

**Summary of Additional Transactions**  
**09/05/2023 and 09/12/2023**

<b>Type</b>	<b>Number of Transactions</b>	<b>Sum of Transactions</b>
Addendum(s)	0	\$ -
Wire(s)	2	\$ 129.00
Quick Payments	0	\$ -
Benefit Payment(s)	2	\$ 661,687.96
<b>TOTAL</b>	<b>4</b>	<b>\$ 661,816.96</b>

**WIRE TRANSFERS**

**9/05/2023 and 09/12/23**

<b>WIRED TO:</b>	<b>WIRE DATE:</b>	<b>PURPOSE</b>	<b>AMOUNT</b>
Williamson Cty Tax Assessor	9/6/2023	Inspection Fees, Fleet	\$63.00
Williamson Cty Tax Assessor	9/11/2023	Inspection Fees, Fleet	\$66.00
		<b>TOTAL</b>	<b>\$129.00</b>

Supplier Payment History Report

Supplier Type: All

Payment Start Date: 30-AUG-23

Payment End Date: 05-SEP-23

Supplier: UNITED HEALTHCARE SERVICES INC

Number: 43075

Site: E-CLAIMS

Address: ATTN CORPORATE TAX MN008-T390, MINNETONKA, MN, 55343

Payment						
Account Name	Payment Number	Payment Date	Currency	Payment Amount	Functional Amount	Void Date
-----	-----	-----	-----	-----	-----	-----
WELLS FARGO	3050132	05-SEP-23	USD	302,324.95	302,324.95	
					-----	
				Site Total:	302,324.95	
					-----	
				Supplier Total:	302,324.95	
					=====	
				Report Total:	302,324.95	

Supplier Payment History Report

Supplier Type: All

Payment Start Date: 06-SEP-23

Payment End Date: 12-SEP-23

Supplier: UNITED HEALTHCARE SERVICES INC

Number: 43075

Site: E-CLAIMS

Address: ATTN CORPORATE TAX MN008-T390, MINNETONKA, MN, 55343

Payment						
Account Name	Payment Number	Payment Date	Currency	Payment Amount	Functional Amount	Void Date
-----	-----	-----	-----	-----	-----	-----
WELLS FARGO	3050150	11-SEP-23	USD	359,363.01	359,363.01	
					-----	
				Site Total:	359,363.01	
					-----	
				Supplier Total:	359,363.01	
					=====	
				Report Total:	359,363.01	