MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- May 16, 2018

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	583,171.40
TOTAL TRANSFERS BETWEEN FUNDS	$	-
TOTAL NURSING HOME UPL EXPENSES	$	363,088.12
TOTAL INTER-GOVERNMENT TRANSFERS	$	-
GRAND TOTAL DISBURSEMENTS APPROVED May 16, 2018	**$**	**946,259.52**

APPROVED

MAY 16 2018

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---May 16, 2018

PAYABLES AND PAYROLL			
5/10/2018	Weekly Payables	231,673.19	
5/14/2018	McKesson-340B Prescription Expense	2,149.28	
5/14/2018	Payroll Liabilities (Payroll Taxes)	84,873.70	
5/14/2018	Payroll	258,604.34	
	Electronic Bank Payments		
5/9/2018	IBC Electronic Payments (Credit Card & Lease Fees)	81.20	
	Prosperity Electronics Payments		
5/7-5/11/18	Credit Card & Lease Fees	4,125.45	
5/20/2018	Sales Tax for April 2018	1,664.24	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 583,171.40**
TOTAL TRANSFERS BETWEEN FUNDS			**$ -**
NURSING HOME UPL EXPENSES			
5/14/2018	Nursing Home UPI	152,078.66	
5/14/2018	Nursing Home UPI	211,009.46	
TOTAL NURSING HOME UPL EXPENSES			**$ 363,088.12**
TOTAL INTER-GOVERNMENT TRANSFERS			**$ -**
GRAND TOTAL DISBURSEMENTS APPROVED May 16, 2018			**$ 946,259.52**

BANK CODE	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	175798	05/16/18	71.69	ACE HARDWARE 15521
A/P	175799	05/16/18	2,732.79	ACOSTA ELECTRIC
A/P	175800	05/16/18	1,400.00	ACUTE CARE INC
A/P	175801	05/16/18	265.22	ALIMED INC.
A/P	175802	05/16/18	2,213.16	AMERISOURCEBERGEN DRUG CORP
A/P	175803	05/16/18	5,945.50	AYA HEALTHCARE INC
A/P	175804	05/16/18	241.82	BAXTER HEALTHCARE
A/P	175805	05/16/18	719.00	BAXTER HEALTHCARE CORP
A/P	175806	05/16/18	1,192.10	BECKMAN COULTER INC
A/P	175807	05/16/18	911.99	BECTON, DICKINSON & CO (BD)
A/P	175808	05/16/18	2,831.67	BHB MACHINE & PUMP REPAIR, LLC
A/P	175809	05/16/18	4,591.60	BKD, LLP
A/P	175810	05/16/18	787.50	BROADMOOR AT CREEKSIDE PARK
A/P	175811	05/16/18	170.00	CALHOUN COUNTY INDIGENT ACCOUN
A/P	175812	05/16/18	5,498.57	CARDINAL HEALTH 414,LLC
A/P	175813	05/16/18	157.94	CAREFUSION
A/P	175814	05/16/18	1,491.18	CDW GOVERNMENT, INC.
A/P	175815	05/16/18	240.00	CHRIS KOVAREK
A/P	175816	05/16/18	12,187.50	COMPHEALTH ASSOCIATES, INC.
A/P	175817	05/16/18	2,965.64	CSI LEASING INC
A/P	175818	05/16/18	414.96	DEWITT POTH & SON
A/P	175819	05/16/18	51.18	DONN STRINGO
A/P	175820	05/16/18	766.19	DSHS CENTRAL LAB MC2004
A/P	175821	05/16/18	128.56	DYNATRONICS CORPORATION
A/P	175822	05/16/18	3,400.00	EL CAMPO REFRIGERATION
A/P	175823	05/16/18	7,750.00	EMERGENCY STAFFING SOLUTIONS
A/P	175824	05/16/18	738.97	FASTSIGNS
A/P	175825	05/16/18	184.53	FEDERAL EXPRESS CORP.
A/P	175826	05/16/18	75.00	FIRST CLEARING
A/P	175827	05/16/18	8,694.52	FISHER HEALTHCARE
A/P	175828	05/16/18	134.97	GALLS,LLC
A/P	175829	05/16/18	40,599.86	GOLDENCREEK HEALTHCARE
A/P	175830	05/16/18	218.55	GRAINGER
A/P	175831	05/16/18	236.16	GULF COAST PAPER COMPANY
A/P	175832	05/16/18	221.57	HEB CREDIT RECEIVABLES DEPT308
A/P	175833	05/16/18	623.00	INTOXIMETERS INC
A/P	175834	05/16/18	250.00	ITERSOURCE CORPORATION
A/P	175835	05/16/18	1,374.00	LABCORP OF AMERICA HOLDINGS
A/P	175836	05/16/18	1,165.00	M G TRUST
A/P	175837	05/16/18	295.62	MARKETLAB, INC
A/P	175838	05/16/18	1,085.00	MASA
A/P	175839	05/16/18	1,767.43	MED-PRO DISTRIBUTORS, LLC
A/P	175840	05/16/18	138.00	MEDIPROCITY
A/P	175841	05/16/18	.00	VOIDED
A/P	175842	05/16/18	5,702.90	MEDLINE INDUSTRIES INC
A/P	175843	05/16/18	110.00	MEMORIAL MEDICAL CLINIC
A/P	175844	05/16/18	258.52	METLIFE
A/P	175845	05/16/18	795.00	MINORITIES & SUCCESS
A/P	175846	05/16/18	15,933.43	MMC EMPLOYEE BENEFIT PLAN
A/P	175847	05/16/18	109.45	MMC VOLUNTEERS

BANK CODE	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	175848	05/16/18	.00	VOIDED
A/P	175849	05/16/18	9,710.89	MORRIS & DICKSON CO, LLC
A/P	175850	05/16/18	9,410.21	PAETEC (WINDSTREAM)
A/P	175851	05/16/18	165.00	PALACIOS BEACON
A/P	175852	05/16/18	3,350.00	PREMIER SLEEP DISORDERS CENTER
A/P	175853	05/16/18	112.00	RAPID PRINTING LLC
A/P	175854	05/16/18	240.00	REVISTA de VICTORIA
A/P	175855	05/16/18	173.00	RICOH USA, INC
A/P	175856	05/16/18	6,377.72	RICOH USA, INC.
A/P	175857	05/16/18	1,994.72	SANOFI PASTEUR INC
A/P	175858	05/16/18	67.24	SHERWIN WILLIAMS
A/P	175859	05/16/18	1,250.00	STACY SYSTEMS INC
A/P	175860	05/16/18	94.80	STRYKER SALES CORP
A/P	175861	05/16/18	5,174.02	STRYKER SUSTAINABILITY
A/P	175862	05/16/18	1,500.00	TACORE MEDICAL, INC.
A/P	175863	05/16/18	1,564.08	THERACOM, LLC
A/P	175864	05/16/18	41,998.15	THYSSENKRUPP ELEVATOR CORP
A/P	175865	05/16/18	2,732.73	UNIFIRST HOLDINGS INC
A/P	175866	05/16/18	363.47	UNIFORM ADVANTAGE
A/P	175867	05/16/18	561.47	UPS
A/P	175868	05/16/18	2,560.10	WAGEWORKS
A/P	175869	05/16/18	2,436.35	WERFEN USA LLC
TOTALS:			231,673.19	

APPROVED
ON

MAY 16 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED
MAY 10 2018 @11:00A
Calhoun County Auditor

05/10/2018
10:32

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 05/23/2018

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
11283	ACE HARDWARE 15521 ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
122386✓		05/08/20	04/27/20	05/07/20			71.69	0.00	0.00	71.69 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11283	ACE HARDWARE 15521	71.69	0.00	0.00	71.69

Vendor#	Vendor Name	Class	Pay Code
11564	ACOSTA ELECTRIC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6083 ✓		05/08/20	04/24/20	05/10/20			2,732.79	0.00	0.00	2,732.79 ✓
	ELECTRICAL WORK In Inby's Kitchen									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11564	ACOSTA ELECTRIC	2,732.79	0.00	0.00	2,732.79

Vendor#	Vendor Name	Class	Pay Code
10950	ACUTE CARE INC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
23759 ✓		05/09/20	05/20/20	05/05/20			1,400.00	0.00	0.00	1,400.00✓
	RFID FEE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10950	ACUTE CARE INC	1,400.00	0.00	0.00	1,400.00

Vendor#	Vendor Name	Class	Pay Code
A1705	ALIMED INC. ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
RPSV02799678 ✓		05/07/20	04/19/20	05/09/20			65.47	0.00	0.00	65.47 ✓
	SUPPLIES									
RPSV02804543 ✓		05/07/20	04/25/20	05/20/20			199.75	0.00	0.00	199.75 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1705	ALIMED INC.	265.22	0.00	0.00	265.22

Vendor#	Vendor Name	Class	Pay Code
A1360	AMERISOURCEBERGEN DRUG CORP ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
936436138 ✓		05/09/20	05/03/20	05/09/20			2,213.16	0.00	0.00	2,213.16 ✓
	INVENTORY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1360	AMERISOURCEBERGEN DRUG CORP	2,213.16	0.00	0.00	2,213.16

Vendor#	Vendor Name	Class	Pay Code
11756	AYA HEALTHCARE INC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
457680	Boutte	04/24/20	04/19/20	05/19/20			2,892.75	0.00	0.00	2,892.75 ✓
	STAFFING 4/6/18-4/12/18									
459988R	Boutte	05/02/20	04/26/20	05/20/20			3,052.75	0.00	0.00	3,052.75 ✓
	STAFFING 4/13/18-4/19/18									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11756	AYA HEALTHCARE INC	5,945.50	0.00	0.00	5,945.50

Vendor#	Vendor Name	Class	Pay Code
B1150	BAXTER HEALTHCARE ✓	W	

Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
59039978 05/08/20 04/19/20 05/14/20 120.91 0.00 0.00 120.91
SUPPLIES
59082326 05/08/20 04/24/20 05/19/20 120.91 0.00 0.00 120.91

Vendor Totals Number Name Gross Discount No-Pay Net
B1150 BAXTER HEALTHCARE 241.82 0.00 0.00 241.82

Vendor# Vendor Name Class Pay Code
B1075 BAXTER HEALTHCARE CORP M
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
59007355 04/25/20 04/17/20 05/17/20 719.00 0.00 0.00 719.00
INVENTORY
Vendor Totals Number Name Gross Discount No-Pay Net
B1075 BAXTER HEALTHCARE CORP 719.00 0.00 0.00 719.00

Vendor# Vendor Name Class Pay Code
B1220 BECKMAN COULTER INC M
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
107018630 05/09/20 04/26/20 05/21/20 1,192.10 0.00 0.00 1,192.10
SUPPLIES
Vendor Totals Number Name Gross Discount No-Pay Net
B1220 BECKMAN COULTER INC 1,192.10 0.00 0.00 1,192.10

Vendor# Vendor Name Class Pay Code
10024 BECTON, DICKINSON & CO (BD)
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
9104075878 04/25/20 04/18/20 05/18/20 911.99 0.00 0.00 911.99
SUPPLIES
Vendor Totals Number Name Gross Discount No-Pay Net
10024 BECTON, DICKINSON & CO (BD) 911.99 0.00 0.00 911.99

Vendor# Vendor Name Class Pay Code
11211 BHB MACHINE & PUMP REPAIR, LLC
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
708051 05/08/20 04/16/20 04/16/20 2,576.25 0.00 0.00 2,576.25
SERVICE Modifications to luby's stainless steel serving line
708057 05/09/20 04/19/20 05/19/20 255.42 0.00 0.00 255.42
SUPPLIES Fabricate bushings to extend handrail in luby's
Vendor Totals Number Name Gross Discount No-Pay Net
11211 BHB MACHINE & PUMP REPAIR, LLC 2,831.67 0.00 0.00 2,831.67

Vendor# Vendor Name Class Pay Code
10599 BKD, LLP
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
BK00878147 05/01/20 04/26/20 05/17/20 4,591.60 0.00 0.00 4,591.60
DYSH ASSISTANCE (CPA)
Vendor Totals Number Name Gross Discount No-Pay Net
10599 BKD, LLP 4,591.60 0.00 0.00 4,591.60

Vendor# Vendor Name Class Pay Code
11832 BROADMOOR AT CREEKSIDE PARK
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
050218 05/07/20 05/02/20 05/02/20 787.50 0.00 0.00 787.50
TRANSFER Pymt sent to MMC in error
Vendor Totals Number Name Gross Discount No-Pay Net
11832 BROADMOOR AT CREEKSIDE PARK 787.50 0.00 0.00 787.50

Vendor# Vendor Name Class Pay Code

11295 CALHOUN COUNTY INDIGENT ACCOUN

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
050718		05/08/20	05/07/20	05/07/20		170.00	0.00	0.00	170.00
	INDIGENT COPAYS For April								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11295	CALHOUN COUNTY INDIGENT ACCOUN	170.00	0.00	0.00	170.00

Vendor#	Vendor Name	Class	Pay Code
A1825	CARDINAL HEALTH 414,LLC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8000891179A		05/09/20	11/30/20	12/30/20		710.80	0.00	0.00	710.80
	SUPPLIES								
8000898192		05/09/20	12/05/20	01/04/20		56.35	0.00	0.00	56.35
	SUPPLIES								
8001175082		05/09/20	10/31/20	11/30/20		687.96	0.00	0.00	687.96
	SUPPLIES								
8001177299		05/09/20	11/05/20	12/05/20		2,357.95	0.00	0.00	2,357.95
	SUPPLIES								
801182335		05/09/20	11/12/20	12/12/20		484.42	0.00	0.00	484.42
	SUPPLIES								
8001226457		05/09/20	12/31/20	01/30/20		396.01	0.00	0.00	396.01
	SUPPLIES								
8001269463		05/09/20	02/11/20	03/13/20		349.66	0.00	0.00	349.66
	SUPPLIES								
8001624464		05/09/20	04/14/20	05/14/20		406.99	0.00	0.00	406.99
	SUPPLIES								
8001630154		05/09/20	04/21/20	05/21/20		48.43	0.00	0.00	48.43
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1825	CARDINAL HEALTH 414,LLC	5,498.57	0.00	0.00	5,498.57

Vendor#	Vendor Name	Class	Pay Code
A1730	CAREFUSION		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9108435496		05/09/20	04/18/20	05/18/20		157.94	0.00	0.00	157.94
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1730	CAREFUSION	157.94	0.00	0.00	157.94

Vendor#	Vendor Name	Class	Pay Code
C1992	CDW GOVERNMENT, INC.	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
MKP8443		05/07/20	04/16/20	05/16/20		221.63	0.00	0.00	221.63
	SUPPLIES								
MLF2782		05/07/20	04/18/20	05/18/20		120.68	0.00	0.00	120.68
	SUPPLIES								
MMB5449		05/07/20	04/23/20	05/23/20		107.34	0.00	0.00	107.34
	SUPPLIES								
MGL6051		05/09/20	04/02/20	05/02/20		29.96	0.00	0.00	29.96
	supplies								
MHX1970A		05/09/20	04/09/20	05/09/20		715.08	0.00	0.00	715.08
	SUPPLIES								
MMD9598		05/09/20	04/23/20	05/23/20		296.49	0.00	0.00	296.49
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1992	CDW GOVERNMENT, INC.	1,491.18	0.00	0.00	1,491.18

Vendor# Vendor Name Class Pay Code

10105 CHRIS KOVAREK ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
00013		05/07/20	05/03/20	05/13/20			240.00	0.00	0.00	240.00 ✓
	SWNG BD SOCIAL SERV									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10105	CHRIS KOVAREK	240.00	0.00	0.00	240.00

Vendor# Vendor Name Class Pay Code

11900 COMPHEALTH ASSOCIATES, INC. ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
3006818RP		05/02/20	04/30/20	05/17/20			12,187.50	0.00	0.00	12,187.50 ✓
	PLACEMENT fee for James Neubaum-OT									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11900	COMPHEALTH ASSOCIATES, INC.	12,187.50	0.00	0.00	12,187.50

Vendor# Vendor Name Class Pay Code

11004 CSI LEASING INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
RT00190331 ✓		05/09/20	04/23/20	05/23/20			2,965.64	0.00	0.00	2,965.64 ✓
	LEASE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11004	CSI LEASING INC	2,965.64	0.00	0.00	2,965.64

Vendor# Vendor Name Class Pay Code

10368 DEWITT POTH & SON ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
5355560		05/01/20	04/23/20	05/18/20			109.36	0.00	0.00	109.36 ✓
	SUPPLIES Executive Chair For Therapy office									
5355600 ✓		05/01/20	04/23/20	05/18/20			62.07	0.00	0.00	62.07 ✓
	SUPPLIES									
5355140 ✓		05/02/20	04/23/20	05/18/20			229.04	0.00	0.00	229.04 ✓
	SUPPLIES									
5348881 ✓		05/02/20	04/25/20	05/20/20			14.49	0.00	0.00	14.49 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON	414.96	0.00	0.00	414.96

Vendor# Vendor Name Class Pay Code

10026 DONN STRINGO ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
050218		05/07/20	05/02/20	05/02/20			51.18	0.00	0.00	51.18 ✓
	SUPPLIES (3)Binders and Plant for Health Fair									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10026	DONN STRINGO	51.18	0.00	0.00	51.18

Vendor# Vendor Name Class Pay Code

10175 DSHS CENTRAL LAB MC2004 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
022018		05/09/20	03/01/20	03/26/20			276.20	0.00	0.00	276.20 ✓
	SUPPLIES									
122017		05/09/20	04/20/20	05/15/20			276.20	0.00	0.00	276.20 ✓
	SUPPLIES									
102017		05/09/20	04/24/20	05/19/20			213.79	0.00	0.00	213.79 ✓
	LAB SERVICE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10175	DSHS CENTRAL LAB MC2004	766.19	0.00	0.00	766.19

Vendor# Vendor Name Class Pay Code
D1785 DYNATRONICS CORPORATION

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
IN1801601	SUPPLIES	05/07/20	04/27/20	05/17/20			128.56	0.00	0.00	128.56

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	D1785	DYNATRONICS CORPORATION	128.56	0.00	0.00	128.56

Vendor# Vendor Name Class Pay Code
E1048 EL CAMPO REFRIGERATION

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
42507	SUPPLIES replaced Ice Machine on Med/Surg.	05/07/20	03/29/20	04/29/20			3,400.00	0.00	0.00	3,400.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	E1048	EL CAMPO REFRIGERATION	3,400.00	0.00	0.00	3,400.00

Vendor# Vendor Name Class Pay Code
11284 EMERGENCY STAFFING SOLUTIONS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
36388	HOSP FEES	05/09/20	04/30/20	05/10/20			7,750.00	0.00	0.00	7,750.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11284	EMERGENCY STAFFING SOLUTIONS	7,750.00	0.00	0.00	7,750.00

Vendor# Vendor Name Class Pay Code
11892 FASTSIGNS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20694430	NEW BUILDING SIGNS	04/25/20	04/23/20	05/20/20			738.97	0.00	0.00	738.97

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11892	FASTSIGNS	738.97	0.00	0.00	738.97

Vendor# Vendor Name Class Pay Code
F1100 FEDERAL EXPRESS CORP. W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
615577589	SHIPPING	05/08/20	04/19/20	05/14/20			32.99	0.00	0.00	32.99
616288419	SHIPPING	05/08/20	04/26/20	05/21/20			151.54	0.00	0.00	151.54

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	F1100	FEDERAL EXPRESS CORP.	184.53	0.00	0.00	184.53

Vendor# Vendor Name Class Pay Code
11037 FIRST CLEARING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
042618	PAYROLL DED	05/07/20	04/26/20	04/26/20			75.00	0.00	0.00	75.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11037	FIRST CLEARING	75.00	0.00	0.00	75.00

Vendor# Vendor Name Class Pay Code
F1400 FISHER HEALTHCARE M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
7030912	SUPPLIES	05/08/20	01/09/20	02/03/20			19.35	0.00	0.00	19.35

1135206 05/09/20 04/17/20 05/12/20 3,004.93 0.00 0.00 3,004.93
SUPPLIES
1266224 05/09/20 04/18/20 05/13/20 1,303.40 0.00 0.00 1,303.40
SUPPLIES
1416390 05/09/20 04/19/20 05/14/20 2,290.87 0.00 0.00 2,290.87
SUPPLIES
2122627 05/09/20 04/24/20 05/19/20 1,441.66 0.00 0.00 1,441.66
SUPPLIES
2807778 05/09/20 04/25/20 05/20/20 634.31 0.00 0.00 634.31
SUPPLIES
Vendor Totals Number Name Gross Discount No-Pay Net
F1400 FISHER HEALTHCARE 8,694.52 0.00 0.00 8,694.52

Vendor# Vendor Name Class Pay Code
G0321 GALLS,LLC W
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
008946706 05/07/20 12/15/20 01/15/20 134.97 0.00 0.00 134.97
SUPPLIES
Vendor Totals Number Name Gross Discount No-Pay Net
G0321 GALLS,LLC 134.97 0.00 0.00 134.97

Vendor# Vendor Name Class Pay Code
11836 GOLDENCREEK HEALTHCARE
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
050218 05/07/20 05/02/20 05/02/20 14,409.45 0.00 0.00 14,409.45
TRANSFER Pymt was sent to MMC in error
050218A 05/07/20 05/02/20 05/02/20 26,190.41 0.00 0.00 26,190.41
TRANSFER Pymt was sent to MMC in error
Vendor Totals Number Name Gross Discount No-Pay Net
11836 GOLDENCREEK HEALTHCARE 40,599.86 0.00 0.00 40,599.86

Vendor# Vendor Name Class Pay Code
W1300 GRAINGER M
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
9759818991 05/07/20 04/17/20 05/12/20 30.00 0.00 0.00 30.00
SUPPLIES
9766893771 05/07/20 04/23/20 05/18/20 188.55 0.00 0.00 188.55
SUPPLIES
Vendor Totals Number Name Gross Discount No-Pay Net
W1300 GRAINGER 218.55 0.00 0.00 218.55

Vendor# Vendor Name Class Pay Code
G1210 GULF COAST PAPER COMPANY M
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
1485679 04/25/20 04/17/20 05/17/20 236.16 0.00 0.00 236.16
SUPPLIES
1487270 05/02/20 04/19/20 05/19/20 596.70 0.00 0.00 596.70
SUPPLIES
1487269 05/02/20 04/19/20 05/19/20 -596.70 0.00 0.00 -596.70
CREDIT
Vendor Totals Number Name Gross Discount No-Pay Net
G1210 GULF COAST PAPER COMPANY 236.16 0.00 0.00 236.16

Vendor# Vendor Name Class Pay Code
H0031 HEB CREDIT RECEIVABLES DEPT308
Invoice# Comment Tran Dt Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
045672 05/01/20 03/28/20 05/20/20 26.62 0.00 0.00 26.62

Vendor#	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
		SUPPLIES								
	064912		05/01/20	04/05/20	05/20/20		40.53	0.00	0.00	40.53 ✓
		SUPPLIES								
	003264		05/01/20	04/08/20	05/20/20	25.80	~~27.75~~	0.00	0.00	~~27.75~~ 25.80
		SUPPLIES								
	036080		05/01/20	04/09/20	05/20/20		47.22	0.00	0.00	47.22
		SUPPLIES								
	009172		05/01/20	04/09/20	05/20/20	3.74	~~3.64~~	0.00	0.00	~~3.64~~ 3.74
		SUPPLIES								
	059948		05/01/20	04/11/20	05/20/20		6.26	0.00	0.00	6.26 ✓
		SUPPLIES								
	080756		05/01/20	04/11/20	05/20/20	5.04	~~5.46~~	0.00	0.00	~~5.46~~ 5.04
		SUPPLIES								
	082630		05/01/20	04/16/20	05/20/20		13.95	0.00	0.00	13.95 ✓
		SUPPLIES								
	054482		05/01/20	04/16/20	05/20/20		46.96	0.00	0.00	46.96 ✓
		SUPPLIES								
	000360		05/01/20	04/19/20	05/20/20		5.83	0.00	0.00	5.83 ✓
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		H0031	HEB CREDIT RECEIVABLES DEPT308				~~224.22~~ 221.57	0.00	0.00	~~224.22~~ 221.57
Vendor#	Vendor Name				Class	Pay Code				
I1260	INTOXIMETERS INC ✓				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	591501 ✓		05/09/20	03/20/20	04/20/20		184.25	0.00	0.00	184.25 ✓
		SUPPLIES								
	593760 ✓		05/09/20	04/12/20	05/12/20		438.75	0.00	0.00	438.75 ✓
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		I1260	INTOXIMETERS INC				623.00	0.00	0.00	623.00
Vendor#	Vendor Name				Class	Pay Code				
11108	ITERSOURCE CORPORATION ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	4885 ✓		05/09/20	05/01/20	05/01/20		250.00	0.00	0.00	250.00 ✓
		SUPPORT SERVICES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11108	ITERSOURCE CORPORATION				250.00	0.00	0.00	250.00
Vendor#	Vendor Name				Class	Pay Code				
L0700	LABCORP OF AMERICA HOLDINGS ✓				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	58712286 ✓		05/09/20	04/28/20	05/23/20		1,347.71	0.00	0.00	1,347.71 ✓
		SUPPLIES								
	58695292 ✓		05/09/20	04/28/20	05/23/20		26.29	0.00	0.00	26.29 ✓
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		L0700	LABCORP OF AMERICA HOLDINGS				1,374.00	0.00	0.00	1,374.00
Vendor#	Vendor Name				Class	Pay Code				
10972	M G TRUST ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	042618		05/07/20	04/26/20	04/26/20		1,165.00	0.00	0.00	1,165.00 ✓
		PAYROLL DED								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10972	M G TRUST	1,165.00	0.00	0.00	1,165.00

Vendor#	Vendor Name	Class	Pay Code
M1511	MARKETLAB, INC	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
IN00308807	SUPPLIES	05/07/20	04/16/20	05/10/20			295.62	0.00	0.00	295.62

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M1511	MARKETLAB, INC	295.62	0.00	0.00	295.62

Vendor#	Vendor Name	Class	Pay Code
11612	MASA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
574963	INSURANCE	05/02/20	05/18/20	05/18/20			1,085.00	0.00	0.00	1,085.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11612	MASA	1,085.00	0.00	0.00	1,085.00

Vendor#	Vendor Name	Class	Pay Code
11860	MED-PRO DISTRIBUTORS, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9840	SUPPLIES	05/08/20	03/26/20	04/26/20			1,767.43	0.00	0.00	1,767.43

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11860	MED-PRO DISTRIBUTORS, LLC	1,767.43	0.00	0.00	1,767.43

Vendor#	Vendor Name	Class	Pay Code
11668	MEDIPROCITY HIPPA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
4118		05/09/20	05/01/20	05/01/20			138.00	0.00	0.00	138.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11668	MEDIPROCITY	138.00	0.00	0.00	138.00

Vendor#	Vendor Name	Class	Pay Code
M2470	MEDLINE INDUSTRIES INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1848561833	SUPPLIES	05/09/20	04/17/20	05/12/20			630.77	0.00	0.00	630.77
1848561827	SUPPLIES	05/09/20	04/17/20	05/12/20			69.48	0.00	0.00	69.48
18486669877	SUPPLIES	05/09/20	04/18/20	05/13/20			114.95	0.00	0.00	114.95
1848669874	SUPPLIES	05/09/20	04/18/20	05/13/20			43.86	0.00	0.00	43.86
184866~~6~~9878	SUPPLIES	05/09/20	04/18/20	05/13/20			161.05	0.00	0.00	161.05
184866~~6~~9879	SUPPLIES	05/09/20	04/18/20	05/13/20			78.73	0.00	0.00	78.73
1848783480	SUPPLIES	05/09/20	04/19/20	05/14/20			124.14	0.00	0.00	124.14
1848783481	SUPPLIES	05/09/20	04/19/20	05/14/20			211.81	0.00	0.00	211.81
1848936814	SUPPLIES	05/09/20	04/21/20	05/16/20			2,023.27	0.00	0.00	2,023.27
1849042973		05/09/20	04/24/20	05/19/20			45.57	0.00	0.00	45.57

		SUPPLIES						
	1849172777		05/09/20 04/25/20 05/20/20		774.19	0.00	0.00	774.19
		SUPPLIES						
	1849253815		05/09/20 04/26/20 05/21/20		24.78	0.00	0.00	24.78
		SUPPLIES						
	1849253818		05/09/20 04/26/20 05/21/20		22.49	0.00	0.00	22.49
		SUPPLIES						
	1849253814		05/09/20 04/26/20 05/21/20		80.98	0.00	0.00	80.98
		SUPPLIES						
	1849253813		05/09/20 04/26/20 05/21/20		20.61	0.00	0.00	20.61
		SUPPLIES						
	1849253817		05/09/20 04/26/20 05/21/20		1,276.22	0.00	0.00	1,276.22
		SUPPLIES						
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		M2470 MEDLINE INDUSTRIES INC			5,702.90	0.00	0.00	5,702.90
Vendor#	Vendor Name			Class Pay Code				
10963	MEMORIAL MEDICAL CLINIC							
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	042618		05/07/20 04/26/20 04/26/20		110.00	0.00	0.00	110.00
		PAYROLL DED						
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		10963 MEMORIAL MEDICAL CLINIC			110.00	0.00	0.00	110.00
Vendor#	Vendor Name			Class Pay Code				
M2650	METLIFE			W				
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	050118		05/07/20 05/01/20 05/01/20		258.52	0.00	0.00	258.52
		INS						
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		M2650 METLIFE			258.52	0.00	0.00	258.52
Vendor#	Vendor Name			Class Pay Code				
10928	MINORITIES & SUCCESS							
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	MS35350		05/07/20 04/27/20 05/20/20		795.00	0.00	0.00	795.00
		SUBSCRIP Affirmative Action and Good Faith Effort						
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		10928 MINORITIES & SUCCESS			795.00	0.00	0.00	795.00
Vendor#	Vendor Name			Class Pay Code				
10810	MMC EMPLOYEE BENEFIT PLAN							
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	050718		05/08/20 05/07/20 05/07/20		15,933.43	0.00	0.00	15,933.43
		INS						
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		10810 MMC EMPLOYEE BENEFIT PLAN			15,933.43	0.00	0.00	15,933.43
Vendor#	Vendor Name			Class Pay Code				
M2662	MMC VOLUNTEERS			W				
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	671244		05/09/20 05/02/20 05/02/20		109.45	0.00	0.00	109.45
		CARD MACHINE						
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		M2662 MMC VOLUNTEERS			109.45	0.00	0.00	109.45
Vendor#	Vendor Name			Class Pay Code				

10536 MORRIS & DICKSON CO, LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
2730127	INVENTORY	05/09/20	05/02/20	05/12/20			2,877.30	0.00	0.00	2,877.30
2736993	INVENTORY	05/09/20	05/03/20	05/13/20			36.51	0.00	0.00	36.51
2736992	INVENTORY	05/09/20	05/03/20	05/13/20			2,719.43	0.00	0.00	2,719.43
2736994	INVENTORY	05/09/20	05/03/20	05/13/20			22.20	0.00	0.00	22.20
9800	CREDIT	05/09/20	05/03/20	05/13/20			-456.69	0.00	0.00	-456.69
9559	CREDIT	05/09/20	05/03/20	05/13/20			-28.66	0.00	0.00	-28.66
2736991	INVENTORY	05/09/20	05/03/20	05/13/20			70.93	0.00	0.00	70.93
2741809	INVENTORY	05/09/20	05/04/20	05/14/20			44.39	0.00	0.00	44.39
2741807	INVENTORY	05/09/20	05/04/20	05/14/20			16.89	0.00	0.00	16.89
2740169	INVENTORY	05/09/20	05/04/20	05/14/20			682.50	0.00	0.00	682.50
2741808	INVENTORY	05/09/20	05/04/20	05/14/20			898.74	0.00	0.00	898.74
2741806	INVENTORY	05/09/20	05/04/20	05/14/20			5.01	0.00	0.00	5.01
2747438	INVENTORY	05/09/20	05/07/20	05/17/20			786.79	0.00	0.00	786.79
2747439	INVENTORY	05/09/20	05/07/20	05/17/20			212.25	0.00	0.00	212.25
2747437	INVENTORY	05/09/20	05/07/20	05/17/20			94.20	0.00	0.00	94.20
2746072	INVENTORY	05/09/20	05/07/20	05/17/20			1,729.10	0.00	0.00	1,729.10

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	9,710.89	0.00	0.00	9,710.89

Vendor#	Vendor Name	Class	Pay Code
11142	PAETEC (WINDSTREAM)		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
70026755	PHONE	05/09/20	04/22/20	05/11/20			9,410.21	0.00	0.00	9,410.21

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11142	PAETEC (WINDSTREAM)	9,410.21	0.00	0.00	9,410.21

Vendor#	Vendor Name	Class	Pay Code
P0706	PALACIOS BEACON	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
033055394		05/09/20	04/16/20	05/16/20			165.00	0.00	0.00	165.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	P0706	PALACIOS BEACON	165.00	0.00	0.00	165.00

Vendor#	Vendor Name	Class	Pay Code
P1725	PREMIER SLEEP DISORDERS CENTER	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
00070		05/07/20	04/18/20	05/03/20		3,350.00	0.00	0.00	3,350.00
	SLEEP STUDIES								

Vendor Totals Number Name Gross Discount No-Pay Net

P1725 PREMIER SLEEP DISORDERS CENTER 3,350.00 0.00 0.00 3,350.00

Vendor# Vendor Name Class Pay Code

11251 RAPID PRINTING LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2819		05/09/20	04/12/20	05/12/20		112.00	0.00	0.00	112.00
	supplies								

Vendor Totals Number Name Gross Discount No-Pay Net

11251 RAPID PRINTING LLC 112.00 0.00 0.00 112.00

Vendor# Vendor Name Class Pay Code

10645 REVISTA de VICTORIA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
04201823		05/09/20	04/16/20	05/16/20		240.00	0.00	0.00	240.00
	SUPPLIES April Ad								

Vendor Totals Number Name Gross Discount No-Pay Net

10645 REVISTA de VICTORIA 240.00 0.00 0.00 240.00

Vendor# Vendor Name Class Pay Code

10960 RICOH USA, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
175808092		04/24/20	04/17/20	05/17/20		173.00	0.00	0.00	173.00
	SUPPLIES Accidental damage repair								

Vendor Totals Number Name Gross Discount No-Pay Net

10960 RICOH USA, INC 173.00 0.00 0.00 173.00

Vendor# Vendor Name Class Pay Code

I0520 RICOH USA, INC. M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
100426199		05/09/20	04/12/20	05/12/20		172.32	0.00	0.00	172.32
	SUPPLIES								
100464741		05/09/20	04/24/20	05/15/20		6,205.40	0.00	0.00	6,205.40
	RENT								

Vendor Totals Number Name Gross Discount No-Pay Net

I0520 RICOH USA, INC. 6,377.72 0.00 0.00 6,377.72

Vendor# Vendor Name Class Pay Code

S1001 SANOFI PASTEUR INC W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
910008096		05/08/20	04/25/20	05/20/20		1,994.72	0.00	0.00	1,994.72
	SUPPLIES								

Vendor Totals Number Name Gross Discount No-Pay Net

S1001 SANOFI PASTEUR INC 1,994.72 0.00 0.00 1,994.72

Vendor# Vendor Name Class Pay Code

S1800 SHERWIN WILLIAMS W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
67074		05/08/20	04/25/20	05/10/20		55.87	0.00	0.00	55.87
	INVOICE								
67082		05/08/20	04/25/20	05/10/20		11.37	0.00	0.00	11.37
	SUPPLIES								

Vendor Totals Number Name Gross Discount No-Pay Net

S1800 SHERWIN WILLIAMS 67.24 0.00 0.00 67.24

Vendor#	Vendor Name	Class	Pay Code
S2692	STACY SYSTEMS INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1804180		05/08/20	04/16/20	04/16/20		1,250.00	0.00	0.00	1,250.00
	MEDICAL GAS CERTIFICATIOI								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2692	STACY SYSTEMS INC	1,250.00	0.00	0.00	1,250.00

Vendor#	Vendor Name	Class	Pay Code
S2830	STRYKER SALES CORP	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
254822A		04/24/20	04/17/20	05/17/20		94.80	0.00	0.00	94.80
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2830	STRYKER SALES CORP	94.80	0.00	0.00	94.80

Vendor#	Vendor Name	Class	Pay Code
10735	STRYKER SUSTAINABILITY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3326770		04/24/20	04/17/20	05/17/20		5,174.02	0.00	0.00	5,174.02
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10735	STRYKER SUSTAINABILITY	5,174.02	0.00	0.00	5,174.02

Vendor#	Vendor Name	Class	Pay Code
11572	TACORE MEDICAL, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1107		05/09/20	04/24/20	05/14/20		1,500.00	0.00	0.00	1,500.00
	Consulting fee for Family Practice Search								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11572	TACORE MEDICAL, INC.	1,500.00	0.00	0.00	1,500.00

Vendor#	Vendor Name	Class	Pay Code
10732	THERACOM, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
196550136301		05/02/20	04/17/20	05/17/20		1,564.08	0.00	0.00	1,564.08
	INVENTORY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10732	THERACOM, LLC	1,564.08	0.00	0.00	1,564.08

Vendor#	Vendor Name	Class	Pay Code
T2250	THYSSENKRUPP ELEVATOR CORP	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
5000806609		05/09/20	01/10/20	02/10/20		659.75	0.00	0.00	659.75
	ELEVATOR SERVICE								
3003682154		05/09/20	02/01/20	03/01/20		1,229.40	0.00	0.00	1,229.40
	ELEVATOR SERVICE								
ACIA1DVXWCU		05/09/20	05/02/20	05/02/20		40,109.00	0.00	0.00	40,109.00
	ELEVATOR New proposed elevator. Pymt 1 of 2								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	T2250	THYSSENKRUPP ELEVATOR CORP	41,998.15	0.00	0.00	41,998.15

Vendor#	Vendor Name	Class	Pay Code
U1064	UNIFIRST HOLDINGS INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8400272689		05/02/20	04/24/20	05/19/20		48.21	0.00	0.00	48.21
	LAUNDRY								
8400272688		05/02/20	04/24/20	05/19/20		47.15	0.00	0.00	47.15

	SUPPLIES							
	8400272728		05/02/20 04/24/20 05/19/20		1,132.23	0.00	0.00	1,132.23
	SUPPLIES							
	8400272720		05/02/20 04/24/20 05/19/20		80.14	0.00	0.00	80.14
	LAUNDRY							
	8400272685 3198		05/02/20 04/24/20 05/19/20		94.29	0.00	0.00	94.29
	LAUNDRY							
	8400272687		05/02/20 04/24/20 05/19/20		132.40	0.00	0.00	132.40
	LAUNDRY							
	8400273018		05/02/20 04/27/20 05/22/20		801.20	0.00	0.00	801.20
	LAUNDRY							
	8400272992		05/02/20 04/27/20 05/22/20		153.50	0.00	0.00	153.50
	LAUDNRY							
	8400273014		05/02/20 04/27/20 05/22/20		21.25	0.00	0.00	21.25
	laundry							
	8400272990		05/02/20 04/27/20 05/22/20		19.38	0.00	0.00	19.38
	8400272762	laundry	05/07/20 04/24/20 05/19/20		95.03	0.00	0.00	95.03
	LAUNDRY							
	8400272686		05/07/20 04/24/20 05/19/20		107.95	0.00	0.00	107.95
	LAUNDRY							
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		U1064 UNIFIRST HOLDINGS INC			2,732.73	0.00	0.00	2,732.73
Vendor#	Vendor Name		Class	Pay Code				
U1056	UNIFORM ADVANTAGE		W					
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	8661822		05/09/20 04/25/20 05/10/20		65.97	0.00	0.00	65.97
		uniform						
	8680737		05/09/20 05/02/20 05/17/20		133.28	0.00	0.00	133.28
		uniform						
	8680743		05/09/20 05/02/20 05/17/20		164.22	0.00	0.00	164.22
	SUPPLIES							
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		U1056 UNIFORM ADVANTAGE			363.47	0.00	0.00	363.47
Vendor#	Vendor Name		Class	Pay Code				
U1350	UPS		W					
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	0000778941168		05/09/20 04/21/20 05/01/20		561.47	0.00	0.00	561.47
	SHIPPING							
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		U1350 UPS			561.47	0.00	0.00	561.47
Vendor#	Vendor Name		Class	Pay Code				
10793	WAGEWORKS							
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	042618		05/07/20 04/26/20 04/26/20		2,560.10	0.00	0.00	2,560.10
	Vendor Totals	Number Name			Gross	Discount	No-Pay	Net
		10793 WAGEWORKS			2,560.10	0.00	0.00	2,560.10
Vendor#	Vendor Name		Class	Pay Code				
I1110	WERFEN USA LLC							
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

9110511793 ✓ SUPPLIES	05/09/20 04/24/20 05/19/20		2,436.35	0.00	0.00	2,436.35
Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	2,436.35	0.00	0.00	2,436.35 ✓

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	231,675.84	0.00	0.00	231,675.84

pg 7 corrections

<27.75>
+25.80
<3.64>
+3.36
<5.46>
+5.04

231,673.19

231,675.84 +
27.75 -
25.80 +
3.64 -
3.36 +
5.46 -
5.04 +
231,673.19 *

APPROVED
ON
MAY 10 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#175798-175869

MCKESSON

Company: 8000

STATEMENT

As of: 05/11/2018

MEMORIAL MEDICAL CENTER
AP
815 N VIRGINIA STREET
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory:

Customer: 632536
Date: 05/12/2018

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 05/11/2018
Mail to:

Page: 002
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536
Date: 05/12/2018

PLEASE CHECK ANY ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account 632536 Order Reference	Description	Cash Discount	Amount (gross)	PF	Amount (net)	PF	Receivable Number	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 2,193.13 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/07/2017 2,451.97

If Paid By 05/15/2018, Pay This Amount: 2,149.28 USD

If Paid After 05/15/2018, Pay this Amount: 2,193.13 USD

Due If Paid On Time: USD 2,149.28
Disc lost if paid late: 43.85
Due If Paid Late: USD 2,193.13

1,655.61 +
492.63 +
1.04 +
2,149.28 *

APPROVED
ON
MAY 14 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

JQ
5-14-18

MCKESSON

Company: 8000

STATEMENT

As of: 05/11/2018

Page: 001

CVS PHCY 7006/MEMORIA PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 262252
Date: 05/12/2018

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 05/11/2018 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252
Date: 05/12/2018

PLEASE CHECK ANY ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 262252 CVS PHCY 7006/MEMORIA PHS											
05/07/2018	05/15/2018	7869625809	1001220051	115Invoice	1.23	61.53		60.30✓		7869625809	
05/07/2018	05/15/2018	7869625811	1001220051	115Invoice	0.02	1.14		1.12✓		7869625811	
05/07/2018	05/15/2018	7869625812	1001221014	115Invoice	3.40	170.21		166.81✓		7869625812	
05/07/2018	05/15/2018	7869625813	1001221801	115Invoice	3.98	198.96		194.98✓		7869625813	
05/08/2018	05/15/2018	7869859125	1001222156	115Invoice	0.78	38.81		38.03✓		7869859125	
05/09/2018	05/15/2018	7870081108	1001222829	115Invoice	9.80	490.09		480.29✓		7870081108	
05/10/2018	05/15/2018	7870313605	1001223493	115Invoice	9.25	462.30		453.05✓		7870313605	
05/11/2018	05/15/2018	7870529400	1001224120	115Invoice	5.16	258.11		252.95✓		7870529400	
05/11/2018	05/15/2018	7870529403	1001224120	115Invoice	0.16	8.24		8.08✓		7870529403	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals: 1,689.39 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 05/07/2018 28,540.94

If Paid By 05/15/2018, Pay This Amount: 1,655.61 USD ✓

If Paid After 05/15/2018, Pay this Amount: 1,689.39 USD

Due If Paid On Time: USD 1,655.61

Disc lost if paid late: 33.78

Due If Paid Late: USD 1,689.39

APPROVED ON MAY 14 2018 COUNTY AUDITOR CALHOUN COUNTY, TEXAS

5-14-18

MCKESSON

Company: 8000

STATEMENT

As of: 05/11/2018

Page: 001

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 256342
Date: 05/12/2018

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 05/11/2018 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 05/12/2018

PLEASE CHECK ANY ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS											
05/08/2018	05/15/2018	7869848847	0506180317-01	115Invoice	0.31	15.30		14.99 ✓		7869848847	
05/09/2018	05/15/2018	7870072268	2657920880	115Invoice	1.11	55.59		54.48 ✓		7870072268	
05/10/2018	05/15/2018	7870275786	2657926206	115Invoice	3.62	181.02		177.40 ✓		7870275786	
05/10/2018	05/15/2018	7870275791	1112417	115Invoice	0.05	2.55		2.50 ✓		7870275791	
05/10/2018	05/15/2018	7870275792	0509180248-00	115Invoice	1.22	61.09		59.87 ✓		7870275792	
05/10/2018	05/15/2018	7870275794	0509180536-00	115Invoice	2.50	125.12		122.62 ✓		7870275794	
05/11/2018	05/15/2018	7870511973	4807920711	115Invoice	1.24	62.01		60.77 ✓		7870511973	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 502.68 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 05/07/2018 28,540.94

If Paid By 05/15/2018,
Pay This Amount: 492.63 USD ✓

If Paid After 05/15/2018,
Pay this Amount: 502.68 USD

Due If Paid On Time:
USD 492.63

Disc lost if paid late:
10.05

Due If Paid Late:
USD 502.68

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ON
MAY 14 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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5-14-18

MCKESSON

STATEMENT

Company: 8000

HEB PHCY 0434/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 05/11/2018

DC: 8115

Territory: 400

Customer: 190813
Date: 05/12/2018

Page: 001

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 05/11/2018 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813
Date: 05/12/2018

PLEASE CHECK ANY ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 190813 HEB PHCY 0434/MEM MED PHS											
05/09/2018	05/15/2018	7870048673	2017004769	115Invoice	0.02	1.06		1.04 ✓		7870048673	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 190813 HEB PHCY 0434/MEM MED PHS

Subtotals: 1.06 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 28,540.94
05/07/2018

If Paid By 05/15/2018,
Pay This Amount: 1.04 USD ✓

If Paid After 05/15/2018,
Pay this Amount: 1.06 USD

Due If Paid On Time:
USD 1.04
Disc lost if paid late:
0.02
Due If Paid Late:
USD 1.06

APPROVED
ON
MAY 14 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

5-14-18

TOLL FEE PHONE NUMBER: 1-800-555-3453
(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

			ENTER:	
☐	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	#### ###		
☐	"ENTER YOUR 4-DIGIT PIN"			
☐	"MAKE A PAYMENT, PRESS 1"		1	
☐	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★	941	#
☐	"IF FEDERAL TAX DEPOSIT ENTER 1"		1	
☐	"ENTER 2-DIGIT TAX FILING YEAR"	★	18	
☐	"ENTER 2-DIGIT TAX FILING ENDING MONTH" 1ST QTR - 03 (MARCH) - Jan, Feb, Mar 2ND QTR - 06 (JUNE) - Apr, May, June 3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept 4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec	★	6	
☐	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★	$ 84,873.70	#
	"1 TO CONFIRM"		1	
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0	$ 43,500.06	#
	"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 10,173.40	#
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 31,200.24	#
		CHECK	$ -	
☐	"6-DIGIT SETTLEMENT DATE"	★		
	"1 TO CONFIRM"		1	
☐	ACKNOWLEDGEMENT NUMBER			

CALLED IN BY:	
CALLED IN DATE:	
CALLED IN TIME:	

Final Summary

PayCode Summary

PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross
1	REGULAR PAY-S1	8845.00	N		N	N		171115.97
1	REGULAR PAY-S1	1679.25	N		N	N	N	65010.44
1	REGULAR PAY-S1	224.50	Y		N	N		5568.09
2	REGULAR PAY-S2	2551.00	N		N	N		56933.39
2	REGULAR PAY-S2	69.00	Y		N	N		2089.12
3	REGULAR PAY-S3	1574.75	N		N	N		40557.30
3	REGULAR PAY-S3	50.75	Y		N	N		1785.17
C	CALL PAY	60.00	N		N	N	N	120.00
C	CALL PAY	2305.25	N	1	N	N		4610.50
E	EXTRA WAGES	3.54	N		N	N	N	320.00
E	EXTRA WAGES		N	1	N	N	N	643.50
I	INSERVICE	35.00	N	1	N	N		965.46
K	EXTENDED-ILLNESS-BANK	76.00	N	1	N	N		1414.92
M	MEAL REIMBURSEMENT		N		N	N	N	12.00
P	PAID-TIME-OFF	130.00	N		N	N	N	6380.20
P	PAID-TIME-OFF	992.50	N	1	N	N		20792.47
S	EMPLOYEE REIMBURSEMENT		N		N	N	N	-8.25
X	CALL PAY 2	160.00	N	1	N	N		320.00
Y	YMCA/CURVES		N		N	N	N	45.00
Z	CALL PAY 3	96.00	N	1	N	N		288.00
p	PAID TIME OFF - PROBATION	24.00	N	1	N	N		246.72

Deductions Summary

Code	Amount	Code	Amount	Code	Amount
A/R	906.93	A/R2	78.07	A/R3	
ADVANC		AWARDS		BOOTS	
CAFE H		CAFE-1	1484.36	CAFE-2	1048.10
CAFE-3	773.21	CAFE-4	400.08	CAFE-5	235.01
CAFE-C		CAFE-D	1667.28	CAFE-F	
CAFE-H	18763.43	CAFE-I		CAFE-L	
CAFE-P	231.57	CANCER		CHILD	
CLINIC	250.00	COMBIN	798.80	CREDUN	
DD ADV		DENTAL		DEP-LF	
DIS-LF	1377.36	EAT	976.25	EATCSH	180.00
FEDTAX	31200.24	FICA-M	5086.79	FICA-O	21750.56
FIRSTC	75.00	FLEX S	2560.10	FLX FE	
FORT D		FUTA		GIFT S	32.47
GRANT		GRP-IN	129.26	GTL	
HOSP-I		ID TFT		LEAF	
LEGAL	518.13	MASA	543.00	MEALS	
MISC		MISC/		MMCSHR	
OTHER		PHI		PHI***	
PR FIN	270.53	RELAY		REPAY	
SAMS		SCRUBS		SIGNON	
ST-TX		STONDF	1165.00	STONE	
STONE2		STUDEN		TSA-1	
TSA-2		TSA-C		TSA-P	
TSA-R	26545.31	TUTION		UNIFOR	1558.82
UW/HOS					

Grand Totals: 18876.54 ------- (Gross: 379210.00 Deductions: 120605.66 Net: 258604.34)

Checks Count:- FT 190 PT 7 Other 42 Female 205 Male 33 Credit OverAmt 2 ZeroNet Term Total: 238

Pay Date 05/18/18

ok [signature]. CFO
5-14-18

MEMORIAL MEDICAL CENTER

I B C

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --May 5th, 2018 - May 11th, 2018

Date	Bank Description	MMC Notes	Amount
5/9/2018	ACH Payment - CLOVER APP MRKT CLOVER APP	- Credit Card Machine Lease Expense	81.20
		Total Electronic Payments:	81.20

CFO

Jas~~on Anglin~~, ~~CEO~~ Diae C. Moore   May 14th, 2018

Memorial Medical Center

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --May 5th, 2018 - May 11th, 2018

Date	Bank Description	MMC Notes	Amount
5/7/2018	ACH Payment FDGL LEASE PYMT 052-0802937-000 410001232742	- Credit Card Machine Lease Expense	86.30
5/7/2018	ACH Payment FDGL LEASE PYMT 052-0802938-000 410001232743	- Credit Card Machine Lease Expense	59.25
5/7/2018	ACH Payment FDGL LEASE PYMT 052-0802939-000 410001232743	- Credit Card Machine Lease Expense	59.25
5/7/2018	ACH Payment FDGL LEASE PYMT 052-1300412-000 410001260415	- Credit Card Machine Lease Expense	30.25
5/7/2018	ACH Payment FDGL LEASE PYMT 052-1479213-000 410001232979	- Credit Card Machine Lease Expense	43.26
5/7/2018	ACH Payment FDGL LEASE PYMT 052-1479214-000 410001232979	- Credit Card Machine Lease Expense	40.02
5/7/2018	ACH Payment FDGL LEASE PYMT 052-1479468-000 410001232981	- Credit Card Machine Lease Expense	69.24
5/8/2018	ACH Payment MCKESSON DRUG AUTO ACH ACH03452143 910000105	- 340B Drug Program Expense	28,540.94 *
5/9/2018	ACH Payment CLOVER APP MRKT CLOVER APP 899-9043311-000 1	- Credit Card Machine Lease Expense	16.25
5/9/2018	ACH Payment IRS USATAXPYMT 220852940295714 6103601001385	- Payroll Taxes	86,178.12 **
5/10/2018	ACH Payment FDGL LEASE PYMT 052-1038879-000 410001240417	- Credit Card Machine Lease Expense	30.17
5/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982541616 6110	- Credit Card Processing Fee	261.08
5/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982589946 6110	- Credit Card Processing Fee	129.00
5/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332385 6110	- Credit Card Processing Fee	206.98
5/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332393 6110	- Credit Card Processing Fee	2,125.70
5/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332401 6110	- Credit Card Processing Fee	927.90
5/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332419 6110	- Credit Card Processing Fee	40.80
5/11/2018	ACH Payment IRS USATAXPYMT 220853171557406 6103601000060	- Payroll Taxes	416.05 *
		Total Electronic Payments:	119,260.56

86.30 +
59.25 +
59.25 +
30.25 +
43.26 +
40.02 +
69.24 +
16.25 +
30.17 +
261.08 +
129.00 +
206.98 +
2,125.70 +
927.90 +
40.80 +
4,125.45 *
119,260.56 +
28,540.94 −
86,178.12 −
416.05 −
4,125.45 *

~~Jason Anglin, CEO~~ Diane C. Moore CFO
Memorial Medical Center

May 14th, 2018

PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACH DATE May 20th

Estimated Date		Amount
5/20/2018	April Sales Tax	1,664.24
	Total Electronic Payments:	1,664.24

~~Jason Anglin, CEO~~ Diane C. Moore CFO
Memorial Medical Center

May 14th, 2018

*Approved 05.09.18 CC
** Approved 05.02.18 CC

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
IBC Accounts
5/14/2018

Nursing Home	IBC Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Transfer Out	Pending Deposits	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	16,281.91 ✓	16,181.91 ✓	56,973.47		8,838.33	-	-	-	65,911.80 ✓	65,811.80 ✓
									Bank Balance	65,911.80	
									variance	-	

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 0614
Account # 4257

Nursing Home	IBC Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Transfer Out	Pending Deposits	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	150,562.33 ✓	44,132.42 ✓	13,252.62		3,958.76		-	-	123,641.29 ✓	17,211.38
									Bank Balance	123,641.29 ✓	
									Pending Wire out	106,329.91	
									Adjust Balance/Transfer Amt	17,311.38	
										-	
Crescent	4588	23,522.39 ✓	23,422.39 ✓	34,380.35				-	-	34,480.35 ✓	34,380.35
									Bank Balance	34,480.35	
									variance	-	
Broadmoor	4596	42,347.07 ✓	42,247.07 ✓	5,969.83				-	-	6,069.83 ✓	5,969.83
									Bank Balance	6,069.83	
									Variance	-	
Fort Bend	4618	7,081.40 ✓	6,981.40 ✓	27,416.41		1,288.89		-	-	28,805.30 ✓	28,705.30
									Bank Balance	28,805.30	
									Variance	-	
									Total IBC Transfers		152,078.66 ✓

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 0614
Account # 2922

APPROVED
ON
MAY 14 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

65,811.80 +
17,211.38 +
34,380.35 +
5,969.83 +
28,705.30 +
152,078.66 *

Approved: Dale CFO 5-14-18
Jason ~~Anglin, CEO~~
Diane Moore CFO
May 14th, 2018

Note: Only balances of over $5,000 will be transferred to the nursing home.
Note 2: Each account has a base balance of $100 that MMC deposited to open account.

I:\NH Weekly Transfers\NH UPL Transfer Summary\2018\May 2018\NH UPL Transfer Summary 5-14-18.xlsx

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
5/14/2018

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	CkS Cleared	ACH Transfer-In	Pending Deposits	YTD Interest Earned	IGT Transfer-In	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4381	62,069.54 ✓	61,969.54 ✓		63,256.72			-		-	-	63,356.72	63,188.63
											Bank Balance	63,356.72 ✓	
											Variance	-	
								Less:					
								Less:			Apr Bk Int	68.09 ✓	
								Less:			Leave in Balance	100.00	
											Adjust Balance/Transfer Amt	63,188.63	

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 0614
Acc 4257

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	CkS Cleared	ACH Transfer-In	Pending Deposits	YTD Interest Earned	IGT Transfer-In	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at W Hston	4438	95,667.10 ✓	95,567.10 ✓		20,244.39							20,344.39 ✓	20,188.00
											Bank Balance	20,344.39	
											Variance	-	
								Less:					
								Less:			Apr Bk Int	56.39 ✓	
								Less:			Leave in Balance	100.00	
											Adjust Balance/Transfer Amt	20,188.00	
Crescent	411	64,255.13 ✓	64,155.13 ✓		33,887.75						-	33,987.75 ✓	33,855.71
											Bank Balance	33,987.75	
											Variance	-	
								Less:	ck pending				
								Less:			Apr Bk Int	32.04 ✓	
								Less:			Leave in Balance	100.00	
											Adjust Balance/Transfer Amt	33,855.71	
Broadmoor	403	110,862.31 ✓	110,762.31 ✓		76,709.72						-	76,809.72 ✓	76,656.16
											Bank Balance	76,809.72	
											Variance	-	
								Less:					
								Less:			Apr Bk Int	53.56 ✓	
								Less:			Leave in Balance	100.00	
											Adjust Balance/Transfer Amt	76,656.16	
Fort Bend	446	19,182.57 ✓	19,082.57 ✓		17,142.30						-	17,242.30 ✓	17,120.96
											Bank Balance	17,242.30	
											Variance	-	
								Less:					
								Less:			Apr Bk Int	21.34 ✓	
								Less:			Leave in Balance	100.00	
											Adjust Balance/Transfer Amt	17,120.96	

TOTAL TRANSFERS 211,009.46 ✓

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 614
Account 2922

Note: Only balances of over $5,000 will be transferred to the nursing home.
Note 2: Each account has a base balance of $100 that MMC deposited to open account.

APPROVED
ON
MAY 14 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

63,188.63 +
20,188.00 +
33,855.71 +
76,656.16 +
17,120.96 +
211,009.46 *

Approved: , CFO
5-14-18

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Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
5/14/2018

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	CkS Cleared	Pending Ck to MMC for QIPP	Pending Deposits	IGT Transfer-In	MMC Portion - Return of IGT	MMC Portion - Federal Match	Nexion Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek	.4454	55,108.82	55,008.82				-			-	-	100.00	

	Bank Balance	100.00
	Variance	-
Less:		
Less:	Apr Bk Int	40.31
Less:	Leave in Balance	100.00
	Adjust Balance/Transfer Amt	(40.31)

Routing Information for Golden Creek:
Nexion Health at Golden Creek
Wells Fargo Bank, N.A.
ABA 0248
Account . 10323

Note: Only balances of over $5,000 will be transferred to the nursing home.
Note 2: Each account has a base balance of $100 that MMC deposited to open account.

Approved: [signature] CFO
5-14-18

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