

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

CLIFFORD W. ARCHIA 1211 21ST ST APT 1003 GALVESTON, TX 77550-4770

(409)237-1141

	Statement Date	Invoice Number	Page		
	02/10/2025	CLS ARCCL000	1		
Γ			Payment Due		
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Date of Last Payment: 12/17/2024 Amount of Last Payment: 0.00										
Patient:			Rendering Phys	sician:	Chart Number:	Pla	ace of Service	e:	Date of Birth:	
CLIFFORD W. ARCHIA AHMED			AHMED A. MO	RSY MD	SY MD ARCCL000 CLS HEALTH			05/03/1962		
					Paid By Applied to	Paid by	Paid by EVERCARE	Paid by		
Dates	Procedure	Desciptio	on M	Iodifier Charge	Patient Deductible	WELLMED			stments Remainder	
03/19/24	99999	NO SHOW		25.00		0.00	0.00	0	25.00	
Patient:			Rendering Phys	sician:	Chart Number:	Pla	ace of Service	e:	Date of Birth:	
CLIFFOR	RD W. ARCH	AIF	MAGDY ATTIA	\ PT	ARCCL000	CL	S HEALTH		05/03/1962	
					Paid By Applied to	Paid by	Paid by EVERCARE	Paid by	,	
Dates	Procedure	Desciptio	on M	lodifier Charge	Patient Deductible	WELLMED			stments Remainder	
07/19/23	99999	NO SHOW		25.00		0.00	0.00	0	25.00	
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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

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Amount Due

50.00