

Receipt for Services

Jacqueline Renda, LCSW-R, 210 Emerson St., Port Jefferson, NY 11777 • (631) 905-6708
NYS License #R039200-1 • CAQH #12439090 • EIN 460992846 • NPI #1700087434

Patient Information:

Name:

Date of Birth:

Address:

Diagnosis:

Date of Service	Description of Service	Fee (in USD)	Amount Paid (in USD)	Code
	Initial Assessment/Office Visit	\$		
	Individual Psychotherapy/Office Visit	\$		
	Individual Psychotherapy/Office Visit	\$		
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	Individual Psychotherapy/Office Visit	\$		
	Individual Psychotherapy/Office Visit	\$		

Signature:



Date:

Total	\$
Amount Paid	\$
Balance Due	\$