



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

ANGELA C. ANZALDUA
1244 SALERNO CT
LEAGUE CITY, TX 77573-2376

(713)306-2637

Statement Date	Invoice Number	Page
02/10/2025	CLS ANZAN002	1
Guarantor	Due Date	Payment Due
ANGELA C.	Upon Receipt	32.50

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:		Amount of Last Payment: 0.00		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ANGELA C. ANZALDUA	SHAFRAZ MOHAMMED MD	ANZAN002	HOUSTON	07/21/1971

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
09/01/23	99223	1ST HOSP IP/OBS HIGH 75		523.00		Patient Deductible	AETNA	-360.48	32.50

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
32.50