

ATTN: Bella

2 pages

HISTORICAL STATEMENT

11/22/2010 to 4/30/2011

Telephone: (212) 688-1090

Thomas J. Magnani D.D.S.
Alvin Grayson D.D.S.
7 West 51st Street
7th Floor
New York NY 10019

Mr. Jeff Epstein
301 East 86th Street
Apt 10F
New York NY 10065

| Date | Account |
|-----------|---------|
| 5/12/2011 | 9648 |

| Date | Patient | Description | Charges | Credits | Balance |
|------------|---------|-------------------------|----------|----------|-----------|
| | | Previous Balance | | | 0.00 |
| 11/22/2010 | | FMS with Bite wings | 175.00 | | 175.00 |
| 11/22/2010 | | Amalgam 1 Surface Perm. | 325.00 | | 500.00 |
| 11/22/2010 | | Amalgam 3 Surface Perm. | 375.00 | | 875.00 |
| 12/13/2010 | | Comp. W. Etch 1 Surface | 275.00 | | 1,150.00 |
| 12/13/2010 | | Comp. W. Etch 1 Surface | 275.00 | | 1,425.00 |
| 12/14/2010 | | Comprehensive Oral eval | 50.00 | | 1,475.00 |
| 12/14/2010 | | Adult Scale & Prophy | 160.00 | | 1,635.00 |
| 12/17/2010 | | MASTER CARD | | 1,425.00 | 210.00 |
| 12/20/2010 | | Porcelain W. Gold Crown | 1,850.00 | | 2,060.00 |
| 1/7/2011 | | Epoestal Implant | 2,300.00 | | 4,360.00 |
| 1/7/2011 | | Epoestal Implant | 2,300.00 | | 6,660.00 |
| 1/14/2011 | | Office Visit | 0.00 | | 6,660.00 |
| 1/21/2011 | | MASTER CARD | | 1,850.00 | 4,810.00 |
| 1/25/2011 | | Porcelain W. Gold Crown | 1,850.00 | | 6,660.00 |
| 2/10/2011 | | 1 Periapical X Ray | 25.00 | | 6,685.00 |
| 3/2/2011 | | Amalgam 2 Surface Perm. | 375.00 | | 7,060.00 |
| 4/21/2011 | | Abutment Placement | 925.00 | | 7,985.00 |
| 4/21/2011 | | Abutment Placement | 925.00 | | 8,910.00 |
| 4/21/2011 | | Porcelain W. Gold Crown | 1,900.00 | | 10,810.00 |

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Continued

| | | | | |
|---------|---------|---------|---------|-----------|
| Current | 30 Days | 60 Days | 90 Days | 120+ Days |
| | | | | |

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| Date | Patient | Description | Charges | Credits | Balance |
|----------------|----------------|-------------------------|----------------|------------------|-----------------------------------|
| 4/21/2011 | [REDACTED] | Porcelain W. Gold Crown | 1,900.00 | | 12,710.00 |
| Page 2 | | | | | Account Total 12,710.00 |
| | | | | | Patient Charges 15,985.00 |
| | | | | | Patient Payments 3,275.00- |
| | | | | | Patient Credits 0.00 |
| | | | | | Patient Debits 0.00 |
| Current | 30 Days | 60 Days | 90 Days | 120+ Days | |
| | | | | | |