Statement Date	Chart Number	Page		
03/04/2025	GIBAM001	1		

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

Phone: 281-942-8005

AMBER D. GIBSON 10927 WALTS RUN LN CYPRESS, TX 77433-5283

(281)737-1555

Make Checks Payable To:					
Shariq J. Rauf, MD, PA					
P.O. Box 590104					
Houston, TX 77259-0104					
Phone: 281-942-8005					

Date of	of Last Pay	ment: 1/1 '	7/2025	Amc	ount of L	ast Pay	ment: -105.3	36		
Patient	:		Rendering F	Physician:		Cha	art Number:	Place of Service:	Date of	Birth
AMBER I	D. GIBS	ON	SHARIQ	J. RAUF	' MD	GIE	3AM001	SHARIQ J	10/07/	1986
						Paid By	Applied to	Paid by		
Dates	Procedure	Desciption		Modifier	Charge	Patient	Deductible	BLUE	Adjustments	Remainder
12/19/24	99204	OFC/OUTPT E8	&M NEW MOD-HI	45	507.00			-105.36	-351.64	50.00

Amount Due 50.00