



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

THOMAS O. ANDERSON
11811 GARWOOD DR
MAGNOLIA, TX 77354-1373

(713)828-6358

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDTH003	1
Guarantor	Due Date	Payment Due
THOMAS O.	Upon Receipt	11.06

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: 7/24/2023			Amount of Last Payment: -40.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
THOMAS O. ANDERSON	ROHIT R. DHIR MD	ANDTH003	CLS HEALTH	12/14/1946	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
07/24/23	51798	Us urine capacity measure	Q6	32.00		Patient Deductible	WELLMED	0.00	
								-20.94	11.06

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
11.06