



## Re: Funds Transfer Request

Prepared Date: **Thursday, June 8, 2023**

Contractholder Name: COUNTY OF HIDALGO  
Attention: M MUNOZ  
RE: CLAIMS

Reference#: **54-23158-0517**

Activity of: **Wednesday, June 7, 2023** 06.01-07.2023

Account Name: [REDACTED]

Credit Bank: [REDACTED]

Bank Address: [REDACTED]

[REDACTED]

Account Number: [REDACTED]

ACH ABA Number: [REDACTED]

Fed Wire ABA Number: [REDACTED]

**Transfer Amount: \$908,658.43**

Please transfer the requested funds immediately to avoid late funding interest charges, suspension of services, or termination for nonpayment pursuant to the terms of your contract.

ver.3.0.7.0

For any questions, please send emails to [Banking-SAMP@aetna.com](mailto:Banking-SAMP@aetna.com) or call a contact listed below.

Kimberly Settle  
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Daphne Fentress  
Banking Consultant Phone 904-351-5504