



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

CHRISTY C. ANG
16718 SCHOONERS WAY
FRIENDSWOOD, TX 77546-2342

(832)692-1184

Statement Date	Invoice Number	Page
02/10/2025	CLS ANGCH001	1
Guarantor	Due Date	Payment Due
CHRISTY C. ANG	Upon Receipt	491.65

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Date of Last Payment:	6/20/2024	Amount of Last Payment:	0.00
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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
CHRISTY C. ANG	DANNY M. MOUNIR MD	ANGCH001	CLS HEALTH	10/03/1978

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by UNITED	Adjustments	Remainder
10/19/23	99205	OFFICE VIST NEW LEVEL 5	25	664.00	-84.72		-124.95	-504.05	-49.72

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
CHRISTY C. ANG	DANNY M. MOUNIR MD	ANGCH001	BAYSHORE	10/03/1978

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by UNITED	Adjustments	Remainder
10/31/23	57425	LAPAROSCOPY SURG COLPOPEXY		2,981.0			-615.30	-2,160.60	205.10
10/31/23	58571	TLH W/T/O 250 G OR LESS		2,785.0			-317.89	-2,361.75	105.36
10/31/23	57260	Cmbn ant pst colprhy		2,392.0			-248.85	-2,060.20	82.95
10/31/23	57288	Repair bladder defect		2,275.0			-261.45	-1,926.40	87.15

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
CHRISTY C. ANG	JIRIES S. DAHU MD	ANGCH001	BAYSHORE	10/03/1978

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by UNITED	Adjustments	Remainder
11/01/23	99223	1ST HOSP IP/OBS HIGH 75		523.00			-118.39	-365.15	39.46
11/02/23	99239	HOSP IP/OBS DSCHRG MGMT >30		345.00			-64.05	-259.60	21.35

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Amount Due

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