



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

TRAVIS ANDERSON  
3905 PRIMROSE PATH  
DEER PARK, TX 77536-6626

(832)707-0695

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDTR001	1
Guarantor	Due Date	Payment Due
TRAVIS	Upon Receipt	50.00

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Date of Last Payment: 10/17/2024	Amount of Last Payment: -22.40
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Patient: TRAVIS ANDERSON	Rendering Physician: ROHIT R. DHIR MD	Chart Number: ANDTR001	Place of Service: CLS HEALTH	Date of Birth: 03/27/1992
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by UNITED	Adjustments	Remainder
12/19/23	99214	OFFICE VISIT EST/LEVEL 4		385.00	-50.00		-42.60	-302.40	-10.00

Patient: TRAVIS ANDERSON	Rendering Physician: ROHIT R. DHIR MD	Chart Number: ANDTR001	Place of Service: CLS HEALTH	Date of Birth: 03/27/1992
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by UNITED	Adjustments	Remainder
02/12/24	99214	OFFICE VISIT EST/LEVEL 4		387.00	-10.00		-20.20	-326.80	30.00
04/15/24	99214	OFFICE VISIT EST/LEVEL 4		387.00	-10.00		-42.60	-304.40	30.00

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