



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

MICHELLE D. ARMOUR  
1543 HATFIELD RD  
PEARLAND, TX 77581-3111

(936)203-6287

Statement Date	Invoice Number	Page
02/10/2025	CLS ARMMI000	1
Guarantor	Due Date	Payment Due
MICHELLE D.	Upon Receipt	15.00

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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
MICHELLE D. ARMOUR	ABDELNASER ELKHALILI MD	ARMMI000	CLS HEALTH	11/15/1968

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
04/27/21	99205	OFFICE VIST NEW LEVEL 5		690.00	-10.00		-229.84	-460.16	-10.00

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
MICHELLE D. ARMOUR	ABDELNASER ELKHALILI MD	ARMMI000	CLS HEALTH	11/15/1968

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
07/12/22	99999	NO SHOW		25.00			0.00		25.00

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Amount Due
15.00