

DAILY BATCH HEADER

1. Location #: _____ (Prepared by) _____
 Today's Date _____ (Courier) _____
 2. Number of receipts written today: _____ (Billing Office) _____

NOTE: Billing office will contact draw site immediately concerning any discrepancies.

IMPORTANT

- This report should be prepared at the end of each day that money is collected.
- Your receipts should always equal the amount of today's payments.
- Staple copies of today's receipts in the upper left hand corner of this form.
- Do NOT staple Visa / Mastercard payments, place them in the locked bag.

Copies

- 3rd – kept at draw site
- 2nd – returned to draw site in interoffice mail after signed by billing office.
- Original – used for deposit.
- File 2nd copy with 3rd copy at draw site.
- If signed 2nd copy not received at draw site within 3 working days, contact billing office manager.

• **Staple copies of today's receipts here**

3. Total payments received today: \$ _____
 A. Payments received as checks: \$ _____
 B. Payments received as cash: \$ _____
 C. Payments received as Visa / Mastercard: \$ _____
 4. Total received: \$ _____

TOTAL PAYMENTS SHOULD EQUAL AMOUNT OF TOTAL RECEIVED. 3 = 4

INSTRUCTIONS:

1. Write your location number and today's date at the top of the form.
2. Each patient who pays on their account should be given a receipt. Total the number of receipts written and write that number in field 2.

Write the number of the first receipt written in field 2A and the number of the last written in field 2B.

3. Add up the amount of payments received today and write this amount in field 3.

Separate the payments into the amount received as checks and write this in field 3A.

The payments received as cash should be written in field 3B.

Visa / Mastercard payments in field 3C.

4. Write the total received in field 4.
5. Place the total payments in the locked bag, lock securely and attach this form to the outside of the bag with a rubberband.
6. Locked bag must be delivered by courier to billing office personnel.