

Payment List

Community Counseling
555 Main Street, Suite 100
Anytown, MI 55555

Group by: Payment Method, Hide Disbursement Details: Checked

Patient or Payer Name	Pmt Date	Amount	Remain.	Method	Ref #	Addl Ref #	Note
CASH		215.00	.00				
BROOKS, PATIENT D	03/15/16	20.00	0.00	CASH			
BROOKS, PATIENT D	05/22/17	10.00	0.00	CASH			
BROOKS, PATIENT D	06/08/17	10.00	0.00	CASH			
BROOKS, PATIENT D	07/06/17	15.00	0.00	CASH			
BROOKS, PATIENT D	01/15/16	5.00	0.00	CASH			
CARSON, PATIENT	06/05/17	15.00	0.00	CASH	15		
CARSON, PATIENT	04/01/16	20.00	0.00	CASH			
CARSON, PATIENT	08/16/17	20.00	0.00	CASH			
JONES, TOM W	04/05/17	10.00	0.00	CASH			
SAMPLE, PATIENT D	02/08/16	10.00	0.00	CASH			
SAMPLE, PATIENT D	03/05/16	10.00	0.00	CASH			
SAMPLE, PATIENT D	02/10/17	10.00	0.00	CASH			
SCRUBBING, JOE	12/03/16	10.00	0.00	CASH			
SMITH, JOHN D	04/18/17	10.00	0.00	CASH			
THOMAS, TRAIN	07/11/16	10.00	0.00	CASH			
THOMAS, TRAIN	06/09/16	10.00	0.00	CASH			
THOMAS, TRAIN	08/25/16	10.00	0.00	CASH			
THOMAS, TRAIN	09/14/16	10.00	0.00	CASH			
CC		110.00	.00				
CARSON, PATIENT	09/21/17	20.00	0.00	CC			
INSTITUTIONAL, PATI	11/06/16	20.00	0.00	CC			
JONES, TOM W	09/14/17	10.00	0.00	CC			
SAMPLE, PATIENT D	10/20/16	10.00	0.00	CC			
SAMPLE, PATIENT D	10/12/17	20.00	0.00	CC			
THOMAS, TRAIN	05/11/16	10.00	0.00	CC			
THOMAS, TRAIN	01/12/17	10.00	0.00	CC			
THOMAS, TRAIN	03/14/17	10.00	0.00	CC			
CHECK		1,062.00	.00				
BLUE CROSS	06/20/16	30.00	0.00	CHECK	3847		
BLUE CROSS	09/24/17	50.00	0.00	CHECK	8374		
BLUE CROSS	07/18/17	40.00	0.00	CHECK	39673		
BLUE CROSS	05/31/17	30.00	0.00	CHECK	53284		
BLUE CROSS	02/28/17	40.00	0.00	CHECK	384756		
BLUE CROSS	02/27/16	30.00	0.00	CHECK	9847		
BROOKS, PATIENT D	04/10/16	20.00	0.00	CHECK	134		
HUMANA	06/02/17	10.00	0.00	CHECK	5001		
HUMANA	05/02/16	20.00	0.00	CHECK	6874		
HUMANA	05/25/16	60.50	0.00	CHECK	4738		
HUMANA	07/30/16	60.50	0.00	CHECK	8473		
HUMANA	08/31/16	60.50	0.00	CHECK	8374		
HUMANA	01/23/17	60.50	0.00	CHECK	376		
HUMANA	03/20/16	20.00	0.00	CHECK	8746		
INSTITUTIONAL PAYE	12/15/16	115.00	0.00	CHECK	3945		
INSTITUTIONAL, PATI	08/15/17	25.00	0.00	CHECK	487		
INSTITUTIONAL, PATI	10/16/17	20.00	0.00	CHECK	287		
MEDICARE	04/01/16	50.00	0.00	CHECK	5847		
MEDICARE	07/30/17	25.00	0.00	CHECK	3847		
MEDICARE	06/15/17	90.00	0.00	CHECK	3923		
MEDICARE	11/05/16	30.00	0.00	CHECK	2874		
MEDICARE	10/05/17	110.00	0.00	CHECK	9867		
MEDICARE	09/10/17	50.00	0.00	CHECK	8674		

08/16/18 12:02 PM

Patient or Payer Name	Pmt Date	Amount	Remain.	Method	Ref #	Addl Ref #	Note
SMITH, JOHN D	09/14/17	15.00	0.00	CHECK	873		
EFT		626.50	.00				
BLUE CROSS	07/16/17	50.00	0.00	EFT	1947		
BLUE CROSS	10/27/16	40.00	0.00	EFT	237476		
HUMANA	06/15/17	5.00	0.00	EFT	DF873		
HUMANA	06/28/16	60.50	0.00	EFT	7483967		
HUMANA	09/30/16	60.50	0.00	EFT	547682		
HUMANA	03/29/17	60.50	0.00	EFT	2376		
INSTITUTIONAL PAYE	10/03/17	100.00	0.00	EFT	DFR8974		
INSTITUTIONAL PAYE	08/16/17	115.00	0.00	EFT	DFG8374		
MEDICARE	01/14/16	60.00	0.00	EFT	98765432		
MEDICARE	04/30/17	75.00	0.00	EFT	8374		
Total Payments:		2,013.50					
Total Remaining:			0.00				