



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

KHADIJA M. ALWANI  
913 WALNUT POINTE DR  
LEAGUE CITY, TX 77573-0889

(281)332-2455

Statement Date	Invoice Number	Page
02/10/2025	CLS ALWKH000	1
Guarantor	Due Date	Payment Due
KHADIJA M.	Upon Receipt	292.17

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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:
KHADIJA M. ALWANI	SHAFRAZ MOHAMMED MD	ALWKH000	HOUSTON	05/28/1965

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
					Patient	Deductible	TMHP		
04/22/21	99220	Observation, Initial - High Severity		559.00			0.00	-372.69	186.31
04/23/21	99226	Subsequent observation care		318.00			0.00	-212.14	105.86

Have a question about your balance, or need to update your insurance information with us?

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

Amount Due
<b>292.17</b>