



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

PAMELA AUTREY
409 OAKS DR
SOUTH HOUSTON, TX 77587-3728

(832)814-6276

Statement Date	Invoice Number	Page
02/10/2025	CLS AUTPA000	1
Guarantor	Due Date	Payment Due
PAMELA AUTREY	Upon Receipt	676.77

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Date of Last Payment: 10/25/2023	Amount of Last Payment: 0.00
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Patient: PAMELA AUTREY	Rendering Physician: MAHMOOD DWEIK MD	Chart Number: AUTPA000	Place of Service: CLEAR LAKE	Date of Birth: 07/27/1958
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by SELF PAY	Adjustments	Remainder
08/25/22	99255	HOSPITAL CONSULT/INITIAL/LEVEL 5		495.00			0.00	-343.18	151.82
08/26/22	99233	HOSPITAL, SUBSEQUENT , HIGH		315.00			0.00	-210.01	104.99
08/29/22	99233	HOSPITAL, SUBSEQUENT , HIGH		315.00			0.00	-210.01	104.99
08/30/22	99233	HOSPITAL, SUBSEQUENT , HIGH		315.00			0.00	-210.01	104.99

Patient: PAMELA AUTREY	Rendering Physician: REGINA PILLAI MD	Chart Number: AUTPA000	Place of Service: CLEAR LAKE	Date of Birth: 07/27/1958
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by TMHP	Adjustments	Remainder
08/27/22	99233	HOSPITAL, SUBSEQUENT , HIGH		315.00			0.00	-210.01	104.99
08/28/22	99233	HOSPITAL, SUBSEQUENT , HIGH		315.00			0.00	-210.01	104.99

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Amount Due
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