



PO BOX 58538
Webster, TX 77598
281-694-5986

ELIZABETH M. ACREE
PO BOX 567
SANTA FE, TX 77510-0567

(409)599-3968

Statement Date	Invoice Number	Page
02/10/2025	CLS ACREL000	1
Guarantor	Due Date	Payment Due
ELIZABETH M.	Upon Receipt	130.46

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Date of Last Payment:	12/11/2024	Amount of Last Payment:	-84.55
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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ELIZABETH M. ACREE	ABDELNASER ELKHALILI MD	ACREL000	CLS HEALTH	11/04/1960

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by CIGNA	Adjustments	Remainder
04/28/21	G8427	Dcrev cur meds by elig clin		0.01			0.00		0.01

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ELIZABETH M. ACREE	ABDELNASER ELKHALILI MD	ACREL000	CLS HEALTH	11/04/1960

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by CIGNA	Adjustments	Remainder
01/31/24	99999	NO SHOW		25.00			0.00		25.00

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ELIZABETH M. ACREE	ABDELNASER ELKHALILI MD	ACREL000	CLS HEALTH	11/04/1960

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by CIGNA	Adjustments	Remainder
08/29/23	99213	OFFICE VISIT EST/LEVEL 3	25	272.00			-12.70	-199.30	60.00
08/29/23	J3489	Zoledronic acid 1mg		165.00		-45.45	0.00	-119.55	45.45

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Amount Due

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