# Clear View Eye Care

**Invoice**

3600 Gaylord Pkwy, Suite 90 · Katy, TX 77034
(713) 555-0164 · Tax ID 47-0000007 · NPI 1000000072
Provider: Hannah Liu, OD

Statement date: **09/06/2026**
Account #: **V-14022**
Statement #: **ST-2026-11255**

PATIENT
**Jordan A. Sample**
22 Elmwood Lane
Katy, TX 77034
Date of birth: 03/14/1988

RESPONSIBLE PARTY
**Jordan A. Sample**
Relationship: Self
Plan: Vision (self-pay)
Member ID: SAMPLE-14022

| DATE OF SERVICE | CODE | DESCRIPTION OF SERVICE | CHARGE |
|---|---|---|---|
| 09/05/2026 | 92004 | Comprehensive eye exam — new patient | $135.00 |
| 09/05/2026 | 92310 | Contact lens fitting & evaluation | $95.00 |
| 09/05/2026 | V2500 | Contact lenses — annual supply | $210.00 |

| | |
|---|---|
| Total charges | $440.00 |
| Vision plan paid | -$150.00 |
| Contractual adjustment | -$40.00 |
| **Patient responsibility** | **$250.00** |
| **Patient payment received** | **-$250.00** |
| **Account balance** | **$0.00** |

PAYMENT RECEIVED
Date: 09/05/2026 Method: Visa ending 0213 Amount: $250.00 Status: Paid in full

Itemized statement of vision services and materials actually provided — date of service, procedure/material codes and descriptions, provider, patient, and amount paid out of pocket. Retain for HSA/FSA reimbursement.