

Benefits Paid Report (Compensation Payments Only)

Report Date:10/25/23 *

Name:GEORGE SOOHOO		Claim Num:06643946			Date of Injury:08/16/21	
Payee Name**	Check Num	Payment Dt.	Invoice Num.	From	То	Payment Amt.
Payment Type:1 Permanent Disability (PD/LP)						
GEORGE SOOHOO	F7019012	03/30/2023		10/22/21	03/30/23	\$21,750.00
GEORGE SOOHOO	F7019377	04/13/2023		03/31/23	04/13/23	\$580.00
GEORGE SOOHOO	F7019807	04/27/2023		04/14/23	04/27/23	\$580.00
GEORGE SOOHOO	F7020226	05/11/2023		04/28/23	05/11/23	\$580.00
GEORGE SOOHOO	F7020633	05/25/2023		05/12/23	05/25/23	\$580.00
GEORGE SOOHOO	F7021050	06/08/2023		05/26/23	06/08/23	\$580.00
GEORGE SOOHOO	F7021464	06/22/2023		06/09/23	06/22/23	\$580.00
GEORGE SOOHOO	F7021880	07/06/2023		06/23/23	07/06/23	\$580.00
GEORGE SOOHOO	F7022269	07/20/2023		07/07/23	07/20/23	\$580.00
GEORGE SOOHOO	F7022685	08/03/2023		07/21/23	08/03/23	\$580.00
GEORGE SOOHOO	F7023088	08/17/2023		08/04/23	08/17/23	\$580.00
GEORGE SOOHOO	F7023465	08/31/2023		08/18/23	08/31/23	\$580.00
GEORGE SOOHOO	F7023862	09/14/2023		09/01/23	09/14/23	\$580.00
GEORGE SOOHOO	F7024255	09/28/2023		09/15/23	09/28/23	\$580.00
GEORGE SOOHOO	F7024643	10/12/2023		09/29/23	10/12/23	\$580.00
					Sum:	\$29,870.00