

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- November 07, 2018

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 338,847.01
TOTAL TRANSFERS BETWEEN FUNDS	\$ -
TOTAL NURSING HOME UPL EXPENSES	\$ 654,942.19
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED November 07, 2018	\$ 993,789.20

APPROVED

NOV 07 2018

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---November 07, 2018

PAYABLES AND PAYROLL

11/1/2018 Weekly Payables 328,426.25

11/5/2018 McKesson-340B Prescription Expense 10,420.76

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ 338,847.01

TOTAL TRANSFERS BETWEEN FUNDS \$ -

NURSING HOME UPL EXPENSES

11/5/2018 Nursing Home UPI 539,931.56

11/5/2018 Nursing Home UPI 30,063.96

QIPP/INTEREST CHECKS TO MMC

11/5/2018 Ashford 19,860.36

11/5/2018 Golden Creek 47,465.33

11/5/2018 Fort Bend 8,120.58

11/5/2018 Solera 5,655.00

11/5/2018 Crescent 3,845.40

TOTAL NURSING HOME UPL EXPENSES \$ 654,942.19

TOTAL INTER-GOVERNMENT TRANSFERS \$ -

GRAND TOTAL DISBURSEMENTS APPROVED November 07, 2018 \$ 993,789.20

11/01/2018	MEMORIAL MEDICAL CENTER						0				
11:07	AP Open Invoice List							ap_open_invoice.template			
Due Dates Through: 11/14/2018											
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		
127978 ✓		10/15/20	10/08/20	11/08/20		15.98	0.00	0.00	15.98 ✓		
SUPPLIES (mount.)											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11283	ACE HARDWARE 15521	15.98	0.00	0.00	15.98
Vendor#	Vendor Name	Class		Pay Code							
A1680	AIRGAS USA, LLC - CENTRAL DIV ✓	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9081339982 ✓		10/30/20	10/15/20	11/09/20		2,400.82	0.00	0.00	2,400.82		
OXYGEN											
9081410315 ✓		10/30/20	10/16/20	11/10/20		37.78	0.00	0.00	37.78 ✓		
ACETYLENE											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						A1680	AIRGAS USA, LLC - CENTRAL DIV	2,438.60	0.00	0.00	2,438.60
Vendor#	Vendor Name	Class		Pay Code							
A1690	ALCON LABORATORIES, INC. ✓	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9654479495 ✓		10/23/20	10/15/20	11/14/20		1,547.70	0.00	0.00	1,547.70 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						A1690	ALCON LABORATORIES, INC.	1,547.70	0.00	0.00	1,547.70
Vendor#	Vendor Name	Class		Pay Code							
10592	AMERICAN PROFICIENCY INSTITUTE ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
503254 ✓		10/30/20	10/09/20	11/03/20		1,422.00	0.00	0.00	1,422.00 ✓		
ANNUAL RENEWAL Shipping 99.00											
503253 ✓		10/30/20	10/09/20	11/03/20		11,197.00	0.00	0.00	11,197.00 ✓		
API RENEWAL ANNUAL Shipping 99.00											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10592	AMERICAN PROFICIENCY INSTITUTE	12,619.00	0.00	0.00	12,619.00
Vendor#	Vendor Name	Class		Pay Code							
A2600	AUTO PARTS & MACHINE CO. ✓	W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
877928 ✓		10/30/20	10/10/20	10/25/20		38.83	0.00	0.00	38.83 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						A2600	AUTO PARTS & MACHINE CO.	38.83	0.00	0.00	38.83
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		
61025238 ✓		10/23/20	10/15/20	11/09/20		769.45	0.00	0.00	769.45 ✓		
INVENTORY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						B1150	BAXTER HEALTHCARE	769.45	0.00	0.00	769.45
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
4346737 ✓		10/30/20	10/05/20	10/30/20		6,026.00	0.00	0.00	6,026.00 ✓
107334827 ✓	MAINT. CONTRACT	10/30/20	10/10/20	11/04/20		20.69	0.00	0.00	20.69 ✓
107339081 ✓	SUPPLIES <i>Shipping 7.01</i>	10/30/20	10/12/20	11/06/20		4,233.46	0.00	0.00	4,233.46 ✓
107348519 ✓	LAB SERVICES	10/30/20	10/17/20	11/11/20		142.78	0.00	0.00	142.78 ✓
	SUPPLIES <i>Shipping 11.94</i>								
Vendor Totals						Gross	Discount	No-Pay	Net
	B1220 BECKMAN COULTER INC					10,422.93	0.00	0.00	10,422.93
Vendor#	Vendor Name				Class	Pay Code			
B1320	BEEKLEY MEDICAL ✓				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV1213156 ✓		10/17/20	10/08/20	11/08/20		814.95	0.00	0.00	814.95 ✓
	SUPPLIES <i>Shipping 18.45</i>								
Vendor Totals						Gross	Discount	No-Pay	Net
	B1320 BEEKLEY MEDICAL					814.95	0.00	0.00	814.95
Vendor#	Vendor Name				Class	Pay Code			
11050	BIRCH COMMUNICATIONS								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
26788272		10/23/20	08/16/20	09/07/20		0.00	0.00	0.00	0.00
	PHONE								
26870095		10/23/20	09/16/20	10/08/20		0.00	0.00	0.00	0.00
	CREDIT								
26922300		10/23/20	10/16/20	11/07/20		0.00	0.00	0.00	0.00
	PHONE								
Vendor Totals						Gross	Discount	No-Pay	Net
	11050 BIRCH COMMUNICATIONS					0.00	0.00	0.00	0.00
Vendor#	Vendor Name				Class	Pay Code			
M0400	DAWN MCCLELLAND ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102618		10/30/20	10/26/20	10/26/20		214.70	0.00	0.00	214.70 ✓
	TRAVEL <i>Occupational Hearing Certification Course 10/17/18-10/19/18</i>								
Vendor Totals						Gross	Discount	No-Pay	Net
	M0400 DAWN MCCLELLAND					214.70	0.00	0.00	214.70
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
5517280 ✓		10/17/20	10/15/20	11/09/20		24.29	0.00	0.00	24.29 ✓
	SUPPLIES								
5517090 ✓		10/17/20	10/15/20	11/09/20		62.59	0.00	0.00	62.59 ✓
	SUPPLIES								
5516940 ✓		10/17/20	10/15/20	11/09/20		95.45	0.00	0.00	95.45 ✓
	SUPPLIES								
Vendor Totals						Gross	Discount	No-Pay	Net
	10368 DEWITT POTH & SON					182.33	0.00	0.00	182.33
Vendor#	Vendor Name				Class	Pay Code			
10789	DISCOVERY MEDICAL NETWORK INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
MMC103118 ✓		10/31/20	10/31/20	10/31/20		136,807.28	0.00	0.00	136,807.28 ✓
	PRO FEES								

Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net
			10789	DISCOVERY MEDICAL NETWORK INC		136,807.28	0.00	0.00	136,807.28
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
CN0426092018		10/30/20	10/02/20	10/27/20		552.40	0.00	0.00	552.40 ✓
LAB SERVICES									
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net
			10175	DSHS CENTRAL LAB MC2004		552.40	0.00	0.00	552.40
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
IN1912521 ✓		10/17/20	10/11/20	11/08/20		62.63	0.00	0.00	62.63 ✓
SUPPLIES <i>Freight 14.73</i>									
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net
			D1785	DYNATRONICS CORPORATION		62.63	0.00	0.00	62.63
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
37053 ✓		10/29/20	10/31/20	10/31/20		40,062.50	0.00	0.00	40,062.50 ✓
ER STAFFING									
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net
			11284	EMERGENCY STAFFING SOLUTIONS		40,062.50	0.00	0.00	40,062.50
Vendor#	Vendor Name				Class	Pay Code			
T0383	ERIN CLEVINGER ✓				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102918		10/29/20	10/29/20	10/29/20		178.86	0.00	0.00	178.86 ✓
TRAVEL <i>THA Hospital Physician Safety Council Meeting 10/26/18</i>									
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net
			T0383	ERIN CLEVINGER		178.86	0.00	0.00	178.86
Vendor#	Vendor Name				Class	Pay Code			
11484	FIRE DOOR SOLUTIONS ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1696 ✓		10/30/20	10/19/20	10/19/20		1,982.50	0.00	0.00	1,982.50 ✓
DOOR INSPECTIONS									
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net
			11484	FIRE DOOR SOLUTIONS		1,982.50	0.00	0.00	1,982.50
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
102518		10/30/20	10/25/20	10/25/20		75.00	0.00	0.00	75.00 ✓
PAYROLL DED									
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
9963957 ✓		10/30/20	10/01/20	10/26/20		9,561.24	0.00	0.00	9,561.24 ✓
SUPPLIES <i>Shipping 201.24</i>									
2132172 ✓		10/30/20	10/09/20	11/03/20		950.34	0.00	0.00	950.34 ✓
SUPPLIES <i>Shipping 134.74</i>									

3182829 ✓		10/30/20	10/12/20	11/06/20		664.21	0.00	0.00	664.21 ✓
	SUPPLIES	Shipping 54.24							
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	F1400 FISHER HEALTHCARE					11,175.79	0.00	0.00	11,175.79
Vendor#	Vendor Name				Class	Pay Code			
11184	FLDR DESIGNS LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
15245 ✓		10/23/20	10/10/20	11/09/20		308.77	0.00	0.00	308.77 ✓
	SUPPLIES	Women's Health Brochures 1,000 Shipping 33.77							
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	11184 FLDR DESIGNS LLC					308.77	0.00	0.00	308.77
Vendor#	Vendor Name				Class	Pay Code			
F1653	FORT BEND SERVICES, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
0218664IN ✓		10/17/20	10/10/20	11/08/20		949.00	0.00	0.00	949.00 ✓
	COOLING TOWER CONTROLL								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	F1653 FORT BEND SERVICES, INC					949.00	0.00	0.00	949.00
Vendor#	Vendor Name				Class	Pay Code			
G1001	GETINGE USA ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
6990807539 ✓		10/17/20	10/11/20	11/11/20		122.44	0.00	0.00	122.44 ✓
	SUPPLIES								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	G1001 GETINGE USA					122.44	0.00	0.00	122.44
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
1573033 ✓		10/23/20	10/12/20	11/11/20		354.40	0.00	0.00	354.40 ✓
	SUPPLIES								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	G1210 GULF COAST PAPER COMPANY					354.40	0.00	0.00	354.40
Vendor#	Vendor Name				Class	Pay Code			
H1100	HAYES ELECTRIC SERVICE ✓				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
AN18101809 ✓		10/30/20	10/18/20	10/28/20		26.49	0.00	0.00	26.49 ✓
	SUPPLIES								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	H1100 HAYES ELECTRIC SERVICE					26.49	0.00	0.00	26.49
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
014561 ✓		10/29/20	09/26/20	09/26/20		10.62	0.00	0.00	10.62 ✓
	FOOD SUPPLIES								
094792 ✓		10/29/20	09/27/20	09/27/20		31.52	0.00	0.00	31.52 ✓
	FOOD SUPPLIES								
019767 ✓		10/29/20	09/28/20			17.12	0.00	0.00	17.12 ✓
	FOOD SUPPLIES								
013536 ✓		10/29/20	09/30/20	09/30/20		21.75	0.00	0.00	21.75 ✓
	FOOD SUPPLIES								
019032 ✓		10/29/20	10/01/20	10/01/20		15.31	0.00	0.00	15.31 ✓
	FOOD SUPPLIES								

027521 ✓	10/29/20 10/01/20 10/01/20	11.92	0.00	0.00	11.92 ✓
027515 ✓	FOOD SUPPLIES 10/29/20 10/01/20 10/01/20	37.98	0.00	0.00	37.98 ✓
030292 ✓	FOOD SUPPLIES 10/29/20 10/02/20 10/02/20	9.98	0.00	0.00	9.98 ✓
032372 ✓	FOOD SUPPLIES 10/29/20 10/02/20 10/02/20	6.75	0.00	0.00	6.75 ✓
030117 ✓	FOOD SUPPLIES 10/29/20 10/02/20 10/02/20	41.35	0.00	0.00	41.35 ✓
040549 ✓	FOOD SUPPLIES 10/29/20 10/06/20 10/06/20	19.39	0.00	0.00	19.39 ✓
046719 ✓	FOOD SUPPLIES 10/29/20 10/08/20 10/08/20	18.40	0.00	0.00	18.40 ✓
059354 ✓	FOOD SUPPLIES 10/29/20 10/13/20 10/13/20	10.36	0.00	0.00	10.36 ✓
008602 ✓	FOOD SUPPLIES 10/29/20 10/15/20 10/15/20	32.98	0.00	0.00	32.98 ✓
064056 ✓	FOOD SUPPLIES 10/29/20 10/15/20 10/15/20	2.48	0.00	0.00	2.48 ✓
065015 ✓	FOOD SUPPLIES 10/29/20 10/15/20 10/15/20	71.48	0.00	0.00	71.48 ✓
009385 ✓	FOOD SUPPLIES 10/29/20 10/15/20 10/15/20	37.35	0.00	0.00	37.35 ✓
015133 ✓	FOOD SUPPLIES 10/29/20 10/16/20 10/16/20	24.87	0.00	0.00	24.87 ✓
067733 ✓	FOOD SUPPLIES 10/29/20 10/16/20 10/16/20	92.10	0.00	0.00	92.10 ✓
070408 ✓	FOOD SUPPLIES 10/29/20 10/17/20 10/17/20	24.84	0.00	0.00	24.84 ✓
070973 ✓	FOOD SUPPLIES 10/29/20 10/17/20 10/17/20	21.10	0.00	0.00	21.10 ✓
020568 ✓	FOOD SUPPLIES 10/29/20 10/17/20 10/17/20	13.34	0.00	0.00	13.34 ✓
033856 ✓	FOOD SUPPLIES 10/29/20 10/18/20 10/18/20	24.18	0.00	0.00	24.18 ✓
075328 ✓	FOOD SUPPLIES 10/29/20 10/19/20	45.52	0.00	0.00	45.52 ✓
027686 ✓	FOOD SUPPLIES 10/29/20 10/19/20 10/19/20	25.02	0.00	0.00	25.02 ✓
083687 ✓	FOOD SUPPLIES 10/29/20 10/22/20 10/22/20	58.96	0.00	0.00	58.96 ✓
088694 ✓	FOOD SUPPLIES 10/29/20 10/22/20 10/22/20	44.38	0.00	0.00	44.38 ✓
Vendor Totals		Gross	Discount	No-Pay	Net
H0031 HEB CREDIT RECEIVABLES DEPT308		771.05	0.00	0.00	771.05
Vendor#	Vendor Name	Class	Pay Code		
H0416	HOLOGIC INC ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
8771566 ✓		10/17/20	10/10/20	11/10/20	517.12
SUPPLIES		17.12 ✓			

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		H0416	HOLOGIC INC			517.12	0.00	0.00	517.12	
Vendor#	Vendor Name			Class	Pay Code					
12196	ICU MEDICAL, INC ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	1808572 ✓		10/30/20	10/01/20	11/01/20		11.25	0.00	0.00	11.25 ✓
	SAPPHIRE DEVICES									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		12196	ICU MEDICAL, INC			11.25	0.00	0.00	11.25	
Vendor#	Vendor Name			Class	Pay Code					
12200	KATHY JIMENEZ CADRE Occupational Hearing Course 10/17-10/19/18									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	102218		10/30/20	10/22/20	10/22/20		209.70	0.00	0.00	209.70 ✓
	TRAVEL									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		12200	KATHY JIMENEZ			209.70	0.00	0.00	209.70	
Vendor#	Vendor Name			Class	Pay Code					
11124	KELLY SCHOTT ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	101118		10/30/20	10/11/20	10/11/20		173.62	0.00	0.00	173.62 ✓
	TRAVEL Mary Casalty Exercise and Evaluation 10/11/18									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		11124	KELLY SCHOTT			173.62	0.00	0.00	173.62	
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
	88021381 ✓		10/30/20	07/28/20	08/22/20		2,562.39	0.00	0.00	2,562.39 ✓
	LAB SERVICES									
	59874482 ✓		10/30/20	09/01/20	09/26/20		1,179.48	0.00	0.00	1,179.48 ✓
	LAB SERVICES									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		L0700	LABCORP OF AMERICA HOLDINGS			3,741.87	0.00	0.00	3,741.87	
Vendor#	Vendor Name			Class	Pay Code					
11796	LUBY'S FUDDRUCKERS RESTAURANTS ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20180300837		10/23/20	09/30/20	11/10/20		24,327.92	0.00	0.00	24,327.92 ✓
	DIETARY FOOD AND SERVICE									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		11796	LUBY'S FUDDRUCKERS RESTAURANTS			24,327.92	0.00	0.00	24,327.92	
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
	102518		10/30/20	10/25/20	10/25/20		1,045.00	0.00	0.00	1,045.00 ✓
	PAYROLL DED									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		10972	M G TRUST			1,045.00	0.00	0.00	1,045.00	
Vendor#	Vendor Name			Class	Pay Code					
M2178	MCKESSON MEDICAL SURGICAL INC ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	37810189 ✓		10/23/20	10/10/20	11/09/20		423.55	0.00	0.00	423.55 ✓
	SUPPLIES									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	

	M2178	MCKESSON MEDICAL SURGICAL INC				423.55	0.00	0.00	423.55
Vendor#	Vendor Name		Class	Pay Code					
M2827	MEDIVATORS ✓		M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	3204103 ✓		10/17/20	10/09/20	11/09/20	263.69	0.00	0.00	263.69 ✓
	SUPPLIES <i>Shipping 48.69</i>								
	Vendor Totals: Number Name					Gross	Discount	No-Pay	Net
	M2827 MEDIVATORS					263.69	0.00	0.00	263.69
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
	1860990341 ✓		10/22/20	10/16/20	11/10/20	32.72	0.00	0.00	32.72 ✓
	SUPPLIES								
	1860881407 ✓		10/22/20	10/16/20	11/10/20	77.38	0.00	0.00	77.38 ✓
	SUPPLIES <i>freight 22.76</i>								
	1860990343 ✓		10/23/20	10/16/20	11/10/20	53.68	0.00	0.00	53.68 ✓
	SUPPLIES								
	1860990342 ✓		10/23/20	10/16/20	11/10/20	132.93	0.00	0.00	132.93 ✓
	SUPPLIES								
	1860990354 ✓		10/23/20	10/16/20	11/10/20	2,858.78	0.00	0.00	2,858.78 ✓
	SUPPLIES								
	1860990346 ✓		10/23/20	10/16/20	11/10/20	120.68	0.00	0.00	120.68 ✓
	SUPPLIES								
	1861144279 ✓		10/23/20	10/17/20	11/11/20	91.00	0.00	0.00	91.00 ✓
	SUPPLIES <i>freight 73.17</i>								
	Vendor Totals: Number Name					Gross	Discount	No-Pay	Net
	M2470 MEDLINE INDUSTRIES INC					3,367.17	0.00	0.00	3,367.17
Vendor#	Vendor Name		Class	Pay Code					
12204	MEMORIAL MEDICAL CENTER ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	103118		10/30/20	10/31/20	10/31/20	25.00	0.00	0.00	25.00 ✓
	PETTY CASH <i>invoice by 25.00</i>								
	Vendor Totals: Number Name					Gross	Discount	No-Pay	Net
	12204 MEMORIAL MEDICAL CENTER					25.00	0.00	0.00	25.00
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
	102518		10/30/20	10/25/20	10/25/20	150.00	0.00	0.00	150.00 ✓
	PAYROLL DED								
	Vendor Totals: Number Name					Gross	Discount	No-Pay	Net
	10963 MEMORIAL MEDICAL CLINIC					150.00	0.00	0.00	150.00
Vendor#	Vendor Name		Class	Pay Code					
10182	MERCEDES MEDICAL ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	2094601 ✓		09/25/20	10/25/20	11/08/20	75.63	0.00	0.00	75.63 ✓
	SUPPLIES <i>Shipping 17.43</i>								
	Vendor Totals: Number Name					Gross	Discount	No-Pay	Net
	10182 MERCEDES MEDICAL					75.63	0.00	0.00	75.63
Vendor#	Vendor Name		Class	Pay Code					
M2659	MERRY X-RAY/SOURCEONE HEALTHCA ✓		M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net

8800344032 ✓		10/17/20	10/09/20	11/08/20		1,603.52	0.00	0.00	1,603.52 ✓
	SUPPLIES	delivery \$10.00							
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
	M2659	MERRY X-RAY/SOURCEONE HEALTHCA				1,603.52	0.00	0.00	1,603.52
Vendor#	Vendor Name		Class		Pay Code				
11205	MICRO SURGICAL TECHNOLOGY INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
0000239342 ✓		10/23/20	10/15/20	11/14/20		806.72	0.00	0.00	806.72 ✓
	SUPPLIE	shipping 31.72							
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
	11205	MICRO SURGICAL TECHNOLOGY INC				806.72	0.00	0.00	806.72
Vendor#	Vendor Name		Class		Pay Code				
11976	MID-COAST ELECTRIC SUPPLY, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
176364200 ✓		10/30/20	08/08/20	09/08/20		113.04	0.00	0.00	113.04 ✓
	SUPPLIES								
176364202 ✓		10/30/20	08/10/20	09/10/20		8.75	0.00	0.00	8.75 ✓
	SUPPLIES								
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
	11976	MID-COAST ELECTRIC SUPPLY, INC				121.79	0.00	0.00	121.79
Vendor#	Vendor Name		Class		Pay Code				
M2621	MMC AUXILIARY GIFT SHOP ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
102518		11/01/20	10/25/20	10/25/20		160.80	0.00	0.00	160.80 ✓
	PAYROLL DED								
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP				160.80	0.00	0.00	160.80
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
102918		10/29/20	10/29/20	10/29/20		19,892.81	0.00	0.00	19,892.81 ✓
	INSURANCE								
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
	10810	MMC EMPLOYEE BENEFIT PLAN				19,892.81	0.00	0.00	19,892.81
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
3440487 ✓		10/29/20	10/26/20	11/05/20		228.43	0.00	0.00	228.43 ✓
	INVENTORY								
CM88945 ✓		10/29/20	10/26/20	11/05/20		-226.30	0.00	0.00	-226.30 ✓
	CREDIT								
3440486 ✓		10/29/20	10/26/20	11/05/20		988.70	0.00	0.00	988.70 ✓
	INVENTORY								
3440485 ✓		10/29/20	10/26/20	11/05/20		2,673.71	0.00	0.00	2,673.71 ✓
	INVENTORY								
3440395 ✓		10/29/20	10/26/20	11/05/20		113.43	0.00	0.00	113.43 ✓
	INVENTORY								
3425241 ✓		10/30/20	10/23/20	11/02/20		418.01	0.00	0.00	418.01 ✓
	INVENTORY								
3425242 ✓		10/30/20	10/23/20	11/02/20		124.35	0.00	0.00	124.35 ✓
	INVENTORY								
3425240 ✓		10/30/20	10/23/20	11/02/20		24.24	0.00	0.00	24.24 ✓

3429859 ✓	INVENTORY	10/30/20 10/24/20 11/03/20	728.58	0.00	0.00	728.58 ✓
3428647 ✓	INVENTORY	10/30/20 10/24/20 11/03/20	5.94	0.00	0.00	5.94 ✓
3428649 ✓	INVENTORY	10/30/20 10/24/20 11/03/20	830.39	0.00	0.00	830.39 ✓
3429858 ✓	INVENTORY	10/30/20 10/24/20 11/03/20	53.73	0.00	0.00	53.73 ✓
3428648 ✓	INVENTORY	10/30/20 10/24/20 11/03/20	4.09	0.00	0.00	4.09 ✓
3429860 ✓	INVENTORY	10/30/20 10/24/20 11/03/20	1,922.46	0.00	0.00	1,922.46 ✓
3222 ✓	INVENTORY	10/30/20 10/25/20 11/04/20	-301.71	0.00	0.00	-301.71 ✓
3436007 ✓	INVENTORY	10/30/20 10/25/20 11/04/20	1,825.85	0.00	0.00	1,825.85 ✓
3436006 ✓	INVENTORY	10/30/20 10/25/20 11/04/20	645.43	0.00	0.00	645.43 ✓
3436005 ✓	INVENTORY	10/30/20 10/25/20 11/04/20	699.06	0.00	0.00	699.06 ✓
3436008 ✓	INVENTORY	10/30/20 10/25/20 11/04/20	19.18	0.00	0.00	19.18 ✓
3446783 ✓	INVENTORY	10/30/20 10/29/20 11/08/20	718.38	0.00	0.00	718.38 ✓
3446782 ✓	INVENTORY	10/30/20 10/29/20 11/08/20	74.24	0.00	0.00	74.24 ✓
3446784 ✓	INVENTORY	10/30/20 10/29/20 11/08/20	151.57	0.00	0.00	151.57 ✓
Vendor Totals						
10536	MORRIS & DICKSON CO, LLC		Gross	Discount	No-Pay	Net
			11,721.76	0.00	0.00	11,721.76
Vendor#	Vendor Name	Class	Pay Code			
11472	OCCUPRO LLC ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross
9199 ✓		10/31/20	02/19/20	03/19/20		425.36
	SUPPLIES					
10310 ✓		10/31/20	07/07/20	08/07/20		820.31
	PT SERVICES					
10606 ✓		10/31/20	08/07/20	09/07/20		844.92
	PT SERVICES					
10958 ✓		10/31/20	09/07/20	10/07/20		844.92
	PT SERVICES					
Vendor Totals						
11472	OCCUPRO LLC		Gross	Discount	No-Pay	Net
			2,935.51	0.00	0.00	2,935.51
Vendor#	Vendor Name	Class	Pay Code			
O1416	ORTHO CLINICAL DIAGNOSTICS ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross
1850786363 ✓		10/30/20	10/15/20	11/14/20		749.93
	LAB SERVICES					
	<i>Freight 10-07</i>					
Vendor Totals						
O1416	ORTHO CLINICAL DIAGNOSTICS		Gross	Discount	No-Pay	Net
			749.93	0.00	0.00	749.93

Vendor#	Vendor Name				Class	Pay Code				
OM425	OWENS & MINOR									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2041735734		10/17/20	10/09/20	11/08/20		653.66	0.00	0.00	653.66	
	SUPPLIES									
2041799775		10/22/20	10/11/20	11/10/20		50.64	0.00	0.00	50.64	
	SUPPLIES									
2041799278		10/22/20	10/11/20	11/10/20		33.76	0.00	0.00	33.76	
	SUPPLIES									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					OM425	OWENS & MINOR	738.06	0.00	0.00	738.06
Vendor#	Vendor Name				Class	Pay Code				
11069	PABLO GARZA									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
103018		10/31/20	10/30/20	10/30/20		2,490.00	0.00	0.00	2,490.00	
	CONTRACT EMPLOYEE									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					11069	PABLO GARZA	2,490.00	0.00	0.00	2,490.00
Vendor#	Vendor Name				Class	Pay Code				
10326	PRINCIPAL LIFE									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
110118		10/30/20	11/01/20	11/01/20		1,496.93	0.00	0.00	1,496.93	
	INSURANCE									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					10326	PRINCIPAL LIFE	1,496.93	0.00	0.00	1,496.93
Vendor#	Vendor Name				Class	Pay Code				
11080	RADSOURCE									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
SC57975		10/23/20	10/15/20	11/09/20		1,625.00	0.00	0.00	1,625.00	
	EQUIP									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					11080	RADSOURCE	1,625.00	0.00	0.00	1,625.00
Vendor#	Vendor Name				Class	Pay Code				
S0900	SAM'S CLUB DIRECT				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
003344		11/01/20	09/19/20	09/19/20		74.62	0.00	0.00	74.62	
	FOOD SUPPLIES									
004701		11/01/20	09/20/20	09/20/20		27.48	0.00	0.00	27.48	
	FOOD SUPPLIES									
004978		11/01/20	09/23/20	09/23/20		56.10	0.00	0.00	56.10	
	FOOD SUPPLIES									
007781		11/01/20	09/24/20	09/24/20		92.12	0.00	0.00	92.12	
	FOOD SUPPLIES									
009526		11/01/20	10/01/20	10/01/20		135.38	0.00	0.00	135.38	
	FOOD SUPPLIES									
000195		11/01/20	10/03/20	10/03/20		241.20	0.00	0.00	241.20	
	FOOD SUPPLIES									
000525		11/01/20	10/04/20	10/04/20		103.70	0.00	0.00	103.70	
	FOOD SUPPLIES									
L181020		11/01/20	10/19/20	10/19/20		7.71	0.00	0.00	7.71	
	LATE FEE									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net

	S0900	SAM'S CLUB DIRECT					738.31	0.00	0.00	738.31
Vendor#	Vendor Name			Class	Pay Code					
S1405	SERVICE SUPPLY OF VICTORIA INC ✓			W						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	700960129 ✓		10/30/20	04/14/20	05/14/20		34.13	0.00	0.00	34.13 ✓
		SUPPLIES								
	700982525 ✓		10/30/20	09/06/20	10/06/20		79.46	0.00	0.00	79.46 ✓
		SUPPLIES								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net	
	S1405	SERVICE SUPPLY OF VICTORIA INC				113.59	0.00	0.00	113.59	
Vendor#	Vendor Name			Class	Pay Code					
12120	SERVPRO OF VICTORIA ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	760 ✓		10/29/20	10/29/20	10/29/20		771.36	0.00	0.00	771.36 ✓
		CLEANING PILOT HOUSE								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net	
	12120	SERVPRO OF VICTORIA				771.36	0.00	0.00	771.36	
Vendor#	Vendor Name			Class	Pay Code					
K0536	SHIRLEY KARNEI ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	103018		10/30/20	10/30/20	10/30/20		272.36	0.00	0.00	272.36 ✓
		CONTRACT EMPLOYEE								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net	
	K0536	SHIRLEY KARNEI				272.36	0.00	0.00	272.36	
Vendor#	Vendor Name			Class	Pay Code					
11296	SOUTH TEXAS BLOOD & TISSUE CEN ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	90040000 ✓		10/30/20	10/18/20	11/12/20		-1,380.00	0.00	0.00	-1,380.00 ✓
		CREDIT								
	900401102 ✓		10/30/20	10/18/20	11/12/20		1,612.00	0.00	0.00	1,612.00 ✓
		SUPPLIES								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net	
	11296	SOUTH TEXAS BLOOD & TISSUE CEN				232.00	0.00	0.00	232.00	
Vendor#	Vendor Name			Class	Pay Code					
S2694	STANFORD VACUUM SERVICE ✓			M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	249617 ✓		10/30/20	02/07/20	03/07/20		385.00	0.00	0.00	385.00 ✓
		GREAS TRAP PUMP OUT								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net	
	S2694	STANFORD VACUUM SERVICE				385.00	0.00	0.00	385.00	
Vendor#	Vendor Name			Class	Pay Code					
11772	STERIS INSTRUMENT MANAGEMENT ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	1763442 ✓		10/22/20	10/12/20	11/11/20		1,288.00	0.00	0.00	1,288.00 ✓
		SUPPLIES Shipping 51.00								
	1763479 ✓		10/22/20	10/12/20	11/11/20		391.00	0.00	0.00	391.00 ✓
		SUPPLIES Shipping 41.00								
	1763130 ✓		10/22/20	10/12/20	11/11/20		786.00	0.00	0.00	786.00 ✓
		SUPPLIES Shipping 41.00								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net	
	11772	STERIS INSTRUMENT MANAGEMENT				2,465.00	0.00	0.00	2,465.00	

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	
844372A ✓		10/23/20	10/11/20	11/10/20		361.31	0.00	0.00	361.31 ✓	
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	S2830	STRYKER SALES CORP				361.31	0.00	0.00	361.31	
Vendor#	Vendor Name				Class	Pay Code				
11140	TEXAS ADVANTAGE COMMUNITY BANK ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
103118		10/30/20	10/31/20	10/31/20		3,690.52	0.00	0.00	3,690.52 ✓	
	CAPITAL LEASE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11140	TEXAS ADVANTAGE COMMUNITY BANK				3,690.52	0.00	0.00	3,690.52	
Vendor#	Vendor Name				Class	Pay Code				
11100	THE US CONSULTING GROUP ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
340372205 ✓		10/30/20	07/24/20	08/18/20		3,203.90	0.00	0.00	3,203.90 ✓	
	WASTE CONTAINERS PILOT I									
340372660 ✓		10/30/20	09/13/20	10/08/20		2,245.91	0.00	0.00	2,245.91 ✓	
	WASTE SERVICES									
340372659 ✓		10/30/20	09/13/20	10/08/20		1,141.60	0.00	0.00	1,141.60 ✓	
	WASTER CONTAINERS PILOT									
340372658 ✓		10/30/20	09/13/20	10/08/20		784.35	0.00	0.00	784.35 ✓	
	WASTE SERVICES									
340372916 ✓		10/30/20	10/17/20	11/11/20		304.13	0.00	0.00	304.13 ✓	
	WASTER SERVICE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11100	THE US CONSULTING GROUP				7,679.89	0.00	0.00	7,679.89	
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	
5000931597 ✓		10/30/20	10/15/20	10/15/20		1,536.00	0.00	0.00	1,536.00 ✓	
	ELEVATOR MAINTENACE									
5000961598 36944348		10/30/20	10/15/20	10/15/20		192.00	0.00	0.00	192.00 ✓	
	TROUBLESHOOTING									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	T2250	THYSSENKRUPP ELEVATOR CORP				1,728.00	0.00	0.00	1,728.00	
Vendor#	Vendor Name				Class	Pay Code				
T3130	TRI-ANIM HEALTH SERVICES INC ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
63307164 ✓		10/23/20	10/16/20	11/10/20		295.41	0.00	0.00	295.41 ✓	
	SUPPLIES <i>frugut m-77</i>									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	T3130	TRI-ANIM HEALTH SERVICES INC				295.41	0.00	0.00	295.41	
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	
8400285147 ✓		10/17/20	10/15/20	11/09/20		56.21	0.00	0.00	56.21 ✓	
	LAUNDRY									
8400285144 ✓		10/17/20	10/15/20	11/09/20		118.13	0.00	0.00	118.13 ✓	
	LAUNDRY									

8400285143 ✓	10/17/20 10/15/20 11/09/20	120.39	0.00	0.00	120.39 ✓
LAUNDRY					
8400285146 ✓	10/17/20 10/15/20 11/09/20	47.15	0.00	0.00	47.15 ✓
LAUNDRY					
8400285145 ✓	10/17/20 10/15/20 11/09/20	152.38	0.00	0.00	152.38 ✓
LAUNDRY					
8400285185 ✓	10/17/20 10/15/20 11/09/20	1,348.98	0.00	0.00	1,348.98 ✓
LAUNDRY					
8400285178 ✓	10/17/20 10/15/20 11/09/20	85.24	0.00	0.00	85.24 ✓
LAUNDRY					
8400284215 ✓	10/17/20 10/15/20 11/09/20	116.86	0.00	0.00	116.86 ✓
LAUNDRY					
8400285459 ✓	10/23/20 10/18/20 11/12/20	153.50	0.00	0.00	153.50 ✓
LAUNDRY					
8400285456 ✓	10/23/20 10/18/20 11/12/20	17.00	0.00	0.00	17.00 ✓
LAUNDRY					
8400285499 ✓	10/23/20 10/18/20 11/12/20	1,001.51	0.00	0.00	1,001.51 ✓
LAUNDRY					
8400282060 ✓	10/29/20 09/03/20 09/28/20	138.95	0.00	0.00	138.95 ✓
LAUNDRY					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	U1064 UNIFIRST HOLDINGS INC	3,356.30	0.00	0.00	3,356.30
Vendor#	Vendor Name	Class	Pay Code		
V1080	VICTORIA COMMUNICATION SVCS ✓	M			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
4998 ✓		10/30/20	09/05/20	09/05/20	50.00
	RADIO WORK				
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	V1080 VICTORIA COMMUNICATION SVCS	50.00	0.00	0.00	50.00
Vendor#	Vendor Name	Class	Pay Code		
10793	WAGeworks ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
INV987123 ✓		10/16/20	10/15/20	11/14/20	370.25
	MONTHLY FEES				
102518		10/30/20	10/25/20	10/25/20	2,329.33
	PAYROLL DED				
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10793 WAGeworks	2,699.58	0.00	0.00	2,699.58
Vendor#	Vendor Name	Class	Pay Code		
I1110	WERFEN USA LLC ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
9110582371 ✓		10/30/20	10/15/20	11/09/20	1,571.67
	LAB SERVICES				
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	I1110 WERFEN USA LLC	1,571.67	0.00	0.00	1,571.67
Vendor#	Vendor Name	Class	Pay Code		
11748	ZIMMER BIOMET ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
784129IL6210 ✓		10/22/20	10/15/20	11/14/20	848.00
	SUPPLIES				
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net

11748	ZIMMER BIOMET	848.00	0.00	0.00	848.00
Report Summary					
Grand Totals:	Gross	Discount	No-Pay	Net	
	328,426.23	0.00	0.00	328,426.23	

pg 1 correction

$\left\{ \begin{array}{l} <2,400.82> \\ + 2,400.84 \end{array} \right\}$

 \$ 328,424.25

328,426.23 +
 2,400.82 -
 2,400.84 +
 328,426.25 *

APPROVED
ON

NOV 01 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK #'s
 178184-
 178251

8

RUN DATE:11/07/18
TIME:11:48

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/06/18 THRU 11/07/18

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

CODE	NUMBER	DATE	AMOUNT	PAYEE
NHG *	000022	11/07/18	47,465.33	MMC OPERATING
NHF *	000031	11/07/18	13,775.58	MMC OPERATING
NHC *	000033	11/07/18	3,845.40	MMC OPERATING
NHA *	000036	11/07/18	19,860.36	MMC OPERATING
A/P *	001006	11/06/18	10,420.76	MCKESSON
A/P	178184	11/07/18	15.98	ACE HARDWARE 15521
A/P	178185	11/07/18	2,438.62	AIRGAS USA, LLC - CENTRAL DIV
A/P	178186	11/07/18	1,547.70	ALCON LABORATORIES, INC.
A/P	178187	11/07/18	12,619.00	AMERICAN PROFICIENCY INSTITUTE
A/P	178188	11/07/18	38.83	AUTO PARTS & MACHINE CO.
A/P	178189	11/07/18	769.45	BAXTER HEALTHCARE
A/P	178190	11/07/18	10,422.93	BECKMAN COULTER INC
A/P	178191	11/07/18	814.95	BEEKLEY MEDICAL
A/P	178192	11/07/18	214.70	DAWN MCCLELLAND
A/P	178193	11/07/18	182.33	DEWITT POTH & SON
A/P	178194	11/07/18	136,807.28	DISCOVERY MEDICAL NETWORK INC
A/P	178195	11/07/18	552.40	DSHS CENTRAL LAB MC2004
A/P	178196	11/07/18	62.63	DYNATRONICS CORPORATION
A/P	178197	11/07/18	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	178198	11/07/18	178.86	BRIN CLEVINGER
A/P	178199	11/07/18	1,982.50	FIRE DOOR SOLUTIONS
A/P	178200	11/07/18	75.00	FIRST CLEARING
A/P	178201	11/07/18	11,175.79	FISHER HEALTHCARE
A/P	178202	11/07/18	308.77	FLDR DESIGNS LLC
A/P	178203	11/07/18	949.00	FORT BEND SERVICES, INC
A/P	178204	11/07/18	122.44	GETINGE USA
A/P	178205	11/07/18	354.40	GULF COAST PAPER COMPANY
A/P	178206	11/07/18	26.49	HAYES ELECTRIC SERVICE
A/P	178207	11/07/18	.00	VOIDED
A/P	178208	11/07/18	771.05	HEB CREDIT RECEIVABLES DEPT308
A/P	178209	11/07/18	517.12	HOLOGIC INC
A/P	178210	11/07/18	11.25	ICU MEDICAL, INC
A/P	178211	11/07/18	209.70	KATHY JIMENEZ
A/P	178212	11/07/18	173.62	KELLY SCHOTT
A/P	178213	11/07/18	3,741.87	LABCORP OF AMERICA HOLDINGS
A/P	178214	11/07/18	24,327.92	LUBY'S FUDDRUCKERS RESTAURANTS
A/P	178215	11/07/18	1,045.00	M G TRUST
A/P	178216	11/07/18	423.55	MCKESSON MEDICAL SURGICAL INC
A/P	178217	11/07/18	263.69	MEDIVATORS
A/P	178218	11/07/18	3,367.17	MEDLINE INDUSTRIES INC
A/P	178219	11/07/18	25.00	MEMORIAL MEDICAL CENTER
A/P	178220	11/07/18	150.00	MEMORIAL MEDICAL CLINIC
A/P	178221	11/07/18	75.63	MERCEDES MEDICAL
A/P	178222	11/07/18	1,603.52	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	178223	11/07/18	806.72	MICRO SURGICAL TECHNOLOGY INC
A/P	178224	11/07/18	121.79	MID-COAST ELECTRIC SUPPLY, INC
A/P	178225	11/07/18	160.80	MMC AUXILIARY GIFT SHOP
A/P	178226	11/07/18	19,892.81	MMC EMPLOYEE BENEFIT PLAN
A/P	178227	11/07/18	.00	VOIDED
A/P	178228	11/07/18	11,721.76	MORRIS & DICKSON CO, LLC

Check 000031 Breakdown: Fort Bend-\$8,120.58; Solera-\$5,655.00

QIPP

Payables

RUN DATE:11/07/18
TIME:11:48

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/06/18 THRU 11/07/18

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	178229	11/07/18	2,935.51	OCCUPRO LLC
A/P	178230	11/07/18	749.93	ORTHO CLINICAL DIAGNOSTICS
A/P	178231	11/07/18	738.06	OWENS & MINOR
A/P	178232	11/07/18	2,490.00	PABLO GARZA
A/P	178233	11/07/18	1,496.93	PRINCIPAL LIFE
A/P	178234	11/07/18	1,625.00	RADSOURCE
A/P	178235	11/07/18	738.31	SAM'S CLUB DIRECT
A/P	178236	11/07/18	113.59	SERVICE SUPPLY OF VICTORIA INC
A/P	178237	11/07/18	771.36	SERVPRO OF VICTORIA
A/P	178238	11/07/18	272.36	SHIRLEY KARNEI
A/P	178239	11/07/18	232.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	178240	11/07/18	385.00	STANFORD VACUUM SERVICE
A/P	178241	11/07/18	2,465.00	STERIS INSTRUMENT MANAGEMENT
A/P	178242	11/07/18	361.31	STRYKER SALES CORP
A/P	178243	11/07/18	3,690.52	TEXAS ADVANTAGE COMMUNITY BANK
A/P	178244	11/07/18	7,679.89	THE US CONSULTING GROUP
A/P	178245	11/07/18	1,728.00	THYSSENKRUPP ELEVATOR CORP
A/P	178246	11/07/18	295.41	TRI-ANIM HEALTH SERVICES INC
A/P	178247	11/07/18	3,356.30	UNIFIRST HOLDINGS INC
A/P	178248	11/07/18	50.00	VICTORIA COMMUNICATION SVCS
A/P	178249	11/07/18	2,699.58	WAGEWORKS
A/P	178250	11/07/18	1,571.67	WERFEN USA LLC
A/P	178251	11/07/18	848.00	ZIMMER BIOMET
TOTALS:			423,793.68	

APPROVED
ON

NOV 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

QIP 84,946.67 +
McKesson 10,420.76 +
Payables 328,426.25 +
423,793.68 *

McKESSON

Company: 8000

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

STATEMENT

As of: 11/02/2018

Page: 002

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

DC: 8115

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 11/02/2018 Page: 002
Mail to: Comp: 8000

Territory:

Customer: 632536
Date: 11/03/2018

Cust: 632536 PLEASE CHECK ANY
Date: 11/03/2018 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	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: 10,633.43 USD

Future Due:

0.00

Past Due:

0.00

Last Payment
08/07/2017

2,451.97

If Paid By 11/06/2018,
Pay This Amount:

10,420.76 USD

Due If Paid On Time:
USD

10,420.76 ✓

Disc lost if paid late:
212.67

If Paid After 11/06/2018,
Pay this Amount:

10,633.43 USD

Due If Paid Late:
USD

10,633.43

Check # 1006

GL Acct. # 60310000

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ON

1,611.38 +
8,722.91 +
86.47 +
10,420.76 *

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MCKESSON

STATEMENT

As of: 11/02/2018

Page: 001

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

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

DC: 8115

Territory: 400

Customer: 190813

Date: 11/03/2018

As of: 11/02/2018
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813
Date: 11/03/2018
PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 190813 HEB PHCY 0434/MEM MED PHS										
10/31/2018	11/06/2018	7100288316 ✓	2017005826	115Invoice	1.66	83.09		81.43	✓	7100288316
11/02/2018	11/06/2018	7100704060 ✓	2017005856	115Invoice	0.10	5.14		5.04	✓	7100704060

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: 88.23 USD

Future Due:	0.00			Due If Paid On Time:	86.47	86.47
Past Due:	0.00			USD		
Last Payment 10/29/2018	5,547.75			Disc lost if paid late:	1.76	1.76
				Due If Paid Late:	88.23	88.23
				USD		

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ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MCKESSON

STATEMENT

Company: 8000

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

As of: 11/02/2018

DC: 8115

Territory: 400

Customer: 262252

Date: 11/03/2018

Page: 001

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account, detach and return this
stub with your remittance

As of: 11/02/2018
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252
Date: 11/03/2018
PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 262252										
10/29/2018	11/06/2018	CVS PHCY 7006/MEMORIA PHS								
		7899787648 ✓	1001329277	115Invoice	0.72	35.80		35.08 ✓		7899787648
10/29/2018	11/06/2018	7899787655 ✓	1001329726	115Invoice	4.47	223.45		218.98 ✓		7899787655
10/29/2018	11/06/2018	7899787661 ✓	1001329726	115Invoice	1.99	99.28		97.29 ✓		7899787661
10/29/2018	11/06/2018	7899787664 ✓	1001330158	115Invoice	2.06	102.81		100.75 ✓		7899787664
10/29/2018	11/06/2018	7899787667 ✓	1001330158	115Invoice	1.28	64.02		62.74 ✓		7899787667
10/30/2018	11/06/2018	7100052375 ✓	1001330539	115Invoice	25.45	1,272.28		1,246.83 ✓		7100052375
10/31/2018	11/06/2018	7100306885 ✓	1001331592	115Invoice	136.34	6,817.09		6,680.75 ✓		7100306885
10/31/2018	11/06/2018	7100306891 ✓	1001331592	115Invoice	5.72	286.21		280.49 ✓		7100306891

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: 8,900.94 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 5,547.75

10/29/2018

If Paid By 11/06/2018,
Pay This Amount:

8,722.91 USD

If Paid After 11/06/2018,
Pay this Amount:

8,900.94 USD

Due if Paid On Time:

8,722.91

Disc lost if paid late:

178.03

Due if Paid Late:

8,900.94

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ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MCKESSON

Company: 8000

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

STATEMENT

As of: 11/02/2018

Page: 001

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

DC: 8115

Territory: 400

Customer: 256342

Date: 11/03/2018

As of: 11/02/2018
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 11/03/2018

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 256342										
10/29/2018	11/06/2018	7899787508	1027180140-00	115Invoice	0.31	15.49		15.18	✓	7899787508
10/29/2018	11/06/2018	7899787509	0959800068	115Invoice	1.89	94.69		92.80	✓	7899787509
10/30/2018	11/06/2018	7100052492	0959800069	115Invoice	5.59	279.61		274.02	✓	7100052492
10/30/2018	11/06/2018	7100052493	1029180220-00	115Invoice	0.15	7.74		7.59	✓	7100052493
10/31/2018	11/06/2018	7100287773	0959800070	115Invoice	0.02	0.94		0.92	✓	7100287773
11/01/2018	11/06/2018	7100499664	0959800071	115Invoice	10.00	500.10		490.10	✓	7100499664
11/01/2018	11/06/2018	7100499665	1031180354-00	115Invoice	7.74	386.76		379.02	✓	7100499665
11/02/2018	11/06/2018	7100722135	0959800072	115Invoice	7.18	358.93		351.75	✓	7100722135

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: 1,644.26 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 10/29/2018 5,547.75

If Paid By 11/06/2018,
Pay This Amount:

If Paid After 11/06/2018,
Pay this Amount:

Due If Paid On Time:
USD 1,611.38 USD ✓

Disc lost if paid late:
USD 32.88

Due If Paid Late:
USD 1,644.26

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ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

I B C

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --October 29, 2018 - November 04, 2018

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>
-------------	-------------------------	------------------	---------------

No Electronic transfers for this Period

Total Electronic Payments:

 November 5, 2018

Diane Moore, CFO
Memorial Medical Center

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --October 29, 2018 - November 04, 2018

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>
10/30/2018	ACH Payment MCKESSON DRUG AUTO ACH ACH03617457 910000188	- 340B Drug Program Expense	5,547.75 *
11/2/2018	ACH Payment PAYROLL ONLINE TRF PAYROLL 113122658487745	- Payroll	269,947.93 *
11/2/2018	ACH Payment STATE COMPTLR TEXNET 32014735/81101 2100002	-Nueces SDA UHRIP IGT	67,281.69 *
			<u>342,777.37</u>

 November 5, 2018

Diane Moore, CFO
Memorial Medical Center

* Approved 10/31/18 CC

* * Approved 10/24/18 CC

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
11/5/2018

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens		252,473.97 ✓	252,373.97 ✓	135,928.51	-	136,028.51 ✓	116,013.52
					Bank Balance	136,028.51 ✓	
					Variance	-	
					Leave in Balance	100.00	
					MMC Portion QIPP 1	19,860.36 ✓	
					MMC Portion QIPP 2	-	
					MMC Portion QIPP 3	-	
					October Bank Interest	54.63 ✓	
					November Bank Interest	-	
					December Bank Interest	-	
					Adjust Balance/Transfer Amt	116,013.52 ✓	

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co

JP Morgan Chase Bank

AB/

Account

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston		152,743.32 ✓	152,643.32 ✓	154,445.39			154,545.39 ✓	148,724.97
					Bank Balance		154,545.39 ✓	
					Variance		-	
					Leave in Balance		100.00	
					MMC Portion QIPP 1		5,655.00 ✓	
					MMC Portion QIPP 2		-	
					MMC Portion QIPP 3		-	
					October Bank Interest		65.42 ✓	
					November Bank Interest		-	
					December Bank Interest		-	
					Adjust Balance/Transfer Amt		148,724.97 ✓	

Crescent		101,036.47 ✓	100,936.47 ✓	93,853.76			93,953.76 ✓	89,967.53
					Bank Balance		93,953.76 ✓	
					Variance		-	
					Leave in Balance		100.00	
					MMC Portion QIPP 1		3,845.40 ✓	
					MMC Portion QIPP 2		-	
					MMC Portion QIPP 3		-	
					October Bank Interest		40.83 ✓	
					November Bank Interest		-	
					December Bank Interest		-	
					Adjust Balance/Transfer Amt		89,967.53	

Brookwood		99,667.26 ✓	99,567.26 ✓	161,040.27			161,140.27 ✓	160,976.12
					Bank Balance		161,140.27 ✓	
					Variance		-	
					Leave in Balance		100.00	
					MMC Portion QIPP 1		-	
					MMC Portion QIPP 2		-	
					MMC Portion QIPP 3		-	
					October Bank Interest		64.15 ✓	
					November Bank Interest		0	
					December Bank Interest		0	
					Adjust Balance/Transfer Amt		160,976.12 ✓	

Fort Bend		93,950.35 ✓	93,850.35 ✓	32,391.68			32,491.68 ✓	24,249.42
					Bank Balance		32,491.68 ✓	
					Variance		-	
					Leave in Balance		100.00	
					MMC Portion QIPP 1		8,120.58 ✓	
					MMC Portion QIPP 2		-	
					MMC Portion QIPP 3		-	
					October Bank Interest		21.68 ✓	
					November Bank Interest		-	
					December Bank Interest		-	
					Adjust Balance/Transfer Amt		24,249.42 ✓	

116,013.52 +
148,724.97 +
89,967.53 +
160,976.12 +
24,249.42 +
539,931.56 *

TOTAL TRANSFERS 539,931.56

Routing Information for Crescent / Solera at West Houston / Fort Bend

Cantex Health Care Centers III LLC

JP Morgan Chase Bank

AB/

Account

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:

Diane Moore, CFO

11/5/2018

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
11/5/2018

Account Number	Previous Beginning Balance	ACH Transfer-In	ACH Transfer-Out	Pending Deposits	IGT Transfer-In	IGT Return of IGT	MMC Portion - Federal Match	MMC Portion - Federal Match	Nexion Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home Golden Creek	189,024.57	77,563.58	188,924.57			17,401.37	30,063.96	30,063.96	30,063.96	77,663.58	30,063.96
							Bank balance			77,663.58	
							Variance				
							Leave in Balance			100.00	
							MMC Portion QPPP 1			17,401.37	
							MMC Portion QPPP 2			8,448.00	
							MMC Portion QPPP 3			21,615.96	
							October Bank Interest			34.29	
							November Bank Interest				
							December Bank Interest				
							Adjust Balance/Transfer Amt			30,063.96	

Routing Information for Golden Creek:

Nexion Health at Golden Creek

Wellk Financial Group, AKA

ABA

Account #

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: 
Diane Moore, CFO

11/5/2018

APPROVED
ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: November 7, 2018

A _____

Y _____

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E _____

APPROVED
ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

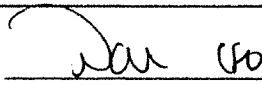
AMOUNT \$19,860.36

00034

G/L NUMBER: 21000012

EXPLANATION: Ashford – To transfer funds for Component 1 – QIPP Payments

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: November 7, 2018

A _____

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APPROVED
ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

#00022

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$47,465.33

G/L NUMBER: 21000013

EXPLANATION: Golden Creek – To transfer funds for Component 1, 2 & 3 – QIPP Payments

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY:  CFO

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: November 7, 2018

A _____

Y _____

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E _____

APPROVED
ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

#00031

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$8,120.58

G/L NUMBER: 21000008

EXPLANATION: Fort Bend – To transfer funds for Component 1 – QIPP Payments

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY: *neu* *cp*

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: November 7, 2018

A _____

Y _____

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E _____

APPROVED
ON

NOV 05 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

#00031

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$5,655.00

G/L NUMBER: 21000011

EXPLANATION: Solera – To transfer funds for Component 1 – QIPP Payments

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: November 7, 2018

A _____

APPROVED
ON

Y _____

NOV 05 2018

E _____

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

E _____

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$3,845.40

#00077

G/L NUMBER: 21000010

EXPLANATION: Crescent – To transfer funds for Component 1 – QIPP Payments

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY:  CFO