

**Auburn Montgomery Student Health Services**  
**Patient Ledger**  
**7/17/2026**

| Provider                                     | DOS        | Charge Date | Location        | Status       | Charges  | Applied   | Balance |
|----------------------------------------------|------------|-------------|-----------------|--------------|----------|-----------|---------|
| Stewart, Carol                               | 08/19/2021 | 03/23/2022  | Auburn Montgome | P            | \$15.00  | \$15.00   | \$0.00  |
| Procedure                                    | DOS        | Diagnosis   | Status          | Status Date  | Charges  | Applied   | Balance |
| 99211: BRIEF EST PT                          | 08/19/2021 | Z23         | P               | 03/23/2022   | \$15.00  | \$15.00   | \$0.00  |
| Payer                                        | Type       | Method      | Code            | Date Applied | Amount   | AppliedBy |         |
|                                              | Write Off  |             | Old System      | 04/29/2026   | \$15.00  | Hall, Amy |         |
|                                              |            |             |                 |              |          |           |         |
| Stewart, Carol                               | 08/19/2021 | 08/20/2021  | Auburn Montgome | P            | \$107.00 | \$107.00  | \$0.00  |
| Procedure                                    | DOS        | Diagnosis   | Status          | Status Date  | Charges  | Applied   | Balance |
| 90636: Twinrix & Hepatitis A/B               | 08/19/2021 | Z23         | P               | 04/29/2026   | \$85.00  | \$85.00   | \$0.00  |
| Payer                                        | Type       | Method      | Code            | Date Applied | Amount   | AppliedBy |         |
|                                              | Write Off  |             | Old System      | 04/29/2026   | \$85.00  | Hall, Amy |         |
| 90471: Immunization Injection Administration | 08/19/2021 | Z23         | P               | 04/29/2026   | \$22.00  | \$22.00   | \$0.00  |
| Payer                                        | Type       | Method      | Code            | Date Applied | Amount   | AppliedBy |         |
|                                              | Write Off  |             | Old System      | 04/29/2026   | \$22.00  | Hall, Amy |         |