

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

REHAB A. ABDULLATIF 3247 MOSSY ELM CT HOUSTON, TX 77059-3229

(832)641-5011

Date of Last Payment: 9/11/2024

Patient:

Statement Date	Invoice Number	Page 1	
02/10/2025	CLS ABDRE000		
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: -135.62

REHAB A. ABDULLA	AIIF VENKAIA I	K. JONNA MD	ABDRE000	CLS HEALTH	06/09/1969
			Paid By Applied to	Paid by	
Dates Procedure	Desciption	Modifier Charge	Patient Deductible	COMMUNI	Adjustments Remainder

			Paid By Applie	ed to Paid by	aid by		
Dates	Procedure	Desciption	Modifier Charge	Patient Deduc	tible COMMUNI	Adjustments	Remainder
07/28/22	73565	X-ray exam of knees	129.00	-10.00	-14.42	-94.58	10.00

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

10.00