UNIVERSAL ENTERPRISES, INC. Bank Account: AccountName_LTOC Batch: 1 Run Date: 02/12/2018

 Control Number	Transaction Date	Claim Number	Department Code		Payee Name	Payment Type	Payment Amount	Check Total	
0001361	02/12/2018	GCPL2018001019	ST	EntName TWEK		Medical - BI	\$20.00	\$40.00	
"	"	"	"	"		Doctor Bill	\$20.00	"	
0001362	02/12/2018	GCPL2018001019	ST	EntName_TWEK		Medical - BI	\$20.00	\$40.00	
"	"	"	"	"		Doctor Bill	\$20.00	"	
0001363	02/12/2018	GCPL2018001019	ST	EntName_TWEK		Medical - BI	\$20.00	\$40.00	
"	"	"	"	"		Doctor Bill	\$20.00	11	

Total for this report: \$120.00