

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

ROXANNE C. AQUINES 3910 PRINE LN DEER PARK, TX 77536-2028

Rendering Physician:

(281)904-4995

Date of Last Payment: 12/17/2024

Patient:

	Statement Date	Invoice Number	Page 1	
	02/10/2025	CLS AQURO000		
_				
	Guarantor	Due Date	Payment Due	

<b>0</b> 4 1 1 10 4	
Go to: cls.health/payment or scan the QR Code	

Make Checks Payable To:

Date of Birth:

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

Place of Service:

Amount of Last Payment: 0.00

ROXANNE C. AQUINES ZEI		NES ZEID F. K	ARADSHEH	I MD	AQURO000	CLS HEALTH	02/22/1977	
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Dates	Procedure	Desciption	Modifier	Charge	Patient Deductible	AETNA	Adjustments R	emainder
11/27/23	99205	OFFICE VIST NEW LEVEL 5	Q6	664.00		-148.75	-480.25	35.00

Chart Number:

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

35.00