

NATIONAL RECOVERY AGENCY

2491 Paxton Street, Harrisburg PA 17111
Toll Free: 800-360-4319

PIN # XXXX

NRA ID:

TOTAL DUE: \$1,720.00

Smyrna, DE 19977-9679

Dear

Your account has been forwarded to this office for collections.

THIS COMMUNICATION IS FROM A DEBT COLLECTOR. THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

Unless you notify this office within 30 days after receiving this notice that you dispute the validity of this debt or any portion thereof, this office will assume this debt is valid. If you notify this office in writing within 30 days from receiving this notice that you dispute the validity of this debt, or any portion thereof, this office will obtain verification of the debt or obtain a copy of a judgment and mail you a copy of such judgment or verification. If you request of this office in writing within 30 days after receiving this notice, this office will provide you with the name and address of the original creditor, if different from the current creditor.


Unless you dispute this debt, your payment should be made directly to this office. Please choose one of the following methods of payment. Please note that a service charge of twenty dollars will be added to all checks returned to us by your bank as permitted by law.


Below is a breakdown of accounts that make up the total amount due listed above.


<u>CREDITOR</u>	<u>ACCOUNT #</u>	<u>DATE</u>	<u>AMOUNT</u>	<u>COSTS</u>	<u>AMT OWED</u>
ALLIED DIAGNOSTIC PATHOLOGY CONS		07/19/19	1,720.00	.00	1,720.00

NOTICE: PLEASE SEE PAGE 2 FOR IMPORTANT NOTICES AND CONSUMER RIGHTS.

PAYMENT OPTIONS

 **Telephone Hours:**
Monday – Thursday 8:00 A.M. to 8:30 P.M.
Friday 8:00 A.M. to 5:00 P.M.
Saturday 8:00 A.M. to 12:30 P.M.
Eastern Standard Time
800-360-4319

 **Send Mail To:**
NATIONAL RECOVERY AGENCY
PO BOX 67015
HARRISBURG, PA 17106-7015

 **Via Internet:**
Pay online by credit card
or check at
www.nationalrecovery.com

Calls to or from NATIONAL RECOVERY AGENCY may be recorded or monitored.

To ensure proper credit to your account please detach bottom portion and return it with payment in the enclosed envelope.

PO Box 67015
Harrisburg, PA 17106-7015

IF PAYING BY CREDIT CARD, FILL OUT BELOW.		
 <input type="checkbox"/> VISA	 <input type="checkbox"/> MasterCard	
CARD NUMBER	SECURITY/CW2 CODE	
SIGNATURE	EXP. DATE	
TOTAL DUE \$1,720.00	\$ PAYMENT AMOUNT	NRA ID# XXXXXXXXXX
For Online Payments visit www.nationalrecovery.com		

Toll Free: 800-360-4319
Statement Date: January 31, 2020

MAKE PAYMENT AND REMIT TO:



Smyrna, DE 19977-9679



NATIONAL RECOVERY AGENCY
PO Box 67015
Harrisburg, PA 17106-7015

CALIFORNIA RESIDENTS

The state Rosenthal Fair Debt Collection Practices Act and the Federal Fair Debt Collection Practices Act require that, except under unusual circumstances, collectors may not contact you before 8 a.m. or after 9 p.m. They may not harass you by using threats of violence or arrest or by using obscene language. Collectors may not use false or misleading statements or call you at work if they know or have reason to know that you may not receive personal calls at work. For the most part, collectors may not tell another person, other than your attorney or spouse, about your debt. Collectors may contact another person to confirm your location or enforce a judgment. For more information about debt collection activities, you may contact the Federal Trade Commission at 1-877-FTC-HELP or www.ftc.gov. Non Profit Counseling services may be available in your area.

CALIFORNIA AND UTAH RESIDENTS:

As required by law, you are hereby notified that a negative credit report reflecting on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligations. But we will not submit a negative credit report to a credit reporting agency about this credit obligation until the expiration of the time period described in the first notice you received from us.

COLORADO RESIDENTS

FOR INFORMATION ABOUT THE COLORADO FAIR DEBT COLLECTION PRACTICES ACT, SEE WWW.COAG.GOV/CAR. A CONSUMER HAS THE RIGHT TO REQUEST IN WRITING THAT A DEBT COLLECTOR OR COLLECTION AGENCY CEASE FURTHER COMMUNICATION WITH THE CONSUMER. A WRITTEN REQUEST TO CEASE COMMUNICATION WILL NOT PROHIBIT THE DEBT COLLECTOR OR COLLECTION AGENCY FROM TAKING ANY OTHER ACTION AUTHORIZED BY LAW TO COLLECT THE DEBT. YOU MAY CONTACT OUR OFFICE AT; ASSOCIATED COLLECTION AGENCIES INC., 27 NORTH WILLERUP, SUITE B, MONTROSE, CO 81401 OR BY TELEPHONE AT 970-249-7514.

MASSACHUSETTS RESIDENTS:

MASSACHUSETTS RESIDENTS MAY CONTACT OUR OFFICE BY TELEPHONE AT THE NUMBER, OFFICE HOURS, AND ADDRESS LISTED ON THE FRONT OF THIS NOTICE OR TO 155 FEDERAL STREET, SUITE 700, BOSTON, MA 02110.

NOTICE OF IMPORTANT RIGHTS

YOU HAVE THE RIGHT TO MAKE A WRITTEN OR ORAL REQUEST THAT TELEPHONE CALLS REGARDING YOUR DEBT NOT BE MADE TO YOU AT YOUR PLACE OF EMPLOYMENT. ANY SUCH ORAL REQUEST WILL BE VALID FOR ONLY TEN DAYS UNLESS YOU PROVIDE WRITTEN CONFIRMATION OF THE REQUEST POSTMARKED OR DELIVERED WITHIN SEVEN DAYS OF SUCH REQUEST. YOU MAY TERMINATE THIS REQUEST BY WRITING TO THE COLLECTION AGENCY.

MINNESOTA MEDICAL PATIENTS ONLY:

This collection agency is licensed by the Minnesota Department of Commerce. If you feel that your concerns have not been addressed, please contact National Recovery Agency and allow us the opportunity to try and address your concerns. Or, you have the option to address any concerns with the Minnesota Attorney General's Office, which can be reached at 651-296-3353 or 1-800-657-3787.

NEVADA HOSPITAL PATIENTS:

If the debtor pays or agrees to pay the debt or any portion of the debt, the payment or agreement to pay may be construed as: (1) An acknowledgement of the debt by the debtor, and (2) A waiver by the debtor of any applicable statute of limitations set forth in NRS 11.190 that otherwise precludes the collection of the debt. If the debtor does not understand or has questions concerning his legal rights or obligations relating to the debt, the debtor should seek legal advice. As used in this section, "hospital" has the meaning ascribed to it in NRA 449.012.

NORTH CAROLINA RESIDENTS:

NC Permit Number 113920
EBO Solutions, LLC d/b/a National Recovery Agency located at
3 Crossgate Drive Mechanicsburg, Pa 17050

TENNESSEE RESIDENTS:

This collection agency is licensed by the collection service board of TN Department of Commerce and Insurance, permit number 812.

MEDICAL PATIENTS PLEASE COMPLETE THE INFORMATION BELOW
OR
SEND FRONT/BACK COPY OF INSURANCE CARD

Patient Name: _____		Date of Birth: _____		Primary Insurance	
Guarantor's Name: _____		Date of Birth: _____		Co: _____	
Address: _____		City: _____ State: _____ Zip: _____		Policy #: _____ Group #: _____	
City: _____ State: _____ Zip: _____		Phone #: _____		Address: _____	
Policy Holder Name: _____		Address: _____		City: _____ State: _____ Zip: _____	
Address: _____		City: _____ State: _____ Zip: _____		Effective Date: _____	
City: _____ State: _____ Zip: _____		Phone #: _____		Secondary Insurance	
Policy Holder Name: _____		Address: _____		Co: _____	
Address: _____		City: _____ State: _____ Zip: _____		Policy #: _____ Group #: _____	
City: _____ State: _____ Zip: _____		Phone #: _____		Address: _____	
Policy Holder Name: _____		Address: _____		City: _____ State: _____ Zip: _____	
Address: _____		City: _____ State: _____ Zip: _____		Effective Date: _____	