



Missouri

222 W Gregory Blvd, Ste 120, Kansas City 9200 NE Barry Rd, Ste 110, Liberty 2900 NE 60th St, Ste 206, Gladstone

Kansas

7223 W 95th St, Ste 220 & 300, Overland Park 25255 W. 102nd Terrace, Suite 200, Olathe

Good Faith Estimate

NPI: 1720592330 Tax ID: 81-256-8820			
Client Last Name Client		lame	Date of Birth
_			
Services will be provided at one	of the follo	wing locations:	
7223 W 95th St. Suite 220 Overland Park, KS 66212	7223 W 95th 9	7223 W 95th St. Suite 300 Overland Park, KS 66212	
222 W Gregory Blvd. Suite 120 Kansas City, MO 64114	9200 NE Barry Rd. Suite 110 Liberty, MO 64157		
25255 W. 102nd Terrace, Suite 200, Olathe, Kansas 660	61 2900 NE 60th	n St Suite 206, Gladstone, MO 64119)
Patient Treatment will be one of	the followi	ng:	
Individual Therapy (\$140.00) Family	Therapy (\$1	40.00) Therapy provid	ed by Student Intern (\$60.00)
Diagnosis Code: To be determined	or provided	by request	
Total estimated cost for one year of services:		Total estimated cos services with Studer	_
Weekly (\$140.00 x 52) \$7280.00		Weekly (\$60.00 x 52) \$3120.00	
Bi-Weekly (\$140.00 x 26) \$3640.00		Bi-Weekly (\$60.00 x 26) \$1560.00	
Monthly (\$140.00 x 12) \$1680.00		Monthly (\$60.00 x 12) \$720.00	
By signing you acknowledge that above. This is not a contract.	you have r	eceived and understa	and the Good Faith Estimate
Your Name		Your Relationship	a to Client
Tour Name		c Self c Parent	
			7 Guardian
Client Signature		Date	

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