



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

ELIZABETH ALANIS
11518 STAGELINK
HOUSTON, TX 77089-4432

(832)985-8313

| Statement Date | Invoice Number | Page |
|----------------|----------------|-------------|
| 02/10/2025 | CLS ALAEL001 | 1 |
| Guarantor | Due Date | Payment Due |
| ELIZABETH | Upon Receipt | 34.81 |

| 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: 4/19/2023 | | | Amount of Last Payment: -0.07 | | |
|---------------------------------|----------------------|---------------|-------------------------------|----------------|--|
| Patient: | Rendering Physician: | Chart Number: | Place of Service: | Date of Birth: | |
| ELIZABETH ALANIS | OMAR ALBUSTAMI MD | ALAEL001 | CLS HEALTH | 04/14/1969 | |

| Dates | Procedure | Description | Modifier | Charge | Paid By | Applied to | Paid by | Adjustments | Remainder |
|----------|-----------|------------------------------|----------|--------|---------|------------|---------|-------------|-----------|
| | | | | | Patient | Deductible | BRIGHT | | |
| 11/21/22 | 94060 | Evaluation of wheezing | | 123.00 | | | -35.62 | -78.47 | 8.91 |
| 11/21/22 | 94726 | Pulm funct tst plethysmograp | | 172.00 | | | -49.84 | -109.70 | 12.46 |
| 11/21/22 | 94729 | Co/membrane diffuse capacity | | 185.00 | | | -53.74 | -117.82 | 13.44 |

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 |
|--------------|
| 34.81 |