

**Summary of Additional Transactions**  
**June 18, 2024**

<b>Type</b>	<b>Number of Transactions</b>	<b>Sum of Transactions</b>
Addendum(s)	3	\$ 24,789.39
Wire(s)	1	\$ 136.50
Quick Payments	0	\$ -
Imprest Acct Payment(s)	1	\$ 57,266.36
Benefit Payment(s)	1	\$ 499,284.69
<b>TOTAL</b>	<b>6</b>	<b>\$ 581,476.94</b>

**ADDENDUM**

**June 18, 2024**

Bickerstaff, Heath, Delgado, Acosta LLP	Prof Svcs Rendered Thru Apr 15/24	\$1,846.50
Germer PLLC	Prof Svcs Rendered Thru Feb 29/24	\$21,204.39
Ross Gannaway Clifton PLLC	Apr 30-May 14/24, Prof Svcs, Civil Service/Human Resources	\$1,738.50
	<b>TOTAL</b>	<b>\$24,789.39</b>

**WIRE TRANSFERS**

**June 18, 2024**

<b>WIRED TO:</b>	<b>WIRE DATE:</b>	<b>PURPOSE</b>	<b>AMOUNT</b>
Williamson Cty Tax Assessor	6/17/2024	Inspection Fees, Fleet	\$136.50
		<b>TOTAL</b>	<b>\$136.50</b>

**IMPREST ACCT PAYMENTS**

**June 18, 2024**

<b>VENDOR</b>	<b>DATE</b>	<b>PURPOSE</b>	<b>AMOUNT</b>
Williamson Cty Workers Comp Imprest x074	6/12/2024	Paid Losses for the month ending Jun 3/24, Replenish Fund, Risk Claims	\$57,266.36
		<b>TOTAL</b>	<b>\$57,266.36</b>

Supplier Payment History Report

Supplier Type: All

Payment Start Date: 12-JUN-24

Payment End Date: 18-JUN-24

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	3055120	17-JUN-24	USD	499,284.69	499,284.69	
Site Total:					499,284.69	
Supplier Total:					499,284.69	
Report Total:					499,284.69	