



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

ARTHUR ALONZO
2401 REPSDORPH RD APT 1110
SEABROOK, TX 77586-6460

(832)315-7352

Statement Date	Invoice Number	Page
02/10/2025	CLS ALOAR000	1
Guarantor	Due Date	Payment Due
ARTHUR ALONZO	Upon Receipt	2867.36

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CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment:	Amount of Last Payment: 0.00
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Patient: ARTHUR ALONZO	Rendering Physician: ALI EZZO MD	Chart Number: ALOAR000	Place of Service: UTMB	Date of Birth: 09/29/1963
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by SELF PAY	Adjustments	Remainder
08/01/21	99223	INITIAL HOSPITAL/HIGH		616.00			0.00	-410.76	205.24
08/02/21	99233	HOSPITAL, SUBSEQUENT , HIGH		318.00			0.00	-212.00	106.00
08/03/21	99233	HOSPITAL, SUBSEQUENT , HIGH		318.00			0.00	-212.00	106.00
08/04/21	99233	HOSPITAL, SUBSEQUENT , HIGH		318.00			0.00	-212.00	106.00
08/05/21	99232	HOSPITAL , SUBSEQUENT, MOD		221.00			0.00	-147.00	74.00
08/07/21	99232	HOSPITAL , SUBSEQUENT, MOD		221.00			0.00	-147.00	74.00
08/08/21	99232	HOSPITAL , SUBSEQUENT, MOD		221.00			0.00	-147.00	74.00
08/09/21	99232	HOSPITAL , SUBSEQUENT, MOD		221.00			0.00	-147.00	74.00
08/10/21	99233	HOSPITAL, SUBSEQUENT , HIGH		318.00			0.00	-212.00	106.00
08/11/21	99232	HOSPITAL , SUBSEQUENT, MOD		221.00			0.00	-147.00	74.00
08/12/21	99232	HOSPITAL , SUBSEQUENT, MOD		221.00			0.00	-147.00	74.00

Patient: ARTHUR ALONZO	Rendering Physician: EMRAN ABU ATHERAH MD	Chart Number: ALOAR000	Place of Service: UTMB	Date of Birth: 09/29/1963
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by SELF PAY	Adjustments	Remainder
08/13/21	99233	HOSPITAL, SUBSEQUENT , HIGH		318.00			0.00	-212.00	106.00
08/14/21	99233	HOSPITAL, SUBSEQUENT , HIGH		318.00			0.00	-212.00	106.00
08/15/21	99233	HOSPITAL, SUBSEQUENT , HIGH		318.00			0.00	-212.00	106.00
08/16/21	99239	HOSPITAL DISCHARGE, LONG		327.00			0.00	-221.00	106.00

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Amount Due
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