MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- June 05, 2019

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	285,824.80
TOTAL TRANSFERS BETWEEN FUNDS	$	149,187.00
TOTAL NURSING HOME UPL EXPENSES	$	650,481.88
TOTAL INTER-GOVERNMENT TRANSFERS	$	-
GRAND TOTAL DISBURSEMENTS APPROVED June 05, 2019	$	1,085,493.68

APPROVED

JUN 05 2019

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---June 05, 2019

PAYABLES AND PAYROLL			
5/31/2019	Weekly Payables	190,149.87	
6/3/2019	McKesson-340B Prescription Expense	2,024.39	
6/3/2019	Amerisource Bergen-340B Prescription Expense	1,218.17	
5/31/2019	Ashford-Nursing home insurance payment sent to MMC in error	10,160.50	
5/31/2019	Fortbend-Nursing home insurance payment sent to MMC in error	46.83	
5/31/2019	Crescent-Nursing home insurance payment sent to MMC in error	2,504.50	
5/31/2019	Goldencreek-Nursing home insurance pymt sent to MMC in error	73,883.48	
5/31/2019	City of Port Lavaca-Utilities	43.59	
5/31/2019	Healthcare Source-Human Resource Lean Human Webinar	1,795.00	
5/31/2019	Uniform Advatage-Uniforms	18.99	
6/3/2019	Texas Department of State Health Services-License	2,035.00	
6/3/2019	Pablo Garza-Contract employee for services rendered 5/14-5/23/19	1,927.50	
	Prosperity Electronic Bank Payments		
5/28-5/30/19	Pay Plus-Patient Claims Processing Fee	16.98	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 285,824.80**
TRANSFERS BETWEEN FUNDS			
5/31/2019	Transfer from Prosperity Operating to MMC Clinic Series-to set aside funds received for generator grant	149,187.00	
TOTAL TRANSFERS BETWEEN FUNDS			**$ 149,187.00**
NURSING HOME UPL EXPENSES			
6/3/2019	Nursing Home UPI	482,304.03	
6/3/2019	Nursing Home UPI	102,879.93	
QIPP/INTEREST CHECKS TO MMC			
6/3/2019	Ashford	22,659.33	
6/3/2019	Solera	6,451.90	
6/3/2019	Crescent	4,388.70	
6/3/2019	Broadmoor	4,416.03	
6/3/2019	Fort Bend	9,280.11	
6/3/2019	Golden Creek	18,101.85	
TOTAL NURSING HOME UPL EXPENSES			**$ 650,481.88**
TOTAL INTER-GOVERNMENT TRANSFERS			**$ -**
GRAND TOTAL DISBURSEMENTS APPROVED June 05, 2019			**$ 1,085,493.68**

05/30/2019 MEMORIAL MEDICAL CENTER 0
11:40 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 06/12/2019

Vendor#	Vendor Name	Class	Pay Code
10619	ADAM BESIO		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
052319		05/30/20	05/23/20	05/23/20		170.52	0.00	0.00	170.52
	TRAVEL EXP 2019 National Client Conference 5/20-5/23/19								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10619	ADAM BESIO	170.52	0.00	0.00	170.52

Vendor#	Vendor Name	Class	Pay Code
11062	AIRESPRING INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
125003456A		05/30/20	05/16/20	05/16/20		2,214.35	0.00	0.00	2,214.35
	PHONE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11062	AIRESPRING INC	2,214.35	0.00	0.00	2,214.35

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
9088665459		05/28/20	05/13/20	06/07/20		2,263.88	0.00	0.00	2,263.88

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS USA, LLC - CENTRAL DIV	2,263.88	0.00	0.00	2,263.88

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
RPSV03105699		05/28/20	05/13/20	05/28/20		89.02	0.00	0.00	89.02
	INVENTORY Freight 12.99								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1705	ALIMED INC.	89.02	0.00	0.00	89.02

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
052319		05/30/20	05/23/20	05/23/20		2,439.00	0.00	0.00	2,439.00
	PURCHASED SERVICES 05/13/19 - 05/23/19								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10958	ALLYSON SWOPE	2,439.00	0.00	0.00	2,439.00

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
INV00075022		05/29/20	05/14/20	05/29/20		118.15	0.00	0.00	118.15
	SUPPLIES Freight 25.20								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1746	ALPHA TEC SYSTEMS INC	118.15	0.00	0.00	118.15

Vendor#	Vendor Name	Class	Pay Code
B0436	BARD ACCESS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
45675876		05/21/20	05/08/20	06/08/20		150.00	0.00	0.00	150.00
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net

	B0436	BARD ACCESS				150.00	0.00	0.00	150.00
Vendor#	Vendor Name				Class	Pay Code			
B1150	BAXTER HEALTHCARE				W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	63117054		05/29/20	05/10/20	06/04/20		417.63	0.00	0.00	417.63
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1150	BAXTER HEALTHCARE				417.63	0.00	0.00	417.63
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
	107740342		05/21/20	05/13/20	06/07/20		4,233.46	0.00	0.00	4,233.46
		LEASE								
	7249346		05/28/20	05/15/20	06/09/20		3,077.36	0.00	0.00	3,077.36
		SERVICE CONTRACT								
	107749374		05/28/20	05/16/20	06/10/20		6,249.42	0.00	0.00	6,249.42
		SERVICE CONTRACT								
	107749378		05/28/20	05/16/20	06/10/20		1,288.45	0.00	0.00	1,288.45
		SERVICE CONTRACT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC				14,848.69	0.00	0.00	14,848.69
Vendor#	Vendor Name				Class	Pay Code				
B1320	BEEKLEY MEDICAL				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	INV1265501		05/29/20	05/14/20	05/29/20		715.45	0.00	0.00	715.45
		SUPPLIES Shipping 18.95								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1320	BEEKLEY MEDICAL				715.45	0.00	0.00	715.45
Vendor#	Vendor Name				Class	Pay Code				
12572	BROUSSARD GROUP									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	5713		05/29/20	04/22/20	05/02/20		2,098.68	0.00	0.00	2,098.68
		SUPPLIES Shipping 200.00								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		12572	BROUSSARD GROUP				2,098.68	0.00	0.00	2,098.68
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
	CIT27520		05/28/20	05/14/20	06/08/20		1,375.00	0.00	0.00	1,375.00
		TOSHIBA MOTOR								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C0400	C-D ELECTRIC				1,375.00	0.00	0.00	1,375.00
Vendor#	Vendor Name				Class	Pay Code				
C1010	CABLE ONE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	051619A		05/28/20	05/16/20	05/30/20		86.53	0.00	0.00	86.53
		CABLE								
	053019		05/28/20	05/30/20			418.83	0.00	0.00	418.83
		CABLE								
	051619		05/28/20	05/30/20	05/30/20		1,168.00	0.00	0.00	1,168.00
		CABLE								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net

C1010 CABLE ONE					1,673.36	0.00	0.00	1,673.36

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
SFG9486 ✓		05/28/20	05/07/20	06/06/20			233.06	0.00	0.00	233.06 ✓
	PRINTER									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1992	CDW GOVERNMENT, INC.	233.06	0.00	0.00	233.06

Vendor#	Vendor Name	Class	Pay Code
C1730	CITY OF PORT LAVACA ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
060519		05/28/20	05/21/20	06/05/20			4,569.47	0.00	0.00	4,569.47 ✓
	UTILITIES HMC									
060519A		05/28/20	05/21/20	06/05/20			160.66	0.00	0.00	160.66 ✓
	UTILITIES Clinic									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1730	CITY OF PORT LAVACA	4,730.13	0.00	0.00	4,730.13

Vendor#	Vendor Name	Class	Pay Code
C1166	COASTAL OFFICE SOLUTONS ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
OEQT110041 ✓		05/29/20	05/13/20	05/23/20			342.50	0.00	0.00	342.50 ✓
	SUPPLIES									
WO326091 ✓		05/29/20	05/15/20	05/25/20			122.40	0.00	0.00	122.40 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1166	COASTAL OFFICE SOLUTONS	464.90	0.00	0.00	464.90

Vendor#	Vendor Name	Class	Pay Code
11029	COASTAL REFRIGERATION ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
3829673 ✓		05/28/20	04/30/20	05/06/20			734.35	0.00	0.00	734.35 ✓
	REPAIRS to Rooftop A/C unit For MRI Area									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11029	COASTAL REFRIGERATION	734.35	0.00	0.00	734.35

Vendor#	Vendor Name	Class	Pay Code
C1970	CONMED CORPORATION ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
873873 ✓		05/21/20	05/07/20	06/07/20			125.52	0.00	0.00	125.52 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1970	CONMED CORPORATION	125.52	0.00	0.00	125.52

Vendor#	Vendor Name	Class	Pay Code
D1193	DEPUY SYNTHES SALES, INC. ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
21461971RI ✓		05/28/20	02/18/20	03/18/20			4,259.00	0.00	0.00	4,259.00 ✓
	SUPPLIES									
21557847RI ✓		05/29/20	03/21/20	04/15/20			1,601.40	0.00	0.00	1,601.40 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	D1193	DEPUY SYNTHES SALES, INC.	5,860.40	0.00	0.00	5,860.40

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
5720710		05/29/20	05/13/20	06/07/20			32.26	0.00	0.00	32.26
	SUPPLIES									
5720690		05/29/20	05/13/20	06/07/20			150.00	0.00	0.00	150.00
	SUPPLIES									
5720700		05/29/20	05/13/20	06/07/20			289.86	0.00	0.00	289.86
	SUPPLIES									
5720650		05/29/20	05/13/20	06/07/20			1,325.41	0.00	0.00	1,325.41
	SUPPLIES									
5720930		05/29/20	05/13/20	06/07/20			103.93	0.00	0.00	103.93
	SUPPLIES									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON					1,901.46	0.00	0.00	1,901.46

Vendor#	Vendor Name	Class	Pay Code
10892	DIANE MOORE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
052819		05/30/20	05/28/20	05/28/20			195.20	0.00	0.00	195.20
	TRAVEL EXP CPSI CONF S.A. 5/19-5/21/19									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10892	DIANE MOORE					195.20	0.00	0.00	195.20

Vendor#	Vendor Name	Class	Pay Code
D1785	DYNATRONICS CORPORATION		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
IN1936287		05/29/20	05/15/20	05/10/20			59.33	0.00	0.00	59.33
	SUPPLIES Freight 16.58									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	D1785	DYNATRONICS CORPORATION					59.33	0.00	0.00	59.33

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
37921		05/30/20	05/31/20	05/31/20			40,062.50	0.00	0.00	40,062.50
	ER STAFFING									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11284	EMERGENCY STAFFING SOLUTIONS					40,062.50	0.00	0.00	40,062.50

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
546836		05/29/20	05/14/20	05/29/20			155.98	0.00	0.00	155.98
	SUPPLIES Shipping 16.48									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10042	ERBE USA INC SURGICAL SYSTEMS					155.98	0.00	0.00	155.98

Vendor#	Vendor Name	Class	Pay Code
C2510	EVIDENT	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
956562		05/28/20	05/07/20	06/01/20			405.00	0.00	0.00	405.00
	REMAINDER OF PYMNT FOR I									
T19050B1378		05/28/20	05/09/20	06/03/20			9,950.00	0.00	0.00	9,950.00
	CONSULTING SERVICES									
T1905091378		05/28/20	05/09/20	06/03/20			18,756.84	0.00	0.00	18,756.84
	CODING AND BUSINESS SER\									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	C2510	EVIDENT					29,111.84	0.00	0.00	29,111.84

Vendor#	Vendor Name	Class	Pay Code
S0501	EVOQUA WATER TECHNOLOGIES LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
904002983		05/29/20	05/10/20	06/04/20			1,376.70	0.00	0.00	1,376.70
	SUPPLIES shipping 76.70									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S0501	EVOQUA WATER TECHNOLOGIES LLC	1,376.70	0.00	0.00	1,376.70

Vendor#	Vendor Name	Class	Pay Code
11924	FAREN CAMPOS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
052319		05/30/20	05/23/20	05/23/20			170.52	0.00	0.00	170.52
	TRAVEL 2019 National client Conference 5/20-5/22/19									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11924	FAREN CAMPOS	170.52	0.00	0.00	170.52

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
653309189		05/28/20	04/25/20	05/20/20			59.23	0.00	0.00	59.23
	SHIPPING									
653948229		05/28/20	05/02/20	05/27/20			64.26	0.00	0.00	64.26
	SHIPPING									
654696035		05/28/20	05/09/20	06/03/20			17.94	0.00	0.00	17.94
	SHIPPING									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	F1100	FEDERAL EXPRESS CORP.	141.43	0.00	0.00	141.43

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
15283		05/15/20	05/10/20	06/09/20			1,004.19	0.00	0.00	1,004.19
	FOLDERS shipping 54.19									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11184	FLDR DESIGNS LLC	1,004.19	0.00	0.00	1,004.19

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
49859		05/21/20	05/07/20	06/06/20			119.96	0.00	0.00	119.96
	SUPPLIES shipping 17.00									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10901	GENESIS DIAGNOSTICS	119.96	0.00	0.00	119.96

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
18349941		05/29/20	05/14/20	05/29/20			350.00	0.00	0.00	350.00
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11984	GUERBET, LLC	350.00	0.00	0.00	350.00

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
1671846		05/21/20	05/07/20	06/06/20			563.42	0.00	0.00	563.42
	SUPPLIES									

1671839		05/21/20	05/07/20	06/06/20	28.49	0.00	0.00	28.49
SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY	591.91	0.00	0.00	591.91

Vendor# G1247 Vendor Name: GYNEX CORPORATION — Class: W — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
183040		05/28/20	05/16/20	06/10/20			83.60	0.00	0.00	83.60
SUPPLIES Shipping 25.65										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1247	GYNEX CORPORATION	83.60	0.00	0.00	83.60

Vendor# 10298 Vendor Name: HITACHI MEDICAL SYSTEMS — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
PJIN0135045		05/30/20	04/15/20	05/15/20			8,333.33	0.00	0.00	8,333.33
SMA FEE										
PJIN0135385		05/30/20	05/15/20	05/15/20			8,333.33	0.00	0.00	8,333.33
SMA FEE										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10298	HITACHI MEDICAL SYSTEMS	16,666.66	0.00	0.00	16,666.66

Vendor# J1300 Vendor Name: JECKER FLOOR & GLASS — Class: W — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
78490		05/28/20	05/17/20	05/27/20			50.00	0.00	0.00	50.00
FLOORING										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	J1300	JECKER FLOOR & GLASS	50.00	0.00	0.00	50.00

Vendor# 10341 Vendor Name: JENISE SVETLIK — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
052319		05/28/20	05/23/20	05/23/20			196.20	0.00	0.00	196.20
TRAVEL 2019 National Client Conference 5/19-5/22/19										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10341	JENISE SVETLIK	196.20	0.00	0.00	196.20

Vendor# 11275 Vendor Name: KYLE DANIEL — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
052819		05/29/20	05/28/20	05/28/20			287.55	0.00	0.00	287.55
EXPENSE REPORT 2019 STRAC Emergency Healthcare Systems Conference. 5/20/19-5/24/19										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11275	KYLE DANIEL	287.55	0.00	0.00	287.55

Vendor# 10972 Vendor Name: M G TRUST — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
052319		05/29/20	05/10/20				1,095.00	0.00	0.00	1,095.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10972	M G TRUST	1,095.00	0.00	0.00	1,095.00

Vendor# M1344 Vendor Name: MAINE STANDARDS CO., LLC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1916693		05/15/20	05/07/20	06/06/20			635.40	0.00	0.00	635.40

DUES LAB Shipping 70.20

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M1344	MAINE STANDARDS CO., LLC	635.40	0.00	0.00	635.40

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
53759909		05/21/20	05/07/20	06/06/20			1,283.08	0.00	0.00	1,283.08
	SUPPLIES									
54120381		05/29/20	05/12/20	06/11/20			943.99	0.00	0.00	943.99
	SUPPLIES freight 20.00									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC	2,227.07	0.00	0.00	2,227.07

Vendor#	Vendor Name	Class	Pay Code
10613	MEDIMPACT HEALTHCARE SYS, INC.	A/P	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
0011060986		05/28/20	05/17/20	05/24/20			169.48	0.00	0.00	169.48
	INDIGENT CARE									
0010744997A		05/29/20	05/21/20	05/21/20			166.36	0.00	0.00	166.36
	INDIGENT CARE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10613	MEDIMPACT HEALTHCARE SYS, INC.	335.84	0.00	0.00	335.84

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
90140317		05/29/20	05/21/20	05/29/20			411.43	0.00	0.00	411.43
	SUPPLIES Shipping 11.43									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2827	MEDIVATORS	411.43	0.00	0.00	411.43

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
052319A		05/29/20	05/10/20	05/23/20			50.00	0.00	0.00	50.00
	PAYROLL DEDUCT									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10963	MEMORIAL MEDICAL CLINIC	50.00	0.00	0.00	50.00

Vendor#	Vendor Name	Class	Pay Code
M2659	MERRY X-RAY/SOURCEONE HEALTHCA	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
8800454244		05/28/20	05/10/20	06/09/20			116.57	0.00	0.00	116.57
	SUPPLIES freight 15.50									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2659	MERRY X-RAY/SOURCEONE HEALTHCA	116.57	0.00	0.00	116.57

Vendor#	Vendor Name	Class	Pay Code
D1781	MISTY PASSMORE	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
052319		05/30/20	05/23/20	05/23/20			139.66	0.00	0.00	139.66
	TRAVEL EXP 2019 National Client Conference 5/20 - 5/22/19									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	D1781	MISTY PASSMORE	139.66	0.00	0.00	139.66

Vendor#	Vendor Name	Class	Pay Code
M2621	MMC AUXILIARY GIFT SHOP	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
052319		05/28/20	05/23/20	05/23/20	172.09	40.58	0.00	0.00	40.58 172.09
	PAYROLL DED wrng amount picked up								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP			172.09	40.58	0.00	0.00	40.58 172.09

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
7476		05/28/20	05/16/20	05/26/20		-0.26	0.00	0.00	-0.26
	CREDIT								
7420		05/28/20	05/16/20	05/26/20		-20.10	0.00	0.00	-20.10
	CREDIT								
7816		05/28/20	05/16/20	05/26/20		-15.34	0.00	0.00	-15.34
	CREDIT								
7761		05/28/20	05/16/20	05/26/20		-0.02	0.00	0.00	-0.02
	CREDIT								
007841		05/28/20	05/16/20	05/26/20		-2.65	0.00	0.00	-2.65
	CREDIT								
4246411		05/28/20	05/20/20	05/30/20		44.86	0.00	0.00	44.86
	INVENTORY								
4246410		05/28/20	05/20/20	05/30/20		272.86	0.00	0.00	272.86
	INVENTORY								
4246408		05/28/20	05/20/20	05/30/20		264.03	0.00	0.00	264.03
	INVENTORY								
4246409		05/28/20	05/20/20	05/30/20		1,996.27	0.00	0.00	1,996.27
	INVENTORY								
4251792		05/28/20	05/21/20	05/31/20		1,192.06	0.00	0.00	1,192.06
	INVENTORY								
4251791		05/28/20	05/21/20	05/31/20		80.97	0.00	0.00	80.97
	INVENTORY								
4257101		05/28/20	05/22/20	06/01/20		156.22	0.00	0.00	156.22
	INVENTORY								
4257102		05/28/20	05/22/20	06/01/20		383.35	0.00	0.00	383.35
	INVENTORY								
4257100		05/28/20	05/22/20	06/01/20		204.39	0.00	0.00	204.39
	INVENTORY								
4257283		05/28/20	05/22/20	06/01/20		443.10	0.00	0.00	443.10
	INVENTORY								
4256707		05/28/20	05/22/20	06/01/20		7,024.80	0.00	0.00	7,024.80
	INVENTORY								
4262873		05/28/20	05/23/20	06/02/20		325.39	0.00	0.00	325.39
	INVENTORY								
4262876		05/28/20	05/23/20	06/02/20		2.79	0.00	0.00	2.79
9211		05/28/20	05/23/20	06/02/20		-11.94	0.00	0.00	-11.94
	CREDIT								
4262874		05/28/20	05/23/20	06/02/20		640.48	0.00	0.00	640.48
	INVENTORY								
4262875		05/28/20	05/23/20	06/02/20		0.61	0.00	0.00	0.61
	INVENTORY								
9542		05/29/20	05/23/20	06/02/20		-5.00	0.00	0.00	-5.00
	PHARM CREDIT								

4266708		05/29/20	05/24/20	06/03/20	89.40	0.00	0.00	89.40
	INVENTORY PHARM							
4266601		05/29/20	05/24/20	06/03/20	12.99	0.00	0.00	12.99
	INVENTORY PHARM							
4266706		05/29/20	05/24/20	06/03/20	50.37	0.00	0.00	50.37
	INVENTORY PHARM							
4265377		05/29/20	05/24/20	06/03/20	230.74	0.00	0.00	230.74
	INVENTORY PHARM							
4266707		05/29/20	05/24/20	06/03/20	106.95	0.00	0.00	106.95
	INVENTORY PHARM							
4265376		05/29/20	05/24/20	06/03/20	662.10	0.00	0.00	662.10
	INVENTORY PHARM							
4272639		05/29/20	05/28/20	06/07/20	581.40	0.00	0.00	581.40
	INVENTORY PHARM							
4272637		05/29/20	05/28/20	06/07/20	105.44	0.00	0.00	105.44
	PHARM INVENTORY							
4274243		05/29/20	05/28/20	06/07/20	665.82	0.00	0.00	665.82
	INVENTORY PHARM							
4272640		05/29/20	05/28/20	06/07/20	97.80	0.00	0.00	97.80
	INVENTORY PHARM							
4274242		05/29/20	05/28/20	06/07/20	166.06	0.00	0.00	166.06
	INVENTORY PHARM							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC			15,745.94	0.00	0.00	15,745.94

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
052119		05/28/20	05/21/20	05/21/20			32.48	0.00	0.00	32.48
	TRAVEL IP Area Meeting 5/17/19									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	A2252	NADINE GARNER					32.48	0.00	0.00	32.48

Vendor#	Vendor Name	Class	Pay Code
10188	NATUS MEDICAL INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1040828865		05/29/20	04/30/20	05/25/20			859.85	0.00	0.00	859.85
	SUPPLIES Freight 45.85									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10188	NATUS MEDICAL INC					859.85	0.00	0.00	859.85

Vendor#	Vendor Name	Class	Pay Code
11472	OCCUPRO LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
13350		05/08/20	05/07/20	06/06/20			458.67	0.00	0.00	458.67
	PROVIDER LICENSES									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11472	OCCUPRO LLC					458.67	0.00	0.00	458.67

Vendor#	Vendor Name	Class	Pay Code
O0920	OFFICE DEPOT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
313432519001		05/29/20	05/10/20	05/29/20			131.08	0.00	0.00	131.08
	SUPPLIES									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net

	O0920	OFFICE DEPOT				131.08	0.00	0.00	131.08
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
	97469604		05/29/20	05/06/20	06/05/20		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				
O1416	ORTHO CLINICAL DIAGNOSTICS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	1850968248		05/29/20	05/07/20	06/06/20		119.82	0.00	0.00	119.82
		SUPPLIES Freight 3.84								
	1850968371		05/29/20	05/08/20	06/07/20		1,343.21	0.00	0.00	1,343.21
		SUPPLIES Freight/Handling 92.42								
	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				
12544	PATRICK OCHOA									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	053119		05/28/20	05/31/20			434.00	0.00	0.00	434.00
		LAWN CARE WMC - May 2019								
	MMCR052019		05/28/20	05/31/20	05/31/20		125.00	0.00	0.00	125.00
		LAWN CARE Rehab - May 2019								
	MMC1052019		05/28/20	05/31/20	05/31/20		275.00	0.00	0.00	275.00
		LAWN CARE Clinic - May 2019								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		12544	PATRICK OCHOA				834.00	0.00	0.00	834.00
Vendor#	Vendor Name				Class	Pay Code				
10761	PENNY REYES									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	052319		05/28/20	05/23/20	05/23/20		74.92	0.00	0.00	74.92
		CONTINUING ED Courses - Nursing/Pharmacy								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10761	PENNY REYES				74.92	0.00	0.00	74.92
Vendor#	Vendor Name				Class	Pay Code				
P2100	PORT LAVACA WAVE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	040319		05/29/20	04/03/20	04/28/20		1,962.89	0.00	0.00	1,962.89
		GOLD PROGRAM PLUS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		P2100	PORT LAVACA WAVE				1,962.89	0.00	0.00	1,962.89
Vendor#	Vendor Name				Class	Pay Code				
P2200	POWER HARDWARE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	A53315		05/28/20	05/17/20	05/27/20		7.78	0.00	0.00	7.78
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		P2200	POWER HARDWARE				7.78	0.00	0.00	7.78
Vendor#	Vendor Name				Class	Pay Code				
11080	RADSOURCE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

SC58955		05/15/20	05/12/20	06/06/20	1,667.00	0.00	0.00	1,667.00
	RAD SERVICES							
SC58985		05/21/20	05/16/20	06/10/20	1,625.00	0.00	0.00	1,625.00
	RAD SERVICES							

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
S1405	SERVICE SUPPLY OF VICTORIA INC	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
701013861		05/21/20	05/13/20	06/12/20			123.00	0.00	0.00	123.00
	SUPPLIES									
701014402		05/21/20	05/16/20	06/10/20			231.70	0.00	0.00	231.70
	SUPPLIES									
701006638		05/28/20	03/14/20	04/13/20			912.00	0.00	0.00	912.00
	SUPPLIES									
701010723		05/28/20	04/16/20	05/16/20			456.00	0.00	0.00	456.00
	SUPPLIES									
701013188		05/28/20	05/06/20	06/05/20			3,102.00	0.00	0.00	3,102.00
	GAS WATER HEATER									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S1405	SERVICE SUPPLY OF VICTORIA INC	4,824.70	0.00	0.00	4,824.70

Vendor#	Vendor Name	Class	Pay Code
S1800	SHERWIN WILLIAMS	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
35253		05/28/20	05/15/20	05/30/20			224.96	0.00	0.00	224.96
	SUPPLIES									
37572		05/28/20	05/21/20	06/05/20			116.23	0.00	0.00	116.23
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S1800	SHERWIN WILLIAMS	341.19	0.00	0.00	341.19

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
052819		05/30/20	05/28/20	05/28/20			390.50	0.00	0.00	390.50
	CONTRACT EMPLOYEE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	K0536	SHIRLEY KARNEI	390.50	0.00	0.00	390.50

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
238032		05/28/20	05/16/20	05/26/20			790.00	0.00	0.00	790.00
	ADVERTISING LEASE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10699	SIGN AD, LTD.	790.00	0.00	0.00	790.00

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
8580832		05/29/20	05/08/20	06/02/20			49.95	0.00	0.00	49.95
	SUPPLIES Freight 9.99									
8583900		05/29/20	05/13/20	06/07/20			143.42	0.00	0.00	143.42
	SUPPLIES Freight 34.99									

8584280		05/29/20	05/14/20	06/08/20	88.95	0.00	0.00	88.95
LOLLIPOPS Freight 12.99								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2270	SMILE MAKERS	282.32	0.00	0.00	282.32

Vendor#	Vendor Name	Class	Pay Code
S2362	SMITH & NEPHEW		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
923116937		05/29/20	05/20/20	05/29/20			509.32	0.00	0.00	509.32
SUPPLIES Freight 89.32										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2362	SMITH & NEPHEW	509.32	0.00	0.00	509.32

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
90045708		05/21/20	05/17/20	06/11/20			6,888.00	0.00	0.00	6,888.00
BLOOD										
90045634		05/21/20	05/17/20	06/11/20			-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	4,818.00	0.00	0.00	4,818.00

Vendor#	Vendor Name	Class	Pay Code
11772	STERIS INSTRUMENT MANAGEMENT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
~~2313068~~ 1873256		05/28/20	05/01/20	05/25/20			46.25	0.00	0.00	46.25
SHARPEN SCISSORS Shipping 41.00 on 5.25										
~~2314511~~ 1878283		05/28/20	05/13/20	06/07/20			316.00	0.00	0.00	316.00
REPAIR SCISSORS Shipping 41.00										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11772	STERIS INSTRUMENT MANAGEMENT	362.25	0.00	0.00	362.25

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
3643809		05/29/20	05/13/20	06/12/20			170.73	0.00	0.00	170.73
SUPPLIES										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10735	STRYKER SUSTAINABILITY	170.73	0.00	0.00	170.73

Vendor#	Vendor Name	Class	Pay Code
11039	THE BRATTON FIRM		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
050919A		05/29/20	05/09/20	05/09/20			95.76	0.00	0.00	95.76
REIMBURSEMENT OF LIEN										
050919		05/29/20	05/09/20	05/09/20			251.60	0.00	0.00	251.60
REIMBURSEMENT OF LIEN										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11039	THE BRATTON FIRM	347.36	0.00	0.00	347.36

Vendor#	Vendor Name	Class	Pay Code
D1641	THE DOCTORS' CENTER	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1233		05/28/20	03/05/20	03/30/20			75.00	0.00	0.00	75.00
MEDICAL REVIEW										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	D1641	THE DOCTORS' CENTER	75.00	0.00	0.00	75.00

Vendor#	Vendor Name	Class	Pay Code
11100	THE US CONSULTING GROUP		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
340374728	TRASH SERVICE	05/21/20	05/16/20	06/10/20		1,328.95	0.00	0.00	1,328.95

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11100	THE US CONSULTING GROUP	1,328.95	0.00	0.00	1,328.95

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
8400301182	LAUNDRY	05/15/20	05/13/20	06/07/20		57.35	0.00	0.00	57.35
8400301181	LAUNDRY	05/15/20	05/13/20	06/07/20		47.15	0.00	0.00	47.15
8400301212	LAUNDRY	05/15/20	05/13/20	06/07/20		1,474.29	0.00	0.00	1,474.29
8400301507	LAUNDRY	05/28/20	05/16/20	06/10/20		147.05	0.00	0.00	147.05
8400301508	LAUNDRY	05/29/20	05/16/20	06/10/20		156.89	0.00	0.00	156.89
8400301509 (2054)	LAUNDRY	05/29/20	05/16/20	06/10/20		175.83	0.00	0.00	175.83
8400301543	LAUNDRY	05/29/20	05/16/20	06/10/20		1,106.96	0.00	0.00	1,106.96
8400301506	LAUNDRY	05/29/20	05/16/20	06/10/20		120.39	0.00	0.00	120.39
8400301528	LAUNDRY	05/29/20	05/16/20	06/10/20		64.63	0.00	0.00	64.63
8400301503	LAUNDRY	05/29/20	05/16/20	06/10/20		17.00	0.00	0.00	17.00
8400301572	LAUNDRY	05/29/20	05/16/20	06/10/20		121.45	0.00	0.00	121.45

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	3,488.99	0.00	0.00	3,488.99

Vendor#	Vendor Name	Class	Pay Code
10450	UNIT DRUG CO, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
24407	SUPPLIES Shipping 12.60	05/29/20	05/14/20	05/29/20		51.60	0.00	0.00	51.60

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10450	UNIT DRUG CO, LLC	51.60	0.00	0.00	51.60

Vendor#	Vendor Name	Class	Pay Code
10768	VICTORIA MEDICAL FOUNDATION		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
158	MEMBERSHIP DUES	05/28/20	05/19/20	05/19/20		650.00	0.00	0.00	650.00
00159	MEMBERSHIP DUES	05/28/20	05/19/20	06/12/20		650.00	0.00	0.00	650.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10768	VICTORIA MEDICAL FOUNDATION	1,300.00	0.00	0.00	1,300.00

Vendor#	Vendor Name	Class	Pay Code

12000 VYAIRE MEDICAL, INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9100455889 ✓		05/28/20	05/06/20	05/31/20		223.62	0.00	0.00	223.62 ✓
	SUPPLIES Shipping 8.42								
9100446798 ✓		05/29/20	04/30/20	05/25/20		182.40	0.00	0.00	182.40 ✓
	SUPPLIES Shipping 8.42								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12000	VYAIRE MEDICAL, INC	406.02	0.00	0.00	406.02

Vendor# Vendor Name — Class — Pay Code

10793 WAGEWORKS ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
052319		05/29/20	05/10/20	05/23/20		3,786.37	0.00	0.00	3,786.37 ✓
	PAYROLL DEDUCT								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10793	WAGEWORKS	3,786.37	0.00	0.00	3,786.37

Vendor# Vendor Name — Class — Pay Code

W1040 WATERMARK GRAPHICS INC ✓ — M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
124971 ✓		05/28/20	05/09/20	06/08/20		125.97	0.00	0.00	125.97 ✓
	STRESS BALLS Shipping 26.97								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	W1040	WATERMARK GRAPHICS INC	125.97	0.00	0.00	125.97

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
9110669685 ✓		05/21/20	05/13/20	06/07/20		371.52	0.00	0.00	371.52 ✓
	SUPPLIES								
9110664609 ✓		05/29/20	04/30/20	05/25/20		2,146.68	0.00	0.00	2,146.68 ✓
	SUPPLIES								
9110667884 ✓		05/29/20	05/07/20	06/01/20		721.50	0.00	0.00	721.50 ✓
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	3,239.70	0.00	0.00	3,239.70

Vendor# Vendor Name — Class — Pay Code

11748 ZIMMER BIOMET ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3080830Y8026 ✓		05/28/20	05/06/20	05/31/20		109.50	0.00	0.00	109.50 ✓
	SUPPLIES Shipping 11.50								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11748	ZIMMER BIOMET	109.50	0.00	0.00	109.50

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	190,018.36	0.00	0.00	190,018.36

pg 8 correction { <40.58> + 172.09

190,149.87

190,018.36 +
40.58 −
172.09 +
190,149.87 *

APPROVED ON
MAY 31 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 180825
180911

RUN DATE:06/04/19 MEMORIAL MEDICAL CENTER PAGE 1
TIME:10:47 CHECK REGISTER GLCKREG
06/05/19 THRU 06/05/19

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	180825	06/05/19	170.52	ADAM BESIO
A/P	180826	06/05/19	2,214.35	AIRESPRING INC
A/P	180827	06/05/19	2,263.88	AIRGAS USA, LLC - CENTRAL DIV
A/P	180828	06/05/19	89.02	ALIMED INC.
A/P	180829	06/05/19	2,439.00	ALLYSON SWOPE
A/P	180830	06/05/19	118.15	ALPHA TEC SYSTEMS INC
A/P	180831	06/05/19	10,160.50	ASHFORD GARDENS
A/P	180832	06/05/19	150.00	BARD ACCESS
A/P	180833	06/05/19	417.63	BAXTER HEALTHCARE
A/P	180834	06/05/19	14,848.69	BECKMAN COULTER INC
A/P	180835	06/05/19	715.45	BEEKLEY MEDICAL
A/P	180836	06/05/19	2,098.68	BROUSSARD GROUP
A/P	180837	06/05/19	1,375.00	C-D ELECTRIC
A/P	180838	06/05/19	1,673.36	CABLE ONE
A/P	180839	06/05/19	233.06	CDW GOVERNMENT, INC.
A/P	180840	06/05/19	4,773.72	CITY OF PORT LAVACA
A/P	180841	06/05/19	464.90	COASTAL OFFICE SOLUTONS
A/P	180842	06/05/19	734.35	COASTAL REFRIGERATION
A/P	180843	06/05/19	125.52	CONMED CORPORATION
A/P	180844	06/05/19	5,860.40	DEPUY SYNTHES SALES, INC.
A/P	180845	06/05/19	1,901.46	DEWITT POTH & SON
A/P	180846	06/05/19	195.20	DIANE MOORE
A/P	180847	06/05/19	59.33	DYNATRONICS CORPORATION
A/P	180848	06/05/19	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	180849	06/05/19	155.98	ERBE USA INC SURGICAL SYSTEMS
A/P	180850	06/05/19	29,111.84	EVIDENT
A/P	180851	06/05/19	1,376.70	EVOQUA WATER TECHNOLOGIES LLC
A/P	180852	06/05/19	170.52	FAREN CAMPOS
A/P	180853	06/05/19	141.43	FEDERAL EXPRESS CORP.
A/P	180854	06/05/19	1,004.19	FLDR DESIGNS LLC
A/P	180855	06/05/19	46.83	FORTBEND HEALTHCARE CENTER
A/P	180856	06/05/19	119.96	GENESIS DIAGNOSTICS
A/P	180857	06/05/19	73,883.48	GOLDENCREEK HEALTHCARE
A/P	180858	06/05/19	350.00	GUERBET, LLC
A/P	180859	06/05/19	591.91	GULF COAST PAPER COMPANY
A/P	180860	06/05/19	83.60	GYNEX CORPORATION
A/P	180861	06/05/19	1,795.00	HEALTHCARE SOURCEHR, INC.
A/P	180862	06/05/19	16,666.66	HITACHI MEDICAL SYSTEMS
A/P	180863	06/05/19	50.00	JECKER FLOOR & GLASS
A/P	180864	06/05/19	196.20	JENISE SVETLIK
A/P	180865	06/05/19	287.55	KYLE DANIEL
A/P	180866	06/05/19	1,095.00	M G TRUST
A/P	180867	06/05/19	635.40	MAINE STANDARDS CO., LLC
A/P	180868	06/05/19	2,227.07	MCKESSON MEDICAL SURGICAL INC
A/P	180869	06/05/19	335.84	MEDIMPACT HEALTHCARE SYS, INC.
A/P	180870	06/05/19	411.43	MEDIVATORS
A/P	180871	06/05/19	149,187.00	MEMORIAL MEDICAL CENTER
A/P	180872	06/05/19	50.00	MEMORIAL MEDICAL CLINIC
A/P	180873	06/05/19	116.57	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	180874	06/05/19	139.66	MISTY PASSMORE

BANK--CHECK-- CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	180875	06/05/19	172.09	MMC AUXILIARY GIFT SHOP
A/P	180876	06/05/19	.00	VOIDED
A/P	180877	06/05/19	.00	VOIDED
A/P	180878	06/05/19	15,745.94	MORRIS & DICKSON CO, LLC
A/P	180879	06/05/19	32.48	NADINE GARNER
A/P	180880	06/05/19	859.85	NATUS MEDICAL INC
A/P	180881	06/05/19	458.67	OCCUPRO LLC
A/P	180882	06/05/19	131.08	OFFICE DEPOT
A/P	180883	06/05/19	108.58	OLYMPUS AMERICA INC
A/P	180884	06/05/19	1,463.03	ORTHO CLINICAL DIAGNOSTICS
A/P	180885	06/05/19	834.00	PATRICK OCHOA
A/P	180886	06/05/19	74.92	PENNY REYES
A/P	180887	06/05/19	1,962.89	PORT LAVACA WAVE
A/P	180888	06/05/19	7.78	POWER HARDWARE
A/P	180889	06/05/19	3,292.00	RADSOURCE
A/P	180890	06/05/19	4,824.70	SERVICE SUPPLY OF VICTORIA INC
A/P	180891	06/05/19	341.19	SHERWIN WILLIAMS
A/P	180892	06/05/19	390.50	SHIRLEY KARNEI
A/P	180893	06/05/19	790.00	SIGN AD, LTD.
A/P	180894	06/05/19	282.32	SMILE MAKERS
A/P	180895	06/05/19	509.32	SMITH & NEPHEW
A/P	180896	06/05/19	4,818.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	180897	06/05/19	362.25	STERIS INSTRUMENT MANAGEMENT
A/P	180898	06/05/19	170.73	STRYKER SUSTAINABILITY
A/P	180899	06/05/19	347.36	THE BRATTON FIRM
A/P	180900	06/05/19	2,504.50	THE CRESCENT
A/P	180901	06/05/19	75.00	THE DOCTORS' CENTER
A/P	180902	06/05/19	1,328.95	THE US CONSULTING GROUP
A/P	180903	06/05/19	3,488.99	UNIFIRST HOLDINGS INC
A/P	180904	06/05/19	18.99	UNIFORM ADVANTAGE
A/P	180905	06/05/19	51.60	UNIT DRUG CO, LLC
A/P	180906	06/05/19	1,300.00	VICTORIA MEDICAL FOUNDATION
A/P	180907	06/05/19	406.02	VYAIRE MEDICAL, INC
A/P	180908	06/05/19	3,786.37	WAGEWORKS
A/P	180909	06/05/19	125.97	WATERMARK GRAPHICS INC
A/P	180910	06/05/19	3,239.70	WERFEN USA LLC
A/P *	180911	06/05/19	109.50	ZIMMER BIOMET
A/P	180914	06/05/19	1,927.50	PABLO GARZA
A/P	180915	06/05/19	2,035.00	TEXAS DEPARTMENT OF STATE
TOTALS:			431,752.26	

Payables 190,149.87 +
Utilities 10,160.50 +
46.83 +
2,504.50 +
73,883.48 +
43.59 +
1,795.00 +
18.99 +
2,035.00 +
1,927.50 +
282,565.26 *

282,565.26 +
Transfer 149,187.00 +
431,752.26 *

APPROVED ON
JUN 06 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company 8000

STATEMENT

As of: 05/31/2019 Page: 002

DC: 8115

Territory:

Customer: 632536
Date: 06/01/2019

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

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

As of: 05/31/2019 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536
Date: 06/01/2019

PLEASE CHECK ANY ITEMS NOT PAID (✓)

National Account 632536

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 2,065.72 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 06/04/2019,
Pay This Amount: 2,024.39 USD

If Paid After 06/04/2019,
Pay this Amount: 2,065.72 USD

Due If Paid On Time:
USD 2,024.39

Disc lost if paid late: 41.33

Due If Paid Late:
USD 2,065.72

CK# 10360

GL# 60310000

9.02 +
1,115.15 +
900.22 +
2,024.39 *

APPROVED
ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company: 8000

STATEMENT

As of: 05/31/2019 Page: 001

DC: 8115

Territory: 400

Customer: 190813
Date: 06/01/2019

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

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

As of: 05/31/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 06/01/2019 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											
05/29/2019	06/04/2019	7137074325	2017008429	115Invoice	0.18	9.20		9.02		7137074325	

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

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

Subtotals: 9.20 USD

Future Due: 0.00

Past Due: 0.00

If Paid By 06/04/2019,
Pay This Amount: 9.02 USD ✓

Last Payment 4,788.97
05/27/2019

If Paid After 06/04/2019,
Pay this Amount: 9.20 USD

Due If Paid On Time:
USD 9.02
Disc lost if paid late: 0.18

Due If Paid Late:
USD 9.20

APPROVED
ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company 8000

As of: 05/31/2019 Page: 001

DC: 8115

Territory: 400

Customer: 262252
Date: 06/01/2019

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

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

As of: 05/31/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252 PLEASE CHECK ANY
Date: 06/01/2019 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											
05/28/2019	06/04/2019	7136710192 ✓	492031	115Invoice	3.32	165.88		162.56 ✓		7136710192	
05/29/2019	06/04/2019	7137094675 ✓	492726	115Invoice	16.58	829.11		812.53 ✓		7137094675	
05/29/2019	06/04/2019	7137094678 ✓	492726	115Invoice	0.10	5.23		5.13 ✓		7137094678	
05/30/2019	06/04/2019	7137329804 ✓	494445	115Invoice	0.56	27.85		27.29 ✓		7137329804	
05/31/2019	06/04/2019	7137560837 ✓	495061	115Invoice	2.20	109.84		107.64 ✓		7137560837	

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals: 1,137.91 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,788.97
05/27/2019

If Paid By 06/04/2019,
Pay This Amount: 1,115.15 USD

If Paid After 06/04/2019,
Pay this Amount: 1,137.91 USD

Due If Paid On Time:
USD 1,115.15 ✓
Disc lost if paid late: 22.76

Due If Paid Late:
USD 1,137.91

APPROVED
ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company 8000

As of: 05/31/2019 Page: 001

DC: 8115

Territory: 400

Customer: 256342
Date: 06/01/2019

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

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

As of: 05/31/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 06/01/2019 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											
5/28/2019	06/04/2019	7136803967 ✓	0524190519-00	115Invoice	0.20	9.93		9.73 ✓		7136803967	
5/28/2019	06/04/2019	7136803968 ✓	0525190203-00	115Invoice	0.02	0.94		0.92 ✓		7136803968	
5/28/2019	06/04/2019	7136803969 ✓	0959800219	115Invoice	1.63	81.34		79.71 ✓		7136803969	
5/28/2019	06/04/2019	7136803970 ✓	0526190151-01	115Invoice	0.03	1.44		1.41 ✓		7136803970	
5/28/2019	06/04/2019	7136803971 ✓	0959800220	115Invoice	8.49	424.72		416.23 ✓		7136803971	
5/28/2019	06/04/2019	7136803972 ✓	0526190308-00	115Invoice	0.71	35.31		34.60 ✓		7136803972	
5/28/2019	06/04/2019	7136803973 ✓	0526190308-00	115Invoice	0.16	8.03		7.87 ✓		7136803973	
5/29/2019	06/04/2019	7137074293 ✓	0959800221	115Invoice	0.02	0.95		0.93 ✓		7137074293	
5/29/2019	06/04/2019	7137074294 ✓	WMMH0528	115Invoice	0.01	0.28		0.27 ✓		7137074294	
5/30/2019	06/04/2019	7137363321 ✓	0959800222	115Invoice	3.43	171.29		167.86 ✓		7137363321	
5/31/2019	06/04/2019	7137580821 ✓	0959800223	115Invoice	3.69	184.38		180.69 ✓		7137580821	

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: 918.61 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,788.97
5/27/2019

If Paid By 06/04/2019,
Pay This Amount: 900.22 USD

If Paid After 06/04/2019,
Pay this Amount: 918.61 USD

Due If Paid On Time:
USD 900.22 ✓
Disc lost if paid late: 18.39

Due If Paid Late:
USD 918.61

APPROVED
ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AmerisourceBergen®

STATEMENT

Number: 58015118 Date: 05-31-2019

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:	1,218.17
Past Due:	0.00
Total Due:	1,218.17
Account Balance:	1,218.17

Account Activity

Activity Date	Due Date	Reference Number	Purchase Order Number	Activity Type	Amount
05-28-2019	06-07-2019	3023304241	146999	Invoice	19.65
05-28-2019	06-07-2019	3023304242	147001	Invoice	68.45
05-28-2019	06-07-2019	3023304243	147052	Invoice	861.84
05-28-2019	06-07-2019	3023304244	147002	Invoice	50.46
05-28-2019	06-07-2019	3023372012	147059	Invoice	30.79
05-29-2019	06-07-2019	3023405955	147070	Invoice	125.08
05-30-2019	06-07-2019	3023454029	147101	Invoice	0.40
05-31-2019	06-07-2019	3023505320	147128	Invoice	61.50

Thank You for Your Payment

Date	Payment Number	Amount
05-31-2019		(887.82)

Reminders

Due Date	Amount
06-07-2019	1,218.17

Total Due: 1,218.17

Terms:
Monday - Friday due in 7 days

40

CK# 1030

GL# 60310000

APPROVED
ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:06/06/19 MEMORIAL MEDICAL CENTER PAGE 1
TIME:13:49 CHECK REGISTER GLCKREG
06/05/19 THRU 06/06/19

BANK--CHECK CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P *	001030	06/05/19	1,218.17	AMERISOURCEBERGEN
A/P *	001036	06/05/19	2,024.39	MCKESSON
A/P	180825	06/05/19	170.52	ADAM BESIO
A/P	180826	06/05/19	2,214.35	AIRESPRING INC
A/P	180827	06/05/19	2,263.88	AIRGAS USA, LLC - CENTRAL DIV
A/P	180828	06/05/19	89.02	ALIMED INC.
A/P	180829	06/05/19	2,439.00	ALLYSON SWOPE
A/P	180830	06/05/19	118.15	ALPHA TEC SYSTEMS INC
A/P	180831	06/05/19	10,160.50	ASHFORD GARDENS
A/P	180832	06/05/19	150.00	BARD ACCESS
A/P	180833	06/05/19	417.63	BAXTER HEALTHCARE
A/P	180834	06/05/19	14,848.69	BECKMAN COULTER INC
A/P	180835	06/05/19	715.45	BEEKLEY MEDICAL
A/P	180836	06/05/19	2,098.68	BROUSSARD GROUP
A/P	180837	06/05/19	1,375.00	C-D ELECTRIC
A/P	180838	06/05/19	1,673.36	CABLE ONE
A/P	180839	06/05/19	233.06	CDW GOVERNMENT, INC.
A/P	180840	06/05/19	4,773.72	CITY OF PORT LAVACA
A/P	180841	06/05/19	464.90	COASTAL OFFICE SOLUTONS
A/P	180842	06/05/19	734.35	COASTAL REFRIGERATION
A/P	180843	06/05/19	125.52	CONMED CORPORATION
A/P	180844	06/05/19	5,860.40	DEPUY SYNTHES SALES, INC.
A/P	180845	06/05/19	1,901.46	DEWITT POTH & SON
A/P	180846	06/05/19	195.20	DIANE MOORE
A/P	180847	06/05/19	59.33	DYNATRONICS CORPORATION
A/P	180848	06/05/19	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	180849	06/05/19	155.98	ERBE USA INC SURGICAL SYSTEMS
A/P	180850	06/05/19	29,111.84	EVIDENT
A/P	180851	06/05/19	1,376.70	EVOQUA WATER TECHNOLOGIES LLC
A/P	180852	06/05/19	170.52	FAREN CAMPOS
A/P	180853	06/05/19	141.43	FEDERAL EXPRESS CORP.
A/P	180854	06/05/19	1,004.19	FLDR DESIGNS LLC
A/P	180855	06/05/19	46.83	FORTBEND HEALTHCARE CENTER
A/P	180856	06/05/19	119.96	GENESIS DIAGNOSTICS
A/P	180857	06/05/19	73,883.48	GOLDENCREEK HEALTHCARE
A/P	180858	06/05/19	350.00	GUERBET, LLC
A/P	180859	06/05/19	591.91	GULF COAST PAPER COMPANY
A/P	180860	06/05/19	83.60	GYNEX CORPORATION
A/P	180861	06/05/19	1,795.00	HEALTHCARE SOURCEHR, INC.
A/P	180862	06/05/19	16,666.66	HITACHI MEDICAL SYSTEMS
A/P	180863	06/05/19	50.00	JECKER FLOOR & GLASS
A/P	180864	06/05/19	196.20	JENISE SVETLIK
A/P	180865	06/05/19	287.55	KYLE DANIEL
A/P	180866	06/05/19	1,095.00	M G TRUST
A/P	180867	06/05/19	635.40	MAINE STANDARDS CO., LLC
A/P	180868	06/05/19	2,227.07	MCKESSON MEDICAL SURGICAL INC
A/P	180869	06/05/19	335.84	MEDIMPACT HEALTHCARE SYS, INC.
A/P	180870	06/05/19	411.43	MEDIVATORS
A/P	180871	06/05/19	149,187.00	MEMORIAL MEDICAL CENTER
A/P	180872	06/05/19	50.00	MEMORIAL MEDICAL CLINIC

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05/30/2019
10:48

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
11816	ASHFORD GARDENS ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
051319		05/21/20	05/13/20	06/13/20			4,875.00	0.00	0.00	4,875.00 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error									
052319		05/28/20	05/20/20	06/13/20			5,285.50	0.00	0.00	5,285.50 ✓
	NH TRANSFER Nursing home insurance pymt sent to MMC in error									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11816	ASHFORD GARDENS	10,160.50	0.00	0.00	10,160.50

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	10,160.50	0.00	0.00	10,160.50

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ON
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COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 180831

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10:49

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
11820	FORTBEND HEALTHCARE CENTER ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
050819A		05/14/20	05/08/20	06/13/20		15.61	0.00	0.00	15.61 ✓
	TRANSFER Nursing home insurance pymt sent to mmc in error								
050819		05/14/20	05/08/20	06/13/20		31.22	0.00	0.00	31.22 ✓
	TRANSFER Nursing home insurance pymt sent to mmc in error								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11820	FORTBEND HEALTHCARE CENTER	46.83	0.00	0.00	46.83

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	46.83	0.00	0.00	46.83

APPROVED
ON
MAY 31 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 180895

05/30/2019
10:50

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
11824	THE CRESCENT ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
050819		05/14/20	05/08/20	06/13/20		288.00	0.00	0.00	288.00 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error								
050819A		05/14/20	05/08/20	06/13/20		2,216.50	0.00	0.00	2,216.50 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11824	THE CRESCENT	2,504.50	0.00	0.00	2,504.50

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,504.50	0.00	0.00	2,504.50

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COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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10:49

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

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ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
11836	GOLDENCREEK HEALTHCARE ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
050819		05/14/20	05/08/20	06/13/20			1,518.26	0.00	0.00	1,518.26 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error									
051319		05/21/20	05/13/20	06/13/20			170.50	0.00	0.00	170.50 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error									
051419		05/21/20	05/14/20	06/13/20			13,511.40	0.00	0.00	13,511.40 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error									
051519		05/21/20	05/15/20	06/13/20			45,491.50	0.00	0.00	45,491.50 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error									
052919		05/30/20	05/29/20	06/13/20			13,191.82	0.00	0.00	13,191.82 ✓
	TRANSFER Nursing home insurance pymt sent to MMC in error									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	73,883.48	0.00	0.00	73,883.48

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	73,883.48	0.00	0.00	73,883.48

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ON
MAY 31 2019

Ck# 180857

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CALHOUN COUNTY, TEXAS

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08:40

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

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Vendor#	Vendor Name	Class	Pay Code
C1730	CITY OF PORT LAVACA ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
060519		05/28/20	05/21/20	06/05/20		4,569.47	0.00	0.00	4,569.47
	UTILITIES on original a/p list								
060519A		05/28/20	05/21/20	06/05/20		160.66	0.00	0.00	160.66
	UTILITIES on original a/p list								
051719		05/31/20	05/17/20	06/13/20		43.59	0.00	0.00	43.59
	UTILITIES rehab								

Vendor Totals	Number	Name		Gross	Discount	No-Pay	Net
	C1730	CITY OF PORT LAVACA	43.59	4,773.72	0.00	0.00	4,773.72 43.59

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,773.72 43.59	0.00	0.00	4,773.72 43.59

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ON
MAY 3 1 2019

CK# 180840

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

05/31/2019
09:52

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
12580	HEALTHCARE SOURCEHR, INC. ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
INV043133 ✓	LEAN HUMAN WEBINAR – Human resource	05/31/20	04/22/20	06/12/20			1,795.00	0.00	0.00	1,795.00 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12580	HEALTHCARE SOURCEHR, INC.	1,795.00	0.00	0.00	1,795.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,795.00	0.00	0.00	1,795.00

CK# 180861

05/31/2019
09:53

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
U1056	UNIFORM ADVANTAGE ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9367837A	UNIFORMS	05/31/20	01/17/20	02/01/20			18.99	0.00	0.00	18.99 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1056	UNIFORM ADVANTAGE	18.99	0.00	0.00	18.99

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	18.99	0.00	0.00	18.99

CIC# 180904

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06/03/2019
10:14

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

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Vendor#	Vendor Name	Class	Pay Code
10627	TEXAS DEPARTMENT OF STATE	Health Service	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
3301	05/31/2019	01/02/2019	02/28/2019				2,035.00	0.00	0.00	2,035.00
	LICENSE									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10627	TEXAS DEPARTMEI	2,035.00	0.00	0.00	2,035.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,035.00	0.00	0.00	2,035.00

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ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CICF
180915

06/03/2019
11:55

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

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
052819		06/03/20	05/28/20	05/28/20			1,927.50	0.00	0.00	1,927.50
	CONTRACT EMPLOYEE 5/14-5/23/19									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11069	PABLO GARZA	1,927.50	0.00	0.00	1,927.50

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,927.50	0.00	0.00	1,927.50

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ON
JUN 03 2019 CK# 180914
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --May 27, 2019 - June 02, 2019

Date	Bank Description	MMC Notes	Amount
5/28/2019	ACH Payment MCKESSON DRUG AUTO ACH ACH03819398 910000117	- 340B Drug Program Expense	4788.97 *
5/28/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000696353414	- 3rd Party Payor Fee	14.18
5/28/2019	ACH Payment STATE COMPTRLR TEXNET 33826079/90524 2100002	- UHRIP IGT	227080.42 **
5/29/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000697256160	- 3rd Party Payor Fee	0.82
5/30/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000698239130	- 3rd Party Payor Fee	1.98
5/31/2019	ACH Payment AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	887.82 *
5/31/2019	ACH Payment PAYROLL ONLINE TRF PAYROLL 113122655612855	- Payroll	292919.02 *
			525,693.21

CFO

June 3, 2019

Diane C. Moore, CFO
Memorial Medical Center

*Approved 05.29.19
*Approved 05.22.19

525,693.21 +
4,788.97 -
227,080.42 -
887.82 -
292,919.02 -
16.98 *

Pay
Plus
14.18 +
0.82 +
1.98 +
16.98 *

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MAY 3 1 2019
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05/30/2019
15:22

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
12576	MEMORIAL MEDICAL CENTER ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
053019	SET ASIDE MONEY FOR GEN	05/30/20	05/30/20	05/30/20			149,187.00	0.00	0.00	149,187.00 ✓

enator grant

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12576	MEMORIAL MEDICAL CENTER	149,187.00	0.00	0.00	149,187.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	149,187.00	0.00	0.00	149,187.00

APPROVED
ON
MAY 3 1 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#
180871

MEMORIAL MEDICAL CENTER
CHECK REQUEST

COPY

PAYEE: MEMORIAL MEDICAL CENTER-CLINIC SERIES

Date Requested: 5.30.19

APPROVED ON MAY 31 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

AMOUNT 149,187.00

G/L NUMBER: 10000024

EXPLANATION: TO SET ASIDE MONEY RECEIVED FOR GENERATOR GRANT

REQUESTED BY: SARAH HENDERSON

AUTHORIZED BY: CFO

Transaction Detail

Date
05/21/2019

Amount
$149,187.00

Description
ACH Deposit ONESTAR FOUNDATI ACH

Memo
Enter any notes here

Category
Select one

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
6/3/2019

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		28,100.87 ✓	127,960.15 ✓	116,785.13 ✓			-	116,925.85 ✓	**94,057.16**
							Bank Balance	116,925.85 ✓	
							Variance	-	
							Leave in Balance	100.00	
							MMC Portion QIPP 1	**22,659.33** ✓	
							MMC Portion QIPP 2,3,Lapse		
							April Interest	**40.72** ✓	
							May Interest	**68.64** ✓	
							Adjust Balance/Transfer Amt	**94,057.16** ✓	

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

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
Broadmoor		350,108.98 ✓	349,949.77 ✓	88,917.17 ✓			-	89,076.38 ✓	**84,439.83**
							Bank Balance	89,076.38	
							Variance	-	
							Leave in Balance	100.00	
							MMC Portion QIPP 1	**4,416.03** ✓	
							MMC Portion QIPP 2,3,Lapse		
							April Interest	**59.21** ✓	
							May Interest	**61.31** ✓	
							Adjust Balance/Transfer Amt	**84,439.83** ✓	

Crescent	326,202.12 ✓	326,050.23 ✓	77,167.47 ✓		-	77,319.36 ✓	**72,723.80**
					Bank Balance	77,319.36 ✓	
					Variance	-	
					Leave in Balance	100.00	
						-	
					MMC Portion QIPP 1	**4,388.70** ✓	
					MMC Portion QIPP 2,3,Lapse		
					April Interest	**51.89** ✓	
					May Interest	**54.97** ✓	
						-	
						-	
						-	
					Adjust Balance/Transfer Amt	**72,723.80** ✓	
Fort Bend	82,606.38 ✓	82,480.91 ✓	60,280.55 ✓		-	60,406.02 ✓	**50,975.13**
					Bank Balance	60,406.02	
					Variance	-	
					Leave in Balance	100.00	
						-	
					MMC Portion QIPP 1	**9,280.11** ✓	
					MMC Portion QIPP 2,3,Lapse		
					April Interest	**25.47** ✓	
					May Interest	**25.31** ✓	
						-	
						-	
						-	
					Adjust Balance/Transfer Amt	**50,975.13** ✓	
Solera at W Houston	108,133.78 ✓	107,992.20 ✓	186,604.92 ✓			186,746.50 ✓	**180,108.11**
					Bank Balance	186,746.50 ✓	
					Variance	-	
					Leave in Balance	100.00	
						-	
					MMC Portion QIPP 1	**6,451.90** ✓	
					MMC Portion QIPP 2,3,Lapse		
					April Interest	**41.58** ✓	
					May Interest	**44.91** ✓	
						-	
						-	
						-	
					Adjust Balance/Transfer Amt	**180,108.11** ✓	

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

APPROVED ON
JUN 03 2019
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CALHOUN COUNTY, TEXAS

94,057.16	+
84,439.83	+
72,723.80	+
50,975.13	+
180,108.11	+
482,304.03	*

TOTAL TRANSFERS	**482,304.03**

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

Approved:
Diane C. Moore, CFO 6/3/2019

Ashford Gardens

	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
5/28/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		5,249.02 ✓					-	5,249.02
5/28/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		15,939.46 ✓					-	15,939.46
5/28/2019 ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		9,503.00 ✓					-	9,503.00
5/29/2019 CM Wire Domestic WIRE OUT ASHFORD HEALTH CARE CENTER LTD	115,827.13 ✓						-	-
5/29/2019 ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51849177 111000		22,659.33 ✓	22,659.33 ✓				22,659.33	-
5/29/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		9,430.00 ✓					-	9,430.00
5/29/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		7,140.56 ✓					-	7,140.56
5/29/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		26,163.20 ✓					-	26,163.20
5/29/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675423 420000105		6,755.68 ✓					-	6,755.68
5/29/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2		4,899.50 ✓					-	4,899.50
5/30/2019 Check # 58	12,133.02 ✓						-	-
5/30/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3101108425 111000		117.86 ✓					-	117.86
5/31/2019 Accr Earning Pymt Added to Account		-68.64 ✓					-	
5/31/2019 ACH Deposit Amerigroup TX5C HCCLAIMPMT 3101243595 111000		198.24 ✓					-	198.24
5/31/2019 ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		7,790.00 ✓					-	7,790.00
5/31/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675423 420000137		870.64 ✓					-	870.64
	127,960.15 ✓	116,785.13 ✓	22,659.33	-	-	-	22,659.33	94,057.16

Broadmoor

	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
5/28/2019 ACH Deposit UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384		12,096.00 ✓					-	12,096.00
5/28/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		1,804.32 ✓					-	1,804.32
5/28/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676357 420000180		4,546.39 ✓					-	4,546.39
5/28/2019 ACH Deposit HUMANA INS CO EFPAYMENT 390861 8300005268319		9,801.59 ✓					-	9,801.59
5/29/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	347,585.27 ✓						-	-
5/29/2019 ACH Deposit MOLINA HEALTHCAR MOLINAACH 00820135 42000017		420.00 ✓					-	420.00
5/29/2019 ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51849180 111000		4,416.03 ✓	4,416.03 ✓				4,416.03	-
5/29/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		9,983.69 ✓					-	9,983.69
5/29/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676357 420000104		1,693.75 ✓					-	1,693.75
5/29/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2		10,589.69 ✓					-	10,589.69
5/30/2019 Check #24	2,364.50 ✓						-	-
5/30/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		526.50 ✓					-	526.50
5/30/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		13,826.00 ✓					-	13,826.00
5/30/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		2,021.60 ✓					-	2,021.60
5/30/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		6,559.30 ✓					-	6,559.30
5/30/2019 ACH Deposit AARP Supplementa HCCLAIMPMT 746003411 124384		10,571.00 ✓					-	10,571.00
5/31/2019 Accr Earning Pymt Added to Account		-61.31 ✓					-	
	349,949.77 ✓	88,917.17 ✓	4,416.03	-	-	-	4,416.03	84,439.83

Crescent

	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
5/28/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		8,218.18 ✓					-	8,218.18
5/28/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		15,492.80 ✓					-	15,492.80
5/28/2019 ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		4,987.50 ✓					-	4,987.50
5/28/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000180		2,754.65 ✓					-	2,754.65
5/29/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	323,700.27 ✓						-	-
5/29/2019 ACH Deposit MOLINA HEALTHCAR MOLINAACH 00820127 42000017		960.00 ✓					-	960.00
5/29/2019 ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51849179 111000		4,388.70 ✓	4,388.70 ✓				4,388.70	-
5/29/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		10,154.12 ✓					-	10,154.12
5/29/2019 ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		11,328.50 ✓					-	11,328.50
5/29/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000104		9,102.11 ✓					-	9,102.11
5/30/2019 Check #53	2,349.96 ✓						-	-
5/30/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		4,810.00 ✓					-	4,810.00
5/30/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		291.88 ✓					-	291.88
5/30/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000126		3,884.06 ✓					-	3,884.06
5/31/2019 Accr Earning Pymt Added to Account		-54.97 ✓					-	
5/31/2019 ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		740.00 ✓					-	740.00
	326,050.23 ✓	77,167.47 ✓	4,388.70	-	-	-	4,388.70	72,723.80

Fort Bend

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
5/28/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		5,442.72					-	5,442.72
5/28/2019	ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675663 420000180		5,351.25					-	5,351.25
5/29/2019	CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	77,511.75						-	-
5/29/2019	ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51849176 111000		9,280.11	9,280.11				9,280.11	-
5/29/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		11,606.56					-	11,606.56
5/29/2019	ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		2,268.00					-	2,268.00
5/30/2019	Check #51	4,969.16						-	-
5/31/2019	Accr Earning Pymt Added to Account		25.31					-	
5/31/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		7,182.00					-	7,182.00
5/31/2019	ACH Deposit HUMANA INS CO EFPAYMENT 390863 8300005477422		19,124.60					-	19,124.60
		82,480.91	**60,280.55**	**9,280.11**	**-**	**-**	**-**	**9,280.11**	**50,975.13**

Solera at West Houston

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
5/28/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		10,595.00					-	10,595.00
5/28/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		5,773.22					-	5,773.22
5/29/2019	CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III	104,537.62						-	-
5/29/2019	ACH Deposit HUMANA CHA DISB HCCLAIMPMT 390862 4200001392		7,083.04					-	7,083.04
5/29/2019	ACH Deposit HUMANA CHA DISB HCCLAIMPMT 390862 4200001393		3,203.11					-	3,203.11
5/29/2019	ACH Deposit B OF A-CBIC CLMS HCCLAIMPMT 390862 111000028		636.63					-	636.63
5/29/2019	ACH Deposit AMERIGROUP CORPO E-PAYMENT EE51849178 111000		6,451.92	6,451.90				6,451.90	0.02
5/29/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		22,610.00					-	22,610.00
5/29/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		19,514.89					-	19,514.89
5/29/2019	ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		6,970.00					-	6,970.00
5/29/2019	ACH Deposit HUMANA INS CO HCCLAIMPMT 390862 830000567831		50,856.22					-	50,856.22
5/29/2019	ACH Deposit HUMANA INS CO HCCLAIMPMT 390862 830000566969		2,806.72					-	2,806.72
5/29/2019	ACH Deposit HUMANA INS CO HCCLAIMPMT 390862 830000567399		6,708.62					-	6,708.62
5/30/2019	Check #51	3,454.58						-	-
5/30/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		20,116.48					-	20,116.48
5/30/2019	ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		3,690.00					-	3,690.00
5/30/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		6,558.00					-	6,558.00
5/30/2019	ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000		1,709.00					-	1,709.00
5/30/2019	ACH Deposit AARP Supplementa HCCLAIMPMT 746003411 124384		2,898.50					-	2,898.50
5/31/2019	Accr Earning Pymt Added to Account		44.91					-	
5/31/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384		4,230.00					-	4,230.00
5/31/2019	ACH Deposit HUMANA INS CO EFPAYMENT 390862 8300005477421		4,148.66					-	4,148.66
		107,992.20	**186,604.92**	**6,451.90**	**-**	**-**	**-**	**6,451.90**	**180,108.11**

TOTALS	**994,433.26**	**529,755.24**	**47,196.07**	**-**	**-**	**-**	**47,196.07**	**482,304.03**

Home

ALL ACCOUNTS | FAVORITES ★

Reorder Favorites

Favorite Accounts	Available	Previous Day
MEMORIAL MEDICAL CENTER - [redacted]	[redacted]	
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381 ★	$117,953.96	$116,925.85
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403 ★	$95,502.38	$89,076.38
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411 ★	$77,319.36	$77,319.36
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438 ★	$191,520.50	$186,746.50
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446 ★	$60,406.02	$60,406.02
MEMORIAL MEDICAL / NH [redacted]	[redacted]	
MMC -NH GULF POINTE PLAZA [redacted]	[redacted]	
MMC -NH GULF POINTE PLAZA [redacted]	[redacted]	

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
6/3/2019

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	[illegible]	6,535.75 ✓	6,416.10 ✓	121,009.72 ✓		-	-		-	-	-	121,129.37	102,879.93
											Bank Balance	121,129.37 ✓	
											Variance	-	
											Leave in Balance	100.00 ✓	
											MMC Portion QIPP 1	**18,101.85** ✓	
											MMC Portion QIPP 2,3,Lapse		
											April Interest	**19.65** ✓	
											May Interest	**27.94** ✓	
												-	
												-	
												- ✓	
											Adjust Balance/Transfer Amt	**102,879.93**	

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

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

Approved:
Diane C. Moore, CFO 6/3/2019

APPROVED
ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	
5/28/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676097 420000180		85,298.89 ✓					-	85,298.89
5/29/2019 CM Wire Domestic WIRE OUT NEXION HEALTH AT GOLDEN CREEK	6,416.10 ✓						-	-
5/29/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676097 420000104		17,581.04 ✓					-	17,581.04
5/29/2019 ACH Deposit Centene Manageme CCD+ 38888463 3110020705892		18,101.85 ✓	**18,101.85**				**18,101.85**	-
5/31/2019 Accr Earning Pymt Added to Account		27.94 ✓					-	
	6,416.10 ✓	**121,009.72** ✓	-	-	-	-	-	**85,298.89**

Home

ALL ACCOUNTS | FAVORITES ★

Reorder Favorites

Favorite Accounts	Available	Previous Day
MEMORIAL MEDICAL CENTER - [redacted]	[redacted]	
MEMORIAL MEDICAL CENTER / [redacted]	[redacted]	
MEMORIAL MEDICAL CENTER / [redacted]	[redacted]	
MEMORIAL MEDICAL CENTER / [redacted]	[redacted]	
MEMORIAL MEDICAL CENTER / [redacted]	[redacted]	
MEMORIAL MEDICAL CENTER / [redacted]	[redacted]	
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454 ★	$121,129.37	$121,129.37
MMC -NH GULF POINTE PLAZA [redacted]	[redacted]	
MMC -NH GULF POINTE PLAZA [redacted]	[redacted]	

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO: Memorial Medical Center Operating

Date Requested: 6/3/19

APPROVED ON JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK# 000091

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

AMOUNT $22,659.33

G/L NUMBER: 210000012

EXPLANATION: ASHFORD- To transfer funds for Comp 1- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

BANK	CHECK	DATE	AMOUNT	PAYEE
NHA	000059	06/06/19	22,659.33	MMC OPERATING
TOTALS:			22,659.33	

Ash Pond

APPROVED
ON
JUN 06 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: Memorial Medical Center Operating

Date Requested: 6/3/19

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

APPROVED ON JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT: $6,451.90

G/L NUMBER: 21000011

CK#000052

EXPLANATION: SOLERA- To transfer funds for Comp 1- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

BANK	CODE	NUMBER	DATE	AMOUNT	PAYEE
NHS		000052	06/06/19	6,451.90	MMC OPERATING
TOTALS:				6,451.90	

Solem

APPROVED
ON

JUN 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: 6/3/19

APPROVED ON JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

CL#000094

AMOUNT: $4,388.70

G/L NUMBER: 21000010

EXPLANATION: CRESCENT- To transfer funds for Comp 1- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: CFO

BANK--CHECK-- CODE	NUMBER	DATE	AMOUNT	PAYEE
NHC	000054	06/06/19	4,388.70	MMC OPERATING
TOTALS:			4,388.70	

Crescent

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO: Memorial Medical Center Operating

Date Requested: 6/3/19

APPROVED ON JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK# 000025

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

AMOUNT $4,416.03

G/L NUMBER: 210000009

EXPLANATION: BROADMOOR- To transfer funds for Comp 1- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
NHB	000025	06/06/19	4,416.03	MMC OPERATING
TOTALS:			4,416.03	

Broadmoor

APPROVED
ON

JUN 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: Memorial Medical Center Operating

Date Requested: 6/3/19

APPROVED ON
JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

AMOUNT: $9,280.11

G/L NUMBER: 21000008

CK # 000052

EXPLANATION: FORT BEND- To transfer funds for Comp 1- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: CFO

BANK--CHECK----------				
CODE	NUMBER DATE	AMOUNT	PAYEE	
NHF	000052 06/06/19	9,280.11	MMC OPERATING	Fort Bend
TOTALS:		9,280.11		

APPROVED
ON

JUN 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: 6/3/19

APPROVED ON JUN 03 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

AMOUNT: $18,101.85

G/L NUMBER: 21000013

EXPLANATION: GOLDEN CREEK- To transfer funds for Comp 1- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

BANK--CHECK				
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHG	000037	06/06/19	18,101.85	MMC OPERATING
TOTALS:			18,101.85	

golden creek

APPROVED
ON

JUN 06 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

QIPP Payment to MMC from Nursing Facilities **Commissioner's Court** **6/5/2019**

NH Name	From Bank Acct #	Ck #	Payee	GL #	QIPP COMP 1	QIPP COMP 2,3,&Lapse			TOTAL		Date
Ashford	10000018 - Prosperity	59	MMC -Prosperity Operating #10000001	21000012	22,659.33				22,659.33		6/5/2019
Broadmoor	10000019 - Prosperity	25	MMC -Prosperity Operating #10000001	21000009	4,416.03				4,416.03		6/5/2019
Crescent	10000020 - Prosperity	54	MMC -Prosperity Operating #10000001	21000010	4,388.70				4,388.70		6/5/2019
Fort Bend	10000021 - Prosperity	52	MMC -Prosperity Operating #10000001	21000008	9,280.11				9,280.11		6/5/2019
Golden Creek	10000023 - Prosperity	37	MMC -Prosperity Operating #10000001	21000013	18,101.85				18,101.85		6/5/2019
Solera	10000022 - Prosperity	52	MMC -Prosperity Operating #10000001	21000011	6,451.90				6,451.90		6/5/2019
				Total:	**65,297.92**	-	-	-	**65,297.92**		

Note:

Approved:
Diane Moore, CFO 6/3/2019

22,659.33 +
4,416.03 +
4,388.70 +
9,280.11 +
18,101.85 +
6,451.90 +
65,297.92 =

APPROVED
ON
JUN 06 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

87SS No 52

88-2265
1131

6-6-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 6,451.90

Six Thousand Four Hundred Fifty One 90/100 DOLLARS

PROSPERITY BANK

QIPP comp 1

County Auditor

County Treasurer

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

87SS No. 59

88-2265
1131

6-6-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 22,659.33

Twenty-two thousand six hundred fifty nine 33/100 DOLLARS

PROSPERITY BANK

QIPP comp 1

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 BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000025

88-2265/1131

Date 6-6-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 4416.03

Four Thousand Four Hundred Sixteen 03/100 DOLLARS

PROSPERITY BANK

FOR QIPP 1

County Auditor

County Treasurer

Security features are included. Details on back.

⑈000025⑈

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

MP

000037

88-2265/1131

Date 6-6-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 18,101.85

Eighteen Thousand One Hundred one 85/100 **DOLLARS**

PROSPERITY BANK

County Auditor

MP
County Treasurer

Security features are included. Details on back.

FOR QIPP comp 1

⑈000037⑈

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

MP

000052

88-2265/1131

Date 6-6-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 9280.11

Nine Thousand Two Hundred Eighty 11/100 **DOLLARS**

PROSPERITY BANK

County Auditor

MP
County Treasurer

Security features are included. Details on back.

FOR QIPP Comp 1

⑈000052⑈

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

MP

000054

88-2265/1131

Date 6-6-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 4,388.70

Four thousand Three Hundred Eighty-Eight 70/100 **DOLLARS**

PROSPERITY BANK

County Auditor

MP
County Treasurer

Security features are included. Details on back.

FOR QIPP 1