



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

ISABELL C. AMARO
707 BONANZA RD
HOUSTON, TX 77062-5601

(708)307-4989

Statement Date	Invoice Number	Page
02/10/2025	CLS AMAIS000	1
Guarantor	Due Date	Payment Due
ISABELL C.	Upon Receipt	295.31

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PO BOX 58538
Webster, TX 77598

Date of Last Payment:	11/12/2024	Amount of Last Payment:	-175.62
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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ISABELL C. AMARO	ABDELNASER ELKHALILI MD	AMAIS000	CLS HEALTH	02/14/1967

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MOLINA	Adjustments	Remainder
02/08/21	99215	OFFICE VISIT EST/LEVEL 5		564.00	-10.00		-94.83	-469.17	-10.00
10/21/21	99215	OFFICE VISIT EST/LEVEL 5		564.00	-10.00		-94.83	-469.17	-10.00

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ISABELL C. AMARO	MOUSTAFA M. AHMED MD	AMAIS000	CLS HEALTH	02/14/1967

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MOLINA	Adjustments	Remainder
01/04/21	99999	NO SHOW		25.00			0.00		25.00
04/05/21	99999	NO SHOW		25.00			0.00		25.00
05/25/21	99999	NO SHOW		25.00			0.00		25.00
07/12/21	99214	OFFICE VISIT EST/LEVEL 4	25	404.00	-10.00		-129.57	-269.43	-5.00
08/05/21	99214	OFFICE VISIT EST/LEVEL 4	25	404.00	-10.00		-129.57	-269.43	-5.00

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ISABELL C. AMARO	MOUSTAFA M. AHMED MD	AMAIS000	CLS HEALTH	02/14/1967

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MOLINA	Adjustments	Remainder
07/12/21	G0481	Drug test def 8-14 classes		470.00			-136.00	-329.00	5.00
08/05/21	G0481	Drug test def 8-14 classes		470.00			-136.00	-329.00	5.00

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Amount Due

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