

# Manual Claim Reimbursement

Stirling Benefits, Inc.

1/1/2010 - 12/31/2010

Employer Name	ABC Company							
Employee ID	Enrollee Name	Input Date	Approved Amount	Pended Amount	Check Amount	Check/Trace Number	Claim Number	Reimbursement Method
<b>FSA-MED ( 1/1/2010 - 12/31/2010 )</b>								
XXX-XX-3146	Three, Participant	9/27/2010	200.00	0.00	500.00	1	20100927-1	Check
<b>Process Date:</b>	<b>9/27/2010</b>	<b>FSA</b>	<b>Participant Reimbursed Total</b>	<b>200.00</b>				
			<b>Participant Reissued Reimbursed Total</b>	<b>0.00</b>				
			<b>Provider Reimbursed Total</b>	<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>	<b>0.00</b>				
			<b>Total</b>	<b>200.00</b>				
<b>HRA ( 1/1/2010 - 12/31/2010 )</b>								
XXX-XX-3146	Three, Participant	9/27/2010	300.00	0.00	500.00	1	20100927-2	Check
<b>Process Date:</b>	<b>9/27/2010</b>	<b>HRA</b>	<b>Participant Reimbursed Total</b>	<b>300.00</b>				
			<b>Participant Reissued Reimbursed Total</b>	<b>0.00</b>				
			<b>Provider Reimbursed Total</b>	<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>	<b>0.00</b>				
			<b>Total</b>	<b>300.00</b>				
			<b>Participant Reimbursed Total</b>	<b>9/27/2010</b>				<b>500.00</b>
			<b>Participant Reissued Reimbursed Total</b>	<b>9/27/2010</b>				<b>0.00</b>
			<b>Provider Reimbursed Total</b>	<b>9/27/2010</b>				<b>0.00</b>
			<b>Provider Reissued Reimbursed Total</b>	<b>9/27/2010</b>				<b>0.00</b>
			<b>Total</b>	<b>9/27/2010</b>				<b>500.00</b>
<b>FSA-DEP ( 1/1/2010 - 12/31/2010 )</b>								
XXX-XX-6111	One, Participant	9/28/2010	1,000.00	0.00	1,000.00	2	20100928-1	Check
<b>Process Date:</b>	<b>9/28/2010</b>	<b>DCA</b>	<b>Participant Reimbursed Total</b>	<b>1,000.00</b>				
			<b>Participant Reissued Reimbursed Total</b>	<b>0.00</b>				
			<b>Provider Reimbursed Total</b>	<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>	<b>0.00</b>				
			<b>Total</b>	<b>1,000.00</b>				
			<b>Participant Reimbursed Total</b>	<b>9/28/2010</b>				<b>1,000.00</b>
			<b>Participant Reissued Reimbursed Total</b>	<b>9/28/2010</b>				<b>0.00</b>
			<b>Provider Reimbursed Total</b>	<b>9/28/2010</b>				<b>0.00</b>
			<b>Provider Reissued Reimbursed Total</b>	<b>9/28/2010</b>				<b>0.00</b>
			<b>Total</b>	<b>9/28/2010</b>				<b>1,000.00</b>
<b>HRA ( 8/1/2009 - 10/31/2009 )</b>								
XXX-XX-4676	Two, Participant A	7/15/2010	100.00	0.00	1,300.00	8	20100715-3	Check

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<b>Process Date:</b>	<b>10/22/2010</b>	<b>HRA</b>	<b>Participant Reimbursed Total</b>		<b>100.00</b>				
			<b>Participant Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Total</b>		<b>100.00</b>				
<b>PRM ( 1/1/2009 - 12/31/2009 )</b>									
XXX-XX-4676	Two, Participant A	4/6/2010	400.00	0.00	1,300.00	8	20100406-1	Check	
XXX-XX-4676	Two, Participant A	4/7/2010	100.00	0.00	1,300.00	8	20100407-1	Check	
XXX-XX-4676	Two, Participant A	4/8/2010	100.00	0.00	1,300.00	8	20100408-1	Check	
XXX-XX-4676	Two, Participant A	4/9/2010	100.00	0.00	1,300.00	8	20100409-1	Check	
XXX-XX-4676	Two, Participant A	4/10/2010	100.00	0.00	1,300.00	8	20100410-1	Check	
XXX-XX-4676	Two, Participant A	4/11/2010	100.00	0.00	1,300.00	8	20100411-1	Check	
XXX-XX-4676	Two, Participant A	5/6/2010	100.00	0.00	1,300.00	8	20100506-2	Check	
XXX-XX-4676	Two, Participant A	5/5/2010	100.00	0.00	1,300.00	8	20100505-2	Check	
XXX-XX-4676	Two, Participant A	5/4/2010	100.00	0.00	1,300.00	8	20100504-2	Check	
<b>Process Date:</b>	<b>10/22/2010</b>	<b>PRM</b>	<b>Participant Reimbursed Total</b>		<b>1,200.00</b>				
			<b>Participant Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Total</b>		<b>1,200.00</b>				
<b>PRM ( 1/1/2010 - 12/31/2010 )</b>									
XXX-XX-5678	Que, Susie	10/22/2010	1,500.00 <sup>r</sup>	0.00	1,500.00	7 <sup>r</sup>	20101022-1	Check	
<b>Process Date:</b>	<b>10/22/2010</b>	<b>PRM</b>	<b>Participant Reimbursed Total</b>		<b>0.00</b>				
			<b>Participant Reissued Reimbursed Total</b>		<b>1,500.00</b>				
			<b>Provider Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Total</b>		<b>1,500.00</b>				
<b>PRM ( 1/1/2009 - 12/31/2009 )</b>									
XXX-XX-6111	One, Participant	4/5/2010	400.00	0.00	1,200.00	6	20100405-1	Check	
XXX-XX-6111	One, Participant	5/8/2010	100.00	0.00	1,200.00	6	20100508-1	Check	
XXX-XX-6111	One, Participant	5/9/2010	100.00	0.00	1,200.00	6	20100509-1	Check	
XXX-XX-6111	One, Participant	5/10/2010	100.00	0.00	1,200.00	6	20100510-1	Check	
XXX-XX-6111	One, Participant	5/11/2010	100.00	0.00	1,200.00	6	20100511-1	Check	

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<b>Process Date:</b>	<b>10/22/2010</b>	<b>PRM</b>	<b>Participant Reimbursed Total</b>		<b>800.00</b>				
			<b>Participant Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Total</b>		<b>800.00</b>				
<b>PRM ( 1/1/2010 - 12/31/2010 )</b>									
XXX-XX-6111	One, Participant	10/22/2010	1,500.00	0.00	1,500.00	5	20101022-3	Check	
<b>Process Date:</b>	<b>10/22/2010</b>	<b>PRM</b>	<b>Participant Reimbursed Total</b>		<b>1,500.00</b>				
			<b>Participant Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Total</b>		<b>1,500.00</b>				
<b>PRM ( 1/1/2009 - 12/31/2009 )</b>									
XXX-XX-6111	One, Participant	5/4/2010	100.00	0.00	1,200.00	6	20100504-1	Check	
XXX-XX-6111	One, Participant	5/5/2010	100.00	0.00	1,200.00	6	20100505-1	Check	
XXX-XX-6111	One, Participant	5/6/2010	100.00	0.00	1,200.00	6	20100506-1	Check	
XXX-XX-6111	One, Participant	5/7/2010	100.00	0.00	1,200.00	6	20100507-1	Check	
<b>Process Date:</b>	<b>10/22/2010</b>	<b>PRM</b>	<b>Participant Reimbursed Total</b>		<b>400.00</b>				
			<b>Participant Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Total</b>		<b>400.00</b>				
<b>PRM ( 1/1/2010 - 12/31/2010 )</b>									
XXX-XX-9100	Brown, James	10/22/2010	150.00	0.00	150.00	3	20101022-2	Check	
<b>Process Date:</b>	<b>10/22/2010</b>	<b>PRM</b>	<b>Participant Reimbursed Total</b>		<b>150.00</b>				
			<b>Participant Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reimbursed Total</b>		<b>0.00</b>				
			<b>Provider Reissued Reimbursed Total</b>		<b>0.00</b>				
			<b>Total</b>		<b>150.00</b>				
			<b>Participant Reimbursed Total</b>		<b>10/22/2010</b>			<b>4,150.00</b>	
			<b>Participant Reissued Reimbursed Total</b>		<b>10/22/2010</b>			<b>1,500.00</b>	
			<b>Provider Reimbursed Total</b>		<b>10/22/2010</b>			<b>0.00</b>	
			<b>Provider Reissued Reimbursed Total</b>		<b>10/22/2010</b>			<b>0.00</b>	
			<b>Total</b>		<b>10/22/2010</b>			<b>5,650.00</b>	

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1/1/2010 - 12/31/2010

Employer Name	ABC Company							
Employee ID	Enrollee Name	Input Date	Approved Amount	Pended Amount	Check Amount	Check/Trace Number	Claim Number	Reimbursement Method
<b>PRM ( 1/1/2010 - 12/31/2010 )</b>								
XXX-XX-6822	Bell, Howard	11/4/2010	1,815.00	0.00	1,815.00	10	20101104-4	Check
XXX-XX-7900	Bell, Elizabeth	11/4/2010	1,815.00	0.00	1,815.00	9	20101104-3	Check
XXX-XX-5678	Que, Susie	11/4/2010	150.00	0.00	150.00	12	20101104-2	Check
XXX-XX-6111	One, Participant	11/4/2010	150.00	0.00	150.00	11	20101104-1	Check

<b>Process Date:</b>	11/4/2010	<b>PRM</b>	<b>Participant Reimbursed Total</b>	<b>3,930.00</b>	
			<b>Participant Reissued Reimbursed Total</b>	<b>0.00</b>	
			<b>Provider Reimbursed Total</b>	<b>0.00</b>	
			<b>Provider Reissued Reimbursed Total</b>	<b>0.00</b>	
			<b>Total</b>	<b>3,930.00</b>	
			<b>Participant Reimbursed Total</b>	<b>11/4/2010</b>	<b>3,930.00</b>
			<b>Participant Reissued Reimbursed Total</b>	<b>11/4/2010</b>	<b>0.00</b>
			<b>Provider Reimbursed Total</b>	<b>11/4/2010</b>	<b>0.00</b>
			<b>Provider Reissued Reimbursed Total</b>	<b>11/4/2010</b>	<b>0.00</b>
			<b>Total</b>	<b>11/4/2010</b>	<b>3,930.00</b>

<b>PRM ( 1/1/2010 - 12/31/2010 )</b>								
XXX-XX-6822	Bell, Howard	12/2/2010	165.00	0.00	165.00	14	20101202-4	Check
XXX-XX-7900	Bell, Elizabeth	12/2/2010	165.00	0.00	165.00	13	20101202-3	Check
XXX-XX-5678	Que, Susie	12/2/2010	150.00	0.00	150.00	16	20101202-2	Check
XXX-XX-6111	One, Participant	12/2/2010	150.00	0.00	150.00	15	20101202-1	Check

<b>Process Date:</b>	12/3/2010	<b>PRM</b>	<b>Participant Reimbursed Total</b>	<b>630.00</b>	
			<b>Participant Reissued Reimbursed Total</b>	<b>0.00</b>	
			<b>Provider Reimbursed Total</b>	<b>0.00</b>	
			<b>Provider Reissued Reimbursed Total</b>	<b>0.00</b>	
			<b>Total</b>	<b>630.00</b>	
			<b>Participant Reimbursed Total</b>	<b>12/3/2010</b>	<b>630.00</b>
			<b>Participant Reissued Reimbursed Total</b>	<b>12/3/2010</b>	<b>0.00</b>
			<b>Provider Reimbursed Total</b>	<b>12/3/2010</b>	<b>0.00</b>
			<b>Provider Reissued Reimbursed Total</b>	<b>12/3/2010</b>	<b>0.00</b>
			<b>Total</b>	<b>12/3/2010</b>	<b>630.00</b>

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1/1/2010 - 12/31/2010

Employer Name	ABC Company	Input Date	Approved Amount	Pended Amount	Check Amount	Check/Trace Number	Claim Number	Reimbursement Method
			<b>Participant Reimbursed Total</b>	<b>ABC Company</b>				<b>10,210.00</b>
			<b>Participant Reissued Reimbursed Total</b>	<b>ABC Company</b>				<b>1,500.00</b>
			<b>Provider Reimbursed Total</b>	<b>ABC Company</b>				<b>0.00</b>
			<b>Provider Reissued Reimbursed Total</b>	<b>ABC Company</b>				<b>0.00</b>
			<b>Total</b>	<b>ABC Company</b>				<b>11,710.00</b>
			<b>Participant Reimbursed Total</b>	<b>Stirling Benefits, Inc.</b>				<b>10,210.00</b>
			<b>Participant Reissued Reimbursed Total</b>	<b>Stirling Benefits, Inc.</b>				<b>1,500.00</b>
			<b>Provider Reimbursed Total</b>	<b>Stirling Benefits, Inc.</b>				<b>0.00</b>
			<b>Provider Reissued Reimbursed Total</b>	<b>Stirling Benefits, Inc.</b>				<b>0.00</b>
			<b>Total</b>	<b>Stirling Benefits, Inc.</b>				<b>11,710.00</b>

e: This Check/Trace Number was generated externally

r: Reissued Payment.

d: Indicates Dependent Claim