



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

ROGER ALVAREZ  
415 STOCKBRIDGE LN  
DICKINSON, TX 77539-6348

(989)274-7806

Statement Date	Invoice Number	Page
02/10/2025	CLS ALVRO004	1
Guarantor	Due Date	Payment Due
ROGER ALVAREZ	Upon Receipt	25.00

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: 4/12/2024			Amount of Last Payment: -113.36		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
ROGER ALVAREZ	ZEID F. KARADSHEH MD	ALVRO004	CLS HEALTH	01/04/1985	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
10/17/23	99999	NO SHOW		25.00		Patient Deductible	TRICARE		25.00

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>25.00</b>