



Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Paper Transaction		8050003435	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Hospital - Outpatient	02/15/2025 02/15/2025	149576	\$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							
	04/29/2025	8050003306	Claimant Temporary Total Disability	05/01/2025 05/07/2025	149575	\$606.95	805027513
	04/29/2025	Combined	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	03/21/2025 03/21/2025	149576	\$209.72	805027514
	04/29/2025	8050003439	Richard R Morgan Physician	03/28/2025 03/28/2025	149576	\$83.81	805027515
	04/29/2025	Combined	Two Oaks Investments, LLC Fees including PI, IOS, background checks, EDI fees	04/25/2025 04/25/2025	149576	\$6.00	805027516
	04/29/2025	Combined	RISING MEDICAL SOLUTIONS, LLC Bill Review Fees	03/28/2025 03/28/2025	149576	\$53.65	805027517
	04/29/2025	8050003311	WALKER FERGUSON & FERGUSON Legal	02/05/2025 02/05/2025	149576	\$70.00	805027518
	04/29/2025	8050003399	WALKER FERGUSON & FERGUSON Legal	02/14/2025 03/27/2025	149576	\$308.00	805027519
	04/29/2025	8050003306	WALKER FERGUSON & FERGUSON Legal	01/16/2025 03/27/2025	149576	\$112.00	805027520
	04/29/2025	8050003326	WALKER FERGUSON & FERGUSON Legal	03/13/2025 03/27/2025	149576	\$441.00	805027521
Total By - Method Desc: 9				Total for Method Desc: \$1,891.13 \$1,891.13			
Total Number of Checks: 10				Total Amount: \$1,891.13 \$1,891.13			

Payment Summary Current

Processed Date 4/29/2025 To 4/29/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check	4/29/2025	Temporary Total Disability	8050003306		606.95	805027513	Claimant
		4/29/2025	Bill Review Fees	8050003439		25.71	805027517	RISING MEDICAL SOLUTIONS, LLC
		4/29/2025	Bill Review Fees	8050003431		12.91	805027517	RISING MEDICAL SOLUTIONS, LLC
		4/29/2025	Bill Review Fees	8050003435		15.03	805027517	RISING MEDICAL SOLUTIONS, LLC
		4/29/2025	Fees including PI, IOS, background	8050003393		2.00	805027516	Two Oaks Investments, LLC
		4/29/2025	Fees including PI, IOS, background	8050003441		2.00	805027516	Two Oaks Investments, LLC
		4/29/2025	Fees including PI, IOS, background	8050003442		2.00	805027516	Two Oaks Investments, LLC
		4/29/2025	Legal	8050003311		70.00	805027518	WALKER FERGUSON & FERGUSON
		4/29/2025	Legal	8050003399		308.00	805027519	WALKER FERGUSON & FERGUSON
		4/29/2025	Legal	8050003306		112.00	805027520	WALKER FERGUSON & FERGUSON
		4/29/2025	Legal	8050003326		441.00	805027521	WALKER FERGUSON & FERGUSON
		4/29/2025	Physician	8050003439		83.81	805027515	Richard R Morgan
		4/29/2025	Physician	8050003435		136.70	805027514	MCBRIDE ORTHOPEDIC HOSPITAL, LLC

Payment Summary Current

Processed Date 4/29/2025 To 4/29/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check	4/29/2025	Physician	8050003431		73.02	805027514	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		Total Payment Method				1,891.13		
	Paper	4/29/2025	Hospital - Outpatient	8050003435		0.00		MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		Total Payment Method				0.00		
	Total Insurer						1,891.13	
Grand Total						1,891.13		

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

DISTRICT 1

DISTRICT 2

DISTRICT 3

ATTEST:

COUNTY CLERK

	Claim Number	Department	Amount
A	8050003306	Sheriff	\$718.95
B	8050003311	Juvenile	\$70.00
C	8050003326	Juvenile	\$441.00
D	8050003393	Juvenile	\$2.00
E	8050003399	Sheriff	\$308.00
F	8050003431	Juvenile	\$85.93
G	8050003435	Juvenile	\$151.73
H	8050003439	Juvenile	\$109.52
I	8050003441	Sheriff	\$2.00
J	8050003442	Sheriff	\$2.00
			\$1,891.13