

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

ROUHOLLAH AMINI 25120 PANTHER BEND CT APT 351 SPRING, TX 77380-4237

(424)420-8484

Date of Last Payment: 2/20/2023

	Statement Date	Invoice Number	Page	
	02/10/2025	CLS AMIRO000	1	
_				
	Guarantor	Due Date	Payment Due	

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

Amount of Last Payment: -51.51

Patient: ROUHOL	LAH AMIN		ndering Physician: HIT R. DHIR MD	Chart Number: AMIRO000	Place of Service: CLS HEALTH	Date of Birth: 09/08/1980
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by AETNA	Adjustments Remainder
04/20/22	99992	NO SHOW	50.00		0.00	50.00

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

50.00