

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR -- June 19, 2019**

**TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES**

|                                                      |               |
|------------------------------------------------------|---------------|
| TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS | \$ 295,736.81 |
| TOTAL TRANSFERS BETWEEN FUNDS                        | \$ -          |
| TOTAL NURSING HOME UPL EXPENSES                      | \$ 518,542.60 |
| TOTAL INTER-GOVERNMENT TRANSFERS                     | \$ -          |
| GRAND TOTAL DISBURSEMENTS APPROVED June 19, 2019     | \$ 814,279.41 |

APPROVED

JUN 19 2019

CALHOUN COUNTY  
COMMISSIONERS COURT

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR ---June 19, 2019**

**PAYABLES AND PAYROLL**

|                                                                        |            |
|------------------------------------------------------------------------|------------|
| 6/14/2019 Weekly Payables                                              | 268,631.44 |
| 6/7/2019 McKesson-340B Prescription Expense                            | 5,213.26   |
| 6/14/2019 McKesson-340B Prescription Expense                           | 9,750.66   |
| 6/7/2019 Amerisource Bergen-340B Prescription Expense                  | 1,752.38   |
| 6/14/2019 Amerisource Bergen-340B Prescription Expense                 | 884.90     |
| 6/14/2019 Crescent-Nursing home insurance payment sent to MMC in error | 4,626.80   |

**Prosperity Electronic Bank Payments**

|                                                                         |          |
|-------------------------------------------------------------------------|----------|
| 6/10/2019 Credit Card & Lease Fees                                      | 4,248.36 |
| 6/10/2019 UHC Community Insurance Payment-reversal of duplicate deposit | 171.36   |
| 6/10/2019 UHC Community Insurance Payment-reversal of duplicate deposit | 433.44   |
| 6/7/-6/14/19 Pay Plus-Patient Claims Processing Fee                     | 24.21    |

|                                                             |                      |
|-------------------------------------------------------------|----------------------|
| <b>TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS</b> | <b>\$ 295,736.81</b> |
|-------------------------------------------------------------|----------------------|

|                                      |             |
|--------------------------------------|-------------|
| <b>TOTAL TRANSFERS BETWEEN FUNDS</b> | <b>\$ -</b> |
|--------------------------------------|-------------|

**NURSING HOME UPL EXPENSES**

|                            |            |
|----------------------------|------------|
| 6/17/2019 Nursing Home UPI | 451,726.02 |
| 6/17/2019 Nursing Home UPI | 66,793.56  |

**CREDIT CARD & LEASE FEES**

|                        |       |
|------------------------|-------|
| 6/10/2019 Golden Creek | 23.02 |
|------------------------|-------|

|                                        |                      |
|----------------------------------------|----------------------|
| <b>TOTAL NURSING HOME UPL EXPENSES</b> | <b>\$ 518,542.60</b> |
|----------------------------------------|----------------------|

|                                         |             |
|-----------------------------------------|-------------|
| <b>TOTAL INTER-GOVERNMENT TRANSFERS</b> | <b>\$ -</b> |
|-----------------------------------------|-------------|

|                                                         |                      |
|---------------------------------------------------------|----------------------|
| <b>GRAND TOTAL DISBURSEMENTS APPROVED June 19, 2019</b> | <b>\$ 814,279.41</b> |
|---------------------------------------------------------|----------------------|

**APPROVED**  
JUN 19 2019  
CALHOUN COUNTY  
COMMISSIONERS COURT

# RECEIVED

JUN 13 2019

California County Auditor

MEMORIAL MEDICAL CENTER

10:34

AP Open Invoice List

0

Due Dates Through: 06/26/2019

ap\_open\_invoice.template

Vendor# Vendor Name

Class Pay Code

10995 ABILITY NETWORK (SHIFTHOUND) ✓

| Invoice#   | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net      |
|------------|---------|----------|----------|----------|---------|-----------|----------|--------|----------|
| 1920093200 |         | 06/10/20 | 06/07/20 | 06/07/20 |         | 558.00    | 0.00     | 0.00   | 558.00 ✓ |

SCHEDULING SERVICES (6/11/19 - 6/30/19)

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

Vendor# Vendor Name

Class Pay Code

11283 ACE HARDWARE 15521 ✓

| Invoice# | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net     |
|----------|---------|----------|----------|----------|---------|-----------|----------|--------|---------|
| 134627 ✓ |         | 05/30/20 | 05/31/20 | 06/25/20 |         | 99.99     | 0.00     | 0.00   | 99.99 ✓ |

SUPPLIES (Mint.)

| Vendor Totals | Number             | Name  | Gross | Discount | No-Pay | Net |
|---------------|--------------------|-------|-------|----------|--------|-----|
| 11283         | ACE HARDWARE 15521 | 99.99 | 0.00  | 0.00     | 99.99  |     |

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      |
|--------------|---------|----------|----------|----------|---------|-----------|----------|--------|----------|
| 9960978008 ✓ |         | 05/31/20 | 03/31/20 | 06/20/20 |         | 642.44    | 0.00     | 0.00   | 642.44 ✓ |

OXYGEN

|              |  |          |          |          |  |        |      |      |          |
|--------------|--|----------|----------|----------|--|--------|------|------|----------|
| 9960978009 ✓ |  | 05/31/20 | 04/30/20 | 06/20/20 |  | 107.85 | 0.00 | 0.00 | 107.85 ✓ |
|--------------|--|----------|----------|----------|--|--------|------|------|----------|

OXYGEN

|              |  |          |          |          |  |        |      |      |          |
|--------------|--|----------|----------|----------|--|--------|------|------|----------|
| 9962445558 ✓ |  | 06/12/20 | 05/31/20 | 06/25/20 |  | 489.86 | 0.00 | 0.00 | 489.86 ✓ |
|--------------|--|----------|----------|----------|--|--------|------|------|----------|

CYLINDER RENTAL

|              |  |          |          |          |  |       |      |      |         |
|--------------|--|----------|----------|----------|--|-------|------|------|---------|
| 9962445560 ✓ |  | 06/12/20 | 05/31/20 | 06/25/20 |  | 79.36 | 0.00 | 0.00 | 79.36 ✓ |
|--------------|--|----------|----------|----------|--|-------|------|------|---------|

CYLINDER RENTAL

|              |  |          |          |          |  |        |      |      |          |
|--------------|--|----------|----------|----------|--|--------|------|------|----------|
| 9962445559 ✓ |  | 06/12/20 | 05/31/20 | 06/25/20 |  | 661.69 | 0.00 | 0.00 | 661.69 ✓ |
|--------------|--|----------|----------|----------|--|--------|------|------|----------|

CYLINDER RENTAL

|              |  |          |          |          |  |          |      |      |            |
|--------------|--|----------|----------|----------|--|----------|------|------|------------|
| 9089333545 ✓ |  | 06/13/20 | 05/31/20 | 06/25/20 |  | 2,183.26 | 0.00 | 0.00 | 2,183.26 ✓ |
|--------------|--|----------|----------|----------|--|----------|------|------|------------|

OXYGEN

| Vendor Totals | Number                        | Name     | Gross | Discount | No-Pay   | Net |
|---------------|-------------------------------|----------|-------|----------|----------|-----|
| A1680         | AIRGAS USA, LLC - CENTRAL DIV | 4,164.46 | 0.00  | 0.00     | 4,164.46 |     |

Vendor# Vendor Name

Class Pay Code

A1690 ALCON LABORATORIES, INC. ✓

M

| Invoice#     | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net        |
|--------------|---------|----------|----------|----------|---------|-----------|----------|--------|------------|
| 9655798192 ✓ |         | 06/07/20 | 05/20/20 | 06/19/20 |         | 1,594.15  | 0.00     | 0.00   | 1,594.15 ✓ |

SUPPLIES

| Vendor Totals | Number                   | Name     | Gross | Discount | No-Pay   | Net |
|---------------|--------------------------|----------|-------|----------|----------|-----|
| A1690         | ALCON LABORATORIES, INC. | 1,594.15 | 0.00  | 0.00     | 1,594.15 |     |

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        |
|----------|---------|----------|----------|----------|---------|-----------|----------|--------|------------|
| 060619   |         | 06/11/20 | 06/11/20 | 06/11/20 |         | 2,198.25  | 0.00     | 0.00   | 2,198.25 ✓ |

CONTRACT EMPLOYEE (5/28/19 - 6/6/19)

| Vendor Totals | Number        | Name     | Gross | Discount | No-Pay   | Net |
|---------------|---------------|----------|-------|----------|----------|-----|
| 10958         | ALLYSON SWOPE | 2,198.25 | 0.00  | 0.00     | 2,198.25 |     |

Vendor# Vendor Name

Class Pay Code

M2485 BAYER HEALTHCARE ✓

M

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|----------|---------|---------|--------|--------|---------|-----------|----------|--------|-----|
|----------|---------|---------|--------|--------|---------|-----------|----------|--------|-----|

|                                                         |                           |                         |          |          |             |           |            |        |             |
|---------------------------------------------------------|---------------------------|-------------------------|----------|----------|-------------|-----------|------------|--------|-------------|
| 6044358151 ✓                                            | 05/31/20                  | 05/22/20                | 06/22/20 | 1,245.00 | 0.00        | 0.00      | 1,245.00 ✓ |        |             |
| INVENTORY PHARMACY                                      |                           |                         |          |          |             |           |            |        |             |
| Vendor Totals                                           | Number                    | Name                    |          | Gross    | Discount    | No-Pay    | Net        |        |             |
|                                                         | M2485                     | BAYER HEALTHCARE        |          | 1,245.00 | 0.00        | 0.00      | 1,245.00   |        |             |
| 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         |
| 5407453 ✓                                               |                           | 05/31/20                | 05/30/20 | 06/24/20 |             | 3,507.27  | 0.00       | 0.00   | 3,507.27 ✓  |
| MAINT CONTRACT                                          |                           |                         |          |          |             |           |            |        |             |
| Vendor Totals                                           | Number                    | Name                    |          | Gross    | Discount    | No-Pay    | Net        |        |             |
|                                                         | B1220                     | BECKMAN COULTER INC     |          | 3,507.27 | 0.00        | 0.00      | 3,507.27   |        |             |
| Vendor#                                                 | Vendor Name               |                         | Class    | Pay Code |             |           |            |        |             |
| B1800                                                   | BRIGGS HEALTHCARE ✓       |                         | M        |          |             |           |            |        |             |
| Invoice#                                                | Comment                   | Tran Dt                 | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount   | No-Pay | Net         |
| B204300 ✓                                               |                           | 06/11/20                | 05/31/20 | 06/25/20 |             | 231.99    | 0.00       | 0.00   | 231.99 ✓    |
| SUPPLIES <i>Shipping 21.14</i>                          |                           |                         |          |          |             |           |            |        |             |
| Vendor Totals                                           | Number                    | Name                    |          | Gross    | Discount    | No-Pay    | Net        |        |             |
|                                                         | B1800                     | BRIGGS HEALTHCARE       |          | 231.99   | 0.00        | 0.00      | 231.99     |        |             |
| 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         |
| 060419                                                  |                           | 06/12/20                | 06/04/20 | 06/04/20 |             | 382.00    | 0.00       | 0.00   | 382.00 ✓    |
| AUTO INS '03 FORD/'03 DODG <i>(11/11/19 - 12/31/19)</i> |                           |                         |          |          |             |           |            |        |             |
| Vendor Totals                                           | Number                    | Name                    |          | Gross    | Discount    | No-Pay    | Net        |        |             |
|                                                         | C1048                     | CALHOUN COUNTY          |          | 382.00   | 0.00        | 0.00      | 382.00     |        |             |
| Vendor#                                                 | Vendor Name               |                         | Class    | Pay Code |             |           |            |        |             |
| L1629                                                   | CHRISTINA ZAPATA-ARROYO ✓ |                         |          |          |             |           |            |        |             |
| Invoice#                                                | Comment                   | Tran Dt                 | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount   | No-Pay | Net         |
| 042019                                                  |                           | 06/12/20                | 04/01/20 | 04/01/20 |             | 412.50    | 0.00       | 0.00   | 412.50 ✓    |
| SPEECH THERAPY <i>April 2019</i>                        |                           |                         |          |          |             |           |            |        |             |
| 052019                                                  |                           | 06/12/20                | 05/01/20 | 05/01/20 |             | 165.00    | 0.00       | 0.00   | 165.00 ✓    |
| SPEECH THERAPY <i>May 2019</i>                          |                           |                         |          |          |             |           |            |        |             |
| Vendor Totals                                           | Number                    | Name                    |          | Gross    | Discount    | No-Pay    | Net        |        |             |
|                                                         | L1629                     | CHRISTINA ZAPATA-ARROYO |          | 577.50   | 0.00        | 0.00      | 577.50     |        |             |
| 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         |
| 890400 ✓                                                |                           | 06/07/20                | 05/28/20 | 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 |             |           |            |        |             |
| 12612                                                   | DASHBOARD MD ✓            |                         |          |          |             |           |            |        |             |
| Invoice#                                                | Comment                   | Tran Dt                 | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount   | No-Pay | Net         |
| 8403 ✓                                                  |                           | 06/13/20                | 06/12/20 | 06/12/20 |             | 5,425.00  | 0.00       | 0.00   | 5,425.00 ✓  |
| NIGHTLY DATA LOAD                                       |                           |                         |          |          |             |           |            |        |             |
| Vendor Totals                                           | Number                    | Name                    |          | Gross    | Discount    | No-Pay    | Net        |        |             |
|                                                         | 12612                     | DASHBOARD MD            |          | 5,425.00 | 0.00        | 0.00      | 5,425.00   |        |             |
| Vendor#                                                 | Vendor Name               |                         | Class    | Pay Code |             |           |            |        |             |
| 11011                                                   | DIAMOND HEALTHCARE CORP ✓ |                         |          |          |             |           |            |        |             |
| Invoice#                                                | Comment                   | Tran Dt                 | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount   | No-Pay | Net         |
| IN20052872 ✓                                            |                           | 05/31/20                | 05/31/20 | 06/25/20 |             | 19,166.67 | 0.00       | 0.00   | 19,166.67 ✓ |

|                          |                                 |          |          |          |             |           |          |        |           |   |
|--------------------------|---------------------------------|----------|----------|----------|-------------|-----------|----------|--------|-----------|---|
| CPR SERVICES             |                                 |          |          |          |             |           |          |        |           |   |
| IN20052871 ✓             | 05/31/20                        | 05/31/20 | 06/25/20 |          |             | 31,144.58 | 0.00     | 0.00   | 31,144.58 | ✓ |
| BEHAVIORAL HEALTH SERVIC |                                 |          |          |          |             |           |          |        |           |   |
| Vendor#                  | Vendor Name                     |          |          |          |             | Gross     | Discount | No-Pay | Net       |   |
| 11011                    | DIAMOND HEALTHCARE CORP         |          |          |          |             | 50,311.25 | 0.00     | 0.00   | 50,311.25 |   |
| Vendor#                  | Vendor Name                     |          |          |          |             |           |          |        |           |   |
| 11291                    | DOWELL PEST CONTROL ✓           |          |          |          |             |           |          |        |           |   |
| Invoice#                 | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount | No-Pay | Net       |   |
| 12326                    |                                 | 06/11/20 | 05/31/20 | 06/25/20 |             | 105.00    | 0.00     | 0.00   | 105.00    | ✓ |
| PEST CONTROL Clinic      |                                 |          |          |          |             |           |          |        |           |   |
| Vendor#                  | Vendor Name                     |          |          |          |             | Gross     | Discount | No-Pay | Net       |   |
| 11291                    | DOWELL PEST CONTROL             |          |          |          |             | 105.00    | 0.00     | 0.00   | 105.00    |   |
| Vendor#                  | Vendor Name                     |          |          |          |             |           |          |        |           |   |
| 11284                    | EMERGENCY STAFFING SOLUTIONS ✓  |          |          |          |             |           |          |        |           |   |
| Invoice#                 | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount | No-Pay | Net       |   |
| 37977 ✓                  |                                 | 06/12/20 | 06/25/20 | 06/25/20 |             | 40,062.50 | 0.00     | 0.00   | 40,062.50 | ✓ |
| ER STAFFING              |                                 |          |          |          |             |           |          |        |           |   |
| Vendor#                  | Vendor Name                     |          |          |          |             | Gross     | Discount | No-Pay | Net       |   |
| 11284                    | EMERGENCY STAFFING SOLUTIONS    |          |          |          |             | 40,062.50 | 0.00     | 0.00   | 40,062.50 |   |
| Vendor#                  | Vendor Name                     |          |          |          |             |           |          |        |           |   |
| 10042                    | ERBE USA INC SURGICAL SYSTEMS ✓ |          |          |          |             |           |          |        |           |   |
| Invoice#                 | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount | No-Pay | Net       |   |
| 547996 ✓                 |                                 | 06/07/20 | 05/20/20 | 06/07/20 |             | 155.98    | 0.00     | 0.00   | 155.98    | ✓ |
| SUPPLIES Shipping 16.48  |                                 |          |          |          |             |           |          |        |           |   |
| Vendor#                  | Vendor Name                     |          |          |          |             | Gross     | Discount | No-Pay | Net       |   |
| 10042                    | ERBE USA INC SURGICAL SYSTEMS   |          |          |          |             | 155.98    | 0.00     | 0.00   | 155.98    |   |
| Vendor#                  | Vendor Name                     |          |          |          |             |           |          |        |           |   |
| C2510                    | EVIDENT ✓                       |          |          |          |             |           |          |        |           |   |
| Invoice#                 | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount | No-Pay | Net       |   |
| 957589 ✓                 |                                 | 06/11/20 | 05/31/20 | 06/25/20 |             | 4,500.00  | 0.00     | 0.00   | 4,500.00  | ✓ |
| SURVEY HCAHPS OAS        |                                 |          |          |          |             |           |          |        |           |   |
| Vendor#                  | Vendor Name                     |          |          |          |             | Gross     | Discount | No-Pay | Net       |   |
| C2510                    | EVIDENT                         |          |          |          |             | 4,500.00  | 0.00     | 0.00   | 4,500.00  |   |
| Vendor#                  | Vendor Name                     |          |          |          |             |           |          |        |           |   |
| 10689                    | FASTHEALTH CORPORATION ✓        |          |          |          |             |           |          |        |           |   |
| Invoice#                 | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount | No-Pay | Net       |   |
| 06A19MMC ✓               |                                 | 06/11/20 | 06/01/20 | 06/16/20 |             | 495.00    | 0.00     | 0.00   | 495.00    | ✓ |
| WEBSITE                  |                                 |          |          |          |             |           |          |        |           |   |
| Vendor#                  | Vendor Name                     |          |          |          |             | Gross     | Discount | No-Pay | Net       |   |
| 10689                    | FASTHEALTH CORPORATION          |          |          |          |             | 495.00    | 0.00     | 0.00   | 495.00    |   |
| Vendor#                  | Vendor Name                     |          |          |          |             |           |          |        |           |   |
| F1100                    | FEDERAL EXPRESS CORP. ✓         |          |          |          |             |           |          |        |           |   |
| Invoice#                 | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross     | Discount | No-Pay | Net       |   |
| 656771536 ✓              |                                 | 06/10/20 | 05/30/20 | 06/24/20 |             | 54.70     | 0.00     | 0.00   | 54.70     | ✓ |
| SHIPPING                 |                                 |          |          |          |             |           |          |        |           |   |
| 657510218 ✓              |                                 | 06/11/20 | 06/06/20 | 06/21/20 |             | 24.00     | 0.00     | 0.00   | 24.00     | ✓ |
| SHIPPING                 |                                 |          |          |          |             |           |          |        |           |   |
| Vendor#                  | Vendor Name                     |          |          |          |             | Gross     | Discount | No-Pay | Net       |   |
| F1100                    | FEDERAL EXPRESS CORP.           |          |          |          |             | 78.70     | 0.00     | 0.00   | 78.70     |   |
| Vendor#                  | Vendor Name                     |          |          |          |             |           |          |        |           |   |
| F1400                    | FISHER HEALTHCARE ✓             |          |          |          |             |           |          |        |           |   |

| Invoice#      | Comment                          | Tran Dt                                                 | Inv Dt   | Due Dt   | Check D  | Pay Gross | Discount                       | No-Pay   | Net       |            |          |
|---------------|----------------------------------|---------------------------------------------------------|----------|----------|----------|-----------|--------------------------------|----------|-----------|------------|----------|
| 5525686 ✓     |                                  | 05/31/20                                                | 05/21/20 | 06/20/20 |          | -363.00   | 0.00                           | 0.00     | -363.00 ✓ |            |          |
|               | CREDIT                           |                                                         |          |          |          |           |                                |          |           |            |          |
| 6458528 ✓     |                                  | 05/31/20                                                | 05/29/20 | 06/23/20 |          | 232.00    | 0.00                           | 0.00     | 232.00 ✓  |            |          |
|               | SUPPLIES                         |                                                         |          |          |          |           |                                |          |           |            |          |
| 6458529 ✓     |                                  | 05/31/20                                                | 05/29/20 | 06/23/20 |          | 65.64     | 0.00                           | 0.00     | 65.64 ✓   |            |          |
|               | SUPPLIES                         |                                                         |          |          |          |           |                                |          |           |            |          |
| 6605980 ✓     |                                  | 06/07/20                                                | 05/30/20 | 06/24/20 |          | 746.35    | 0.00                           | 0.00     | 746.35 ✓  |            |          |
|               | SUPPLIES                         |                                                         |          |          |          |           |                                |          |           |            |          |
| 6605969 ✓     |                                  | 06/07/20                                                | 05/30/20 | 06/24/20 |          | 44.33     | 0.00                           | 0.00     | 44.33 ✓   |            |          |
|               | SUPPLIES <i>Shipping 26.15</i>   |                                                         |          |          |          |           |                                |          |           |            |          |
| Vendor Totals |                                  |                                                         |          |          |          | Number    | Name                           | Gross    | Discount  | No-Pay     | Net      |
|               |                                  |                                                         |          |          |          | F1400     | FISHER HEALTHCARE              | 725.32   | 0.00      | 0.00       | 725.32   |
| 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        |          |
|               | 49926 ✓                          |                                                         | 05/31/20 | 05/24/20 | 06/23/20 |           | 122.93                         | 0.00     | 0.00      | 122.93 ✓   |          |
|               |                                  | SUPPLIES <i>Shipping 70.00</i>                          |          |          |          |           |                                |          |           |            |          |
| Vendor Totals |                                  |                                                         |          |          |          | Number    | Name                           | Gross    | Discount  | No-Pay     | Net      |
|               |                                  |                                                         |          |          |          | 10901     | GENESIS DIAGNOSTICS            | 122.93   | 0.00      | 0.00       | 122.93   |
| Vendor#       | Vendor Name                      |                                                         |          |          | Class    | Pay Code  |                                |          |           |            |          |
| 10642         | GLAXOSMITHKLINE PHARMACUETICAL ✓ |                                                         |          |          |          |           |                                |          |           |            |          |
|               | Invoice#                         | Comment                                                 | Tran Dt  | Inv Dt   | Due Dt   | Check D   | Pay Gross                      | Discount | No-Pay    | Net        |          |
|               | 8252810670 ✓                     |                                                         | 05/31/20 | 05/23/20 | 06/23/20 |           | 468.56                         | 0.00     | 0.00      | 468.56 ✓   |          |
|               |                                  | INVENTORY <i>Shipping 26.00</i>                         |          |          |          |           |                                |          |           |            |          |
| Vendor Totals |                                  |                                                         |          |          |          | Number    | Name                           | Gross    | Discount  | No-Pay     | Net      |
|               |                                  |                                                         |          |          |          | 10642     | GLAXOSMITHKLINE PHARMACUETICAL | 468.56   | 0.00      | 0.00       | 468.56   |
| 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        |          |
|               | 1675381 ✓                        |                                                         | 05/29/20 | 05/14/20 | 06/14/20 |           | 643.29                         | 0.00     | 0.00      | 643.29 ✓   |          |
|               |                                  | SUPPLIES                                                |          |          |          |           |                                |          |           |            |          |
|               | 1678835 ✓                        |                                                         | 05/29/20 | 05/21/20 | 06/20/20 |           | 28.96                          | 0.00     | 0.00      | 28.96 ✓    |          |
|               |                                  | SUPPLIES                                                |          |          |          |           |                                |          |           |            |          |
|               | 1679565 ✓                        |                                                         | 05/29/20 | 05/22/20 | 06/21/20 |           | 1,331.74                       | 0.00     | 0.00      | 1,331.74 ✓ |          |
|               |                                  | SUPPLIES                                                |          |          |          |           |                                |          |           |            |          |
| Vendor Totals |                                  |                                                         |          |          |          | Number    | Name                           | Gross    | Discount  | No-Pay     | Net      |
|               |                                  |                                                         |          |          |          | G1210     | GULF COAST PAPER COMPANY       | 2,003.99 | 0.00      | 0.00       | 2,003.99 |
| Vendor#       | Vendor Name                      |                                                         |          |          | Class    | Pay Code  |                                |          |           |            |          |
| H1100         | HAYES ELECTRIC SERVICE ✓         |                                                         |          |          | W        |           |                                |          |           |            |          |
|               | Invoice#                         | Comment                                                 | Tran Dt  | Inv Dt   | Due Dt   | Check D   | Pay Gross                      | Discount | No-Pay    | Net        |          |
|               | A219051703 ✓                     |                                                         | 05/31/20 | 05/20/20 | 06/20/20 |           | 449.80                         | 0.00     | 0.00      | 449.80 ✓   |          |
|               |                                  | SUPPLIES                                                |          |          |          |           |                                |          |           |            |          |
| Vendor Totals |                                  |                                                         |          |          |          | Number    | Name                           | Gross    | Discount  | No-Pay     | Net      |
|               |                                  |                                                         |          |          |          | H1100     | HAYES ELECTRIC SERVICE         | 449.80   | 0.00      | 0.00       | 449.80   |
| Vendor#       | Vendor Name                      |                                                         |          |          | Class    | Pay Code  |                                |          |           |            |          |
| H3400         | HUBERT COMPANY ✓                 |                                                         |          |          | M        |           |                                |          |           |            |          |
|               | Invoice#                         | Comment                                                 | Tran Dt  | Inv Dt   | Due Dt   | Check D   | Pay Gross                      | Discount | No-Pay    | Net        |          |
|               | 509677 ✓                         |                                                         | 06/12/20 | 05/21/20 | 06/20/20 |           | 582.65                         | 0.00     | 0.00      | 582.65 ✓   |          |
|               |                                  | CROWD CONTROL CHAIN <i>Shipping 85.40 (Barrier kit)</i> |          |          |          |           |                                |          |           |            |          |
| Vendor Totals |                                  |                                                         |          |          |          | Number    | Name                           | Gross    | Discount  | No-Pay     | Net      |
|               |                                  |                                                         |          |          |          | H3400     | HUBERT COMPANY                 | 582.65   | 0.00      | 0.00       | 582.65   |

| Vendor#       | Vendor Name                                                         |                                |          |          | Class   | Pay Code  |          |        |           |   |
|---------------|---------------------------------------------------------------------|--------------------------------|----------|----------|---------|-----------|----------|--------|-----------|---|
| 10922         | HUNTER PHARMACY SERVICES ✓                                          |                                |          |          |         |           |          |        |           |   |
| Invoice#      | Comment                                                             | Tran Dt                        | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net       |   |
| 3441 ✓        |                                                                     | 06/11/20                       | 05/31/20 | 06/20/20 |         | 14,539.19 | 0.00     | 0.00   | 14,539.19 | ✓ |
|               | PHARM SERVICES                                                      |                                |          |          |         |           |          |        |           |   |
| Vendor Totals | Number                                                              | Name                           |          |          |         | Gross     | Discount | No-Pay | Net       |   |
|               | 10922                                                               | HUNTER PHARMACY SERVICES       |          |          |         | 14,539.19 | 0.00     | 0.00   | 14,539.19 |   |
| Vendor#       | Vendor Name                                                         |                                |          |          | Class   | Pay Code  |          |        |           |   |
| 11200         | IRON MOUNTAIN ✓                                                     |                                |          |          |         |           |          |        |           |   |
| Invoice#      | Comment                                                             | Tran Dt                        | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net       |   |
| BSHX298 ✓     |                                                                     | 05/31/20                       | 05/28/20 | 06/25/20 |         | 713.56    | 0.00     | 0.00   | 713.56    | ✓ |
|               | SHRED SERVICES                                                      |                                |          |          |         |           |          |        |           |   |
| Vendor Totals | Number                                                              | Name                           |          |          |         | Gross     | Discount | No-Pay | Net       |   |
|               | 11200                                                               | IRON MOUNTAIN                  |          |          |         | 713.56    | 0.00     | 0.00   | 713.56    |   |
| Vendor#       | Vendor Name                                                         |                                |          |          | Class   | Pay Code  |          |        |           |   |
| 11108         | ITERSOURCE CORPORATION ✓                                            |                                |          |          |         |           |          |        |           |   |
| Invoice#      | Comment                                                             | Tran Dt                        | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net       |   |
| 5173 ✓        |                                                                     | 06/11/20                       | 06/01/20 | 06/01/20 |         | 250.00    | 0.00     | 0.00   | 250.00    | ✓ |
|               | SUPPORT SERVICES                                                    |                                |          |          |         |           |          |        |           |   |
| Vendor Totals | Number                                                              | Name                           |          |          |         | Gross     | Discount | No-Pay | Net       |   |
|               | 11108                                                               | ITERSOURCE CORPORATION         |          |          |         | 250.00    | 0.00     | 0.00   | 250.00    |   |
| Vendor#       | Vendor Name                                                         |                                |          |          | Class   | Pay Code  |          |        |           |   |
| J0150         | J & J HEALTH CARE SYSTEMS, INC ✓                                    |                                |          |          |         |           |          |        |           |   |
| Invoice#      | Comment                                                             | Tran Dt                        | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net       |   |
| 920960662 ✓   |                                                                     | 05/31/20                       | 05/22/20 | 06/21/20 |         | 1,243.60  | 0.00     | 0.00   | 1,243.60  | ✓ |
|               | SUPPLIES                                                            |                                |          |          |         |           |          |        |           |   |
| Vendor Totals | Number                                                              | Name                           |          |          |         | Gross     | Discount | No-Pay | Net       |   |
|               | J0150                                                               | J & J HEALTH CARE SYSTEMS, INC |          |          |         | 1,243.60  | 0.00     | 0.00   | 1,243.60  |   |
| 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       |   |
| 418122 ✓      |                                                                     | 05/31/20                       | 05/23/20 | 06/25/20 |         | 8,880.00  | 0.00     | 0.00   | 8,880.00  | ✓ |
|               | PRO FEES CLINIC <i>Dr. Crawford 5/8-5/10/19 - services rendered</i> |                                |          |          |         |           |          |        |           |   |
| 2029527 ✓     |                                                                     | 05/31/20                       | 05/23/20 | 06/25/20 |         | 1,858.04  | 0.00     | 0.00   | 1,858.04  | ✓ |
|               | PRO FEES <i>Dr. Crawford travel exp.</i>                            |                                |          |          |         |           |          |        |           |   |
| 416953 ✓      |                                                                     | 06/10/20                       | 05/03/20 | 05/03/20 |         | -900.00   | 0.00     | 0.00   | -900.00   | ✓ |
|               | PRO FEES/PAPAPETROU                                                 |                                |          |          |         |           |          |        |           |   |
| 418819 ✓      |                                                                     | 06/10/20                       | 06/05/20 | 06/05/20 |         | 8,880.00  | 0.00     | 0.00   | 8,880.00  | ✓ |
|               | PRO FEES/CRAWFORD - <i>5/29-5/31/19 services rendered</i>           |                                |          |          |         |           |          |        |           |   |
| 2030292 ✓     |                                                                     | 06/10/20                       | 06/06/20 | 06/06/20 |         | 1,218.49  | 0.00     | 0.00   | 1,218.49  | ✓ |
|               | PRO FEES/CRAWFORD - <i>travel exp.</i>                              |                                |          |          |         |           |          |        |           |   |
| Vendor Totals | Number                                                              | Name                           |          |          |         | Gross     | Discount | No-Pay | Net       |   |
|               | 11230                                                               | JACKSON & COKER LOCUM TENENS,  |          |          |         | 19,936.53 | 0.00     | 0.00   | 19,936.53 |   |
| Vendor#       | Vendor Name                                                         |                                |          |          | Class   | Pay Code  |          |        |           |   |
| L1640         | LOWE'S HOME CENTERS INC ✓                                           |                                |          |          | W       |           |          |        |           |   |
| Invoice#      | Comment                                                             | Tran Dt                        | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net       |   |
| 80432         |                                                                     | 06/10/20                       | 05/06/20 | 06/25/20 |         | 341.30    | 0.00     | 0.00   | 341.30    | ✓ |
|               | SUPPLIES                                                            |                                |          |          |         |           |          |        |           |   |
| 53580A        |                                                                     | 06/10/20                       | 05/28/20 | 06/25/20 |         | 378.07    | 0.00     | 0.00   | 378.07    | ✓ |
|               | SUPPLIES                                                            |                                |          |          |         |           |          |        |           |   |
| 060219        |                                                                     | 06/10/20                       | 06/02/20 | 06/25/20 |         | 16.41     | 0.00     | 0.00   | 16.41     | ✓ |

## INTEREST CHARGED

| Vendor Totals                          |                                 |          |          | Number   | Name                          |          | Gross    | Discount | No-Pay     | Net      |
|----------------------------------------|---------------------------------|----------|----------|----------|-------------------------------|----------|----------|----------|------------|----------|
|                                        |                                 |          |          | L1640    | LOWE'S HOME CENTERS INC       |          | 735.78   | 0.00     | 0.00       | 735.78   |
| 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        |          |
| 060619                                 |                                 | 06/12/20 | 05/24/20 | 06/06/20 |                               | 1,095.00 | 0.00     | 0.00     | 1,095.00 ✓ |          |
| PAYROLL CLEARING                       |                                 |          |          |          |                               |          |          |          |            |          |
| Vendor Totals                          |                                 |          |          | Number   | Name                          |          | Gross    | Discount | No-Pay     | Net      |
|                                        |                                 |          |          | 10972    | M G TRUST                     |          | 1,095.00 | 0.00     | 0.00       | 1,095.00 |
| 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        |          |
| 053119                                 |                                 | 06/07/20 | 05/31/20 | 06/15/20 |                               | 5.30     | 0.00     | 0.00     | 5.30 ✓     |          |
| CHARGEBACK/FINANCE CHAI                |                                 |          |          |          |                               |          |          |          |            |          |
| 54673138 ✓                             |                                 | 06/11/20 | 05/20/20 | 06/04/20 |                               | 253.90   | 0.00     | 0.00     | 253.90 ✓   |          |
| SUPPLIES                               |                                 |          |          |          |                               |          |          |          |            |          |
| 6049465 ✓                              |                                 | 06/11/20 | 05/31/20 | 06/15/20 |                               | -9.74    | 0.00     | 0.00     | -9.74 ✓    |          |
| CHARGEBACK                             |                                 |          |          |          |                               |          |          |          |            |          |
| Vendor Totals                          |                                 |          |          | Number   | Name                          |          | Gross    | Discount | No-Pay     | Net      |
|                                        |                                 |          |          | M2178    | MCKESSON MEDICAL SURGICAL INC |          | 249.46   | 0.00     | 0.00       | 249.46   |
| Vendor#                                | Vendor Name                     |          |          | Class    | Pay Code                      |          |          |          |            |          |
| 11141                                  | MEDICAL DATA SYSTEMS, INC. ✓    |          |          |          |                               |          |          |          |            |          |
| Invoice#                               | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay                   | Gross    | Discount | No-Pay   | Net        |          |
| 135048 ✓                               |                                 | 05/31/20 | 05/31/20 | 06/25/20 |                               | 996.58   | 0.00     | 0.00     | 996.58 ✓   |          |
| COLLECTION EXP                         |                                 |          |          |          |                               |          |          |          |            |          |
| 135046 ✓                               |                                 | 05/31/20 | 05/31/20 | 06/25/20 |                               | 844.05   | 0.00     | 0.00     | 844.05 ✓   |          |
| COLLECTION FEES                        |                                 |          |          |          |                               |          |          |          |            |          |
| 135047 ✓                               |                                 | 05/31/20 | 05/31/20 | 06/25/20 |                               | 2,018.62 | 0.00     | 0.00     | 2,018.62 ✓ |          |
| COLLECTION FEES                        |                                 |          |          |          |                               |          |          |          |            |          |
| Vendor Totals                          |                                 |          |          | Number   | Name                          |          | Gross    | Discount | No-Pay     | Net      |
|                                        |                                 |          |          | 11141    | MEDICAL DATA SYSTEMS, INC.    |          | 3,859.25 | 0.00     | 0.00       | 3,859.25 |
| Vendor#                                | Vendor Name                     |          |          | Class    | Pay Code                      |          |          |          |            |          |
| 12588                                  | MEDICAL TECHNOLOGY ASSOCIATES ✓ |          |          |          |                               |          |          |          |            |          |
| Invoice#                               | Comment                         | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay                   | Gross    | Discount | No-Pay   | Net        |          |
| INV157236 ✓                            |                                 | 05/31/20 | 05/31/20 | 06/25/20 |                               | 500.00   | 0.00     | 0.00     | 500.00 ✓   |          |
| VENT TESTING                           |                                 |          |          |          |                               |          |          |          |            |          |
| INV157235 ✓                            |                                 | 05/31/20 | 05/31/20 | 06/25/20 |                               | 693.40   | 0.00     | 0.00     | 693.40 ✓   |          |
| DIAGNOSE LEAK                          |                                 |          |          |          |                               |          |          |          |            |          |
| Vendor Totals                          |                                 |          |          | Number   | Name                          |          | Gross    | Discount | No-Pay     | Net      |
|                                        |                                 |          |          | 12588    | MEDICAL TECHNOLOGY ASSOCIATES |          | 1,193.40 | 0.00     | 0.00       | 1,193.40 |
| 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        |          |
| 1878202777 ✓                           |                                 | 05/31/20 | 05/29/20 | 06/23/20 |                               | 196.34   | 0.00     | 0.00     | 196.34 ✓   |          |
| SUPPLIES                               |                                 |          |          |          |                               |          |          |          |            |          |
| 1878202778 ✓                           |                                 | 05/31/20 | 05/29/20 | 06/23/20 |                               | 469.98   | 0.00     | 0.00     | 469.98 ✓   |          |
| SUPPLIES                               |                                 |          |          |          |                               |          |          |          |            |          |
| 1878243029 ✓                           |                                 | 05/31/20 | 05/30/20 | 06/24/20 |                               | 1,888.43 | 0.00     | 0.00     | 1,888.43 ✓ |          |
| SUPPLIES                               |                                 |          |          |          |                               |          |          |          |            |          |
| 1878243033 ✓                           |                                 | 05/31/20 | 05/30/20 | 06/24/20 |                               | 33.40    | 0.00     | 0.00     | 33.40 ✓    |          |
| SUPPLIES <i>Wright 20-78 on 12-6-2</i> |                                 |          |          |          |                               |          |          |          |            |          |



|                                       |                                |          |          |          |             |          |          |        |          |   |   |
|---------------------------------------|--------------------------------|----------|----------|----------|-------------|----------|----------|--------|----------|---|---|
| 1878243025                            | ✓                              | 05/31/20 | 05/30/20 | 06/24/20 |             | 204.24   | 0.00     | 0.00   | 204.24   | ✓ |   |
| SUPPLIES <i>freight 70.61</i>         |                                |          |          |          |             |          |          |        |          |   |   |
| Vendor Totals Number Name             |                                |          |          |          |             | Gross    | Discount | No-Pay | Net      |   |   |
| M2470 MEDLINE INDUSTRIES INC          |                                |          |          |          |             | 2,792.39 | 0.00     | 0.00   | 2,792.39 |   |   |
| 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      |   |   |
| 060619                                |                                | 06/12/20 | 05/24/20 | 06/06/20 |             | 45.00    | 0.00     | 0.00   | 45.00    |   | ✓ |
| PAYROLL DEDUCT - <i>Clinic Visits</i> |                                |          |          |          |             |          |          |        |          |   |   |
| Vendor Totals Number Name             |                                |          |          |          |             | Gross    | Discount | No-Pay | Net      |   |   |
| 10963 MEMORIAL MEDICAL CLINIC         |                                |          |          |          |             | 45.00    | 0.00     | 0.00   | 45.00    |   |   |
| 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      |   |   |
| 2169492                               | ✓                              | 05/21/20 | 05/30/20 | 06/24/20 |             | 76.13    | 0.00     | 0.00   | 76.13    |   | ✓ |
| SUPPLIES <i>Shipping 18.13</i>        |                                |          |          |          |             |          |          |        |          |   |   |
| 2181904                               | ✓                              | 06/12/20 | 06/04/20 | 06/24/20 |             | 76.21    | 0.00     | 0.00   | 76.21    |   | ✓ |
| SUPPLIES <i>Shipping 18.21</i>        |                                |          |          |          |             |          |          |        |          |   |   |
| Vendor Totals Number Name             |                                |          |          |          |             | Gross    | Discount | No-Pay | Net      |   |   |
| 10182 MERCEDES SCIENTIFIC             |                                |          |          |          |             | 152.34   | 0.00     | 0.00   | 152.34   |   |   |
| 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      |   |   |
| 8800458545                            | ✓                              | 05/31/20 | 05/21/20 | 06/20/20 |             | 159.09   | 0.00     | 0.00   | 159.09   |   | ✓ |
| SUPPLIES <i>freight 23.35</i>         |                                |          |          |          |             |          |          |        |          |   |   |
| Vendor Totals Number Name             |                                |          |          |          |             | Gross    | Discount | No-Pay | Net      |   |   |
| M2659 MERRY X-RAY/SOURCEONE HEALTHCA  |                                |          |          |          |             | 159.09   | 0.00     | 0.00   | 159.09   |   |   |
| Vendor#                               | Vendor Name                    |          |          |          |             | Class    | Pay Code |        |          |   |   |
| 11976                                 | MID-COAST ELECTRIC SUPPLY, INC |          |          |          |             | ✓        |          |        |          |   |   |
| Invoice#                              | Comment                        | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross    | Discount | No-Pay | Net      |   |   |
| 181184600                             | ✓                              | 06/11/20 | 03/18/20 | 04/17/20 |             | 42.14    | 0.00     | 0.00   | 42.14    |   | ✓ |
| SUPPLIES <i>freight 14.14</i>         |                                |          |          |          |             |          |          |        |          |   |   |
| 181355600                             | ✓                              | 06/11/20 | 03/21/20 | 04/20/20 |             | 283.50   | 0.00     | 0.00   | 283.50   |   | ✓ |
| SUPPLIES                              |                                |          |          |          |             |          |          |        |          |   |   |
| 182859500                             | ✓                              | 06/11/20 | 05/21/20 | 06/20/20 |             | 180.75   | 0.00     | 0.00   | 180.75   |   | ✓ |
| SUPPLIES <i>freight 30.75</i>         |                                |          |          |          |             |          |          |        |          |   |   |
| Vendor Totals Number Name             |                                |          |          |          |             | Gross    | Discount | No-Pay | Net      |   |   |
| 11976 MID-COAST ELECTRIC SUPPLY, INC  |                                |          |          |          |             | 506.39   | 0.00     | 0.00   | 506.39   |   |   |
| Vendor#                               | Vendor Name                    |          |          |          |             | Class    | Pay Code |        |          |   |   |
| 10810                                 | MMC EMPLOYEE BENEFIT PLAN      |          |          |          |             | ✓        |          |        |          |   |   |
| Invoice#                              | Comment                        | Tran Dt  | Inv Dt   | Due Dt   | Check D Pay | Gross    | Discount | No-Pay | Net      |   |   |
| 061019                                |                                | 06/12/20 | 06/10/20 | 06/10/20 |             | 1,954.36 | 0.00     | 0.00   | 1,954.36 |   | ✓ |
| INSURANCE                             |                                |          |          |          |             |          |          |        |          |   |   |
| Vendor Totals Number Name             |                                |          |          |          |             | Gross    | Discount | No-Pay | Net      |   |   |
| 10810 MMC EMPLOYEE BENEFIT PLAN       |                                |          |          |          |             | 1,954.36 | 0.00     | 0.00   | 1,954.36 |   |   |
| 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      |   |   |
| 4307154                               | ✓                              | 06/10/20 | 06/05/20 | 06/15/20 |             | 18.28    | 0.00     | 0.00   | 18.28    |   | ✓ |
| INVENTORY                             |                                |          |          |          |             |          |          |        |          |   |   |
| 2089                                  | ✓                              | 06/10/20 | 06/05/20 | 06/15/20 |             | -0.45    | 0.00     | 0.00   | -0.45    |   | ✓ |

|                            |   |           |                            |          |          |        |          |   |
|----------------------------|---|-----------|----------------------------|----------|----------|--------|----------|---|
| 4308163                    | ✓ | CREDIT    | 06/10/20 06/05/20 06/15/20 | 24.32    | 0.00     | 0.00   | 24.32    | ✓ |
| 2091                       | ✓ | INVENTORY | 06/10/20 06/05/20 06/15/20 | -1.82    | 0.00     | 0.00   | -1.82    | ✓ |
| 4307155                    | ✓ | CREDIT    | 06/10/20 06/05/20 06/15/20 | 19.30    | 0.00     | 0.00   | 19.30    | ✓ |
| 4307300                    | ✓ | INVENTORY | 06/10/20 06/05/20 06/15/20 | 43.73    | 0.00     | 0.00   | 43.73    | ✓ |
| 4307301                    | ✓ | INVENTORY | 06/10/20 06/05/20 06/15/20 | 212.16   | 0.00     | 0.00   | 212.16   | ✓ |
| 4307299                    | ✓ | INVENTORY | 06/10/20 06/05/20 06/15/20 | 1,203.03 | 0.00     | 0.00   | 1,203.03 | ✓ |
| 2090                       | ✓ | INVENTORY | 06/10/20 06/05/20 06/15/20 | -0.44    | 0.00     | 0.00   | -0.44    | ✓ |
| 2088                       | ✓ | CREDIT    | 06/10/20 06/05/20 06/15/20 | -1.05    | 0.00     | 0.00   | -1.05    | ✓ |
| 4308164                    | ✓ | CREDIT    | 06/10/20 06/05/20 06/15/20 | 24.32    | 0.00     | 0.00   | 24.32    | ✓ |
| 4312442                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 69.58    | 0.00     | 0.00   | 69.58    | ✓ |
| 4312444                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 2,548.06 | 0.00     | 0.00   | 2,548.06 | ✓ |
| 4313671                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 75.38    | 0.00     | 0.00   | 75.38    | ✓ |
| 4310714                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 98.76    | 0.00     | 0.00   | 98.76    | ✓ |
| 4312443                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 39.72    | 0.00     | 0.00   | 39.72    | ✓ |
| 4312174                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 41.42    | 0.00     | 0.00   | 41.42    | ✓ |
| 4310716                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 19.30    | 0.00     | 0.00   | 19.30    | ✓ |
| 4310717                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 710.94   | 0.00     | 0.00   | 710.94   | ✓ |
| 4310715                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 67.55    | 0.00     | 0.00   | 67.55    | ✓ |
| 4313670                    | ✓ | INVENTORY | 06/10/20 06/06/20 06/16/20 | 44.86    | 0.00     | 0.00   | 44.86    | ✓ |
| 4317341                    | ✓ | INVENTORY | 06/11/20 06/07/20 06/17/20 | 383.47   | 0.00     | 0.00   | 383.47   | ✓ |
| 4317340                    | ✓ | INVENTORY | 06/11/20 06/07/20 06/17/20 | 3,863.65 | 0.00     | 0.00   | 3,863.65 | ✓ |
| 4324859                    | ✓ | INVENTORY | 06/11/20 06/10/20 06/20/20 | 149.21   | 0.00     | 0.00   | 149.21   | ✓ |
| 4324861                    | ✓ | INVENTORY | 06/11/20 06/10/20 06/20/20 | 34.94    | 0.00     | 0.00   | 34.94    | ✓ |
| 4324860                    | ✓ | INVENTORY | 06/11/20 06/10/20 06/20/20 | 2,978.55 | 0.00     | 0.00   | 2,978.55 | ✓ |
| 4315753                    | ✓ | INVENTORY | 06/13/20 06/07/20 06/17/20 | 408.13   | 0.00     | 0.00   | 408.13   | ✓ |
| Vendor Totals: Number Name |   |           |                            | Gross    | Discount | No-Pay | Net      |   |

|               |                                                                 |                              |          |          |                   |           |        |            |           |
|---------------|-----------------------------------------------------------------|------------------------------|----------|----------|-------------------|-----------|--------|------------|-----------|
| 10536         | MORRIS & DICKSON CO, LLC                                        |                              |          |          |                   | 13,074.90 | 0.00   | 0.00       | 13,074.90 |
| 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        |           |
| 06119         |                                                                 | 06/11/20                     | 06/11/20 | 06/11/20 | 2,302.50          | 0.00      | 0.00   | 2,302.50 ✓ |           |
|               | CONTRACT EMPLOYEE (5/28/19-6/10/19)                             |                              |          |          |                   |           |        |            |           |
| Vendor Totals | Number                                                          | Name                         |          |          | Gross             | Discount  | No-Pay | Net        |           |
|               | 11069                                                           | PABLO GARZA                  |          |          | 2,302.50          | 0.00      | 0.00   | 2,302.50   |           |
| Vendor#       | Vendor Name                                                     |                              |          | Class    | Pay Code          |           |        |            |           |
| P0706         | PALACIOS BEACON ✓                                               |                              |          | W        |                   |           |        |            |           |
| Invoice#      | Comment                                                         | Tran Dt                      | Inv Dt   | Due Dt   | Check D Pay Gross | Discount  | No-Pay | Net        |           |
| 33056370 ✓    |                                                                 | 06/11/20                     | 05/30/20 | 06/25/20 | 187.50            | 0.00      | 0.00   | 187.50 ✓   |           |
|               | AD                                                              |                              |          |          |                   |           |        |            |           |
| Vendor Totals | Number                                                          | Name                         |          |          | Gross             | Discount  | No-Pay | Net        |           |
|               | P0706                                                           | PALACIOS BEACON              |          |          | 187.50            | 0.00      | 0.00   | 187.50     |           |
| Vendor#       | Vendor Name                                                     |                              |          | Class    | Pay Code          |           |        |            |           |
| 10152         | PARTSSOURCE, LLC ✓                                              |                              |          |          |                   |           |        |            |           |
| Invoice#      | Comment                                                         | Tran Dt                      | Inv Dt   | Due Dt   | Check D Pay Gross | Discount  | No-Pay | Net        |           |
| 03159468 ✓    |                                                                 | 06/10/20                     | 05/22/20 | 06/21/20 | 295.00            | 0.00      | 0.00   | 295.00 ✓   |           |
|               | SUPPLIES                                                        |                              |          |          |                   |           |        |            |           |
| 03161029 ✓    |                                                                 | 06/10/20                     | 05/23/20 | 06/22/20 | 518.82            | 0.00      | 0.00   | 518.82 ✓   |           |
|               | SUPPLIES                                                        |                              |          |          |                   |           |        |            |           |
| Vendor Totals | Number                                                          | Name                         |          |          | Gross             | Discount  | No-Pay | Net        |           |
|               | 10152                                                           | PARTSSOURCE, LLC             |          |          | 813.82            | 0.00      | 0.00   | 813.82     |           |
| 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        |           |
| MMC05         |                                                                 | 06/12/20                     | 05/25/20 | 05/25/20 | 500.00            | 0.00      | 0.00   | 500.00 ✓   |           |
|               | LAWN CARE TRIM 30CREPE Myrtles trimmed on sides and back of MWC |                              |          |          |                   |           |        |            |           |
| Vendor Totals | Number                                                          | Name                         |          |          | Gross             | Discount  | No-Pay | Net        |           |
|               | 12544                                                           | PATRICK OCHOA                |          |          | 500.00            | 0.00      | 0.00   | 500.00     |           |
| 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        |           |
| A53839 ✓      |                                                                 | 06/11/20                     | 06/05/20 | 06/15/20 | 19.94             | 0.00      | 0.00   | 19.94 ✓    |           |
|               | SUPPLIES                                                        |                              |          |          |                   |           |        |            |           |
| Vendor Totals | Number                                                          | Name                         |          |          | Gross             | Discount  | No-Pay | Net        |           |
|               | P2200                                                           | POWER HARDWARE               |          |          | 19.94             | 0.00      | 0.00   | 19.94      |           |
| Vendor#       | Vendor Name                                                     |                              |          | Class    | Pay Code          |           |        |            |           |
| 11932         | PRESS GANEY ASSOCIATES, INC. ✓                                  |                              |          |          |                   |           |        |            |           |
| Invoice#      | Comment                                                         | Tran Dt                      | Inv Dt   | Due Dt   | Check D Pay Gross | Discount  | No-Pay | Net        |           |
| IN000386707 ✓ |                                                                 | 06/10/20                     | 05/31/20 | 06/25/20 | 2,028.00          | 0.00      | 0.00   | 2,028.00 ✓ |           |
|               | PT SURVEYS                                                      |                              |          |          |                   |           |        |            |           |
| Vendor Totals | Number                                                          | Name                         |          |          | Gross             | Discount  | No-Pay | Net        |           |
|               | 11932                                                           | PRESS GANEY ASSOCIATES, INC. |          |          | 2,028.00          | 0.00      | 0.00   | 2,028.00   |           |
| Vendor#       | Vendor Name                                                     |                              |          | Class    | Pay Code          |           |        |            |           |
| R1200         | RED HAWK FIRE AND SECURITY ✓                                    |                              |          |          |                   |           |        |            |           |
| Invoice#      | Comment                                                         | Tran Dt                      | Inv Dt   | Due Dt   | Check D Pay Gross | Discount  | No-Pay | Net        |           |
| 401758 ✓      |                                                                 | 06/11/20                     | 06/01/20 | 06/26/20 | 45.47             | 0.00      | 0.00   | 45.47 ✓    |           |
|               | FIRE MONITORING                                                 |                              |          |          |                   |           |        |            |           |
| Vendor Totals | Number                                                          | Name                         |          |          | Gross             | Discount  | No-Pay | Net        |           |

|               |                                       |                              |          |          |         |           |          |        |             |
|---------------|---------------------------------------|------------------------------|----------|----------|---------|-----------|----------|--------|-------------|
|               | R1200                                 | RED HAWK FIRE AND SECURITY   |          |          |         | 45.47     | 0.00     | 0.00   | 45.47       |
| Vendor#       | Vendor Name                           |                              | Class    | Pay Code |         |           |          |        |             |
| 11240         | REMI CORPORATION ✓                    |                              |          |          |         |           |          |        |             |
| Invoice#      | Comment                               | Tran Dt                      | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net         |
| 985414 ✓      |                                       | 05/31/20                     | 05/31/20 | 06/25/20 |         | 19,295.67 | 0.00     | 0.00   | 19,295.67 ✓ |
|               | EQUIPMENT MAINT AGREEME (annual pymt) |                              |          |          |         |           |          |        |             |
| Vendor Totals | Number                                | Name                         |          |          |         | Gross     | Discount | No-Pay | Net         |
|               | 11240                                 | REMI CORPORATION             |          |          |         | 19,295.67 | 0.00     | 0.00   | 19,295.67   |
| Vendor#       | Vendor Name                           |                              | Class    | Pay Code |         |           |          |        |             |
| 10645         | REVISTA de VICTORIA ✓                 |                              |          |          |         |           |          |        |             |
| Invoice#      | Comment                               | Tran Dt                      | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net         |
| 05201921      |                                       | 05/29/20                     | 05/22/20 | 06/22/20 |         | 240.00    | 0.00     | 0.00   | 240.00 ✓    |
|               | AD                                    |                              |          |          |         |           |          |        |             |
| Vendor Totals | Number                                | Name                         |          |          |         | Gross     | Discount | No-Pay | Net         |
|               | 10645                                 | REVISTA de VICTORIA          |          |          |         | 240.00    | 0.00     | 0.00   | 240.00      |
| Vendor#       | Vendor Name                           |                              | Class    | Pay Code |         |           |          |        |             |
| G0425         | ROBERTS, ODEFY, WITTE & WALL ✓        |                              | W        |          |         |           |          |        |             |
| Invoice#      | Comment                               | Tran Dt                      | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net         |
| 169           |                                       | 06/10/20                     | 06/07/20 | 06/17/20 |         | 1,856.25  | 0.00     | 0.00   | 1,856.25    |
|               | LEGAL                                 |                              |          |          |         |           |          |        |             |
| 96            |                                       | 06/10/20                     | 06/07/20 | 06/17/20 |         | 137.50    | 0.00     | 0.00   | 137.50      |
|               | LEGAL                                 |                              |          |          |         |           |          |        |             |
| Vendor Totals | Number                                | Name                         |          |          |         | Gross     | Discount | No-Pay | Net         |
|               | G0425                                 | ROBERTS, ODEFY, WITTE & WALL |          |          |         | 1,993.75  | 0.00     | 0.00   | 1,993.75    |
| Vendor#       | Vendor Name                           |                              | Class    | Pay Code |         |           |          |        |             |
| 11252         | RX WASTE SYSTEMS LLC ✓                |                              |          |          |         |           |          |        |             |
| Invoice#      | Comment                               | Tran Dt                      | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net         |
| 2069 ✓        |                                       | 06/01/20                     | 06/01/20 | 06/26/20 |         | 235.00    | 0.00     | 0.00   | 235.00 ✓    |
|               | PHARM WASTE SERVICE                   |                              |          |          |         |           |          |        |             |
| Vendor Totals | Number                                | Name                         |          |          |         | Gross     | Discount | No-Pay | Net         |
|               | 11252                                 | RX WASTE SYSTEMS LLC         |          |          |         | 235.00    | 0.00     | 0.00   | 235.00      |
| Vendor#       | Vendor Name                           |                              | Class    | Pay Code |         |           |          |        |             |
| S1850         | SHIP SHUTTLE TAXI SERVICE ✓           |                              | W        |          |         |           |          |        |             |
| Invoice#      | Comment                               | Tran Dt                      | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net         |
| 733462 ✓      |                                       | 06/12/20                     | 06/10/20 | 06/10/20 |         | 6.00      | 0.00     | 0.00   | 6.00 ✓      |
|               | TRANSPORT PT                          |                              |          |          |         |           |          |        |             |
| Vendor Totals | Number                                | Name                         |          |          |         | Gross     | Discount | No-Pay | Net         |
|               | S1850                                 | SHIP SHUTTLE TAXI SERVICE    |          |          |         | 6.00      | 0.00     | 0.00   | 6.00        |
| 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         |
| 061119        |                                       | 06/11/20                     | 06/11/20 | 06/11/20 |         | 352.44    | 0.00     | 0.00   | 352.44 ✓    |
|               | CONTRACT EMPLOYEE (6/24/19 - 6/17/19) |                              |          |          |         |           |          |        |             |
| Vendor Totals | Number                                | Name                         |          |          |         | Gross     | Discount | No-Pay | Net         |
|               | K0536                                 | SHIRLEY KARNEI               |          |          |         | 352.44    | 0.00     | 0.00   | 352.44      |
| 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         |
| 238533 ✓      |                                       | 06/11/20                     | 06/01/20 | 06/11/20 |         | 390.00    | 0.00     | 0.00   | 390.00      |
|               | AD                                    |                              |          |          |         |           |          |        |             |
| Vendor Totals | Number                                | Name                         |          |          |         | Gross     | Discount | No-Pay | Net         |
|               | 10699                                 | SIGN AD, LTD.                |          |          |         | 390.00    | 0.00     | 0.00   | 390.00 ✓    |

| 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      |        |           |
| 93702426       | ✓                             | 06/07/20 | 05/15/20 | 06/07/20 |         | 265.03    | 0.00                   | 0.00      | 265.03   | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| 921368645      | ✓                             | 06/07/20 | 10/01/20 | 12/17/20 |         | 266.43    | 0.00                   | 0.00      | 266.43   | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| 921381984      | ✓                             | 06/07/20 | 10/05/20 | 10/05/20 |         | 284.93    | 0.00                   | 0.00      | 284.93   | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| 921452455      | ✓                             | 06/07/20 | 10/30/20 | 06/07/20 |         | 2,287.68  | 0.00                   | 0.00      | 2,287.68 | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| 921473024      | ✓                             | 06/07/20 | 11/03/20 | 11/03/20 |         | 7,970.80  | 0.00                   | 0.00      | 7,970.80 | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| 921506139      | ✓                             | 06/07/20 | 11/15/20 | 06/07/20 |         | 1,012.77  | 0.00                   | 0.00      | 1,012.77 | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| Vendor Totals: |                               |          |          |          |         | Number    | Name                   | Gross     | Discount | No-Pay | Net       |
|                |                               |          |          |          |         | S2362     | SMITH & NEPHEW         | 12,087.64 | 0.00     | 0.00   | 12,087.64 |
| Vendor#        | Vendor Name                   |          |          |          | Class   | Pay Code  |                        |           |          |        |           |
| S2353          | SMITHS MEDICAL ASD INC        | ✓        |          |          |         |           |                        |           |          |        |           |
| Invoice#       | Comment                       | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount               | No-Pay    | Net      |        |           |
| 15552617       | ✓                             | 06/07/20 | 05/21/20 | 06/07/20 |         | 332.48    | 0.00                   | 0.00      | 332.48   | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| Vendor Totals: |                               |          |          |          |         | Number    | Name                   | Gross     | Discount | No-Pay | Net       |
|                |                               |          |          |          |         | S2353     | SMITHS MEDICAL ASD INC | 332.48    | 0.00     | 0.00   | 332.48    |
| Vendor#        | Vendor Name                   |          |          |          | Class   | Pay Code  |                        |           |          |        |           |
| S2830          | STRYKER SALES CORP            | ✓        |          |          | M       |           |                        |           |          |        |           |
| Invoice#       | Comment                       | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount               | No-Pay    | Net      |        |           |
| 653058a        | ✓                             | 06/07/20 | 05/21/20 | 06/15/20 |         | 680.00    | 0.00                   | 0.00      | 680.00   | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| 653052A        | ✓                             | 06/07/20 | 05/21/20 | 06/15/20 |         | 580.00    | 0.00                   | 0.00      | 580.00   | ✓      |           |
|                | SUPPLIES                      |          |          |          |         |           |                        |           |          |        |           |
| Vendor Totals: |                               |          |          |          |         | Number    | Name                   | Gross     | Discount | No-Pay | Net       |
|                |                               |          |          |          |         | S2830     | STRYKER SALES CORP     | 1,260.00  | 0.00     | 0.00   | 1,260.00  |
| Vendor#        | Vendor Name                   |          |          |          | Class   | Pay Code  |                        |           |          |        |           |
| T2539          | T-SYSTEM, INC                 | ✓        |          |          | W       |           |                        |           |          |        |           |
| Invoice#       | Comment                       | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount               | No-Pay    | Net      |        |           |
| 205EV49133     | ✓                             | 05/31/20 | 05/31/20 | 06/25/20 |         | 4,555.00  | 0.00                   | 0.00      | 4,555.00 | ✓      |           |
|                | TRACKING                      |          |          |          |         |           |                        |           |          |        |           |
| 205EV49136     | ✓                             | 05/31/20 | 05/31/20 | 06/25/20 |         | 1,144.00  | 0.00                   | 0.00      | 1,144.00 | ✓      |           |
|                | CLOUD HOSTING                 |          |          |          |         |           |                        |           |          |        |           |
| Vendor Totals: |                               |          |          |          |         | Number    | Name                   | Gross     | Discount | No-Pay | Net       |
|                |                               |          |          |          |         | T2539     | T-SYSTEM, INC          | 5,699.00  | 0.00     | 0.00   | 5,699.00  |
| Vendor#        | Vendor Name                   |          |          |          | Class   | Pay Code  |                        |           |          |        |           |
| 11944          | TALX CORPORATION              | ✓        |          |          |         |           |                        |           |          |        |           |
| Invoice#       | Comment                       | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount               | No-Pay    | Net      |        |           |
| 1000481188     | ✓                             | 05/31/20 | 05/08/20 | 06/20/20 |         | 306.09    | 0.00                   | 0.00      | 306.09   | ✓      |           |
|                | EMP VERIFICATION              |          |          |          |         |           |                        |           |          |        |           |
| Vendor Totals: |                               |          |          |          |         | Number    | Name                   | Gross     | Discount | No-Pay | Net       |
|                |                               |          |          |          |         | 11944     | TALX CORPORATION       | 306.09    | 0.00     | 0.00   | 306.09    |
| Vendor#        | Vendor Name                   |          |          |          | Class   | Pay Code  |                        |           |          |        |           |
| T1880          | TEXAS DEPARTMENT OF LICENSING | ✓        |          |          | A/P     |           |                        |           |          |        |           |

| Invoice#           | Comment                          | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net        |
|--------------------|----------------------------------|----------|----------|----------|---------|-----------|----------|--------|------------|
| 10092667 ✓         |                                  | 05/31/20 | 05/21/20 | 06/20/20 |         | 140.00    | 0.00     | 0.00   | 140.00 ✓   |
| OPERATION FEE      |                                  |          |          |          |         |           |          |        |            |
| Vendor#            | Vendor Name                      | Class    | Pay Code |          |         |           |          |        |            |
| T1880              | TEXAS DEPARTMENT OF LICENSING    |          |          |          |         |           |          |        |            |
|                    |                                  |          |          |          |         | 140.00    | 0.00     | 0.00   | 140.00     |
| Vendor#            | Vendor Name                      | Class    | Pay Code |          |         |           |          |        |            |
| T3334              | TRINITY PHYSICS CONSULTING LLC ✓ | W        |          |          |         |           |          |        |            |
| Invoice#           | Comment                          | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net        |
| 034399 ✓           |                                  | 05/31/20 | 05/23/20 | 06/22/20 |         | 450.00    | 0.00     | 0.00   | 450.00 ✓   |
| CT TUBE ELALUATION |                                  |          |          |          |         |           |          |        |            |
| Vendor#            | Vendor Name                      | Class    | Pay Code |          |         |           |          |        |            |
| T3334              | TRINITY PHYSICS CONSULTING LLC   |          |          |          |         |           |          |        |            |
|                    |                                  |          |          |          |         | 450.00    | 0.00     | 0.00   | 450.00     |
| Vendor#            | Vendor Name                      | Class    | Pay Code |          |         |           |          |        |            |
| 11067              | TRIZETTO PROVIDER SOLUTIONS ✓    |          |          |          |         |           |          |        |            |
| Invoice#           | Comment                          | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net        |
| 35FK061900 ✓       |                                  | 06/11/20 | 06/01/20 | 06/26/20 |         | 1,010.00  | 0.00     | 0.00   | 1,010.00 ✓ |
| PT STATEMENTS      |                                  |          |          |          |         |           |          |        |            |
| Vendor#            | Vendor Name                      | Class    | Pay Code |          |         |           |          |        |            |
| 11067              | TRIZETTO PROVIDER SOLUTIONS      |          |          |          |         |           |          |        |            |
|                    |                                  |          |          |          |         | 1,010.00  | 0.00     | 0.00   | 1,010.00   |
| 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        |
| 8400302270 ✓       |                                  | 05/29/20 | 05/27/20 | 06/21/20 |         | 47.15     | 0.00     | 0.00   | 47.15 ✓    |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302271 ✓       |                                  | 05/29/20 | 05/27/20 | 06/21/20 |         | 57.35     | 0.00     | 0.00   | 57.35 ✓    |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302301 ✓       |                                  | 05/29/20 | 05/27/20 | 06/21/20 |         | 1,156.01  | 0.00     | 0.00   | 1,156.01 ✓ |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302592 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 17.00     | 0.00     | 0.00   | 17.00 ✓    |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302597 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 158.74    | 0.00     | 0.00   | 158.74 ✓   |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302663 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 132.65    | 0.00     | 0.00   | 132.65 ✓   |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302596 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 123.47    | 0.00     | 0.00   | 123.47 ✓   |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302595 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 120.39    | 0.00     | 0.00   | 120.39 ✓   |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302598 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 176.58    | 0.00     | 0.00   | 176.58 ✓   |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302619 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 80.83     | 0.00     | 0.00   | 80.83 ✓    |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| 8400302634 ✓       |                                  | 05/30/20 | 05/30/20 | 06/24/20 |         | 821.80    | 0.00     | 0.00   | 821.80 ✓   |
| LAUNDRY            |                                  |          |          |          |         |           |          |        |            |
| Vendor#            | Vendor Name                      | Class    | Pay Code |          |         |           |          |        |            |
| U1064              | UNIFIRST HOLDINGS INC            |          |          |          |         |           |          |        |            |
|                    |                                  |          |          |          |         | 2,891.97  | 0.00     | 0.00   | 2,891.97   |
| 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        |
| 9790874 ✓          |                                  | 06/11/20 | 05/31/20 | 06/15/20 |         | 10.97     | 0.00     | 0.00   | 10.97 ✓    |
| UNIFORMS           |                                  |          |          |          |         |           |          |        |            |
| 9803984 ✓          |                                  | 06/11/20 | 06/06/20 | 06/21/20 |         | 140.92    | 0.00     | 0.00   | 140.92 ✓   |

## UNIFORMS

| Vendor# | Vendor Name       | Class | Pay Code | Gross  | Discount | No-Pay | Net    |
|---------|-------------------|-------|----------|--------|----------|--------|--------|
| U1056   | UNIFORM ADVANTAGE |       |          | 151.89 | 0.00     | 0.00   | 151.89 |

| Vendor# | Vendor Name              | Class | Pay Code |
|---------|--------------------------|-------|----------|
| U1200   | UNITED AD LABEL CO INC ✓ | M     |          |

| Invoice#    | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net     |
|-------------|---------|----------|----------|----------|---------|-----------|----------|--------|---------|
| 444900903 ✓ |         | 06/07/20 | 05/16/20 | 06/01/20 |         | 81.72     | 0.00     | 0.00   | 81.72 ✓ |

## SUPPLIES

| Vendor# | Vendor Name            | Class | Pay Code | Gross | Discount | No-Pay | Net   |
|---------|------------------------|-------|----------|-------|----------|--------|-------|
| U1200   | UNITED AD LABEL CO INC |       |          | 81.72 | 0.00     | 0.00   | 81.72 |

| Vendor# | Vendor Name            | Class | Pay Code |
|---------|------------------------|-------|----------|
| V0554   | VCS SECURITY SYSTEMS ✓ | W     |          |

| Invoice# | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net      |
|----------|---------|----------|----------|----------|---------|-----------|----------|--------|----------|
| 204857 ✓ |         | 06/07/20 | 02/28/20 | 03/30/20 |         | 450.00    | 0.00     | 0.00   | 450.00 ✓ |

## TROUBLE SHOOT CAMERAS I

| Invoice# | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net        |
|----------|---------|----------|----------|----------|---------|-----------|----------|--------|------------|
| 206933 ✓ |         | 06/07/20 | 05/08/20 | 06/05/20 |         | 9,982.00  | 0.00     | 0.00   | 9,982.00 ✓ |

## CAMERA SYSTEM UPGRADE

| Vendor# | Vendor Name          | Class | Pay Code | Gross     | Discount | No-Pay | Net       |
|---------|----------------------|-------|----------|-----------|----------|--------|-----------|
| V0554   | VCS SECURITY SYSTEMS |       |          | 10,432.00 | 0.00     | 0.00   | 10,432.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---------|-------------|-------|----------|
| 10793   | WAGeworks ✓ |       |          |

| Invoice# | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net        |
|----------|---------|----------|----------|----------|---------|-----------|----------|--------|------------|
| 060619   |         | 06/12/20 | 05/24/20 | 06/06/20 |         | 3,786.37  | 0.00     | 0.00   | 3,786.37 ✓ |

## PAYROLL DEDUCT

| Vendor# | Vendor Name | Class | Pay Code | Gross    | Discount | No-Pay | Net      |
|---------|-------------|-------|----------|----------|----------|--------|----------|
| 10793   | WAGeworks   |       |          | 3,786.37 | 0.00     | 0.00   | 3,786.37 |

| Vendor# | Vendor Name                      | Class | Pay Code |
|---------|----------------------------------|-------|----------|
| 11166   | WEST INTERACTIVE SERVICES CORP ✓ |       |          |

| Invoice#       | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net      |
|----------------|---------|----------|----------|----------|---------|-----------|----------|--------|----------|
| INV002102205 ✓ |         | 05/31/20 | 04/30/20 | 06/20/20 |         | 496.14    | 0.00     | 0.00   | 496.14 ✓ |

## HOUSE CALLS

| Vendor# | Vendor Name                    | Class | Pay Code | Gross  | Discount | No-Pay | Net    |
|---------|--------------------------------|-------|----------|--------|----------|--------|--------|
| 11166   | WEST INTERACTIVE SERVICES CORP |       |          | 496.14 | 0.00     | 0.00   | 496.14 |

| Vendor# | Vendor Name              | Class | Pay Code |
|---------|--------------------------|-------|----------|
| 10556   | WOUND CARE SPECIALISTS ✓ |       |          |

| Invoice#      | Comment | Tran Dt  | Inv Dt   | Due Dt   | Check D | Pay Gross | Discount | No-Pay | Net         |
|---------------|---------|----------|----------|----------|---------|-----------|----------|--------|-------------|
| WCS00002892 ✓ |         | 06/10/20 | 06/01/20 | 06/25/20 |         | 18,425.00 | 0.00     | 0.00   | 18,425.00 ✓ |

## WOUND CARE

| Vendor# | Vendor Name            | Class | Pay Code | Gross     | Discount | No-Pay | Net       |
|---------|------------------------|-------|----------|-----------|----------|--------|-----------|
| 10556   | WOUND CARE SPECIALISTS |       |          | 18,425.00 | 0.00     | 0.00   | 18,425.00 |

## Report Summary

| Grand Totals: | Gross      | Discount | No-Pay | Net        |
|---------------|------------|----------|--------|------------|
|               | 268,631.44 | 0.00     | 0.00   | 268,631.44 |

APPROVED  
ON

JUN 14 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK#

181045-

181117

8

RUN DATE:06/17/19  
TIME:15:14

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
06/19/19 THRU 06/19/19

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BANK--CHECK-----

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

|     |        |          |           |                                |
|-----|--------|----------|-----------|--------------------------------|
| A/P | 181045 | 06/19/19 | 558.00    | ABILITY NETWORK (SHIFTHOUD)    |
| A/P | 181046 | 06/19/19 | 99.99     | ACE HARDWARE 15521             |
| A/P | 181047 | 06/19/19 | 4,164.46  | AIRGAS USA, LLC - CENTRAL DIV  |
| A/P | 181048 | 06/19/19 | 1,594.15  | ALCON LABORATORIES, INC.       |
| A/P | 181049 | 06/19/19 | 2,198.25  | ALLYSON SWOPE                  |
| A/P | 181050 | 06/19/19 | 1,245.00  | BAYER HEALTHCARE               |
| A/P | 181051 | 06/19/19 | 3,507.27  | BECKMAN COULTER INC            |
| A/P | 181052 | 06/19/19 | 231.99    | BRIGGS HEALTHCARE              |
| A/P | 181053 | 06/19/19 | 382.00    | CALHOUN COUNTY                 |
| A/P | 181054 | 06/19/19 | 577.50    | CHRISTINA ZAPATA-ARROYO        |
| A/P | 181055 | 06/19/19 | 125.52    | CONMED CORPORATION             |
| A/P | 181056 | 06/19/19 | 5,425.00  | DASHBOARD MD                   |
| A/P | 181057 | 06/19/19 | 50,311.25 | DIAMOND HEALTHCARE CORP        |
| A/P | 181058 | 06/19/19 | 105.00    | DOWELL PEST CONTROL            |
| A/P | 181059 | 06/19/19 | 40,062.50 | EMERGENCY STAFFING SOLUTIONS   |
| A/P | 181060 | 06/19/19 | 155.98    | ERBE USA INC SURGICAL SYSTEMS  |
| A/P | 181061 | 06/19/19 | 4,500.00  | EVIDENT                        |
| A/P | 181062 | 06/19/19 | 495.00    | FASTHEALTH CORPORATION         |
| A/P | 181063 | 06/19/19 | 78.70     | FEDERAL EXPRESS CORP.          |
| A/P | 181064 | 06/19/19 | 725.32    | FISHER HEALTHCARE              |
| A/P | 181065 | 06/19/19 | 122.93    | GENESIS DIAGNOSTICS            |
| A/P | 181066 | 06/19/19 | 468.56    | GLAXOSMITHKLINE PHARMACUTICAL  |
| A/P | 181067 | 06/19/19 | 2,003.99  | GULF COAST PAPER COMPANY       |
| A/P | 181068 | 06/19/19 | 449.80    | HAYES ELECTRIC SERVICE         |
| A/P | 181069 | 06/19/19 | 582.65    | HUBERT COMPANY                 |
| A/P | 181070 | 06/19/19 | 14,539.19 | HUNTER PHARMACY SERVICES       |
| A/P | 181071 | 06/19/19 | 713.56    | IRON MOUNTAIN                  |
| A/P | 181072 | 06/19/19 | 250.00    | ITERSOURCE CORPORATION         |
| A/P | 181073 | 06/19/19 | 1,243.60  | J & J HEALTH CARE SYSTEMS, INC |
| A/P | 181074 | 06/19/19 | 19,936.53 | JACKSON & COKER LOCUM TENENS,  |
| A/P | 181075 | 06/19/19 | 735.78    | LOWE'S HOME CENTERS INC        |
| A/P | 181076 | 06/19/19 | 1,095.00  | M G TRUST                      |
| A/P | 181077 | 06/19/19 | 249.46    | MCKESSON MEDICAL SURGICAL INC  |
| A/P | 181078 | 06/19/19 | 3,859.25  | MEDICAL DATA SYSTEMS, INC.     |
| A/P | 181079 | 06/19/19 | 1,193.40  | MEDICAL TECHNOLOGY ASSOCIATES  |
| A/P | 181080 | 06/19/19 | 2,792.39  | MEDLINE INDUSTRIES INC         |
| A/P | 181081 | 06/19/19 | 45.00     | MEMORIAL MEDICAL CLINIC        |
| A/P | 181082 | 06/19/19 | 152.34    | MERCEDES SCIENTIFIC            |
| A/P | 181083 | 06/19/19 | 159.09    | MERRY X-RAY/SOURCEONE HEALTHCA |
| A/P | 181084 | 06/19/19 | 506.39    | MID-COAST ELECTRIC SUPPLY, INC |
| A/P | 181085 | 06/19/19 | 1,954.36  | MMC EMPLOYEE BENEFIT PLAN      |
| A/P | 181086 | 06/19/19 | .00       | VOIDED                         |
| A/P | 181087 | 06/19/19 | 13,074.90 | MORRIS & DICKSON CO, LLC       |
| A/P | 181088 | 06/19/19 | 2,302.50  | PABLO GARZA                    |
| A/P | 181089 | 06/19/19 | 187.50    | PALACIOS BEACON                |
| A/P | 181090 | 06/19/19 | 813.82    | PARTSSOURCE, LLC               |
| A/P | 181091 | 06/19/19 | 500.00    | PATRICK OCHOA                  |
| A/P | 181092 | 06/19/19 | 19.94     | POWER HARDWARE                 |
| A/P | 181093 | 06/19/19 | 2,028.00  | PRESS GANEY ASSOCIATES, INC.   |
| A/P | 181094 | 06/19/19 | 45.47     | RED HAWK FIRE AND SECURITY     |



RUN DATE:06/17/19  
TIME:15:14

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
06/19/19 THRU 06/19/19

PAGE 2  
GLCKREG

BANK--CHECK--

| CODE    | NUMBER | DATE     | AMOUNT     | PAYEE                          |
|---------|--------|----------|------------|--------------------------------|
| A/P     | 181095 | 06/19/19 | 19,295.67  | REMI CORPORATION               |
| A/P     | 181096 | 06/19/19 | 240.00     | REVISTA de VICTORIA            |
| A/P     | 181097 | 06/19/19 | 1,993.75   | ROBERTS, ODEFY, WITTE & WALL   |
| A/P     | 181098 | 06/19/19 | 235.00     | RX WASTE SYSTEMS LLC           |
| A/P     | 181099 | 06/19/19 | 6.00       | SHIP SHUTTLE TAXI SERVICE      |
| A/P     | 181100 | 06/19/19 | 352.44     | SHIRLEY KARNEI                 |
| A/P     | 181101 | 06/19/19 | 390.00     | SIGN AD, LTD.                  |
| A/P     | 181102 | 06/19/19 | 12,087.64  | SMITH & NEPHEW                 |
| A/P     | 181103 | 06/19/19 | 332.48     | SMITHS MEDICAL ASD INC         |
| A/P     | 181104 | 06/19/19 | 1,260.00   | STRYKER SALES CORP             |
| A/P     | 181105 | 06/19/19 | 5,699.00   | T-SYSTEM, INC                  |
| A/P     | 181106 | 06/19/19 | 306.09     | TALK CORPORATION               |
| A/P     | 181107 | 06/19/19 | 140.00     | TEXAS DEPARTMENT OF LICENSING  |
| A/P     | 181108 | 06/19/19 | 4,626.80   | THE CRESCENT                   |
| A/P     | 181109 | 06/19/19 | 450.00     | TRINITY PHYSICS CONSULTING LLC |
| A/P     | 181110 | 06/19/19 | 1,010.00   | TRIZETTO PROVIDER SOLUTIONS    |
| A/P     | 181111 | 06/19/19 | 2,891.97   | UNIFIRST HOLDINGS INC          |
| A/P     | 181112 | 06/19/19 | 151.89     | UNIFORM ADVANTAGE              |
| A/P     | 181113 | 06/19/19 | 81.72      | UNITED AD LABEL CO INC         |
| A/P     | 181114 | 06/19/19 | 10,432.00  | VCS SECURITY SYSTEMS           |
| A/P     | 181115 | 06/19/19 | 3,786.37   | WAGWORKS                       |
| A/P     | 181116 | 06/19/19 | 496.14     | WEST INTERACTIVE SERVICES CORP |
| A/P     | 181117 | 06/19/19 | 18,425.00  | WOUND CARE SPECIALISTS         |
| TOTALS: |        |          | 273,258.24 |                                |

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Payables 268,631.44 +  
Critical 4,626.80 +  
273,258.24 \*

APPROVED  
ON

JUN 19 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

**McKESSON****STATEMENT**

Company 8000

MEMORIAL MEDICAL CENTER  
AP  
815 N VIRGINIA STREET  
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

As of: 06/07/2019

Page: 002

DC: 8115

Territory:

Customer: 632536  
Date: 06/07/2019To ensure proper credit to your  
account, detach and return this  
stub with your remittanceAs of: 06/07/2019  
Mail to:Page: 002  
Comp: 8000AMT DUE REMITTED VIA ACH DEBIT  
Statement for information onlyCust: 632536  
Date: 06/07/2019PLEASE CHECK ANY  
ITEMS NOT PAID (✓)

| Billing<br>Date | Due<br>Date | Receivable<br>Number | National Account<br>632536<br>Order<br>Reference | Description | Cash<br>Discount | Amount<br>(gross) | P<br>F | Amount<br>(net) | P<br>F | Receivable<br>Number |  |
|-----------------|-------------|----------------------|--------------------------------------------------|-------------|------------------|-------------------|--------|-----------------|--------|----------------------|--|
|-----------------|-------------|----------------------|--------------------------------------------------|-------------|------------------|-------------------|--------|-----------------|--------|----------------------|--|

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 5,319.64 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97  
08/07/2017If Paid By 06/11/2019,  
Pay This Amount:

5,213.26 USD

If Paid After 06/11/2019,  
Pay this Amount:

5,319.64 USD

Due If Paid On Time:  
USD

5,213.26

Disc lost if paid late:

106.38

Due If Paid Late:  
USD

5,319.64

CK# ~~1031~~ 500003  
GL# 60310000APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS11.99 +  
1,849.03 +  
3,352.24 +  
5,213.26 \*

**McKESSON****STATEMENT**

Company: 8000

HEB PHCY 0434/MEM MED PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

As of: 06/07/2019

Page: 001

DC: 8115

Territory: 400

Customer: 190813

Date: 06/07/2019

To ensure proper credit to your  
account, detach and return this  
stub with your remittanceAs of: 06/07/2019  
Mail to:Page: 001  
Comp: 8000AMT DUE REMITTED VIA ACH DEBIT  
Statement for information onlyCust: 190813  
Date: 06/07/2019  
**PLEASE CHECK ANY  
ITEMS NOT PAID (✓)**

| Billing<br>Date                                  | Due<br>Date | Receivable<br>Number | National Account<br>Order<br>Reference | Description | Cash<br>Discount | Amount<br>(gross) | P<br>F | Amount<br>(net) | P<br>F | Receivable<br>Number |  |
|--------------------------------------------------|-------------|----------------------|----------------------------------------|-------------|------------------|-------------------|--------|-----------------|--------|----------------------|--|
| Customer Number 190813 HEB PHCY 0434/MEM MED PHS |             |                      |                                        |             |                  |                   |        |                 |        |                      |  |
| 06/05/2019                                       | 06/11/2019  | 7138328999           | 2017008497                             | 115Invoice  | 0.24             | 12.23             |        | 11.99           | ✓      | 7138328999           |  |

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: 12.23 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,024.39  
06/03/2019If Paid By 06/11/2019,  
Pay This Amount:

11.99 USD

If Paid After 06/11/2019,  
Pay this Amount:

12.23 USD

Due If Paid On Time:  
USD

Disc lost if paid late:

Due If Paid Late:  
USD11.99  
0.24  
12.23APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

**McKESSON****STATEMENT**

Company: 8000

As of: 06/07/2019

Page: 001

To ensure proper credit to your  
account, detach and return this  
stub with your remittanceCVS PHCY 7006/MEMORIA PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA  
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

DC: 8115

Territory: 400

Customer: 262252  
Date: 06/07/2019As of: 06/07/2019  
Mail to:Page: 001  
Comp: 8000AMT DUE REMITTED VIA ACH DEBIT  
Statement for information onlyCust: 262252  
Date: 06/07/2019**PLEASE CHECK ANY  
ITEMS NOT PAID (✓)**

| Billing<br>Date                                  | Due<br>Date | Receivable<br>Number | National Account<br>Order<br>Reference | Description | Cash<br>Discount | Amount<br>(gross) | P<br>F | Amount<br>(net) | P<br>F | Receivable<br>Number |  |
|--------------------------------------------------|-------------|----------------------|----------------------------------------|-------------|------------------|-------------------|--------|-----------------|--------|----------------------|--|
| Customer Number 262252 CVS PHCY 7006/MEMORIA PHS |             |                      |                                        |             |                  |                   |        |                 |        |                      |  |
| 06/03/2019                                       | 06/11/2019  | 7137852666           | 495659                                 | 115Invoice  | 19.37            | 968.74            |        | 949.37          | ✓      | 7137852666           |  |
| 06/03/2019                                       | 06/11/2019  | 7137852667           | 495659                                 | 115Invoice  | 0.24             | 11.98             |        | 11.74           | ✓      | 7137852667           |  |
| 06/04/2019                                       | 06/11/2019  | 7138118653           | 496261                                 | 115Invoice  | 13.58            | 678.85            |        | 665.27          | ✓      | 7138118653           |  |
| 06/05/2019                                       | 06/11/2019  | 7138336292           | 496933                                 | 115Invoice  | 0.20             | 9.91              |        | 9.71            | ✓      | 7138336292           |  |
| 06/06/2019                                       | 06/11/2019  | 7138582194           | 498690                                 | 115Invoice  | 0.38             | 19.09             |        | 18.71           | ✓      | 7138582194           |  |
| 06/07/2019                                       | 06/11/2019  | 7138812745           | 499313                                 | 115Invoice  | 3.84             | 191.76            |        | 187.92          | ✓      | 7138812745           |  |
| 06/07/2019                                       | 06/11/2019  | 7138812748           | 499313                                 | 115Invoice  | 0.13             | 6.44              |        | 6.31            | ✓      | 7138812748           |  |

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: 1,886.77 USD**

Future Due: 0.00

Past Due: 0.00

Last Payment 2,024.39  
06/03/2019If Paid By 06/11/2019,  
Pay This Amount:

1,849.03 USD

If Paid After 06/11/2019,  
Pay this Amount:

1,886.77 USD

Due If Paid On Time:

USD

1,849.03

Disc lost if paid late:

37.74

Due If Paid Late:

USD

1,886.77

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

# McKESSON

# STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

As of: 06/07/2019

Page: 001

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

DC: 8115

Territory: 400

Customer: 256342  
Date: 06/07/2019

As of: 06/07/2019  
Mail to:

Page: 001  
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 256342  
Date: 06/07/2019

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 |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 06/04/2019                                      | 06/11/2019 | 7138121206        | 0959800225                       | 115Invoice  | 7.32          | 365.96         |     | 358.64       | ✓   | 7138121206        |  |
| 06/04/2019                                      | 06/11/2019 | 7138121207        | 0603190457-00                    | 115Invoice  | 9.29          | 464.59         |     | 455.30       | ✓   | 7138121207        |  |
| 06/06/2019                                      | 06/11/2019 | 7138601844        | 0959800227                       | 115Invoice  | 17.46         | 873.17         |     | 855.71       | ✓   | 7138601844        |  |
| 06/06/2019                                      | 06/11/2019 | 7138601845        | 0605190215-00                    | 115Invoice  | 27.81         | 1,390.73       |     | 1,362.92     | ✓   | 7138601845        |  |
| 06/07/2019                                      | 06/11/2019 | 7138829466        | 0959800228                       | 115Invoice  | 6.52          | 326.19         |     | 319.67       | ✓   | 7138829466        |  |

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: 3,420.64 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,024.39  
06/03/2019

If Paid By 06/11/2019,  
Pay This Amount:

3,352.24 USD

If Paid After 06/11/2019,  
Pay this Amount:

3,420.64 USD

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

3,352.24

68.40

Due If Paid Late:  
USD

3,420.64

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

**McKESSON****STATEMENT**

As of: 06/14/2019

Page: 002

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

Company: 8000

MEMORIAL MEDICAL CENTER  
AP  
815 N VIRGINIA STREET  
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

DC: 8115

Territory:

Customer: 632536  
Date: 06/15/2019As of: 06/14/2019  
Mail to:Page: 002  
Comp: 8000AMT DUE REMITTED VIA ACH DEBIT  
Statement for information onlyCust: 632536  
Date: 06/15/2019  
**PLEASE CHECK ANY  
ITEMS NOT PAID (✓)**

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

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

**TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER**

Subtotals: 9,949.65 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97  
08/07/2017If Paid By 06/18/2019,  
Pay This Amount:

9,750.66 USD

If Paid After 06/18/2019,  
Pay this Amount:

9,949.65 USD

Due If Paid On Time:  
USD

9,750.66

Disc lost if paid late:

198.99

Due If Paid Late:  
USD

9,949.65

CK# ~~1038~~ 500005  
GL# 603100003,386.28 +  
233.16 +  
3,451.63 +  
2,679.59 +  
9,750.66 \*APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

# MCKESSON

# STATEMENT

Company: 8000

As of: 06/14/2019

Page: 001

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

DC: 8115

Territory: 400

Customer: 262252

Date: 06/15/2019

As of: 06/14/2019

Mail to:

Page: 001

Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

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

Cust: 262252 PLEASE CHECK ANY  
Date: 06/15/2019 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 |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 06/10/2019                                       | 06/18/2019 | 7139079298        | 499879                           | 115Invoice  | 0.59          | 29.64          |     | 29.05 ✓      |     | 7139079298        |  |
| 06/11/2019                                       | 06/18/2019 | 7139360786        | 500369                           | 115Invoice  | 30.85         | 1,542.66       |     | 1,511.81 ✓   |     | 7139360786        |  |
| 06/12/2019                                       | 06/18/2019 | 7139594832        | 501035                           | 115Invoice  | 1.65          | 82.61          |     | 80.96 ✓      |     | 7139594832        |  |
| 06/13/2019                                       | 06/18/2019 | 7139868714        | 502670                           | 115Invoice  | 0.82          | 40.85          |     | 40.03 ✓      |     | 7139868714        |  |
| 06/14/2019                                       | 06/18/2019 | 7140122549        | 503183                           | 115Invoice  | 20.77         | 1,038.51       |     | 1,017.74 ✓   |     | 7140122549        |  |

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals: 2,734.27 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 5,213.26  
06/10/2019

If Paid By 06/18/2019,  
Pay This Amount:

2,679.59 USD

If Paid After 06/18/2019,  
Pay this Amount:

2,734.27 USD

Due If Paid On Time:  
USD

2,679.59

Disc lost if paid late:

54.68

Due If Paid Late:  
USD

2,734.27

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

# McKESSON

# STATEMENT

Company: 8000

As of: 06/14/2019

Page: 001

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

DC: 8115

Territory: 400

Customer: 256342

Date: 06/15/2019

As of: 06/14/2019  
Mail to:

Page: 001  
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 256342 PLEASE CHECK ANY  
Date: 06/15/2019 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 256342 WALMART 1098/MEM MED PHS |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 06/10/2019                                      | 06/18/2019 | 7139073269        | 0959800229                       | 115Invoice  | 0.02          | 0.94           |     | 0.92✓        |     | 7139073269        |  |
| 06/11/2019                                      | 06/18/2019 | 7139334008        | 0959800230                       | 115Invoice  | 4.23          | 211.47         |     | 207.24✓      |     | 7139334008        |  |
| 06/12/2019                                      | 06/18/2019 | 7139580433        | 0959800231                       | 115Invoice  | 2.03          | 101.38         |     | 99.35✓       |     | 7139580433        |  |
| 06/12/2019                                      | 06/18/2019 | 7139802722        | 000061019TM                      | 115Invoice  | 17.62         | 881.03         |     | 863.41✓      |     | 7139802722        |  |
| 06/12/2019                                      | 06/18/2019 | 7139814763        | 741331418                        | 195Invoice  | 0.52          | 26.13          |     | 25.61✓       |     | 7139814763        |  |
| 06/12/2019                                      | 06/18/2019 | 7139814764        | 00062219TM                       | 115Invoice  | 2.34          | 117.02         |     | 114.68✓      |     | 7139814764        |  |
| 06/12/2019                                      | 06/18/2019 | 7139820964        | 740947425                        | 195Invoice  | 1.87          | 93.44          |     | 91.57✓       |     | 7139820964        |  |
| 06/12/2019                                      | 06/18/2019 | 7139820965        | 000060719aas                     | 115Invoice  | 20.03         | 1,001.70       |     | 981.67✓      |     | 7139820965        |  |
| 06/13/2019                                      | 06/18/2019 | 7139843854        | 0959800232                       | 115Invoice  | 5.94          | 297.03         |     | 291.09✓      |     | 7139843854        |  |
| 06/13/2019                                      | 06/18/2019 | 7139860741        | 0612190415-00                    | 115Invoice  | 4.89          | 244.31         |     | 239.42✓      |     | 7139860741        |  |
| 06/13/2019                                      | 06/18/2019 | 7139976596        | 741880292                        | 195Invoice  | 0.52          | 26.13          |     | 25.61✓       |     | 7139976596        |  |
| 06/13/2019                                      | 06/18/2019 | 7140021850        | 000061219TM                      | 115Invoice  | 3.31          | 165.35         |     | 162.04✓      |     | 7140021850        |  |
| 06/14/2019                                      | 06/18/2019 | 7140102044        | 0959800233                       | 115Invoice  | 5.92          | 296.07         |     | 290.15✓      |     | 7140102044        |  |
| 06/14/2019                                      | 06/18/2019 | 7140102046        | 0613190304-00                    | 115Invoice  | 0.02          | 0.96           |     | 0.94✓        |     | 7140102046        |  |
| 06/14/2019                                      | 06/18/2019 | 7140260399        | 000061319TM                      | 115Invoice  | 1.18          | 59.11          |     | 57.93✓       |     | 7140260399        |  |

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 3,522.07 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 06/10/2019 5,213.26

If Paid By 06/18/2019,  
Pay This Amount:

3,451.63 USD

If Paid After 06/18/2019,  
Pay this Amount:

3,522.07 USD

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

70.44

Due If Paid Late:  
USD

3,522.07

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS



# McKESSON

# STATEMENT

Company: 8000

As of: 06/14/2019

Page: 001

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

DC: 8115

Territory: 400

Customer: 190813

Date: 06/15/2019

As of: 06/14/2019

Mail to:

Page: 001

Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

HEB PHCY 0434/MEM MED PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 190813 PLEASE CHECK ANY  
Date: 06/15/2019 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 190813 HEB PHCY 0434/MEM MED PHS |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 06/12/2019                                       | 06/18/2019 | 7139586607        | 2017008567                       | 115Invoice  | 4.27          | 213.45         |     | 209.18       | ✓   | 7139586607        |  |
| 06/14/2019                                       | 06/18/2019 | 7140092154        | 2017008600                       | 115Invoice  | 0.49          | 24.47          |     | 23.98        | ✓   | 7140092154        |  |

\*F 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: 237.92 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 06/10/2019 5,213.26

If Paid By 06/18/2019,  
Pay This Amount: 233.16 USD

If Paid After 06/18/2019,  
Pay this Amount: 237.92 USD

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

Due If Paid Late:  
USD

233.16  
4.76  
237.92 (FO)

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

# MCKESSON

# STATEMENT

Company: 8000

As of: 06/14/2019

Page: 001

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

DC: 8115

Territory: 81

Customer: 464450

Date: 06/15/2019

As of: 06/14/2019

Mail to:

Page: 001

Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

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

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 464450 PLEASE CHECK ANY  
Date: 06/15/2019 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 |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 06/11/2019                                       | 06/18/2019 | 7139332261        | 55x379354                        | 115Invoice  | 23.62         | 1,180.94       |     | 1,157.32 ✓   |     | 7139332261        |  |
| 06/14/2019                                       | 06/18/2019 | 7140103231        | 55x385541                        | 115Invoice  | 30.29         | 1,514.30       |     | 1,484.01 ✓   |     | 7140103231        |  |
| 06/14/2019                                       | 06/18/2019 | 7140103233        | 55x385567                        | 115Invoice  | 0.20          | 10.00          |     | 9.80 ✓       |     | 7140103233        |  |
| 06/14/2019                                       | 06/18/2019 | 7140103234        | 55x385590                        | 115Invoice  | 15.00         | 750.15         |     | 735.15 ✓     |     | 7140103234        |  |

\*F 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: 3,455.39 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,788.97  
05/27/2019

If Paid By 06/18/2019,  
Pay This Amount:

3,386.28 USD

If Paid After 06/18/2019,  
Pay this Amount:

3,455.39 USD

Due If Paid On Time:

USD

Disc lost if paid late:

3,386.28

69.11

Due If Paid Late:

USD

3,455.39

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

 **AmerisourceBergen® STATEMENT**

Number: 58033556 Date: 06-07-2019 1 of 1

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

**Customer**  
WALGREENS #12494 3408  
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: 1,752.38  
Past Due: 0.00  
Total Due: 1,752.38  
Account Balance: 1,752.38

**Account Activity**

| Activity Date | Due Date   | Reference Number | Purchase Order Number | Activity Type | Amount     |
|---------------|------------|------------------|-----------------------|---------------|------------|
| 06-03-2019    | 06-14-2019 | 3023568287       | 147234                | Invoice       | 1,071.03 ✓ |
| 06-03-2019    | 06-14-2019 | 3023568288       | 147235                | Invoice       | 246.23 ✓   |
| 06-04-2019    | 06-14-2019 | 3023597905       | 147382                | Invoice       | 70.48 ✓    |
| 06-05-2019    | 06-14-2019 | 3023651478       | 147417                | Invoice       | 64.60 ✓    |
| 06-06-2019    | 06-14-2019 | 3023699181       | 147456                | Invoice       | 3.45 ✓     |
| 06-06-2019    | 06-14-2019 | 3023699182       | 147457                | Invoice       | 33.47 ✓    |
| 06-07-2019    | 06-14-2019 | 3023737498       | 147467                | Invoice       | 263.12 ✓   |

**Thank You for Your Payment**

| Date       | Payment Number | Amount     |
|------------|----------------|------------|
| 06-07-2019 |                | (1,218.17) |

**Reminders**

| Due Date                      | Amount   |
|-------------------------------|----------|
| 06-14-2019                    | 1,752.38 |
| Total Due:                    | 1,752.38 |
| Terms:                        |          |
| Monday - Friday due in 7 days |          |

*over LFO*

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK# ~~1031~~ 500002  
GL# 60310000



# AmerisourceBergen<sup>®</sup> STATEMENT

Number: 58049093 Date: 06-14-2019 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: 884.90  
Past Due: 0.00  
Total Due: 884.90  
Account Balance: 884.90

## Account Activity

| Activity Date | Due Date   | Reference Number | Purchase Order Number | Activity Type | Amount   |
|---------------|------------|------------------|-----------------------|---------------|----------|
| 06-10-2019    | 06-21-2019 | 3023775063       | 147517                | Invoice       | 31.65 ✓  |
| 06-10-2019    | 06-21-2019 | 3023775064       | 147519                | Invoice       | 203.13 ✓ |
| 06-10-2019    | 06-21-2019 | 3023813433       | 147566                | Invoice       | 21.55 ✓  |
| 06-11-2019    | 06-21-2019 | 3023846429       | 147577                | Invoice       | 575.41 ✓ |
| 06-12-2019    | 06-21-2019 | 3023901264       | 147590                | Invoice       | 27.20 ✓  |
| 06-13-2019    | 06-21-2019 | 3023941961       | 147615                | Invoice       | 1.98 ✓   |
| 06-14-2019    | 06-21-2019 | 3023990827       | 147639                | Invoice       | 23.98 ✓  |

## Thank You for Your Payment

| Date       | Payment Number | Amount     |
|------------|----------------|------------|
| 06-14-2019 |                | (1,752.38) |

## Reminders

| Due Date                                | Amount |
|-----------------------------------------|--------|
| 06-21-2019                              | 884.90 |
| Total Due:                              | 884.90 |
| Terms:<br>Monday - Friday due in 7 days |        |

on vel  
fo

CK# ~~1032~~ 500004

GL# 60310000

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

**RECEIVED**06/13/2019 **JUN 13 2019**

11:09

*Calhoun County Auditor*

Vendor#

11824

## MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap\_open\_invoice.template

Dates Through:

Vendor Name

Class

Pay Code

THE CRESCENT ✓

| Invoice# | Comment    | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross    | Discount | No-Pay | Net        |
|----------|------------|------------|------------|--------|----------|-----|----------|----------|--------|------------|
| 060719   | 06/07/2019 | 06/05/2019 | 06/27/2019 |        |          |     | 4,626.80 | 0.00     | 0.00   | 4,626.80 ✓ |

TRANSFER *Nursing home insurance pymt sent to MMLC in error*

Vendor Totals:

Number

Name

Gross

Discount

No-Pay

Net

11824

THE CRESCENT

4,626.80

0.00

0.00

4,626.80

## Report Summary

Grand Totals:

Gross

Discount

No-Pay

Net

4,626.80

0.00

0.00

4,626.80

APPROVED  
ON**JUN 14 2019** *CLC#*COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS*181108*

**MEMORIAL MEDICAL CENTER  
PROSPERITY BANK  
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --June 07, 2019 - June 16, 2019**

| <u>Date</u> | <u>Bank Description</u>                                  | <u>MMC Notes</u>                | <u>Amount</u>     | <u>CPSI "Handwritten"</u><br><u>Check" #</u> |
|-------------|----------------------------------------------------------|---------------------------------|-------------------|----------------------------------------------|
| 6/7/2019    | ACH Payment AMERISOURCE BERG PAYMENTS 0100007768 2100002 | - 340B Drug Program Expense     | 1218.17 ✓         | 1030 *                                       |
| 6/7/2019    | ACH Payment PAY PLUS ACHTRANS 452579291 101000693547611  | - 3rd Party Payor Fee           | 1.16 ✓            | 300012                                       |
| 6/10/2019   | ACH Payment PAY PLUS ACHTRANS 452579291 101000694363001  | - 3rd Party Payor Fee           | 3.41 ✓            | 300013                                       |
| 6/10/2019   | ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982541616 6110 | - Credit Card Processing Fee    | 563.44 ✓          | 300014                                       |
| 6/10/2019   | ACH Payment TSYS/TRANSFIRST DISCOUNT 39300982589946 6110 | - Credit Card Processing Fee    | 129 ✓             | 300015                                       |
| 6/10/2019   | ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332385 6110 | - Credit Card Processing Fee    | 144.74 ✓          | 300016                                       |
| 6/10/2019   | ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332393 6110 | - Credit Card Processing Fee    | 2082.03 ✓         | 300017                                       |
| 6/10/2019   | ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332401 6110 | - Credit Card Processing Fee    | 1159.05 ✓         | 300018                                       |
| 6/10/2019   | ACH Payment TSYS/TRANSFIRST DISCOUNT 41399801332419 6110 | - Credit Card Processing Fee    | 170.1 ✓           | 300019                                       |
| 6/10/2019   | ACH Payment UHC COMMUNITY PL REVERSAL 746003411 91000016 | -To Correct Duplicate Deposit ✓ | 171.36 ✓          | 700001                                       |
| 6/10/2019   | ACH Payment UHC COMMUNITY PL REVERSAL 746003411 91000016 | -To Correct Duplicate Deposit ✓ | 433.44 ✓          | 700002                                       |
| 6/11/2019   | ACH Payment MCKESSON DRUG AUTO ACH ACH03833176 910000114 | - 340B Drug Program Expense     | 5213.26 ✓         | 500000 ***                                   |
| 6/11/2019   | ACH Payment PAY PLUS ACHTRANS 452579291 101000695108183  | - 3rd Party Payor Fee           | 6.57 ✓            | 300020                                       |
| 6/12/2019   | ACH Payment PAY PLUS ACHTRANS 452579291 101000695813013  | - 3rd Party Payor Fee           | 7.92 ✓            | 300021                                       |
| 6/13/2019   | ACH Payment PAY PLUS ACHTRANS 452579291 101000696536381  | - 3rd Party Payor Fee           | 2.32 ✓            | 300022                                       |
| 6/14/2019   | ACH Payment AMERISOURCE BERG PAYMENTS 0100007768 2100002 | - 340B Drug Program Expense     | 1752.38 ✓         | 500001 ***                                   |
| 6/14/2019   | ACH Payment PAY PLUS ACHTRANS 452579291 101000697247299  | - 3rd Party Payor Fee           | 2.83 ✓            | 300023                                       |
| 6/14/2019   | ACH Payment PAYROLL ONLINE TRF PAYROLL 113122657934711   | - Payroll                       | 299292.48 ✓       | ***                                          |
| 6/14/2019   | ACH Payment STATE COMPTLR TEXNET 33986242/90613 2100002  | - DSH 2019 Pass 3 Payment       | 143596.96 ✓       | 100002 ***                                   |
|             |                                                          |                                 | 24 • 21 *         |                                              |
|             |                                                          |                                 | <b>455,950.62</b> |                                              |

Diane Moore, CFO  
Memorial Medical Center

June 17, 2019

\* Approved 06-05-19 cc  
\*\* Will be approved 06-17-19 due to last weeks short court  
\*\*\* Approved 06-10-19 cc

Credit 563 • 44 +  
Cash 129 • 00 +  
Case 144 • 74 +  
Bus 2,082 • 03 +  
1,159 • 05 +  
170 • 10 +  
4,248 • 36 \*

Duplicate 171 • 36 +  
Deposit 433 • 44 +  
Reversals 604 • 80 \*

24 • 21 +  
4,248 • 36 +  
604 • 80 +  
Check

455,950.62 +  
1,218.17 -  
5,213.26 -  
1,752.38 -  
299,292.48 -  
143,596.96 -  
4,877.37 \*

Memorial Medical Center  
Nursing Home UPL  
Weekly Cantex Transfer  
Prosperity Accounts  
6/17/2019

| Nursing Home                                                                              | Account Number | Previous Beginning Balance | Transfer-Out | ACH Transfer-In | Pending Deposits | Today's Beginning Balance                                                                       | Amount to Be Transferred to Nursing Home                                                       |
|-------------------------------------------------------------------------------------------|----------------|----------------------------|--------------|-----------------|------------------|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| Ashford Gardens                                                                           | 7              | 144,708.26 ✓               | 147,539.30 ✓ | 191,335.21 ✓    |                  | 188,504.17 ✓                                                                                    | 188,294.81                                                                                     |
|                                                                                           |                |                            |              |                 |                  | Bank Balance                                                                                    | 188,504.17 ✓                                                                                   |
|                                                                                           |                |                            |              |                 |                  | Variance                                                                                        | -                                                                                              |
|                                                                                           |                |                            |              |                 |                  | Leave in Balance                                                                                | 100.00                                                                                         |
| <u>Routing Information for Ashford Gardens:</u>                                           |                |                            |              |                 |                  | MMC Portion QIPP 1                                                                              |                                                                                                |
| Ashford Health Care Center Ltd Co                                                         |                |                            |              |                 |                  | MMC Portion QIPP 2,3,Lapse                                                                      |                                                                                                |
| JP Morgan Chase Bank                                                                      |                |                            |              |                 |                  | April Interest                                                                                  | 40.72 ✓                                                                                        |
| ABA                                                                                       |                |                            |              |                 |                  | May Interest                                                                                    | 68.64 ✓                                                                                        |
| Acco                                                                                      |                |                            |              |                 |                  | Pending QIPP Ck to MMC                                                                          |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | Adjust Balance/Transfer Amt                                                                     | 188,294.81 ✓                                                                                   |
| Broadmoor                                                                                 |                | 142,638.21 ✓               | 142,417.69 ✓ | 79,365.53 ✓     |                  | 79,586.05 ✓                                                                                     | 79,365.53                                                                                      |
|                                                                                           |                |                            |              |                 |                  | Bank Balance                                                                                    | 79,586.05 ✓                                                                                    |
|                                                                                           |                |                            |              |                 |                  | Variance                                                                                        | -                                                                                              |
|                                                                                           |                |                            |              |                 |                  | Leave in Balance                                                                                | 100.00                                                                                         |
|                                                                                           |                |                            |              |                 |                  | MMC Portion QIPP 1                                                                              |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | MMC Portion QIPP 2,3,Lapse                                                                      |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | April Interest                                                                                  | 59.21 ✓                                                                                        |
|                                                                                           |                |                            |              |                 |                  | May Interest                                                                                    | 61.31 ✓                                                                                        |
|                                                                                           |                |                            |              |                 |                  | Pending QIPP Ck to MMC                                                                          |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | Adjust Balance/Transfer Amt                                                                     | 79,365.53 ✓                                                                                    |
| Crescent                                                                                  |                | 97,809.15 ✓                | 97,602.29 ✓  | 53,508.96 ✓     |                  | 53,715.82 ✓                                                                                     | 53,508.96                                                                                      |
|                                                                                           |                |                            |              |                 |                  | Bank Balance                                                                                    | 53,715.82 ✓                                                                                    |
|                                                                                           |                |                            |              |                 |                  | Variance                                                                                        | -                                                                                              |
|                                                                                           |                |                            |              |                 |                  | Leave in Balance                                                                                | 100.00                                                                                         |
|                                                                                           |                |                            |              |                 |                  | MMC Portion QIPP 1                                                                              |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | MMC Portion QIPP 2,3,Lapse                                                                      |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | April Interest                                                                                  | 51.89 ✓                                                                                        |
|                                                                                           |                |                            |              |                 |                  | May Interest                                                                                    | 54.97 ✓                                                                                        |
|                                                                                           |                |                            |              |                 |                  | Pending QIPP Ck to MMC                                                                          |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | Adjust Balance/Transfer Amt                                                                     | 53,508.96 ✓                                                                                    |
| Fort Bend                                                                                 |                | 25,952.50 ✓                | 25,801.72 ✓  | 7,418.92 ✓      |                  | 7,569.70 ✓                                                                                      | 7,418.92                                                                                       |
|                                                                                           |                |                            |              |                 |                  | Bank Balance                                                                                    | 7,569.70 ✓                                                                                     |
|                                                                                           |                |                            |              |                 |                  | Variance                                                                                        | -                                                                                              |
|                                                                                           |                |                            |              |                 |                  | Leave in Balance                                                                                | 100.00                                                                                         |
|                                                                                           |                |                            |              |                 |                  | MMC Portion QIPP 1                                                                              |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | MMC Portion QIPP 2,3,Lapse                                                                      |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | April Interest                                                                                  | 25.47 ✓                                                                                        |
|                                                                                           |                |                            |              |                 |                  | May Interest                                                                                    | 25.31 ✓                                                                                        |
|                                                                                           |                |                            |              |                 |                  | Pending QIPP Ck to MMC                                                                          |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | Adjust Balance/Transfer Amt                                                                     | 7,418.92 ✓                                                                                     |
| Solera at W Houston                                                                       |                | 59,786.31 ✓                | 59,599.82 ✓  | 123,137.80 ✓    |                  | 123,324.29 ✓                                                                                    | 123,137.80                                                                                     |
|                                                                                           |                |                            |              |                 |                  | Bank Balance                                                                                    | 123,324.29 ✓                                                                                   |
|                                                                                           |                |                            |              |                 |                  | Variance                                                                                        | -                                                                                              |
|                                                                                           |                |                            |              |                 |                  | Leave in Balance                                                                                | 100.00                                                                                         |
| <u>Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:</u> |                |                            |              |                 |                  | MMC Portion QIPP 1                                                                              |                                                                                                |
| Cantex Health Care Centers III LLC                                                        |                |                            |              |                 |                  | MMC Portion QIPP 2,3,Lapse                                                                      |                                                                                                |
| JP Morgan Chase Bank                                                                      |                |                            |              |                 |                  | April Interest                                                                                  | 41.58 ✓                                                                                        |
| ABA                                                                                       |                |                            |              |                 |                  | May Interest                                                                                    | 44.91 ✓                                                                                        |
| Acco                                                                                      |                |                            |              |                 |                  | Pending QIPP Ck to MMC                                                                          |                                                                                                |
|                                                                                           |                |                            |              |                 |                  | Adjust Balance/Transfer Amt                                                                     | 123,137.80                                                                                     |
|                                                                                           |                |                            |              |                 |                  | TOTAL TRANSFERS                                                                                 | 451,726.02                                                                                     |
| Note: Only balances of over \$5,000 will be transferred to the nursing                    |                |                            |              |                 |                  | Approved:  | APPROVED  |
| Note 2: Each account has a base balance of \$100 that MMC deposits                        |                |                            |              |                 |                  | Diane C. Moore, CFO                                                                             | ON 6/17/2019                                                                                   |
|                                                                                           |                |                            |              |                 |                  |                                                                                                 |                                                                                                |

**Ashford Gardens**

|                                                                      | Transfer-Out      | Transfer-In       | MMC PORTION |            |            |            |         | NH PORTION        |
|----------------------------------------------------------------------|-------------------|-------------------|-------------|------------|------------|------------|---------|-------------------|
|                                                                      |                   |                   | QIPP/Comp1  | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse | QIPP TI |                   |
| 6/7/2019 ACH Deposit Amerigroup TXSC HCCLAIMPMT 3101693866 111000    |                   | 3,404.56          |             |            |            |            |         | 3,404.56          |
| 6/10/2019 Check # 59                                                 | 22,659.33         |                   |             |            |            |            |         | -                 |
| 6/10/2019 CM Wire Domestic WIRE OUT ASHFORD HEALTH CARE CENTER LTD   | 121,839.57        |                   |             |            |            |            |         | -                 |
| 6/10/2019 ACH Payment UHC COMMUNITY PL HCCLAIMPMT 746003411 91000016 | ~ 3,040.40        |                   |             |            |            |            |         | -                 |
| 6/10/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000   |                   | 3,040.40          |             |            |            |            |         | 3,040.40          |
| 6/10/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384   |                   | 7,380.00          |             |            |            |            |         | 7,380.00          |
| 6/10/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000   |                   | 3,040.40          |             |            |            |            |         | 3,040.40          |
| 6/12/2019 ACH Deposit MANAGEANDNET1718 MNS PMNT 000000000000093 41   |                   | 12,905.00         |             |            |            |            |         | 12,905.00         |
| 6/12/2019 ACH Deposit Amerigroup TXSC HCCLAIMPMT 3101980358 111000   |                   | 25,691.28         |             |            |            |            |         | 25,691.28         |
| 6/12/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384   |                   | 1,430.00          |             |            |            |            |         | 1,430.00          |
| 6/12/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2   |                   | 10,677.61         |             |            |            |            |         | 10,677.61         |
| 6/13/2019 Deposit                                                    |                   | 61,043.87         |             |            |            |            |         | 61,043.87         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000   |                   | 13,794.56         |             |            |            |            |         | 13,794.56         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000   |                   | 24,242.35         |             |            |            |            |         | 24,242.35         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000   |                   | 16,037.39         |             |            |            |            |         | 16,037.39         |
| 6/14/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2   |                   | 8,647.79          |             |            |            |            |         | 8,647.79          |
|                                                                      | <b>147,539.30</b> | <b>191,335.21</b> |             |            |            |            |         | <b>191,335.21</b> |

**Broadmoor**

|                                                                    | Transfer-Out      | Transfer-In      | MMC PORTION |            |            |            |         | NH PORTION       |
|--------------------------------------------------------------------|-------------------|------------------|-------------|------------|------------|------------|---------|------------------|
|                                                                    |                   |                  | QIPP/Comp1  | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse | QIPP TI |                  |
| 6/7/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                   | 189.30           |             |            |            |            |         | 189.30           |
| 6/7/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                   | 7.14             |             |            |            |            |         | 7.14             |
| 6/10/2019 Check #25                                                | 4,416.03          |                  |             |            |            |            |         | -                |
| 6/10/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III | 138,001.66        |                  |             |            |            |            |         | -                |
| 6/11/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 |                   | 14.29            |             |            |            |            |         | 14.29            |
| 6/12/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2 |                   | 4,880.57         |             |            |            |            |         | 4,880.57         |
| 6/13/2019 Deposit                                                  |                   | 57,601.53        |             |            |            |            |         | 57,601.53        |
| 6/14/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384 |                   | 2,646.00         |             |            |            |            |         | 2,646.00         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 |                   | 5,713.77         |             |            |            |            |         | 5,713.77         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 |                   | 4,158.00         |             |            |            |            |         | 4,158.00         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 |                   | 4,031.29         |             |            |            |            |         | 4,031.29         |
| 6/14/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676357 420000184 |                   | 123.64           |             |            |            |            |         | 123.64           |
|                                                                    | <b>142,417.69</b> | <b>79,365.53</b> |             |            |            |            |         | <b>79,365.53</b> |

**Crescent**

|                                                                     | Transfer-Out     | Transfer-In      | MMC PORTION |            |            |            |         | NH PORTION       |
|---------------------------------------------------------------------|------------------|------------------|-------------|------------|------------|------------|---------|------------------|
|                                                                     |                  |                  | QIPP/Comp1  | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse | QIPP TI |                  |
| 6/7/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384   |                  | 7,810.92         |             |            |            |            |         | 7,810.92         |
| 6/10/2019 Check #54                                                 | 4,388.70         |                  |             |            |            |            |         | -                |
| 6/10/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III  | 93,213.59        |                  |             |            |            |            |         | -                |
| 6/11/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384  |                  | 930.00           |             |            |            |            |         | 930.00           |
| 6/12/2019 ACH Deposit MANAGEANDNET1718 MNS PMNT 0000000000003268 41 |                  | 1,408.00         |             |            |            |            |         | 1,408.00         |
| 6/12/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000120  |                  | 360.10           |             |            |            |            |         | 360.10           |
| 6/13/2019 Deposit                                                   |                  | 14,776.14        |             |            |            |            |         | 14,776.14        |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                  | 729.70           |             |            |            |            |         | 729.70           |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                  | 8,569.59         |             |            |            |            |         | 8,569.59         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                  | 17,090.56        |             |            |            |            |         | 17,090.56        |
| 6/14/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2  |                  | 1,833.95         |             |            |            |            |         | 1,833.95         |
|                                                                     | <b>97,602.29</b> | <b>53,508.96</b> |             |            |            |            |         | <b>53,508.96</b> |

**Fort Bend**

|                                                                     | Transfer-Out     | Transfer-In     | MMC PORTION |            |            |            |         | NH PORTION      |
|---------------------------------------------------------------------|------------------|-----------------|-------------|------------|------------|------------|---------|-----------------|
|                                                                     |                  |                 | QIPP/Comp1  | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse | QIPP TI |                 |
| 6/7/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000   |                  | 410.42          |             |            |            |            |         | 410.42          |
| 6/10/2019 Check #52                                                 | 9,280.11         |                 |             |            |            |            |         | -               |
| 6/10/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III  | 16,521.61        |                 |             |            |            |            |         | -               |
| 6/11/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675663 420000139  |                  | 80.32           |             |            |            |            |         | 80.32           |
| 6/13/2019 Deposit                                                   |                  | 136.71          |             |            |            |            |         | 136.71          |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                  | 5,741.86        |             |            |            |            |         | 5,741.86        |
| 6/14/2019 ACH Deposit HUMANA INS CO EFFPAYMENT 390863 8300005638162 |                  | 1,049.61        |             |            |            |            |         | 1,049.61        |
|                                                                     | <b>25,801.72</b> | <b>7,418.92</b> |             |            |            |            |         | <b>7,418.92</b> |

**Solera at West Houston**

|                                                                     | Transfer-Out      | Transfer-In       | MMC PORTION |            |            |            |         | NH PORTION        |
|---------------------------------------------------------------------|-------------------|-------------------|-------------|------------|------------|------------|---------|-------------------|
|                                                                     |                   |                   | QIPP/Comp1  | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse | QIPP TI |                   |
| 6/10/2019 Check #52                                                 | 6,451.90          |                   |             |            |            |            |         | -                 |
| 6/10/2019 CM Wire Domestic WIRE OUT CANTEX HEALTH CARE CENTERS III  | 53,147.92         |                   |             |            |            |            |         | -                 |
| 6/10/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                   | 272.27            |             |            |            |            |         | 272.27            |
| 6/11/2019 ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384  |                   | 18,791.94         |             |            |            |            |         | 18,791.94         |
| 6/11/2019 ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676310 420000139  |                   | 210.15            |             |            |            |            |         | 210.15            |
| 6/11/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2  |                   | 15,876.41         |             |            |            |            |         | 15,876.41         |
| 6/11/2019 ACH Deposit AARP Supplementa HCCLAIMPMT 746003411 124384  |                   | 4,092.00          |             |            |            |            |         | 4,092.00          |
| 6/12/2019 ACH Deposit Amerigroup TXSC HCCLAIMPMT 3101980359 111000  |                   | 10,979.08         |             |            |            |            |         | 10,979.08         |
| 6/12/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2  |                   | 1,229.57          |             |            |            |            |         | 1,229.57          |
| 6/13/2019 Deposit                                                   |                   | 8,017.84          |             |            |            |            |         | 8,017.84          |
| 6/13/2019 Deposit                                                   |                   | 990.00            |             |            |            |            |         | 990.00            |
| 6/13/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2  |                   | 18,227.70         |             |            |            |            |         | 18,227.70         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                   | 4,112.81          |             |            |            |            |         | 4,112.81          |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                   | 24,254.86         |             |            |            |            |         | 24,254.86         |
| 6/14/2019 ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  |                   | 7,789.98          |             |            |            |            |         | 7,789.98          |
| 6/14/2019 ACH Deposit HUMANA INS CO EFFPAYMENT 390862 8300005638162 |                   | 1,066.31          |             |            |            |            |         | 1,066.31          |
| 6/14/2019 ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2  |                   | 7,226.88          |             |            |            |            |         | 7,226.88          |
|                                                                     | <b>59,599.82</b>  | <b>123,137.80</b> |             |            |            |            |         | <b>123,137.80</b> |
| <b>TOTALS</b>                                                       | <b>472,960.82</b> | <b>454,766.42</b> |             |            |            |            |         | <b>454,766.42</b> |



## Home

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NH ASHFORD \*4381 ★

\$188,504.17

\$188,504.17

MEMORIAL MEDICAL CENTER /  
NH BROADMOOR \*4403 ★

\$79,586.05

\$79,586.05

MEMORIAL MEDICAL CENTER /  
NH CRESCENT \*4411 ★

\$53,715.82

\$53,715.82

MEMORIAL MEDICAL CENTER /  
SOLERA AT WEST HOUSTON  
\*4438 ★

\$123,324.29

\$123,324.29

MEMORIAL MEDICAL CENTER /  
NH FORT BEND \*4446 ★

\$19,622.13

\$7,569.70

MEMORIAL MEDICAL / NH

MMC -NH GULF POINTE PLAZA

MMC -NH GULF POINTE PLAZA

Memorial Medical Center  
Nursing Home UPL  
Weekly Nexion Transfer  
Prosperity Accounts  
6/17/2019

| Nursing Home | Account Number | Previous Beginning Balance | Transfer-Out | Transfer-In | Cks Cleared | Pending Deposits | Nexion Portion - Federal Match | Today's Beginning Balance | Amount to Be Transferred to Nursing Home |
|--------------|----------------|----------------------------|--------------|-------------|-------------|------------------|--------------------------------|---------------------------|------------------------------------------|
| Golden Creek |                | 121,031.92 ✓               | 120,907.35   | 66,816.58 ✓ |             |                  |                                | 66,941.15                 | 66,793.56                                |
|              |                |                            |              |             |             |                  | Bank Balance                   | 66,941.15 ✓               |                                          |
|              |                |                            |              |             |             |                  | Variance                       | -                         |                                          |
|              |                |                            |              |             |             |                  | Leave in Balance               | 100.00                    |                                          |
|              |                |                            |              |             |             |                  | MMC Portion QIPP 1             |                           |                                          |
|              |                |                            |              |             |             |                  | MMC Portion QIPP 2,3,Lapse     |                           |                                          |
|              |                |                            |              |             |             |                  | April Interest                 | 19.65 ✓                   |                                          |
|              |                |                            |              |             |             |                  | May Interest                   | 27.94 ✓                   |                                          |
|              |                |                            |              |             |             |                  | Pending QIPP Ck to MMC         |                           |                                          |
|              |                |                            |              |             |             |                  |                                |                           |                                          |
|              |                |                            |              |             |             |                  | Adjust Balance/Transfer Amt    | 66,793.56 ✓               |                                          |

Routing Information for Golden Creek:

Nexion Health at Golden Creek

Wells Fargo Bank, N.A.

ABA

Accou

Note: Only balances of over \$5,000 will be transferred to the nursing home.

Note 2: Each account has a base balance of \$100 that MMC deposited to open account.

Approved:  
Diane C. Moore, CFO

6/17/2019

APPROVED  
ON

JUN 17 2019

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

**Golden Creek**

6/7/2019 ACH Deposit TSYS/TRANSFIRST BKCD STLMT 543684555876917 9  
 6/10/2019 Check #37  
 6/10/2019 CM Wire Domestic WIRE OUT NEXION HEALTH AT GOLDEN CREEK  
 6/10/2019 ACH Payment TSYS/TRANSFIRST DISCOUNT 543684555876917 910  
 6/13/2019 Deposit  
 6/13/2019 ACH Deposit TSYS/TRANSFIRST BKCD STLMT 543684555876917 9  
 6/14/2019 ACH Deposit TSYS/TRANSFIRST BKCD STLMT 543684555876917 9  
 6/14/2019 ACH Deposit Amedisys Holding CCD+ 555380828 210000288123  
 6/14/2019 ACH Deposit AETNA H09 HCCLAIMPMT 1588075964 311002051834

| Transfer-Out | Transfer-In | MMC PORTION |            |            |            |         | NH<br>PORTION |
|--------------|-------------|-------------|------------|------------|------------|---------|---------------|
|              |             | QIPP/Comp1  | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse | QIPP TI |               |
|              | 1,194.50 ✓  |             |            |            |            | -       | 1,194.50      |
| 18,101.85 ✓  |             |             |            |            |            | -       | -             |
| 102,782.48 ✓ |             |             |            |            |            | -       | -             |
| 23.02 ✓      |             |             |            |            |            | -       | -             |
|              | 55,155.05 ✓ |             |            |            |            | -       | 55,155.05     |
|              | 5,624.00 ✓  |             |            |            |            | -       | 5,624.00      |
|              | 241.10 ✓    |             |            |            |            | -       | 241.10        |
|              | 476.93 ✓    |             |            |            |            | -       | 476.93        |
|              | 4,125.00 ✓  |             |            |            |            | -       | 4,125.00      |
| 120,907.35   | 66,816.58 ✓ | -           | -          | -          | -          | -       | 1,194.50      |

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SOLERA AT WEST HOUSTON

MEMORIAL MEDICAL CENTER /

MEMORIAL MEDICAL / NH  
GOLDEN CREEK HEALTHCARE

\*4454 ★

MMC -NH GULF POINTE PLAZA

MMC -NH GULF POINTE PLAZA  
- MEDICARE/MEDICA

## Erica Perez

---

**From:** DMinton@Nexion-Health.com (Minton, Donna) <DMinton@Nexion-Health.com>  
**Sent:** Monday, June 17, 2019 4:36 PM  
**To:** 'Sarah Henderson'; Hartner, Beth L  
**Cc:** Erica Perez; Diane C. Moore; Turner, Tom; Minton, Donna  
**Subject:** [WARNING-Remote attachments, verify sender] RE: Transactions in Golden Creek Account

Sarah,

All of these with the exception of the last one are deposits for credit card payments paid to the facility. I will research to see why they are debiting out of the account and the last entry is a ACH payment from a hospice company that the facility uses.

I will let you know what I find out.

Thanks,

Donna Minton  
Regional Financial Manager | Nexion Health Management, Inc.  
6937 Warfield Avenue | Sykesville, MD 21784  
832-677-8603 (mobile)  
443-280-6326 (fax)  
DMinton@Nexion-Health.com | www.Nexion-Health.com | www.FaceBook.com/NexionHealthInc



*Your local leader in nursing, rehabilitation, and assisted-living services.*

---

**From:** Sarah Henderson [mailto:shenderson@mmcportlavaca.com]  
**Sent:** Monday, June 17, 2019 4:04 PM  
**To:** Hartner, Beth L <BHartner@Nexion-Health.com>; Minton, Donna <DMinton@Nexion-Health.com>  
**Cc:** Erica Perez <Erica.Perez@calhouncotx.org>; Diane C. Moore <dmoore@mmcportlavaca.com>  
**Subject:** Transactions in Golden Creek Account

Good Afternoon,

We have noticed some new transaction types coming through the MMC-Golden Creek Prosperity account.

Can you please confirm that these are deposits and payments that Golden Creek has set up. We are particularly concerned the debit from TSYS/Transfirst Discount-typically the only money moving out of our partnering nursing facility accounts are the wire transfers we initiate and the checks MMC writes to pay out our portion of QIPP monies. The transactions in question are as follows.

| Date      | Description                                              | Amount   |
|-----------|----------------------------------------------------------|----------|
| 5/20/2019 | ACH Deposit TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 | 241.10   |
| 6/7/2019  | ACH Deposit TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 | 1,194.50 |
| 6/10/2019 | ACH Payment TSYS/TRANSFIRST DISCOUNT 543684555876917 910 | (23.02)  |
| 6/13/2019 | ACH Deposit TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 | 5,624.00 |

|           |                                                          |        |
|-----------|----------------------------------------------------------|--------|
| 6/14/2019 | ACH Deposit TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 | 241.10 |
| 6/14/2019 | ACH Deposit Amedisys Holding CCD+ 555380828 210000288123 | 476.93 |

Thank you,

*Sarah Henderson*

Staff Accountant  
Memorial Medical Center  
815 N Virginia St.  
Port Lavaca TX 77979  
[shenderson@mmcporthlavaca.com](mailto:shenderson@mmcporthlavaca.com)  
361-552-0342

Memorial Medical Center  
Nursing Home UPL  
Weekly HMG Transfer  
Prosperity Accounts  
6/17/2019

| Nursing Home                                | Account Number | Previous Beginning Balance | Transfer-Out | Transfer-In | Cks Cleared | Pending Deposits            | Today's Beginning Balance | Amount to Be Transferred to Nursing Home |
|---------------------------------------------|----------------|----------------------------|--------------|-------------|-------------|-----------------------------|---------------------------|------------------------------------------|
| <u>Gulf Pointe Plaza- Private Pay</u>       |                | 100.00                     | -            | 0.25        |             |                             | 100.25                    | <del>100.25</del> ✓ No Transfer          |
|                                             |                |                            |              |             |             | Bank Balance                | 100.25                    |                                          |
|                                             |                |                            |              |             |             | Variance                    | 100.25                    |                                          |
|                                             |                |                            |              |             |             | Leave in Balance            | 100.00                    |                                          |
|                                             |                |                            |              |             |             | MMC Portion QIPP 1          |                           |                                          |
|                                             |                |                            |              |             |             | MMC Portion QIPP 2,3,Lapse  |                           |                                          |
|                                             |                |                            |              |             |             | March Interest              | 0.04                      | ✓                                        |
|                                             |                |                            |              |             |             | April Interest              | 0.04                      | ✓                                        |
|                                             |                |                            |              |             |             | May Interest                | 0.04                      | ✓                                        |
|                                             |                |                            |              |             |             | Pending QIPP Ck to MMC      |                           |                                          |
|                                             |                |                            |              |             |             | Adjust Balance/Transfer Amt | 0.13                      | ✓                                        |
| <u>Gulf Pointe Plaza- Medicare/Medicaid</u> |                | 100.00                     | -            | 889.15      |             |                             | 989.15                    | <del>889.07</del> ✓ No Transfer          |
|                                             |                |                            |              |             |             | Bank Balance                | 989.15                    |                                          |
|                                             |                |                            |              |             |             | Variance                    | 989.15                    |                                          |
|                                             |                |                            |              |             |             | Leave in Balance            | 100.00                    |                                          |
|                                             |                |                            |              |             |             | MMC Portion QIPP 1          |                           |                                          |
|                                             |                |                            |              |             |             | MMC Portion QIPP 2,3,Lapse  |                           |                                          |
|                                             |                |                            |              |             |             | March Interest              | 0.04                      | ✓                                        |
|                                             |                |                            |              |             |             | April Interest              | 0.04                      | ✓                                        |
|                                             |                |                            |              |             |             | May Interest                | 0.04                      | ✓                                        |
|                                             |                |                            |              |             |             | Pending QIPP Ck to MMC      |                           |                                          |
|                                             |                |                            |              |             |             | Adjust Balance/Transfer Amt | 889.07                    |                                          |
|                                             |                |                            |              |             |             |                             | .03                       |                                          |

Routing Information for Gulf Pointe Plaza:

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

6/17/2019

APPROVED  
ON  
JUN 17 2019  
COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

**Gulf Points Plaza-Private Pay**

3/31/2019 Accr Earning Pymt Added to Account  
4/30/2019 Accr Earning Pymt Added to Account  
5/17/2019 ACH Deposit PaySpan PaySpan 61000106093383  
5/31/2019 Accr Earning Pymt Added to Account

| MMC PORTION  |             |            |            |            |            | NH<br>PORTION |
|--------------|-------------|------------|------------|------------|------------|---------------|
| Transfer-Out | Transfer-In | QIPP/Comp1 | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse |               |
|              | 0.04        |            |            |            |            |               |
|              | 0.04        |            |            |            |            |               |
|              | 0.13        |            |            |            |            | 0.13          |
|              | 0.04        |            |            |            |            |               |
|              |             |            |            |            |            |               |
|              |             |            |            |            |            |               |
|              |             |            |            |            |            |               |
|              | 0.25        |            |            |            |            | 0.13          |

**Gulf Points Plaza-Medicare/Medicaid**

3/31/2019 Accr Earning Pymt Added to Account  
4/30/2019 Accr Earning Pymt Added to Account  
5/31/2019 Accr Earning Pymt Added to Account  
6/7/2019 ACH Deposit PaySpan PaySpan 61000100157100  
6/14/2019 ACH Deposit CENTENE CORP HCCLAIMPMT 61000103728339

| MMC PORTION  |             |            |            |            |            | NH<br>PORTION |
|--------------|-------------|------------|------------|------------|------------|---------------|
| Transfer-Out | Transfer-In | QIPP/Comp1 | QIPP/Comp2 | QIPP/Comp3 | QIPP/Lapse |               |
|              | 0.04        |            |            |            |            |               |
|              | 0.04        |            |            |            |            |               |
|              | 0.04        |            |            |            |            |               |
|              | 0.12        |            |            |            |            | 0.12          |
|              | 888.91      |            |            |            |            | 888.91        |
|              |             |            |            |            |            |               |
|              |             |            |            |            |            |               |
|              | 889.15      |            |            |            |            | 889.03        |



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SOLERA AT WEST HOUSTONMEMORIAL MEDICAL CENTER /  
NH FORT BENDMEMORIAL MEDICAL / NH  
GOLDEN CREEK HEALTHCAREMMC -NH GULF POINTE PLAZA  
- PRIVATE PAY \*5433 ★MMC -NH GULF POINTE PLAZA  
- MEDICARE/MEDICAID \*5441 ★

\$100.25

\$100.25

\$989.15

\$989.15

8

RUN DATE:06/14/19  
TIME:09:35

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
06/14/19 THRU 06/14/19

PAGE 1  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

-----  
A/P \* 180121 06/14/19 3,560.00CR MASA GLOBAL BUILDING  
A/P \* 180546 06/14/19 1,498.00CR MASA GLOBAL BUILDING  
A/P 181043 06/14/19 1,498.00 MASA GLOBAL BUILDING  
A/P 181044 06/14/19 3,560.00 MASA GLOBAL BUILDING  
TOTALS: .00

11612 MASA  
 MASA MTS, FT. LAUDERDALE, FL 33301  
 MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

180121

| REFERENCE NO.              | DATE     | GROSS AMOUNT    | DISCOUNT % | DISCOUNT AMOUNT | NET PAYABLE |
|----------------------------|----------|-----------------|------------|-----------------|-------------|
| 649100MKMMC                | 03/22/19 | 1,031.00        |            |                 | 1,031.00    |
| 655794MKMMC                | 03/22/19 | 1,022.00        |            |                 | 1,022.00    |
| 665487MKMMC                | 03/22/19 | 1,507.00        |            |                 | 1,507.00    |
| CHECK NO. 180121<br>040319 |          | TOTALS 3,560.00 | TOTALS     |                 | 3,560.00    |

MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

180121

| REFERENCE NO.                                           | DATE     | GROSS AMOUNT    | DISCOUNT % | DISCOUNT AMOUNT | NET PAYABLE |
|---------------------------------------------------------|----------|-----------------|------------|-----------------|-------------|
| 649100MKMMC                                             | 03/22/19 | 1,031.00        |            |                 | 1,031.00    |
| 655794MKMMC                                             | 03/22/19 | 1,022.00        |            |                 | 1,022.00    |
| 665487MKMMC                                             | 03/22/19 | 1,507.00        |            |                 | 1,507.00    |
| CK# 181044 replaced # 180121<br>- address was incorrect |          |                 |            |                 |             |
| CHECK NO. 180121                                        |          | TOTALS 3,560.00 | TOTALS     |                 | 3,560.00    |

**MEMORIAL**  
 MEDICAL  CENTER

Operating  
 815 N. Virginia St.  
 Port Lavaca, TX 77979

PROSPERITY BANK

88-2265  
 1131

180121

11612

180121

DATE  
 04/03/19

AMOUNT  
 \$3,560.00

Three Thousand Five Hundred Sixty Dollars and No Cents

PAY  
 TO THE ORDER OF  
 MASA  
 MASA MTS  
 ATTN: TIFFANY FASCHER  
 101 NE 3RD AVE.  
 TOWER 101 SUITE 1600  
 FT. LAUDERDALE, FL 33301

CALHOUN COUNTY TREASURER

**PROSPERITY BANK**

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## Services & Settings

### Online Stop Payment Request

---

Your stop payment request has been processed.

Name : CLARRI

Account #: MEMORIAL MEDICAL CENTER - OPERATING:\*4357

Payable to: MASA

Check #: 180121

Issue Date#: 04/03/2019

Amount: \$3560.00

Date/Time Submitted: 06/13/2019 14:57:11

Request #: FX675523

---

## Erica Perez

---

**From:** cclevenger@mmcportlavaca.com (Caitlin Clevenger)  
<cclevenger@mmcportlavaca.com>  
**Sent:** Friday, June 14, 2019 11:55 AM  
**To:** Erica Perez  
**Cc:** Melissa Mckissack  
**Subject:** FW: stop payment to be issued

---

**From:** Caitlin Clevenger  
**Sent:** Thursday, June 13, 2019 11:21 AM  
**To:** 'Clarri Atkinson' <clarri.atkinson@calhouncotx.org>; 'rhonda kokena' <rhonda.kokena@calhouncotx.org>  
**Cc:** Melissa Mckissack <mmckissack@mmcportlavaca.com>  
**Subject:** stop payment to be issued

180121 4/3/2019 3,560.00 MASA

Not Cleared

-

We also will be needing to reissue this check as well. The vendor never received it.

*Respectfully,*

*Caitlin Clevenger*

Memorial Medical Center  
Accounts Payable  
815 N Virginia. St  
Port Lavaca, TX 77979  
Ph: 361.552.0256 Fax: 361.551.4504

180546

MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

180546

|                                                                                                                                                                                                   |  |                                                        |  |                               |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|--|-------------------------------|--|
| <div>MEMORIAL<br/>MEDICAL  CENTER</div> <div>Operating<br/>815 N. Virginia St.<br/>Port Lavaca, TX 77979</div> |  | <div>PROSPERITY BANK</div> <div>88-2265<br/>1131</div> |  | <div>180546</div>             |  |
|                                                                                                                                                                                                   |  |                                                        |  | <div>11612180546</div>        |  |
|                                                                                                                                                                                                   |  |                                                        |  | <div>DATEAMOUNT</div>         |  |
|                                                                                                                                                                                                   |  |                                                        |  | <div>05/08/19\$1,498.00</div> |  |
| <div>One Thousand Four Hundred Ninety-Eight Dollars and No Cents</div>                                                                                                                            |  |                                                        |  |                               |  |
| <div>PAY<br/>TO THE<br/>ORDER<br/>OF</div>                                                                                                                                                        |  |                                                        |  |                               |  |
| <div>MASA<br/>MASA MTS<br/>ATTN: TIFFANY FASCHER<br/>101 NE 3RD AVE.<br/>TOWER 101 SUITE 1600<br/>FT. LAUDERDALE, FL 33301</div>                                                                  |  |                                                        |  |                               |  |
| <div>C. J. ... TREASURER</div>                                                                                                                                                                    |  |                                                        |  |                               |  |



PROSPERITY BANK

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## Services & Settings

### Online Stop Payment Request

---

Your stop payment request has been processed.

Name : CLARRI

Account #: MEMORIAL MEDICAL CENTER - OPERATING-\*4357

Payable to: MASA

Check #: 180546

Issue Date#: 05/08/2019

Amount: \$1498.00

Date/Time Submitted: 06/13/2019 14:58:07

Request #: FX675527

---

## Erica Perez

---

**From:** cclevenger@mmcportlavaca.com (Caitlin Clevenger)  
<cclevenger@mmcportlavaca.com>  
**Sent:** Friday, June 14, 2019 11:56 AM  
**To:** Erica Perez  
**Cc:** Melissa Mckissack  
**Subject:** FW: stop payment

---

**From:** Caitlin Clevenger  
**Sent:** Thursday, June 13, 2019 9:25 AM  
**To:** 'rhonda kokena' <rhonda.kokena@calhouncotx.org>  
**Cc:** Melissa Mckissack <mmckissack@mmcportlavaca.com>  
**Subject:** stop payment

180546 5/8/2019 1,498.00 MASA

Not Cleared

-

Good morning!

We are needing to issue stop payment on the check listed above. The vendor is asking for payment to be reissued since they have not received the check.

Please let me know if you need any more information. Thank you!!

*Respectfully,*  
*Caitlin Clevenger*

Memorial Medical Center  
Accounts Payable  
815 N Virginia. St  
Port Lavaca, TX 77979  
Ph: 361.552.0256 Fax: 361.551.4504