



Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Paper Transaction		8050003474	Claimant Salary Continuation-No reimbursement of Temporary Total Disability	01/21/2026 01/27/2026	154494	\$0.00	
Total By - Method Desc: 1					Total for Method Desc:	\$0.00	\$0.00



Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Check	02/03/2026	Combined	HEALTHSYSTEMS Drug Coverage	01/27/2026 01/27/2026	154494	\$35.34	805027768
	02/03/2026	Combined	Two Oaks Investments, LLC Fees including PI, IOS, background checks, EDI fees	02/02/2026 02/02/2026	154494	\$4.00	805027769
Total By - Method Desc: 2					Total for Method Desc:	\$39.34	\$39.34
Total Number of Checks: 3					Total Amount:	\$39.34	\$39.34

Payment Summary Current

Processed Date 2/3/2026 To 2/3/2026

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee	
Oklahoma County	Check								
		2/3/2026	Drug Coverage	8050003474		25.65	805027768	HEALTHESYSTEMS	
		2/3/2026	Drug Coverage	8050003474		9.69	805027768	HEALTHESYSTEMS	
		2/3/2026	Fees including PI, IOS, background	8050003474		2.00	805027769	Two Oaks Investments, LLC	
		2/3/2026	Fees including PI, IOS, background	8050003475		2.00	805027769	Two Oaks Investments, LLC	
			Total Payment Method			39.34			
	Paper								
		2/3/2026	Salary Continuation- No reimbursement of	8050003474		0.00		Claimant	
			Total Payment Method			0.00			
			Total Insurer			39.34			
			Grand Total			39.34			

APPROVED ON _____, 20 ____
BY THE BOARD OF COUNTY COMMISSIONERS

DISTRICT 1

DISTRICT 2

DISTRICT 3

ATTEST:

COUNTY CLERK

	Claim Number	Department	Amount
A	8050003474	Juvenile	\$37.34
B	8050003475	Juvenile	\$2.00
			\$39.34