

**Summary of Additional Transactions**  
**11-11-25 & 11-18-25**

<b>Type</b>	<b>Number of Transactions</b>	<b>Sum of Transactions</b>
Addendum(s)	0	\$ -
Wire(s)	3	\$ 9,470.75
Quick Payments	1	\$ 2,300.00
Imprest Acct Payment(s)	1	\$ 46,767.88
Benefit Payment(s)	2	\$ 1,320,102.12
<b>TOTAL</b>	<b>7</b>	<b>\$ 1,378,640.75</b>

**WIRE TRANSFERS**

**11-11-25 & 11-18-25**

<b>WIRED TO:</b>	<b>WIRE DATE:</b>	<b>PURPOSE</b>	<b>AMOUNT</b>
Williamson County	11/6/2025	Jury Replenishment, D/CLK	\$9,300.00
Williamson Cty Tax Assessor	11/10/2025	Inspection Fees, Fleet	\$84.00
Williamson Cty Tax Assessor	11/17/2025	Inspection Fees, Fleet	\$86.75
		<b>TOTAL</b>	<b>\$9,470.75</b>

**QUICK PAYMENTS**

**11-14-25 & 11-18-25**

Oxford House 11/17/2025

Group Recover Home for FRC participant

\$2,300.00

**TOTAL**

**\$2,300.00**

**IMPREST ACCT PAYMENTS**

**11-11-25 & 11-18-25**

<b>VENDOR</b>	<b>DATE</b>	<b>PURPOSE</b>	<b>AMOUNT</b>
Williamson Cty Workers Comp Imprest x074	11/7/2025	Paid losses for the month ending Nov/25, Fund Replenish, Risk Claims	\$46,767.88
		<b>TOTAL</b>	<b>\$46,767.88</b>

Supplier Payment History Report

Supplier Type: All  
Payment Start Date: 05-NOV-25  
Payment End Date: 18-NOV-25

Supplier: UNITED HEALTHCARE SERVICES INC  
Number: 43075

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

Account Name	Payment Number	Payment Date	Payment Currency	Payment Amount	Functional Amount	Void Date
WELLS FARGO	3066279	10-NOV-25	USD	828,066.61	828,066.61	
WELLS FARGO	3066280	17-NOV-25	USD	492,035.51	492,035.51	
Site Total:					1,320,102.12	
Supplier Total:					1,320,102.12	
Report Total:					1,320,102.12	

\*\*\* End of Report \*\*\*