

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

ASHLEY D. ANDREWS 408 LEXINGTON AVE CLUTE, TX 77531-4793

(979)248-4539

Statement Date	Invoice Number	Page	
02/10/2025	CLS ANDAS000	1	
Guarantor	Due Date	Payment Due	

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Date of	Last Paym	ent: 11/	29/2023			Amou	ınt of Last Payı	ment: 0.00	
Patient:			Rendering Pl	hysician:	Chart Number:	Pla	ace of Service:	Date of B	irth:
ASHLEY D. ANDREWS ABDELNAS		ABDELNAS	SER ELKHALILI MD ANDAS000		CLS HEALTH		12/12/1990		
Detec	Dragadura	Decemble	_		Paid By Applied to	Paid by	Paid by TRICARE		
Dates	Procedure	Desciptio	on	Modifier Charge	Patient Deductible	BLUE		Adjustments R	emainaer
12/16/21	99215	OFFICE VISIT E	EST/LEVEL 5	564.00		-97.60	-0.28	-421.40	44.72
02/29/24	99999	NO SHOW		25.00		0.00	0.00		25.00
Patient: ASHLEY	D. ANDRE\	ws	Rendering Ph	•	Chart Number: ANDAS000		ace of Service: S HEALTH	Date of B	
Dates	Procedure	Desciptio	on		Paid By Applied to Patient Deductible	Paid by BLUE		Adjustments R	emainder
05/31/24	99999	NO SHOW		25.00		0.00		•	25.00

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Amount Due

94.72