

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

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Statement Date	Invoice Number	Page
02/10/2025	CLS ASBTA000	2
Guarantor	Due Date	Payment Due

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

Make Checks Payable To:

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

01/04/24 99233 SBSQ HOSP IP/OBS HIGH 50 357.00 -89.81 -237.25 29.94

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

Amount Due

275.60