



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

ALBERTO AVILA
3203 CHARLES ST
BACLIF, TX 77518-2056

(832)727-8352

Statement Date	Invoice Number	Page
02/10/2025	CLS AVIAL000	1
Guarantor	Due Date	Payment Due
ALBERTO AVILA	Upon Receipt	437.38

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:	Amount of Last Payment: 0.00
-----------------------	------------------------------

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ALBERTO AVILA	EMRAN ABU ATHERAH MD	AVIAL000	UTMB	04/07/1968

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by SELF PAY	Adjustments	Remainder
01/09/22	99220	Observation, Initial - High Severity		550.00			0.00	-366.64	183.36

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ALBERTO AVILA	REMY TEQWIMUAH MD	AVIAL000	UTMB	04/07/1968

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by SELF PAY	Adjustments	Remainder
01/10/22	99232	HOSPITAL , SUBSEQUENT, MOD		219.00			0.00	-145.95	73.05
01/11/22	99232	HOSPITAL , SUBSEQUENT, MOD		219.00			0.00	-145.95	73.05
01/12/22	99239	HOSPITAL DISCHARGE, LONG		324.00			0.00	-216.08	107.92

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
437.38