

Faulkner County  
 Summary Statement of Operation  
 Expenditures  
 23-01 to 23-13  
 01/01/2023 - 12/31/2023  
 1002 Employee Health Insurance

Posted on or Before 11/14/2023

Account	Description	Orig Budget	Amendments	Amend Budget	12/01 - 12/31		Year to Date		Balance	% Used
					Trans	Enc	Trans	Enc		
<b>1002.0121</b>	<b>Health Insurance Claims/Adm Fees</b>									
3058	Health Insurance - Cla	3,878,142.00	0.00	3,878,142.00	0.00	0.00	2,183,280.10	0.00	1,694,861.90	56.30
3059	Health Insurance Admin	599,887.00	0.00	599,887.00	0.00	0.00	561,150.05	0.00	38,736.95	93.54
	Sub Total Other Charges	4,478,029.00	0.00	4,478,029.00	0.00	0.00	2,744,430.15	0.00	1,733,598.85	61.29
<b>Dept Total *</b>	<b>Health Insurance</b>	4,478,029.00	0.00	4,478,029.00	0.00	0.00	2,744,430.15	0.00	1,733,598.85	61.29
<b>Fund Total **</b>	<b>1002 Employee Hea</b>	4,478,029.00	0.00	4,478,029.00	0.00	0.00	2,744,430.15	0.00	1,733,598.85	61.29

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Account	Description	Orig Budget	Amendments	Amend Budget	12/01 - 12/31		Year to Date		Balance	%
					Trans	Enc	Trans	Enc		
<b>Grand Total</b>		<b>4,478,029.00</b>	<b>0.00</b>	<b>4,478,029.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,744,430.15</b>	<b>0.00</b>	<b>1,733,598.85</b>	<b>61.29</b>