

Conscious Completion, Inc.

Laurel Anderson-Rostami, M.A., L.M.H.C.
Licensed Mental Health Counselor # LH00004917
34405 Columbine Lane Polson MT 59806
Phone: (425) 572-0224

Date: _____

The following is a summary of counseling service for:

Client: _____ Date of Birth: _____

Client's Address: _____

Client's Phone # _____ Client's GR# _____

Client's ID# _____

The client/client's parents have paid for all services out of pocket so **any reimbursement(s) by the insurance company need to be made to the client at the client's address.** Any payment received by Conscious Completion, Inc. shall be returned to the insurance carrier.

Service Date	Service Code	Diagnostic Code	Amount Billed	Amount Paid	Balance Owed

I certify that this report is correct.

Laurel Anderson-Rostami, M.A., L.M.H.C.
Conscious Completion, Inc. EIN 32 0117291