

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

ELIZABETH ARREGUIN 10102 SHADOW PINE DR HOUSTON, TX 77070-4722

(832)246-9666

Date of Last Payment:

Statement Date	Invoice Number	Page	
02/10/2025	CLS ARREL002	1	
Guarantor	Due Date	Payment Due	

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

Amount of Last Payment: 0.00

Patient:		Re	ndering Physician:	Chart Number	: Place	e of Service:	Date of Birth:
ELIZABETH ARREGUIN		UIN BA	ASHAR ZLEIK MD	ARREL002	THE HEIGHTS		04/20/1976
				Paid By Applied to	Paid by		
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	Ambetter		Adjustments Remainder
09/25/23	99999	NO SHOW	25.00		0.00		25.00

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

Amount Due

25.00