



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

ARACELI AGUILERA
1533 3RD AVE N
TEXAS CITY, TX 77590-7327

(409)888-0004

| Statement Date | Invoice Number | Page |
|----------------|----------------|-------------|
| 02/10/2025 | CLS AGUAR001 | 1 |
| Guarantor | Due Date | Payment Due |
| ARACELI | Upon Receipt | 50.00 |

| 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: 1/16/2024 | | | | Amount of Last Payment: -100.79 | | | | | |
|---------------------------------|-----------|-------------------------|----------|---------------------------------|---------|-------------------|---------|----------------|-------------|
| Patient: | | Rendering Physician: | | Chart Number: | | Place of Service: | | Date of Birth: | |
| ARACELI AGUILERA | | ZEID F. KARADSHEH MD | | AGUAR001 | | CLS HEALTH | | 03/18/1953 | |
| Dates | Procedure | Description | Modifier | Charge | Paid By | Applied to | Paid by | Paid by | Adjustments |
| 12/07/23 | 99203 | OFFICE VIST NEW LEVEL 3 | | 339.00 | | | WELCARE | TMHP | Remainder |
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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 |
|------------|
| 50.00 |