

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

ABDULKARIM ALLAOU 9100 GALVESTON RD HOUSTON, TX 77034-3924

(281)282-0666

Date of Last Payment: 1/29/2024

Statement Date	Invoice Number	Page		
02/10/2025	CLS ALLAB000	1		
Guarantor	Due Date	Payment Due		

Pay Online	
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Make Checks Payable To:

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Amount of Last Payment: -25.00

Patient: Rendering		Rendering P	hysician:	Chart Number:	Place of Service:	Date of Birth:	
ABDULK	ARIM ALL	AOU MAHMOOD	DWEIK MD	ALLAB000	CLS HEALTH	04/30/19	43
				Paid By Applied to	Paid by		
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	CASH	Adjustments Remainder	
01/29/24	99244	OFFICE CONSULTATION/LEVEL 4	374.00	-25.00	0.00	-274.00	75.00

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

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

Amount Due

75.00