




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

BRIAN ALDESON  
1633 WEBSTER ST  
LEAGUE CITY, TX 77573-5685

(832)272-6839

Statement Date	Invoice Number	Page
02/10/2025	CLS ALDBR000	1
Guarantor	Due Date	Payment Due
BRIAN ALDESON	Upon Receipt	815.51

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Go to: <a href="https://cls.health/payment">cls.health/payment</a> or scan the QR Code	
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CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment:		Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
BRIAN ALDESON	LUIGI TERMINELLA MD	ALDBR000	UTMB	03/08/1978

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
					Patient	Deductible	TMHP		
06/09/21	99291	CRITICAL CARE 1ST HOUR		678.00			0.00	-388.18	289.82
06/09/21	99292	CRITICAL CARE, 30 MIN		340.00			0.00	-213.25	126.75
06/10/21	99291	CRITICAL CARE 1ST HOUR		678.00			0.00	-388.18	289.82
06/11/21	99239	HOSPITAL DISCHARGE, LONG		327.00			0.00	-217.88	109.12

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](https://cls.health/payment)

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

Amount Due
<b>815.51</b>