

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

**RUBINA ASHRAF** 5211 HILLBROOK CT APT 502 SUGAR LAND, TX 77479-3860

Rendering Physician:

MOLIANIMAD I DADA MD

(619)964-4535

**Date of Last Payment:** 

DUDINA ACUDAE

Patient:

Statement Date	Invoice Number	Page	
02/10/2025	CLS ASHRU001	1	
Guarantor	Due Date	Payment Due	

Pay Online	
Go to: cls.health/payment or scan the QR Code	

**Make Checks Payable To:** 

Date of Birth:

. . . . . . . . . . . . .

**CLS HEALTH PLLC** PO BOX 58538 Webster, TX 77598

Place of Service:

Amount of Last Payment: 0.00

RUBINA ASHKAF		MOHAMMAD J. BABA MD		ASHRUUU1	OIMB	11/01/1973
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by TMHP	Adjustments Remainder
10/17/22	99233	HOSPITAL, SUBSEQUENT, HIGH	315.00		0.00	-200.30 114.70
10/18/22	99233	HOSPITAL, SUBSEQUENT, HIGH	315.00		0.00	-200.30 114.70

Chart Number:

A CLIDLIANA

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

229.40