

**ABC CORPORATION**  
**CHECKS AND CREDIT ADJUSTMENTS ISSUED 8/10/2000 - 8/16/2000**

LOCATION NUMBER	PATIENT	CLAIM TYPE	TOTAL PAID TO ACTIVE EMPLOYEES	TOTAL PAID TO RETIREES	GRAND TOTAL PAID
14101000	DEPENDENT	MEDICAL	\$676.11	\$0.00	\$676.11
14101000	DEPENDENT		\$676.11 *	\$0.00 *	\$676.11 *
14101000	EMPLOYEE	MEDICAL	\$0.00	\$8.45	\$8.45
14101000	EMPLOYEE		\$0.00 *	\$8.45 *	\$8.45 *
14101000			\$676.11 **	\$8.45 **	\$684.56 **
14102000	DEPENDENT	DENTAL	\$142.50	\$0.00	\$142.50
14102000	DEPENDENT	MEDICAL	\$0.00	\$150.73	\$150.73
14102000	DEPENDENT		\$142.50 *	\$150.73 *	\$293.23 *
14102000	EMPLOYEE	MEDICAL	\$0.00	\$30.35	\$30.35
14102000	EMPLOYEE		\$0.00 *	\$30.35 *	\$30.35 *
14102000			\$142.50 **	\$181.08 **	\$323.58 **
14103000	DEPENDENT	MEDICAL	\$0.00	\$112.21	\$112.21
14103000	DEPENDENT		\$0.00 *	\$112.21 *	\$112.21 *
14103000			\$0.00 **	\$112.21 **	\$112.21 **
25200000	EMPLOYEE	DISABILITY	\$3,979.27	\$0.00	\$3,979.27
25200000	EMPLOYEE		\$3,979.27 *	\$0.00 *	\$3,979.27 *
25200000			\$3,979.27 **	\$0.00 **	\$3,979.27 **
35200000	EMPLOYEE	DISABILITY	\$267.70	\$0.00	\$267.70
35200000	EMPLOYEE		\$267.70 *	\$0.00 *	\$267.70 *
35200000			\$267.70 **	\$0.00 **	\$267.70 **
<b>CLIENT TOTAL</b>			<b>\$5,065.58 ***</b>	<b>\$301.74 ***</b>	<b>\$5,367.32 ***</b>

## COVERAGE BY DEPARTMENT LOCATION

