



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

ANDREW ALMAGUER
3850 FM 518 RD E APT402
LEAGUE CITY, TX 77573-0727

(832)552-5795

Statement Date	Invoice Number	Page
02/10/2025	CLS ALMAN001	1
Guarantor	Due Date	Payment Due
ANDREW	Upon Receipt	138.81

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: 3/7/2023			Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
ANDREW ALMAGUER	ROHIT R. DHIR MD	ALMAN001	CLS HEALTH	04/26/1995	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
					Patient	Deductible	BLUE		
01/30/23	99204	OFFICE VIST NEW LEVEL 4		503.00	-197.37	-161.03	0.00	-341.97	-36.34
02/14/23	52000	Cystoscopy		730.00	-111.05	-286.20	0.00	-443.80	175.15

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
138.81