



# Payment Total

**Insurer:** Hidalgo County  
**ORG1 DESC :** HIDALGO COUNTY

Processed	Check Date	Chk/Vchr #	Claim Number	Claimant	Incident	Transaction Type	Payee	Dates of Service	Method	Amount
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**HIDALGO COUNTY Total 161** **\$39,516.27**

**ORG1 DESC :** HEADSTART 5450

Processed	Check Date	Chk/Vchr #	Claim Number	Claimant	Incident	Transaction Type	Payee	Dates of Service	Method	Amount
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**HEADSTART 5450 Total 37** **\$9,410.76**

**Hidalgo County Total: 198** **\$48,927.03**

**Grand Total: 198** **\$48,927.03**

Report Parameters	
Insurer	805
Insured	-1
Insurance Type	ORG1 DESC
Claim Status	
Claimant Type	
Additional Report Parameters	
Additional Parameter	Amount <> 0 AND PAYMENT_METHOD_DESC IN ('Check','Stop','Void','Paper Transaction') AND (1=1)