MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- December 19, 2018

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	**$**	**405,628.21**
TOTAL TRANSFERS BETWEEN FUNDS	**$**	**-**
TOTAL NURSING HOME UPL EXPENSES	**$**	**583,272.86**
TOTAL INTER-GOVERNMENT TRANSFERS	**$**	**-**
GRAND TOTAL DISBURSEMENTS APPROVED December 19, 2018	**$**	**988,901.07**

APPROVED

DEC 19 2018

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---December 19, 2018

PAYABLES AND PAYROLL			
12/13/2018	Weekly Payables	384,050.74	
12/17/2018	McKesson-340B Prescription Expense	2,009.71	
12/17/2018	IBC Oustanding Checks reissued through Prosperity AP-see attached	8,302.45	
12/17/2018	Amerisource Bergen-340B Prescription Expense	2,133.62	
12/17/2018	TCEQ-Penalty	2,700.00	
12/17/2018	Storaway & Stash-away-Rent for storage June 18-May 2019	1,020.00	
12/17/2018	Payroll Liabilities (Payroll Taxes)	150.30	
12/17/2018	Supplemental Payroll	509.51	
	Electronic Bank Payments		
	Prosperity Electronics Payments		
12/10/2018	Credit Card & Lease Fees	3,281.39	
12/19/2018	Sales Tax for November 2018	1,454.51	
12/11-12/14/18	Pay Plus-Patient Claims Processing Fee	15.98	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 405,628.21**
TOTAL TRANSFERS BETWEEN FUNDS			**$ -**
NURSING HOME UPL EXPENSES			
12/17/2018	Nursing Home UPI	583,272.86	
TOTAL NURSING HOME UPL EXPENSES			**$ 583,272.86**
TOTAL INTER-GOVERNMENT TRANSFERS			**$ -**
GRAND TOTAL DISBURSEMENTS APPROVED December 19, 2018			**$ 988,901.07**

12/13/2018 10:28 — MEMORIAL MEDICAL CENTER — AP Open Invoice List — Due Dates Through: 12/19/2018 — 0 — ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
10995	ABILITY NETWORK (SHIFTHOUND) ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
18M0192457 ✓	SCHEDULING SERVICES	12/12/20	12/11/20	01/10/20		558.00	0.00	0.00	558.00 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10995	ABILITY NETWORK (SHIFTHOUND)	558.00	0.00	0.00	558.00

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
129707 ✓	SUPPLIES (clinic)	12/10/20	12/04/20	01/04/20		6.99	0.00	0.00	6.99 ✓
129744 ✓	SUPPLIES (cleaning)	12/10/20	12/05/20	01/05/20		22.34	0.00	0.00	22.34 ✓
129918 ✓	SUPPLIES (Maint.)	12/12/20	12/11/20	01/11/20		16.57	0.00	0.00	16.57 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11283	ACE HARDWARE 15521	45.90	0.00	0.00	45.90

Vendor#	Vendor Name	Class	Pay Code
11014	ADVANCED COMMUNICATIONS ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
7900 ✓	NURSE CALL BOX CORDS Shipping 46.00	12/10/20	12/06/20	01/06/20		923.65	0.00	0.00	923.65 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11014	ADVANCED COMMUNICATIONS	923.65	0.00	0.00	923.65

Vendor#	Vendor Name	Class	Pay Code
A2206	APIC ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
37502-2018	MEMBERSHIP	11/30/20	12/01/20	12/01/20		215.00	0.00	0.00	215.00 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A2206	APIC	215.00	0.00	0.00	215.00

Vendor#	Vendor Name	Class	Pay Code
A2218	AQUA BEVERAGE COMPANY ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
874850 ✓	WATER	12/12/20	11/06/20	12/06/20		21.99	0.00	0.00	21.99 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A2218	AQUA BEVERAGE COMPANY	21.99	0.00	0.00	21.99

Vendor#	Vendor Name	Class	Pay Code
A2271	ARTHREX, INC ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
94443692A ✓	EQUIPMENT	12/13/20	11/12/20	12/12/20		5,914.21	0.00	0.00	5,914.21

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A2271	ARTHREX, INC	5,914.21	0.00	0.00	5,914.21 ✓

Vendor#	Vendor Name	Class	Pay Code
12252	ASCEND NATIONAL LLC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
026791		12/11/20	12/01/20	01/01/20			2,804.00	0.00	0.00	2,804.00
	SURGERY STAFFING									
026568		12/12/20	11/10/20	11/10/20			2,579.00	0.00	0.00	2,579.00
	SURGERY STAFFING									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	12252	ASCEND NATIONAL LLC					5,383.00	0.00	0.00	5,383.00

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
61425751		11/30/20	11/21/20	12/16/20			2,367.50	0.00	0.00	2,367.50
	LEASE									
61425757		11/30/20	11/21/20	12/16/20			629.50	0.00	0.00	629.50
	LEASE									
11629947		12/11/20	01/30/20	02/24/20			-317.70	0.00	0.00	-317.70
	-317.70									
11536242		12/11/20	06/02/20	06/27/20			-190.50	0.00	0.00	-190.50
	CREDIT									
11629948		12/11/20	10/20/20	11/14/20			-897.96	0.00	0.00	-897.96
	CREDIT									
11629949		12/11/20	10/30/20	11/24/20			-309.20	0.00	0.00	-309.20
	CREDIT									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	B1150	BAXTER HEALTHCARE					1,281.64	0.00	0.00	1,281.64

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
107411250		11/30/20	11/19/20	12/14/20			235.50	0.00	0.00	235.50
	SUPPLIES									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC					235.50	0.00	0.00	235.50

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
120618		11/30/20	12/06/20	12/06/20			402.00	0.00	0.00	402.00
	TRANSFER	Pymt sent to MMC in error								
120618A		11/30/20	12/06/20	12/06/20			-925.84	0.00	0.00	-925.84
	CREDIT	Pymt refunded twice								
120618B		12/13/20	12/06/20	12/06/20			633.07	0.00	0.00	633.07
	TRANSFER	Pymt sent to MMC in error								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11832	BROADMOOR AT CREEKSIDE PARK					109.23	0.00	0.00	109.23

Vendor#	Vendor Name	Class	Pay Code
C1048	CALHOUN COUNTY	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
121918		12/10/20	12/19/20	12/19/20			128.00	0.00	0.00	128.00
	FUEL									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	C1048	CALHOUN COUNTY					128.00	0.00	0.00	128.00

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

120618	11/30/20	12/06/20	12/06/20	160.00	0.00	0.00	160.00 ✓	
INDIGENT COPAYS								
Vendor Totals Number	Name			Gross	Discount	No-Pay	Net	
11295	CALHOUN COUNTY INDIGENT ACCOUN			160.00	0.00	0.00	160.00	
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	
8001794059 ✓	11/30/20	11/10/20	12/10/20	187.20	0.00	0.00	187.20 ✓	
SUPPLIES Delivery 37.50								
Vendor Totals Number	Name			Gross	Discount	No-Pay	Net	
A1825	CARDINAL HEALTH 414,LLC			187.20	0.00	0.00	187.20	
Vendor# Vendor Name			Class	Pay Code				
E1270 CENTERPOINT ENERGY ✓			W					
Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
112918A	12/13/20	11/29/20	11/29/20	41.38	0.00	0.00	41.38 ✓	
GAS								
Vendor Totals Number	Name			Gross	Discount	No-Pay	Net	
E1270	CENTERPOINT ENERGY			41.38	0.00	0.00	41.38	
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	
0020	11/30/20	12/03/20	12/03/20	240.00	0.00	0.00	240.00 ✓	
SWINGBED SERVICES								
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				
11030 COMBINED INSURANCE ✓								
Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
120118	12/06/20	12/01/20	12/01/20	1,630.10	0.00	0.00	1,630.10 ✓	
INSURANCE								
Vendor Totals Number	Name			Gross	Discount	No-Pay	Net	
11030	COMBINED INSURANCE			1,630.10	0.00	0.00	1,630.10	
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	
MMC113018 ✓	11/30/20	11/30/20	11/30/20	164,650.35	0.00	0.00	164,650.35 ✓	
Vendor Totals Number	Name			Gross	Discount	No-Pay	Net	
10789	DISCOVERY MEDICAL NETWORK INC			164,650.35	0.00	0.00	164,650.35	
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	
121018	12/11/20	12/10/20	12/10/20	283.52	0.00	0.00	283.52	
TRAVEL Texas A:M Learning Session 12/4-12/7/18								
Vendor Totals Number	Name			Gross	Discount	No-Pay	Net	
10026	DONN STRINGO			283.52	0.00	0.00	283.52	
Vendor# Vendor Name			Class	Pay Code				
T0383 ERIN CLEVENGER ✓			W					
Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
121118	12/12/20	12/11/20	12/11/20	134.08	0.00	0.00	134.08 ✓	
TRAVEL Regional Healthcare Partnership 3 Learning Coll. 12/6/18								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	T0383	ERIN CLEVENGER				134.08	0.00	0.00	134.08

Vendor#	Vendor Name	Class	Pay Code
10689	FASTHEALTH CORPORATION ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
12A18MMC ✓		12/10/20	12/01/20	12/16/20			495.00	0.00	0.00	495.00 ✓
	WEBSITE									
11B18MMC ✓		12/12/20	11/01/20	11/16/20			995.00	0.00	0.00	995.00 ✓
	ENCRYPTION									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10689	FASTHEALTH CORPORATION	1,490.00	0.00	0.00	1,490.00

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
636962084 ✓		11/30/20	11/15/20	12/10/20			76.91	0.00	0.00	76.91 ✓
637692000	SHIPPING									
~~5559440~~		11/30/20	11/22/20	12/17/20			18.20	0.00	0.00	18.20 ✓
	SHIPPING									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	F1100	FEDERAL EXPRESS CORP.	95.11	0.00	0.00	95.11

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
120618		12/11/20	12/06/20	12/06/20			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
2606326 ✓		12/11/20	11/29/20	12/24/20			219.37	0.00	0.00	219.37 ✓
	SUPPLIES									
1178227 ✓		12/12/20	11/20/20	12/15/20			806.40	0.00	0.00	806.40 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	F1400	FISHER HEALTHCARE	1,025.77	0.00	0.00	1,025.77

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
0219434IN		12/12/20	12/03/20	01/03/20			530.00	0.00	0.00	530.00 ✓
	WATER TREATMENT									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	F1653	FORT BEND SERVICES, INC	530.00	0.00	0.00	530.00

Vendor#	Vendor Name	Class	Pay Code
11183	FRONTIER		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
111918		11/30/20	11/19/20	12/13/20			59.42	0.00	0.00	59.42 ✓
	FAXING									
112318		11/30/20	11/23/20	12/17/20			670.47	0.00	0.00	670.47 ✓
	FAXING									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11183	FRONTIER	729.89	0.00	0.00	729.89

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
	112818B		11/30/20	11/28/20	11/28/20		62.99	0.00	0.00	62.99 ✓
		TRANSFER Pymt sent to MMC in error								
	112818C		11/30/20	11/28/20	11/28/20		20,068.34	0.00	0.00	20,068.34 ✓
		TRANSFER Pymt sent to MMC in error								
	112818D		11/30/20	11/28/20	11/28/20		49,578.87	0.00	0.00	49,578.87 ✓
		TRANSFER Pymt sent to MMC in error								
	112818		11/30/20	11/28/20	11/28/20		657.63	0.00	0.00	657.63 ✓
		TRANSFER Pymt sent to MMC in error								
	112818A		11/30/20	11/28/20	11/28/20		638.48	0.00	0.00	638.48 ✓
		TRANSFER Pymt sent to MMC in error								
	120618		11/30/20	12/06/20	12/06/20		4,504.35	0.00	0.00	4,504.35 ✓
		TRANSFER Pymt sent to MMC in error								
	120618A		12/11/20	12/06/20	12/06/20		1,022.58	0.00	0.00	1,022.58 ✓
		TRANSFER Pymt sent to MMC in error								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11836	GOLDENCREEK HEALTHCARE				76,533.24	0.00	0.00	76,533.24

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
	9009829608 ✓		12/12/20	11/19/20	12/14/20		222.30	0.00	0.00	222.30 ✓
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		W1300	GRAINGER				222.30	0.00	0.00	222.30

Vendor#	Vendor Name				Class	Pay Code				
H1227	HEALTHSURE INSURANCE SERVICES ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	546 ✓		12/12/20	12/12/20	01/12/20		200.00	0.00	0.00	200.00 ✓
		RENEWAL CRESCENT								
	548 ✓		12/12/20	12/12/20	01/12/20		200.00	0.00	0.00	200.00 ✓
		RENEWAL BROADMOOR								
	550 ✓		12/12/20	12/12/20	01/12/20		1,000.00	0.00	0.00	1,000.00 ✓
		RENEWAL ASHFORD								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		H1227	HEALTHSURE INSURANCE SERVICES				1,400.00	0.00	0.00	1,400.00

Vendor#	Vendor Name				Class	Pay Code				
10298	HITACHI MEDICAL SYSTEMS ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	PJIN0121807 ✓		12/11/20	08/15/20	09/25/20		8,333.33	0.00	0.00	8,333.33 ✓
		SMA FEE								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10298	HITACHI MEDICAL SYSTEMS				8,333.33	0.00	0.00	8,333.33

Vendor#	Vendor Name				Class	Pay Code				
10341	JENISE SVETLIK ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	121018		12/11/20	12/10/20	12/10/20		283.52	0.00	0.00	283.52 ✓
		TRAVEL (Texas A&M Learning session 12/6-12/7/18)								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10341	JENISE SVETLIK				283.52	0.00	0.00	283.52

Vendor#	Vendor Name				Class	Pay Code				
L1001	LANDAUER INC				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	100633055	SUPPLIES	11/30/20	11/14/20	12/15/20		863.95	0.00	0.00	863.95
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		L1001	LANDAUER INC				863.95	0.00	0.00	863.95

Vendor#	Vendor Name				Class	Pay Code				
10578	LUMINANT ENERGY COMPANY LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	INV0550070	ENERGY	11/30/20	12/03/20	01/03/20		3,008.47	0.00	0.00	3,008.47
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10578	LUMINANT ENERGY COMPANY LLC				3,008.47	0.00	0.00	3,008.47

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
	120618	PAYROLL DED	12/11/20	12/06/20	12/06/20		1,295.00	0.00	0.00	1,295.00
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10972	M G TRUST				1,295.00	0.00	0.00	1,295.00

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
	IN00485169	SUPPLIES shipping 12.72	12/12/20	11/15/20	12/15/20		40.72	0.00	0.00	40.72
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M1511	MARKETLAB, INC				40.72	0.00	0.00	40.72

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
	1860990350	SUPPLIES	11/01/20	10/16/20	11/10/20		355.54	0.00	0.00	355.54
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2470	MEDLINE INDUSTRIES INC				355.54	0.00	0.00	355.54

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
	120618	PAYROLL DED	12/11/20	12/06/20	12/06/20		25.00	0.00	0.00	25.00
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10963	MEMORIAL MEDICAL CLINIC				25.00	0.00	0.00	25.00

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
	120118	INSURANCE	11/30/20	11/30/20	12/01/20		131.52	0.00	0.00	131.52
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2650	METLIFE				131.52	0.00	0.00	131.52

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

	112918		11/30/20	11/29/20	11/29/20	356.46	0.00	0.00	356.46
		PAYROLL DED							
	120618		12/11/20	12/06/20	12/06/20	199.15	0.00	0.00	199.15
		PAYROLL DED							
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		M2621	MMC AUXILIARY GIFT SHOP			555.61	0.00	0.00	555.61
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
	121018		12/11/20	12/10/20	12/10/20		62,135.72	0.00	0.00	62,135.72
		INSURANCE								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10810	MMC EMPLOYEE BENEFIT PLAN				62,135.72	0.00	0.00	62,135.72
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
	395152		12/11/20	12/03/20	12/03/20		111.24	0.00	0.00	111.24
		CREDIT CARD MACHINE FEES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2662	MMC VOLUNTEERS				111.24	0.00	0.00	111.24
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
	SC0333		11/30/20	11/26/20	12/06/20		84.30	0.00	0.00	84.30
		SERVICE CHARGE								
	SC0334		11/30/20	11/26/20	12/06/20		14.36	0.00	0.00	14.36
		INVENTORY								
	3558596		11/30/20	11/27/20	12/07/20		462.34	0.00	0.00	462.34
		INVENTORY								
	3558595		11/30/20	11/27/20	12/07/20		51.58	0.00	0.00	51.58
		INVENTORY								
	3558597		11/30/20	11/27/20	12/07/20		524.82	0.00	0.00	524.82
		INVENTORY								
	3564433		11/30/20	11/28/20	12/08/20		333.41	0.00	0.00	333.41
		INVENTORY								
	3564282		11/30/20	11/28/20	12/08/20		166.03	0.00	0.00	166.03
		INVENTORY								
	3564435		11/30/20	11/28/20	12/08/20		185.93	0.00	0.00	185.93
		INVENTORY								
	3564434		11/30/20	11/28/20	12/08/20		73.47	0.00	0.00	73.47
		INVENTORY								
	3570547		11/30/20	11/29/20	12/09/20		968.18	0.00	0.00	968.18
		INVENTORY								
	3570546		11/30/20	11/29/20	12/09/20		287.83	0.00	0.00	287.83
		INVENTORY								
	3570548		11/30/20	11/29/20	12/09/20		258.49	0.00	0.00	258.49
		INVENTORY								
	3570549		11/30/20	11/29/20	12/09/20		110.79	0.00	0.00	110.79
		INVENTORY								
	3568013		11/30/20	11/29/20	12/09/20		102.32	0.00	0.00	102.32
		INVENTORY								

3574873		11/30/20	11/30/20	12/10/20	7.32	0.00	0.00	7.32
3574874	INVENTORY	11/30/20	11/30/20	12/10/20	165.10	0.00	0.00	165.10
3574875	INVENTORY	11/30/20	11/30/20	12/10/20	494.15	0.00	0.00	494.15
3593881	INVENTORY	12/10/20	12/05/20	12/15/20	26.10	0.00	0.00	26.10
3593883	INVENTORY	12/10/20	12/05/20	12/15/20	407.16	0.00	0.00	407.16
3593880	INVENTORY	12/10/20	12/05/20	12/15/20	128.85	0.00	0.00	128.85
3594041	INVENTORY	12/10/20	12/05/20	12/15/20	619.53	0.00	0.00	619.53
3593882	INVENTORY	12/10/20	12/05/20	12/15/20	1,952.26	0.00	0.00	1,952.26
3592029	INVENTORY	12/10/20	12/05/20	12/15/20	47.78	0.00	0.00	47.78
3600203	INVENTORY	12/10/20	12/06/20	12/16/20	155.37	0.00	0.00	155.37
3600205	INVENTORY	12/10/20	12/06/20	12/16/20	108.89	0.00	0.00	108.89
3600202	INVENTORY	12/10/20	12/06/20	12/16/20	196.61	0.00	0.00	196.61
3600204	INVENTORY	12/10/20	12/06/20	12/16/20	480.14	0.00	0.00	480.14
3597279	INVENTORY	12/10/20	12/06/20	12/16/20	20.08	0.00	0.00	20.08
3582805	INVENTORY	12/11/20	12/03/20	12/13/20	372.45	0.00	0.00	372.45
3582803	INVENTORY	12/11/20	12/03/20	12/13/20	44.29	0.00	0.00	44.29
3282804	INVENTORY	12/11/20	12/03/20	12/13/20	290.38	0.00	0.00	290.38
3582802	INVENTORY	12/11/20	12/03/20	12/13/20	89.64	0.00	0.00	89.64
3589620	INVENTORY	12/11/20	12/04/20	12/14/20	3,173.34	0.00	0.00	3,173.34
3589618	INVENTORY	12/11/20	12/04/20	12/14/20	59.76	0.00	0.00	59.76
3585894	INVENTORY	12/11/20	12/04/20	12/14/20	78.15	0.00	0.00	78.15
3589619	INVENTORY	12/11/20	12/04/20	12/14/20	2,911.17	0.00	0.00	2,911.17
3589621	INVENTORY	12/11/20	12/04/20	12/14/20	1.93	0.00	0.00	1.93
2355	INVENTORY	12/11/20	12/06/20	12/16/20	-5.00	0.00	0.00	-5.00
2357	CREDIT	12/11/20	12/06/20	12/16/20	-5.00	0.00	0.00	-5.00
1717	CREDIT	12/11/20	12/06/20	12/16/20	-4.99	0.00	0.00	-4.99
	CREDIT							

1864		12/11/20	12/06/20	12/16/20	-5.00	0.00	0.00	-5.00
	CREDIT							
2358		12/11/20	12/06/20	12/16/20	-5.00	0.00	0.00	-5.00
	CREDIT							
2012		12/11/20	12/06/20	12/16/20	-4.99	0.00	0.00	-4.99
	CREDIT							
1863		12/11/20	12/06/20	12/16/20	-2.50	0.00	0.00	-2.50
	CREDIT							
2356		12/11/20	12/06/20	12/16/20	-4.99	0.00	0.00	-4.99
	CREDIT							
2359		12/11/20	12/06/20	12/16/20	-4.99	0.00	0.00	-4.99
	CREDIT							
1862		12/11/20	12/06/20	12/16/20	-0.01	0.00	0.00	-0.01
	CREDIT							
1716		12/11/20	12/06/20	12/16/20	-4.99	0.00	0.00	-4.99
	CREDIT							
2013		12/11/20	12/06/20	12/16/20	-4.25	0.00	0.00	-4.25
	CREDIT							
2011		12/11/20	12/06/20	12/16/20	-4.99	0.00	0.00	-4.99
	CREDIT							
1718		12/11/20	12/06/20	12/16/20	-5.00	0.00	0.00	-5.00
	CREDIT							
2360		12/11/20	12/06/20	12/16/20	-5.00	0.00	0.00	-5.00
	CREDIT							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC			15,387.60	0.00	0.00	15,387.60

Vendor#	Vendor Name	Class	Pay Code
10188	NATUS MEDICAL INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1040747650		12/12/20	11/06/20	12/01/20		431.05	0.00	0.00	431.05
	SUPPLIES Freight 32.05								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10188	NATUS MEDICAL INC				431.05	0.00	0.00	431.05

Vendor#	Vendor Name	Class	Pay Code
11163	NINA GREEN		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
121018		12/11/20	12/10/20	12/10/20		283.52	0.00	0.00	283.52
	TRAVEL Texas Aim Learning Session 12/4-12/7/18								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11163	NINA GREEN				283.52	0.00	0.00	283.52

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
121118		12/11/20	12/11/20	12/11/20		2,385.00	0.00	0.00	2,385.00
	CONTRACT EMPLOYEE								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11069	PABLO GARZA				2,385.00	0.00	0.00	2,385.00

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
70728798		11/30/20	11/22/20	12/11/20		0.00	0.00	0.00	0.00

CREDIT

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

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
120118		11/30/20	12/01/20	12/01/20			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
10645	REVISTA de VICTORIA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
11201821		12/06/20	11/19/20				240.00	0.00	0.00	240.00

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
S1001	SANOFI PASTEUR INC	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
911664389		11/30/20	11/19/20	01/01/20			1,778.94	0.00	0.00	1,778.94
	INVENTORY									
911664388		11/30/20	11/19/20	12/19/20			2,035.43	0.00	0.00	2,035.43
	INVENTORY									
911193626		12/10/20	10/02/20	11/02/20			4,070.86	0.00	0.00	4,070.86
	INVENTORY									
911315450		12/10/20	11/14/20	12/01/20			4,070.86	0.00	0.00	4,070.86
	INVENTORY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S1001	SANOFI PASTEUR INC	11,956.09	0.00	0.00	11,956.09

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
121118		12/11/20	12/01/20	12/11/20			405.35	0.00	0.00	405.35

CONTRACT EMPLOYEE

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	K0536	SHIRLEY KARNEI	405.35	0.00	0.00	405.35

Vendor#	Vendor Name	Class	Pay Code
10699	SIGN AD, LTD.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
232344		12/10/20	12/01/20	12/11/20			775.00	0.00	0.00	775.00

AD

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10699	SIGN AD, LTD.	775.00	0.00	0.00	775.00

Vendor#	Vendor Name	Class	Pay Code
11828	SOLERA WEST HOUSTON		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
112918		12/13/20	11/29/20	11/29/20			3,600.00	0.00	0.00	3,600.00

TRANSFER Pymt sent to mine in error

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11828	SOLERA WEST HOUSTON	3,600.00	0.00	0.00	3,600.00

Vendor#	Vendor Name	Class	Pay Code

12256 TEXAS HHSC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
120618A		12/11/20	12/06/20	12/06/20		340.34	0.00	0.00	340.34
	REIMBURSEMENT								
120618B		12/13/20	12/06/20	12/06/20		108.57	0.00	0.00	108.57
	REIMBURSEMENT								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12256	TEXAS HHSC	448.91	0.00	0.00	448.91

Vendor# Vendor Name — Class — Pay Code

11222 THE TRIBUNE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
217871018		11/30/20	10/31/20			112.00	0.00	0.00	112.00
	AD								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11222	THE TRIBUNE	112.00	0.00	0.00	112.00

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
9255239		12/12/20	12/04/20	12/19/20		64.97	0.00	0.00	64.97
	UNIFORMS R. MONDAY								
9255238		12/12/20	12/04/20	12/19/20		343.89	0.00	0.00	343.89
	UNIFORM A. KEY								
9255255		12/12/20	12/04/20	12/19/20		207.42	0.00	0.00	207.42
	UNIFORM								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1056	UNIFORM ADVANTAGE	616.28	0.00	0.00	616.28

Vendor# Vendor Name — Class — Pay Code

U2000 US POSTAL SERVICE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
120618		12/11/20	12/06/20	12/06/20		2,200.00	0.00	0.00	2,200.00
	POSTAGE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U2000	US POSTAL SERVICE	2,200.00	0.00	0.00	2,200.00

Vendor# Vendor Name — Class — Pay Code

10793 WAGEWORKS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
120618		12/11/20	12/06/20	12/06/20		2,329.33	0.00	0.00	2,329.33
	PAYROLL DED								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10793	WAGEWORKS	2,329.33	0.00	0.00	2,329.33

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	384,050.74	0.00	0.00	384,050.74

APPROVED ON
DEC 13 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 178675-178734

RUN DATE:12/17/18 MEMORIAL MEDICAL CENTER PAGE 1
TIME:12:56 CHECK REGISTER GLCKREG
12/19/18 THRU 12/19/18

BANK	CODE	NUMBER	DATE	AMOUNT	PAYEE
	A/P	178667	12/19/18	23.50	DONN STRINGO
	A/P	178668	12/19/18	500.00	DR. WILLIAM CROWLEY
	A/P	178669	12/19/18	39.20	JAMIE GRASSE
	A/P	178670	12/19/18	70.50	JERRY PICKETT
	A/P	178671	12/19/18	7.99	PENNY REYES
	A/P	178672	12/19/18	33.90	TERESA MILLER
	A/P	178673	12/19/18	4,368.00	TEXAS TECH UNIVERSITY HEALTH
	A/P	178674	12/19/18	3,235.86	WILLIAM CROWLEY III, DO
	A/P	178675	12/19/18	558.00	ABILITY NETWORK (SHIFTHOUND)
	A/P	178676	12/19/18	45.90	ACE HARDWARE 15521
	A/P	178677	12/19/18	923.65	ADVANCED COMMUNICATIONS
	A/P	178678	12/19/18	215.00	APIC
	A/P	178679	12/19/18	21.99	AQUA BEVERAGE COMPANY
	A/P	178680	12/19/18	5,914.21	ARTHREX, INC
	A/P	178681	12/19/18	5,383.00	ASCEND NATIONAL LLC
	A/P	178682	12/19/18	1,281.64	BAXTER HEALTHCARE
	A/P	178683	12/19/18	235.50	BECKMAN COULTER INC
	A/P	178684	12/19/18	109.23	BROADMOOR AT CREEKSIDE PARK
	A/P	178685	12/19/18	128.00	CALHOUN COUNTY
	A/P	178686	12/19/18	160.00	CALHOUN COUNTY INDIGENT ACCOUN
	A/P	178687	12/19/18	187.20	CARDINAL HEALTH 414,LLC
	A/P	178688	12/19/18	41.38	CENTERPOINT ENERGY
	A/P	178689	12/19/18	240.00	CHRIS KOVAREK
	A/P	178690	12/19/18	1,630.10	COMBINED INSURANCE
	A/P	178691	12/19/18	164,650.35	DISCOVERY MEDICAL NETWORK INC
	A/P	178692	12/19/18	283.52	DONN STRINGO
	A/P	178693	12/19/18	134.08	ERIN CLEVENGER
	A/P	178694	12/19/18	1,490.00	FASTHEALTH CORPORATION
	A/P	178695	12/19/18	95.11	FEDERAL EXPRESS CORP.
	A/P	178696	12/19/18	75.00	FIRST CLEARING
	A/P	178697	12/19/18	1,025.77	FISHER HEALTHCARE
	A/P	178698	12/19/18	530.00	FORT BEND SERVICES, INC
	A/P	178699	12/19/18	729.89	FRONTIER
	A/P	178700	12/19/18	76,533.24	GOLDENCREEK HEALTHCARE
	A/P	178701	12/19/18	222.30	GRAINGER
	A/P	178702	12/19/18	1,400.00	HEALTHSURE INSURANCE SERVICES
	A/P	178703	12/19/18	8,333.33	HITACHI MEDICAL SYSTEMS
	A/P	178704	12/19/18	283.52	JENISE SVETLIK
	A/P	178705	12/19/18	863.95	LANDAUER INC
	A/P	178706	12/19/18	3,008.47	LUMINANT ENERGY COMPANY LLC
	A/P	178707	12/19/18	1,295.00	M G TRUST
	A/P	178708	12/19/18	40.72	MARKETLAB, INC
	A/P	178709	12/19/18	355.54	MEDLINE INDUSTRIES INC
	A/P	178710	12/19/18	25.00	MEMORIAL MEDICAL CLINIC
	A/P	178711	12/19/18	131.52	METLIFE
	A/P	178712	12/19/18	555.61	MMC AUXILIARY GIFT SHOP
	A/P	178713	12/19/18	62,135.72	MMC EMPLOYEE BENEFIT PLAN
	A/P	178714	12/19/18	111.24	MMC VOLUNTEERS
	A/P	178715	12/19/18	.00	VOIDED
	A/P	178716	12/19/18	.00	VOIDED

reissued o/s checks

Payables

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	178717	12/19/18	.00	VOIDED
A/P	178718	12/19/18	15,387.60	MORRIS & DICKSON CO, LLC
A/P	178719	12/19/18	431.05	NATUS MEDICAL INC
A/P	178720	12/19/18	283.52	NINA GREEN
A/P	178721	12/19/18	2,385.00	PABLO GARZA
A/P	178722	12/19/18	1,496.93	PRINCIPAL LIFE
A/P	178723	12/19/18	240.00	REVISTA de VICTORIA
A/P	178724	12/19/18	11,956.09	SANOFI PASTEUR INC
A/P	178725	12/19/18	405.35	SHIRLEY KARNEI
A/P	178726	12/19/18	775.00	SIGN AD, LTD.
A/P	178727	12/19/18	3,600.00	SOLERA WEST HOUSTON
A/P	178728	12/19/18	1,020.00	STORAWAY & STASH-AWAY critical
A/P	178729	12/19/18	2,700.00	TCEQ critical
A/P	178730	12/19/18	448.91	TEXAS HHSC
A/P	178731	12/19/18	112.00	THE TRIBUNE
A/P	178732	12/19/18	616.28	UNIFORM ADVANTAGE
A/P	178733	12/19/18	2,200.00	US POSTAL SERVICE
A/P	178734	12/19/18	2,329.33	WAGEWORKS
TOTALS:			396,049.69	

o/s checks
re-issued — 8,278.95 +
payables — 384,050.74 +
critical — 2,700.00 +
critical — 1,020.00 +
396,049.69 *

McKESSON

Company: 8000

STATEMENT

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 12/14/2018 Page: 002

DC: 8115

Territory:

Customer: 632536
Date: 12/15/2018

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

As of: 12/14/2018 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 **PLEASE CHECK ANY**
Date: 12/15/2018 **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	

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 2,050.73 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 12/18/2018,
Pay This Amount: 2,009.71 USD ✓

If Paid After 12/18/2018,
Pay this Amount: 2,050.73 USD

Due If Paid On Time:
USD 2,009.71

Disc lost if paid late:
41.02

Due If Paid Late:
USD 2,050.73

Check #1012
GL Acct. #60310000

APPROVED
ON
DEC 17 2018 CK#
001012
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

2,000.16 +
9.55 +
2,009.71 *

McKESSON

STATEMENT

Company: 8000

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

As of: 12/14/2018 Page: 001

DC: 8115

Territory: 400

Customer: 256342
Date: 12/15/2018

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

As of: 12/14/2018 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 12/15/2018 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											
12/10/2018	12/18/2018	7106996380	1207180322-00	115Invoice	9.32	465.90		456.58		7106996380	
12/10/2018	12/18/2018	7106996381	0959800098	115Invoice	0.03	1.58		1.55		7106996381	
12/11/2018	12/18/2018	7107266029	0959800099	115Invoice	0.01	0.63		0.62		7107266029	
12/11/2018	12/18/2018	7107266030	1210180256-00	115Invoice	1.49	74.46		72.97		7107266030	
12/11/2018	12/18/2018	7107266032	1210180923-00	115Invoice	0.21	10.68		10.47		7107266032	
12/12/2018	12/18/2018	7107508390	0959800100	115Invoice	0.01	0.32		0.31		7107508390	
12/13/2018	12/18/2018	7107731659	0959800101	115Invoice	10.98	548.77		537.79		7107731659	
12/13/2018	12/18/2018	7107731660	1212180133-00	115Invoice	7.28	363.76		356.48		7107731660	
12/14/2018	12/18/2018	7107966190	0959800102	115Invoice	7.87	393.60		385.73		7107966190	
12/14/2018	12/18/2018	7107966191	1212180545-00	115Invoice	3.63	181.29		177.66		7107966191	

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: 2,040.99 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 1,194.05
12/10/2018

If Paid By 12/18/2018,
Pay This Amount: 2,000.16 USD

If Paid After 12/18/2018,
Pay this Amount: 2,040.99 USD

Due If Paid On Time:
USD 2,000.16

Disc lost if paid late:
40.83

Due If Paid Late:
USD 2,040.99

APPROVED
ON
DEC 17 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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: 12/14/2018 Page: 001

DC: 8115

Territory: 400

Customer: 190813
Date: 12/15/2018

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

As of: 12/14/2018 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 12/15/2018 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											
12/12/2018	12/18/2018	7107518427	2017006176	115Invoice	0.19	9.74		9.55		7107518427	

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: 9.74 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 1,194.05
12/10/2018

If Paid By 12/18/2018,
Pay This Amount: 9.55 USD ✓

If Paid After 12/18/2018,
Pay this Amount: 9.74 USD

Due If Paid On Time:
USD 9.55 ✓

Disc lost if paid late: 0.19

Due If Paid Late:
USD 9.74

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ON
DEC 17 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Ø

RUN DATE:12/18/18 MEMORIAL MEDICAL CENTER PAGE 1
TIME:14:28 CHECK REGISTER GLCKREG
12/18/18 THRU 12/18/18

BANK--CHECK----------

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P *	001012	12/18/18	2,009.71	MCKESSON
A/P	178735	12/18/18	.00	SARA BLEDSOE
TOTALS:			2,009.71	

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ON

DEC 19 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

IBC Outstanding Checks to be Reissued Through AP

	pt refunds
	vendor
	former employee
	current employee

CK #	CK DATE	AMOUNT	VENDOR/EMPLOYEE	NOTES	STATUS	OUTSTANDING	
154802	10/03/13	546.00	TEXAS TECH UNIVERSITY H	create invoice 103900	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
154979	10/16/13	546.00	TEXAS TECH UNIVERSITY H	create invoice 131001	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
155296	11/15/13	546.00	TEXAS TECH UNIVERSITY H	131102	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
156066	01/24/14	546.00	TEXAS TECH UNIVERSITY HEAI	140104 & 140104-1	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
156216	02/10/14	546.00	TEXAS TECH UNIVERSITY HEAI	140205	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
156526	03/07/14	546.00	TEXAS TECH UNIVERSITY HEAI	140306	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
156896	04/23/14	546.00	TEXAS TECH UNIVERSITY HEAI	140407	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
157038	05/05/14	546.00	TEXAS TECH UNIVERSITY HEAI	140508	Not Cleared	546.00	TO BE REISSUED UNDER PROSPERITY
155509	11/25/13	33.90	TERESA MILLER	18451	Not Cleared	33.90	TO BE REISSUED UNDER PROSPERITY
163282	09/23/15	70.50	JERRY PICKETT	20358 & 20359	Not Cleared	70.50	TO BE REISSUED UNDER PROSPERITY
158530	08/22/14	23.50	DONN STRINGO	19230	Not Cleared	23.50	TO BE REISSUED UNDER PROSPERITY
158530	08/22/14	23.50	DONN STRINGO	19230	Not Cleared	23.50	TO BE REISSUED UNDER PROSPERITY > duplicate
155185	10/31/13	91.28	DR. WILLIAM J. CROWLEY	create invoice	Not Cleared	91.28	TO BE REISSUED UNDER PROSPERITY
156051	01/24/14	7.99	PENNY REYES	18585	Not Cleared	7.99	TO BE REISSUED UNDER PROSPERITY
156535	03/07/14	39.20	JAMIE GRASSE	18728	Not Cleared	39.20	TO BE REISSUED UNDER PROSPERITY
164604	01/13/16	2,991.59	WILLIAM J CROWLEY DO	create invoice	Not Cleared	2,991.59	TO BE REISSUED UNDER PROSPERITY
169822	02/09/17	500.00	DR. WILLIAM CROWLEY	21689	Not Cleared	500.00	TO BE REISSUED UNDER PROSPERITY
171287	05/18/17	152.99	DOCTOR WILLIAM CROWLEY	create invoice	Not Cleared	152.99	TO BE REISSUED UNDER PROSPERITY
					total	8,302.45	$8,278.95

APPROVED
ON
DEC 17 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#
178667-
178674

AmerisourceBergen

STATEMENT

Number: 57487748 Date: 12-14-2018 1 of 1

Division
AMERISOURCEBERGEN DRUG CORP
12727 WEST AIRPORT BLVD
SUGAR LAND TX 77478-6101
866-451-9655

Customer
WALGREENS #12494 340B
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2509
ACCOUNT: 100135284 / 037028186

Remit To
AMERISOURCEBERGEN DRUG CORP
PO Box 905223
CHARLOTTE NC 28290-5223

Summary

Not Yet Due:	0.00
Current:	2,133.62
Past Due:	33.28
Total Due:	2,166.90
Account Balance:	2,166.90

Account Activity

Activity Date	Due Date	Reference Number	Purchase Order Number	Activity Type	Amount
12-07-2018	12-14-2018	802166402		Late Charge fee Do Not Pay	33.28
12-10-2018	12-21-2018	3017010970	140611	Invoice	75.71
12-10-2018	12-21-2018	3017010971	140612	Invoice	0.08
12-10-2018	12-21-2018	3017010972	140613	Invoice	34.53
12-10-2018	12-21-2018	3017010973	140614	Invoice	1.55
12-12-2018	12-21-2018	3017132348	140814	Invoice	1,059.90
12-12-2018	12-21-2018	3017132349	140815	Invoice	132.51
12-12-2018	12-21-2018	3017132660	140816	Invoice	0.15
12-12-2018	12-21-2018	3017132661	140818	Invoice	0.40
12-12-2018	12-21-2018	3017132662	140819	Invoice	0.62
12-12-2018	12-21-2018	3017132663	140820	Invoice	38.33
12-12-2018	12-21-2018	3017132664	140821	Invoice	177.94
12-12-2018	12-21-2018	3017132665	140822	Invoice	0.10
12-12-2018	12-21-2018	3017132666	140823	Invoice	280.44
12-12-2018	12-21-2018	3017132667	140817	Invoice	83.20
12-14-2018	12-21-2018	3017234853	140852	Invoice	64.55
12-14-2018	12-21-2018	3017234854	140853	Invoice	11.40
12-14-2018	12-21-2018	3017234855	140855	Invoice	132.51
12-14-2018	12-21-2018	3017234856	140857	Invoice	7.02
12-14-2018	12-21-2018	3017234857	140858	Invoice	0.61
12-14-2018	12-21-2018	3017234858	140859	Invoice	0.40
12-14-2018	12-21-2018	3017234859	140856	Invoice	31.67

Thank You for Your Payment

Date	Payment Number	Amount
12-14-2018		(5,341.86)

Reminders

Due Date	Amount
12-14-2018	33.28
12-21-2018	2,133.62
Total Due:	2,166.90

Terms:
Monday - Friday due in 7 days

Check #1006

GL # Acct. # 60310000

12/17/2018
Per Stephanie @ Amerisource, late charge fee in the amount of $33.28 will be waived.
Andy D.

APPROVED ON
DEC 17 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

12/17/2018
11:02

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
T1762	TCEQ	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
121218	PENALTY	12/17/20	12/12/20	12/12/20		2,700.00	0.00	0.00	2,700.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	T1762	TCEQ	2,700.00	0.00	0.00	2,700.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,700.00	0.00	0.00	2,700.00

APPROVED
ON
DEC 17 2018 CK# 178729

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

12/17/2018 MEMORIAL MEDICAL CENTER 0
11:01 AP Open Invoice List ap_open_invoice.template
Dates Through:

Vendor#	Vendor Name	Class	Pay Code
11640	STORAWAY & STASH-AWAY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
DEC18-MAY2019	RENT FOR STORAGE	12/17/20	12/17/20	12/17/20			510.00	0.00	0.00	510.00
JUN-NOV2018	RENT FOR STORAGE	12/17/20	12/17/20	12/17/20			510.00	0.00	0.00	510.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11640	STORAWAY & STASH-AWAY	1,020.00	0.00	0.00	1,020.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,020.00	0.00	0.00	1,020.00

APPROVED ON
DEC 17 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 178728

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"	★	12	
	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			
☐	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★	$ 150.30	#
	"1 TO CONFIRM"		1	
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0	$ 81.28	#
	"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 19.02	#
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 50.00	#
		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	13.75	N	N	N	N		120.45
C	CALL PAY	8.00	N	N	N	N		16.00
E	EXTRA WAGES		N	N	N	N		138.08
P	PAID-TIME-OFF	12.00	N	N	N	N		381.00

Deductions Summary

Code	Amount	Code	Amount	Code	Amount
A/R		A/R2		A/R3	
ADVANC		AWARDS		BOOTS	
CAFE H		CAFE-1		CAFE-2	
CAFE-3		CAFE-4		CAFE-5	
CAFE-C		CAFE-D		CAFE-F	
CAFE-H		CAFE-I		CAFE-L	
CAFE-P		CANCER		CHILD	
CLINIC		COMBIN		CREDUN	
DD ADV		DENTAL		DEP-LF	
DIS-LF		EAT		EATCSH	
FEDTAX	50.00	FICA-M	9.49	FICA-O	40.64
FIRSTC		FLEX S		FLX PE	
FORT D		FUTA		GIFT S	
GRANT		GRP-IN		GTL	
HOSP-I		ID TFT		LEAF	
LEGAL		MASA		MEALS	
MISC		MISC/		MMCSHR	
OTHER		PHI		PHI***	
PR FIN		RELAY		REPAY	
SAMS		SCRUBS		SIGNON	
ST-TX		STONDF		STONE	
STONE2		STUDEN		TSA-1	
TSA-2		TSA-C		TSA-P	
TSA-R	45.89	TUTION		UNIFOR	
UW/HOS					

Grand Totals: 33.75 (Gross: 655.53 Deductions: 146.02 Net: 509.51)

Checks Count:- FT 4 PT Other 1 Female 3 Male 2 Credit OverAmt ZeroNet Term Total: 5

ok mm CO
12-17-18

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --December 10, 2018 - December 16, 2018

Date	Bank Description	MMC Notes	Amount
12/10/2018	ACH Payment PAY PLUS ACHTRANS 452579291 101000694891996	- 3rd Party Payor Fee	1.56
12/10/2018	ACH Payment TSYS/TRANSFIRST CHARGEBACK 41399801332401 61		20.00
12/10/2018	ACH Payment TSYS/TRANSFIRST CHARGEBACK 41399801332401 61		90.00
12/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982541616 6110	- Credit Card Processing Fee	273.64
12/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982589946 6110	- Credit Card Processing Fee	129.00
12/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332385 6110	- Credit Card Processing Fee	114.96
12/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332393 6110	- Credit Card Processing Fee	1,657.66
12/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332401 6110	- Credit Card Processing Fee	931.98
12/10/2018	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332419 6110	- Credit Card Processing Fee	64.15
12/11/2018	ACH Payment MCKESSON DRUG AUTO ACH ACH03658706 910000118	- 340B Drug Program Expense	1,194.05 *
12/11/2018	ACH Payment PAY PLUS ACHTRANS 452579291 101000695667169	- 3rd Party Payor Fee	13.15
12/13/2018	ACH Payment PAY PLUS ACHTRANS 452579291 101000697123157	- 3rd Party Payor Fee	0.41
12/14/2018	ACH Payment AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	5,341.86 *
12/14/2018	ACH Payment PAY PLUS ACHTRANS 452579291 101000697846055	- 3rd Party Payor Fee	0.86
12/14/2018	ACH Payment PAYROLL ONLINE TRF PAYROLL 113122651634275	- 3rd Party Payor Fee	278,429.61 *
			288,262.89

Diane Moore, CFO

December 17, 2018

Diane Moore, CFO
Memorial Medical Center
* Approved 12/12/18 CC

PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

Date	Description	MMC Notes	Amount
12/19/2018	ACH Payment WEBFILE TAX PYMT DD	- Sales Tax	1,454.51
			1,454.51

Diane C. Moore, CFO
Memorial Medical Center

+ 1.56 + 13.15 + 0.41 + 0.86 + 15.98 *
Pay Plus

+ 20.00 + 90.00 + 273.64 + 129.00 + 114.96 + 1,657.66 + 931.98 + 64.15 + 3,281.39 *
Credit Card: Visa Fus

+ 3,281.39 + 15.98 * 3,297.37

288,262.89 + 278,429.61 - 5,341.86 - 1,194.05 * 3,297.37

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
12/17/2018

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Ck to MMC for QIPP	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens		69,212.31 ✓	69,007.05 ✓	198,462.48	-	-	-	198,667.74 ✓	198,462.48
							Bank Balance	198,667.74 ✓	
							Variance	-	
							Leave in Balance	100.00	
							MMC Portion QIPP 1	-	
							MMC Portion QIPP 1	-	
							MMC Portion QIPP 2	-	
							MMC Portion QIPP 3	-	
							October Bank Interest	54.63 ✓	
							November Bank Interest	50.63 ✓	
							December Bank Interest	-	
							Adjust Balance/Transfer Amt	198,462.48 ✓	

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA .
Acco

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Ck to MMC for QIPP	Pending Deposits	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at W Hston	3	79,314.71 ✓	79,083.46 ✓	91,455.67	-			91,686.92 ✓	91,455.67
							Bank Balance	91,686.92 ✓	
							Variance	-	
							Leave in Balance	100.00	
							MMC Portion QIPP 1	-	
							MMC Portion QIPP 2	-	
							MMC Portion QIPP 3	-	
							October Bank Interest	65.42 ✓	
							November Bank Interest	65.83 ✓	
							December Bank Interest	-	
							Adjust Balance/Transfer Amt	91,455.67 ✓	
Crescent		82,621.96 ✓	82,435.56 ✓	73,454.79	-		-	73,641.19 ✓	73,454.79
							Bank Balance	73,641.19	
							Variance	-	
							Leave in Balance	100.00	
							MMC Portion QIPP 1	-	
							MMC Portion QIPP 2	-	
							MMC Portion QIPP 3	-	
							October Bank Interest	40.83 ✓	
							November Bank Interest	45.57 ✓	
							December Bank Interest	-	
							Adjust Balance/Transfer Amt	73,454.79 ✓	
Broadmoor		42,255.38 ✓	42,050.56 ✓	137,429.36	-			137,634.18 ✓	137,429.36
							Bank Balance	137,634.18 ✓	
							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	40.67 ✓	
							December Bank Interest	0	
							Adjust Balance/Transfer Amt	137,429.36 ✓	
Fort Bend		14,440.27 ✓	12,590.13 ✓	80,761.66	-		-	82,611.80 ✓	82,470.56
							Bank Balance	82,611.80	
							Variance	-	
							Leave in Balance	100.00	
							MMC Portion QIPP 1	-	
							MMC Portion QIPP 1	-	
							MMC Portion QIPP 2	-	
							MMC Portion QIPP 3	-	
							October Bank Interest	21.68 ✓	
							November Bank Interest	19.56 ✓	
							December Bank Interest	-	
							Adjust Balance/Transfer Amt	82,470.56 ✓	
							TOTAL TRANSFERS		583,272.86

APPROVED
ON
DEC 17 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

198,462.48 +
91,455.67 +
73,454.79 +
137,429.36 +
82,470.56 +
583,272.86 *

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

Approved:
Diane Moore, CFO 12/17/2018

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.

Ashford Gardens

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP TI	NH PORTION
12/14/2018	Check # 41	30,791.46					-	-
12/14/2018	Deposit		85,193.74				-	85,193.74
12/14/2018	ACH Deposit Amerigroup TX5C HCCLAIMPMT 3388381787 111000		795.76				-	795.76
12/14/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		459.87				-	459.87
12/14/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		377.46				-	377.46
12/13/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		10,715.80				-	10,715.80
12/13/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		26,842.83				-	26,842.83
12/12/2018	CM Wire Domestic WIRE OUT ASHFORD HEALTH CARE CENTER LTD	38,215.59					-	-
12/12/2018	ACH Deposit Amerigroup TX5C HCCLAIMPMT 3388204675 111000		33,376.22				-	33,376.22
12/12/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		33,909.81				-	33,909.81
12/11/2018	ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2		6,291.30				-	6,291.30
12/10/2018	ACH Deposit Amerigroup TX5C HCCLAIMPMT 3388027666 111000		499.69				-	499.69
							-	-
		69,007.05	198,462.48	-	-	-	-	198,462.48

Broadmoor

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP TI	NH PORTION
12/14/2018	Check # 10	5,996.97					-	-
12/14/2018	Deposit		68,715.99				-	68,715.99
12/14/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		1,827.94				-	1,827.94
12/14/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		17,318.67				-	17,318.67
12/13/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		4,020.96				-	4,020.96
12/13/2018	ACH Deposit AARP Supplementa HCCLAIMPMT 746003411 124384		167.50				-	167.50
12/12/2018	CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	36,053.59					-	-
12/12/2018	ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2		2,064.83				-	2,064.83
12/11/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		3,240.69				-	3,240.69
12/11/2018	ACH Deposit HUMANA INS CO EFPAYMENT 390861 8300005595865		3,108.23				-	3,108.23
12/10/2018	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		26,847.47				-	26,847.47
12/10/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		10,117.08				-	10,117.08
							-	-
		42,050.56	137,429.36	-	-	-	-	137,429.36

Crescent

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP TI	NH PORTION
12/14/2018	Check # 37	5,961.90					-	-
12/14/2018	Deposit		34,852.52				-	34,852.52
12/13/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		9,179.79				-	9,179.79
12/12/2018	CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	76,473.66					-	-
12/12/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		9,362.40				-	9,362.40
12/12/2018	ACH Deposit HUMANA INS CO EFPAYMENT 390864 8300005885696		827.84				-	827.84
12/11/2018	ACH Deposit HUMANA INS CO EFPAYMENT 390864 8300005591890		13,793.19				-	13,793.19
12/11/2018	ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2		2,479.05				-	2,479.05
12/10/2018	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		2,960.00				-	2,960.00
							-	-
		82,435.56	73,454.79	-	-	-	-	73,454.79

Fort Bend

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP TI	NH PORTION
12/14/2018	Check # 35	12,590.13					-	-
12/14/2018	Deposit		62,517.13				-	62,517.13
12/14/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		10,269.45				-	10,269.45
12/13/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		7,414.94				-	7,414.94
12/13/2018	ACH Deposit HUMANA INS CO EFPAYMENT 390863 8300005153091		419.28				-	419.28
12/12/2018	ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2		140.86				-	140.86
							-	-
		12,590.13	80,761.66	-	-	-	-	80,761.66

Solera at West Houston

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP TI	NH PORTION
12/14/2018	Check # 35	8,767.50					-	-
12/14/2018	Deposit		49,034.93				-	49,034.93
12/14/2018	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		750.00				-	750.00
12/14/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		3,145.55				-	3,145.55
12/13/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		2,479.05				-	2,479.05
12/13/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		9,682.90				-	9,682.90
12/13/2018	ACH Deposit HUMANA INS CO EFPAYMENT 390862 8300005153091		4,853.98				-	4,853.98
12/12/2018	CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	70,315.96					-	-
12/12/2018	ACH Deposit Amerigroup TX5C HCCLAIMPMT 3388204676 111000		7,405.13				-	7,405.13
12/12/2018	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		4,433.70				-	4,433.70
12/10/2018	ACH Deposit Amerigroup TX5C HCCLAIMPMT 3388027667 111000		1,155.17				-	1,155.17
12/10/2018	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		8,190.00				-	8,190.00
12/10/2018	ACH Deposit HUMANA INS CO EFPAYMENT 390862 8300005291177		325.26				-	325.26
							-	-
		79,083.46	91,455.67	-	-	-	-	91,455.67

	TOTALS	285,166.76	581,563.96	-	-	-	-	581,563.96

Home

ALL ACCOUNTS FAVORITES ☆

Sort By: Account Number

Checking	Available	Previous Day
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381 ☆	$208,832.13	$198,667.74
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403 ☆	$142,042.23	$137,634.18
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411 ☆	$80,301.19	$73,641.19
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438 ☆	$95,925.90	$91,686.92
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446 ☆	$84,841.93	$82,611.80
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
TOTAL	$2,095,945.24	$2,150,600.39

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
12/17/2018

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		98,100.11 ✓	97,934.81 ✓	-		-			-	-	-	165.30	NO TRANSFER
											Bank Balance	165.30 ✓	
											Variance	0.00	
											Leave In Balance	100.00	
											MMC Portion QIPP 1	-	
											MMC Portion QIPP 2	-	
											MMC Portion QIPP 3	-	
											October Bank Interest	34.29 ✓	
											November Bank Interest	31.01 ✓	
											December Bank Interest	-	
											Adjust Balance/Transfer Amt	0.00	

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

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: NDM KB
Diane Moore, CFO 12/17/2018

APPROVED
ON
DEC 17 2018
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

				MMC PORTION				
Golden Creek	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP TI	NH PORTION
12/14/2018 Check # 25	19,667.13					-	-
12/12/2018 CM Wire Domestic WIRE OUT NEXION HEALTH AT GOLDEN CREEK	78,267.68					-	-
						-	-
	97,934.81	-	-	-	-	-	-

Home

ALL ACCOUNTS FAVORITES ☆

Sort By: Account Number

Checking	Available	Previous Day
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454 ☆	$165.30	$165.30
[redacted]	[redacted]	[redacted]
TOTAL	$2,095,945.24	$2,150,600.39