



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

SAMANTHA ALBRITTON
420 N ASHBEL ST
BAYTOWN, TX 77520-4002

(346)574-2538

Statement Date	Invoice Number	Page
02/10/2025	CLS ALBSA001	1
Guarantor	Due Date	Payment Due
SAMANTHA	Upon Receipt	113.88

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: 2/13/2024			Amount of Last Payment: -100.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
SAMANTHA ALBRITTON	ROBERT A. DARLING MD	ALBSA001	CLS HEALTH	05/21/1980	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
01/31/24	99204	OFFICE VIST NEW LEVEL 4	25	507.00	-100.00	-125.98	0.00	-381.02	25.98
01/31/24	31575	Diagnostic laryngoscopy		389.00		-104.36	0.00	-284.64	104.36
02/13/24	99214	OFFICE VISIT EST/LEVEL 4		387.00	-100.00	-83.54	0.00	-303.46	-16.46

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
113.88