



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

AMAVELI C. ALMENDAREZ
11503 SENNA LEDGE CT
HOUSTON, TX 77089-2709

(832)423-3583

| Statement Date | Invoice Number | Page |
|----------------|----------------|-------------|
| 02/10/2025 | CLS ALMAM000 | 1 |
| Guarantor | Due Date | Payment Due |
| AMAVELI C. | Upon Receipt | 35.89 |

| 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 | |

| Date of Last Payment: 6/2/2021 | | | Amount of Last Payment: -203.33 | | |
|--------------------------------|----------------------|---------------|---------------------------------|----------------|--|
| Patient: | Rendering Physician: | Chart Number: | Place of Service: | Date of Birth: | |
| AMAVELI C. ALMENDAREZ | SHAFRAZ MOHAMMED MD | ALMAM000 | HOUSTON | 07/18/1958 | |

| Dates | Procedure | Description | Modifier | Charge | Paid By | Applied to | Paid by | Adjustments | Remainder |
|----------|-----------|--------------------------------------|----------|--------|---------|------------|---------|-------------|-----------|
| | | | | | Patient | Deductible | CIGNA | | |
| 03/08/21 | 99220 | Observation, Initial - High Severity | | 559.00 | | | -129.86 | -406.22 | 22.92 |
| 03/09/21 | 99226 | Subsequent observation care | | 318.00 | | | -73.47 | -231.56 | 12.97 |

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.

| Amount Due |
|--------------|
| 35.89 |