

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

POLORES ANDERSON PO BOX 1102 ALIEF, TX 77411-1102

(346)309-6219

Date of Last Payment: 1/18/2024

Patient:

Statement Date	Invoice Number	Page	
02/10/2025	CLS ANDPO000	1	
Guarantor	Due Date	Payment Due	

Pay Online	
Go to: cls.health/payment or scan the QR Code	

**Make Checks Payable To:** 

Date of Birth:

**CLS HEALTH PLLC** PO BOX 58538 Webster, TX 77598

Place of Service:

Amount of Last Payment: 0.00

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Data	D	Do a alastia a		Paid By Applied to	•	
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	EVERCARE	Adjustments Remainder
12/28/23	99991	NO SHOW	150.00		0.00	150.00

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

150.00