

THIS IS A BILL

RP Corpus Christi

 **radiology partners**
CORPUS CHRISTIPATIENT: [REDACTED]
ACCOUNT: [REDACTED]
STATEMENT DATE: 04/02/2025

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BILL SUMMARY**Total Payment Due**

Your balance due is:

\$61.31*Payment Due By:***05/02/2025**

Mobile Pay



Pay Online



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Send in your check along with the payment coupon below.

Have questions about your bill?
Need to set up a payment plan?

Call us at (361) 792-2129 Monday - Friday, 8:00AM - 5:00PM CST

DATE	CPT - SERVICE DESCRIPTION	CHARGES	PAYMENTS	ADJUSTMENTS	PATIENT BALANCE
02/09/25	72131 - Computed tomography, lumbar spine; without contrast material	\$681.00			
03/27/25	Location of Service: COMPLETE CARE CORPUS CHRISTI UNITED HEALTHCARE			\$619.69	\$61.31
Patient Responsibility:					\$61.31
Total Due:					\$61.31

DETACH HERE AND RETURN THE BOTTOM PORTION WITH YOUR PAYMENT USING THE ENCLOSED ENVELOPE

- ☐ Has your personal or insurance information changed?
Please check this box and indicate any changes on the reverse side.

 **radiology partners**
CORPUS CHRISTIa division of Singleton Associates
P.O. Box 208108
Dallas TX 75320-8108**Thank you for choosing Radiology Partners Corpus Christi**Your physician has referred your radiology images and interpretation services to us. To update your insurance, visit our website: pay.imaginepay.com/provider/SAPA or on the back of this statement.

If you have concerns about paying your balance, contact us to discuss available discounts and payment options.

STATEMENT DATE	ACCOUNT	PAY THIS AMOUNT	AMOUNT PAID
04/02/2025	[REDACTED]	\$61.31	

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MAKE CHECK PAYABLE AND REMIT TO:

[REDACTED]
CORPUS CHRISTI TX 78415**Radiology Partners Corpus Christi**
a division of Singleton Associates
P.O. Box 208108
Dallas TX 75320-8108