

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- May 08, 2019

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 353,619.15
TOTAL TRANSFERS BETWEEN FUNDS	\$ 200,000.00
TOTAL NURSING HOME UPL EXPENSES	\$ 764,055.09
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED May 08, 2019	\$ 1,317,674.24

APPROVED

MAY 08 2019

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---May 08, 2019

PAYABLES AND PAYROLL

5/6/2019 Weekly Payables	349,109.30
5/6/2019 McKesson-340B Prescription Expense	3,663.95
5/6/2019 Amerisource Bergen-340B Prescription Expense	761.21

Prosperity Electronic Bank Payments

4/29-5/3/19 Pay Plus-Patient Claims Processing Fee	74.69
5/2/2019 Authnet Gateway Billing-3rd Party Payor Fee	10.00

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 353,619.15
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TRANSFERS BETWEEN FUNDS

5/6/2019 Transfer from Prosperity Operating to Prosperity Private Waiver	200,000.00
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TOTAL TRANSFERS BETWEEN FUNDS	\$ 200,000.00
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NURSING HOME UPL EXPENSES

5/6/2019 Nursing Home UPI	630,030.49
5/6/2019 Nursing Home UPI	25,515.50

QIPP/INTEREST CHECKS TO MMC

5/6/2019 Ashford	31,359.41
5/6/2019 Solera	8,884.83
5/6/2019 Crescent	5,948.96
5/6/2019 Broadmoor	6,098.18
5/6/2019 Fort Bend	12,755.50
5/6/2019 Golden Creek	43,462.22

TOTAL NURSING HOME UPL EXPENSES	\$ 764,055.09
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TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
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GRAND TOTAL DISBURSEMENTS APPROVED May 08, 2019	\$ 1,317,674.24
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RECEIVED**MAY 02 2019**
05/02/2019

California County Auditor

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 05/18/2019

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ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code							
11283	ACE HARDWARE 15521 ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
133196 ✓		04/17/20	04/10/20	05/10/20		109.10	0.00	0.00	109.10 ✓	
	SUPPLIES (Maint.)									
133240 ✓		04/17/20	04/11/20	05/11/20		55.04	0.00	0.00	55.04 ✓	
	SUPPLIES (Maint.)									
133259 ✓		04/17/20	04/11/20	05/11/20		8.99	0.00	0.00	8.99 ✓	
	SUPPLIES (Maint.)									
133265 ✓		04/17/20	04/12/20	05/12/20		4.59	0.00	0.00	4.59 ✓	
	SUPPLIES (Maint.)									
133331 ✓		04/17/20	04/15/20	05/15/20		27.99	0.00	0.00	27.99 ✓	
	SUPPLIES (Maint.)									
133616 ✓		04/30/20	04/26/20	04/26/20		54.56	0.00	0.00	54.56 ✓	
	SUPPLIES (Maint.)									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11283 ACE HARDWARE 15521					260.27	0.00	0.00	260.27	

Vendor#	Vendor Name	Class	Pay Code							
10958	ALLYSON SWOPE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
042519		04/30/20	04/25/20	04/25/20		2,448.00	0.00	0.00	2,448.00 ✓	
	CONTRACT EMPLOYEE									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	10958 ALLYSON SWOPE					2,448.00	0.00	0.00	2,448.00	

Vendor#	Vendor Name	Class	Pay Code							
A2600	AUTO PARTS & MACHINE CO. ✓	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
895651 ✓		04/30/20	04/24/20	05/09/20		17.95	0.00	0.00	17.95 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	A2600 AUTO PARTS & MACHINE CO.					17.95	0.00	0.00	17.95	

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	
62866176 ✓		04/24/20	04/16/20	05/11/20		386.41	0.00	0.00	386.41 ✓	
	SUPPLIES									
62864819 ✓		04/24/20	04/16/20	05/11/20		614.93	0.00	0.00	614.93 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	B1150 BAXTER HEALTHCARE					1,001.34	0.00	0.00	1,001.34	

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	
107678304 ✓		04/30/20	04/09/20	05/04/20		272.93	0.00	0.00	272.93 ✓	
	SUPPLIES Shipping 32.03									
107679911 ✓		04/30/20	04/09/20	05/04/20		40.80	0.00	0.00	40.80 ✓	
	SUPPLIES									
107681693 ✓		04/30/20	04/10/20	05/05/20		2,740.13	0.00	0.00	2,740.13 ✓	

		SUPPLIES <i>Shipping 32.03</i>							
107684960	✓	04/30/20	04/12/20	05/07/20	4,233.46	0.00	0.00	4,233.46	✓
		MAINT CONTRACT							
107689291	✓	04/30/20	04/15/20	05/10/20	32.03	0.00	0.00	32.03	✓
		SHIPPING							
107693468	✓	04/30/20	04/17/20	05/12/20	32.03	0.00	0.00	32.03	✓
		SUPPLIES <i>Shipping</i>							
107698345	✓	04/30/20	04/19/20	05/14/20	163.64	0.00	0.00	163.64	✓
		SUPPLIES <i>Shipping 7.26</i>							
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		B1220	BECKMAN COULTER INC		7,515.02	0.00	0.00	7,515.02	
Vendor#	Vendor Name	Class		Pay Code					
C0400	C-D ELECTRIC ✓	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
CIT27202	✓	04/30/20	03/19/20	04/19/20	3,350.00	0.00	0.00	3,350.00	✓
		MOTOR <i>Baldor Reliance Motor for cooling Tower - shipping 150.00</i>							
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		C0400	C-D ELECTRIC		3,350.00	0.00	0.00	3,350.00	
Vendor#	Vendor Name	Class		Pay Code					
11224	CABLES AND SENSORS ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
66002	✓	04/30/20	02/27/20	02/27/20	82.00	0.00	0.00	82.00	✓
		SUPPLIES <i>Shipping 10.00</i>							
66497	✓	04/30/20	03/06/20	04/06/20	82.00	0.00	0.00	82.00	✓
		SUPPLIES <i>Shipping 10.00</i>							
3451	✓	04/30/20	03/12/20	03/12/20	-72.00	0.00	0.00	-72.00	✓
		CREDIT							
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11224	CABLES AND SENSORS		92.00	0.00	0.00	92.00	
Vendor#	Vendor Name	Class		Pay Code					
C1048	CALHOUN COUNTY ✓	W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
051519		04/30/20	04/23/20	04/23/20	29.63	0.00	0.00	29.63	✓
		FUEL							
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		C1048	CALHOUN COUNTY		29.63	0.00	0.00	29.63	
Vendor#	Vendor Name	Class		Pay Code					
C1325	CARDINAL HEALTH 414, INC. ✓	W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
8001912507	✓	04/30/20	04/06/20	05/01/20	255.63	0.00	0.00	255.63	✓
		SUPPLIES							
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		C1325	CARDINAL HEALTH 414, INC.		255.63	0.00	0.00	255.63	
Vendor#	Vendor Name	Class		Pay Code					
11202	CFI MECHANICAL INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
SD6650	✓	04/30/20	04/02/20	05/02/20	5,995.00	0.00	0.00	5,995.00	✓
		ANNUAL INSPECTION <i>OF chillers</i>							
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11202	CFI MECHANICAL INC		5,995.00	0.00	0.00	5,995.00	
Vendor#	Vendor Name	Class		Pay Code					
C1166	COASTAL OFFICE SOLUTIONS ✓	W							

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
OE233971 ✓		04/22/20	04/16/20	05/16/20		130.00	0.00	0.00	130.00 ✓
SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C1166	COASTAL OFFICE SOLUTIONS				130.00	0.00	0.00	130.00
Vendor#	Vendor Name			Class	Pay Code				
12536	COMMAND ELECTRIC LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
000125 ✓		04/17/20	04/12/20	05/12/20		1,520.00	0.00	0.00	1,520.00 ✓
ELECTRICAL WORK									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	12536	COMMAND ELECTRIC LLC				1,520.00	0.00	0.00	1,520.00
Vendor#	Vendor Name			Class	Pay Code				
10646	COVIDIEN ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
MM030519N		04/30/20	03/15/20	03/25/20		4,886.00	0.00	0.00	4,886.00 ✓
ANNUAL CONTRACT (840 Ventilator)									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10646	COVIDIEN				4,886.00	0.00	0.00	4,886.00
Vendor#	Vendor Name			Class	Pay Code				
10509	DA&E ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
12601 ✓		04/30/20	04/23/20	04/23/20		1,780.00	0.00	0.00	1,780.00 ✓
CAH MEDICARE REIMB ASSIS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10509	DA&E				1,780.00	0.00	0.00	1,780.00
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
5693250 ✓		04/23/20	04/15/20	05/10/20		1,083.38	0.00	0.00	1,083.38 ✓
SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON				1,083.38	0.00	0.00	1,083.38
Vendor#	Vendor Name			Class	Pay Code				
10789	DISCOVERY MEDICAL NETWORK INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
MMC043019 ✓		04/30/20	04/30/20	04/30/20		156,147.82	0.00	0.00	156,147.82 ✓
PRO FEES CLINIC									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10789	DISCOVERY MEDICAL NETWORK INC				156,147.82	0.00	0.00	156,147.82
Vendor#	Vendor Name			Class	Pay Code				
11201	DOROTHY LONGORIA ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
5044 ✓		04/30/20	04/25/20	04/25/20		52.07	0.00	0.00	52.07 ✓
SUPPLIES									
042519		04/30/20	04/25/20	04/25/20		9.36	0.00	0.00	9.36 ✓
EGGS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11201	DOROTHY LONGORIA				61.43	0.00	0.00	61.43
Vendor#	Vendor Name			Class	Pay Code				
12428	DR. MARSHALL COOK ✓								

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
050119		04/30/20	04/26/20	04/26/20		460.89	0.00	0.00	460.89 ✓
SUPPLIES for Surgery Dept.									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
12428 DR. MARSHALL COOK						460.89	0.00	0.00	460.89
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
37794 ✓		04/30/20	04/30/20	04/30/20		40,062.50	0.00	0.00	40,062.50 ✓
ER STAFFING									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
11284 EMERGENCY STAFFING SOLUTIONS						40,062.50	0.00	0.00	40,062.50
Vendor#	Vendor Name				Class	Pay Code			
E1320	EPIMED ✓				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
17169USA ✓		04/24/20	04/15/20	05/15/20		59.63	0.00	0.00	59.63 ✓
SUPPLIES Shipping 27.03									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
E1320 EPIMED						59.63	0.00	0.00	59.63
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
641860938 ✓		04/30/20	04/11/20	05/06/20		61.22	0.00	0.00	61.22 ✓
SHIPPING									
652512515 ✓		04/30/20	04/18/20	05/13/20		83.36	0.00	0.00	83.36 ✓
SHIPPING									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
F1100 FEDERAL EXPRESS CORP.						144.58	0.00	0.00	144.58
Vendor#	Vendor Name				Class	Pay Code			
11037	FIRST CLEARING ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
041119		04/30/20	04/11/20	04/11/20		75.00	0.00	0.00	75.00 ✓
PAYROLL DED									
042519		04/30/20	04/25/20	04/25/20		75.00	0.00	0.00	75.00 ✓
PAYROLL DED									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
11037 FIRST CLEARING						150.00	0.00	0.00	150.00
Vendor#	Vendor Name				Class	Pay Code			
F1400	FISHER HEALTHCARE ✓				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
0255243 ✓		04/24/20	04/17/20	05/12/20		5,068.59	0.00	0.00	5,068.59 ✓
SUPPLIES									
0475389 ✓		04/30/20	04/19/20	05/14/20		725.15	0.00	0.00	725.15 ✓
SUPPLIES									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
F1400 FISHER HEALTHCARE						5,793.74	0.00	0.00	5,793.74
Vendor#	Vendor Name				Class	Pay Code			
12552	GCWDB ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2019069		04/30/20	04/01/20	04/01/20		50.00	0.00	0.00	50.00 ✓
TX WORKFORCE SOL. JOB FA in booth									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net

	12552	GCWDB				50.00	0.00	0.00	50.00
Vendor#	Vendor Name				Class	Pay Code			
11984	GUERBET, LLC ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	18341311 ✓		04/24/20	04/09/20	05/09/20	525.00	0.00	0.00	525.00 ✓
	SUPPLIES								
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
			11984	GUERBET, LLC		525.00	0.00	0.00	525.00
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
	1657366 ✓		04/24/20	04/09/20	05/09/20	650.27	0.00	0.00	650.27 ✓
	SUPPLIES								
	1657363 ✓		04/24/20	04/09/20	05/09/20	71.88	0.00	0.00	71.88 ✓
	SUPPLIES								
	1658573 ✓		04/24/20	04/10/20	05/10/20	30.13	0.00	0.00	30.13 ✓
	SUPPLIES								
	1661074 ✓		04/24/20	04/16/20	05/16/20	787.91	0.00	0.00	787.91 ✓
	SUPPLIES								
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
			G1210	GULF COAST PAPER COMPANY		1,540.19	0.00	0.00	1,540.19
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
	042619		04/26/20	04/26/20	04/26/20	3,000.00	0.00	0.00	3,000.00 ✓
	DIETICIAN (4/4/19-4/26/19)								
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
			12380	HEALTH SOLUTIONS DIETETICS		3,000.00	0.00	0.00	3,000.00
Vendor#	Vendor Name				Class	Pay Code			
H0416	HOLOGIC INC ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	8954056 ✓		04/24/20	04/11/20	05/11/20	236.25	0.00	0.00	236.25 ✓
	SUPPLIES								
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
			H0416	HOLOGIC INC		236.25	0.00	0.00	236.25
Vendor#	Vendor Name				Class	Pay Code			
10442	INTERSTATE ALL BATTERY CENTER ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	123848		04/23/20	04/15/20	05/15/20	227.80	0.00	0.00	227.80 ✓
	14011020 145627 SUPPLIES								
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
			10442	INTERSTATE ALL BATTERY CENTER		227.80	0.00	0.00	227.80
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
	2028442 ✓		04/30/20	04/24/20	04/24/20	574.73	0.00	0.00	574.73 ✓
	TRAVEL								
	416470 ✓		04/30/20	04/24/20	04/25/20	17,640.00	0.00	0.00	17,640.00 ✓
	PRO FEES CLINIC (Pain Management - Dr. Papapetrou)								
	2028565 ✓		04/30/20	04/25/20	04/25/20	32.30	0.00	0.00	32.30 ✓
	FUEL								

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11230	JACKSON & COKER LOCUM TENENS,			18,247.03	0.00	0.00	18,247.03
Vendor#	Vendor Name			Class	Pay Code				
10972	M G TRUST ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
041119		04/30/20	04/11/20	04/11/20		1,095.00	0.00	0.00	1,095.00 ✓
PAYROLL DED									
042519		04/30/20	04/25/20	04/25/20		1,095.00	0.00	0.00	1,095.00 ✓
PAYROLL DED									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10972	M G TRUST			2,190.00	0.00	0.00	2,190.00
Vendor#	Vendor Name			Class	Pay Code				
11612	MASA ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
672771MKMMC ✓		04/30/20	03/22/20	04/22/20		1,498.00	0.00	0.00	1,498.00 ✓
INSURANCE									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11612	MASA			1,498.00	0.00	0.00	1,498.00
Vendor#	Vendor Name			Class	Pay Code				
M2178	MCKESSON MEDICAL SURGICAL INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
52154050 ✓		04/24/20	04/16/20	05/16/20		2,072.27	0.00	0.00	2,072.27 ✓
SUPPLIES									
51201608 ✓		04/30/20	04/03/20	05/03/20		26,273.00	0.00	0.00	26,273.00 ✓
SUPPLIES (Verification Package, Filmaru FA qipanel IVD Respiratory Test Kit)									
51275188 ✓		04/30/20	04/04/20	05/04/20		140.65	0.00	0.00	140.65 ✓
SUPPLIES									
51755928 ✓		04/30/20	04/10/20	05/10/20		907.16	0.00	0.00	907.16 ✓
SUPPLIES Shipping 109.63									
52244684 ✓		04/30/20	04/17/20	05/17/20		24.92	0.00	0.00	24.92 ✓
SUPPLIES									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		M2178	MCKESSON MEDICAL SURGICAL INC			29,418.00	0.00	0.00	29,418.00
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
9008880		04/24/20	04/09/20	05/09/20		264.06	0.00	0.00	264.06 ✓
SUPPLIES Shipping 69.04									
90088879 ✓		04/24/20	04/09/20	05/09/20		411.41	0.00	0.00	411.41 ✓
SUPPLIES Shipping 11.41									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		M2827	MEDIVATORS			675.47	0.00	0.00	675.47
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
1873869805 ✓		04/17/20	04/17/20	05/12/20		30.17	0.00	0.00	30.17 ✓
SUPPLIES									
1874747681 ✓		04/24/20	04/16/20	05/11/20		74.39	0.00	0.00	74.39 ✓
44 SUPPLIES Shipping 18.77									
1875757685 ✓		04/24/20	04/16/20	05/11/20		2,835.85	0.00	0.00	2,835.85 ✓
SUPPLIES									
1874747690 ✓		04/24/20	04/16/20	05/11/20		198.24	0.00	0.00	198.24 ✓

		SUPPLIES									
1874747688	✓		04/24/20	04/16/20	05/11/20		1,034.09	0.00	0.00	1,034.09	✓
		SUPPLIES									
1874747682	✓		04/24/20	04/16/20	05/11/20		61.63	0.00	0.00	61.63	✓
		SUPPLIES									
1874747680	✓		04/24/20	04/16/20	05/11/20		156.44	0.00	0.00	156.44	✓
		SUPPLIES									
1874747692	✓		04/24/20	04/16/20	05/11/20		93.47	0.00	0.00	93.47	✓
		SUPPLIES	Shipping 30.49								
1874835242	✓		04/24/20	04/17/20	05/12/20		172.56	0.00	0.00	172.56	✓
		SUPPLIES									
1874835240	✓		04/24/20	04/17/20	05/12/20		93.80	0.00	0.00	93.80	✓
		SUPPLIES									
1874835243	✓		04/24/20	04/17/20	05/12/20		38.74	0.00	0.00	38.74	✓
		SUPPLIES	Shipping 16.45								
1874835244	✓		04/24/20	04/17/20	05/12/20		35.25	0.00	0.00	35.25	✓
		SUPPLIES	Shipping 18.77 on 16.45								
1874835238	✓		04/24/20	04/17/20	05/12/20		113.90	0.00	0.00	113.90	✓
		SUPPLIES	Shipping 16.46								
1874835239	✓		04/24/20	04/17/20	05/12/20		115.11	0.00	0.00	115.11	✓
		SUPPLIES	Shipping 17.97								
Vendor Totals							Number	Discount	No-Pay	Net	
							M2470 MEDLINE INDUSTRIES INC	5,053.64	0.00	0.00	5,053.64
Vendor#	Vendor Name					Class	Pay Code				
10963	MEMORIAL MEDICAL CLINIC ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
	041119		04/30/20	04/11/20	04/11/20		60.00	0.00	0.00	60.00	✓
	PAYROLL DED										
	042519		04/30/20	04/25/20	04/25/20		215.00	0.00	0.00	215.00	✓
	PAYROLL DED										
Vendor Totals							Number	Discount	No-Pay	Net	
							10963 MEMORIAL MEDICAL CLINIC	275.00	0.00	0.00	275.00
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	
	2161923		04/24/20	04/09/20	05/09/20		76.13	0.00	0.00	76.13	✓
	SUPPLIES Shipping 18.13										
Vendor Totals							Number	Discount	No-Pay	Net	
							10182 MERCEDES SCIENTIFIC	76.13	0.00	0.00	76.13
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	
	4151454		04/30/20	04/24/20	05/04/20		62.73	0.00	0.00	62.73	✓
	INVENTORY										
	4151450		04/30/20	04/24/20	05/04/20		19.74	0.00	0.00	19.74	✓
	INVENTORY										
	4151449		04/30/20	04/24/20	05/04/20		202.63	0.00	0.00	202.63	✓
	INVENTORY										
	4151452		04/30/20	04/24/20	05/04/20		1,281.75	0.00	0.00	1,281.75	✓
	INVENTORY										
	4151453		04/30/20	04/24/20	05/04/20		250.90	0.00	0.00	250.90	✓

4151451	✓	INVENTORY	04/30/20	04/24/20	05/04/20	95.17	0.00	0.00	95.17	✓
4152490	✓	INVENTORY	04/30/20	04/25/20	05/05/20	2,434.10	0.00	0.00	2,434.10	✓
4152907	✓	INVENTORY	04/30/20	04/25/20	05/05/20	486.34	0.00	0.00	486.34	✓
4154305	✓	INVENTORY	04/30/20	04/25/20	05/05/20	1,600.38	0.00	0.00	1,600.38	✓
4154304	✓	INVENTORY	04/30/20	04/25/20	05/05/20	2,226.50	0.00	0.00	2,226.50	✓
4152906	✓	INVENTORY	04/30/20	04/25/20	05/05/20	282.26	0.00	0.00	282.26	✓
4154463	✓	INVENTORY	04/30/20	04/25/20	05/05/20	85.31	0.00	0.00	85.31	✓
4154306	✓	INVENTORY	04/30/20	04/25/20	05/05/20	168.85	0.00	0.00	168.85	✓
4152905	✓	INVENTORY	04/30/20	04/25/20	05/05/20	17.13	0.00	0.00	17.13	✓
4159323	✓	INVENTORY	04/30/20	04/26/20	05/06/20	77.17	0.00	0.00	77.17	✓
4159435	✓	INVENTORY	04/30/20	04/26/20	05/06/20	31.11	0.00	0.00	31.11	✓
4159434	✓	INVENTORY	04/30/20	04/26/20	05/06/20	1,333.48	0.00	0.00	1,333.48	✓
4159436	✓	INVENTORY	04/30/20	04/26/20	05/06/20	472.71	0.00	0.00	472.71	✓
4163973	✓	INVENTORY	04/30/20	04/29/20	05/09/20	282.50	0.00	0.00	282.50	✓
4163972	✓	INVENTORY	04/30/20	04/29/20	05/09/20	50.46	0.00	0.00	50.46	✓
4165628	✓	INVENTORY	04/30/20	04/29/20	05/09/20	2,003.43	0.00	0.00	2,003.43	✓
4165630	✓	INVENTORY	04/30/20	04/29/20	05/09/20	42.95	0.00	0.00	42.95	✓
4165627	✓	INVENTORY	04/30/20	04/29/20	05/09/20	265.94	0.00	0.00	265.94	✓
4165629	✓	INVENTORY	04/30/20	04/29/20	05/09/20	607.78	0.00	0.00	607.78	✓
SC1527	✓	INVENTORY	04/30/20	04/30/20	05/10/20	91.50	0.00	0.00	91.50	✓
417086	✓	SERVICE CHARGE	04/30/20	04/30/20	05/10/20	92.29	0.00	0.00	92.29	✓
4171087	✓	INVENTORY	04/30/20	04/30/20	05/10/20	999.82	0.00	0.00	999.82	✓
4171088	✓	INVENTORY	04/30/20	04/30/20	05/10/20	475.84	0.00	0.00	475.84	✓
Vendor Totals Number Name						Gross	Discount	No-Pay	Net	
10536		MORRIS & DICKSON CO, LLC				16,040.77	0.00	0.00	16,040.77	
Vendor#	Vendor Name		Class		Pay Code					
11064	MSDSOONLINE, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	

196411 ✓		04/30/20 03/07/20 04/06/20		3,849.00	0.00	0.00	3,849.00 ✓
RENEWAL							
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
11064 MSDSONLINE, INC				3,849.00	0.00	0.00	3,849.00
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
042919		04/30/20	04/29/20	04/29/20	276.32	0.00	0.00 276.32 ✓
TRAVEL <i>Texas Society of Infection Control: prevention Conf. 4/25-4/26/19</i>							
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
A2252 NADINE GARNER				276.32	0.00	0.00	276.32
Vendor#	Vendor Name			Class	Pay Code		
11144	NAZARIO HERNANDEZ ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay Net
042419		04/30/20	04/24/20	04/24/20	21.98	0.00	0.00 21.98 ✓
SUPPLIES							
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
11144 NAZARIO HERNANDEZ				21.98	0.00	0.00	21.98
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
97365191 ✓		04/24/20	04/15/20	05/10/20	118.37	0.00	0.00 118.37 ✓
SUPPLIES							
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
O1500 OLYMPUS AMERICA INC				118.37	0.00	0.00	118.37
Vendor#	Vendor Name			Class	Pay Code		
11069	PABLO GARZA ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay Net
043019		04/30/20	04/23/20	04/30/20	2,145.00	0.00	0.00 2,145.00 ✓
CONTRACT EMPLOYEE							
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
11069 PABLO GARZA				2,145.00	0.00	0.00	2,145.00
Vendor#	Vendor Name			Class	Pay Code		
P2180	POSITIVE PROMOTIONS ✓			M			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay Net
06261650 ✓		04/23/20	04/12/20	05/12/20	229.95	0.00	0.00 229.95 ✓
SUPPLIES							
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
P2180 POSITIVE PROMOTIONS				229.95	0.00	0.00	229.95
Vendor#	Vendor Name			Class	Pay Code		
10782	PRIVATE WAIVER CLEARING ACCT ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay Net
050119		04/30/20	05/01/20	05/01/20	200,000.00	0.00	0.00 200,000.00 ✓
TO REPLENISH PW CLEARING							
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
10782 PRIVATE WAIVER CLEARING ACCT				200,000.00	0.00	0.00	200,000.00
Vendor#	Vendor Name			Class	Pay Code		
10896	QIAGEN INC ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay Net
98855237 ✓		04/24/20	04/09/20	05/09/20	208.49	0.00	0.00 208.49 ✓
SUPPLIES <i>Shipping 46.49</i>							

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10896	QIAGEN INC			208.49	0.00	0.00	208.49
Vendor#	Vendor Name			Class	Pay Code				
11080	RADSOURCE ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	SC58840 ✓		04/23/20	04/16/20	05/11/20	1,625.00	0.00	0.00	1,625.00 ✓
		RAD SERVICES							
	5 SC8823 ✓		04/23/20	04/22/20	05/17/20	1,667.00	0.00	0.00	1,667.00 ✓
		RAD SERVICE							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11080	RADSOURCE			3,292.00	0.00	0.00	3,292.00
Vendor#	Vendor Name			Class	Pay Code				
D1080	RITA DAVIS ✓			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	050119		04/30/20	04/14/20	04/24/20	419.75	0.00	0.00	419.75 ✓
		CONTRACT EMPLOYEE (1/11/19, 4/22/19, 4/23/19, 4/24/19, 4/25/19)							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		D1080	RITA DAVIS			419.75	0.00	0.00	419.75
Vendor#	Vendor Name			Class	Pay Code				
S0900	SAM'S CLUB DIRECT ✓			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	006531		04/30/20	03/27/20	03/27/20	23.56	0.00	0.00	23.56 ✓
		FOOD SUPPLIES							
	008823		04/30/20	04/07/20	04/07/20	53.04	0.00	0.00	53.04 ✓
		SUPPLIES							
	007247		04/30/20	04/08/20	04/08/20	133.15	0.00	0.00	133.15 ✓
		FOOD SUPPLIES							
	008455		04/30/20	04/14/20	04/14/20	46.56	0.00	0.00	46.56 ✓
		SUPPLIES							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		S0900	SAM'S CLUB DIRECT			256.31	0.00	0.00	256.31
Vendor#	Vendor Name			Class	Pay Code				
S1405	SERVICE SUPPLY OF VICTORIA INC ✓			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	700998551 ✓		04/30/20	04/23/20	05/16/20	5,166.70	0.00	0.00	5,166.70 ✓
		250 STORAGE TANK							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		S1405	SERVICE SUPPLY OF VICTORIA INC			5,166.70	0.00	0.00	5,166.70
Vendor#	Vendor Name			Class	Pay Code				
K0536	SHIRLEY KARNEI ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	043019		04/30/20	04/30/20	04/30/20	475.97	0.00	0.00	475.97 ✓
		CONTRACT EMPLOYEE							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		K0536	SHIRLEY KARNEI			475.97	0.00	0.00	475.97
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
	8568721 ✓		04/30/20	04/23/20	05/18/20	37.95	0.00	0.00	37.95 ✓
		SUPPLIES Freight 9.99							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		S2270	SMILE MAKERS			37.95	0.00	0.00	37.95

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	
90044823 ✓		04/30/20	04/16/20	05/11/20		7,130.00	0.00	0.00	7,130.00	✓
	SUPPLIES									
90044744 ✓		04/30/20	04/16/20	05/11/20		-2,070.00	0.00	0.00	-2,070.00	✓
	CREDIT									
Vendor Totals				Number	Name	Gross	Discount	No-Pay	Net	
				11296	SOUTH TEXAS BLOOD & TISSUE CEN	5,060.00	0.00	0.00	5,060.00	
Vendor#	Vendor Name	Class	Pay Code							
10094	ST DAVIDS HEALTHCARE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
MMCPL201903 ✓		04/30/20	04/25/20	04/25/20		420.00	0.00	0.00	420.00	✓
	TELENEURO <i>Connectivity fee</i>									
Vendor Totals				Number	Name	Gross	Discount	No-Pay	Net	
				10094	ST DAVIDS HEALTHCARE	420.00	0.00	0.00	420.00	
Vendor#	Vendor Name	Class	Pay Code							
11640	STORAWAY & STASH-AWAY ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
041519		04/30/20	04/15/20	04/15/20		510.00	0.00	0.00	510.00	✓
	6 MONTHS RENT									
Vendor Totals				Number	Name	Gross	Discount	No-Pay	Net	
				11640	STORAWAY & STASH-AWAY	510.00	0.00	0.00	510.00	
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	
8400299015 ✓		04/23/20	04/15/20	05/10/20		1,229.91	0.00	0.00	1,229.91	✓
	LAUNDRY									
8400298983 ✓		04/23/20	04/15/20	05/10/20		47.15	0.00	0.00	47.15	✓
	LAUNDRY									
8400298984 ✓		04/23/20	04/15/20	05/10/20		57.14	0.00	0.00	57.14	✓
	LAUNDRY									
8400299348 ✓		04/23/20	04/18/20	05/13/20		1,107.88	0.00	0.00	1,107.88	✓
	LAUNDRY									
8400299308 ✓		04/23/20	04/18/20	05/13/20		17.00	0.00	0.00	17.00	✓
	LAUNDRY									
8400299333 ✓		04/23/20	04/18/20	05/13/20		79.36	0.00	0.00	79.36	✓
	LAUNDRY									
8400299377 ✓		04/23/20	04/18/20	05/13/20		144.43	0.00	0.00	144.43	✓
	LAUNDRY									
8400299311 ✓		04/23/20	04/18/20	05/13/20		180.93	0.00	0.00	180.93	✓
	LAUNDRY									
8400299312 ✓		04/23/20	04/18/20	05/13/20		162.89	0.00	0.00	162.89	✓
	LAUNDRY									
8400299310 ✓		04/23/20	04/18/20	05/13/20		110.49	0.00	0.00	110.49	✓
	LAUNDRY									
8400299313 ✓		04/23/20	04/18/20	05/13/20		175.83	0.00	0.00	175.83	✓
	LAUNDRY									
8400299557 ✓		04/23/20	04/22/20	05/17/20		1,343.05	0.00	0.00	1,343.05	✓
	LAUNDRY									
8400299526 ✓		04/23/20	04/22/20	05/17/20		47.15	0.00	0.00	47.15	✓

LAUNDRY												
8400299527	✓		04/23/20	04/22/20	05/17/20		77.82	0.00	0.00	77.82	✓	
LAUNDRY												
8400299527	5698320		04/30/20	04/22/20	05/17/20		114.48	0.00	0.00	114.48	✓	
LAUNDRY												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							U1064	UNIFIRST HOLDINGS INC	4,895.51	0.00	0.00	4,895.51
Vendor#	Vendor Name					Class	Pay Code					
U1800	UTAH MEDICAL PRODUCTS INC					M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
178839		04/24/20	04/16/20	05/16/20			226.07	0.00	0.00	226.07		
SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							U1800	UTAH MEDICAL PRODUCTS INC	226.07	0.00	0.00	226.07
Vendor#	Vendor Name					Class	Pay Code					
10793	WAGeworks ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
041119		04/30/20	04/11/20	04/11/20			3,764.71	0.00	0.00	3,764.71	✓	
PAYROLL DED												
042519		04/30/20	04/25/20	04/25/20			3,735.86	0.00	0.00	3,735.86	✓	
PAYROLL DED												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10793	WAGeworks	7,500.57	0.00	0.00	7,500.57
Vendor#	Vendor Name					Class	Pay Code					
12548	WAGeworks, INC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
0219DR46779		04/30/20	02/28/20	02/28/20			129.60	0.00	0.00	129.60	✓	
COBRA/DIRECT BILL												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							12548	WAGeworks, INC	129.60	0.00	0.00	129.60
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		
910657854	✓	04/30/20	04/15/20	05/10/20			1,571.67	0.00	0.00	1,571.67	✓	
MAINT CONTR												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							I1110	WERFEN USA LLC	1,571.67	0.00	0.00	1,571.67

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	549,109.30	0.00	0.00	549,109.30

0.00

549,109.30 +
 200,000.00 -
 349,109.30 *

Private Waiver Transfer
 to be listed separately
 on report.

<200,000.00>
 \$349,109.30

MAY 06 2019

COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

8

RUN DATE:05/07/19
TIME:09:13

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	180515	05/08/19	260.27	ACE HARDWARE 15521
A/P	180516	05/08/19	2,448.00	ALLYSON SWOPE
A/P	180517	05/08/19	17.95	AUTO PARTS & MACHINE CO.
A/P	180518	05/08/19	1,001.34	BAXTER HEALTHCARE
A/P	180519	05/08/19	7,515.02	BECKMAN COULTER INC
A/P	180520	05/08/19	3,350.00	C-D ELECTRIC
A/P	180521	05/08/19	92.00	CABLES AND SENSORS
A/P	180522	05/08/19	29.63	CALHOUN COUNTY
A/P	180523	05/08/19	255.63	CARDINAL HEALTH 414, INC.
A/P	180524	05/08/19	5,995.00	CFI MECHANICAL INC
A/P	180525	05/08/19	130.00	COASTAL OFFICE SOLUTONS
A/P	180526	05/08/19	1,520.00	COMMAND ELECTRIC LLC
A/P	180527	05/08/19	4,886.00	COVIDIEN
A/P	180528	05/08/19	1,780.00	DA&E
A/P	180529	05/08/19	1,083.38	DEWITT POTTH & SON
A/P	180530	05/08/19	156,147.82	DISCOVERY MEDICAL NETWORK INC
A/P	180531	05/08/19	61.43	DOROTHY LONGORIA
A/P	180532	05/08/19	460.89	DR. MARSHALL COOK
A/P	180533	05/08/19	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	180534	05/08/19	59.63	EPIMED
A/P	180535	05/08/19	144.58	FEDERAL EXPRESS CORP.
A/P	180536	05/08/19	150.00	FIRST CLEARING
A/P	180537	05/08/19	5,793.74	FISHER HEALTHCARE
A/P	180538	05/08/19	50.00	GCWDB
A/P	180539	05/08/19	525.00	GUERBET, LLC
A/P	180540	05/08/19	1,540.19	GULF COAST PAPER COMPANY
A/P	180541	05/08/19	3,000.00	HEALTH SOLUTIONS DIETETICS
A/P	180542	05/08/19	236.25	HOLOGIC INC
A/P	180543	05/08/19	227.80	INTERSTATE ALL BATTERY CENTER
A/P	180544	05/08/19	18,247.03	JACKSON & COKER LOCUM TENENS,
A/P	180545	05/08/19	2,190.00	M G TRUST
A/P	180546	05/08/19	1,498.00	MASA
A/P	180547	05/08/19	29,418.00	MCKESSON MEDICAL SURGICAL INC
A/P	180548	05/08/19	675.47	MEDIVATORS
A/P	180549	05/08/19	.00	VOIDED
A/P	180550	05/08/19	5,053.64	MEDLINE INDUSTRIES INC
A/P	180551	05/08/19	275.00	MEMORIAL MEDICAL CLINIC
A/P	180552	05/08/19	76.13	MERCEDES SCIENTIFIC
A/P	180553	05/08/19	.00	VOIDED
A/P	180554	05/08/19	16,040.77	MORRIS & DICKSON CO, LLC
A/P	180555	05/08/19	3,849.00	MSDSONLINE, INC
A/P	180556	05/08/19	276.32	NADINE GARNER
A/P	180557	05/08/19	21.98	NAZARIO HERNANDEZ
A/P	180558	05/08/19	118.37	OLYMPUS AMERICA INC
A/P	180559	05/08/19	2,145.00	PABLO GARZA
A/P	180560	05/08/19	229.95	POSITIVE PROMOTIONS
A/P	180561	05/08/19	200,000.00	PRIVATE WAIVER CLEARING ACCT
A/P	180562	05/08/19	208.49	QIAGEN INC
A/P	180563	05/08/19	3,292.00	RADSOURCE
A/P	180564	05/08/19	419.75	RITA DAVIS

RUN DATE:05/07/19
TIME:09:13

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	180565	05/08/19	256.31	SAM'S CLUB DIRECT
A/P	180566	05/08/19	5,166.70	SERVICE SUPPLY OF VICTORIA INC
A/P	180567	05/08/19	475.97	SHIRLEY KARNEI
A/P	180568	05/08/19	37.95	SMILE MAKERS
A/P	180569	05/08/19	5,060.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	180570	05/08/19	420.00	ST DAVIDS HEALTHCARE
A/P	180571	05/08/19	510.00	STORAWAY & STASH-AWAY
A/P	180572	05/08/19	4,895.51	UNIFIRST HOLDINGS INC
A/P	180573	05/08/19	226.07	UTAH MEDICAL PRODUCTS INC
A/P	180574	05/08/19	7,500.57	WAGEWORKS
A/P	180575	05/08/19	129.60	WAGEWORKS, INC
A/P	180576	05/08/19	1,571.67	WERFEN USA LLC
TOTALS:			549,109.30	

APPROVED
ON

MAY 08 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

STATEMENT

As of: 05/03/2019

Page: 002

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

DC: 8115

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 632536
Date: 05/04/2019

As of: 05/03/2019 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 05/04/2019 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
--------------	----------	-------------------	----------------------------------	-------------	---------------	----------------	-----	--------------	-----	-------------------

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals:

3,738.75 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97

08/07/2017

If Paid By 05/07/2019,
Pay This Amount:

3,663.95 USD

If Paid After 05/07/2019,
Pay this Amount:

3,738.75 USD

Due If Paid On Time:
USD

Disc lost if paid late:

74.80

Due If Paid Late:
USD

3,738.75

3,663.95

CHK# 1032

CHK# 60310000

APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

1,061.98 +
1,006.03 +
1,594.52 +
1.42 +
3,663.95 *

STATEMENT

As of: 05/03/2019 Page: 001

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

DC: 8115

As of: 05/03/2019 Page: 001
Mail to: Comp: 8000

HEB PHY FC 490/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

Territory: 81
Customer: 464450
Date: 05/04/2019

Cust: 464450 PLEASE CHECK ANY
Date: 05/04/2019 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 464450 HEB PHY FC 490/MEM MC PHS											
4/30/2019	05/07/2019	7132020370	55x323832	115Invoice	6.28	314.21	307.93	✓	7132020370		
5/03/2019	05/07/2019	7132721024	55x328797	115Invoice	0.38	18.86	18.48	✓	7132721024		
5/03/2019	05/07/2019	7132721025	55x329015	115Invoice	15.01	750.58	735.57	✓	7132721025		

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

TOTAL: Customer Number 464450 HEB PHY FC 490/MEM MC PHS

Subtotals:

1,083.65 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,638.90

4/29/2019

If Paid By 05/07/2019,
Pay This Amount:

1,061.98 USD

If Paid After 05/07/2019,
Pay this Amount:

1,083.65 USD

Due If Paid On Time:

1,061.98

USD

Disc lost if paid late:

21.67

Due If Paid Late:

1,083.65

USD

APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
COUNTY, TEXAS

STATEMENT

As of: 05/03/2019

Page: 001

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

DC: 8115

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: 05/03/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 262252
Date: 05/04/2019

Cust: 262252 PLEASE CHECK ANY
Date: 05/04/2019 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 262252 CVS PHCY 7006/MEMORIA PHS										
4/29/2019	05/07/2019	7131914697	477229	115Invoice	0.65	32.63		31.98	✓	7131914697
4/30/2019	05/07/2019	7132046966	477816	115Invoice	10.96	547.81		536.85	✓	7132046966
4/30/2019	05/07/2019	7132046968	477816	115Invoice	0.03	1.74		1.71	✓	7132046968
5/01/2019	05/07/2019	7132279862	478158	115Invoice	0.55	27.32		26.77	✓	7132279862
5/02/2019	05/07/2019	7132525736	479539	115Invoice	6.39	319.29		312.90	✓	7132525736
5/03/2019	05/07/2019	7132746610	480053	115Invoice	1.96	97.78		95.82	✓	7132746610

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS
Subtotals: 1,026.57 USD

Future Due:

0.00

Past Due:

0.00

Last Payment
4/29/2019

2,638.90

Due If Paid On Time:
USD

1,006.03 USD

Disc lost if paid late:

20.54

Due If Paid Late:
USD

1,026.57

APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Company 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 256342
Date: 05/04/2019

As of: 05/03/2019
Mail to:

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 05/04/2019

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 256342 WALMART 1098/MEM MED PHS										
4/29/2019	05/07/2019	7131950338	0427190227-00	115Invoice	11.54	577.04		565.50	✓	7131950338
4/29/2019	05/07/2019	7131950339	1121751	115Invoice	6.08	303.79		297.71	✓	7131950339
4/29/2019	05/07/2019	7131950340	0959800199	115Invoice	0.02	0.95		0.93	✓	7131950340
4/30/2019	05/07/2019	7132045370	0959800200	115Invoice	6.87	343.39		336.52	✓	7132045370
5/01/2019	05/07/2019	7132310552	0959800201	115Invoice	3.23	161.27		158.04	✓	7132310552
5/01/2019	05/07/2019	7132310553	0430190157-00	115Invoice	0.01	0.32		0.31	✓	7132310553
5/02/2019	05/07/2019	7132498264	0959800202	115Invoice	0.04	2.21		2.17	✓	7132498264
5/02/2019	05/07/2019	7132498265	0501190454-00	115Invoice	2.45	122.31		119.86	✓	7132498265
5/03/2019	05/07/2019	7132751943	0959800203	115Invoice	0.71	35.31		34.60	✓	7132751943
5/03/2019	05/07/2019	7132751944	0959800203	115Invoice	0.02	0.92		0.90	✓	7132751944
5/03/2019	05/07/2019	7132751945	0502190444-00	115Invoice	1.59	79.57		77.98	✓	7132751945

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 1,627.08 USD

Future Due: 0.00

Last Due: 0.00

Last Payment 2,638.90

4/29/2019

Due If Paid On Time:

USD

Disc lost if paid late:

USD

Due If Paid Late:

USD

1,594.52

32.56

1,627.08

APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

STATEMENT

Company 8000

HEB PHCY 0092/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 05/03/2019

Page: 001

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

DC: 8115

Territory: 400

Customer: 820411
Date: 05/04/2019

As of: 05/03/2019
Mail to:
Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820411 PLEASE CHECK ANY
Date: 05/04/2019 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 820411 HEB PHCY 0092/MEM MED PHS										
5/03/2019	05/07/2019	7132718671	2017008163	115Invoice	0.03	1.45		1.42		7132718671

P = Past Due Item, F = Future Due Item, blank = Current Due Item

OTAL: Customer Number 820411 HEB PHCY 0092/MEM MED PHS

1.45 USD

Future Due:

0.00

**If Paid By 05/07/2019,
Pay This Amount:**

Last Due:

0.00

ast Payment

0.00

**If Paid After 05/07/2019,
Pay this Amount:**

Due If Paid On Time:
USD

Disc lost if paid late:

Due If Paid Late:
USD

0.03

145

APPROVED
ON

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



AmerisourceBergen[®] STATEMENT

Number: 57926037 Date: 05-03-2019 1 of 1

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

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

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

Summary
Not Yet Due: 0.00
Current: 761.21
Past Due: 0.00
Total Due: 761.21
Account Balance: 761.21

Account Activity

Activity Date	Due Date	Reference Number	Purchase Order Number	Activity Type	Amount
04-29-2019	05-10-2019	3022322351	145326	Invoice	0.31 ✓
04-29-2019	05-10-2019	3022322352	145375	Invoice	345.54 ✓
04-29-2019	05-10-2019	3022366034	145423	Invoice	170.01 ✓
04-29-2019	05-10-2019	592039377	144940	Invoice	(5.53) ✓
04-29-2019	05-10-2019	592039378	144940	Invoice	1.83 ✓
04-29-2019	05-10-2019	592039706	145081	Invoice	(15.18) ✓
04-29-2019	05-10-2019	592039707	145081	Invoice	7.13 ✓
04-30-2019	05-10-2019	3022407565	145542	Invoice	8.61 ✓
05-03-2019	05-10-2019	3022548292	145615	Invoice	248.49 ✓

Thank You for Your Payment

Date	Payment Number	Amount
05-03-2019		(1,326.08)

Reminders

Due Date	Amount
05-10-2019	761.21
Total Due:	761.21
Terms:	
Monday - Friday due in 7 days	

CK # 1024
GL # 60310000

APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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RUN DATE:05/08/19
TIME:13:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE

A/P *	001026	05/08/19	761.21	AMERISOURCEBERGEN
A/P *	001032	05/08/19	3,663.95	MCKESSON
A/P	180515	05/08/19	260.27	ACE HARDWARE 15521
A/P	180516	05/08/19	2,448.00	ALLYSON SWOPE
A/P	180517	05/08/19	17.95	AUTO PARTS & MACHINE CO.
A/P	180518	05/08/19	1,001.34	BAXTER HEALTHCARE
A/P	180519	05/08/19	7,515.02	BECKMAN COULTER INC
A/P	180520	05/08/19	3,350.00	C-D ELECTRIC
A/P	180521	05/08/19	92.00	CABLES AND SENSORS
A/P	180522	05/08/19	29.63	CALHOUN COUNTY
A/P	180523	05/08/19	255.63	CARDINAL HEALTH 414, INC.
A/P	180524	05/08/19	5,995.00	CPI MECHANICAL INC
A/P	180525	05/08/19	130.00	COASTAL OFFICE SOLUTONS
A/P	180526	05/08/19	1,520.00	COMMAND ELECTRIC LLC
A/P	180527	05/08/19	4,886.00	COVIDIEN
A/P	180528	05/08/19	1,780.00	DA&E
A/P	180529	05/08/19	1,083.38	DEWITT POTH & SON
A/P	180530	05/08/19	156,147.82	DISCOVERY MEDICAL NETWORK INC
A/P	180531	05/08/19	61.43	DOROTHY LONGORIA
A/P	180532	05/08/19	460.89	DR. MARSHALL COOK
A/P	180533	05/08/19	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	180534	05/08/19	59.63	EPIMED
A/P	180535	05/08/19	144.58	FEDERAL EXPRESS CORP.
A/P	180536	05/08/19	150.00	FIRST CLEARING
A/P	180537	05/08/19	5,793.74	FISHER HEALTHCARE
A/P	180538	05/08/19	50.00	GCWDB
A/P	180539	05/08/19	525.00	GUERBET, LLC
A/P	180540	05/08/19	1,540.19	GULF COAST PAPER COMPANY
A/P	180541	05/08/19	3,000.00	HEALTH SOLUTIONS DIETETICS
A/P	180542	05/08/19	236.25	HOLOGIC INC
A/P	180543	05/08/19	227.80	INTERSTATE ALL BATTERY CENTER
A/P	180544	05/08/19	18,247.03	JACKSON & COKER LOCUM TENENS,
A/P	180545	05/08/19	2,190.00	M G TRUST
A/P	180546	05/08/19	1,498.00	MASA
A/P	180547	05/08/19	29,418.00	MCKESSON MEDICAL SURGICAL INC
A/P	180548	05/08/19	675.47	MEDIVATORS
A/P	180549	05/08/19	.00	VOIDED
A/P	180550	05/08/19	5,053.64	MEDLINE INDUSTRIES INC
A/P	180551	05/08/19	275.00	MEMORIAL MEDICAL CLINIC
A/P	180552	05/08/19	76.13	MERCEDES SCIENTIFIC
A/P	180553	05/08/19	.00	VOIDED
A/P	180554	05/08/19	16,040.77	MORRIS & DICKSON CO, LLC
A/P	180555	05/08/19	3,849.00	MSDSONLINE, INC
A/P	180556	05/08/19	276.32	NADINE GARNER
A/P	180557	05/08/19	21.98	NAZARIO HERNANDEZ
A/P	180558	05/08/19	118.37	OLYMPUS AMERICA INC
A/P	180559	05/08/19	2,145.00	PABLO GARZA
A/P	180560	05/08/19	229.95	POSITIVE PROMOTIONS
A/P	180561	05/08/19	200,000.00	PRIVATE WAIVER CLEARING ACCT
A/P	180562	05/08/19	208.49	QIAGEN INC

MEMORIAL MEDICAL CENTER
PROSPERITY BANK

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --April 29, 2019 - May 5, 2019

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>
4/29/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000690821796	- 3rd Party Payor Fee	46.41
4/30/2019	ACH Payment EXPERTPAY 746003411 91000013930271	- Child Support Payment -Payroll Ending 041119	350.15 *
4/30/2019	ACH Payment MCKESSON DRUG AUTO ACH ACH03791589 910000176	- 340B Drug Program Expense	2,638.90 *
4/30/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000691755490	- 3rd Party Payor Fee	13.02
5/1/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000692604418	- 3rd Party Payor Fee	9.37
5/2/2019	ACH Payment AUTHNET GATEWAY BILLING 106676571 1040000104	- 3rd Party Payor Fee	10.00
5/2/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000693544592	- 3rd Party Payor Fee	0.82
5/3/2019	ACH Payment AMERISOURCE BERG PAYMENTS 0100007768 21000002	- 340B Drug Program Expense	1,326.08 *
5/3/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000694648862	- 3rd Party Payor Fee	5.07
5/3/2019	ACH Payment PAYROLL ONLINE TRF PAYROLL 113122652526299	- Payroll	293,438.79 *
			<u>297,838.61</u>
			46.41 +
			13.02 +
			9.37 +
			0.82 +
			5.07 +
			74.69 *

Diane Moore, CFO
Memorial Medical Center

* Approved CC 05-04-19

Pay plus

Actual

10.00 +
10.00 *

74.69 +
10.00 +
84.69 *

297,838.61 +
350.15 -
2,638.90 -
1,326.08 -
293,438.79 -
84.69 *

check

MEMORIAL MEDICAL CENTER
CHECK REQUEST

COPY

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PRIVATE WAIVER CLEARING ACCT

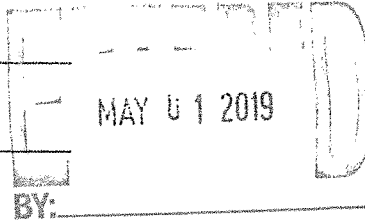
Date Requested: 5/1/19

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FOR ACCT. USE ONLY

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

AMOUNT \$200,000.00

G/L NUMBER: 10000004

APPROVED
ON

EXPLANATION: TO REPLENISH WAIVER ACCOUNT

MAY 03 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

REQUESTED BY: CAITLIN CLEVINGER

AUTHORIZED BY:

[Signature] CFO

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
5/6/2019

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		230,907.03	230,807.03	256,495.57			256,595.57	225,095.44
						Bank Balance Variance	256,595.57	
						Leave in Balance	100.00	
						QIPP Payment Undistributed		
						MMC Portion QIPP 1	31,359.41	
						MMC Portion QIPP 2,3,Lapse	40.72	
						April Interest		
						Adjust Balance/Transfer Amt	225,095.44	

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA
Acco

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Ck to MMC for QIPP	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at W Houston		115,357.24	115,257.24	162,587.91			162,687.91	153,661.50
						Bank Balance Variance	162,687.91	
						Leave in Balance	(0.00)	
						QIPP Payment Undistributed	100.00	
						MMC Portion QIPP 1		
						MMC Portion QIPP 2,3,Lapse	8,884.83	
						April Interest	41.58	
						Adjust Balance/Transfer Amt	153,661.50	
Crescent		281,348.57	281,248.57	83,634.54			83,734.54	77,633.69
						Bank Balance Variance	83,734.54	
						Leave in Balance	100.00	
						QIPP Payment Undistributed		
						MMC Portion QIPP 1	5,948.96	
						MMC Portion QIPP 2,3,Lapse	51.89	
						April Interest		
						Adjust Balance/Transfer Amt	77,633.69	

Broadmoor

97,236.02 ✓ 97,136.02 ✓ 99,163.30

Bank Balance 99,263.30 ✓ 93,005.91
 Variance 99,263.30
 Leave in Balance 100.00
 MMC Portion QIPP 1 6,098.18 ✓
 MMC Portion QIPP 2,3,Lapse 59.21 ✓
 April Interest

Fort Bend

85,558.38 ✓ 85,458.38 ✓ 93,414.92

Adjust Balance/Transfer Amt 93,005.91 ✓
 Bank Balance 93,514.92 ✓ 80,633.95
 Variance 93,514.92
 Leave in Balance 100.00
 QIPP Payment Undistributed
 MMC Portion QIPP 1
 MMC Portion QIPP 2,3,Lapse 12,755.50 ✓
 April Interest 25.47 ✓
 Adjust Balance/Transfer Amt 80,633.95 ✓

TOTAL TRANSFERS 630,030.49

Routing Information for Crescent / Salera at West Houston / Fort Bend / Broadmoor:

Contex 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:  5/6/2019
 Diane Moore, CFO

APPROVED
 ON

MAY 06 2019

COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

225,095.44 +
 153,661.50 +
 77,633.69 +
 93,005.91 +
 80,633.95 +
 630,030.49 *

	Transfer-Out	Transfer-In	QPPP/Compl1	QPPP/Comp2	QPPP/Comp3	QPPP/Lapse	QPPP T1	NH PORTION
Ashford Gardens								
4/29/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3396304376 111000		240.00	-	-	-	-	-	240.00
4/29/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675423 420000197		17,836.29	-	-	-	-	-	17,836.29
4/30/2019 Accr Earning Pymt Added to Account		40.72	-	-	-	-	-	-
4/30/2019 Deposit		22,286.44	-	-	-	-	-	-
4/30/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 7460034111 124384		1,640.00	-	-	-	-	-	22,286.44
4/30/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		35,396.50	-	-	-	-	-	1,640.00
4/30/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2		3,410.00	-	-	-	-	-	35,396.50
5/1/2019 ACH Deposit MANAGEANDNET1718 MMS PMNT 000000000000093 41		2,579.85	-	-	-	-	-	3,410.00
5/1/2019 ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51835451 111000		62,718.82	-	-	-	-	-	2,579.85
5/1/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		38,517.84	-	-	-	-	-	31,359.41
5/1/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675423 420000112		10,335.88	-	-	-	-	-	38,517.84
5/1/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2		10,988.60	-	-	-	-	-	10,335.88
5/2/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		29,468.07	-	-	-	-	-	10,988.60
5/2/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		3,698.60	-	-	-	-	-	29,468.07
5/3/2019 Check # 54	30,494.75		-	-	-	-	-	3,698.60
5/3/2019 Check #55	21,487.36		-	-	-	-	-	-
5/3/2019 CM Wire Domestic WIRE OUT ASHFORD HEALTH CARE CENTER LTD	178,824.92		-	-	-	-	-	-
5/3/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		6,512.92	-	-	-	-	-	6,512.92
5/3/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2		10,825.04	-	-	-	-	-	10,825.04
	230,807.03	256,495.57	-	-	-	-	-	225,095.41
				62,718.82			31,359.41	

Transfer-Out	Transfer-In	MMC PORTION				NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	
4/29/2019 ACH Deposit HUMANA INS CO HCCLAIMPMT 390861 830000592668	5,315.87					5,315.87
4/29/2019 ACH Deposit HUMANA CHA DISB HCCLAIMPMT 390861 4200001843	248.16					248.16
4/29/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2	1,023.00					1,023.00
4/30/2019 Acct Earning Pymt Added to Account	59.21					
4/30/2019 Deposit	51,603.12					51,603.12
4/30/2019 -ACH Deposit HHP EFPAYMENT 390861 91000012470736 DISDATA	3,614.28					3,614.28
4/30/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676357 420000101	803.47					803.47
5/1/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	86,994.13					
5/1/2019 ACH Deposit AMERIGROUP CORPO E-PAYMENT EES1835454 111000	12,196.36	12,196.36				
5/1/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	8,926.99				6,098.18	6,098.18
5/1/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	405.46					8,926.99
5/2/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	536.00					405.46
5/3/2019 Check# 72	4,196.84					536.00
5/3/2019 Check #21	5,945.05					
5/3/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	58.50					58.50
5/3/2019 ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000	6,426.00					6,426.00
5/3/2019 ACH Deposit HUMANA INS CO EFPAYMENT 390861 830000543807	7,946.88					7,946.88
	97,136.02	12,196.36			6,098.18	93,005.01

	Transfer-Out	Transfer-In	MMC PORTION				QIPP TI	NH PORTION
			QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse		
4/29/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000196		23,675.52						23,675.52
4/30/2019 Acct Earning Pymt Added to Account		51.89						
4/30/2019 Deposit		20,996.42						20,996.42
4/30/2019 ACH Deposit HUMANA CHA D5B HCCLAIMPMT 390864 4200001380		5,183.36						5,183.36
4/30/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000101		923.40						923.40
4/30/2019 ACH Deposit HUMANA INS CO EFPAYMENT 390864 8300005297487		1,123.59						1,123.59
5/1/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	271,268.81							
5/1/2019 ACH Deposit AMERIGROUP CORPO E-PAYMENT EES1835453 111000		11,897.92	11,897.92			5,948.96		5,948.96
5/1/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		1,110.00				1,110.00		1,110.00
5/2/2019 ACH Deposit UHC Community PI HCCLAIMPMT 746003411 910000		334.57				334.57		334.57
5/2/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000124		5,387.87						5,387.87
5/3/2019 Check #51	4,148.78							
5/3/2019 Check #50	5,830.98							
5/3/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		6,660.00						6,660.00
5/3/2019 ACH Deposit UHC Community PI HCCLAIMPMT 746003411 910000		6,290.00						6,290.00
	281,248.57		11,897.92			5,948.96		77,533.69
		83,634.54						6,290.00

Fort Bend	Transfer-Out	Transfer-In	MMAC PORTION				NH PORTION	
			QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse		QIPP T1
4/30/2019	Accr Earning Pymt Added to Account	25.47						
4/30/2019	Deposit	24,209.74						24,209.74
4/30/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	756.00						756.00
4/30/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	12,454.71						12,454.71
4/30/2019	ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675663 420000101	1,705.65						1,705.65
5/1/2019	CW Wire Domestic WIRE OUT CAMTEX HEALTH CARE CENTERS III	64,218.49						
5/1/2019	ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51835450 111000	25,511.00		25,511.00			12,755.50	12,755.50
5/1/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	16,064.15					16,064.15	16,064.15
5/1/2019	ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675663 420000112	12,591.48					12,591.48	12,591.48
5/3/2019	Check#49	8,795.08						
5/3/2019	Check #48	12,444.81						
5/3/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	96.72						96.72
		85,458.38		25,511.00			12,755.50	80,633.95
		93,414.92						

Transfer-Out	Transfer-In	MMC PORTION					QJPP TI	NH PORTION
		QJPP/Comp1	QJPP/Comp2	QJPP/Comp3	QJPP/Lapse			
4/29/2019 ACH Deposit UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384	7,790.00							7,790.00
4/29/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	2,305.76							2,305.76
4/29/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676310 420000196	25,846.89							25,846.89
4/29/2019 ACH Deposit HUMANA INS CO HCCLAIMPMT 390862 830000592668	16,136.03							16,136.03
4/29/2019 ACH Deposit HUMANA CHA DISB HCCLAIMPMT 390862 4200001843	800.78							800.78
4/29/2019 ACH Deposit B OF A-CBIC CLIMS HCCLAIMPMT 390862 111000021	8,474.88							8,474.88
4/30/2019 Accr Earning Pymt Added to Account	41.58							
4/30/2019 Deposit	24,348.86							24,348.86
4/30/2019 ACH Deposit HUMANA CHA DISB HCCLAIMPMT 390862 4200001380	11,889.91							11,889.91
4/30/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	5,460.00							5,460.00
4/30/2019 ACH Deposit HUMANA INS CO EFFPAYMENT 390862 8300005297487	2,611.17							2,611.17
4/30/2019 ACH Deposit HUMANA INS CO EFFPAYMENT 390862 8300005293411	5,116.15							5,116.15
5/1/2019 ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51835452 1110000	17,769.66	17,769.66				8,884.83		8,884.83
5/1/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	9,200.00							9,200.00
5/2/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676310 420000124	8,118.00							8,118.00
5/3/2019 Check #49	6,121.41							
5/3/2019 Check #48	8,665.63							
5/3/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	100,470.20							
5/3/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	1,640.00							1,640.00
5/3/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	1,942.41							1,942.41
5/3/2019 ACH Deposit HUMANA INS CO EFFPAYMENT 390862 8300005435807	13,095.83							13,095.83
TOTALS	115,257.24	-	17,769.66	-	-	8,884.83		153,661.50
	809,907.24	-	130,093.76	-	-	65,046.88		630,030.40

Home

ALL ACCOUNTS

FAVORITES ☆

Sort By: Account Number ▾

Checking

Available

Previous Day

MEMORIAL MEDICAL CENTER -

MEMORIAL MEDICAL CENTER -

MEMORIAL MEDICAL CENTER -

MEMORIAL MEDICAL CENTER /
NH ASHFORD *4381 ☆

\$256,934.56

\$256,595.57

MEMORIAL MEDICAL CENTER /
NH BROADMOOR *4403 ☆

\$101,301.35

\$99,263.30

MEMORIAL MEDICAL CENTER /
NH CRESCENT *4411 ☆

\$114,724.10

\$83,734.54

MEMORIAL MEDICAL CENTER /
SOLERA AT WEST HOUSTON
*4438 ☆

\$197,396.30

\$162,687.91

MEMORIAL MEDICAL CENTER /
NH FORT BEND *4446 ☆

\$99,972.18

\$93,514.92

MEMORIAL MEDICAL / NH

TOTAL

\$3,445,810.29

\$3,322,173.02

[illegible]

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

APPROVED
ON

602094

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek

4/30/2019 Accr Earning Pymt Added to Account
 5/1/2019 CM Wire Domestic WIRE OUT NEXION HEALTH AT GOLDEN CREEK
 5/1/2019 ACH Deposit Centene Manageme CCD+ 38888463 3110020860677
 5/1/2019 ACH Deposit Centene Manageme CCD+ 38888463 3110020828251

		MMC PORTION						NH PORTION	
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI			
87,070.11	19.65								
	51,031.00		51,031.00			25,515.50			25,515.50
	17,946.72	17,946.72				17,946.72			
87,070.11	68,997.37								

Home

ALL ACCOUNTS

FAVORITES ☆

Sort By: Account Number ▾

Checking

Available

Previous Day

MEMORIAL MEDICAL CENTER -

MEMORIAL MEDICAL CENTER -

MEMORIAL MEDICAL CENTER -

MEMORIAL MEDICAL CENTER /

MEMORIAL MEDICAL CENTER /

MEMORIAL MEDICAL CENTER /

MEMORIAL MEDICAL CENTER /

MEMORIAL MEDICAL CENTER /

MEMORIAL MEDICAL / NH
GOLDEN CREEK HEALTHCARE

*4454 ☆

TOTAL \$3,445,810.29 \$3,322,173.02

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 5/6/19

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APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
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AMOUNT \$31,359.41

G/L NUMBER: 210000012

EXPLANATION: ASHFORD - To transfer funds for Comp 2,3,Lapse - QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: *[Signature]* CFO

RUN DATE:05/08/19
TIME:13:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 3
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHA 000056 05/08/19 31,359.41 MMC OPERATING
TOTALS: 31,359.41

Ashford

APPROVED
ON

MAY 08 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 5/6/19

A _____

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APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

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☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$8,884.83

G/L NUMBER: 210000011

EXPLANATION: SOLERA- To transfer funds for Comp2,3,Lapse - QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:05/08/19
TIME:13:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 8
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHS 000050 05/08/19 8,884.83 MMC OPERATING *Solen*
TOTALS: 8,884.83

APPROVED
ON

MAY 08 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 5/6/19

A _____

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APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$5,948.96

G/L NUMBER: 210000010

EXPLANATION: CRESCENT- To transfer funds for Comp 2,3,Lapse - QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:  

RUN DATE:05/08/19
TIME:13:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 5
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHC 000052 05/08/19 5,948.96 MMC OPERATING
TOTALS: 5,948.96

Crescent

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 5/6/19

A _____

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APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
G/L NUMBER: 210000009

FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

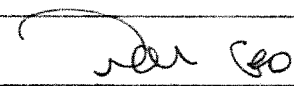
☐ Mail Check to Vendor

☐ Return Check to Dept

AMOUNT \$6,098.18

EXPLANATION: BROADMOOR - To transfer funds for Comp 2,3,Lapse - QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:05/08/19
TIME:13:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 4
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
------	--------	------	--------	-------

NHB	000023	05/08/19	6,098.18	MMC OPERATING
TOTALS:			6,098.18	

Broadmoor

APPROVED
ON

MAY 08 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 5/6/19

A _____

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E _____

E _____

APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

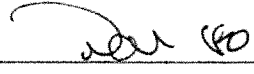
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$12,755.50

G/L NUMBER: 210000008

EXPLANATION: FORT BEND- To transfer funds for Comp 2,3,Lapse - QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:05/08/19
TIME:13:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 6
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHF 000050 05/08/19 12,755.50 MMC OPERATING *Fort Bend*
TOTALS: 12,755.50

APPROVED
ON

MAY 08 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 5/6/19

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APPROVED
ON

MAY 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$43,462.22

G/L NUMBER: 210000013

EXPLANATION: GOLDEN CREEK- To transfer funds for Comp1,2,3,Lapse - QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:05/08/19
TIME:13:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/08/19 THRU 05/08/19

PAGE 7
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHG 000035 05/08/19 43,462.22 MMC OPERATING
TOTALS: 43,462.22

golden creek

APPROVED
ON

MAY 08 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

QIPP Payment to MMC from Nursing Facilities				Commissioner's Court			5/08/2019		
NH Name	From Bank Acct #	Chk #	Payee	GL #	QIPP COMP 1	QIPP COMP 2,3,Lapse	TOTAL		Date
shford	10000018 - Prosperity	56	MMC -Prosperity Operating #100000001	21000012		31,359.41	31,359.41		5/8/2019
roadmoor	10000019 - Prosperity	23	MMC -Prosperity Operating #100000001	21000009		6,098.18	6,098.18		5/8/2019
rescent	10000020 - Prosperity	52	MMC -Prosperity Operating #100000001	21000010		5,948.96	5,948.96		5/8/2019
ort Bend	10000021 - Prosperity	50	MMC -Prosperity Operating #100000001	21000008		12,755.50	12,755.50		5/8/2019
olden Creek	10000023 - Prosperity	35	MMC -Prosperity Operating #100000001	21000013	17,946.72	25,515.50	43,462.22		5/8/2019
olera	10000022 - Prosperity	50	MMC -Prosperity Operating #100000001	21000011		8,884.83	8,884.83		5/8/2019
				Total:	17,946.72	90,562.38	108,509.10		

Note:

[Signature]

Approved: Diane Moore, CFO 4/29/2019

31,359.41 +
 8,884.83 +
 5,948.96 +
 6,098.18 +
 12,755.50 +
 43,462.22 +
 108,509.10 *

APPROVED
ON

MAY 08 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

87SS

No.

56

88-2265
1131

5-8-19

PAY TO THE
ORDER OF

Memorial Medical Center Operating 31,359.⁴¹
Thirty One Thousand Three Hundred Fifty Nine ⁴¹/₁₀₀ DOLLARS



QIPP 2,3, lapse

County Auditor

County Treasurer

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

87SS

No.

50

88-2265
1131

5-8-19

PAY TO THE
ORDER OF

Memorial Medical Center Operating 8,884.⁸³
Eight Thousand Eight Hundred Eighty Four ⁸³/₁₀₀ DOLLARS



QIPP 2,3, lapse

County Auditor

County Treasurer

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MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000052

Date

5-8-19

88-2265/1131

PAY

TO THE
ORDER OF

Memorial Medical Center Operating \$ 5948.⁹⁶
Five Thousand Nine Hundred Forty Eight ⁹⁶/₁₀₀ DOLLARS



FOR

QIPP 2,3, lapse

County Auditor

County Treasurer

000052

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000023

88-2265/1131

Date

5-8-19

PAY

TO THE
ORDER OF

Memorial Medical Center Operating
Six Thousand Nine-hundred Eight 18/100

\$ 6,098.¹⁸

DOLLARS

PROSPERITY
BANK

FOR

QIPP 2,3, lapse

County Auditor

County Treasurer
MP
Security features are included. Details on back.

⑈000023⑈

MEMORIAL MEDICAL CENTER

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

000050

88-2265/1131

Date

5-8-19

PAY

TO THE
ORDER OF

Memorial Medical Center Operating
Twelve Thousand Seven Hundred Fifty-five 50/100

\$ 12,755.⁵⁰

DOLLARS

PROSPERITY
BANK

FOR

QIPP 2,3, lapse

County Auditor

County Treasurer
MP
Security features are included. Details on back.

⑈000050⑈

MEMORIAL MEDICAL CENTER

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

000035

88-2265/1131

Date

5-8-19

PAY

TO THE
ORDER OF

Memorial Medical Center Operating
Forty-Three Thousand Four Hundred Sixty-Two 22/100

\$ 43,462.²²

DOLLARS

PROSPERITY
BANK

FOR

QIPP 1,2,3, lapse

County Auditor

County Treasurer
MP
Security features are included. Details on back.