



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

CHAD ALLEN
2008 AVENUE K REAR
GALVESTON, TX 77550-4662

(409)370-7823

Statement Date	Invoice Number	Page
02/10/2025	CLS ALLCH003	1
Guarantor	Due Date	Payment Due
CHAD ALLEN	Upon Receipt	74.05

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:		Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
CHAD ALLEN	NISARG PATEL MD	ALLCH003	UTMB	07/03/1972

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
01/27/22	99217	OBSERVATION DISCHARGE		220.00		Patient Deductible	SELF PAY	-145.95	74.05

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
74.05