MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- November 06, 2019

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	397,528.23
TOTAL TRANSFERS BETWEEN FUNDS	$	-
TOTAL NURSING HOME UPL EXPENSES	$	673,650.32
TOTAL INTER-GOVERNMENT TRANSFERS	$	-
GRAND TOTAL DISBURSEMENTS APPROVED November 06, 2019	$	1,071,178.55

APPROVED

NOV 0 6 2019

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---November 06, 2019

PAYABLES AND PAYROLL		
11/1/2019 Weekly Payables	387,328.15	
11/1/2019 Patient Refunds	3,216.07	
11/1/2019 Allyson Swope-Contract Employee	2,196.00	
11/1/2019 Sparklight-Phones	73.42	
11/4/2019 McKesson-340B Prescription Expense	3,570.93	
11/4/2019 Amerisource Bergen-340B Prescription Expense	1,011.99	
Prosperity Electronic Bank Payments		
10/28-11/1/19 Pay Plus-Patient Claims Processing Fee	131.67	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS		**$ 397,528.23**
TOTAL TRANSFERS BETWEEN FUNDS		**$ -**
NURSING HOME UPL EXPENSES		
11/4/2019 Nursing Home UPI-Cantex Transfer	493,383.63	
11/4/2019 Nursing Home UPI-Nexion Transfer	53,646.36	
QIPP/INTEREST/RECOUP CHECKS TO MMC		
11/4/2019 Ashford	31,231.75	
11/4/2019 Broadmoor	4,777.37	
11/4/2019 Crescent	3,515.07	
11/4/2019 Fort Bend	9,989.48	
11/4/2019 Solera	8,994.53	
11/4/2019 Golden Creek	44,110.30	
11/4/2019 Gulf Pointe	12,273.83	
11/4/2019 Ashford-to reclaim misidentified deposit not due to Ashford	11,728.00	
TOTAL NURSING HOME UPL EXPENSES		**$ 673,650.32**
TOTAL INTER-GOVERNMENT TRANSFERS		**$ -**
GRAND TOTAL DISBURSEMENTS APPROVED November 06, 2019		**$ 1,071,178.55**

10/31/2019 MEMORIAL MEDICAL CENTER 0
10:26 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 11/13/2019

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
9094095472 ✓	OXYGEN	10/23/20	10/14/20	11/08/20		259.08	0.00	0.00	259.08 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS USA, LLC - CENTRAL DIV	259.08	0.00	0.00	259.08

Vendor#	Vendor Name	Class	Pay Code
B1150	BAXTER HEALTHCARE ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
64664242 ✓	SUPPLIES	10/23/20	10/16/20	11/10/20		128.40	0.00	0.00	128.40 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1150	BAXTER HEALTHCARE	128.40	0.00	0.00	128.40

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
6007955311 ✓	SUPPLIE S	10/29/20	10/16/20	10/29/20		1,727.40	0.00	0.00	1,727.40 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2485	BAYER HEALTHCARE	1,727.40	0.00	0.00	1,727.40

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
5413737 ✓	SUPPLIES	10/21/20	10/13/20	11/07/20		5,016.58	0.00	0.00	5,016.58 ✓
108034628 ✓	SUPPLIES	10/21/20	10/15/20	11/09/20		1,288.45	0.00	0.00	1,288.45 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC	6,305.03	0.00	0.00	6,305.03

Vendor#	Vendor Name	Class	Pay Code
10926	CAITLIN CLEVENGER ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
100319	TRAVEL TOT BANK (9/27-10/25/19)	10/29/20	10/03/19	10/03/20		8.87	0.00	0.00	8.87 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10926	CAITLIN CLEVENGER	8.87	0.00	0.00	8.87

Vendor#	Vendor Name	Class	Pay Code
C1325	CARDINAL HEALTH 414, INC. ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8002051092 ✓	SUPPLIES	10/29/20	09/30/20	10/25/20		304.12	0.00	0.00	304.12 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1325	CARDINAL HEALTH 414, INC.	304.12	0.00	0.00	304.12

Vendor#	Vendor Name	Class	Pay Code
12768	CHEMAQUA ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3711271 ✓		10/29/20	10/10/20	10/20/20		500.00	0.00	0.00	500.00 ✓

WATER TREATMENT

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12768	CHEMAQUA	500.00	0.00	0.00	500.00

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
101619	WATER	10/29/20	10/16/20	11/01/20		5,873.29	0.00	0.00	5,873.29 ✓
101619A	WATER – included previous balance	10/29/20	10/16/20	11/05/20		52.63 100.99	0.00	0.00	100.99 52.63
101619B	WTER – included previous balance	10/30/20	10/16/20	11/05/20		132.85 324.80	0.00	0.00	324.80 132.85

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1730	CITY OF PORT LAVACA	6,299.08 6,058.77	0.00	0.00	6,299.08 6,058.77

Vendor# 11126 Vendor Name: COLA RESOURCES, INC. ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
CRI09672019 ✓	RENEWAL	10/29/20	10/15/20	10/15/20		249.00	0.00	0.00	249.00 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11126	COLA RESOURCES, INC.	249.00	0.00	0.00	249.00

Vendor# 12536 Vendor Name: COMMAND ELECTRIC LLC ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
103019	Troubleshoot and repair Parking Lot Cirwits and Controles	10/30/20	10/30/20	10/30/20		4,424.00	0.00	0.00	4,424.00 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12536	COMMAND ELECTRIC LLC	4,424.00	0.00	0.00	4,424.00

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3221530 ✓	SUPPLIES	10/23/20	10/09/20	10/30/20		37.60	0.00	0.00	37.60 ✓

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

Vendor# 12884 Vendor Name: CUSTOMIZED COMMUNICATION INC ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
124803 ✓	THE GIFT OF MOTHERHOOD I	10/29/20	10/07/20	11/07/20		566.26	0.00	0.00	566.26 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12884	CUSTOMIZED COMMUNICATION INC	566.26	0.00	0.00	566.26

Vendor# 10284 Vendor Name: CYTO THERM L.P. ✓ Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
288271 ✓	SUPPLIES	10/22/20	10/02/20	10/22/20		233.03	0.00	0.00	233.03 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10284	CYTO THERM L.P.	233.03	0.00	0.00	233.03

Vendor# 12612 Vendor Name: DASHBOARD MD ✓ Class: Pay Code:

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

8864		10/30/20	10/30/20	10/30/20		5,425.00	0.00	0.00	5,425.00 ✓
	NIGHTLY DATA LOAD LADT 5C							
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
10368	DEWITT POTH & SON ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
5867120 ✓		10/22/20	10/14/20	11/08/20			169.39	0.00	0.00	169.39 ✓
	SUPPLIES									
5868380 ✓		10/23/20	10/16/20	11/10/20			105.21	0.00	0.00	105.21 ✓
	SUPPLIES									
5868370 ✓		10/23/20	10/16/20	11/10/20			68.00	0.00	0.00	68.00 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON	342.60	0.00	0.00	342.60

Vendor#	Vendor Name	Class	Pay Code
10789	DISCOVERY MEDICAL NETWORK INC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
MMC103119 ✓		10/30/20	10/31/20	10/31/20			144,185.93	0.00	0.00	144,185.93 ✓
	PRO FEES Physician Services Oct. 16-31, 2019									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10789	DISCOVERY MEDICAL NETWORK INC	144,185.93	0.00	0.00	144,185.93

Vendor#	Vendor Name	Class	Pay Code
10690	DYNASTHETICS ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1914953 ✓		10/30/20	04/19/20	05/19/20			354.14	0.00	0.00	354.14 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10690	DYNASTHETICS	354.14	0.00	0.00	354.14

Vendor#	Vendor Name	Class	Pay Code
11284	EMERGENCY STAFFING SOLUTIONS ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
38506 ✓		10/29/20	10/31/20	10/31/20			40,062.50	0.00	0.00	40,062.50 ✓
	ER STAFFING Oct 16-31, 2019									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11284	EMERGENCY STAFFING SOLUTIONS	40,062.50	0.00	0.00	40,062.50

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
575817 ✓		10/29/20	10/21/20	10/29/20			2,207.90	0.00	0.00	2,207.90 ✓
	SUPPLIES									
574982 ✓		10/30/20	10/16/20	10/30/20			155.93	0.00	0.00	155.93 ✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10042	ERBE USA INC SURGICAL SYSTEMS	2,363.83	0.00	0.00	2,363.83

Vendor#	Vendor Name	Class	Pay Code
F1100	FEDERAL EXPRESS CORP. ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
677015561 ✓		10/29/20	10/17/20	11/11/20			38.51	0.00	0.00	38.51 ✓
	SHIPPING									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net

	F1100	FEDERAL EXPRESS CORP.				38.51	0.00	0.00	38.51
Vendor#	Vendor Name				Class	Pay Code			
F1400	FISHER HEALTHCARE				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	0810762		10/16/20	10/18/20	11/12/20		75.20	0.00	0.00	75.20
		SUPPLIES								
	7154495		10/23/20	09/26/20	10/21/20		54.36	0.00	0.00	54.36
		SUPPLIES								
	0089039		10/23/20	10/14/20	11/08/20		510.21	0.00	0.00	510.21
		SUPPLIES								
	0089033		10/23/20	10/14/20	11/08/20		2,724.00	0.00	0.00	2,724.00
		SUPPLIES								
	0268479		10/23/20	10/15/20	11/09/20		973.72	0.00	0.00	973.72
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		F1400	FISHER HEALTHCARE				4,337.49	0.00	0.00	4,337.49
Vendor#	Vendor Name				Class	Pay Code				
C2700	FISHER HEALTHCARE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	6478587		10/29/20	09/18/20	10/18/20		7,967.70	0.00	0.00	7,967.70
		SUPPLIES								
	0089029		10/29/20	10/14/20	11/13/20		470.26	0.00	0.00	470.26
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C2700	FISHER HEALTHCARE				8,437.96	0.00	0.00	8,437.96
Vendor#	Vendor Name				Class	Pay Code				
12636	FUSION CLOUD SERVICES, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	27469490		10/23/20	10/16/20	11/07/20		1,141.93	0.00	0.00	1,141.93
		PHONES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		12636	FUSION CLOUD SERVICES, LLC				1,141.93	0.00	0.00	1,141.93
Vendor#	Vendor Name				Class	Pay Code				
10956	GETINGE USA SALES LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	6991133741		10/30/20	10/21/20	10/16/20		171.00	0.00	0.00	171.00
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10956	GETINGE USA SALES LLC				171.00	0.00	0.00	171.00
Vendor#	Vendor Name				Class	Pay Code				
W1300	GRAINGER				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	9319049780		10/29/20	10/10/20	11/04/20		45.40	0.00	0.00	45.40
		SUPPLIES								
	9323194051		10/29/20	10/14/20	11/08/20		95.00	0.00	0.00	95.00
		SUPPLIES								
	9323067414		10/29/20	10/14/20	11/08/20		37.65	0.00	0.00	37.65
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		W1300	GRAINGER				178.05	0.00	0.00	178.05
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
1747424		10/15/20	10/08/20	11/07/20		351.39	0.00	0.00	351.39
	SUPPLIES								
1747433		10/22/20	10/08/20	11/07/20		1,065.17	0.00	0.00	1,065.17
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY	1,416.56	0.00	0.00	1,416.56

Vendor#	Vendor Name	Class	Pay Code
10334	HEALTH CARE LOGISTICS INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
307308409		10/21/20	10/08/20	11/07/20		70.75	0.00	0.00	70.75
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10334	HEALTH CARE LOGISTICS INC	70.75	0.00	0.00	70.75

Vendor#	Vendor Name	Class	Pay Code
12716	HITACHI HEALTHCARE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
PJIN0143079		10/29/20	10/04/20	10/04/20		43,500.00	0.00	0.00	43,500.00
	2&3RD INSTALLMENT MRI ~~SOFT~~ware and hardware								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12716	HITACHI HEALTHCARE	43,500.00	0.00	0.00	43,500.00

Vendor#	Vendor Name	Class	Pay Code
11312	INRAD		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
925304		10/30/20	10/18/20	10/30/20		148.00	0.00	0.00	148.00
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11312	INRAD	148.00	0.00	0.00	148.00

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
921495692		10/22/20	10/03/20	11/08/20		520.41	0.00	0.00	520.41
	SUPPLIES								
921525140		10/22/20	10/11/20	11/10/20		42.00	0.00	0.00	42.00
	SUPPLIES								
921395758		10/23/20	09/10/20	10/10/20		84.00	0.00	0.00	84.00
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	J0150	J & J HEALTH CARE SYSTEMS, INC	646.41	0.00	0.00	646.41

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
65829514		10/29/20	10/07/20	10/22/20		139.70	0.00	0.00	139.70
	SUPPLIE S								
65826677		10/29/20	10/07/20	10/22/20		260.97	0.00	0.00	260.97
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC	400.67	0.00	0.00	400.67

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

1889443820	10/09/20 10/09/20 11/08/20	17.44	0.00	0.00	17.44	
SUPPLIES						
1890242459	10/16/20 10/16/20 11/10/20	474.59	0.00	0.00	474.59	
SUPPLIES						
1890187445	10/16/20 10/16/20 11/10/20	3,081.90	0.00	0.00	3,081.90	
SUPPLIES						
1890187451	10/16/20 10/16/20 11/10/20	17.19	0.00	0.00	17.19	
SUPPLIES						
1890187450	10/16/20 10/16/20 11/10/20	78.73	0.00	0.00	78.73	
SUPPLIES						
1870187449	10/16/20 10/16/20 11/10/20	40.33	0.00	0.00	40.33	
SUPPLIES						
1890187448	10/16/20 10/16/20 11/10/20	64.14	0.00	0.00	64.14	
SUPPLIES						
1890187446	10/16/20 10/16/20 11/10/20	1,211.77	0.00	0.00	1,211.77	
SUPPLIES						
1890347086	10/16/20 10/17/20 11/11/20	1,045.69	0.00	0.00	1,045.69	
SUPPLIES						
1890347077	10/16/20 10/17/20 11/11/20	93.30	0.00	0.00	93.30	
SUPPLIES						
1890347083	10/16/20 10/17/20 11/11/20	92.95	0.00	0.00	92.95	
SUPPLIES						
1890347080	10/16/20 10/17/20 11/11/20	347.02	0.00	0.00	347.02	
SUPPLIES						
1890347078	10/16/20 10/17/20 11/11/20	93.30	0.00	0.00	93.30	
SUPPLIES						
1890347079	10/16/20 10/17/20 11/11/20	93.30	0.00	0.00	93.30	
1890347084	10/16/20 10/17/20 11/11/20	73.68	0.00	0.00	73.68	
SUPPLIES						
1888721265	10/23/20 10/02/20 10/27/20	546.21	0.00	0.00	546.21	
SUPPLIES						
1890052277	10/23/20 10/15/20 11/09/20	36.51	0.00	0.00	36.51	
SUPPLIES						
1890113272	10/29/20 10/15/20 11/09/20	87.00	0.00	0.00	87.00	
SUPPLIES						
1890187429	10/29/20 10/16/20 11/10/20	460.57	0.00	0.00	460.57	
SUPPLIES						
1870187427	10/29/20 10/16/20 11/10/20	404.91	0.00	0.00	404.91	
SUPPLIES						
1890187439	10/29/20 10/16/20 11/10/20	25.38	0.00	0.00	25.38	
SUPPLIES						
1890187433	10/29/20 10/16/20 11/10/20	267.03	0.00	0.00	267.03	
~~0187437~~ 1890187437 SUPPLIES	10/29/20 10/16/20 11/10/20	133.30	0.00	0.00	133.30	
SUPPLIES						
1890187440	10/29/20 10/16/20 11/10/20	97.74	0.00	0.00	97.74	
SUPPLIES						
1890187436	10/29/20 10/16/20 11/10/20	234.05	0.00	0.00	234.05	
SUPPLIES						
1870187432	10/29/20 10/16/20 11/10/20	22.14	0.00	0.00	22.14	
SUPPLIES Freight 17.33 on (1) 4.81 Measuring tape						

1890187431	10/29/20	10/16/20	11/10/20		30.31	0.00	0.00	30.31
SUPPLIES Freight 17.33 on (1) 12.98 Nude								
1890187430	10/29/20	10/16/20	11/10/20		17.02	0.00	0.00	17.02
SUPPLIES								
1890661721	10/29/20	10/16/20	11/10/20		-195.00	0.00	0.00	-195.00
PO 39459/1888261534 INVOICE								
1870347082	10/29/20	10/17/20	11/11/20		30.76	0.00	0.00	30.76
SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC	9,023.26	0.00	0.00	9,023.26

Vendor# 12836 Vendor Name: MELISSA MCKISSACK Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
102419		10/29/20	10/24/20	10/24/20			7.25	0.00	0.00	7.25
	TRAVEL TO COUNTY/BANK									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12836	MELISSA MCKISSACK	7.25	0.00	0.00	7.25

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
8800525432		10/22/20	10/02/20	11/01/20			2,118.25	0.00	0.00	2,118.25
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2659	MERRY X-RAY/SOURCEONE HEALTHCA	2,118.25	0.00	0.00	2,118.25

Vendor# 10810 Vendor Name: MMC EMPLOYEE BENEFIT PLAN Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
102919		10/30/20	10/29/20	10/29/20			532.00	0.00	0.00	532.00
	INSURANCE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10810	MMC EMPLOYEE BENEFIT PLAN	532.00	0.00	0.00	532.00

Vendor# 10536 Vendor Name: MORRIS & DICKSON CO, LLC Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
4819246		10/29/20	10/21/20	10/31/20			2,060.46	0.00	0.00	2,060.46
	INVENTORY									
6728		10/29/20	10/21/20	10/31/20			-20.99	0.00	0.00	-20.99
	CREDIT									
4819247		10/29/20	10/21/20	10/31/20			246.96	0.00	0.00	246.96
CM15669		10/29/20	10/21/20	10/31/20			-18.34	0.00	0.00	-18.34
	CREDIT									
7223		10/29/20	10/21/20	10/31/20			-10.46	0.00	0.00	-10.46
	CREDIT									
7155		10/29/20	10/21/20	10/31/20			-0.01	0.00	0.00	-0.01
	CREDIT									
4819245		10/29/20	10/21/20	10/31/20			90.62	0.00	0.00	90.62
	INVENTORY									
7154A		10/29/20	10/21/20	10/31/20			-19.20	0.00	0.00	-19.20
	CREDIT									
4822851		10/29/20	10/22/20	11/01/20			58.49	0.00	0.00	58.49

INVENTORY							
4822850	10/29/20	10/22/20	11/01/20	10,713.80	0.00	0.00	10,713.80
INVENTORY							
4822849	10/29/20	10/22/20	11/01/20	250.08	0.00	0.00	250.08
INVENTORY							
4828282	10/29/20	10/23/20	11/02/20	1,404.88	0.00	0.00	1,404.88
INVENTORY							
4827030	10/29/20	10/23/20	11/02/20	44.00	0.00	0.00	44.00
INVENTORY							
4828283	10/29/20	10/23/20	11/02/20	1,632.52	0.00	0.00	1,632.52
INVENTORY							
4826138	10/29/20	10/23/20	11/02/20	5.29	0.00	0.00	5.29
INVENTORY							
4828284	10/29/20	10/23/20	11/02/20	15.98	0.00	0.00	15.98
INVENTORY							
8123	10/29/20	10/24/20	11/03/20	-10.00	0.00	0.00	-10.00
CREDIT							
4830632	10/29/20	10/24/20	11/03/20	2,609.38	0.00	0.00	2,609.38
INENTORY							
4832454	10/29/20	10/24/20	11/03/20	39.65	0.00	0.00	39.65
INVENTORY							
4832455	10/29/20	10/24/20	11/03/20	386.26	0.00	0.00	386.26
INVENTORY							
4832457	10/29/20	10/24/20	11/03/20	1.42	0.00	0.00	1.42
INVENTORY							
4831032	10/29/20	10/24/20	11/03/20	3,774.28	0.00	0.00	3,774.28
INVENTORY							
4832456	10/29/20	10/24/20	11/03/20	105.77	0.00	0.00	105.77
INVENTORY							
4843240	10/29/20	10/28/20	11/07/20	12.99	0.00	0.00	12.99
INVENTORY							
4843863	10/29/20	10/28/20	11/07/20	68.21	0.00	0.00	68.21
INVENTORY							
4843236	10/29/20	10/28/20	11/07/20	57.24	0.00	0.00	57.24
INVENTORY							
4843239	10/29/20	10/28/20	11/07/20	1,181.25	0.00	0.00	1,181.25
INVENTORY							
4843237	10/29/20	10/28/20	11/07/20	1,019.67	0.00	0.00	1,019.67
INVENTORY							
4842085	10/29/20	10/28/20	11/07/20	13.12	0.00	0.00	13.12
INVENTORY							
4843238	10/29/20	10/28/20	11/07/20	1,188.85	0.00	0.00	1,188.85
INVENTORY							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	26,902.17	0.00	0.00	26,902.17

Vendor#	Vendor Name	Class	Pay Code
A2252	NADINE GARNER	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
102419		10/29/20	10/24/20	10/24/20			29.46	0.00	0.00	29.46
	TRAVEL TO GIVE FLU SHOTS @ Seadrift Coke									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A2252	NADINE GARNER	29.46	0.00	0.00	29.46

Vendor#	Vendor Name				Class	Pay Code				
O1500	OLYMPUS AMERICA INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	98280141		10/30/20	10/15/20	11/09/20		236.74	0.00	0.00	236.74
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		O1500	OLYMPUS AMERICA INC				236.74	0.00	0.00	236.74
Vendor#	Vendor Name				Class	Pay Code				
O1416	ORTHO CLINICAL DIAGNOSTICS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	1851177011		10/22/20	10/09/20	11/08/20		1,530.83	0.00	0.00	1,530.83
		SUPPLIES								
	1851184424		10/29/20	10/14/20	11/13/20		755.37	0.00	0.00	755.37
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		O1416	ORTHO CLINICAL DIAGNOSTICS				2,286.20	0.00	0.00	2,286.20
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
	102919		10/29/20	10/29/20	10/29/20		1,582.50	0.00	0.00	1,582.50
		CONTRACT EMPLOYEE (10/5-10/28/2019)								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11069	PABLO GARZA				1,582.50	0.00	0.00	1,582.50
Vendor#	Vendor Name				Class	Pay Code				
P1800	PITNEY BOWES INC				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	1014108435		10/21/20	10/10/20	11/09/20		187.50	0.00	0.00	187.50
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		P1800	PITNEY BOWES INC				187.50	0.00	0.00	187.50
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
	B51181		10/29/20	10/24/20	11/03/20		16.17	0.00	0.00	16.17
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		P2200	POWER HARDWARE				16.17	0.00	0.00	16.17
Vendor#	Vendor Name				Class	Pay Code				
10896	QIAGEN INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	997102349		10/22/20	10/08/20	11/07/20		1,693.49	0.00	0.00	1,693.49
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10896	QIAGEN INC				1,693.49	0.00	0.00	1,693.49
Vendor#	Vendor Name				Class	Pay Code				
11080	RADSOURCE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	SC59722		10/29/20	10/15/20	11/09/20		1,625.00	0.00	0.00	1,625.00
		RADIOLOGY SERVICES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11080	RADSOURCE				1,625.00	0.00	0.00	1,625.00

Vendor#	Vendor Name				Class	Pay Code				
10927	ROSHANDA THOMAS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	102519		10/29/20	10/25/20	10/25/20		70.47	0.00	0.00	70.47
		MMC ADVOCACY/TORCH AWARD Presentation to Senator Kaine Nurse Week 10/17/19								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10927	ROSHANDA THOMAS				70.47	0.00	0.00	70.47
Vendor#	Vendor Name				Class	Pay Code				
S0900	SAM'S CLUB DIRECT				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	007752		10/30/20	09/22/20	11/08/20		64.90	0.00	0.00	64.90
		SUPPLIES								
	008328		10/30/20	09/24/20	11/08/20		81.83	0.00	0.00	81.83
		SUPPLIES								
	001734		10/30/20	10/16/20	11/08/20		67.12	0.00	0.00	67.12
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S0900	SAM'S CLUB DIRECT				213.85	0.00	0.00	213.85
Vendor#	Vendor Name				Class	Pay Code				
S1800	SHERWIN WILLIAMS				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	12534		10/29/20	10/24/20	11/08/20		111.73	0.00	0.00	111.73
		SUPPLIES								
	14100		10/30/20	10/28/20	11/12/20		25.98	0.00	0.00	25.98
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S1800	SHERWIN WILLIAMS				137.71	0.00	0.00	137.71
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
	848998		10/29/20	10/22/20	10/22/20		8.00	0.00	0.00	8.00
		TRANSFER PT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S1850	SHIP SHUTTLE TAXI SERVICE				8.00	0.00	0.00	8.00
Vendor#	Vendor Name				Class	Pay Code				
K0536	SHIRLEY KARNEI									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	103019		10/29/20	10/30/20	10/30/20		393.14	0.00	0.00	393.14
		CONTRACT EMPLOYEE								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		K0536	SHIRLEY KARNEI				393.14	0.00	0.00	393.14
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
	923573839		10/23/20	10/14/20	10/30/20		446.75	0.00	0.00	446.75
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S2362	SMITH & NEPHEW				446.75	0.00	0.00	446.75
Vendor#	Vendor Name				Class	Pay Code				
S3940	STERIS CORPORATION				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8388582		10/29/20	10/08/20	11/02/20		268.38	0.00	0.00	268.38

REPAIR STERLIZER

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S3940	STERIS CORPORATION	268.38	0.00	0.00	268.38

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
900498291	SUPPLIES	10/29/20	10/16/20	10/21/20			1,460.72	0.00	0.00	1,460.72
900496691	SUPPLIES	10/29/20	10/16/20	10/29/20			730.36	0.00	0.00	730.36
900502856	SUPPLIES	10/29/20	10/17/20	10/29/20			47.40	0.00	0.00	47.40

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2830	STRYKER SALES CORP	2,238.48	0.00	0.00	2,238.48

Vendor#	Vendor Name	Class	Pay Code
10735	STRYKER SUSTAINABILITY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
3732740		10/28/20	08/28/20	09/27/20			409.92	0.00	0.00	409.92

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10735	STRYKER SUSTAINABILITY	409.92	0.00	0.00	409.92

Vendor#	Vendor Name	Class	Pay Code
12440	SUN LIFE ASSURANCE COMPANY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
101819	INSURANCE - vision	10/30/20	10/18/20	10/18/20			2,263.19	0.00	0.00	2,263.19

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12440	SUN LIFE ASSURANCE COMPANY	2,263.19	0.00	0.00	2,263.19

Vendor#	Vendor Name	Class	Pay Code
12476	SUN LIFE FINANCIAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
102319	INSURANCE - life	10/30/20	10/23/20	10/23/20			11,978.65	0.00	0.00	11,978.65

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12476	SUN LIFE FINANCIAL	11,978.65	0.00	0.00	11,978.65

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
1000917195	EMPLOYEE VERIFICATIONS	10/16/20	10/08/20	11/07/20			91.99	0.00	0.00	91.99

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11944	TALX CORPORATION	91.99	0.00	0.00	91.99

Vendor#	Vendor Name	Class	Pay Code
11140	TEXAS ADVANTAGE COMMUNITY BANK		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
101519	LOAN PAYMENT	10/29/20	10/15/20	10/31/20			3,690.52	0.00	0.00	3,690.52

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11140	TEXAS ADVANTAGE COMMUNITY BANK	3,690.52	0.00	0.00	3,690.52

Vendor#	Vendor Name	Class	Pay Code
11038	THE INLINE GROUP		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
39443		10/29/20	10/19/20	11/03/20		2,500.00	0.00	0.00	2,500.00
	CANIDATE SOURCING SERVIC								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11038	THE INLINE GROUP				2,500.00	0.00	0.00	2,500.00

Vendor#	Vendor Name	Class	Pay Code
11169	TXU ENERGY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
055477329709		10/29/20	10/21/20	11/11/20		32,738.62	0.00	0.00	32,738.62
	ELECTRICITY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11169	TXU ENERGY				32,738.62	0.00	0.00	32,738.62

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
8400313589		10/21/20	10/14/20	11/08/20		1,516.94	0.00	0.00	1,516.94
	SUPPLIES								
8400313557		10/21/20	10/14/20	11/08/20		47.15	0.00	0.00	47.15
	SUPPLIES								
8400313558		10/21/20	10/14/20	11/08/20		65.71	0.00	0.00	65.71
	LAUNDRY								
8400313897		10/21/20	10/17/20	11/11/20		120.39	0.00	0.00	120.39
	LAUNDRY								
8400313899		10/21/20	10/17/20	11/11/20		216.53	0.00	0.00	216.53
	LAUNDRY								
8400313898		10/21/20	10/17/20	11/11/20		200.56	0.00	0.00	200.56
	LAUNDRY								
8400313934		10/21/20	10/17/20	11/11/20		1,226.07	0.00	0.00	1,226.07
	LAUNDRY								
8400313920		10/21/20	10/17/20	11/11/20		97.69	0.00	0.00	97.69
	LAUNDRY								
8400313894		10/21/20	10/17/20	11/11/20		18.62	0.00	0.00	18.62
	LAUNDRY								
8400313900		10/21/20	10/17/20	11/11/20		175.83	0.00	0.00	175.83
	LAUNDRY								
8400313960		10/21/20	10/17/20	11/11/20		145.38	0.00	0.00	145.38
	LAUNDRY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC				3,830.87	0.00	0.00	3,830.87

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
10186108		10/29/20	10/11/20	10/26/20		49.97	0.00	0.00	49.97
	UNIFORM IRENE VENECIA								
10206673		10/29/20	10/17/20	11/01/20		185.83	0.00	0.00	185.83
	UNIFORM PATRICIA BRISENIC								
10221541		10/29/20	10/22/20	11/06/20		96.97	0.00	0.00	96.97
	UNIFORM VILMA PINA								
10221027		10/29/20	10/22/20	11/06/20		172.86	0.00	0.00	172.86
	UNIFORM DAWN MCCLELLAN								
10221557		10/29/20	10/22/20	11/06/20		185.92	0.00	0.00	185.92
	UNIFORM BRITTANY NAVARR								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1056	UNIFORM ADVANTAGE	691.55	0.00	0.00	691.55

Vendor#	Vendor Name	Class	Pay Code
U1350	UPS	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
0000778941429	SHIPPING	10/29/20	10/19/20	10/19/20			216.57	0.00	0.00	216.57

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1350	UPS	216.57	0.00	0.00	216.57

Vendor#	Vendor Name	Class	Pay Code
12208	WAGEWORKS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
INV1697212	ADMIN FEE AND COMPLIANCE	10/29/20	10/15/20	10/15/20			543.50	0.00	0.00	543.50

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12208	WAGEWORKS	543.50	0.00	0.00	543.50

Vendor#	Vendor Name	Class	Pay Code
W1005	WALMART COMMUNITY	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
006962	SUPPLIES (3) Vizio 32" TV & Mounts For Hospital Clinic	10/29/20	09/18/20	11/11/20			500.88	0.00	0.00	500.88
006961	SUPPLIES	10/29/20	09/18/20	11/11/20			5.96	0.00	0.00	5.96
007656	SUPPLIES	10/29/20	09/23/20	11/11/20			14.34	0.00	0.00	14.34
006379	SUPPLIES	10/29/20	10/01/20	11/11/20			29.48	0.00	0.00	29.48
002009	SUPPLIES	10/29/20	10/01/20	11/11/20			19.78	0.00	0.00	19.78
005994	SUPPLIES	10/30/20	09/17/20	11/11/20			7.94	0.00	0.00	7.94
006960	SUPPLIES	10/30/20	09/18/20	11/11/20			3.88	0.00	0.00	3.88

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	W1005	WALMART COMMUNITY	582.26	0.00	0.00	582.26

Vendor#	Vendor Name	Class	Pay Code
I1110	WERFEN USA LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9110720236	SUPPLIES	10/29/20	09/10/20	10/05/20			136.76	0.00	0.00	136.76
9110720542	SUPPLIES	10/29/20	09/10/20	10/05/20			2,184.71	0.00	0.00	2,184.71
9110730115	SUPPLIES	10/29/20	10/02/20	10/27/20			891.40	0.00	0.00	891.40

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	3,212.87	0.00	0.00	3,212.87

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
INV002151644	HOUSE CALLS	10/29/20	09/30/20	09/30/20			537.98	0.00	0.00	537.98

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11166	WEST INTERACTIVE SERVICES CORP	537.98	0.00	0.00	537.98

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	387,568.46	0.00	0.00	387,568.46

pg 2 correction { <6,299.087
+ 6,058.77

$387,328.15

387,568.46 +
6,299.08 −
6,058.77 +
387,328.15 =

CK # 183009 - 183080

APPROVED ON
NOV 01 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

11/01/2019
08:41

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

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
103119		11/01/20	10/31/20	10/31/20			2,196.00	0.00	0.00	2,196.00
	CONTRACT EMPLOYEE (10/11-10/24/19)									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10958	ALLYSON SWOPE	2,196.00	0.00	0.00	2,196.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,196.00	0.00	0.00	2,196.00

CK#
183010

RUN DATE: 10/31/19
TIME: 09:42

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
[redacted]		102919	71.75	2		[redacted]	
		012519	30.00	2			
		102919	763.10	1			
		102919	187.75	2			
		102919	21.30	2			
		102919	273.53	2			
		102919	10.00	3			
		102919	146.08	2			
		102919	21.00	5			
		102919	101.56	2			
		102919	50.00	2			
		102919	431.43	2			
		102919	25.00	2			
		102919	42.60	3			
		102919	19.17	2			
		102919	35.04	2			
		102919	146.12	2			
		102919	14.00	5			
		102919	87.66	3			
		102919	478.25	3			
		102919	46.02	2			
		102919	140.35	2			
		102919	74.36	2			

ARID=0001 TOTAL 3216.07

TOTAL 3216.07

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ON
NOV 0 1 2019

CK# 183081 - 183103

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

11/01/2019
12:58

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

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ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
C1010	SPARKLIGHT	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
092019	PHONES	10/31/20	09/20/20	09/20/20			73.42	0.00	0.00	73.42

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1010	SPARKLIGHT	73.42	0.00	0.00	73.42

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	73.42	0.00	0.00	73.42

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ON
NOV 0 1 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK # 183064

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RUN DATE:11/04/19 MEMORIAL MEDICAL CENTER PAGE 1
TIME:08:53 CHECK REGISTER GLCKREG
11/06/19 THRU 11/06/19

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	183009	11/06/19	259.08	AIRGAS USA, LLC - CENTRAL DIV
A/P	183010	11/06/19	2,196.00	ALLYSON SWOPE
A/P	183011	11/06/19	128.40	BAXTER HEALTHCARE
A/P	183012	11/06/19	1,727.40	BAYER HEALTHCARE
A/P	183013	11/06/19	6,305.03	BECKMAN COULTER INC
A/P	183014	11/06/19	8.87	CAITLIN CLEVENGER
A/P	183015	11/06/19	304.12	CARDINAL HEALTH 414, INC.
A/P	183016	11/06/19	500.00	CHEMAQUA
A/P	183017	11/06/19	6,058.77	CITY OF PORT LAVACA
A/P	183018	11/06/19	249.00	COLA RESOURCES, INC.
A/P	183019	11/06/19	4,424.00	COMMAND ELECTRIC LLC
A/P	183020	11/06/19	37.60	CONMED LINVATEC
A/P	183021	11/06/19	566.26	CUSTOMIZED COMMUNICATION INC
A/P	183022	11/06/19	233.03	CYTO THERM L.P.
A/P	183023	11/06/19	5,425.00	DASHBOARD MD
A/P	183024	11/06/19	342.60	DEWITT POTH & SON
A/P	183025	11/06/19	144,185.93	DISCOVERY MEDICAL NETWORK INC
A/P	183026	11/06/19	354.14	DYNASTHETICS
A/P	183027	11/06/19	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	183028	11/06/19	2,363.83	ERBE USA INC SURGICAL SYSTEMS
A/P	183029	11/06/19	38.51	FEDERAL EXPRESS CORP.
A/P	183030	11/06/19	8,437.96	FISHER HEALTHCARE
A/P	183031	11/06/19	4,337.49	FISHER HEALTHCARE
A/P	183032	11/06/19	1,141.93	FUSION CLOUD SERVICES, LLC
A/P	183033	11/06/19	171.00	GETINGE USA SALES LLC
A/P	183034	11/06/19	178.05	GRAINGER
A/P	183035	11/06/19	1,416.56	GULF COAST PAPER COMPANY
A/P	183036	11/06/19	70.75	HEALTH CARE LOGISTICS INC
A/P	183037	11/06/19	43,500.00	HITACHI HEALTHCARE
A/P	183038	11/06/19	148.00	INRAD
A/P	183039	11/06/19	646.41	J & J HEALTH CARE SYSTEMS, INC
A/P	183040	11/06/19	400.67	MCKESSON MEDICAL SURGICAL INC
A/P	183041	11/06/19	.00	VOIDED
A/P	183042	11/06/19	.00	VOIDED
A/P	183043	11/06/19	.00	VOIDED
A/P	183044	11/06/19	9,023.26	MEDLINE INDUSTRIES INC
A/P	183045	11/06/19	7.25	MELISSA MCKISSACK
A/P	183046	11/06/19	2,118.25	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	183047	11/06/19	532.00	MMC EMPLOYEE BENEFIT PLAN
A/P	183048	11/06/19	.00	VOIDED
A/P	183049	11/06/19	26,902.17	MORRIS & DICKSON CO, LLC
A/P	183050	11/06/19	29.46	NADINE GARNER
A/P	183051	11/06/19	236.74	OLYMPUS AMERICA INC
A/P	183052	11/06/19	2,286.20	ORTHO CLINICAL DIAGNOSTICS
A/P	183053	11/06/19	1,582.50	PABLO GARZA
A/P	183054	11/06/19	187.50	PITNEY BOWES INC
A/P	183055	11/06/19	16.17	POWER HARDWARE
A/P	183056	11/06/19	1,693.49	QIAGEN INC
A/P	183057	11/06/19	1,625.00	RADSOURCE
A/P	183058	11/06/19	70.47	ROSHANDA THOMAS

BANK	CODE	NUMBER	DATE	AMOUNT	PAYEE
	A/P	183059	11/06/19	213.85	SAM'S CLUB DIRECT
	A/P	183060	11/06/19	137.71	SHERWIN WILLIAMS
	A/P	183061	11/06/19	8.00	SHIP SHUTTLE TAXI SERVICE
	A/P	183062	11/06/19	393.14	SHIRLEY KARNEI
	A/P	183063	11/06/19	446.75	SMITH & NEPHEW
	A/P	183064	11/06/19	73.42	SPARKLIGHT
	A/P	183065	11/06/19	268.38	STERIS CORPORATION
	A/P	183066	11/06/19	2,238.48	STRYKER SALES CORP
	A/P	183067	11/06/19	409.92	STRYKER SUSTAINABILITY
	A/P	183068	11/06/19	2,263.19	SUN LIFE ASSURANCE COMPANY
	A/P	183069	11/06/19	11,978.65	SUN LIFE FINANCIAL
	A/P	183070	11/06/19	91.99	TALX CORPORATION
	A/P	183071	11/06/19	3,690.52	TEXAS ADVANTAGE COMMUNITY BANK
	A/P	183072	11/06/19	2,500.00	THE INLINE GROUP
	A/P	183073	11/06/19	32,738.62	TXU ENERGY
	A/P	183074	11/06/19	3,830.87	UNIFIRST HOLDINGS INC
	A/P	183075	11/06/19	691.55	UNIFORM ADVANTAGE
	A/P	183076	11/06/19	216.57	UPS
	A/P	183077	11/06/19	543.50	WAGEWORKS
	A/P	183078	11/06/19	582.26	WALMART COMMUNITY
	A/P	183079	11/06/19	3,212.87	WERFEN USA LLC
	A/P	183080	11/06/19	537.98	WEST INTERACTIVE SERVICES CORP
	A/P	183081	11/06/19	187.75	ACCENT
	A/P	183082	11/06/19	273.53	ACCENT
	A/P	183083	11/06/19	146.08	AETNA INC
	A/P	183084	11/06/19	42.60	AMERICAN FAMILY LIFE
	A/P	183085	11/06/19	21.00	ANDRADE MARY JANE
	A/P	183086	11/06/19	50.00	BAIN JACK ADAIR
	A/P	183087	11/06/19	431.43	BOTBYL KAREN ANN
	A/P	183088	11/06/19	71.75	BROWNING REMEDIOS C
	A/P	183089	11/06/19	763.10	BROWNING REMEDIOS C
	A/P	183090	11/06/19	30.00	COOMBES WALTER
	A/P	183091	11/06/19	140.35	DUMAS EMMA JEAN
	A/P	183092	11/06/19	21.30	GAINES CANDICE
	A/P	183093	11/06/19	146.12	HERRINGTON MARY
	A/P	183094	11/06/19	87.66	HILEMAN VIDA
	A/P	183095	11/06/19	478.25	KEATING AUTO GROUP EBPT
	A/P	183096	11/06/19	19.17	KOLIBA MARY JO
	A/P	183097	11/06/19	35.04	MEITZEN JOHN E
	A/P	183098	11/06/19	14.00	NUNEZ WHITNEY JAMES
	A/P	183099	11/06/19	46.02	PRESLEY KATHRYN
	A/P	183100	11/06/19	25.00	RALSTON IDA MAE
	A/P	183101	11/06/19	10.00	REECE JENNIFER
	A/P	183102	11/06/19	74.36	SCHULTZ JAMES A
	A/P	183103	11/06/19	101.56	STELLMAN RICHARD
TOTALS:				392,813.64	

Payables 387,328.15 +
Pat. refunds 3,216.07 +
Swipe 2,196.00 +
Sparklight 73.42 +
392,813.64 *

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 11/01/2019 Page: 002

DC: 8115

Territory:

Customer: 632536
Date: 11/02/2019

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

As of: 11/01/2019 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 11/02/2019 ITEMS NOT PAID (✓)

National Account 632536

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 3,643.81 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 11/05/2019,
Pay This Amount: 3,570.93 USD

If Paid After 11/05/2019,
Pay this Amount: 3,643.81 USD

Due If Paid On Time:
USD 3,570.93

Disc lost if paid late: 72.88

Due If Paid Late:
USD 3,643.81

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Ck# 500043

1,697.92 +
22.66 +
1,850.35 +
3,570.93 *

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company: 8000

As of: 11/01/2019

Page: 001

DC: 8115

Territory: 400

Customer: 256342
Date: 11/02/2019

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

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

As of: 11/01/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 **PLEASE CHECK ANY**
Date: 11/02/2019 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS											
10/28/2019	11/05/2019	7164034792	2067097293	115Invoice	8.00	400.16		392.16 ✓		7164034792	
10/28/2019	11/05/2019	7164260875	000010252019AS	115Invoice	0.59	29.37		28.78 ✓		7164260875	
10/29/2019	11/05/2019	7164318331	7767112235	115Invoice	5.32	266.19		260.87 ✓		7164318331	
10/29/2019	11/05/2019	7164445698	769484720	195Invoice	1.72	85.86		84.14 ✓		7164445698	
10/30/2019	11/05/2019	7164570623	7767117343	115Invoice	7.52	376.01		368.49 ✓		7164570623	
10/30/2019	11/05/2019	7164692653	769743797	195Invoice	0.05	2.29		2.24 ✓		7164692653	
10/30/2019	11/05/2019	7164732324	000010292019AS	115Invoice	2.72	136.04		133.32 ✓		7164732324	
10/31/2019	11/05/2019	7164803318	9121922125	115Invoice	2.51	125.50		122.99 ✓		7164803318	
11/01/2019	11/05/2019	7165028075	9121925995	115Invoice	9.32	466.06		456.74 ✓		7165028075	
11/01/2019	11/05/2019	7165146660	770295811	195Invoice	0.01	0.32		0.31 ✓		7165146660	
11/01/2019	11/05/2019	7165190749	000103119TM	115Invoice	0.01	0.32		0.31 ✓		7165190749	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 1,888.12 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,600.38
10/28/2019

If Paid By 11/05/2019, Pay This Amount: 1,850.35 USD

If Paid After 11/05/2019, Pay this Amount: 1,888.12 USD

Due If Paid On Time: USD 1,850.35 ✓

Disc lost if paid late: 37.77

Due If Paid Late: USD 1,888.12

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ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company: 8000

CVS PHCY 7006/MEMORIA PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 11/01/2019 Page: 001

DC: 8115

Territory: 400

Customer: 262252
Date: 11/02/2019

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

As of: 11/01/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252 **PLEASE CHECK ANY**
Date: 11/02/2019 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 262252 CVS PHCY 7006/MEMORIA PHS											
10/31/2019	11/05/2019	7164802024	589020	115Invoice		0.16		0.16 ✓		7164802024	
10/31/2019	11/05/2019	7164802025	589020	115Invoice	0.46	22.96		22.50 ✓		7164802025	

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: 23.12 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,600.38
10/28/2019

If Paid By 11/05/2019,
Pay This Amount: 22.66 USD

If Paid After 11/05/2019,
Pay this Amount: 23.12 USD

Due If Paid On Time:
USD 22.66 ✓

Disc lost if paid late: 0.46

Due If Paid Late:
USD 23.12

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ON

NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company: 8000

CVS PHCY 7475/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

As of: 11/01/2019

Page: 001

DC: 8115

Territory: 400

Customer: 835438
Date: 11/02/2019

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

As of: 11/01/2019 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 **PLEASE CHECK ANY**
Date: 11/02/2019 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835438 CVS PHCY 7475/MEM MC PHS											
10/31/2019	11/05/2019	7164951075	589344	115Invoice	34.65	1,732.57		1,697.92		7164951075	

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

TOTAL: Customer Number 835438 CVS PHCY 7475/MEM MC PHS

Subtotals: 1,732.57 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,600.38
10/28/2019

If Paid By 11/05/2019, Pay This Amount: 1,697.92 USD

If Paid After 11/05/2019, Pay this Amount: 1,732.57 USD

Due If Paid On Time: USD 1,697.92
Disc lost if paid late: 34.65

Due If Paid Late: USD 1,732.57

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AmerisourceBergen

STATEMENT

Number: 58535028 Date: 11-01-2019

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

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

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

Summary

Not Yet Due:	0.00
Current:	1,011.99
Past Due:	0.00
Total Due:	1,011.99
Account Balance:	1,011.99

Account Activity

Activity Date	Due Date	Reference Number	Purchase Order Number	Activity Type	Amount
10-28-2019	11-08-2019	3029281145	151801	Invoice	431.40
10-29-2019	11-08-2019	3029377107	151856	Invoice	574.03
10-30-2019	11-08-2019	3029439357	151892	Invoice	6.56

Thank You for Your Payment

Date	Payment Number	Amount
11-01-2019		(479.77)

Reminders

Due Date	Amount
11-08-2019	1,011.99
Total Due:	1,011.99

Terms:
Monday - Friday due in 7 days

Ck# 500044

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ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --October 28, 2019 - November 3, 2019

Date	Bank Description	MMC Notes	Amount	CPSI "Handwritten Check" #
10/28/2019	PAY PLUS ACHTRANS 452579291 101000699411964	- 3rd Party Payor Fee	0.41	300173
10/29/2019	PAY PLUS ACHTRANS 452579291 101000690215419	- 3rd Party Payor Fee	1.84	300174
10/29/2019	MCKESSON DRUG AUTO ACH ACH03968679 910000127	- 340B Drug Program Expense	6,600.38 *	500041
10/30/2019	PAY PLUS ACHTRANS 452579291 101000691056755	- 3rd Party Payor Fee	0.82	300175
10/30/2019	FX ACH EFF Date:10/18/2019MEMORIAL MEDICAL	- Payroll (was not processed through bank on 18th)	302,616.66 ***	
10/31/2019	Wire Transfer Dep WIRE IN	-Accidental wire in for Citibank card payment	(2,643.90) **	300171
11/1/2019	ACH Payment PAY PLUS ACHTRANS 452579291 101000692679675	- 3rd Party Payor Fee	128.60	300175
11/1/2019	ACH Payment AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	479.77 *	500042
11/1/2019	ACH Payment MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	302,290.44 *	
11/1/2019	CM Wire Domestic WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	-CitiBank Corporate Card Payment	2,643.90 **	300171
			612,118.92	

JCM CFO

Diane Moore, CFO
Memorial Medical Center

November 4, 2019

* Approved 10.30.19 cc
** Originally approved 10.23.19 - was kicked back by bank then resent out.
*** Approved 10.16.19 cc

PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

Date	Description	MMC Notes	Amount
			-

JCM CFO

Diane Moore, CFO
Memorial Medical Center

November 4, 2019

Pay plus
0.41 +
1.84 +
0.82 +
128.60 +
131.67 *

612,118.92 +
6,600.38 –
302,616.66 –
2,643.90 +
479.77 –
302,290.44 –
2,643.90 –
131.67 *

131.67 +
131.67 –
0.00 *

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
11/4/2019

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		197,137.45 ✓	197,037.45 ✓	135,643.66 ✓		-	135,743.66	92,641.52
						Bank Balance	135,743.66 ✓	
						Variance	-	
						Leave in Balance	100.00	
						QIPP Yr 1 Adjustment	**122.65** ✓	
						MMC Portion QIPP 1		
						MMC Portion QIPP 2,3,Lapse	**31,109.10** ✓	
						October Interest	**42.40** ✓	
						November Interest		
						December Interest		
						Reclaim Misidentified Deposit	**11,728.00** ✓	
						Adjust Balance/Transfer Amt	**92,641.52** ✓	
Broadmoor		225,039.78 ✓	224,939.78 ✓	88,258.54 ✓		-	88,358.54	**83,432.86**
						Bank Balance	88,358.54 ✓	
						Variance	-	
						Leave in Balance	100.00	
						QIPP Yr 1 Adjustment	**17.53** ✓	
						MMC Portion QIPP 1		
						MMC Portion QIPP 2,3,Lapse	**4,759.84** ✓	
						October Interest	**48.32**	
						November Interest		
						December Interest		
						Adjust Balance/Transfer Amt	**83,432.86** ✓	
Crescent		293,765.94 ✓	293,665.94 ✓	114,239.81 ✓		-	114,339.81	**110,672.78**
						Bank Balance	114,339.81 ✓	
						Variance	-	
						Leave in Balance	100.00	
						QIPP Yr 1 Adjustment	**17.53** ✓	
						MMC Portion QIPP 1		
						MMC Portion QIPP 2,3,Lapse	**3,497.54** ✓	
						October Interest	**51.97** ✓	
						November Interest		
						December Interest		
						Adjust Balance/Transfer Amt	**110,672.78** ✓	
Fort Bend		116,316.49 ✓	116,216.49 ✓	117,124.66 ✓		-	117,224.66	**107,112.66**
						Bank Balance	117,224.66 ✓	
						Variance	-	
						Leave in Balance	100.00	
						QIPP Yr 1 Adjustment	**35.04** ✓	
						MMC Portion QIPP 1		
						MMC Portion QIPP 2,3,Lapse	**9,954.44** ✓	
						October Interest	**22.52** ✓	
						November Interest		
						December Interest		
						Adjust Balance/Transfer Amt	**107,112.66** ✓	
Solera at W Houston		329,719.51 ✓	329,619.51 ✓	108,577.72 ✓		-	108,677.72	**99,523.81**
						Bank Balance	108,677.72 ✓	
						Variance	-	
						Leave in Balance	100.00	
						QIPP Yr 1 Adjustment	**17.53** ✓	
						Humana Recoup taken from MMC		
						MMC Portion QIPP 1		
						MMC Portion QIPP 2,3,Lapse	**8,977.00** ✓	
						October Interest	**59.39** ✓	
						November Interest		
						December Interest		
						Adjust Balance/Transfer Amt	**99,523.81** ✓	
						TOTAL TRANSFERS		**493,383.63**

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

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

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 Moore, CFO 11/4/2019

92,641.52 +
83,432.86 +
110,672.78 +
107,112.66 +
99,523.81 +
493,383.63 *

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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Ashford Gardens

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2,3,Lapse	Yr 1 Adjustment	QIPP TI	NH PORTION
10/28/2019	NOVITAS SOLUTION HCCLAIMPMT 675423 420000153 TRN*1*EFT6887000*1205	-	7,183.01				-	7,183.01
10/29/2019	Amerigroup TX5C HCCLAIMPMT 3111442737 111000 TRN*1*3111442737*17526	-	23.38				-	23.38
10/29/2019	AMERIGROUP CORPO E-PAYMENT EE51932822 111000 ISA*00* *00* *	-	62,463.49		62,218.20	245.29	31,231.75	31,231.75
10/29/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191026112001	-	1,608.88				-	1,608.88
10/29/2019	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*2019102614900533	-	6,190.50				-	6,190.50
10/29/2019	AARP Supplementa HCCLAIMPMT 746003411 124384 TRN*1*1479551350*13627	-	16.00				-	16.00
10/30/2019	WIRE OUT ASHFORD HEALTH CARE CENTER LTD	197,037.45 ✓	-				-	-
10/30/2019	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1480082985*141128	-	715.00				-	715.00
10/30/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191027170004	-	118.40				-	118.40
10/31/2019	Accr Earning Pymt Added to Account	-	42.40				-	-
10/31/2019	ACH Deposit MANAGEANDNET1718 MNS PMNT 000000000000093 41	-	5,921.45				-	5,921.45
10/31/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,782.20				-	1,782.20
11/1/2019	Deposit	-	48,474.73				-	48,474.73
11/1/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,104.22				-	1,104.22
							-	-
		197,037.45 ✓	135,643.66 ✓	-	62,218.20	245.29	- 31,231.75	104,369.52

Broadmoor

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2,3,Lapse	Yr 1 Adjustment	QIPP TI	NH PORTION
10/28/2019	UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384 TRN*1*1TR45031635*14	-	1,705.00				-	1,705.00
10/28/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191025157000	-	1,966.82				-	1,966.82
10/28/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191025139001	-	535.45				-	535.45
10/28/2019	NOVITAS SOLUTION HCCLAIMPMT 676357 420000153 TRN*1*EFT5358441*1205	-	8,075.32				-	8,075.32
10/29/2019	AMERIGROUP CORPO E-PAYMENT EE51932825 111000 ISA*00* *00* *	-	9,554.73		9,519.68	35.05	4,777.37	4,777.37
10/29/2019	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1479720760*141128	-	468.00				-	468.00
10/29/2019	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*2019102614901059	-	4,150.00				-	4,150.00
10/30/2019	WIRE OUT CANTEX HEALTH CARE CENTERS III	224,939.78 ✓	-				-	-
10/30/2019		-	73.94				-	73.94
10/30/2019	NOVITAS SOLUTION HCCLAIMPMT 676357 420000139 TRN*1*EFT5361505*1205	-	220.28				-	220.28
10/31/2019	Accr Earning Pymt Added to Account	-	48.32				-	-
10/31/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	-	9,668.00				-	9,668.00
10/31/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	4,232.26				-	4,232.26
10/31/2019	ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676357 420000165	-	12,825.14				-	12,825.14
11/1/2019	Deposit	-	7,428.61				-	7,428.61
11/1/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	-	7,343.00				-	7,343.00
11/1/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,882.20				-	1,882.20
11/1/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	18,081.47				-	18,081.47
		224,939.78 ✓	88,258.54 ✓	-	9,519.68	35.05	- 4,777.37	83,432.86

Crescent

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2,3,Lapse	Yr 1 Adjustment	QIPP TI	NH PORTION
10/28/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191025157000	-	2,676.32				-	2,676.32
10/28/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191025147001	-	27,467.82				-	27,467.82
10/28/2019	NOVITAS SOLUTION HCCLAIMPMT 676323 420000153 TRN*1*EFT5358434*1205	-	5,178.75				-	5,178.75
10/28/2019	HUMANA CHA DISB HCCLAIMPMT 390864 4200001296 TRN*1*01484010079803	-	6,291.79				-	6,291.79
10/29/2019	AMERIGROUP CORPO E-PAYMENT EE51932824 111000 ISA*00* *00* *	-	7,030.12		6,995.07	35.05	3,515.06	3,515.06
10/29/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191026166000	-	2,120.99				-	2,120.99
10/30/2019	WIRE OUT CANTEX HEALTH CARE CENTERS III	293,665.94 ✓	-				-	-
10/30/2019	HHP EFPAYMENT 390864 91000012741642 DISDATA- TRN*1*0012700178392567	-	5,710.33				-	5,710.33
10/30/2019	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1480088692*141128	-	9,250.00				-	9,250.00
10/30/2019	HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2 TRN*1*0SD67984166986	-	3,334.45				-	3,334.45
10/31/2019	Accr Earning Pymt Added to Account	-	51.97				-	-
10/31/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	-	8,880.00				-	8,880.00
10/31/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,005.34				-	2,005.34
10/31/2019	ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000165	-	105.61				-	105.61
11/1/2019	Deposit	-	5,474.89				-	5,474.89
11/1/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	6,164.06				-	6,164.06
11/1/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	17,659.05				-	17,659.05
11/1/2019	ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 676323 420000144	-	4,838.32				-	4,838.32
		293,665.94 ✓	114,239.81 ✓	-	6,995.07	35.05	- 3,515.06	110,672.78

Fort Bend

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2,3,Lapse	Yr 1 Adjustment	QIPP TI	NH PORTION
10/28/2019	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1479221357*141128	-	9,450.00				-	9,450.00
10/28/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191025104002	-	13,495.36				-	13,495.36
10/28/2019	NOVITAS SOLUTION HCCLAIMPMT 675663 420000153 TRN*1*EFT5357996*1205	-	12,829.28				-	12,829.28
10/29/2019	AMERIGROUP CORPO E-PAYMENT EE51932821 111000 ISA*00* *00* *	-	19,978.96		19,908.88	70.08	9,989.48	9,989.48
10/29/2019	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1479722191*141128	-	7,877.00				-	7,877.00
10/29/2019	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*2019102614900765	-	1,037.50				-	1,037.50
10/29/2019	HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2 TRN*1*0SD67253173057	-	16,813.18				-	16,813.18
10/30/2019	WIRE OUT CANTEX HEALTH CARE CENTERS III	116,216.49 ✓	-				-	-
10/30/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191027132001	-	6,930.87				-	6,930.87
10/30/2019	NOVITAS SOLUTION HCCLAIMPMT 675663 420000139 TRN*1*EFT5360945*1205	-	366.98				-	366.98
10/31/2019	Accr Earning Pymt Added to Account	-	22.52				-	-
10/31/2019	ACH Deposit UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	12,595.26				-	12,595.26
10/31/2019	ACH Deposit NOVITAS SOLUTION HCCLAIMPMT 675663 420000165	-	219.99				-	219.99
11/1/2019	Deposit	-	15,507.76				-	15,507.76
		116,216.49 ✓	117,124.66 ✓	-	19,908.88	70.08	- 9,989.48	107,112.66

Solera at West Houston		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2,3,Lapse	Yr 1 Adjustment		QIPP TI	NH PORTION
10/28/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191025157000	-	14,522.72					-	14,522.72
10/28/2019	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*20191025147000	-	17,310.05					-	17,310.05
10/29/2019	MANAGEANDNET1718 MNS PMNT 000000000002482 41 0246295	-	1,514.66					-	1,514.66
10/29/2019	AMERIGROUP CORPO E-PAYMENT EE51932823 111000 ISA*00* *00* *	-	17,989.04		17,953.99	35.05		8,994.52	8,994.52
10/30/2019	WIRE OUT CANTEX HEALTH CARE CENTERS III	326,850.07	-					-	-
10/31/2019	Accr Earning Pymt Added to Account	-	59.39					-	-
10/31/2019	Check #67	2,769.44	-					-	-
10/31/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	-	6,870.00					-	6,870.00
10/31/2019	ACH Deposit UHC Community Pl HCCLAIMPMT 746003411 910000	-	3,280.00					-	3,280.00
10/31/2019	ACH Deposit HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	-	1,445.36					-	1,445.36
11/1/2019	Deposit	-	13,986.50					-	13,986.50
11/1/2019	ACH Deposit MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	2,340.00					-	2,340.00
11/1/2019	ACH Deposit UnitedHealthcare HCCLAIMPMT 746003411 124384	-	29,260.00					-	29,260.00
		329,619.51	108,577.72	-	17,953.99	35.05	-	8,994.52	99,523.81
	TOTALS	1,161,479.17	563,844.39	-	116,595.82	420.52	-	58,508.17	505,111.62

Quick View

DDA

Data reported as of Nov 4, 2019 8:

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
[redacted] MEMORIAL MEDICAL CENTER - OPERATING	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	[redacted]	[redacted]	[redacted]	[redacted]
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	$135,743.66	$136,179.51	$135,743.66	$86,164.71
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	$88,358.54	$89,058.54	$88,358.54	$53,623.26
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	$114,339.81	$129,865.81	$114,339.81	$80,203.49
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	$108,677.72	$120,977.72	$108,677.72	$63,091.22
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	$117,224.66	$122,909.16	$117,224.66	$101,716.90
[redacted] MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] CAL CO INDIGENT HEALTHCARE	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MMC -NH GULF POINTE PLAZA - PRIVATE PAY	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	[redacted]	[redacted]	[redacted]	[redacted]

* indicates re

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Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
11/4/2019

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek	[redacted]	134,982.61 ✓	134,882.61 ✓	97,780.69 ✓	-	-	97,880.69 ✓	53,646.36
						Bank Balance	97,880.69 ✓	
						Variance	-	
						Leave in Balance	100.00	
						QIPP Yr 1 Adjustment	174.60 ✓	
						QIPP Comp 1	23,241.63 ✓	
						QIPP 2,3,Lapse	20,694.07 ✓	
						October Interest	24.04 ✓	
						November Interest		
						December Interest	-	
							-	
						Adjust Balance/Transfer Amt	53,646.36	

Routing Information for Golden Creek:
Nexion Health at Golden Creek
Wells Fargo Bank, N.A.
ABA [redacted]
Acco... [redacted]

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 Moore, CFO 11/4/2019

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2,3,Lapse	QIPP YR 1 Adjustment		QIPP TI	NH PORTION
10/28/2019	NOVITAS SOLUTION HCCLAIMPMT 676097 420000153 TRN*1*EFT5358034	-	8,310.62					-	8,310.62
10/30/2019	WIRE OUT NEXION HEALTH AT GOLDEN CREEK	134,882.61	-					-	-
10/30/2019	TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 543684555876917 GO	-	1,500.00					-	1,500.00
10/31/2019	Accr Earning Pymt Added to Account	-	24.04					-	-
11/1/2019	Deposit	-	22,967.07					-	22,967.07
11/1/2019	ACH Deposit Centene Manageme CCD+ 38888463 3110020810200	-	23,241.63	**23,241.63**				**23,241.63**	-
11/1/2019	ACH Deposit Centene Manageme CCD+ 38888463 3110020810144	-	41,737.33		**41,388.13**	**349.20**		**20,868.67**	20,868.67
		134,882.61	**97,780.69**	**23,241.63**	**41,388.13**	**349.20**	-	**44,110.30**	**53,646.36**

Quick View

DDA

Data reported as of Nov 4, 2019 8:

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
[redacted] MEMORIAL MEDICAL CENTER - OPERATING	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH ASHFORD	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH BROADMOOR	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH CRESCENT	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH FORT BEND	[redacted]	[redacted]	[redacted]	[redacted]
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$97,880.69	$97,880.69	$97,880.69	$9,934.66
[redacted] CAL CO INDIGENT HEALTHCARE	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MMC -NH GULF POINTE PLAZA - PRIVATE PAY	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	[redacted]	[redacted]	[redacted]	[redacted]

* indicates re

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Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
11/4/2019

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	2018 YTD Iterest Earned		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza- Private Pay		100.13	-	12,273.87		-		-	12,374.00	No Transfer
								Bank Balance	12,374.00	
								Variance	-	
								Leave in Balance	100.00	
								MMC Portion QIPP 1	12,273.83	
								MMC Portion QIPP 2,3,Lapse	-	
								October Interest	0.04	
								November Interest	-	
								December Interest	-	
								Adjust Balance/Transfer Amt	0.13	

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	2018 YTD Iterest Earned		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza-Medicare/Medicaid		34,365.96	134,265.96	34.72		-		-	134.72	No Transfer
								Bank Balance	134.72	
								Variance	-	
								Leave in Balance	100.00	
								MMC Portion QIPP 1	-	
								MMC Portion QIPP 2,3,Lapse	-	
								October Interest	34.72	
								November Interest	-	
								December Interest	-	
								Adjust Balance/Transfer Amt	-	

Routing Information for Gulf Pointe Plaza:	TOTAL TRANSFERS	No Transfer

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 Moore, CFO 11/4/2019

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
10/31/2019 Accr Earning Pymt Added to Account	-	0.04					-	-
11/1/2019 ACH Deposit Centene Managame CCD+ 38888463 3110020810226	-	12,273.83	12,273.83				12,273.83	-
	-	12,273.87	12,273.83	-	-	-	12,273.83	-

Gulf Pointe Plaza-Medicare/Medicaid	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Lapse	QIPP TI	NH PORTION
10/30/2019 WIRE OUT HMG SERVICES, LLC	134,265.96	-						-
10/31/2019 Accr Earning Pymt Added to Account	-	34.72						-
	134,265.96	34.72	-	-	-	-	-	-
	134,265.96	12,308.59	12,273.83	-	-	-	12,273.83	-

Quick View

DDA

Data reported as of Nov 4, 2019 8:

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
[redacted] MEMORIAL MEDICAL CENTER - OPERATING	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH ASHFORD	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH BROADMOOR	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH CRESCENT	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL CENTER / NH FORT BEND	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	[redacted]	[redacted]	[redacted]	[redacted]
[redacted] CAL CO INDIGENT HEALTHCARE	[redacted]	[redacted]	[redacted]	[redacted]
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$12,374.00	$12,374.00	$12,374.00	$100.17
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$134.72	$134.72	$134.72	$134.72

* indicates re

Page generated on 11/04/2019 at 8:

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO: Memorial Medical Center Operating

Date Requested: 11/4/19

APPROVED ON NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
000073

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

AMOUNT: $31,231.75

G/L NUMBER: 21000012

EXPLANATION: ASHFORD- To transfer funds for Comp 2,3,Lapse and Year 1 Adjustment- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: 11/4/19

APPROVED ON NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

AMOUNT: $11,728.00

G/L NUMBER: 000074

EXPLANATION: TO RECLAIM MISIDENTIFIED DEPOSIT NOT DUE TO ASHFORD

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
NHA	000073	11/07/19	31,231.75	MMC OPERATING
NHA	000074	11/07/19	11,728.00	MMC OPERATING
TOTALS:			42,959.75	

Ashford

APPROVED
ON

NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO: Memorial Medical Center Operating

Date Requested: 11/4/19

APPROVED ON NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK #000351

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

AMOUNT: $4,777.37

G/L NUMBER: 21000009

EXPLANATION: BROADMOOR- To transfer funds for Comp 2,3,Lapse and Year 1 Adjustment- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
NHB	000039	11/07/19	4,777.37	MMC OPERATING Bradmoor
TOTALS:			4,777.37	

APPROVED
ON

NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: Memorial Medical Center Operating

Date Requested: 11/4/19

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

APPROVED ON NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT: $3,515.07

G/L NUMBER: 21000010

EXPLANATION: CRESCENT- To transfer funds for Comp 2,3,Lapse and Year 1 Adjustment- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
NHC	000069	11/07/19	3,515.07	MMC OPERATING
TOTALS:			3,515.07	

Crescent

APPROVED
ON

NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: Memorial Medical Center Operating

Date Requested: 11/4/19

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

APPROVED ON NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT: $9,989.48

G/L NUMBER: 21000008

EXPLANATION: FORT BEND- To transfer funds for Comp 2,3,Lapse and Year 1 Adjustment- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

BANK--CHECK----------				
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHF	000066	11/07/19	9,989.48	MMC OPERATING Fort Bend
TOTALS:			9,989.48	

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO: Memorial Medical Center Operating

Date Requested: 11/4/19

APPROVED ON NOV 04 2019

COUNTY AUDITOR CALHOUN COUNTY, TEXAS

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

AMOUNT: $8,994.53

000049

G/L NUMBER: 21000011

EXPLANATION: SOLERA- To transfer funds for Comp 2,3,Lapse and Year 1 Adjustment- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: FO

BANK--CHECK----------				
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHS	000068	11/07/19	8,994.53	MMC OPERATING
TOTALS:			8,994.53	

Solera

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: 11/4/19

APPROVED ON NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
000046

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

AMOUNT: $44,110.30

G/L NUMBER: 21000013

EXPLANATION: GOLDEN CREEK- To transfer funds for Comp 1, Comp 2,3,Lapse and Year 1 Adjustment- QIPP payment.

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

BANK--CHECK----------				
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHG	000046	11/07/19	44,110.30	MMC OPERATING
TOTALS:			44,110.30	

golden creek

APPROVED
ON

NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center Operating

Date Requested: 11/4/19

APPROVED ON NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

AMOUNT: $12,273.83

000003

G/L NUMBER: 21000014

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

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

RUN DATE:11/07/19 MEMORIAL MEDICAL CENTER PAGE 1
TIME:10:58 CHECK REGISTER GLCKREG
11/07/19 THRU 11/07/19

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
GPP	000003	11/07/19	12,273.83	MMC OPERATING gulf pointe
TOTALS:			12,273.83	

APPROVED
ON

NOV 04 2019

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Sarah Henderson

From: Simms, Tracy M. <TSimms@cantexcc.com>
Sent: Monday, October 28, 2019 12:13 PM
To: Sarah Henderson; Caitlin Clevenger; Faren Gonzales
Cc: Diane C. Moore
Subject: RE: Attached Image

Withholding would be the easiest method for us.

Tracy Simms, Accounts Receivable Manager
Cantex Continuing Care Network, *Where we are Committed to Excellence*
2537 Golden Bear Drive
Carrollton, TX 75006
Tel: 214-954-4114, x115
Fax: 214-871-3057
tsimms@cantexcc.com

From: Sarah Henderson [mailto:shenderson@mmcportlavaca.com]
Sent: Monday, October 28, 2019 12:06 PM
To: Simms, Tracy M.; Caitlin Clevenger; Faren Gonzales
Cc: Diane C. Moore
Subject: RE: Attached Image

Hi Tracy,

Thank you for letting us know about this. We will find out who it should go to. Would ya'll prefer to cut a check to MMC or have the amount withheld from next week's wire transfer and we can cut the check out of the Ashford account on our end?

Thank you,

Sarah Henderson
Senior Accountant
Memorial Medical Center
815 N Virginia St.
Port Lavaca TX 77979
shenderson@mmcportlavaca.com
361-552-0342

From: Caitlin Clevenger
Sent: Monday, October 28, 2019 11:46 AM
To: Sarah Henderson <shenderson@mmcportlavaca.com>; Faren Gonzales <Fagonzales@mmcportlavaca.com>
Subject: FW: Attached Image

Respectfully,

Caitlin Clevenger
Memorial Medical Center
Accountant
815 N Virginia. St
Port Lavaca, TX 77979
Ph: 361.552.0272 Fax: 361.551.4504

From: Simms, Tracy M. [mailto:TSimms@cantexcc.com]
Sent: Monday, October 28, 2019 11:25 AM
To: Caitlin Clevenger <cclevenger@mmcportlavaca.com>
Cc: Miller, Sara <smiller@cantexcc.com>
Subject: FW: Attached Image

This payment does not belong to Ashford. They did have a patient with the same last name but I believe the payment is for another

Tracy Simms, Accounts Receivable Manager
Cantex Continuing Care Network, *Where we are Committed to Excellence*
2537 Golden Bear Drive
Carrollton, TX 75006
Tel: 214-954-4114, x115
Fax: 214-871-3057
tsimms@cantexcc.com

From: accountingcanon@cantex.local [mailto:accountingcanon@cantex.local]
Sent: Monday, October 28, 2019 10:58 AM
To: Simms, Tracy M.
Subject: Attached Image

QA HIPAA Disclaimer

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QIPP Payment to MMC from Nursing Facilities **Commissioner's Court** **11/6/2019**

NH Name	From Bank Acct #	Ck #	Payee	GL #	QIPP COMP 1	QIPP COMP 2,3, LAPSE	Yr 1 Adjustment Pmt		TOTAL		Date
Ashford	10000018 - Prosperity	73	MMC -Prosperity Operating #10000001	21000012		31,109.10	122.65		31,231.75		11/6/2019
Broadmoor	10000019 - Prosperity	39	MMC -Prosperity Operating #10000001	21000009		4,759.84	17.53		4,777.37		11/6/2019
Crescent	10000020 - Prosperity	69	MMC -Prosperity Operating #10000001	21000010		3,497.54	17.53		3,515.07		11/6/2019
Fort Bend	10000021 - Prosperity	66	MMC -Prosperity Operating #10000001	21000008		9,954.44	35.04		9,989.48		11/6/2019
Golden Creek	10000023 - Prosperity	44	MMC -Prosperity Operating #10000001	21000013	23,241.63	20,694.07	174.60		44,110.30		11/6/2019
Solera	10000022 - Prosperity	68	MMC -Prosperity Operating #10000001	21000011		8,977.00	17.53		8,994.53		11/6/2019
Gulf Pointe-PP		3	MMC -Prosperity Operating #10000001	21000014	12,273.83				12,273.83		11/6/2019
Gulf Pointe-MM		5	MMC -Prosperity Operating #10000001	21000014					-		
				Total:	23,241.63	78,991.99	384.88	-	~~102,618.50~~		

Note:

114,892.33 ✓

Approved:
Diane Moore, CFO 11/4/2019

APPROVED
ON
NOV 04 2019
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

87DV No 68

88-2265
1131

11-7-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 8,994.53

Eight Thousand Nine Hundred Ninety Four & 53/100 DOLLARS

PROSPERITY BANK

QIPP 2.3 Lapse & Yr 1 Adj.

County Auditor

County Treasurer

MEMORIAL MEDICAL CENTER
NH GULF POINTE PLAZA - PRIVATE PAY
815 N VIRGINIA ST
PORT LAVACA, TX 77979

87SS No 3

88-2265
1131

11-7-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 12,273.83

Twelve Thousand Two Hundred Seventy Three 83/100 DOLLARS

PROSPERITY BANK

QIPP comp 1

County Auditor

County Treasurer

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

87DV No. 74

88-2265
1131

11-7-19

PAY TO THE ORDER OF Memorial Medical Center Operating $ 11,728.00

Eleven Thousand Seven Hundred Twenty-Eight 0/100 DOLLARS

PROSPERITY BANK

To Correct Deposit made on 10.15.19

County Auditor

County Treasurer

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

87DV

No 1

88-2265
1131

11-7-19

PAY TO THE ORDER OF Memorial Medical Center Operating 31,231.75

Thirty-One Thousand Two Hundred Thirty-One 75/100 DOLLARS

PROSPERITY BANK

QIPP 2,3, Lapse & Yr 1 adj.

County Auditor

County Treasurer

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MP

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

000039

88-2265/1131

Date 11-7-19

PAY TO THE ORDER OF Memorial Medical Center Operating | $ 4,777.37

Four Thousand Seven Hundred Seventy-Seven 37/100 **DOLLARS**

PROSPERITY BANK

County Auditor

MP

County Treasurer

Security features are included. Details on back.

FOR QIPP 2,3, Lapse & Yr 1 Adj.

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MP

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

000069

88-2265/1131

Date 11-7-19

PAY TO THE ORDER OF Memorial Medical Center Operating | $ 3,515.07

Three Thousand Five Hundred Fifteen & 07/100 **DOLLARS**

PROSPERITY BANK

County Auditor

MP

County Treasurer

Security features are included. Details on back.

FOR QIPP 2,3, Lapse & Yr 1 Adj.

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

MP
000046
88-2265/1131

Date 11-7-19

PAY
TO THE ORDER OF Memorial Medical Center Operating | $ 44,110.30
forty-four thousand & one hundred ten & 30/100 **DOLLARS**

PROSPERITY BANK

County Auditor
MP
County Treasurer

FOR DIPP 1,2,3, lapse & Yr 1 Adj.

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

MP
000066
88-2265/1131

Date 11-7-19

PAY
TO THE ORDER OF Memorial Medical Center Operating | $ 9,989.48
Nine Thousand Nine hundred Eighty-Nine & 48/100 **DOLLARS**

PROSPERITY BANK

County Auditor
MP
County Treasurer

FOR DIPP 2,3, lapse & Yr 1 Adj.

Security features are included. Details on back.