



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

JOSE ACEVES  
206 HAFER ST  
BAYTOWN, TX 77520-3027

(832)414-5139

Statement Date	Invoice Number	Page
02/10/2025	CLS ACEJO002	1
Guarantor	Due Date	Payment Due
JOSE ACEVES	Upon Receipt	25.00

Pay Online	
Go to: <a href="https://cls.health/payment">cls.health/payment</a> or scan the QR Code	
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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:	
JOSE ACEVES	ABDELNASER ELKHALILI MD	ACEJO002	CLS HEALTH	11/08/1996	
Dates	Procedure	Description	Modifier Charge	Paid By Applied to Patient Deductible	Paid by IMAGINE Adjustments Remainder
09/05/23	99999	NO SHOW	25.00	0.00	25.00

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

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

Amount Due
<b>25.00</b>