

This Report Pertains to EPILEPSY ASSOCIATION (10272)

Notes:

(1) Reporting for Claims Received from 01NOV16 thru 30NOV16

(2) This Report Produced on 05DEC16 From Extract Created 03DEC16

Board	Batch	CS	PS	Claims	Quantity	Billed Amount	Allowed Amount	Co-Pay Amount	Other Carrier Amount	Withhold Amount	Net Amount
CUYAM	18M000001	P	P	9	47.0	\$1,002.51	\$1,002.51	\$0.00	\$0.00	\$0.00	\$1,002.51
<i>CUYAM</i>				9	47.0	<i>\$1,002.51</i>	<i>\$1,002.51</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$1,002.51</i>
<i>G.TOT</i>				9	47.0	<i>\$1,002.51</i>	<i>\$1,002.51</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$1,002.51</i>