Legistar 24-5617 - Patient Arrestee Bill Payments

Supplier Name	Payment Date	AP Invoice amount
SAINT ANTHONY HOSPITAL	9/12/2024	$712.77
SAINT ANTHONY HOSPITAL	9/12/2024	$4,079.65
SAINT ANTHONY HOSPITAL	9/17/2024	$375.42
SAINT ANTHONY HOSPITAL	9/17/2024	$555.54
CITY OF CHICAGO EMS	8/1/2024	$3,051.41
CITY OF CHICAGO EMS	8/1/2024	$3,051.41
CITY OF CHICAGO EMS	8/1/2024	$3,051.41
CITY OF CHICAGO EMS	9/12/2024	$3,051.41
CITY OF CHICAGO EMS	9/12/2024	$3,040.21
CITY OF CHICAGO EMS	9/17/2024	$3,051.41
CITY OF CHICAGO EMS	9/12/2024	$3,151.20
CITY OF CHICAGO EMS	9/17/2024	$3,051.41
MT SINAI HOSPITAL MED CTR	8/1/2024	$208.80
MT SINAI HOSPITAL MED CTR	8/1/2024	$279.09
MT SINAI HOSPITAL MED CTR	8/1/2024	$313.75
MT SINAI HOSPITAL MED CTR	8/1/2024	$829.36
MT SINAI HOSPITAL MED CTR	8/1/2024	$890.34
MT SINAI HOSPITAL MED CTR	9/12/2024	$572.59
MT SINAI HOSPITAL MED CTR	9/12/2024	$625.08
MT SINAI HOSPITAL MED CTR	9/24/2024	$986.40
MT SINAI HOSPITAL MED CTR	9/17/2024	$471.30
MT SINAI HOSPITAL MED CTR	9/17/2024	$674.64
MT SINAI HOSPITAL MED CTR	9/17/2024	$1,202.10
BUDS AMBULANCE SERVICE	9/12/2024	$404.76
ST. ANTHONY HEALTH AFFILIATES	8/1/2024	$11.05
ST. ANTHONY HEALTH AFFILIATES	9/17/2024	$59.95
NORTHWESTERN MEDICAL FACULTY FOUNDATION	9/17/2024	$25.05
NORTHWESTERN MEDICAL FACULTY FOUNDATION	9/17/2024	$66.40
CEPAMERICA ILLINOIS LLP	8/1/2024	$1,546.05
	Total	**$39,389.96**