

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

JEREMY ARVIE 15331 SUMMERLYN POINT LN HOUSTON, TX 77053-2587

Rendering Physician:

ZULFIQAR CHEEMA MD

(346)348-4295

Date of Last Payment:

Patient:

JEREMY ARVIE

Statement Date	Invoice Number	Page		
02/10/2025	CLS ARVJE000	1		
Guarantor	Due Date	Payment Due		

Pay Online	
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Date of Birth:

09/01/1992

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Place of Service:

CLEAR LAKE

Amount of Last Payment: 0.00

							00/01/1002		
Procedure	Desciption	Modifie		• • • •	Paid by SELFPAY		Adjustments	Remainder	
35011	Repair defect of artery	LT	3,106.0		0.00		-2,070.72	1,035.28	
35500	Harvest vein for bypass	LT	979.00		0.00		-652.73	326.27	
99254	HOSPITAL CONSULT, LEVEL 4	57	377.00		0.00		-251.34	125.66	
	35011 35500	35011 Repair defect of artery 35500 Harvest vein for bypass	35011 Repair defect of artery LT 35500 Harvest vein for bypass LT	ProcedureDesciptionModifier Charge35011Repair defect of arteryLT3,106.035500Harvest vein for bypassLT979.00	35011 Repair defect of artery LT 3,106.0 35500 Harvest vein for bypass LT 979.00	ProcedureDesciptionModifier ChargePatient DeductibleSELFPAY35011Repair defect of arteryLT3,106.00.0035500Harvest vein for bypassLT979.000.00	ProcedureDesciptionModifier ChargePatient DeductibleSELFPAY35011Repair defect of arteryLT 3,106.00.0035500Harvest vein for bypassLT 979.000.00	ProcedureDesciptionModifier ChargePatient DeductiblePaid by SEL FPAYAdjustments35011Repair defect of arteryLT 3,106.00.00-2,070.7235500Harvest vein for bypassLT 979.000.00-652.73	

Chart Number:

ARVJE000

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

1,487.21