



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

DIOSDADO ARAFET
2800 Mustang Rd Apto 405
ALVIN, TX 77511-4811

(346)253-7091

Statement Date	Invoice Number	Page
02/10/2025	CLS ARADI000	1
Guarantor	Due Date	Payment Due
DIOSDADO	Upon Receipt	10.00

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: 2/25/2021			Amount of Last Payment: -130.71		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
DIOSDADO ARAFET	MAHMOOD DWEIK MD	ARADI000	CLS HEALTH	11/08/1962	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
01/25/21	99215	OFFICE VISIT EST/LEVEL 5	25	564.00			-130.71	-423.29	10.00

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
10.00