

Payment Detail

Payer	Payer ID	Credit Amount	Status Detail
Surgical Care Affiliates, LLC	SurgicalCare.AcctsPayable	2956.50 USD	Processed Successfully

Payment Detail						
Payment Amount:	2,956.50	USD	Bank Account	*****7349	Credit Date:	17-Dec-2025
Payment Number:	6837629		Bank Name:	PNC BANK, NA	Receiver ID:	AyaHealthcar.Receivables
DPA:	1060664305		Bank ID:	071921891	Network Fee:	--
Payment Method:	ACH					
Remittances						
Invoice #	11222820	Paid Invoice Amount	2,956.50	USD	Invoice Date	2025-11-21
Remit Number:	1	Paid Invoice Amount:	2956.50	USD	Voucher #:	50414 Midlands Orthopaedics SC
Vendor Name:	AYA HEALTHCARE INC	Original Invoice Amount:	2956.50	USD		
Vendor #:	0001525173-00004	Discount Amount:	0.00	USD		
Invoice #:	11222820					
Invoice Date:	2025-11-21					
Comments: PO# TBCHR3882135 11222820 Please refer questions to 8557403820						