

UNIVERSAL ENTERPRISES, INC.
Bank Account: AccountName_TPMG
Batch: 1 Run Date: 07/18/2018

Control Number	Transaction Date	Claim Number	Department Code	Payee Name	Payment Type	Payment Amount	Check Total
0006505	07/18/2018	GCDIS2018004811	ST	EntName_IMLW	Doctor Bill	\$150.00	\$150.00
0006506	07/18/2018	GCDIS2018004811	ST	EntName_IMLW	Doctor Bill	\$150.00	\$150.00
0006507	07/18/2018	GCDIS2018004811	ST	EntName_IMLW	Doctor Bill	\$150.00	\$150.00
0006508	07/18/2018	GCDIS2018004811	ST	EntName_IMLW	Doctor Bill	\$150.00	\$150.00
AUTOC0000154	07/18/2018	GCDIS2018004811	ST	EntName_IMLW	Doctor Bill	\$2.00	\$2.00

Total for this report: \$602.00