



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

CESAR ALVAREZ MUNOZ  
2727 NASA PKWY APT (Range 606)  
SEABROOK, TX 77586-3241

(469)626-2924

Statement Date	Invoice Number	Page
02/10/2025	CLS ALVCE000	1
Guarantor	Due Date	Payment Due
CESAR ALVAREZ	Upon Receipt	366.14

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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
CESAR ALVAREZ MUNOZ	EMRAN ABU ATHERAH MD	ALVCE000	UTMB	03/03/1999

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by SELF PAY	Adjustments	Remainder
01/09/22	99220	Observation, Initial - High Severity		550.00			0.00	-366.64	183.36

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
CESAR ALVAREZ MUNOZ	NISARG PATEL MD	ALVCE000	UTMB	03/03/1999

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by SELF PAY	Adjustments	Remainder
01/10/22	99232	HOSPITAL , SUBSEQUENT, MOD		219.00			0.00	-145.34	73.66
01/11/22	99239	HOSPITAL DISCHARGE, LONG		324.00			0.00	-214.88	109.12

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Amount Due
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