

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

ABDUL ABDELLATIF 3426 PIN OAK SHADOW LN HOUSTON, TX 77059-3308

Rendering Physician:

(281)726-6171

Date of Last Payment: 10/23/2023

Patient:

Statement Date	Invoice Number	Page	
02/10/2025	CLS ABDAB000	1	
Guarantor	Due Date	Payment Due	

Pay Online	
Go to: cls.health/payment or scan the QR Code	

**Make Checks Payable To:** 

Date of Birth:

**CLS HEALTH PLLC** PO BOX 58538 Webster, TX 77598

Place of Service:

Amount of Last Payment: 0.00

ABDUL A	BDELLATII	ZEID F.	KARADSHEH MD	ABDAB000	BAY AREA	10/18/1971
				Paid By Applied to	Paid by	
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	ENTRUST	Adjustments Remainder

Chart Number:

Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by ENTRUST	Adjustment	s Remainder
09/05/23	45380	Colonoscopy and biopsy	602.00	-205.69	0.00	-396.31	205.69

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

205.69