



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

RAYMOND ALDAZ  
2922 14TH AVE N  
TEXAS CITY, TX 77590-5108

(409)256-7510

Statement Date	Invoice Number	Page
02/10/2025	CLS ALDRA000	1
Guarantor	Due Date	Payment Due
RAYMOND ALDAZ	Upon Receipt	137.61

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

Date of Last Payment:		Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
RAYMOND ALDAZ	MAAMOUN A. HARMOUCH	ALDRA000	MAINLAND	05/18/1990

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
10/06/21	99219	Observation, Initial - Moderate Severity		413.00		Patient Deductible	SELPAY	-275.39	137.61

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
<b>137.61</b>