

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

ARNULFO ARIZA ARIZA 305 HOBBS RD **LEAGUE CITY, TX 77573-3578**

(832)221-7955

Date of Last Payment: 9/28/2021

04/26/21

99217

Statement Date	Invoice Number	Page		
02/10/2025	CLS ARIAR000	1		
Guarantor	Due Date	Payment Due		

Pay Online Go to: cls.health/payment or scan the QR Code

Make Checks Payable To:

-147.95

74.05

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

0.00

Amount of Last Payment: 0.00

Patient:	O ARIZA AF	Rendering Pl RIZA ALI EZZO M	•	Chart Number: ARIAR000	Place of Service: UTMB	Date of B 12/08/19	
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by TMHP	Adjustments R	emainder
04/25/21	99220	Observation, Initial - High Severity	559.00		0.00	-372.69	186.31
Patient:	O ARIZA AF	Rendering Pl	•	Chart Number: ARIAR000	Place of Service: UTMB	Date of B 12/08/19	
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by TMHP	Adjustments R	emainder

222.00

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

If remitting payment via mail in check, Please include statement.

OBSERVATION DISCHARGE

Amount Due

260.36