

**Sample Physical Rehab**  
**OCF21(B,C) Invoices by OCF Document(18,23) Reply Status**

Invoice Sent Date Between 14-Sep-2012 and 14-Sep-2017

Patient Name			Date of Loss	Referral		MVA Insurer		Adjuster		Claim No.
Invoice No	Version	Create Date	Sent Date	Invoice Status	OCF Plan Type	Plan Category	Plan Replied As	Inv.Total	Paid/WriteOff	Outstanding
<b>Anidjar, Juana</b>			<b>22-Nov-2006</b>			<b>Allianz Insurance Company of Canada</b>		<b>Wats</b>		<b>AB039489</b>
1149	B	26-May-2007	24-Jan-2013	Sent	OCF18-3			\$1,815.07	\$1,815.07	\$0.00
1164	B	14-Dec-2010	24-Jan-2013	Pending	OCF18-6	Chronic Pain		\$327.44	\$327.44	\$0.00
1165	B	14-Dec-2010	24-Jan-2013	Not Approved	OCF18-6	Chronic Pain		\$133.08	\$56.00	\$77.08
1178	B	05-Aug-2006	24-Jan-2013	Approved				\$678.98	\$678.98	\$0.00
1197	C	03-Jan-2013	24-Jan-2013	Not Approved				\$50.00	\$0.00	\$50.00
1231	B	01-Apr-2016	28-Nov-2016	Partially Approved	OCF18-2		Approved	\$127.44	\$0.00	\$127.44
<b>Total</b>								<b>\$3,132.01</b>	<b>\$2,877.49</b>	<b>\$254.52</b>

<b>Anisimov, Jenny</b>			<b>24-Oct-2011</b>							
1183	C	24-Oct-2011	24-Jan-2013	Approved	OCF23-1			\$825.78	\$25.00	\$800.78
1184	B	25-Oct-2011	24-Jan-2013	Not Approved				\$163.52	\$25.00	\$138.52
<b>Total</b>								<b>\$989.30</b>	<b>\$50.00</b>	<b>\$939.30</b>

<b>Cagar, Nicola</b>			<b>16-Jan-2007</b>			<b>Aviva Canada Inc.</b>		<b>McDonald</b>		<b>BR571072</b>
1240	B	22-Nov-2016	22-Nov-2016	Successfully Delivered	OCF18-6	CHIRO -1	Approved	\$327.44	\$0.00	\$327.44
<b>Total</b>								<b>\$327.44</b>	<b>\$0.00</b>	<b>\$327.44</b>

<b>Reed, Kevin</b>			<b>29-Jan-2015</b>							
1219	B	29-Jan-2015	12-Dec-2014	Approved				\$360.73	\$0.00	\$360.73
<b>Total</b>								<b>\$360.73</b>	<b>\$0.00</b>	<b>\$360.73</b>

<b>Ryan, Mariam</b>			<b>01-Dec-2014</b>			<b>American Bankers Insurance Company of Florida</b>		<b>Smith</b>		<b>CN987-001</b>
1242	B	09-Dec-2014	09-Dec-2014	Approved				\$63.72	\$63.72	\$0.00
1321	C	17-Mar-2015	03-Mar-2015	Sent	OCF23-1		Approved	\$1,950.00	\$750.00	\$1,200.00
1401	B	24-Nov-2016	27-Mar-2015	Approved	OCF18-1	Neurological	Partially Approved	\$576.56	\$223.56	\$353.00
<b>Total</b>								<b>\$2,590.28</b>	<b>\$1,037.28</b>	<b>\$1,553.00</b>

<b>GRAND TOTAL</b>								<b>\$7,399.76</b>	<b>\$3,964.77</b>	<b>\$3,434.99</b>
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