



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

CYNTHIA ANDERSON
2322 E FAYLE ST
BAYTOWN, TX 77521-1009

(832)206-1731

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDCY000	1
Guarantor	Due Date	Payment Due
CYNTHIA	Upon Receipt	21.50

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: 3/18/2024			Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
CYNTHIA ANDERSON	ZEID F. KARADSHEH MD	ANDCY000	CLS HEALTH	09/18/1969	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
					Patient	Deductible	United		
01/22/24	99204	OFFICE VIST NEW LEVEL 4		507.00		-53.00	-95.55	-379.60	-21.15
02/22/24	99214	OFFICE VISIT EST/LEVEL 4		387.00		-28.00	-61.95	-304.40	-7.35
01/04/24	99999	NO SHOW		25.00			0.00		25.00
10/30/23	99999	NO SHOW		25.00			0.00		25.00

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
21.50