

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

JOSE F. AGUINIGA 9107 BARTON ST HOUSTON, TX 77075-1218

(832)512-5298

Date of Last Payment: 7/22/2022

Patient:

Statement Date	Invoice Number	Page			
02/10/2025	CLS AGUJO001	1			
		Payment Due			
Guarantor	Due Date	Payment Due			

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

Make Checks Payable To:

Date of Birth:

PO BOX 58538 Webster, TX 77598

Place of Service:

Amount of Last Payment: -183.51

JOSE F.	AGUINIGA	REMY TEQW	IMUAH MD	AGUJO001	MEMORIAL	05/23/1952	ĺ
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by	A divertmente Pomain	dor
Dates	rioceduie	Desciption	Woulder Charge	ratient beductible	SELFFAT	Adjustments Remain	uer
03/15/22	99253	HOSPITLAL CONSULT, INTIAL LEVEL	273.00		0.00	-182.00 91.0)0
03/16/22	99232	HOSPITAL, SUBSEQUENT, MOD	219.00		0.00	-145.95 73.0)5
03/17/22	99232	HOSPITAL, SUBSEQUENT, MOD	219.00		0.00	-145.95 73.0)5

Chart Number:

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

Rendering Physician:

To make a payment online, go to cls.health/payment

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

Amount Due

237.10