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Balboa Pediatrics' Annual Administrative Family Plan Agreement

I have read and agree to Balboa Pediatrics' annual administrative family plan fee. I understand that this fee is for non-clinical administrative services which are not covered or reimbursable by my insurance plan.

The cost of the annual administrative fee is:

Families with one child: \$100 per year

Families with two or more children: \$200 per year

This fee will be due in full at the first visit of 2022 and will renew on that date every year thereafter.

If you would like to pay the fee in advance, it will still begin at the first visit of 2022 and renew on that date every year thereafter.

Please list your child/children below and their primary doctor (PCP):

Child's Name: _____ Date of Birth: _____ PCP _____

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Child's Name: _____ Date of Birth: _____ PCP _____

Childs's Name: _____ Date of Birth: _____ PCP _____

Childs's Name: _____ Date of Birth: _____ PCP _____

Enclosed is my payment of \$ _____

- Check (make payable to child's PCP)
- Credit/Debit card

Name on card: _____

Credit Card #: _____

Exp Date: _____

Security Code: _____

Billing Zip Code: _____

Print Name: _____ Relationship: _____

Phone Number: _____

Signature: _____ Date: _____

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