

MEDICAL EXPENSE TRACKER

Year: 2024

TOTAL ANNUAL DEDUCTIBLE

\$0.00

OUT-OF-POCKET MAX

\$0.00

YTD TOTAL SPENT

\$0.00

DATE	PROVIDER / FACILITY	SERVICE DESCRIPTION	INSURANCE	AMOUNT PAID
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DATE	PROVIDER / FACILITY	SERVICE DESCRIPTION	INSURANCE	AMOUNT PAID
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			SUBTOTAL	\$
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NOTES & INSURANCE CLAIMS PENDING