Statement Date	Chart Number	Page		
03/04/2025	MCWJ0000	1		

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

Phone: 281-942-8005

JOE M. MCWHORTER
2300 WARD BEND RD TRLR 834
SEALY, TX 77474-7975

(281)451-5585

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

Date	Date of Last Payment: 2/26/2025 Amount of Last Payment: -87.36												
Patient	:		Rendering F	hysician:		Cha	art Number:	Р	lace of Service:	Date of	f Birth		
JOE M.	MCWHOR	TER	SHARIQ .	J. RAUE	MD	MCWJO000		Houston		11/20/1956			
						Paid By	Applied to	Paid by					
Dates	Procedure	Desciption		Modifier	Charge	Patient	Deductible	AMERIGR		Adjustments	Remainder		
01/19/25	99233	SUBSQT HOSP	-DAY E&M SIG CM	1PL	351.87			-87.36		-242.22	22.29		

Amount Due

22.29