

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

RENE ALZATE 5503 BERRY CREEK DR HOUSTON, TX 77017-6703

(832)718-6435

Date of Last Payment: 12/30/2021

06/27/21

99220

	Statement Date	Invoice Number	Page	
	02/10/2025	CLS ALZRE000	1	
L				
	Guarantor	Due Date	Payment Due	

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Make Checks Payable To:

-372.69

186.31

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

0.00

Amount of Last Payment: 0.00

Patient: RENE ALZATE		Rendering Physician: REMY TEQWIMUAH MD		Chart Number: ALZRE000	Place of Service: UTMB	vice: Date of Birth: 04/10/1972	
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by SELFPAY	Adjustments Re	emainder
06/28/21	99217	OBSERVATION DISCHARGE	222.00	1	0.00	-147.95	74.05
Patient:		Rendering Physician:		Chart Number:	Place of Service:	ce: Date of Birth:	
RENE ALZATE		ALI EZZO MD		ALZRE000	UTMB	04/10/1972	
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by SELFPAY	Adjustments Re	emainder

559.00

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.

Observation, Initial - High Severity

Amount Due

260.36