

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

BRENDA M. ARELLANO 5401 RAMPART ST APT 329 HOUSTON, TX 77081-1321

Rendering Physician:

(915)273-1983

Date of Last Payment: 4/25/2023

Patient:

Statement Date	Invoice Number	Page	
02/10/2025	CLS AREBR000	1	
Guarantor	Due Date	Payment Due	

Pay Online	
Go to: cls.health/payment or scan the QR Code	

Make Checks Payable To:

Date of Birth:

PO BOX 58538 Webster, TX 77598

Place of Service:

Amount of Last Payment: -95.27

BRENDA	M. ARELL	ANO MOHAMI	ED A. KHAL	IL MD	AREBR000	CLS HEALTH	04/05/199	95
					Paid By Applied to	•		
Dates	Procedure	Desciption	Modifie	· Charge	Patient Deductible	Ambetter	Adjustments R	emainder
01/12/23	99205	OFFICE VIST NEW LEVEL 5	Q6	664.00		-221.76	-437.24	5.00
02/09/23	99215	OFFICE VISIT EST/LEVEL 5	Q6	540.00		-179.42	-355.58	5.00

Chart Number:

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

10.00