



# Worthington Regional Hospital

1018 6TH AVE PO BOX 997  
WORTHINGTON MN 56187

**CUSTOMER SERVICE:**  
Toll Free: 877 767-1640  
Local: 507 372-2941

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. #
5/11/08	582.35	90596

PAGE 1

SHOW AMOUNT PAID HERE \$

ADDRESSEE:

1-332

. SUZLON ROTOR CORP  
1711 S HWY 75  
PIPESTONE MN 56164

REMIT TO:

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 #: 2210046    PATIENT: ARCE, WILFREDO  FROM DATE: 12/07/07    THROUGH DATE: 12/07/07 CYCLE: 1    BEGINNING BALANCE: 4/08/08    001-0895 WORKMANS COMP PYMT    1,425.00- 4/08/08    005-0945 W/C DISCOUNT    75.00- 4/17/08    006-0102 REFUNDS    13.75 4/20/08    005-0978 LATE PAYMENT FEE W/O    8.88- 4/23/08    005-1000 LATE PAYMENT FEES    .08 CYCLE: 1    BALANCE DUE:		1,508.88		
PATIENT #: 2211194    PATIENT: MORALES DE CORNEJO, MARIA  FROM DATE: 1/05/08    THROUGH DATE: 1/05/08 CYCLE: 1    BEGINNING BALANCE: 4/23/08    005-1000 LATE PAYMENT FEES    5.00 CYCLE: 1    BALANCE DUE:		13.83		
		563.52		
		568.52		
<b>GUARANTOR NUMBER</b>	<b>GUARANTOR NAME</b>	<b>STATEMENT DATE</b>	<b>GUARANTOR BALANCE</b>	582.35
90596	. SUZLON ROTOR CORP	5/11/08		

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: 5/27/08