



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

ROSA C. ALFARO  
2303 KINGFISH RD  
TEXAS CITY, TX 77591-9202

(832)580-6452

| Statement Date | Invoice Number | Page        |
|----------------|----------------|-------------|
| 02/10/2025     | CLS ALFRO002   | 1           |
| Guarantor      | Due Date       | Payment Due |
| ROSA C. ALFARO | Upon Receipt   | 21.55       |

| Pay Online  |   |
|---|---|
| Go to: <a href="https://cls.health/payment">cls.health/payment</a><br>or scan the QR Code |  |
| Make Checks Payable To:   |   |
| CLS HEALTH PLLC<br>PO BOX 58538<br>Webster, TX 77598                                      |   |

|                                  |                                 |
|----------------------------------|---------------------------------|
| Date of Last Payment: 10/22/2024 | Amount of Last Payment: -111.93 |
|----------------------------------|---------------------------------|

|                            |   |                           |                                 |                              |
|----------------------------|---|---------------------------|---------------------------------|------------------------------|
| Patient:<br>ROSA C. ALFARO | Rendering Physician:<br>AHMED A. MORSY MD | Chart Number:<br>ALFRO002 | Place of Service:<br>CLS HEALTH | Date of Birth:<br>03/23/1969 |
|----------------------------|---|---------------------------|---------------------------------|------------------------------|

| Dates    | Procedure | Description        | Modifier | Charge | Paid By Patient | Applied to Deductible | Paid by Ambetter | Adjustments | Remainder |
|----------|-----------|--------------------|----------|--------|-----------------|-----------------------|------------------|-------------|-----------|
| 06/06/23 | 73130     | X-ray exam of hand | LT       | 112.00 | -23.01          |                       | -22.82           | -79.40      | -13.23    |
| 06/06/23 | 73130     | X-ray exam of hand | RT       | 112.00 |                 |                       | -22.82           | -79.40      | 9.78      |

|                            |   |                           |                                 |                              |
|----------------------------|---|---------------------------|---------------------------------|------------------------------|
| Patient:<br>ROSA C. ALFARO | Rendering Physician:<br>AHMED A. MORSY MD | Chart Number:<br>ALFRO002 | Place of Service:<br>CLS HEALTH | Date of Birth:<br>03/23/1969 |
|----------------------------|---|---------------------------|---------------------------------|------------------------------|

| Dates    | Procedure | Description | Modifier | Charge | Paid By Patient | Applied to Deductible | Paid by Ambetter | Adjustments | Remainder |
|----------|-----------|-------------|----------|--------|-----------------|-----------------------|------------------|-------------|-----------|
| 03/12/24 | 99999     | NO SHOW     |          | 25.00  |                 |                       | 0.00             |             | 25.00     |

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](https://cls.health/payment)

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

| Amount Due |
|------------|
| 21.55      |