



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

RUSSELL ACHORD  
1529 1ST AVE N  
TEXAS CITY, TX 77590-8432

(409)683-6494

Statement Date	Invoice Number	Page
02/10/2025	CLS ACHRU001	1
Guarantor	Due Date	Payment Due
RUSSELL	Upon Receipt	123.92

Pay Online	
Go to: <a href="https://cls.health/payment">cls.health/payment</a> or scan the QR Code	
Make Checks Payable To:	
CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment: 11/8/2023			Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
RUSSELL ACHORD	MOUSTAFA M. AHMED MD	ACHRU001	CLS HEALTH	09/23/1968	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
09/04/23	80307	Drug test prsmv chem analyzr	Q6	186.00		-33.52	0.00	-152.48	33.52
09/05/23	G0483	Drug test def 22+ classes	Q6	741.00		-90.40	0.00	-650.60	90.40

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](https://cls.health/payment)

If remitting payment via mail in check, Please include statement.

Amount Due
<b>123.92</b>