



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

HERMELINDA M. ARANDA
13413 CORPUS CHRISTI ST
HOUSTON, TX 77015-3801

(281)384-2975

Statement Date	Invoice Number	Page
02/10/2025	CLS ARAHE000	1
Guarantor	Due Date	Payment Due
HERMELINDA M.	Upon Receipt	30.53

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: 10/22/2024	Amount of Last Payment: 0.00
----------------------------------	------------------------------

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
HERMELINDA M. ARANDA	OMAR ALBUSTAMI MD	ARAHE000	CLS HEALTH	01/08/1956

Dates	Procedure	Description	Modifier	Charge	Paid By Applied to Patient Deductible	Paid by WELLMED	Paid by EVERCARE	Adjustments	Remainder
03/01/24	94726	Pulm funct tst plethysmograp		167.00		-37.10	-5.44	-120.44	4.02
03/01/24	94729	Co/membrane diffuse capacity		169.00		-37.44	-8.04	-122.01	1.51

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
HERMELINDA M. ARANDA	AHMED A. MORSY MD	ARAHE000	CLS HEALTH	01/08/1956

Dates	Procedure	Description	Modifier	Charge	Paid By Applied to Patient Deductible	Paid by WELLMED	Paid by EVERCARE	Adjustments	Remainder
04/19/24	99999	NO SHOW		25.00		0.00	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

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

Amount Due
30.53