

Texas Identification Number	Mail Code	Payment Number	Payment Type	Paying Agency	Total
	060	1517895	DD	529	127022.60
Document Number	Invoice Number	Invoice Description	Invoice Amount	Interest Amount	
9SA11454	PC1274C VOUCHERID:16123	MEDICAID ADMINISTRATIVE CLAIMS (MAC) APRIL - JUNE 2017	-6,685.40	0.00	
9SA11454	PC1274C VOUCHERID:16123	MEDICAID ADMINISTRATIVE CLAIMS (MAC) APRIL - JUNE 2017	133,708.00	0.00	

06-15-2018

8-1293-126-20-000-013-0-000

JE174443 REC 04-06/17 MAC BILLG

MINERVA D... 06-18-2018