

## Daily Summary Report

Report Criteria: Transaction Date between 08/01/2010 and 09/10/2010 and Patient Group is 'SAMPLE GROUP 1'

	Date	Code	Charges	Payments	Adjs	Description
<b>SAMPLE GROUP 1</b>						
<b>08/01/10</b>						
<b>Charge</b>						
	DOE, JOHN	08/01/10	12345	100.00	0.00	0.00 MISC
	DOE, JOHN	08/01/10	12345	100.00	0.00	0.00 MISC
Charge Totals			200.00	0.00	0.00	
<b>AUTH RENDERING</b>						
<b>Charge</b>						
	DOE, JOHN	08/01/10	90801	75.00	0.00	0.00 30 MINUTE SESSION
Charge Totals			75.00	0.00	0.00	
Provider Totals			75.00	0.00	0.00	
<b>RENDERING PHYSICIAN</b>						
<b>Charge</b>						
	DOE, JOHN	08/01/10	55555	100.00	0.00	0.00 50 MINUTE SESSION
Charge Totals			100.00	0.00	0.00	
Provider Totals			100.00	0.00	0.00	
Daily Totals			375.00	0.00	0.00	
<b>08/03/10</b>						
<b>RENDERING PHYSICIAN</b>						
<b>Charge</b>						
	DOE, JOHN	08/03/10	90803	100.00	0.00	0.00 45 MINUTE SESSION
Charge Totals			100.00	0.00	0.00	
Provider Totals			100.00	0.00	0.00	
Daily Totals			100.00	0.00	0.00	
<b>08/04/10</b>						
<b>RENDERING PHYSICIAN</b>						
<b>Charge</b>						
	DOE, JOHN	08/04/10	90803	100.00	0.00	0.00 45 MINUTE SESSION
Charge Totals			100.00	0.00	0.00	
Provider Totals			100.00	0.00	0.00	
Daily Totals			100.00	0.00	0.00	
<b>09/03/10</b>						
<b>RENDERING PHYSICIAN</b>						
<b>Patient Pmt</b>						
	DOE, JOHN	09/03/10	111	0.00	25.00	0.00 Patient Pmt
Patient Pmt Totals			0.00	25.00	0.00	
Provider Totals			0.00	25.00	0.00	
Daily Totals			0.00	25.00	0.00	

09/09/10

9/10/2010

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Page 1 of 2

	Date	Code	Charges	Payments	Adjs	Description
<b>Patient Pmt</b>						
DOE, JOHN	09/09/10	1	0.00	20.00	0.00	Deductible Amount
Patient Pmt Totals			0.00	20.00	0.00	
Daily Totals			0.00	20.00	0.00	
Group Totals			575.00	45.00	0.00	
Grand Totals			575.00	45.00	0.00	