Legistar 23-3334 - Patient Arrestee Bill Payments

Supplier Name	Payment Date
MT SINAI HOSPITAL MED CTR	5/25/2023
MT SINAI HOSPITAL MED CTR	5/25/2023
MT SINAI HOSPITAL MED CTR	5/25/2023
MT SINAI HOSPITAL MED CTR	5/25/2023
MT SINAI HOSPITAL MED CTR	5/25/2023
MT SINAI HOSPITAL MED CTR	5/25/2023
ST. ANTHONY HEALTH AFFILIATES	6/1/2023
ST. ANTHONY HEALTH AFFILIATES	6/1/2023
PATHOLOGY SERVICES OF ILLINOIS	6/1/2023
PATHOLOGY SERVICES OF ILLINOIS	5/25/2023
NORTHWESTERN MEDICAL FACULTY FOUNDATION	5/25/2023
CEPAMERICA ILLINOIS LLP	5/18/2023
MT SINAI MEDICAL GROUP	5/18/2023
SAINT ANTHONY HOSPITAL	5/25/2023

SAINT ANTHONY HOSPITAL	5/25/2023
SAINT ANTHONY HOSPITAL	5/25/2023
SAINT ANTHONY HOSPITAL	5/25/2023
SAINT ANTHONY HOSPITAL	5/25/2023
	Grand Total

Amount Paid
\$57.81
\$190.22
\$359.99
\$249.32
\$1,153.14
\$465.77
\$236.01
\$57.21
\$53.08
\$54.00
\$81.00
\$54.00
\$72.69
\$141.14
\$67.00
\$100.00
\$38.00
\$24.23
\$32.98
\$121.66
\$53.76
\$53.76
\$67.38
\$635.47
\$321.66
\$635.47
\$516.58
\$291.50
\$742.35
\$687.38
\$603.20
\$207.01
\$213.11
\$2,099.25
\$1,449.35

\$44.44	ŀ
\$60.00	ı