



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

DONALD ARCHIE
2116 TEAL BAY BEND LN
LEAGUE CITY, TX 77573-5323

(281)316-2499

Statement Date	Invoice Number	Page
02/10/2025	CLS ARCD0000	2
Guarantor	Due Date	Payment Due
DONALD ARCHIE	Upon Receipt	177.29

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	

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
DONALD ARCHIE	REGINA PILLAI MD	ARCD0000	CLS HEALTH	09/06/1949

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
06/09/23	99213	OFFICE VISIT EST/LEVEL 3		272.00		Patient Deductible	UNITEDHE	-180.43	18.61

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
177.29