Statement Date	Chart Number	Page		
03/04/2025	ACURA000	1		

Shariq J. Rauf, MD, PA PO BOx 590104 Houston, TX 77259-0104

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RAFAELA ACUNA 711 PITTS AVE PASADENA, TX 77506-1334

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Make Checks Payable To:

Date of Last Payment: 1/9/2025 Amount of Last Payment: -111.19										
Patient: Renderir			g Physician:		Chart Number:		Place of Service	Date o	Date of Birth	
RAFAEL	A ACUNA	JAMIE L.	L. REBANDO FNP			CURA000 BAYSHORE		08/29/1985		
					Paid By	Applied to	Paid by			
Dates	Procedure	Desciption	Modifier	Charge	Patient	Deductible	AETNA	Adjustments	Remainder	
10/13/24	99255	INITIAL CONSULT LEVEL 5		495.00			-191.19	-256.01	47.80	
Patient	:	Rendering P	hysician:		Cha	art Number:	Place of Service	Date o	f Birth	
RAFAELA ACUNA		SHARIQ J	. RAUE	F MD	ACURA000		BAYSHORE	08/29/	08/29/1985	
					Paid By	Applied to	Paid by			
Dates	Procedure	Desciption	Modifier	Charge	Patient	Deductible	AETNA	Adjustments	Remainder	
10/14/24	99233	SUBSQT HOSP-DAY E&M SIG CMF	PL	357.00			-111.19	-218.01	27.80	

Amount Due

75.60