

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

NATHANAEL R. ANDERSON 2805 CEDAR RIDGE TRL FRIENDSWOOD, TX 77546-5031

(832)607-9830

**Date of Last Payment:** 

l	Statement Date	Invoice Number	Page		
	02/10/2025	CLS ANDNA002	1		
	Guarantor	Due Date	Payment Due		

Make Checks Payable To:

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Amount of Last Payment: 0.00

Patient:		R	Rendering Pl	hysician:	Chart Number:	Pla	ice of Service:	Date of	Birth:
NATHAN	AEL R. ANI	DERSON R	OBERT A.	DARLING MD	ANDNA002	CL	S HEALTH	03/30/19	981
					Paid By Applied to	Paid by			
Dates Procedure Desciption		Desciption	n Modifier Charge		Patient Deductible	BLUE		Adjustments Remainder	
08/16/23	99204	OFFICE VIST NEW	V LEVEL 4	503.00	-125.98	0.00		-377.02	125.98

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

125.98

Amount Due