



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

RAYMOND ALDAZ
2922 14TH AVE N
TEXAS CITY, TX 77590-5108

(409)256-7510

Statement Date	Invoice Number	Page
02/10/2025	CLS ALDRA000	1
Guarantor	Due Date	Payment Due
RAYMOND ALDAZ	Upon Receipt	137.61

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:		Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
RAYMOND ALDAZ	MAAMOUN A. HARMOUCH	ALDRA000	MAINLAND	05/18/1990

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
10/06/21	99219	Observation, Initial - Moderate Severity		413.00		Patient Deductible	SELPAY	-275.39	137.61

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
137.61