

ABC Benefit Administrators, INC.**Check Register for 01/01/07 to 04/19/07****All Claim Types for All Clients All Plans**

Check Voided	Check Number	Check Date	Check Amount	Claim Number	Payee	Insured Name	Claimant Name	DOS
	007212	02/23/07	25.00	06-004491	AKRON FAMILY PRACTICE	CYDLXEMVIBTS, DAVE	CYDLXEMVIS, FRANCESC	12/19/06
	007213	02/23/07	50.00	06-004553	TULSA EMERG. MED. CENTER	NOMI T, ROY	NOMI T, DEEDEE	12/10/06
	007214	02/23/07	25.00	06-004720	CHEYENNE CTY HOSPITAL CLINIC	XOMLI POPH, SOPHIA	XOMLI POPH, SOPHIA	11/06/06
	007323	03/23/07	147.00	06-004752	HURST FAMILY MEDICAL	GUSF, BILL	GUSF, BILL	12/27/06
	007324	03/23/07	25.00	06-004857	EPHRATA COMMUNITY HOSPITAL	CYDLXEMVIBTS, DAVE	CYDLXEMVIS, FRANCESC	12/30/06
	007325	03/23/07	25.00	06-005248	SONORA QUEST LABORATORIES	SIPPU, BETTY	SIPPU, BETTY	12/12/06
	007326	03/23/07	75.00	07-000023	COVINGTON MEDICAL ASSOC	TETTIS, KENT	TETTIS, KENT	01/08/07
	007327	03/23/07	75.00	07-000052	AKRON FAMILY PRACTICE	CYDLXEMVIBTS, DAVE	CYDLXEMVIS, FRANCESC	01/10/07
	Total		447.00					
	Final Total		447.00					