

UNIVERSAL ENTERPRISES, INC.
 Bank Account: AccountName_YNXK
 Batch: 2 Run Date: 02/21/2018

Control Number	Transaction Date	Claim Number	Department Code	Payee Name	Payment Type	Payment Amount	Check Total
0002062	02/21/2018	GCHSP2018001332	ST	EntName_QRIJ	Medical - BI	\$20.00	\$40.00
"	"	"	"	"	Doctor Bill	\$20.00	"
0002063	02/21/2018	GCHSP2018001332	ST	EntName_QRIJ	Medical - BI	\$20.00	\$40.00
"	"	"	"	"	Doctor Bill	\$20.00	"
0002064	02/21/2018	GCHSP2018001332	ST	EntName_QRIJ	Medical - BI	\$20.00	\$40.00
"	"	"	"	"	Doctor Bill	\$20.00	"

Total for this report: \$120.00