



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

CALVIN ALEXANDER  
5703 BELVEDERE ST  
HOUSTON, TX 77021-3253

(713)742-2978

Statement Date	Invoice Number	Page
02/10/2025	CLS ALECA003	1
Guarantor	Due Date	Payment Due
CALVIN	Upon Receipt	25.00

Pay Online	
Go to: <a href="https://cls.health/payment">cls.health/payment</a> or scan the QR Code	
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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:
CALVIN ALEXANDER	ZEID F. KARADSHEH MD	ALECA003	CLS HEALTH	12/03/1967

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
01/15/24	99999	NO SHOW		25.00			0.00		25.00

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Amount Due
<b>25.00</b>