



Statement Date

Account Number 0001000000127449

Guarantor Name

PAYMENT OPTIONS

We accept Cash, Check, Visa, Mastercard, Discover and American Express

AMOUNT DUE

PATIENT PAYMENTS SINCE LAST STATEMENT

Billing Questions?

Call our billing department at:
785-564-4655

www.kansasortho.com

We are excited to announce that we have a new patient portal. The patient portal will give you access to your medical records, ability to send messages to our staff, complete your check-in process online, updated your demographic information and much more. For more information on how to enroll contact our office at 785-537-4200.

MAKE CHECKS PAYABLE TO



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PLEASE REMIT TO