

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

BANESSA AVALOS 1142 CASTELLINA LN HOUSTON, TX 77055-1047

(832)388-5509

Date of Last Payment: 4/16/2024

Patient:

Statement Date	Invoice Number	Page	
02/10/2025	CLS AVABA000	1	
Guarantor	Due Date	Payment Due	

Pay Online	
Go to: cls.health/payment	

Amount of Last Payment: -250.00

or scan the QR Code



Date of Birth:

## Make Checks Payable To:

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Place of Service:

BANESSA	A AVALOS	JIHAD M. I	HARMOUC	HE MD	AVABA000	CLS HEALTH	03/19/1996
Dates	Procedure	Desciption	Modifier	Charge	Paid By Applied to Patient Deductible	Paid by CASH	Adjustments Remainder
04/16/24	87481	Candida dna amp probe	59	525.00		0.00	525.00
04/16/24	87491	Chylmd trach dna amp probe	59	105.00		0.00	105.00
04/16/24	87511	Gardner vag dna amp probe	59	105.00		0.00	105.00
04/16/24	87529	HSV, DNA, AMP Probe	59	210.00		0.00	210.00
04/16/24	87563	M. genitalium amp probe		105.00		0.00	105.00
04/16/24	87591	N. gonorrhea dna amp probe	59	105.00		0.00	105.00
04/16/24	87640	Staph a dna amp probe	59	105.00		0.00	105.00
04/16/24	87651	Strep a dna amp probe	59	105.00		0.00	105.00
04/16/24	87653	Strep b dna amp probe	59	105.00		0.00	105.00
04/16/24	87801	Detect agnt mult dna ampli		422.00		0.00	422.00
04/16/24	87661	Trichomonas vaginalis amplification	59	105.00		0.00	105.00
04/16/24	87798	Detect agent nos dna amp	59	1,365.0		0.00	1,365.00

Chart Number:

Have a question about your balance, or need to update your insurance information with us? Call 281-694-5986

Rendering Physician:

To make a payment online, go to cls.health/payment

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

Amount Due

3,362.00