## **MANTILLA MEDICAL PTY LTD**

PO BOX 736 KOTARA NSW 2285 Phone # 02-40170797 Fax # 02-82143471

**Date** 1/09/2015 **Invoice #** 129

Tax Invoice

ABN: 43 152 083 997

## **Bill To**

Simplified Billing Services HNE Area Health Locked Bag 1, Waratah Campus Hunter Regional Mail Centre NSW 2310

## **Patients Name**

MAXWELL,Mina MRN 1740999 HCF #09657410

> Provider: Dr Anecito Mantilla Provider No: 4404831H

Site: Cessnock District Hospital

Date Serviced	Tlme	Item	Descript	ion	Amount
21/08/2015	1900	597	Professional attendance by a on not more than 1 patient of each attendance (other than between 11pm and 7am) in a	n the 1 occasion - an attendance	158.50
				Total	\$158.50
				Payments/Credits	\$0.00
				Balance Due	\$158.50

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