



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

MCKAILEY P. ANDERSON  
5159 DRY HOLLOW DR  
ALVIN, TX 77511-1605

(832)385-0616

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDMC000	1
Guarantor	Due Date	Payment Due
MCKAILEY P.	Upon Receipt	38.21

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: 6/9/2022			Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
MCKAILEY P. ANDERSON	MAHMOOD DWEIK MD	ANDMC000		10/08/2005	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
05/05/22	95806	Sleep study unatt&resp efft		288.00		-38.21	0.00	-249.79	38.21

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>38.21</b>