

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

MISTY D. ANDERSON 11806 FIELDCREST DR LA PORTE, TX 77571-9312

(832)627-8660

Date of Last Payment: 10/20/2023

Patient:

MISTY D. ANDERSON

Statement Date	Invoice Number	Page		
02/10/2025	CLS ANDMI000	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:

08/13/1983

PO BOX 58538 Webster, TX 77598

Place of Service:

CLS HEALTH

Amount of Last Payment: -144.59

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Dates	Procedure	Desciptio	on	Modifier Charg		aid By Applied to Patient Deductible	•		Adjustments F	Remainder
05/03/21	99999	NO SHOW		25.00	0		0.00			25.00
Patient: MISTY D.	. ANDERSC		Rendering Phy ABDELNASER	ysician: R ELKHALILI I	<u></u>	Chart Number: ANDMI000		ace of Service:	Date of Birth: 08/13/1983	
Dates	Procedure	Desciptio	on [Modifier Charg		raid By Applied to Patient Deductible	Paid by	Paid by TMHP	Adjustments F	
08/09/22	J2405	Ondansetron hcl	l injection	4.00	0		-0.26	-0.07	-3.70	-0.03
09/06/22	99999	NO SHOW		25.00	0		0.00	0.00		25.00
09/14/22	J2405	Ondansetron hcl	linjection	4.00	<i>i</i> 0		-0.26	-0.06	-3.67	0.01
10/12/22	J2405	Ondansetron hcl	l injection	4.00	<i>i</i> 0		-0.26	-0.06	-3.67	0.01
11/09/22	99999	NO SHOW		25.00	_i O		0.00	0.00		25.00
02/02/23	99999	NO SHOW		25.00	0		0.00	0.00		25.00
Patient: MISTY D. ANDERSON		Rendering Phy ROHIT R. DHI	-		Chart Number: ANDMI000	_	ace of Service:	Date of E 08/13/19		
Dates	Procedure	Desciptio	on	Modifier Charg		aid By Applied to Patient Deductible	•	Paid by TMHP	Adjustments F	Remainder
11/29/22	99992	NO SHOW		50.00	0		0.00	0.00		50.00

Chart Number:

Have a question about your balance, or need to update your insurance information with us? Call 281-694-5986

Rendering Physician:

ABDELNASER ELKHALILI MD ANDMI000

To make a payment online, go to cls.health/payment lf remitting payment via mail in check, Please include statement.

149.99

Amount Due