MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- March 20, 2019

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	764,479.84
TOTAL TRANSFERS BETWEEN FUNDS	$	-
TOTAL NURSING HOME UPL EXPENSES	$	324,524.97
TOTAL INTER-GOVERNMENT TRANSFERS	$	-
GRAND TOTAL DISBURSEMENTS APPROVED March 20, 2019	**$**	**1,089,004.81**

APPROVED

MAR 20 2019

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---March 20, 2019

PAYABLES AND PAYROLL			
3/14/2019	Weekly Payables	374,905.17	
3/18/2019	McKesson-340B Prescription Expense	4,159.65	
3/18/2019	Amerisource Bergen-340B Prescription Expense	2,582.83	
3/12/2019	Citibank Credit Card-see attached	9,932.02	
3/18/2018	Health Solutions Dietetics-Dietician	3,000.00	
3/19/2019	Payroll Liabilities (Payroll Taxes)	89,782.12	
3/19/2019	Payroll	276,729.63	
	Prosperity Electronic Bank Payments		
3/11/2019	Credit Card & Lease Fees	3,287.51	
3/11/2019	Pay Plus-Patient Claims Processing Fee	100.91	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 764,479.84**
TOTAL TRANSFERS BETWEEN FUNDS			**$ -**
NURSING HOME UPL EXPENSES			
3/18/2019	Nursing Home UPI	208,413.39	
3/19/2019	Nursing Home UPI	9,406.06	
QIPP/INTEREST CHECKS TO MMC			
3/18/2019	Ashford	52,555.89	
3/18/2019	Solera	13,706.80	
3/18/2019	Crescent	3,828.31	
3/18/2019	Fort Bend	15,067.26	
3/18/2019	Golden Creek	21,547.26	
TOTAL NURSING HOME UPL EXPENSES			**$ 324,524.97**
TOTAL INTER-GOVERNMENT TRANSFERS			**$ -**
GRAND TOTAL DISBURSEMENTS APPROVED March 20, 2019			**$ 1,089,004.81**

03/14/2019 MEMORIAL MEDICAL CENTER 0
10:19 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 03/28/2019

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
19M0036211 ✓		03/13/20	03/07/20	03/07/20		558.00	0.00	0.00	558.00 ✓
	SCHEDULING SERVICES (03/01/19 – 03/31/19)								

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
132110 ✓		02/28/20	02/26/20	03/26/20		21.98	0.00	0.00	21.98 ✓
	SUPPLIES (Maint.)								
132162 ✓		02/28/20	02/27/20	03/27/20		61.54	0.00	0.00	61.54 ✓
	SUPPLIES (Maint.)								
132452 ✓		03/13/20	03/11/20	03/11/20		35.40	0.00	0.00	35.40 ✓
	SUPPLIES (Maint.)								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11283	ACE HARDWARE 15521	118.92	0.00	0.00	118.92

Vendor#	Vendor Name	Class	Pay Code
A1430	ADVANCE MEDICAL DESIGNS INC ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
SI01277780 ✓		03/13/20	03/13/20	03/13/20		17.14	0.00	0.00	17.14 ✓
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1430	ADVANCE MEDICAL DESIGNS INC	17.14	0.00	0.00	17.14

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
9085124986 ✓		02/13/20	02/04/20	03/04/20		1,859.56	0.00	0.00	1,859.56 ✓
	OXYGEN								
9085445736 ✓		02/25/20	02/12/20	03/14/20		279.69	0.00	0.00	279.69 ✓
	OXYGEN								
9086037196 ✓		03/13/20	02/28/20	03/25/20		2,119.67	0.00	0.00	2,119.67 ✓
	OXYGEN								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS USA, LLC - CENTRAL DIV	4,258.92	0.00	0.00	4,258.92

Vendor#	Vendor Name	Class	Pay Code
A1746	ALPHA TEC SYSTEMS INC ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV00072664 ✓		02/28/20	02/26/20	03/26/20		266.45	0.00	0.00	266.45 ✓
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1746	ALPHA TEC SYSTEMS INC	266.45	0.00	0.00	266.45

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
950154558 ✓		03/13/20	03/04/20	03/10/20		7.92	0.00	0.00	7.92 ✓
	INVENTORY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1360	AMERISOURCEBERGEN DRUG CORP	7.92	0.00	0.00	7.92

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
94920821	SUPPLIES	02/28/20	02/26/20	03/26/20			309.14	0.00	0.00	309.14

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A2271	ARTHREX, INC	309.14	0.00	0.00	309.14

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
890779	SUPPLIES	03/13/20	03/02/20	03/17/20			172.90	0.00	0.00	172.90

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A2600	AUTO PARTS & MACHINE CO.	172.90	0.00	0.00	172.90

Vendor#	Vendor Name	Class	Pay Code
B0435	BARD PERIPHERAL VASCULAR	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
79170420	SUPPLIES	02/28/20	02/22/20	03/22/20			54.66	0.00	0.00	54.66

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B0435	BARD PERIPHERAL VASCULAR	54.66	0.00	0.00	54.66

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
62328636	SUPPLIES	02/28/20	02/25/20	03/22/20			508.12	0.00	0.00	508.12
62399282	SUPPLIES	03/13/20	03/01/20	03/26/20			398.11	0.00	0.00	398.11

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1150	BAXTER HEALTHCARE	906.23	0.00	0.00	906.23

Vendor#	Vendor Name	Class	Pay Code
M2485	BAYER HEALTHCARE	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6007128142	SUPPLIES	02/28/20	02/26/20	03/26/20			1,144.64	0.00	0.00	1,144.64

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2485	BAYER HEALTHCARE	1,144.64	0.00	0.00	1,144.64

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
107595071	SUPPLIES	02/28/20	02/25/20	03/22/20			1,335.41	0.00	0.00	1,335.41
5403022	SUPPLIES	02/28/20	02/28/20	03/25/20			3,507.27	0.00	0.00	3,507.27

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC	4,842.68	0.00	0.00	4,842.68

Vendor#	Vendor Name	Class	Pay Code
10599	BKD, LLP		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
BK00997716		02/28/20	02/25/20	03/22/20			3,000.00	0.00	0.00	3,000.00

AUDITING OF PYS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10599	BKD, LLP	3,000.00	0.00	0.00	3,000.00

Vendor#	Vendor Name	Class	Pay Code
B1650	BOSART LOCK & KEY INC ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
116822 ✓		02/25/20	02/19/20	03/21/20			22.10	0.00	0.00	22.10 ✓
	KEYS									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1650	BOSART LOCK & KEY INC	22.10	0.00	0.00	22.10

Vendor#	Vendor Name	Class	Pay Code
B1800	BRIGGS HEALTHCARE ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
B174820 ✓		02/28/20	02/26/20	03/28/20			943.53	0.00	0.00	943.53 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1800	BRIGGS HEALTHCARE	943.53	0.00	0.00	943.53

Vendor#	Vendor Name	Class	Pay Code
C1478	CHANNING BETE COMPANY, INC ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
53642054 ✓		02/26/20	02/20/20	03/22/20			934.58	0.00	0.00	934.58 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1478	CHANNING BETE COMPANY, INC	934.58	0.00	0.00	934.58

Vendor#	Vendor Name	Class	Pay Code
C1600	CITIZENS MEDICAL CENTER ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
030119B		03/13/20	03/01/20	03/01/20			20.00	0.00	0.00	20.00 ✓
	CPR CARDS (griffith, Hoskins, Everts, Briseno)									
030119		03/13/20	03/01/20	03/01/20			35.00	0.00	0.00	35.00 ✓
	CPR CARDS (Johnson, Monday, garcia, Hernandez, Bledsoe, Key, Epley)									
030119A		03/13/20	03/01/20	03/01/20			30.00	0.00	0.00	30.00 ✓
	CPR CARDS (Cantu Rendon, B Cantu, Howell, Gregory, C. Rendon)									
030419		03/13/20	03/04/20	03/04/20			30.00	0.00	0.00	30.00 ✓
	CPR CARDS (Draeger, Kovarck, McLennan, Hahn, Stringo, Wisdom)									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1600	CITIZENS MEDICAL CENTER	115.00	0.00	0.00	115.00

Vendor#	Vendor Name	Class	Pay Code
10786	CLINICAL PATHOLOGY ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
2019020 ✓		03/13/20	02/28/20	03/25/20			11,517.11	0.00	0.00	11,517.11 ✓
	40510020 lab work.									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10786	CLINICAL PATHOLOGY	11,517.11	0.00	0.00	11,517.11

Vendor#	Vendor Name	Class	Pay Code
L1430	CONMED LINVATEC ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
3052190 ✓		02/28/20	02/25/20	03/25/20			37.60	0.00	0.00	37.60 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	L1430	CONMED LINVATEC	37.60	0.00	0.00	37.60

Vendor#	Vendor Name				Class	Pay Code				
C2157	COOPER SURGICAL INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	5077888		03/13/20	02/28/20	03/28/20		739.00	0.00	0.00	739.00
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C2157	COOPER SURGICAL INC				739.00	0.00	0.00	739.00
Vendor#	Vendor Name				Class	Pay Code				
C1443	CYGNUS MEDICAL LLC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	270773		02/28/20	02/26/20	03/28/20		454.00	0.00	0.00	454.00
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1443	CYGNUS MEDICAL LLC				454.00	0.00	0.00	454.00
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
	5643960		02/28/20	02/25/20	03/22/20		610.73	0.00	0.00	610.73
		SUPPLIES								
	5643961		02/28/20	02/25/20	03/22/20		16.75	0.00	0.00	16.75
		SUPPLIES								
	5646100		02/28/20	02/27/20	03/24/20		402.49	0.00	0.00	402.49
		SUPPLIES								
	5646110		02/28/20	02/27/20	03/24/20		25.59	0.00	0.00	25.59
		SUPPLIES								
	5648570		03/01/20	03/01/20	03/26/20		35.00	0.00	0.00	35.00
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10368	DEWITT POTH & SON				1,090.56	0.00	0.00	1,090.56
Vendor#	Vendor Name				Class	Pay Code				
11011	DIAMOND HEALTHCARE CORP									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	IN20052645		03/13/20	02/28/20	03/25/20		31,144.58	0.00	0.00	31,144.58
		BEHAVIORAL HEALTH SVCS								
	IN20052646		03/13/20	02/28/20	03/25/20		19,166.67	0.00	0.00	19,166.67
		CPR SERVICES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11011	DIAMOND HEALTHCARE CORP				50,311.25	0.00	0.00	50,311.25
Vendor#	Vendor Name				Class	Pay Code				
11960	DILON TECHNOLOGIES									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	00031352		02/28/20	02/27/20	03/27/20		121.70	0.00	0.00	121.70
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11960	DILON TECHNOLOGIES				121.70	0.00	0.00	121.70
Vendor#	Vendor Name				Class	Pay Code				
11291	DOWELL PEST CONTROL									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	11211		02/28/20	02/28/20	03/25/20		505.00	0.00	0.00	505.00
		PEST CONTROL (February) MMC								
	11212		02/28/20	02/28/20	03/25/20		105.00	0.00	0.00	105.00
		PEST CONTROL (February) clinic								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11291	DOWELL PEST CONTROL	610.00	0.00	0.00	610.00

Vendor#	Vendor Name	Class	Pay Code
12044	DRIESSEN WATER INC. (CULLIGAN)		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
CI119374	SALT	03/13/20	02/28/20	03/22/20		641.50	0.00	0.00	641.50

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12044	DRIESSEN WATER INC. (CULLIGAN)	641.50	0.00	0.00	641.50

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
37622	ER STAFFING SERVICES	03/14/20	03/15/20	03/15/20		40,062.50	0.00	0.00	40,062.50

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
E1295	EPIMED INTERNATIONAL INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
15159USA	SUPPLIES	02/28/20	02/22/20	03/22/20		59.57	0.00	0.00	59.57

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	E1295	EPIMED INTERNATIONAL INC	59.57	0.00	0.00	59.57

Vendor#	Vendor Name	Class	Pay Code
10042	ERBE USA INC SURGICAL SYSTEMS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
532426 35	SUPPLIES	02/28/20	02/25/20	03/25/20		155.86	0.00	0.00	155.86

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10042	ERBE USA INC SURGICAL SYSTEMS	155.86	0.00	0.00	155.86

Vendor#	Vendor Name	Class	Pay Code
R1185	FARAH JANAK		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031119	TRAVEL Radiology Management Conference 3/7/19-3/9/19	03/13/20	03/11/20	03/11/20		312.98	0.00	0.00	312.98

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	R1185	FARAH JANAK	312.98	0.00	0.00	312.98

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
~~03A19MMG~~ FXP01202963	WEBSITE	03/13/20	03/01/20	03/16/20		495.00	0.00	0.00	495.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10689	FASTHEALTH CORPORATION	495.00	0.00	0.00	495.00

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
647452938	SHIPPING	03/13/20	02/28/20	03/25/20		48.61	0.00	0.00	48.61

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	F1100	FEDERAL EXPRESS CORP.	48.61	0.00	0.00	48.61

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
	0383460		02/26/20	02/19/20	03/21/20		31,467.58	0.00	0.00	31,467.58
	3887604	SUPPLIES	02/28/20	02/27/20	03/24/20		370.94	0.00	0.00	370.94
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		F1400	FISHER HEALTHCARE				31,838.52	0.00	0.00	31,838.52

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
	15271		02/28/20	02/22/20	03/22/20		363.77	0.00	0.00	363.77
		SUPPLIES Lab Brochures								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11184	FLDR DESIGNS LLC				363.77	0.00	0.00	363.77

Vendor#	Vendor Name				Class	Pay Code				
10901	GENESIS DIAGNOSTICS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	49580		02/26/20	02/19/20	03/21/20		227.39	0.00	0.00	227.39
		SUPPLIES								
	48976		03/13/20	08/29/20	09/28/20		122.46	0.00	0.00	122.46
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10901	GENESIS DIAGNOSTICS				349.85	0.00	0.00	349.85

Vendor#	Vendor Name				Class	Pay Code				
C1470	GI SUPPLY				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	670530		02/28/20	02/27/20	03/27/20		398.00	0.00	0.00	398.00
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1470	GI SUPPLY				398.00	0.00	0.00	398.00

Vendor#	Vendor Name				Class	Pay Code				
G0401	GULF COAST DELIVERY									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	022519		02/28/20	02/25/20	03/25/20		125.00	0.00	0.00	125.00
		DELIVERY SERVICES (2/6 - 2/25)								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		G0401	GULF COAST DELIVERY				125.00	0.00	0.00	125.00

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
	1632666		02/22/20	02/19/20	03/21/20		528.39	0.00	0.00	528.39
		SUPPLIES								
	1632664		02/22/20	02/19/20	03/21/20		54.86	0.00	0.00	54.86
		SUPPLIES								
	1636197		02/28/20	02/26/20	03/28/20		413.45	0.00	0.00	413.45
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		G1210	GULF COAST PAPER COMPANY				996.70	0.00	0.00	996.70

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
A219021409		03/13/20	02/14/20	02/24/20		120.00	0.00	0.00	120.00
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1100	HAYES ELECTRIC SERVICE	120.00	0.00	0.00	120.00

Vendor#	Vendor Name	Class	Pay Code
10804	HEALTHCARE CODING & CONSULTING		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8234		03/13/20	02/28/20	03/28/20		1,524.10	0.00	0.00	1,524.10
	CHART CODING SERVICES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10804	HEALTHCARE CODING & CONSULTING	1,524.10	0.00	0.00	1,524.10

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
PJIN0130633		02/25/20	02/15/20	03/25/20		8,333.33	0.00	0.00	8,333.33

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
10922	HUNTER PHARMACY SERVICES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3319		03/13/20	02/28/20	03/20/20		14,077.28	0.00	0.00	14,077.28
	PHARMACY SERVICES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10922	HUNTER PHARMACY SERVICES	14,077.28	0.00	0.00	14,077.28

Vendor#	Vendor Name	Class	Pay Code
11200	IRON MOUNTAIN		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
AMPV803		03/14/20	02/28/20	03/28/20		5,268.40	0.00	0.00	5,268.40
	PILOT HOUSE SHRED Final bill From clean up due to hurricane of Pilot House								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11200	IRON MOUNTAIN	5,268.40	0.00	0.00	5,268.40

Vendor#	Vendor Name	Class	Pay Code
11285	ITA RESOURCES INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
MMC32019		03/13/20	03/12/20	03/12/20		25,994.69	0.00	0.00	25,994.69
	RESPIRATORY SERVICES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11285	ITA RESOURCES INC	25,994.69	0.00	0.00	25,994.69

Vendor#	Vendor Name	Class	Pay Code
J0150	J & J HEALTH CARE SYSTEMS, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
920601530		02/28/20	02/20/20	03/22/20		40.29	0.00	0.00	40.29
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	J0150	J & J HEALTH CARE SYSTEMS, INC	40.29	0.00	0.00	40.29

Vendor#	Vendor Name	Class	Pay Code
11230	JACKSON & COKER LOCUM TENENS,		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2026479		03/13/20	03/07/20	03/17/20		1,016.00	0.00	0.00	1,016.00

DR. TRAVEL REIMBURSEMEN (pain management candidate)

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11230	JACKSON & COKER LOCUM TENENS,	1,016.00	0.00	0.00	1,016.00

Vendor# 10507 Vendor Name: JASON ANGLIN ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
031119		03/13/20	03/11/20	03/11/20			147.32	0.00	0.00	147.32 ✓
	TRAVEL Texas Hospital Assoc. Advisory committee 3/5/19									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10507	JASON ANGLIN	147.32	0.00	0.00	147.32

Vendor# J1415 Vendor Name: JOHNSTONE SUPPLY ✓ Class: W Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6022019 ✓		03/13/20	03/06/20	03/16/20			68.26	0.00	0.00	68.26 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	J1415	JOHNSTONE SUPPLY	68.26	0.00	0.00	68.26

Vendor# 11122 Vendor Name: K & M SPORTS ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
104053		03/13/20	03/11/20	03/11/20			275.00	0.00	0.00	275.00 ✓
	AD in Fall 2019 poster (Calhoun athletics)									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11122	K & M SPORTS	275.00	0.00	0.00	275.00

Vendor# L1001 Vendor Name: LANDAUER INC ✓ Class: W Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
100658356 ✓		03/13/20	02/19/20	03/19/20			832.05	0.00	0.00	832.05 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	L1001	LANDAUER INC	832.05	0.00	0.00	832.05

Vendor# 11796 Vendor Name: LUBY'S FUDDRUCKERS RESTAURANTS ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
201901310837 ✓		03/13/20	01/31/20	02/28/20			27,680.09	0.00	0.00	27,680.09 ✓
	FOOD SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11796	LUBY'S FUDDRUCKERS RESTAURANTS	27,680.09	0.00	0.00	27,680.09

Vendor# M1950 Vendor Name: MARTIN PRINTING CO ✓ Class: W Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
726654 ✓		02/28/20	02/28/20	03/28/20			1,009.75	0.00	0.00	1,009.75 ✓
	BUSINESS CARDS appt. cards for (13) physcians									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M1950	MARTIN PRINTING CO	1,009.75	0.00	0.00	1,009.75

Vendor# M2178 Vendor Name: MCKESSON MEDICAL SURGICAL INC ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
47895425 ✓		02/28/20	02/21/20	03/23/20			45,625.00	0.00	0.00	45,625.00 ✓
	EQUIPMENT (2) Filmarray Torch 2.0 modules @ $22,500. each									
47989606 ✓		02/28/20	02/22/20	03/24/20			208.08	0.00	0.00	208.08 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC	45,833.08	0.00	0.00	45,833.08

Vendor#	Vendor Name	Class	Pay Code
11141	MEDICAL DATA SYSTEMS, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
132053		02/28/20	02/28/20	03/25/20		498.34	0.00	0.00	498.34
	COLLECTION FEES								
132055		02/28/20	02/28/20	03/25/20		673.23	0.00	0.00	673.23
	COLLECTIONS FEES								
132054		02/28/20	02/28/20	03/25/20		2,816.38	0.00	0.00	2,816.38
	COLLECTION FEES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11141	MEDICAL DATA SYSTEMS, INC.	3,987.95	0.00	0.00	3,987.95

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
90031608		02/28/20	02/27/20	03/27/20		28.35	0.00	0.00	28.35
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2827	MEDIVATORS	28.35	0.00	0.00	28.35

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
1870240956		02/26/20	02/26/20	03/23/20		72.54	0.00	0.00	72.54
	SUPPLIES								
1870861383		02/28/20	02/25/20	03/22/20		82.55	0.00	0.00	82.55
	SUPPLIES								
1870951056		02/28/20	02/26/20	03/23/20		34.12	0.00	0.00	34.12
	SUPPLIES								
1870951051		02/28/20	02/26/20	03/23/20		48.87	0.00	0.00	48.87
	SUPPLIES								
1870951068		02/28/20	02/26/20	03/23/20		1,855.01	0.00	0.00	1,855.01
	SUPPLIES								
1870951053		02/28/20	02/26/20	03/23/20		172.84	0.00	0.00	172.84
	SUPPLIES								
1870951075		02/28/20	02/26/20	03/23/20		23.10	0.00	0.00	23.10
	SUPPLIES 16.79 shipping on 6.31 immobilizer / shoulder								
1870951055		02/28/20	02/26/20	03/23/20		187.75	0.00	0.00	187.75
	SUPPLIES								
1870951074		02/28/20	02/26/20	03/23/20		208.73	0.00	0.00	208.73
	SUPPLIES								
1870951072		02/28/20	02/26/20	03/23/20		40.26	0.00	0.00	40.26
	SUPPLIES								
1870951057		02/28/20	02/26/20	03/23/20		71.04	0.00	0.00	71.04
	SUPPLIES								
1871024560		02/28/20	02/27/20	03/24/20		28.26	0.00	0.00	28.26
	SUPPLIES 17.24 shipping on (2) 6.50 post-op shoes								
1871024563		02/28/20	02/27/20	03/24/20		33.36	0.00	0.00	33.36
	SUPPLIES								
1871024569		02/28/20	02/27/20	03/24/20		55.91	0.00	0.00	55.91
	SUPPLIES								

1871024572 ✓		02/28/20 02/27/20 03/24/20		69.65	0.00	0.00	69.65 ✓
	SUPPLIES						
1871024568 ✓		02/28/20 02/27/20 03/24/20		160.05	0.00	0.00	160.05 ✓
	SUPPLIES						
1871024557 ✓		02/28/20 02/27/20 03/24/20		1,941.28	0.00	0.00	1,941.28 ✓
	SUPPLIES						
1871024564 ✓		02/28/20 02/27/20 03/24/20		142.57	0.00	0.00	142.57 ✓
	SUPPLIES						
1871024571 ✓		02/28/20 02/27/20 03/24/20		160.05	0.00	0.00	160.05 ✓
	SUPPLIES						
1871024562 ✓		02/28/20 02/27/20 03/24/20		63.40	0.00	0.00	63.40 ✓
	SUPPLIES						
1871024566 ✓		02/28/20 02/28/20 03/25/20		115.47	0.00	0.00	115.47 ✓
	SUPPLIES						
1871206634 ✓		03/12/20 02/28/20 03/25/20		44.72	0.00	0.00	44.72 ✓
	SUPPLIES						
1871206638 ✓		03/12/20 02/28/20 03/25/20		2.30	0.00	0.00	2.30 ✓
	SUPPLIES						
1871206641 ✓		03/12/20 02/28/20 03/25/20		1,932.24	0.00	0.00	1,932.24 ✓
	SUPPLIES						
1871206636 ✓		03/12/20 02/28/20 03/25/20		238.60	0.00	0.00	238.60 ✓
	SUPPLIES						
1871206639 ✓		03/12/20 02/28/20 03/25/20		120.81	0.00	0.00	120.81 ✓
	SUPPLIES						
1871206635 ✓		03/12/20 02/28/20 03/25/20		10.32	0.00	0.00	10.32 ✓
	SUPPLIES						
1871233135 ✓		03/12/20 03/01/20 03/26/20		66.26	0.00	0.00	66.26 ✓
	SUPPLIES						
1871233134 ✓		03/12/20 03/01/20 03/26/20		165.22	0.00	0.00	165.22 ✓
	SUPPLIES						
1871233136 ✓		03/12/20 03/01/20 03/26/20		28.39	0.00	0.00	28.39 ✓
	SUPPLIES	15.25 shipping on 13.14.38 Per cussion Hammers					
1871366352 ✓		03/12/20 03/02/20 03/27/20		66.67	0.00	0.00	66.67 ✓
	SUPPLIES						
Vendor Totals	Number	Name		Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC		8,242.34	0.00	0.00	8,242.34

Vendor#	Vendor Name	Class	Pay Code
10182	MERCEDES SCIENTIFIC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
2146972 ✓		02/28/20	02/26/20	03/28/20			76.17	0.00	0.00	76.17 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10182	MERCEDES SCIENTIFIC	76.17	0.00	0.00	76.17

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
031119		03/13/20	03/11/20	03/11/20			26,385.60	0.00	0.00	26,385.60 ✓
	INSURANCE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10810	MMC EMPLOYEE BENEFIT PLAN	26,385.60	0.00	0.00	26,385.60

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
3929427		03/13/20	03/01/20	03/11/20		342.19	0.00	0.00	342.19
	INVENTORY								
3939035		03/13/20	03/04/20	03/14/20		416.39	0.00	0.00	416.39
	INVENTORY								
3939036		03/13/20	03/04/20	03/14/20		140.33	0.00	0.00	140.33
	INVENTORY								
3939037		03/13/20	03/04/20	03/14/20		1,153.34	0.00	0.00	1,153.34
	INVENTORY								
3951243		03/13/20	03/06/20	03/16/20		410.84	0.00	0.00	410.84
	INVENTORY								
3951245		03/13/20	03/06/20	03/16/20		1,939.66	0.00	0.00	1,939.66
	LAUNDRY								
3951244		03/13/20	03/06/20	03/16/20		248.51	0.00	0.00	248.51
	INVENTORY								
3951242		03/13/20	03/06/20	03/16/20		373.59	0.00	0.00	373.59
	INVENTORY								
3955368		03/13/20	03/07/20	03/17/20		700.27	0.00	0.00	700.27
	INVENTORY								
3955367		03/13/20	03/07/20	03/17/20		1,938.82	0.00	0.00	1,938.82
	INVENTORY								
3960597		03/13/20	03/08/20	03/18/20		25.89	0.00	0.00	25.89
	INVENTORY								
3960599		03/13/20	03/08/20	03/18/20		2,959.68	0.00	0.00	2,959.68
	INVENTORY								
3960598		03/13/20	03/08/20	03/18/20		986.82	0.00	0.00	986.82
	INVENTORY								
3958632		03/13/20	03/08/20	03/18/20		1,650.00	0.00	0.00	1,650.00
	INVENTORY								
CM43314		03/13/20	03/11/20	03/21/20		-5.59	0.00	0.00	-5.59
	CREDIT								
3967847		03/13/20	03/11/20	03/21/20		149.56	0.00	0.00	149.56
	INVENTORY								
3967845		03/13/20	03/11/20	03/21/20		312.11	0.00	0.00	312.11
	INVENTORY								
3967846		03/13/20	03/11/20	03/21/20		859.98	0.00	0.00	859.98
	SUPPLIES								
3973243		03/13/20	03/12/20	03/22/20		21.42	0.00	0.00	21.42
	INVENTORY								
3973245		03/13/20	03/12/20	03/22/20		523.26	0.00	0.00	523.26
	INVENTORY								
3971561		03/13/20	03/12/20	03/22/20		1.50	0.00	0.00	1.50
	INVENTORY								
3973244		03/13/20	03/12/20	03/22/20		362.84	0.00	0.00	362.84
	INVENTORY								
3974744		03/13/20	03/12/20	03/22/20		252.08	0.00	0.00	252.08
	INVENTORY								
3971562		03/13/20	03/12/20	03/22/20		4.44	0.00	0.00	4.44
	INVENTORY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC				15,767.93	0.00	0.00	15,767.93

Vendor#	Vendor Name				Class	Pay Code				
A2252	NADINE GARNER ✓				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	031119		03/13/20	03/11/20	03/11/20		271.36	0.00	0.00	271.36 ✓
		TRAVEL Hot Topics Forum - Education from the Hospital Insurance Exchange 3/7/19								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A2252	NADINE GARNER				271.36	0.00	0.00	271.36
Vendor#	Vendor Name				Class	Pay Code				
N1100	NATIONAL RECALL ALERT CENTER ✓				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	460346 ✓		03/13/20	01/02/20	01/02/20		595.00	0.00	0.00	595.00 ✓
		MMBRSHP RENEWAL								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		N1100	NATIONAL RECALL ALERT CENTER				595.00	0.00	0.00	595.00
Vendor#	Vendor Name				Class	Pay Code				
O1500	OLYMPUS AMERICA INC ✓				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	97103358 ✓		02/28/20	02/25/20	03/22/20		108.58	0.00	0.00	108.58 ✓
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		O1500	OLYMPUS AMERICA INC				108.58	0.00	0.00	108.58
Vendor#	Vendor Name				Class	Pay Code				
I0955	OPTUM360 ✓				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	80012329039 ✓		03/13/20	02/27/20	03/27/20		510.90	0.00	0.00	510.90 ✓
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		I0955	OPTUM360				510.90	0.00	0.00	510.90
Vendor#	Vendor Name				Class	Pay Code				
O1416	ORTHO CLINICAL DIAGNOSTICS ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	1850896662 ✓		02/26/20	02/19/20	03/21/20		1,343.21	0.00	0.00	1,343.21 ✓
		SUPPLIES								
	1850897343 ✓		02/26/20	02/19/20	03/21/20		119.82	0.00	0.00	119.82 ✓
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		O1416	ORTHO CLINICAL DIAGNOSTICS				1,463.03	0.00	0.00	1,463.03
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
	2045323210 ✓		02/28/20	02/20/20	03/22/20		743.06	0.00	0.00	743.06 ✓
		SUPPLIES								
	2045489951 ✓		03/12/20	02/26/20	03/28/20		371.52	0.00	0.00	371.52 ✓
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		OM425	OWENS & MINOR				1,114.58	0.00	0.00	1,114.58
Vendor#	Vendor Name				Class	Pay Code				
12480	PRO ENERGY PARTNERS LP ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	19020600 ✓		03/13/20	02/28/20	03/28/20		3,711.99	0.00	0.00	3,711.99 ✓
		NATURAL GAS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net

12480	PRO ENERGY PARTNERS LP				3,711.99	0.00	0.00	3,711.99

Vendor# Vendor Name — Class — Pay Code

11251 RAPID PRINTING LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
5392	WELL/SICK PT BOARDS	03/13/20	03/11/20	03/11/20		44.80	0.00	0.00	44.80

Vendor Totals

Number	Name	Gross	Discount	No-Pay	Net
11251	RAPID PRINTING LLC	44.80	0.00	0.00	44.80

Vendor# Vendor Name — Class — Pay Code

R1200 RED HAWK FIRE AND SECURITY

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
390020	FIRE MONITORING	03/13/20	03/01/20	03/26/20		45.47	0.00	0.00	45.47

Vendor Totals

Number	Name	Gross	Discount	No-Pay	Net
R1200	RED HAWK FIRE AND SECURITY	45.47	0.00	0.00	45.47

Vendor# Vendor Name — Class — Pay Code

11024 REED, CLAYMON, MEEKER & HARGET

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
16078	LEGAL SERVICES	03/13/20	02/27/20	02/27/20		6,972.28	0.00	0.00	6,972.28

Vendor Totals

Number	Name	Gross	Discount	No-Pay	Net
11024	REED, CLAYMON, MEEKER & HARGET	6,972.28	0.00	0.00	6,972.28

Vendor# Vendor Name — Class — Pay Code

F1171 RICHARD FERGUSON — W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031119	EMPLOYEE RETURN CHECK	03/13/20	03/11/20	03/11/20		100.00	0.00	0.00	100.00

Vendor Totals

Number	Name	Gross	Discount	No-Pay	Net
F1171	RICHARD FERGUSON	100.00	0.00	0.00	100.00

Vendor# Vendor Name — Class — Pay Code

11252 RX WASTE SYSTEMS LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1986	DISPOSAL SERVICE	03/01/20	03/01/20	03/26/20		235.00	0.00	0.00	235.00

Vendor Totals

Number	Name	Gross	Discount	No-Pay	Net
11252	RX WASTE SYSTEMS LLC	235.00	0.00	0.00	235.00

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
700993524	SUPPLIES	03/13/20	11/27/20	12/27/20		98.98	0.00	0.00	98.98
700993911	SUPPLIES	03/13/20	11/30/20	12/30/20		79.60	0.00	0.00	79.60
700999808	SUPPLIES	03/13/20	01/18/20	02/17/20		71.50	0.00	0.00	71.50
701003566	STORAGE TANK	03/13/20	02/18/20	03/20/20		46.97	0.00	0.00	46.97
701004564	SUPPLIES	03/13/20	02/26/20	03/28/20		110.55	0.00	0.00	110.55

Vendor Totals

Number	Name	Gross	Discount	No-Pay	Net
S1405	SERVICE SUPPLY OF VICTORIA INC	407.60	0.00	0.00	407.60

Vendor#	Vendor Name				Class	Pay Code				
S1850	SHIP SHUTTLE TAXI SERVICE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	2899454		03/13/20	03/09/20	03/09/20		8.00	0.00	0.00	8.00
		TRANSPORTATION OF PT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S1850	SHIP SHUTTLE TAXI SERVICE				8.00	0.00	0.00	8.00
Vendor#	Vendor Name				Class	Pay Code				
10936	SIEMENS FINANCIAL SERVICES									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	4697735		03/13/20	02/27/20	03/24/20		1,350.66	0.00	0.00	1,350.66
		RENTAL (late fee 17.33)								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10936	SIEMENS FINANCIAL SERVICES				1,350.66	0.00	0.00	1,350.66
Vendor#	Vendor Name				Class	Pay Code				
S2270	SMILE MAKERS				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8526921		03/13/20	03/01/20	03/26/20		51.93	0.00	0.00	51.93
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S2270	SMILE MAKERS				51.93	0.00	0.00	51.93
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
	90043741		02/28/20	02/28/20	03/25/20		2,593.00	0.00	0.00	2,593.00
		BLOOD								
	90043640		02/28/20	02/28/20	03/25/20		-690.00	0.00	0.00	-690.00
		CREDIT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11296	SOUTH TEXAS BLOOD & TISSUE CEN				1,903.00	0.00	0.00	1,903.00
Vendor#	Vendor Name				Class	Pay Code				
10735	STRYKER SUSTAINABILITY									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	3577157		02/28/20	02/21/20	03/23/20		648.96	0.00	0.00	648.96
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10735	STRYKER SUSTAINABILITY				648.96	0.00	0.00	648.96
Vendor#	Vendor Name				Class	Pay Code				
11067	TRIZETTO PROVIDER SOLUTIONS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	35FK031900		03/13/20	03/01/20	03/26/20		2,055.39	0.00	0.00	2,055.39
		PT STATEMENTS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11067	TRIZETTO PROVIDER SOLUTIONS				2,055.39	0.00	0.00	2,055.39
Vendor#	Vendor Name				Class	Pay Code				
11001	ULINE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	106165580		02/28/20	02/25/20	03/25/20		60.97	0.00	0.00	60.97
		SUPPLIES								
	106273702		02/28/20	02/27/20	03/27/20		120.66	0.00	0.00	120.66
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net

	11001	ULINE				181.63	0.00	0.00	181.63

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
8400295166	LAUNDRY	02/25/20	02/25/20	03/22/20			173.48	0.00	0.00	173.48
8400295167	LAUNDRY	02/26/20	02/25/20	03/22/20			156.47	0.00	0.00	156.47
8400295229	LAUNDRY	02/26/20	02/25/20	03/22/20			113.19	0.00	0.00	113.19
8400295168	LAUNDRY	02/26/20	02/25/20	03/22/20			47.15	0.00	0.00	47.15
8400295196	LAUNDRY	02/26/20	02/25/20	03/22/20			79.36	0.00	0.00	79.36
8400295203	LAUNDRY	02/26/20	02/25/20	03/22/20			1,310.32	0.00	0.00	1,310.32
8400295165	LAUNDRY	02/26/20	02/25/20	03/22/20			120.39	0.00	0.00	120.39
8400295169	LAUNDRY	02/26/20	02/25/20	03/22/20			52.41	0.00	0.00	52.41
8400295503	LAUNDRY	02/28/20	02/28/20	03/25/20			17.00	0.00	0.00	17.00
8400295505	LAUNDRY	02/28/20	02/28/20	03/25/20			175.83	0.00	0.00	175.83
8400295548	LAUNDRY	02/28/20	02/28/20	03/25/20			1,839.18	0.00	0.00	1,839.18

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	4,084.78	0.00	0.00	4,084.78

Vendor#	Vendor Name	Class	Pay Code
12400	UPDOX LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
INV00069853	SOFTWARE (Appt. Reminders, Electronic Faxing, etc.)	02/28/20	02/28/20	03/28/20			199.00	0.00	0.00	199.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12400	UPDOX LLC	199.00	0.00	0.00	199.00

Vendor#	Vendor Name	Class	Pay Code
V1471	VICTORIA RADIOWORKS, LTD	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
19020200	AD	02/28/20	02/28/20	03/28/20			280.00	0.00	0.00	280.00
19020201	AD	02/28/20	02/28/20	03/28/20			280.00	0.00	0.00	280.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	V1471	VICTORIA RADIOWORKS, LTD	560.00	0.00	0.00	560.00

Vendor#	Vendor Name	Class	Pay Code
I1110	WERFEN USA LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9110633833	SUPPLIES	02/28/20	02/15/20	03/21/20			1,571.67	0.00	0.00	1,571.67

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
11400	WEST COAST MEDICAL RESOURCES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV040886	SUPPLIES	03/13/20	02/26/20	03/28/20		1,500.00	0.00	0.00	1,500.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11400	WEST COAST MEDICAL RESOURCES	1,500.00	0.00	0.00	1,500.00

Vendor#	Vendor Name	Class	Pay Code
11580	WILLIAM CROWLEY III, DO		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
030719	REIMBURSEMENT of triplicate pads (prescription)	03/13/20	03/07/20	03/07/20		99.69	0.00	0.00	99.69

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11580	WILLIAM CROWLEY III, DO	99.69	0.00	0.00	99.69

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	374,905.17	0.00	0.00	374,905.17

APPROVED
ON

MAR 14 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 179924-
180012

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	179924	03/20/19	558.00	ABILITY NETWORK (SHIFTHOUND)
A/P	179925	03/20/19	118.92	ACE HARDWARE 15521
A/P	179926	03/20/19	17.14	ADVANCE MEDICAL DESIGNS INC
A/P	179927	03/20/19	4,258.92	AIRGAS USA, LLC - CENTRAL DIV
A/P	179928	03/20/19	266.45	ALPHA TEC SYSTEMS INC
A/P	179929	03/20/19	7.92	AMERISOURCEBERGEN DRUG CORP
A/P	179930	03/20/19	309.14	ARTHREX, INC
A/P	179931	03/20/19	172.90	AUTO PARTS & MACHINE CO.
A/P	179932	03/20/19	54.66	BARD PERIPHERAL VASCULAR
A/P	179933	03/20/19	906.23	BAXTER HEALTHCARE
A/P	179934	03/20/19	1,144.64	BAYER HEALTHCARE
A/P	179935	03/20/19	4,842.68	BECKMAN COULTER INC
A/P	179936	03/20/19	3,000.00	BKD, LLP
A/P	179937	03/20/19	22.10	BOSART LOCK & KEY INC
A/P	179938	03/20/19	943.53	BRIGGS HEALTHCARE
A/P	179939	03/20/19	934.58	CHANNING BETE COMPANY, INC
A/P	179940	03/20/19	115.00	CITIZENS MEDICAL CENTER
A/P	179941	03/20/19	11,517.11	CLINICAL PATHOLOGY
A/P	179942	03/20/19	37.60	CONMED LINVATEC
A/P	179943	03/20/19	739.00	COOPER SURGICAL INC
A/P	179944	03/20/19	454.00	CYGNUS MEDICAL LLC
A/P	179945	03/20/19	1,090.56	DEWITT POTH & SON
A/P	179946	03/20/19	50,311.25	DIAMOND HEALTHCARE CORP
A/P	179947	03/20/19	121.70	DILON TECHNOLOGIES
A/P	179948	03/20/19	610.00	DOWELL PEST CONTROL
A/P	179949	03/20/19	641.50	DRIESSEN WATER INC. (CULLIGAN)
A/P	179950	03/20/19	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	179951	03/20/19	59.57	EPIMED INTERNATIONAL INC
A/P	179952	03/20/19	155.86	ERBE USA INC SURGICAL SYSTEMS
A/P	179953	03/20/19	312.98	FARAH JANAK
A/P	179954	03/20/19	495.00	FASTHEALTH CORPORATION
A/P	179955	03/20/19	48.61	FEDERAL EXPRESS CORP.
A/P	179956	03/20/19	31,838.52	FISHER HEALTHCARE
A/P	179957	03/20/19	363.77	FLDR DESIGNS LLC
A/P	179958	03/20/19	349.85	GENESIS DIAGNOSTICS
A/P	179959	03/20/19	398.00	GI SUPPLY
A/P	179960	03/20/19	125.00	GULF COAST DELIVERY
A/P	179961	03/20/19	996.70	GULF COAST PAPER COMPANY
A/P	179962	03/20/19	120.00	HAYES ELECTRIC SERVICE
A/P	179963	03/20/19	1,524.10	HEALTHCARE CODING & CONSULTING
A/P	179964	03/20/19	8,333.33	HITACHI MEDICAL SYSTEMS
A/P	179965	03/20/19	14,077.28	HUNTER PHARMACY SERVICES
A/P	179966	03/20/19	5,268.40	IRON MOUNTAIN
A/P	179967	03/20/19	25,994.69	ITA RESOURCES INC
A/P	179968	03/20/19	40.29	J & J HEALTH CARE SYSTEMS, INC
A/P	179969	03/20/19	1,016.00	JACKSON & COKER LOCUM TENENS,
A/P	179970	03/20/19	147.32	JASON ANGLIN
A/P	179971	03/20/19	68.26	JOHNSTONE SUPPLY
A/P	179972	03/20/19	275.00	K & M SPORTS
A/P	179973	03/20/19	832.05	LANDAUER INC

BANK--CHECK				
CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	179974	03/20/19	27,680.09	LUBY'S FUDDRUCKERS RESTAURANTS
A/P	179975	03/20/19	1,009.75	MARTIN PRINTING CO
A/P	179976	03/20/19	45,833.08	MCKESSON MEDICAL SURGICAL INC
A/P	179977	03/20/19	3,987.95	MEDICAL DATA SYSTEMS, INC.
A/P	179978	03/20/19	28.35	MEDIVATORS
A/P	179979	03/20/19	.00	VOIDED
A/P	179980	03/20/19	.00	VOIDED
A/P	179981	03/20/19	.00	VOIDED
A/P	179982	03/20/19	8,242.34	MEDLINE INDUSTRIES INC
A/P	179983	03/20/19	76.17	MERCEDES SCIENTIFIC
A/P	179984	03/20/19	26,385.60	MMC EMPLOYEE BENEFIT PLAN
A/P	179985	03/20/19	.00	VOIDED
A/P	179986	03/20/19	15,767.93	MORRIS & DICKSON CO, LLC
A/P	179987	03/20/19	271.36	NADINE GARNER
A/P	179988	03/20/19	595.00	NATIONAL RECALL ALERT CENTER
A/P	179989	03/20/19	108.58	OLYMPUS AMERICA INC
A/P	179990	03/20/19	510.90	OPTUM360
A/P	179991	03/20/19	1,463.03	ORTHO CLINICAL DIAGNOSTICS
A/P	179992	03/20/19	1,114.58	OWENS & MINOR
A/P	179993	03/20/19	3,711.99	PRO ENERGY PARTNERS LP
A/P	179994	03/20/19	44.80	RAPID PRINTING LLC
A/P	179995	03/20/19	45.47	RED HAWK FIRE AND SECURITY
A/P	179996	03/20/19	6,972.28	REED, CLAYMON, MEEKER & HARGET
A/P	179997	03/20/19	100.00	RICHARD FERGUSON
A/P	179998	03/20/19	235.00	RX WASTE SYSTEMS LLC
A/P	179999	03/20/19	407.60	SERVICE SUPPLY OF VICTORIA INC
A/P	180000	03/20/19	8.00	SHIP SHUTTLE TAXI SERVICE
A/P	180001	03/20/19	1,350.66	SIEMENS FINANCIAL SERVICES
A/P	180002	03/20/19	51.93	SMILE MAKERS
A/P	180003	03/20/19	1,903.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	180004	03/20/19	648.96	STRYKER SUSTAINABILITY
A/P	180005	03/20/19	2,055.39	TRIZETTO PROVIDER SOLUTIONS
A/P	180006	03/20/19	181.63	ULINE
A/P	180007	03/20/19	4,084.78	UNIFIRST HOLDINGS INC
A/P	180008	03/20/19	199.00	UPDOX LLC
A/P	180009	03/20/19	560.00	VICTORIA RADIOWORKS, LTD
A/P	180010	03/20/19	1,571.67	WERFEN USA LLC
A/P	180011	03/20/19	1,500.00	WEST COAST MEDICAL RESOURCES
A/P	180012	03/20/19	99.69	WILLIAM CROWLEY III, DO
A/P	180013	03/20/19	3,000.00	HEALTH SOLUTIONS DIETETICS
TOTALS:			377,905.17	

APPROVED
ON

MAR 2 0 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Payables 374,905.17 +
critical 3,000.00 +
377,905.17 *

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: 03/15/2019

DC: 8115

Territory:

Customer: 632536
Date: 03/16/2019

Page: 002

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

As of: 03/15/2019 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 03/16/2019 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: 4,244.55 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 03/19/2019,
Pay This Amount: 4,159.65 USD

If Paid After 03/19/2019,
Pay this Amount: 4,244.55 USD

Due If Paid On Time:
USD 4,159.65 ✓

Disc lost if paid late:
84.90

Due If Paid Late:
USD 4,244.55

Check #1025
GL Acct. #60310000

3,060.83 +
62.79 +
1,036.03 +
4,159.65 *

APPROVED
ON
MAR 18 2019
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: 03/15/2019 Page: 001

DC: 8115

Territory: 400

Customer: 262252
Date: 03/16/2019

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

As of: 03/15/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252 PLEASE CHECK ANY
Date: 03/16/2019 ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 262252 CVS PHCY 7006/MEMORIA PHS											
03/11/2019	03/19/2019	7123080946	453644	115Invoice	18.80	939.90		✓921.10✓		7123080946	
03/12/2019	03/19/2019	7123354321	454137	115Invoice	27.43	1,371.28		✓1,343.85✓		7123354321	
03/12/2019	03/19/2019	7123354322	454137	115Invoice	0.49	24.39		✓23.90✓		7123354322	
03/13/2019	03/19/2019	7123575636	454683	115Invoice	5.32	266.20		✓260.88✓		7123575636	
03/13/2019	03/19/2019	7123575637	454683	115Invoice	0.13	6.30		✓6.17✓		7123575637	
03/14/2019	03/19/2019	7123811726	455954	115Invoice	1.62	81.14		✓79.52✓		7123811726	
03/15/2019	03/19/2019	7124047595	456488	115Invoice	8.14	407.18		✓399.04✓		7124047595	
03/15/2019	03/19/2019	7124047597	456488	115Invoice	0.54	26.91		✓26.37✓		7124047597	

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: 3,123.30 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,225.10
03/11/2019

If Paid By 03/19/2019,
Pay This Amount: 3,060.83 USD ✓

If Paid After 03/19/2019,
Pay this Amount: 3,123.30 USD

Due If Paid On Time:
USD 3,060.83✓

Disc lost if paid late:
62.47

Due If Paid Late:
USD 3,123.30

APPROVED
ON
MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company: 8000

STATEMENT

As of: 03/15/2019 Page: 001

DC: 8115

Territory: 400

Customer: 190813
Date: 03/16/2019

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

As of: 03/15/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

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

Cust: 190813 PLEASE CHECK ANY
Date: 03/16/2019 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											
03/13/2019	03/19/2019	7123587904	2017007190	115Invoice	1.28	64.07		62.79✓		7123587904	

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: 64.07 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 03/11/2019 6,225.10

If Paid By 03/19/2019,
Pay This Amount: 62.79 USD

If Paid After 03/19/2019,
Pay this Amount: 64.07 USD

Due If Paid On Time:
USD 62.79✓

Disc lost if paid late:
1.28

Due If Paid Late:
USD 64.07

APPROVED
ON

MAR 18 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company: 8000

As of: 03/15/2019 Page: 001

DC: 8115

Territory: 400

Customer: 256342
Date: 03/16/2019

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

As of: 03/15/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

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

Cust: 256342 PLEASE CHECK ANY
Date: 03/16/2019 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											
03/11/2019	03/19/2019	7123075747	0959800164	115Invoice	0.02	0.82		0.80		7123075747	
03/11/2019	03/19/2019	7123075748	0310190236-00	115Invoice	12.73	636.41		623.68		7123075748	
03/12/2019	03/19/2019	7123321821	0959800165	115Invoice	2.02	100.78		98.76		7123321821	
03/12/2019	03/19/2019	7123321822	0311190225-00	115Invoice	0.32	15.92		15.60		7123321822	
03/13/2019	03/19/2019	7123575700	0959800166	115Invoice	0.01	0.33		0.32		7123575700	
03/13/2019	03/19/2019	7123575701	0312190410-00	115Invoice	0.02	1.16		1.14		7123575701	
03/14/2019	03/19/2019	7123816520	0959800167	115Invoice	0.79	39.62		38.83		7123816520	
03/14/2019	03/19/2019	7123816521	0313190330-00	115Invoice	0.26	13.24		12.98		7123816521	
03/15/2019	03/19/2019	7124051440	0959800168	115Invoice	1.89	94.56		92.67		7124051440	
03/15/2019	03/19/2019	7124051441	0314190109-00	115Invoice	1.75	87.28		85.53		7124051441	
03/15/2019	03/19/2019	7124051443	0314190109-00	115Invoice	1.34	67.06		65.72		7124051443	

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: 1,057.18 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,225.10
03/11/2019

If Paid By 03/19/2019,
Pay This Amount: 1,036.03 USD ✓

If Paid After 03/19/2019,
Pay this Amount: 1,057.18 USD

Due If Paid On Time:
USD 1,036.03 ✓

Disc lost if paid late:
21.15

Due If Paid Late:
USD 1,057.18

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ON

MAR 18 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:03/19/19 MEMORIAL MEDICAL CENTER PAGE 1
TIME:12:22 CHECK REGISTER GLCKREG
03/19/19 THRU 03/19/19

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	001025	03/19/19	4,159.65	MCKESSON
TOTALS:			4,159.65	

APPROVED
ON

MAR 2 0 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AmerisourceBergen

STATEMENT

Number: 57774207 Date: 03-15-2019

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:	2,582.83
Past Due:	0.00
Total Due:	2,582.83
Account Balance:	2,582.83

Account Activity

Activity Date	Due Date	Reference Number	Purchase Order Number	Activity Type	Amount
03-11-2019	03-22-2019	3020547392	143772	Invoice	291.40
03-11-2019	03-22-2019	3020547393	143780	Invoice	182.13
03-11-2019	03-22-2019	3020594565	143828	Invoice	339.12
03-12-2019	03-22-2019	3020636442	143837	Invoice	232.02
03-13-2019	03-22-2019	3020684783	143890	Invoice	948.55
03-14-2019	03-22-2019	3020730237	143958	Invoice	361.66
03-15-2019	03-22-2019	3020781453	144008	Invoice	227.95

Thank You for Your Payment

Date	Payment Number	Amount
03-15-2019		(2,934.34)

Reminders

Due Date	Amount
03-22-2019	2,582.83

Total Due: 2,582.83

Terms:
Monday - Friday due in 7 days

Check #1019
GL Acct. # 60310000

APPROVED
ON
MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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0556709000527279909932020993202038

Company Account Number	Payment Date	New Balance	Minimum Amount Due	Enter Amount Paid
	03/28/2019	$9,932.02	$9,932.02	

C0001 CALHOUN COUNTY MMC
RHONDA KOKENA
202 SOUTH ANN STREET
SUITE A
PORT LAVACA TX 77979-4204

Citibank
P.O. Box 78025
PHOENIX, AZ 85062-8025

Payment coupon: Please cut along perforation and return this portion with your payment. Make check or money order payable in U.S. dollars on a U.S. bank to Citibank. Include account number on check or money order. No cash please. Do not staple or tape your check to this coupon.

CITIBANK CORPORATE CARD

Company Credit Line	Available Credit Line	Cash Advance Limit	Available Cash Line
$20,000.00	$10,067.98	$0.00	$0.00

Statement Date
03/03/2019

Payment Date
03/28/2019

For customer service call or write 1-800-248-4553 Citibank P.O. Box 6125 Sioux Falls, SD 57117

Send payments to: Citibank P.O. Box 78025 PHOENIX, AZ 85062-8025

COMPANY SUMMARY

C0001 CALHOUN COUNTY MMC		Previous Balance	Payment Allocation	Credits	Purchases and Advances	Interest Charges	New Balance
Company Totals	Purchases	$4,641.92	- $4,641.92	- $4.26	$9,936.28		$9,932.02
	Advances						
	TOTAL	$4,641.92	- $4,641.92	- $4.26	$9,936.28		$9,932.02

RK 3-21-2019

APPROVED ON

MAR 12 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

The foreign currency conversion rate used to convert your foreign transactions to U.S. dollars includes a service fee of 1% assessed to Citibank by the applicable bankcard association.
Citi is committed to the reduction of paper. Within the Commercial Cards business, you can switch to online statements now by registering your card on CitiManager at https://home.cards.citidirect.com/CommercialCard/Cards.html. Thanks to those who already access statements online, together we are saving 2,170 trees each year through this initiative alone.
Your total finance charge paid for 2018 was $0.00.
Account management made easier: Online statements & CitiManager Mobile offer 24/7 access, security, and mobility. Log in at www.citimanager.com/login and click Go Paperless under the Statement tab.

CARDMEMBER SUMMARY

JASON W ANGLIN XXXX-XXXX-XX6		Previous Balance	Payments	Credits	Purchases and Advances	Interest Charges	New Balance
Monthly Limit:$20,000.00	Purchases				$7,972.69		
	Advances						
	TOTAL			- $4.26	$7,972.69		$7,968.43

DIANE C MOORE XXXX-XXXX-XX6		Previous Balance	Payments	Credits	Purchases and Advances	Interest Charges	New Balance
Monthly Limit:$20,000.00	Purchases				$1,963.59		
	Advances						
	TOTAL				$1,963.59		$1,963.59

COMPANY BOOKKEEPING DETAIL

DAYS IN BILLING PERIOD: 028					
Balance Subject		Purchases	Cash Advances	Payment Due:	$9,932.02
To Interest Charges	>	$0.00	$0.00	Amount Over Credit Limit:	$0.00
Periodic rate	>	.0000%	.0000%	Amount Past Due:	$0.00
ANNUAL PERCENTAGE RATE	>	0.00%	0.00%	MINIMUM AMOUNT DUE:	$9,932.02

citi

Company Account Number

Statement Date
03/03/2019

C0001 CALHOUN COUNTY MMC)9

Monthly Limit	Cash Limit*	Available Credit Line	Available Cash Line**
$20,000.00	$0.00	$10,067.98	$0.00

Sale Date	Post Date	Reference Number	Type of Activity	Total Amount
02/19/2019	02/20/2019	75472339051050411000280	PAYMENT THANK YOU	$4,641.92 PY

INDIVIDUAL CARDHOLDER ACTIVITY

JASON W ANGLIN)7

Monthly Limit	Cash Limit*
$20,000.00	$0.00

Sale Date	Post Date	Reference Number	Type of Activity	Amount
02/01/2019	02/04/2019	55369289032200315900015	THE US CONSULTING GROU 8566928100 NJ	$154.68
02/01/2019	02/04/2019	55369289032200315900023	THE US CONSULTING GROU 8566928100 NJ	$314.48
02/01/2019	02/04/2019	55369289032200315900031	THE US CONSULTING GROU 8566928100 NJ	$2,931.96
02/01/2019	02/04/2019	55417349033870332864023	AMERICAN 00172459913544 BELLEVUE WA ELDOHIRI/SALAHE DEPARTURE: 02-09-19 SAT AA G ORD AA G FNT	$289.00
02/01/2019	02/04/2019	55417349033870333968211	DELTA 00672459913521 BELLEVUE WA ELDOHIRI/SALAHE DEPARTURE: 02-07-19 FNT DL M ATL DL M SAT	$477.00
02/01/2019	02/04/2019	55432869032200977620598	EXPEDIA 7409586006272 EXPEDIA.COM WA	$56.00
02/01/2019	02/04/2019	55432869032200977620606	EXPEDIA 7409586006272 EXPEDIA.COM WA	$6.70
02/07/2019	02/08/2019	55436879039150391997445	PESI INC 800-8448260 WI L4265022669	$629.97
02/08/2019	02/11/2019	25247809039000789120333	TEXAS TRADITIONS GRILL PORT LAVACA TX	$195.62
02/09/2019	02/11/2019	55310209041708291383656	HOLIDAY INN EXP & SUIT PORT LAVACA TX 17334732 Arrival: 02-07-19	$262.14
02/15/2019	02/18/2019	75230979047000000054233	TEXAS SOCIETY OF INFEC 5127223717 TX	$420.00
02/19/2019	02/19/2019	55432869050100608907736	AMZN MKTP US MI6LM53Y2 AMZN.COM/BILL WA 113-3146877-76658	$19.99
02/21/2019	02/22/2019	55457029053207225507233	ELEARNING AMERICAN HEA 8882428883 TX	$2.13 CR
02/21/2019	02/22/2019	55457029053207225507274	ELEARNING AMERICAN HEA 8882428883 TX	$2.13 CR
02/21/2019	02/22/2019	55460299053006003271747	HILTON HOUSTON PLAZA HOUSTON TX 0000664938 Arrival: 02-19-19	$291.33
02/21/2019	02/22/2019	55460299053006003271838	HILTON HOUSTON PLAZA HOUSTON TX 0000664945 Arrival: 02-19-19	$306.33
02/23/2019	02/25/2019	55432869054200627092910	JW MARRIOTT AUSTIN AUSTIN TX 004346 Arrival: 02-20-19	$621.89
02/23/2019	02/25/2019	55432869054200627093785	JW MARRIOTT AUSTIN AUSTIN TX 005516 Arrival: 02-19-19	$944.73
02/28/2019	03/01/2019	25536069060101040755462	TX CII RX PADS AUSTIN TX 477112760	$50.87
			TOTAL PURCHASES/ADVANCES/CREDITS	$7,968.43

DIANE C MOORE

Monthly Limit	Cash Limit*
$20,000.00	$0.00

Sale Date	Post Date	Reference Number	Type of Activity	Amount
02/05/2019	02/07/2019	85443379037700001327903	CPSI 251-639-8100 AL	$1,350.00
02/22/2019	02/25/2019	55432869053200403253034	JW MARRIOTT AUSTIN AUSTIN TX 005698 Arrival: 02-19-19	$613.59
			TOTAL PURCHASES/ADVANCES/CREDITS	$1,963.59

*Cash Advance Limit is a portion of your Total Monthly Limit.
** Available Cash Line is a portion of your Available Credit Line

Continued on next page

Cash Management

Pending Wire Transfers

Pending Wire Transfers

Ref #	Sender Account	Beneficiary	Institution	International	Wire Type	Submit Date	Amount	Created By	Status
2556714	MEMORIAL MEDICAL CENTER - OPERATING:*4357	CBNA Incoming Settlement Account 30880985	R/T#:021000089 CITIBANK NA	No	Occasional	03/21/2019	$9,932.02	COUNTY OF CALHOUN TEXAS 03/21/2019 10:00 am CDT	Approved COUNTY OF CALHOUN TEXAS 03/21/2019 10:00 am CDT

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0556709800366701900000000000000038

Account Number	Payment Date	New Balance	Minimum Amount Due	Enter Amount Paid
	03/28/2019	$0.00	$0.00	

DIANE C MOORE
CALHOUN COUNTY
202 S ANN STREET
SUITE A
PORT LAVACA TX 77979-4204

Citibank
P.O. Box 78025
PHOENIX, AZ 85062-8025

CITIBANK CORPORATE CARD

Previous Balance	Payments and Credits	New Charges	New Balance	Credit Line
$0.00	$0.00	$0.00	$0.00	$20,000.00

Statement Date
03/03/2019

Payment Date
03/28/2019

For customer service call or write 1-800-248-4553 Citibank P.O. Box 6125 Sioux Falls, SD 57117

Send payments to: Citibank P.O. Box 78025 PHOENIX, AZ 85062-8025

Account Number	Cash Advance Limit*	Available Credit Line	Available Cash Line**
•••• ••••	$0.00	$20,000.00	$0.00

Sale Date	Post Date	Reference Number	Type of Activity			Amount
**********			**NOTICE MEMO ITEM(S) LISTED BELOW**			**********
02/05/2019	02/07/2019	8544337903770000132790 3	CPSI	251-639-8100	AL	$1,350.00
02/22/2019	02/25/2019	5543286905320040325303 4	JW MARRIOTT AUSTIN	AUSTIN	TX	$613.59
			005698	Arrival: 02-19-19		
**********			**TOTAL AMOUNT OF MEMO ITEM(S):			$1,963.59

The foreign currency conversion rate used to convert your foreign transactions to U.S. dollars includes a service fee of 1% assessed to Citibank by the applicable bankcard association.

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Your total finance charge paid for 2018 was $0.00.

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Sign-up for email or text message alerts to know when your statement is ready to view. When on the go, access your account and recent activity through your mobile device at www.citimanager.com/mobile

APPROVED ON MAR 12 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ACCOUNT SUMMARY CURRENT PERIOD	Previous Balance	Payments	Credits	Purchases and Advances	Interest Charges	New Balance
Purchases	$0.00					$0.00
Advances	$0.00					$0.00
TOTALS	$0.00					$0.00

DAYS IN BILLING PERIOD: 028	Purchases	Cash Advances		
Balance Subject To Interest Charges >	$0.00	$0.00	Payment Due:	$0.00
Periodic Rate >	.0000%	.0000%	Amount Over Credit Limit:	$0.00
ANNUAL PERCENTAGE RATE >	0.00%	0.00%	Amount Past Due:	$0.00
			MINIMUM AMOUNT DUE:	$0.00

** Cash Advance Limit is a portion of your Total Credit Line*

*** Available Cash Line is a portion of your Available Credit Line*

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Citibank

Date: 3/5/19

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required | Expense # | Department | Deliver To

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	—		~~CSP~~ CPSI - Registration			1,350.00 ✓
2			to National Client Conf. 5/19-22/19			
3			Erin Cleveger, Donna Stringo,			
4			Jenise Snetlik, Misty Passmore,			
5			Karen Gonzales, Marissa Almanzar,			
6			Adam Beggo,			
7	—		JW Marriott Austin - Hotel			613.59 ✓
8			for Diane Moore - THA Conf			
9			2/19 - 2/21/19			
10						

Est. Freight _____ Est. Total Cost _____ TOTAL COST 1963.59 ✓

NOTES:

Changes made to Diane Moore's MC

Contact:	Date:
Quoted By:	
Buyer:	E.T.A.

Dept. Director _____

Dir. Nursing _____

Adm.Dir. Clinical Service _____

CFO _____

Administrator _____

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0556709800364699700000000000000031

Account Number	Payment Date	New Balance	Minimum Amount Due	Enter Amount Paid
•••• ••••	03/28/2019	$0.00	$0.00	

JASON W ANGLIN
CALHOUN COUNTY
202 S ANN STREET
SUITE A
PORT LAVACA TX 77979-4204

Citibank
P.O. Box 78025
PHOENIX, AZ 85062-8025

CITIBANK CORPORATE CARD

Previous Balance	Payments and Credits	New Charges	New Balance	Credit Line
$0.00	$0.00	$0.00	$0.00	$20,000.00

Statement Date
03/03/2019

Payment Date
03/28/2019

For customer service call or write 1-800-248-4553 Citibank P.O. Box 6125 Sioux Falls, SD 57117

Send payments to: Citibank P.O. Box 78025 PHOENIX, AZ 85062-8025

Account Number	Cash Advance Limit*	Available Credit Line	Available Cash Line**
•••• ••••	$0.00	$20,000.00	$0.00

Sale Date	Post Date	Reference Number	Type of Activity			Amount
**********			**NOTICE MEMO ITEM(S) LISTED BELOW**			
02/01/2019	02/04/2019	55369289032200315900015	THE US CONSULTING GROU	8566928100	NJ	$154.68
02/01/2019	02/04/2019	55369289032200315900023	THE US CONSULTING GROU	8566928100	NJ	$314.48
02/01/2019	02/04/2019	55369289032200315900031	THE US CONSULTING GROU	8566928100	NJ	$2,931.96
02/01/2019	02/04/2019	55417349033870332864023	AMERICAN 00172459913544	BELLEVUE	WA	$289.00
			ELDOHIRI/SALAHE	DEPARTURE: 02-09-19		
			SAT AA G ORD AA G FNT			
02/01/2019	02/04/2019	55417349033870333968211	DELTA 00672459913521	BELLEVUE	WA	$477.00
			ELDOHIRI/SALAHE	DEPARTURE: 02-07-19		
			FNT DL M ATL DL M SAT			
02/01/2019	02/04/2019	55432869032200977620598	EXPEDIA 7409586006272	EXPEDIA.COM	WA	$56.00
02/01/2019	02/04/2019	55432869032200977620606	EXPEDIA 7409586006272	EXPEDIA.COM	WA	$6.70
02/07/2019	02/08/2019	55436879039150391997445	PESI INC	800-8448260	WI	$629.97
			L4265022669			
02/08/2019	02/11/2019	25247809039000789120333	TEXAS TRADITIONS GRILL	PORT LAVACA	TX	$195.62

ACCOUNT SUMMARY CURRENT PERIOD	Previous Balance	Payments	Credits	Purchases and Advances	Interest Charges	New Balance
Purchases	$0.00					$0.00
Advances	$0.00					$0.00
TOTALS	$0.00					$0.00

DAYS IN BILLING PERIOD: 028	Purchases	Cash Advances	
Balance Subject To Interest Charges >	$0.00	$0.00	Payment Due: $0.00
Periodic Rate >	.0000%	.0000%	Amount Over Credit Limit: $0.00
ANNUAL PERCENTAGE RATE >	0.00%	0.00%	Amount Past Due: $0.00
			MINIMUM AMOUNT DUE: $0.00

*Cash Advance Limit is a portion of your Total Credit Line
**Available Cash Line is a portion of your Available Credit Line

citi

Account Number
•••• •••• •

Statement Date
03/03/2019

Sale Date	Post Date	Reference Number	Type of Activity			Amount
NOTICE MEMO ITEM(S) LISTED BELOW						
02/09/2019	02/11/2019	55310209041708291383656	HOLIDAY INN EXP & SUIT	PORT LAVACA	TX	$262.14
			17334732	Arrival: 02-07-19		
02/15/2019	02/18/2019	75230979047000000054233	TEXAS SOCIETY OF INFEC	5127223717	TX	$420.00
02/19/2019	02/19/2019	55432869050100608907736	AMZN MKTP US MI6LM53Y2	AMZN.COM/BILL	WA	$19.99
			113-3146877-76658			
02/21/2019	02/22/2019	55457029053207225507233	ELEARNING AMERICAN HEA	8882428883	TX	$2.13 CR
02/21/2019	02/22/2019	55457029053207225507274	ELEARNING AMERICAN HEA	8882428883	TX	$2.13 CR
02/21/2019	02/22/2019	55460299053006003271747	HILTON HOUSTON PLAZA	HOUSTON	TX	$291.33
			0000664938	Arrival: 02-19-19		
02/21/2019	02/22/2019	55460299053006003271838	HILTON HOUSTON PLAZA	HOUSTON	TX	$306.33
			0000664945	Arrival: 02-19-19		
02/23/2019	02/25/2019	55432869054200627092910	JW MARRIOTT AUSTIN	AUSTIN	TX	$621.89
			004346	Arrival: 02-20-19		
02/23/2019	02/25/2019	55432869054200627093785	JW MARRIOTT AUSTIN	AUSTIN	TX	$944.73
			005516	Arrival: 02-19-19		
02/28/2019	03/01/2019	25536069060101040755462	TX CII RX PADS	AUSTIN	TX	$50.87
			477112760			
**********			TOTAL AMOUNT OF MEMO ITEM(S):			$7,968.43

The foreign currency conversion rate used to convert your foreign transactions to U.S. dollars includes a service fee of 1% assessed to Citibank by the applicable bankcard association.

Citi is committed to the reduction of paper. Within the Commercial Cards business, you can switch to online statements now by registering your card on CitiManager at https://home.cards.citidirect.com/CommercialCard/Cards.html. Thanks to those who already access statements online, together we are saving 2,170 trees each year through this initiative alone.

Your total finance charge paid for 2018 was $0.00.

Account management made easier: Online statements & CitiManager Mobile offer 24/7 access, security, and mobility. Log in at www.citimanager.com/login and click Go Paperless under the Statement tab.

Sign-up for email or text message alerts to know when your statement is ready to view. When on the go, access your account and recent activity through your mobile device at www.citimanager.com/mobile

154.68 +
314.48 +
2,931.96 +
289.00 +
477.00 +
56.00 +
6.70 +
629.97 +
195.62 +
262.14 +
420.00 +
306.33 +
291.33 +
944.73 +
50.87 +
621.89 +
19.99 +
2.13 −
2.13 −
7,968.43 =

APPROVED
ON
MAR 12 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

* Cash Advance Limit is a portion of your Total Credit Line
** Available Cash Line is a portion of your Available Credit Line

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

(1)

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Citibank

Date: 3/5/19

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required | Expense # | Department | Deliver To

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	—	Invoice 340372492 Date 8/8/18	The US Consulting Group	Waste services		154.68
2	—	Invoice # 340377220 Date 8/1/18	"	+ 3% of credit card		314.48
3	—	Invoice 340372851 date 10/9/18 Invoice 340372851 date 10/9/18	"	processing fee		2931.96
4	—		Expedia - Flights made for SA to Flint		2/9/19	289.00
5			Visiting Pain Med Doctor Flint to SA		2/7/19	477.00
6			candidate - Dr. Salahe Eldohiri	Travel Protection		56.00
7			American + Delta - Expedia	Booking fee		6.70
8	—		PESI - Registration for Penny	Rehabilitation Reimbursement		629.97
9			Goulden, Melissa Gee + Cheryl See		and pain implementation meeting 2/20/19	
10	—		Texas Tradition - Lunch for Dr. S. Eldohiri, Pain Mgmt candidate	2/8/19		195.62

Est. Freight _____ Est. Total Cost _____ TOTAL COST _____

NOTES:

Charges made to McAnglin's MC (Jason, Roshanda, Danette, Diane, Dr. Truong, Dr A-D, Michael Chacona, Rolando Reyes, & Dr. Falcon)

Contact:	Date:
Quoted By:	
Buyer:	E.T.A.

Dept. Director _____

Dir. Nursing _____

Adm.Dir. Clinical Service _____

CFO _____

Administrator _____

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

(2)

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0342

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Citibank

Date: 3/5/19

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required | Expense # | Department | Deliver To

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	—		Holiday Inn Express - DR. Eldohiri.			262.14
2			Visiting candidate 2/7/19 - 2/9/19			
3	—		TX Society of Anesthesiologists - Nadine			420.00
4			Garner - Conf 2/15/19			
5	—		Hilton - Houston - Penny Goulden - Resi conf. 2/20/19			306.33
6	—		Hilton - Houston - Cheryl See Pain conf 2/20/19			291.33
7	—		JW Marriott - Jason Angin	2/19-2/21/19		944.73
8			THA Conf			
9	—		TX CII Rx Pads - DR. Truong			50.87
10	—		JW Marriott - Erin Clevenger 2/20-2/21 THA Conf			621.89

Est. Freight _____ Est. Total Cost _____ ~~TOTAL COST~~ 19.99

NOTES: ~~Amazon~~ — Eye Vision Exam charts

Changes made to MR. Angin's MC < 2.137

— Elearning - ACLS Instructor Online Course (reimbursement of sales tax) - Durham < 2.137

" " - Rubio

Contact:	Date:
Quoted By:	
Buyer:	E.T.A.

Dept. Director _____ $ 7,968.43

Dir. Nursing _____

Adm.Dir. Clinical Service _____

CFO _____

Administrator _____

03/18/2019
12:39

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
12380	HEALTH SOLUTIONS DIETETICS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
022019	DIETICIAN	03/18/20	02/01/20	02/01/20			3,000.00	0.00	0.00	3,000.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12380	HEALTH SOLUTIONS DIETETICS	3,000.00	0.00	0.00	3,000.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	3,000.00	0.00	0.00	3,000.00

APPROVED
ON
MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#
180013

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --March 11, 2019 - March 17, 2019

Date	Bank Description	MMC Notes	Amount
3/15/2019	ACH Payment AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	2,934.34 *
3/13/2019	ACH Payment IRS USATAXPYMT 220947251839143 6103601001127	- Payroll Taxes	96,231.84 **
3/12/2019	ACH Payment MCKESSON DRUG AUTO ACH ACH03745787 910000107	- 340B Drug Program Expense	6,225.10 *
3/11/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000694155416	- 3rd Party Payor Fee	15.09
3/12/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000694888853	- 3rd Party Payor Fee	27.14
3/13/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000695644613	- 3rd Party Payor Fee	33.54
3/14/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000696360544	- 3rd Party Payor Fee	21.02
3/15/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000697081571	- 3rd Party Payor Fee	4.12
3/15/2019	ACH Payment TEXAS COUNTY DRS RECEIVABLE 0419 21000026666	- Retirement Funding	131,622.40 *
3/11/2019	ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982541616 6110	- Credit Card Processing Fee	294.19
3/11/2019	ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982589946 6110	- Credit Card Processing Fee	129.00
3/11/2019	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332385 6110	- Credit Card Processing Fee	113.26
3/11/2019	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332393 6110	- Credit Card Processing Fee	1,415.26
3/11/2019	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332401 6110	- Credit Card Processing Fee	1,272.06
3/11/2019	ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332419 6110	- Credit Card Processing Fee	63.74
			240,402.10

March 18, 2019

Jason Anglin, CEO
Memorial Medical Center

* Approved 03.13.19 cc
* Approved 03.06.19 cc

100.91 +
3,287.51 +
3,388.42 *

Check

240,402.10 +
2,934.34 -
96,231.84 -
6,225.10 -
131,622.40 -
3,388.42 *

Pay Plus

15.09 +
27.14 +
33.54 +
21.02 +
4.12 +
100.91 *

Credit Card Fee's

294.19 +
129.00 +
113.26 +
1,415.26 +
1,272.06 +
63.74 +
3,287.51 *

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"	★	19	
☐	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★	3	
	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"	★	$ 89,782.12	#
	"1 TO CONFIRM"		1	
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0	$ 46,371.34	#
	"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 10,844.72	#
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 32,566.06	#
		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	9053.00	N		N	N		173135.76
1	REGULAR PAY-S1	1951.25	N		N	N	N	82327.84
1	REGULAR PAY-S1	222.50	Y		N	N		5518.63
2	REGULAR PAY-S2	2536.25	N		N	N		56541.21
2	REGULAR PAY-S2	135.25	Y		N	N		3561.75
3	REGULAR PAY-S3	1527.75	N		N	N		40437.06
3	REGULAR PAY-S3	91.75	Y		N	N		3904.01
C	CALL PAY	176.00	N		N	N	N	352.00
C	CALL PAY	2026.00	N	1	N	N		4052.00
E	EXTRA WAGES	8.00	N		N	N	N	122.48
E	EXTRA WAGES		N	1	N	N	N	1871.50
F	FUNERAL LEAVE	8.00	N	1	N	N		197.20
I	INSERVICE	64.00	N	1	N	N		1853.94
I	INSERVICE	3.25	Y	1	N	N		155.94
J	JURY LEAVE	1.00	N	1	N	N		36.75
K	EXTENDED-ILLNESS-BANK	222.00	N	1	N	N		6269.92
P	PAID-TIME-OFF	1095.97	N	1	N	N		23556.84
X	CALL PAY 2	128.00	N	1	N	N		256.00
Z	CALL PAY 3	48.00	N	1	N	N		144.00

Deductions Summary

Code	Amount	Code	Amount	Code	Amount
A/R	945.00	A/R2	190.00	A/R3	
ADVANC		AWARDS		BOOTS	
CAFE H		CAFE-1		CAFE-2	
CAFE-3		CAFE-4		CAFE-5	
CAFE-C		CAFE-D	1608.75	CAFE-F	
CAFE-H	18675.00	CAFE-I		CAFE-L	
CAFE-P		CANCER		CHILD	
CLINIC	40.00	COMBIN	574.27	CREDUN	
DD ADV		DENTAL		DEP-LF	
DIS-LF		EAT	115.50	EATCSH	
FEDTAX	32566.06	FICA-M	5422.36	FICA-O	23185.67
FIRSTC	75.00	FLEX S	3739.71	FLX FE	
FORT D		FUTA		GIFT S	209.67
GRANT		GRP-IN		GTL	
HOSP-I		ID TFT		LEAF	
LEGAL	703.31	MASA	870.50	MEALS	216.16
MISC		MISC/		MMCSHR	
NATFML	1918.32	OTHER		PHI	
PHI***		PR FIN		RELAY	
REPAY		SAMS		SCRUBS	
SIGNON		ST-TX		STONDF	1095.00
STONE		STONE2		STUDEN	
SUNACC	940.94	SUNILL	1631.61	SUNLIF	1390.33
SUNSTD	1490.96	SUNVIS	1076.20	TSA-1	
TSA-2		TSA-C		TSA-P	
TSA-R	28315.39	TUTION		UNIFOR	569.49
UW/MOS					

Grand Totals: 19297.97 (Gross: 404294.83 Deductions: 127565.20 Net: 276729.63)

Checks Count:- FT 199 PT 7 Other 37 Female 214 Male 28 Credit OverAmt 4 ZeroNet Term Total: 242

Pay Date
03.22.19

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
3/18/2019

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		149,555.33	139,388.42	112,859.98	-	-	-	123,026.89	70,248.34
							Bank Balance	123,026.89	
							Variance	-	
							Leave in Balance	100.00	
							QIPP Payment Undistributed	-	
							MMC Portion QIPP 1	21,275.12	
							MMC Portion QIPP 2	26,857.41	
							MMC Portion QIPP 3	3,192.31	
							MMC Portion Lapse Funds	1,231.05	
							January Bank Interest	69.39	
							February Bank Interest	53.27	
							March Bank Interest	-	
							Adjust Balance/Transfer Amt	70,248.34	

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

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 Houston		162,419.22	159,684.10	70,619.38	-			73,354.50	59,406.06
							Bank Balance	73,354.50	
							Variance	-	
							Leave in Balance	100.00	
							QIPP Payment Undistributed	-	
							MMC Portion QIPP 1	5,371.78	
							MMC Portion QIPP 2	7,248.94	
							MMC Portion QIPP 3	745.88	
							MMC Portion Lapse Funds	340.20	
							January Bank Interest	88.58	
							February Bank Interest	53.06	
							March Bank Interest	-	
							Adjust Balance/Transfer Amt	59,406.06	
Crescent		36,869.34	85,976.67	44,731.18	-		-	45,623.85	41,583.33
							Bank Balance	45,623.85	
							Variance	-	
							Leave in Balance	100.00	
							QIPP Payment Undistributed	-	
							MMC Portion QIPP 1	1,708.08	
							MMC Portion QIPP 2	1,828.40	
							MMC Portion QIPP 3	207.33	
							MMC Portion Lapse Funds	84.50	
							January Bank Interest	58.69	
							February Bank Interest	53.52	
							March Bank Interest	-	
							Adjust Balance/Transfer Amt	41,583.33	

Broadmoor	117,021.13 ✓	116,797.93 ✓	24,451.02 ✓	-	-	24,674.22 ✓	24,451.02
					Bank Balance	24,674.22	
					Variance	-	
					Leave in Balance	100.00	
					MMC Portion QIPP 1	-	
					MMC Portion QIPP 2	-	
					MMC Portion QIPP 3	-	
					MMC Portion Lapse Funds	0.00	
					January Bank Interest	66.34 ✓	
					February Bank Interest	56.86 ✓	
					March Bank Interest	0	
					Adjust Balance/Transfer Amt	24,451.02 ✓	
Fort Bend	81,763.69 ✓	78,771.20 ✓	24,953.89 ✓	-	-	27,946.38	12,724.64
					Bank Balance	27,946.38	
					Variance	-	
					Leave in Balance	100.00	
					QIPP Payment Undistributed	-	
					MMC Portion QIPP 1	6,078.98 ✓	
					MMC Portion QIPP 2	7,720.24 ✓	
					MMC Portion QIPP 3	915.15 ✓	
					MMC Portion Lapse Funds	352.89 ✓	
					January Bank Interest	31.37 ✓	
					February Bank Interest	23.11 ✓	
					March Bank Interest	-	
					Adjust Balance/Transfer Amt	12,724.64	
					TOTAL TRANSFERS		**208,413.39**

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
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:
Jason Anglin, CEO 3/18/2019

70,248.34 +
59,406.06 +
41,583.33 +
24,451.02 +
12,724.64 +
208,413.39 *

APPROVED
ON
MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Ashford Gardens

	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
3/15/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		50.00					-	50.00
3/15/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		5,445.31					-	5,445.31
3/14/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3393513364 111000		80.00					-	80.00
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		19,311.67					-	19,311.67
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		9,030.32					-	9,030.32
3/13/2019 CM Wire Domestic WIRE OUT ASHFORD HEALTH CARE CENTER LTD	139,388.42						-	-
3/13/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3393449251 111000		2,212.42					-	2,212.42
3/12/2019 ACH Deposit MANAGEANDNET1718 MNS PMNT 000000000000093 41		573.30					-	573.30
3/12/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3393278571 111000		27,442.61					-	27,442.61
3/12/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		20,911.84					-	20,911.84
3/12/2019 ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		6,209.50					-	6,209.50
3/11/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3393188689 111000		1,949.28					-	1,949.28
3/11/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		410.00					-	410.00
3/11/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		16,977.92					-	16,977.92
3/11/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675423 420000149		2,255.81					-	2,255.81
							-	-
	139,388.42	112,859.98	-	-	-	-	-	112,859.98

Broadmoor

	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
3/15/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		1,134.00					-	1,134.00
3/15/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2		175.35					-	175.35
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		6,763.04					-	6,763.04
3/13/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	116,797.93						-	-
3/13/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		10,761.32					-	10,761.32
3/12/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		2,051.28					-	2,051.28
3/11/2019 ACH Deposit UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384		2,216.50					-	2,216.50
3/11/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2		1,349.53					-	1,349.53
							-	-
	116,797.93	24,451.02	-	-	-	-	-	24,451.02

Crescent

	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
3/15/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		2,308.52					-	2,308.52
3/15/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2		4,092.00					-	4,092.00
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		5,132.94					-	5,132.94
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		12,924.71					-	12,924.71
3/13/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	85,976.67						-	-
3/13/2019 ACH Deposit HUMANA INS CO EFPAYMENT 390864 8300005626072		688.77					-	688.77
3/12/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		7,239.17					-	7,239.17
3/12/2019 ACH Deposit HUMANA INS CO EFPAYMENT 390864 8300005337388		417.04					-	417.04
3/11/2019 ACH Deposit UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384		3,604.83					-	3,604.83
3/11/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		740.00					-	740.00
3/11/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		7,583.20					-	7,583.20
							-	-
	85,976.67	44,731.18	-	-	-	-	-	44,731.18

Fort Bend	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
3/15/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		515.12					-	515.12
3/15/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2		150.30					-	150.30
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		2,725.39					-	2,725.39
3/13/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	78,771.20						-	-
3/13/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		7,817.88					-	7,817.88
3/12/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		11,021.36					-	11,021.36
3/11/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2		2,723.84					-	2,723.84
							-	-
	78,771.20	24,953.89	-	-	-	-	-	24,953.89

Solera at West Houston	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
3/15/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3393583277 111000		919.66					-	919.66
3/15/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676310 420000133		3,453.83					-	3,453.83
3/15/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2		4,388.67					-	4,388.67
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		4,618.18					-	4,618.18
3/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		4,191.58					-	4,191.58
3/13/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	159,684.10						-	-
3/12/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3393278572 111000		4,195.96					-	4,195.96
3/12/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		7,573.92					-	7,573.92
3/12/2019 ACH Deposit HUMANA INS CO EFPAYMENT 390862 8300005341449		5,085.87					-	5,085.87
3/12/2019 ACH Deposit HUMANA INS CO EFPAYMENT 390862 8300005345231		6,388.07					-	6,388.07
3/12/2019 ACH Deposit HUMANA CHA DISB HCCLAIMPMT 390862 4200001479		6,390.91					-	6,390.91
3/11/2019 ACH Deposit UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384		6,454.50					-	6,454.50
3/11/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		16,760.00					-	16,760.00
3/11/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		198.23					-	198.23
							-	-
	159,684.10	70,619.38	-	-	-	-	-	70,619.38

TOTALS								
	580,618.32	277,615.45	-	-	-	-	-	277,615.45

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 ☆	$154,008.00	$123,026.89
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403 ☆	$42,956.47	$24,674.22
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411 ☆	$50,175.29	$45,623.85
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438 ☆	$83,922.01	$73,354.50
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446 ☆	$36,938.53	$27,946.38
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
TOTAL	$3,098,188.02	$2,789,284.89

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
3/19/2019

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	[redacted]	57,142.60	56,990.00	30,953.32		-	-		-	-	-	31,105.92	9,406.06
											Bank Balance	31,105.92	
											Variance	-	
											Leave in Balance	100.00	
											MMC Portion QIPP 1	18,166.20	
											MMC Portion QIPP 2	951.22	
											MMC Portion QIPP 3	1,753.63	
											MMC Portion Lapse Funds	676.21	
											January Bank Interest	26.74	
											February Bank Interest	25.86	
											March Bank Interest	-	
											Adjust Balance/Transfer Amt	9,406.06	

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

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: _____ CFO
Diane Moore, CFO 3/19/2019

APPROVED
ON
MAR 19 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
3/15/2019 ACH Deposit Centene Manageme CCD+ 38888463 3110020169862		18,166.20	18,166.20				18,166.20	-
3/14/2019 Deposit		3,025.00					-	3,025.00
3/14/2019 ACH Deposit AETNA H09 HCCLAIMPMT 1588075964 311002033492		3,000.00					-	3,000.00
3/13/2019 CM Wire Domestic WIRE OUT NEXION HEALTH AT GOLDEN CREEK	56,990.00						-	-
3/13/2019 ACH Deposit Centene Manageme CCD+ 38888463 3110020557232		6,762.12		1,902.43	3,507.27	1,352.42	3,381.06	3,381.06
							-	-
	56,990.00	30,953.32	18,166.20	1,902.43	3,507.27	1,352.42	21,547.26	9,406.06

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]	
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454 ☆	$31,105.92	$31,105.92
[redacted]	[redacted]	
TOTAL	$3,098,188.02	$2,789,284.89

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: March 20, 2019

APPROVED ON MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT $52,555.89

G/L NUMBER: 21400012

EXPLANATION: Ashford – To transfer funds for QIPP Year 1 Component 1 , 2, 3 & lapse fund adjustment and reconciliation payments .

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY:

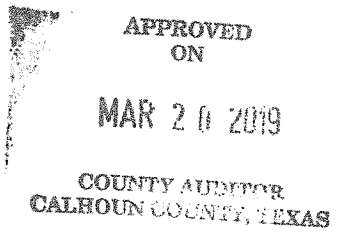
Ø

RUN DATE:03/21/19 MEMORIAL MEDICAL CENTER PAGE 1
TIME:09:23 CHECK REGISTER GLCKREG
03/21/19 THRU 03/21/19

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
NHA	000051	03/21/19	52,555.89	MMC OPERATING
TOTALS:			52,555.89	

Ashland



MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: March 20, 2019

APPROVED ON MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY
- [ ] Imprest Cash
- [ ] A/P Check
- [ ] Mail Check to Vendor
- [ ] Return Check to Dept

AMOUNT $13,706.80

G/L NUMBER: 21000011

EXPLANATION: Solera – To transfer funds for QIPP Year 1 Component 1, 2, 3 & lapse fund adjustment and reconciliation payments.

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY:

BANK	CHECK	DATE	AMOUNT	PAYEE
NHS	000045	03/20/19	13,706.80	MMC OPERATING
TOTALS:			13,706.80	

Solera

APPROVED
ON
MAR 20 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: March 20, 2019

APPROVED ON MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT $3,828.31

G/L NUMBER: 21400010

EXPLANATION: Crescent – To transfer funds for QIPP Year 1 Component 1, 2, 3 & lapse fund adjustment and reconciliation payments.

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY:

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
NHC	000047	03/20/19	3,828.31	MMC OPERATING
TOTALS:			3,828.31	

Crescent

APPROVED
ON

MAR 2 0 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: March 20, 2019

APPROVED ON MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY
- [ ] Imprest Cash
- [ ] A/P Check
- [ ] Mail Check to Vendor
- [ ] Return Check to Dept

AMOUNT $15,067.26

G/L NUMBER: 21400008

EXPLANATION: Fort Bend – To transfer funds for QIPP Year 1 Component 1, 2, 3 & lapse fund adjustment and reconciliation payments.

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY:

RUN DATE:03/20/19 MEMORIAL MEDICAL CENTER PAGE 1
TIME:15:45 CHECK REGISTER GLCKREG
03/20/19 THRU 03/20/19

BANK--CHECK				
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHF *	000045	03/20/19	15,067.26	MMC OPERATING
NHF	000047	03/20/19	.00	MMC OPERATING
TOTALS:			15,067.26	

Fort Bend

APPROVED
ON

MAR 2 0 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO: Memorial Medical Center Operating

Date Requested: March 20, 2019

APPROVED ON MAR 18 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT $21,547.26

G/L NUMBER: 21400013

EXPLANATION: Golden Creek – To transfer funds for QIPP Year 1 Component 2, 3, & lapse fund adjustment payment and QIPP Year 2 February 2019 Component 1 payment.

REQUESTED BY: Andy De Los Santos

AUTHORIZED BY:

BANK--CHECK				
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHG	000032	03/20/19	21,547.26	MMC OPERATING
TOTALS:			21,547.26	

golden creek

APPROVED
ON
MAR 20 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

- waiting for more temporary checks.

QIPP Payment to MMC from Nursing Facilities **Commissioner's Court** **3/20/2019**

NH Name	From Bank Acct #	Ck #	Payee	GL #	QIPP COMP 1	QIPP COMP 2	QIPP COM 3	LAPSE FUNDS	TOTAL		Date
Ashford	Prosperity	51	MMC -Prosperity Operating #10000001	21400012	21,275.12	26,857.41	3,192.31	1,231.05	52,555.89		3/20/2019
Broadmoor	rosperity	20	MMC -Prosperity Operating #10000001	21400009					-		
Crescent	Prosperity	47	MMC -Prosperity Operating #10000001	21400010	1,708.08	1,828.40	207.33	84.50	3,828.31 ✓		3/20/2019
Fort Bend	Prosperity	45	MMC -Prosperity Operating #10000001	21400008	6,078.98	7,720.24	915.15	352.89	15,067.26 ✓		3/20/2019
Golden Creek	- Prosperity	32 ~~34~~	MMC -Prosperity Operating #10000001	21400013	18,166.20	951.22	1,753.63	676.21	21,547.26 ✓		3/20/2019
Solera	- Prosperity	45	MMC -Prosperity Operating #10000001	21400011	5,371.78	7,248.94	745.88	340.20	13,706.80 ✓		3/20/2019
				Total:	**52,600.16**	**44,606.21**	**6,814.30**	**2,684.85**	**106,705.52**		

Note:

under $5,000
3-19-19

APPROVED
ON

MAR 20 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
NH SOLERA AT WEST HOUSTON
815 N VIRGINIA ST
PORT LAVACA, TX 77979

87SS

No. 45

88-2265
1131

3-20-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 13,700.80

Thirteen Thousand Seven Hundred Six & 80/100 DOLLARS

PROSPERITY BANK

QIPP Adj. & Recon. Pmt

County Auditor

County Treasurer

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

MEMORIAL MEDICAL CENTER
NH FORT BEND
815 N VIRGINIA ST
PORT LAVACA, TX 77979

MP

000045

88-2265/1131

Date 3-20-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 15,067.26

Fifteen Thousand Sixty-Seven & 26/100 **DOLLARS**

PROSPERITY BANK

FOR QIPP Adj. & Reconciliation Pmt

County Auditor

MP
County Treasurer

Security features are included. Details on back.

⑈000045⑈

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MEMORIAL MEDICAL CENTER
NH GOLDEN CREEK HEALTHCARE & REHAB
815 N VIRGINIA ST
PORT LAVACA, TX 77979

MP

000032

88-2265/1131

Date 3-20-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 21,547.26

Twenty-one Thousand Five Hundred Fourty-Seven & 26/100 **DOLLARS**

PROSPERITY BANK

FOR QIPP Adj. & Reconciliation Pmt.

County Auditor

MP
County Treasurer

Security features are included. Details on back.

⑈000032⑈

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

MEMORIAL MEDICAL CENTER
NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

MP

000047

Date 3-20-19

88-2265/1131

PAY TO THE ORDER OF Memorial Medical Centes Operating | $ 3,828.31

Three Thousand Eight Hundred Twenty-eight & 31/100 **DOLLARS**

PROSPERITY BANK

County Auditor

MP

County Treasurer

FOR QIPP v1 Adj. & Reconciliation Pmt

Security features are included. Details on back.

⑈000047⑈ ⑆ ⑆ ⑈

MEMORIAL MEDICAL CENTER
NH ASHFORD
815 N VIRGINIA ST
PORT LAVACA, TX 77979

87SS

No. 51

68-2285
1131

3-21-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 52,555.89

Fifty-two Thousand Five hundred fifty-five & 89/100 DOLLARS

PROSPERITY BANK

QHPP Y1 Adj. & Reconciliation