

Texas Identification Number	Mail Code	Payment Number	Payment Type	Paying Agency	Total
17460007176	060	4429948	DD	<u>529</u>	201473.15

Document Number	Invoice Number	Invoice Description	Invoice Amount	Interest Amount
9SA21392	PC1274C VOUCHERID:26061	MEDICAID ADMINISTRATIVE CLAIMS (MAC) JANUARY- MARCH 2024	212,077.00	0.00
9SA21392	PC1274C VOUCHERID:26061	MEDICAID ADMINISTRATIVE CLAIMS (MAC) JANUARY- MARCH 2024	-10,603.85	0.00

10/25/2024 State date

10/29/2024