

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

DAVONTA ALLEN 206 TERRACE DR TEXAS CITY, TX 77591-4100

(409)454-0319

Date of Last Payment:

Statement Date	Invoice Number	Page	
02/10/2025	CLS ALLDA000	1	
Guarantor	Due Date	Payment Due	

Pay Online	
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Make Checks Payable To:

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Amount of Last Payment: 0.00

Patient:			lering Physician:	Chart Number:	Place of Service		ate of Birth:
DAVONT	A ALLEN	ABDI	ELNASER ELKHALILI MD	ALLDA000	CLS HEALTH	10	0/06/1994
Dates	Procedure	Desciption	Po Modifier Charge P	aid By Applied to Patient Deductible	Paid by BLUE	Paid by REMICADE Adjusti	ments Remainder
01/11/21	99999	NO SHOW	25.00		0.00	0	25.00

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

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Amount Due

25.00