

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

MARIA J. ANAYA 7635 COUNTY ROAD 98 ALVIN, TX 77511-6614

(281)650-0076

Date of Last Payment: 12/20/2024

	Statement Date	Invoice Number	Page
	02/10/2025	CLS ANAMA002	1
ĺ	Guarantor	Due Date	Payment Due

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**CLS HEALTH PLLC** PO BOX 58538 Webster, TX 77598

Amount of Last Payment: -170.73

				Chart Number:		
Patient:		Rendering Ph	Rendering Physician:		Place of Service:	Date of Birth:
MARIA J. ANAYA		TRAVIS GOODALE MD		ANAMA002		03/26/1952
				Paid By Applied to	Paid by	
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	RENAISSA	Adjustments Remainder
05/25/21	99214	OFFICE VISIT EST/LEVEL 4	95 404.00	-20.00	-134.57	-269.43 -20.00
Patient:		Rendering Ph	nysician:	Chart Number:	Place of Service:	Date of Birth:
MARIA J.	ANAYA	CHARLIE CH	•	ANAMA002		03/26/1952
Į				Paid By Applied to	Paid by	
Dates	Procedure	Desciption	Modifier Charge		Paid by RENAISSA	Adjustments Remainder
<b>Dates</b> 07/27/21	Procedure 99999	<b>Desciption</b> NO SHOW	Modifier Charge Q6 25.00	Patient Deductible	•	Adjustments Remainder
				Patient Deductible	RENAISSA	
			Q6 25.00	Patient Deductible	RENAISSA 0.00	
07/27/21	99999	NO SHOW	Q6 25.00	Patient Deductible	RENAISSA 0.00	25.00
07/27/21 Patient:	99999	NO SHOW  Rendering Ph	Q6 25.00	Patient Deductible  Chart Number:	RENAISSA 0.00	25.00 Date of Birth:
07/27/21 Patient:	99999	NO SHOW  Rendering Ph	Q6 25.00 hysician: AKUAA MD	Chart Number: ANAMA002  Paid By Applied to	0.00 Place of Service:	25.00 Date of Birth:

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

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

Amount Due

25.00