 7/20/08 | 587.42 | 90596 |

PAGE 1

SHOW AMOUNT PAID HERE \$

ADDRESSEE

1-210

SUZLON ROTOR CORP
1711 S HWY 75
PIPESTONE MN 56164

REMITTO:

WORTHINGTON REGIONAL
1018 6TH AVE PO BOX 997
WORTHINGTON MN 56187



STATEMENT

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT

NOTE CHANGE OF ADDRESS/INSURANCE INFORMATION ON REVERSE

| DESCRIPTION | DEBIT/CREDIT | BALANCE | | |
|---|-----------------------|-----------------------|--------------------------|--|
| PATIENT #: 2211194 PATIENT: MORALES DE CORNEJO, MARIA FROM DATE: 1/05/08 THROUGH DATE: 1/05/08 CYCLE: 1 BEGINNING BALANCE: 7/02/08 005-1000 LATE PAYMENT FEES CYCLE: 1 BALANCE DUE: | 9.45 | 577.97 587.42 | | |
| GUARANTOR NUMBER | GUARANTOR NAME | STATEMENT DATE | GUARANTOR BALANCE | |
| 90596 | SUZLON ROTOR CORP | 7/20/08 | 587.42 | |

PREVIOUS MONTH'S ACTIVITY LISTED ABOVE.
1.5% LATE FEE ASSESSED MONTHLY 90 DAYS AFTER
DISCHARGE. PLEASE CALL 507-372-3119 WITH ANY
QUESTIONS.

DUE DATE: 8/05/08