



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

KENNETH D. ALBERTS  
1805 S EGRET BAY BLVD APT 2209  
LEAGUE CITY, TX 77573-6086

(281)832-1097

Statement Date	Invoice Number	Page
02/10/2025	CLS ALBKE000	1
Guarantor	Due Date	Payment Due
KENNETH D.	Upon Receipt	53.00

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

Date of Last Payment: 3/12/2021			Amount of Last Payment: -32.69		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
KENNETH D. ALBERTS	ROHIT R. DHIR MD	ALBKE000	CLS HEALTH	05/26/1959	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
01/21/21	51728	Cystometrogram w/vp	52	1,178.0	-97.00	Patient Deductible	BLUE	-1,019.66	53.00

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](https://cls.health/payment)

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

Amount Due
<b>53.00</b>