



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

BRIAN ALDESON
1633 WEBSTER ST
LEAGUE CITY, TX 77573-5685

(832)272-6839

Statement Date	Invoice Number	Page
02/10/2025	CLS ALDBR000	1
Guarantor	Due Date	Payment Due
BRIAN ALDESON	Upon Receipt	815.51

Pay Online	
Go to: cls.health/payment or scan the QR Code	
Make Checks Payable To:	
CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment:		Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
BRIAN ALDESON	LUIGI TERMINELLA MD	ALDBR000	UTMB	03/08/1978

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
					Patient	Deductible	TMHP		
06/09/21	99291	CRITICAL CARE 1ST HOUR		678.00			0.00	-388.18	289.82
06/09/21	99292	CRITICAL CARE, 30 MIN		340.00			0.00	-213.25	126.75
06/10/21	99291	CRITICAL CARE 1ST HOUR		678.00			0.00	-388.18	289.82
06/11/21	99239	HOSPITAL DISCHARGE, LONG		327.00			0.00	-217.88	109.12

Have a question about your balance, or need to update your insurance information with us?

Call 281-694-5986

To make a payment online, go to cls.health/payment

If remitting payment via mail in check, Please include statement.

Amount Due
815.51