



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

STACY M. ARMSTRONG
706 CORYELL ST
LEAGUE CITY, TX 77573-2316

(409)256-7685

Statement Date	Invoice Number	Page
02/10/2025	CLS ARMST001	1
Guarantor	Due Date	Payment Due
STACY M.	Upon Receipt	30.00

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: 6/21/2024			Amount of Last Payment: -20.60		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
STACY M. ARMSTRONG	MICHAEL G. BARACY MD	ARMST001	CLS HEALTH	12/07/1967	

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
05/23/24	87481	Candida dna amp probe	59	525.00		Patient Deductible	UNITED	-422.00	30.00

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.

Amount Due
30.00