

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

CLIFFORD B. BABBITT 3815 THONIG RD HOUSTON, TX 77092-6250

(713)882-4847

Date of Last Payment: 2/1/2023

Statement Date	Invoice Number	Page	
02/10/2025	CLS BABCL000 1		
Guarantor	Due Date	Payment Due	

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CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Amount of Last Payment: -276.20

Patient: CLIFFOR	RD B. BABB	Rendering Pl	•	Chart Number: BABCL000	Place of Service: THE HEIGHTS	Date of B 10/16/19	
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible C	Paid by Communi	Adjustments R	Remainder
11/11/22	99223	INITIAL HOSPITAL/HIGH	609.00	-203.15	0.00	-405.85	203.15
11/12/22	99239	HOSPITAL DISCHARGE, LONG	324.00	-107.92	0.00	-216.08	107.92
Patient:		Rendering Pl	hysician:	Chart Number:	Place of Service:	Date of B	3irth:
CLIFFORD B. BABBITT NISARG PATEL MD		TEL MD	BABCL000	THE HEIGHTS	10/16/1966		
				Paid By Applied to	Paid by		
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible C	Communi	Adjustments R	Remainder
01/01/23	99232	HOSPITAL, SUBSEQUENT, MOD	239.00		0.00	-157.50	81.50
01/02/23	99239	HOSPITAL DISCHARGE, LONG	345.00		0.00	-226.98	118.02
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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

510.59