



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

ANA M. ALCOCER
102 SHIRLEEN DR
SEABROOK, TX 77586-5422

(832)247-4621

Statement Date	Invoice Number	Page
02/10/2025	CLS ALCAN001	1
Guarantor	Due Date	Payment Due
ANA M. ALCOCER	Upon Receipt	110.27

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: 6/26/2024			Amount of Last Payment: -55.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
ANA M. ALCOCER	MAHMOOD DWEIK MD	ALCAN001	CLS HEALTH	06/16/1962	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
08/30/22	95810	Polysom 6/> yrs 4/> param		1,918.0	-20.00		-661.64	-1,182.84	53.52
09/26/22	95811	Polysom 6/> yrs cpap 4/> parm		2,002.0	-20.00	-76.75	-690.73	-1,234.52	56.75

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
110.27