

**Auburn Montgomery Student Health Services**  
**Patient Ledger**  
**7/16/2026**

| Provider                           | DOS        | Charge Date                  | Location        | Status       | Charges  | Applied      | Balance |
|------------------------------------|------------|------------------------------|-----------------|--------------|----------|--------------|---------|
| Barton, Lindsey                    | 04/03/2024 | 04/03/2024                   | Auburn Montgome | P            | \$102.67 | \$15.00      | \$87.67 |
| Procedure                          | DOS        | Diagnosis                    | Status          | Status Date  | Charges  | Applied      | Balance |
| J0696: Rocephin 1G                 | 04/03/2024 | J01.90                       | P               | 04/04/2024   | \$0.53   | \$0.00       | \$0.53  |
| 96372: THERAPEUTIC INJECTION ADMIN | 04/03/2024 | J01.90                       | P               | 04/04/2024   | \$19.00  | \$0.00       | \$19.00 |
| J1100: Dexamethasone 4mg/ml        | 04/03/2024 | J01.90                       | P               | 04/04/2024   | \$0.14   | \$0.00       | \$0.14  |
| J1030: Depo-Medrol 40mg/ml         | 04/03/2024 | J01.90                       | P               | 04/04/2024   | \$6.00   | \$0.00       | \$6.00  |
| 96372: THERAPEUTIC INJECTION ADMIN | 04/03/2024 | J01.90                       | P               | 04/04/2024   | \$19.00  | \$0.00       | \$19.00 |
| 87880: STREP A                     | 04/03/2024 | R05.9, J02.9, R53.83, R09.81 | P               | 04/04/2024   | \$12.00  | \$0.00       | \$12.00 |
| 87426: COVID Rapid Testing         | 04/03/2024 | R05.9, J02.9, R53.83, R09.81 | P               | 04/04/2024   | \$31.00  | \$0.00       | \$31.00 |
| 87400 [QW] : INFLUENZA             | 04/03/2024 | R05.9, J02.9, R53.83, R09.81 | P               | 04/04/2024   | \$0.00   | \$0.00       | \$0.00  |
| 00002: Non Student Exam            | 04/03/2024 | J01.90, J04.0, R05.9         | P               | 04/04/2024   | \$15.00  | \$15.00      | \$0.00  |
| Payer                              | Type       | Method                       | Code            | Date Applied | Amount   | AppliedBy    |         |
| STOECKEL, DENISE                   | CoPay      | Credit Card                  |                 | 04/03/2024   | \$15.00  | Smith, Tonya |         |