CONSOLIDATED
BENEFITS RESOURCES, L.L.C.

Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Paper Transaction							
	11/20/2025	8050003445	RISING MEDICAL SOLUTIONS, LLC Medical Refund Reimbursement	10/02/2025 10/02/2025	153709	($88.52)	54714
		Total By - Method Desc: 1			**Total for Method Desc:**	**($88.52)**	**($88.52)**

CONSOLIDATED
BENEFITS RESOURCES, L.L.C.

Check Register

Oklahoma County

Method Desc	Check Date	Claim # / Claimant Name	Payee / Payment Type	Service From / Service To	Run ID	Amount	Check #
Check							
	12/23/2025	8050003469	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	11/26/2025 11/26/2025	153709	$129.11	805027740
	12/23/2025	Combined	CentraLink LLC Medical	11/20/2025 11/20/2025	153709	$326.55	805027741
	12/23/2025	Combined	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA Physician	12/04/2025 12/04/2025	153709	$522.87	805027742
	12/23/2025	Combined	ISO Claims Partners, Inc Medical	12/02/2025 12/02/2025	153709	$2,500.00	805027743
	12/23/2025	Combined	RISING MEDICAL SOLUTIONS, LLC Bill Review Fees	12/04/2025 12/04/2025	153709	$112.44	805027744
	12/23/2025	8050003306	WALKER FERGUSON & FERGUSON Legal	11/03/2025 11/21/2025	153709	$499.14	805027745

Total By - Method Desc:	**6**	**Total for Method Desc:**	**$4,090.11** **$4,090.11**
Total Number of Checks:	**7**	**Total Amount:**	**$4,001.59** **$4,001.59**

Payment Summary Current

Processed Date 12/23/2025 To 12/23/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County								
	Check							
		12/23/2025	Bill Review Fees	8050003466		53.77	805027744	RISING MEDICAL SOLUTIONS, LLC
		12/23/2025	Bill Review Fees	8050003462		10.37	805027744	RISING MEDICAL SOLUTIONS, LLC
		12/23/2025	Bill Review Fees	8050003470		10.37	805027744	RISING MEDICAL SOLUTIONS, LLC
		12/23/2025	Bill Review Fees	8050003469		16.29	805027744	RISING MEDICAL SOLUTIONS, LLC
		12/23/2025	Bill Review Fees	8050003470		21.64	805027744	RISING MEDICAL SOLUTIONS, LLC
		12/23/2025	Legal	8050003306		499.14	805027745	WALKER FERGUSON & FERGUSON
		12/23/2025	Medical	8050003306		2,000.00	805027743	ISO Claims Partners, Inc
		12/23/2025	Medical	8050003466		65.48	805027741	CentraLink LLC
		12/23/2025	Medical	8050003466		57.60	805027741	CentraLink LLC
		12/23/2025	Medical	8050003466		123.75	805027741	CentraLink LLC
		12/23/2025	Medical	8050003466		65.48	805027741	CentraLink LLC
		12/23/2025	Medical	8050003462		14.24	805027741	CentraLink LLC
		12/23/2025	Medical	8050003306		500.00	805027743	ISO Claims Partners, Inc
		12/23/2025	Physician	8050003462		148.85	805027742	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA

Payment Summary Current

Processed Date 12/23/2025 To 12/23/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County								
	Check							
		12/23/2025	Physician	8050003470		148.85	805027742	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		12/23/2025	Physician	8050003470		225.17	805027742	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		12/23/2025	Physician	8050003469		129.11	805027740	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
				Total Payment Method		**4,090.11**		
	Paper							
		12/23/2025	Medical Refund Reimbursement	8050003445		-88.52	54714	RISING MEDICAL SOLUTIONS, LLC
				Total Payment Method		**-88.52**		
				Total Insurer		**4,001.59**		
				Grand Total		**4,001.59**		

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	$2,999.14
B	8050003462	District 2	$173.46
C	8050003466	Juvenile	$366.08
D	8050003469	Sheriff	$145.40
E	8050003470	District 3	$406.03
			$4,090.11