MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- April 29, 2020

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	889,452.21
TOTAL TRANSFERS BETWEEN FUNDS	$	-
TOTAL NURSING HOME UPL EXPENSES	$	1,035,027.50
TOTAL INTER-GOVERNMENT TRANSFERS	$	-
GRAND TOTAL DISBURSEMENTS APPROVED April 29, 2020	$	1,924,479.71

APPROVED

APR 29 2020

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---April 29, 2020

PAYABLES AND PAYROLL			
4/27/2020	Weekly Payables	489,760.43	
4/27/2020	Siemens Financial Services-Lease	1,333.33	
4/27/2020	McKesson-340B Prescription Expense	5,675.80	
4/27/2020	Amerisource Bergen-340B Prescription Expense	909.47	
4/27/2020	Payroll Liabilities -Payroll Taxes	97,065.64	
4/27/2020	Payroll	294,616.12	
	Prosperity Electronic Bank Payments		
4/20-4/24/2020	Pay Plus-Patient Claims Processing Fee	91.42	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 889,452.21**
TOTAL TRANSFERS BETWEEN FUNDS			**$ -**
NURSING HOME UPL EXPENSES			
4/27/2020	Nursing Home UPI-Cantex Transfer	911,593.96	
4/27/2020	Nursing Home UPI-Nexion Transfer	56,803.90	
4/27/2020	Nursing Home UPI-HMG Transfer	66,629.64	
TOTAL NURSING HOME UPL EXPENSES			**$ 1,035,027.50**
TOTAL INTER-GOVERNMENT TRANSFERS			**$ -**
GRAND TOTAL DISBURSEMENTS APPROVED April 29, 2020			**$ 1,924,479.71**

04/23/2020 11:10 — MEMORIAL MEDICAL CENTER — 0

AP Open Invoice List

Due Dates Through: 05/06/2020 — ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
11283	ACE HARDWARE 15521		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
143505	SUPPLIES	04/15/20	04/06/20	05/01/20		47.96	0.00	0.00	47.96
143590	SUPPLIES	04/15/20	04/09/20	05/04/20		20.48	0.00	0.00	20.48

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11283	ACE HARDWARE 15521	68.44	0.00	0.00	68.44

Vendor#	Vendor Name	Class	Pay Code
10950	ACUTE CARE INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
~~042020-~~ 24896	RFID FEE	03/30/20	04/20/20	04/30/20		1,400.00	0.00	0.00	1,400.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10950	ACUTE CARE INC	1,400.00	0.00	0.00	1,400.00

Vendor#	Vendor Name	Class	Pay Code
R1200	ADT COMMERCIAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
439796	FIRE MONITORING	04/21/20	04/01/20	04/26/20		47.29	0.00	0.00	47.29

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	R1200	ADT COMMERCIAL	47.29	0.00	0.00	47.29

Vendor#	Vendor Name	Class	Pay Code
13180	ADVANCED STERILIZATION PRODUCT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8020000408	SUPPLIES	04/15/20	04/06/20	04/22/20		864.00	0.00	0.00	864.00
8020001368	SUPPLIES	04/15/20	04/09/20	04/09/20		864.00	0.00	0.00	864.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	13180	ADVANCED STERILIZATION PRODUCT	1,728.00	0.00	0.00	1,728.00

Vendor#	Vendor Name	Class	Pay Code
A1715	ALCO SALES & SERVICE CO	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2810414IN	SUPPLIES	04/21/20	03/26/20	04/15/20		242.77	0.00	0.00	242.77

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1715	ALCO SALES & SERVICE CO	242.77	0.00	0.00	242.77

Vendor#	Vendor Name	Class	Pay Code
10419	AMBU INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
220064575	SUPPLIES	04/22/20	04/06/20	04/07/20		227.00	0.00	0.00	227.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10419	AMBU INC	227.00	0.00	0.00	227.00

Vendor#	Vendor Name	Class	Pay Code
12992	BANK DIRECT CAPITAL FINANCE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
041220		04/22/20	04/12/20	05/01/20			3,361.30	0.00	0.00	3,361.30
	HEALTH INSURANCE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12992	BANK DIRECT CAPITAL FINANCE	3,361.30	0.00	0.00	3,361.30

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
12024603		04/21/20	03/28/20	04/22/20			17.37	0.00	0.00	17.37
	LATE FEE									
66219985		04/22/20	03/26/20	04/20/20			378.50	0.00	0.00	378.50
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1150	BAXTER HEALTHCARE	395.87	0.00	0.00	395.87

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
108299468		04/22/20	03/03/20	03/28/20			1,030.17	0.00	0.00	1,030.17
	SUPPLIES									
5420449		04/22/20	03/05/20	03/30/20			6,249.42	0.00	0.00	6,249.42
	MAINT CONTRACT									
7269319		04/22/20	04/03/20	04/28/20			4,556.93	0.00	0.00	4,556.93
	SUPPLIES									
108360208		04/22/20	04/05/20	04/30/20			82.80	0.00	0.00	82.80
	SUPPLIES									
108360012		04/22/20	04/05/20	04/30/20			87.55	0.00	0.00	87.55
	SUPPLIES									
5421878		04/22/20	04/05/20	04/30/20			6,249.42	0.00	0.00	6,249.42
	MAINT CONTRACT									
108360381		04/22/20	04/05/20	04/30/20			7,550.83	0.00	0.00	7,550.83
108361241	SUPPLIES									
~~BECKMAN~~		04/22/20	04/06/20	05/01/20			77.75	0.00	0.00	77.75
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC	25,884.87	0.00	0.00	25,884.87

Vendor#	Vendor Name	Class	Pay Code
12600	BIOFIRE DIAGNOSTICS LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1280043555		04/15/20	04/14/20	04/22/20			12,357.75	0.00	0.00	12,357.75
	SUPPLIES									
1280042230		04/22/20	04/06/20	04/22/20			16,468.29	0.00	0.00	16,468.29
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12600	BIOFIRE DIAGNOSTICS LLC	28,826.04	0.00	0.00	28,826.04

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
7114028234		04/21/20	03/26/20	04/20/20			150.00	0.00	0.00	150.00
	SUPPLIES									
8002196474		04/21/20	03/31/20	04/25/20			307.21	0.00	0.00	307.21
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1325	CARDINAL HEALTH 414, INC.	457.21	0.00	0.00	457.21

Vendor#	Vendor Name	Class	Pay Code
11202	CFI MECHANICAL INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
SD9974	ANNUAL INSPECTION CHILLE	03/30/20	03/31/20	04/30/20			5,995.00	0.00	0.00	5,995.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11202	CFI MECHANICAL INC	5,995.00	0.00	0.00	5,995.00

Vendor#	Vendor Name	Class	Pay Code
11029	COASTAL REFRIGERATION		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
3829765	CHECK BLOWER ON 2ND FLO	04/22/20	03/24/20	03/24/20			225.00	0.00	0.00	225.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11029	COASTAL REFRIGERATION	225.00	0.00	0.00	225.00

Vendor#	Vendor Name	Class	Pay Code
C2297	COVER ONE	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
18380	SUPPLIES	04/21/20	08/26/20	09/25/20			176.00	0.00	0.00	176.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C2297	COVER ONE	176.00	0.00	0.00	176.00

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
6046460	SUPPLIES	04/15/20	04/08/20	05/03/20			83.66	0.00	0.00	83.66
6047480	SUPPLIES	04/15/20	04/08/20	05/03/20			35.24	0.00	0.00	35.24
6045780	SUPPLIES	04/22/20	04/07/20	05/02/20			58.39	0.00	0.00	58.39

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON	177.29	0.00	0.00	177.29

Vendor#	Vendor Name	Class	Pay Code
11960	DILON TECHNOLOGIES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
00033474	SUPPLIES	04/15/20	04/13/20	04/22/20			290.52	0.00	0.00	290.52

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11960	DILON TECHNOLOGIES	290.52	0.00	0.00	290.52

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
MMC041520	PRO FEES	04/21/20	04/15/20	04/15/20			171,202.21	0.00	0.00	171,202.21

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10789	DISCOVERY MEDICAL NETWORK INC	171,202.21	0.00	0.00	171,202.21

Vendor#	Vendor Name	Class	Pay Code
11291	DOWELL PEST CONTROL		

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

16177		04/21/20	03/31/20	04/25/20	160.00	0.00	0.00	160.00
PEST CONTROL								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	11291	DOWELL PEST CONTROL			160.00	0.00	0.00	160.00

Vendor#	Vendor Name	Class	Pay Code
E1090	EDWARDS LIFESCIENCES	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9129568		04/22/20	04/07/20	04/22/20			92.50	0.00	0.00	92.50
SUPPLIES										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	E1090	EDWARDS LIFESCIENCES					92.50	0.00	0.00	92.50

Vendor#	Vendor Name	Class	Pay Code
11284	EMERGENCY STAFFING SOLUTIONS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
39047		04/21/20	04/15/20	04/25/20			40,062.50	0.00	0.00	40,062.50
ER STAFFING										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11284	EMERGENCY STAFFING SOLUTIONS					40,062.50	0.00	0.00	40,062.50

Vendor#	Vendor Name	Class	Pay Code
C2510	EVIDENT	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
T2003161378		04/21/20	03/16/20	04/10/20			8,566.93	0.00	0.00	8,566.93
BUSINESS SERVICES										
A2004061378		04/21/20	04/06/20	05/01/20			17,839.00	0.00	0.00	17,839.00
SUPPORT/ MONTHLY SUBSCI										
T2004091378		04/21/20	04/09/20	05/04/20			9,850.97	0.00	0.00	9,850.97
CONSULTING/BUSINESS SER										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	C2510	EVIDENT					36,256.90	0.00	0.00	36,256.90

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
6109425		04/22/20	03/27/20	04/21/20			224.48	0.00	0.00	224.48
SUPPLIES										
6253298		04/22/20	03/30/20	04/24/20			109.50	0.00	0.00	109.50
SUPPLIES										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	F1400	FISHER HEALTHCARE					333.98	0.00	0.00	333.98

Vendor#	Vendor Name	Class	Pay Code
12404	GE PRECISION HEALTHCARE, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6001546412		04/08/20	04/01/20	05/01/20			3,588.58	0.00	0.00	3,588.58
MAINT CONTRACT										
6001546305		04/08/20	04/01/20	05/01/20			572.33	0.00	0.00	572.33
MAINT CONTRACT										
6001546304		04/08/20	04/01/20	05/01/20			1,281.96	0.00	0.00	1,281.96
MAINT CONTRACT										
6001546666		04/08/20	04/01/20	05/01/20			307.66	0.00	0.00	307.66
MAINT CONTRACT										
6001546481		04/08/20	04/01/20	05/01/20			5,665.83	0.00	0.00	5,665.83
MAINT CONTRACT										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12404	GE PRECISION HEALTHCARE, LLC	11,416.36	0.00	0.00	11,416.36

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
9496748014		04/22/20	04/06/20	05/01/20			234.00	0.00	0.00	234.00
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	W1300	GRAINGER	234.00	0.00	0.00	234.00

Vendor#	Vendor Name	Class	Pay Code
12948	GREAT AMERICAN FINANCIAL SVCS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
26804036		04/21/20	04/06/20	04/30/20			10,232.82	0.00	0.00	10,232.82
	COPIER LEASE/PRINITING									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12948	GREAT AMERICAN FINANCIAL SVCS	10,232.82	0.00	0.00	10,232.82

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
1842861		03/30/20	03/31/20	04/30/20			54.86	0.00	0.00	54.86
	SUPPLIES									
1842862		03/30/20	03/31/20	04/30/20			170.55	0.00	0.00	170.55
	SUPPLIES									
1842859		03/30/20	03/31/20	04/30/20			109.72	0.00	0.00	109.72
	SUPPLIES									
1842998		04/14/20	03/31/20	04/30/20			1,135.37	0.00	0.00	1,135.37
	SUPPLIES									
1818171		04/22/20	02/25/20	03/26/20			402.12	0.00	0.00	402.12
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY	1,872.62	0.00	0.00	1,872.62

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9546		04/15/20	03/31/20	04/30/20			215.00	0.00	0.00	215.00
	CODING SERVICES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10804	HEALTHCARE CODING & CONSULTING	215.00	0.00	0.00	215.00

Vendor#	Vendor Name	Class	Pay Code
11552	HEALTHCARE FINANCIAL SERVICES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
100296219		03/31/20	03/27/20	05/01/20			4,610.52	0.00	0.00	4,610.52
	PHONE/STERLIZER/GEM PRE									
100301361		04/15/20	04/07/20	05/01/20			4,919.41	0.00	0.00	4,919.41
	LEASE									
100301362		04/15/20	04/07/20	05/01/20			7,154.17	0.00	0.00	7,154.17
100301364	LEASE									
~~1797.44~~		04/15/20	04/07/20	05/01/20			1,797.44	0.00	0.00	1,797.44
	LEASE									
100301363		04/15/20	04/07/20	05/01/20			7,447.86	0.00	0.00	7,447.86
	LEASE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11552	HEALTHCARE FINANCIAL SERVICES	25,929.40	0.00	0.00	25,929.40

Vendor# 12716 Vendor Name: HITACHI HEALTHCARE Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
PJIN0147702	SMA FEE	04/21/20	01/15/20	01/15/20			8,333.33	0.00	0.00	8,333.33

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12716	HITACHI HEALTHCARE	8,333.33	0.00	0.00	8,333.33

Vendor# 10922 Vendor Name: HUNTER PHARMACY SERVICES Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
3831	PRO FEES PHARM	04/21/20	03/31/20	04/20/20			14,767.22	0.00	0.00	14,767.22

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10922	HUNTER PHARMACY SERVICES	14,767.22	0.00	0.00	14,767.22

Vendor# 11200 Vendor Name: IRON MOUNTAIN Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
CNBN435	SHRED SERVICE	03/30/20	03/31/20	04/30/20			450.24	0.00	0.00	450.24

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11200	IRON MOUNTAIN	450.24	0.00	0.00	450.24

Vendor# 11285 Vendor Name: ITA RESOURCES INC Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
MMC42020	RESP SERVICES	04/21/20	04/20/20	04/20/20			25,471.47	0.00	0.00	25,471.47

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11285	ITA RESOURCES INC	25,471.47	0.00	0.00	25,471.47

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
01110307	SUPPLIES	04/22/20	04/03/20	04/18/20			796.10	0.00	0.00	796.10
61280271	SUPPLIES	04/22/20	04/06/20	04/21/20			196.53	0.00	0.00	196.53

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC	992.63	0.00	0.00	992.63

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
042020	INDIGENT CARE	04/22/20	04/20/20	04/20/20			96.76	0.00	0.00	96.76

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10613	MEDIMPACT HEALTHCARE SYS, INC.	96.76	0.00	0.00	96.76

Vendor# M2470 Vendor Name: MEDLINE INDUSTRIES INC Class: M Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1905781539	SUPPLIES	04/15/20	03/26/20	04/20/20			413.83	0.00	0.00	413.83

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC	413.83	0.00	0.00	413.83

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
5516251	SUPPLIES	04/15/20	04/20/20	04/30/20		119.81	0.00	0.00	119.81
5499382	INVENTORY	04/21/20	04/15/20	04/25/20		639.08	0.00	0.00	639.08
5499384	INVENTORY	04/21/20	04/15/20	04/25/20		8.64	0.00	0.00	8.64
9119	CREDIT	04/21/20	04/15/20	04/25/20		-9.99	0.00	0.00	-9.99
5499381	INVENTORY	04/21/20	04/15/20	04/25/20		46.64	0.00	0.00	46.64
5501146	INVENTORY	04/21/20	04/15/20	04/25/20		124.36	0.00	0.00	124.36
5501148	INVENTORY	04/21/20	04/15/20	04/25/20		31.89	0.00	0.00	31.89
5501147	INVENTORY	04/21/20	04/15/20	04/25/20		248.12	0.00	0.00	248.12
8960	CREDIT	04/21/20	04/15/20	04/25/20		-4.99	0.00	0.00	-4.99
5499383	INVENTORY	04/21/20	04/15/20	04/25/20		807.21	0.00	0.00	807.21
5504280	INVENTORY	04/21/20	04/16/20	04/26/20		90.95	0.00	0.00	90.95
CM58876	CREDIT	04/21/20	04/16/20	04/26/20		-0.52	0.00	0.00	-0.52
5506032	SUPPLIES	04/21/20	04/16/20	04/26/20		491.77	0.00	0.00	491.77
5506031	INVENTORY	04/21/20	04/16/20	04/26/20		15.86	0.00	0.00	15.86
5510857	INVENTORY	04/21/20	04/17/20	04/27/20		441.85	0.00	0.00	441.85
5510858	INVENTORY	04/21/20	04/17/20	04/27/20		47.17	0.00	0.00	47.17
5510968	INVENTORY	04/21/20	04/17/20	04/27/20		61.25	0.00	0.00	61.25
5510856	INVENTORY	04/21/20	04/17/20	04/27/20		550.15	0.00	0.00	550.15
5511069	INVENTORY	04/21/20	04/17/20	04/27/20		88.78	0.00	0.00	88.78
5510967	INVENTORY	04/21/20	04/17/20	04/27/20		6.80	0.00	0.00	6.80
5518015	INVENTORY	04/21/20	04/20/20	04/30/20		221.09	0.00	0.00	221.09
0141	INVENTORY	04/21/20	04/20/20	04/30/20		-143.37	0.00	0.00	-143.37
5518014	INVENTORY	04/21/20	04/20/20	04/30/20		52.69	0.00	0.00	52.69

5518016		04/21/20	04/20/20	04/30/20	243.27	0.00	0.00	243.27
INVENTORY								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC			4,178.51	0.00	0.00	4,178.51

Vendor#	Vendor Name	Class	Pay Code
O0920	OFFICE DEPOT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
424497080001		04/22/20	01/07/20	01/27/20			71.24	0.00	0.00	71.24
SUPPLIES										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	O0920	OFFICE DEPOT					71.24	0.00	0.00	71.24

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
1851383449		04/15/20	03/31/20	04/30/20			272.70	0.00	0.00	272.70
SUPPLIES										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	O1416	ORTHO CLINICAL DIAGNOSTICS					272.70	0.00	0.00	272.70

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
33057165		03/30/20	03/30/20	04/30/20			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
11155	PARA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6305		03/30/20	04/01/20	05/01/20			2,000.00	0.00	0.00	2,000.00
REVENUE INTEGRITY PROGR										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11155	PARA					2,000.00	0.00	0.00	2,000.00

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
03440311		04/21/20	03/26/20	04/25/20			65.43	0.00	0.00	65.43
SUPPLIES										
03445196		04/21/20	04/02/20	05/02/20			109.75	0.00	0.00	109.75
SUPPLIES										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10152	PARTSSOURCE, LLC					175.18	0.00	0.00	175.18

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
MCC142020		04/21/20	04/16/20	04/16/20			434.00	0.00	0.00	434.00
HOSPITAL LAWN										
MMC042020		04/21/20	04/16/20	04/16/20			275.00	0.00	0.00	275.00
CLINIC LAWN										
MMCR042020		04/21/20	04/16/20	04/16/20			125.00	0.00	0.00	125.00
REHAB LAWN										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net

	12544 PATRICK OCHOA					834.00	0.00	0.00	834.00
Vendor#	Vendor Name				Class	Pay Code			
11932	PRESS GANEY ASSOCIATES, INC.								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	IN000429171		03/30/20	03/31/20	04/30/20		2,028.00	0.00	0.00	2,028.00
		SUPPLIES								
	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				
11024	REED, CLAYMON, MEEKER & HARGET									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	19410		04/21/20	04/10/20	04/10/20		22,750.00	0.00	0.00	22,750.00
		LEGAL								
	19452		04/21/20	04/16/20	04/16/20		7,446.51	0.00	0.00	7,446.51
		LEGAL								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11024	REED, CLAYMON, MEEKER & HARGET				30,196.51	0.00	0.00	30,196.51
Vendor#	Vendor Name				Class	Pay Code				
10987	REVCYCLE+, INC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	34528		04/21/20	04/08/20	05/03/20		1,973.55	0.00	0.00	1,973.55
		CODING SERVICES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10987	REVCYCLE+, INC.				1,973.55	0.00	0.00	1,973.55
Vendor#	Vendor Name				Class	Pay Code				
10625	SARA RUBIO									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	041720		04/21/20	04/17/20	04/17/20		126.49	0.00	0.00	126.49
		PICKED PPE/LAPTOP FRM GC MJC (3/31, 4/7, 4/10, 4/20)								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10625	SARA RUBIO				126.49	0.00	0.00	126.49
Vendor#	Vendor Name				Class	Pay Code				
S1405	SERVICE SUPPLY OF VICTORIA INC					W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	701051332		04/08/20	04/03/20	05/03/20		173.56	0.00	0.00	173.56
		SUPPLIES								
	701051532		04/15/20	04/03/20	05/03/20		100.50	0.00	0.00	100.50
		SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S1405	SERVICE SUPPLY OF VICTORIA INC				274.06	0.00	0.00	274.06
Vendor#	Vendor Name				Class	Pay Code				
10936	SIEMENS FINANCIAL SERVICES									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	56382000037772		04/21/20	04/03/20	04/20/20		4,038.24	0.00	0.00	4,038.24
		LEASE								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10936	SIEMENS FINANCIAL SERVICES				4,038.24	0.00	0.00	4,038.24
Vendor#	Vendor Name				Class	Pay Code				
12848	SKILLGIGS INC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	22093		04/21/20	02/12/20	03/13/20		1,354.50	0.00	0.00	1,354.50

ICE NURSE DEE ROWE

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12848	SKILLGIGS INC.	1,354.50	0.00	0.00	1,354.50

Vendor# 10094 Vendor Name: ST DAVIDS HEALTHCARE Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
MMCPL202002	CONNECTIVITY FEE	04/21/20	03/31/20	03/31/20			420.00	0.00	0.00	420.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10094	ST DAVIDS HEALTHCARE	420.00	0.00	0.00	420.00

Vendor# S3960 Vendor Name: STERICYCLE, INC Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
4009239607	DISPOSAL SERVICE	03/24/20	04/01/20	05/01/20			2,415.00	0.00	0.00	2,415.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S3960	STERICYCLE, INC	2,415.00	0.00	0.00	2,415.00

Vendor# 10735 Vendor Name: STRYKER SUSTAINABILITY Class: Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
3905123	SUPPLIES	04/15/20	03/31/20	04/30/20			465.19	0.00	0.00	465.19

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10735	STRYKER SUSTAINABILITY	465.19	0.00	0.00	465.19

Vendor# T2539 Vendor Name: T-SYSTEM, INC Class: W Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
33942	TRACKING/STAT/CLOUD HOS	03/30/20	03/31/20	04/30/20			5,699.00	0.00	0.00	5,699.00
33962	CLOUD HOSTING	03/30/20	03/31/20	04/30/20			1,144.00	0.00	0.00	1,144.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	T2539	T-SYSTEM, INC	6,843.00	0.00	0.00	6,843.00

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
042220		04/22/20	04/22/20	04/22/20			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# T2204 Vendor Name: TEXAS MUTUAL INSURANCE CO Class: W Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1001726267	WORKERS COMP	04/21/20	04/09/20	04/09/20			4,126.00	0.00	0.00	4,126.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	T2204	TEXAS MUTUAL INSURANCE CO	4,126.00	0.00	0.00	4,126.00

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
340377563		04/15/20	04/06/20	05/01/20			1,353.87	0.00	0.00	1,353.87

TRASH SERVICE

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11100	THE US CONSULTING GROUP	1,353.87	0.00	0.00	1,353.87

Vendor#	Vendor Name	Class	Pay Code
10732	THERACOM, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
216979428301		03/16/20	02/18/20	05/01/20			782.04	0.00	0.00	782.04

INVENTORY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10732	THERACOM, LLC	782.04	0.00	0.00	782.04

Vendor#	Vendor Name	Class	Pay Code
11908	TMS SOUTH		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
655560		04/21/20	04/06/20	05/06/20			455.56	0.00	0.00	455.56

PLUMBING REPAIRS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11908	TMS SOUTH	455.56	0.00	0.00	455.56

Vendor#	Vendor Name	Class	Pay Code
U1054	UNIFIRST HOLDINGS	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
8400328247		04/21/20	04/06/20	05/01/20			1,159.07	0.00	0.00	1,159.07
	LAUNDRY									
8400328221		04/21/20	04/06/20	05/01/20			47.15	0.00	0.00	47.15
	LAUNDRY									
8400328222		04/21/20	04/06/20	05/01/20			61.48	0.00	0.00	61.48
	LAUNDRY									
8400328589		04/21/20	04/09/20	05/04/20			186.07	0.00	0.00	186.07
	LAUNDRY									
8400328587		04/21/20	04/09/20	05/04/20			131.55	0.00	0.00	131.55
	LAUNDRY									
8400328623		04/21/20	04/09/20	05/04/20			998.51	0.00	0.00	998.51
	LAUNDRY									
8400328588		04/21/20	04/09/20	05/04/20			106.35	0.00	0.00	106.35
	LAUNDRY									
8400328607		04/21/20	04/09/20	05/04/20			81.67	0.00	0.00	81.67
	LAUNDRY									
8400328648		04/21/20	04/09/20	05/04/20			103.13	0.00	0.00	103.13
	LAUNDRY									
8400328585		04/21/20	04/09/20	05/04/20			18.62	0.00	0.00	18.62
	LAUNDRY									
8400328590		04/21/20	04/09/20	05/04/20			175.83	0.00	0.00	175.83
	LAUNDRY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1054	UNIFIRST HOLDINGS	3,069.43	0.00	0.00	3,069.43

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
0806907		03/30/20	03/20/20	04/30/20			-102.97	0.00	0.00	-102.97
	CREDIT ORG INV 10497685									
10854110		04/22/20	04/15/20	04/30/20			139.99	0.00	0.00	139.99
	UNIFROM LETICIA CONTRERA									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1056	UNIFORM ADVANTAGE	37.02	0.00	0.00	37.02

Vendor#	Vendor Name	Class	Pay Code
11199	UNIVERSAL MEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
00082499	SUPPLIES	04/21/20	03/24/20	04/24/20			355.95	0.00	0.00	355.95

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11199	UNIVERSAL MEDICAL	355.95	0.00	0.00	355.95

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	489,760.43	0.00	0.00	489,760.43

APPROVED
ON
APR 27 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#
185492-
185553

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	185492	04/29/20	68.44	ACE HARDWARE 15521
A/P	185493	04/29/20	1,400.00	ACUTE CARE INC
A/P	185494	04/29/20	47.29	ADT COMMERCIAL
A/P	185495	04/29/20	1,728.00	ADVANCED STERILIZATION PRODUCT
A/P	185496	04/29/20	242.77	ALCO SALES & SERVICE CO
A/P	185497	04/29/20	227.00	AMBU INC
A/P	185498	04/29/20	3,361.30	BANK DIRECT CAPITAL FINANCE
A/P	185499	04/29/20	395.87	BAXTER HEALTHCARE
A/P	185500	04/29/20	25,884.87	BECKMAN COULTER INC
A/P	185501	04/29/20	28,826.04	BIOFIRE DIAGNOSTICS LLC
A/P	185502	04/29/20	457.21	CARDINAL HEALTH 414, INC.
A/P	185503	04/29/20	5,995.00	CFI MECHANICAL INC
A/P	185504	04/29/20	225.00	COASTAL REFRIGERATION
A/P	185505	04/29/20	176.00	COVER ONE
A/P	185506	04/29/20	177.29	DEWITT POTH & SON
A/P	185507	04/29/20	290.52	DILON TECHNOLOGIES
A/P	185508	04/29/20	171,202.21	DISCOVERY MEDICAL NETWORK INC
A/P	185509	04/29/20	160.00	DOWELL PEST CONTROL
A/P	185510	04/29/20	92.50	EDWARDS LIFESCIENCES
A/P	185511	04/29/20	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	185512	04/29/20	36,256.90	EVIDENT
A/P	185513	04/29/20	333.98	FISHER HEALTHCARE
A/P	185514	04/29/20	11,416.36	GE PRECISION HEALTHCARE, LLC
A/P	185515	04/29/20	234.00	GRAINGER
A/P	185516	04/29/20	10,232.82	GREAT AMERICAN FINANCIAL SVCS
A/P	185517	04/29/20	1,872.62	GULF COAST PAPER COMPANY
A/P	185518	04/29/20	215.00	HEALTHCARE CODING & CONSULTING
A/P	185519	04/29/20	25,929.40	HEALTHCARE FINANCIAL SERVICES
A/P	185520	04/29/20	8,333.33	HITACHI HEALTHCARE
A/P	185521	04/29/20	14,767.22	HUNTER PHARMACY SERVICES
A/P	185522	04/29/20	450.24	IRON MOUNTAIN
A/P	185523	04/29/20	25,471.47	ITA RESOURCES INC
A/P	185524	04/29/20	992.63	MCKESSON MEDICAL SURGICAL INC
A/P	185525	04/29/20	96.76	MEDIMPACT HEALTHCARE SYS, INC.
A/P	185526	04/29/20	413.83	MEDLINE INDUSTRIES INC
A/P	185527	04/29/20	.00	VOIDED
A/P	185528	04/29/20	4,178.51	MORRIS & DICKSON CO, LLC
A/P	185529	04/29/20	71.24	OFFICE DEPOT
A/P	185530	04/29/20	272.70	ORTHO CLINICAL DIAGNOSTICS
A/P	185531	04/29/20	187.50	PALACIOS BEACON
A/P	185532	04/29/20	2,000.00	PARA
A/P	185533	04/29/20	175.18	PARTSSOURCE, LLC
A/P	185534	04/29/20	834.00	PATRICK OCHOA
A/P	185535	04/29/20	2,028.00	PRESS GANEY ASSOCIATES, INC.
A/P	185536	04/29/20	30,196.51	REED, CLAYMON, MEEKER & HARGET
A/P	185537	04/29/20	1,973.55	REVCYCLE+, INC.
A/P	185538	04/29/20	126.49	SARA RUBIO
A/P	185539	04/29/20	274.06	SERVICE SUPPLY OF VICTORIA INC
A/P	185540	04/29/20	5,371.57	SIEMENS FINANCIAL SERVICES
A/P	185541	04/29/20	1,354.50	SKILLGIGS INC.

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	185542	04/29/20	420.00	ST DAVIDS HEALTHCARE
A/P	185543	04/29/20	2,415.00	STERICYCLE, INC
A/P	185544	04/29/20	465.19	STRYKER SUSTAINABILITY
A/P	185545	04/29/20	6,843.00	T-SYSTEM, INC
A/P	185546	04/29/20	3,690.52	TEXAS ADVANTAGE COMMUNITY BANK
A/P	185547	04/29/20	4,126.00	TEXAS MUTUAL INSURANCE CO
A/P	185548	04/29/20	1,353.87	THE US CONSULTING GROUP
A/P	185549	04/29/20	782.04	THERACOM, LLC
A/P	185550	04/29/20	455.56	TMS SOUTH
A/P	185551	04/29/20	3,069.43	UNIFIRST HOLDINGS
A/P	185552	04/29/20	37.02	UNIFORM ADVANTAGE
A/P	185553	04/29/20	355.95	UNIVERSAL MEDICAL
TOTALS:			491,093.76	

O.C

Payables 489,760.43 +
Siemens 1,333.33 +
491,093.76 *

APPROVED ON
APR 29 2020
CK#

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

04/24/2020
08:25

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 05/06/2020

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
10936	SIEMENS FINANCIAL SERVICES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
56382000037144	LEASE	04/08/20	03/31/20	05/06/20			1,333.33	0.00	0.00	1,333.33

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10936	SIEMENS FINANCIAL SERVICES	1,333.33	0.00	0.00	1,333.33

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,333.33	0.00	0.00	1,333.33

APPROVED
ON
APR 27 2020

CK# 185540

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company: 8000

STATEMENT

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 04/24/2020 **Page:** 002

DC: 8115

Territory:

Customer: 632536
Date: 04/25/2020

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

As of: 04/24/2020 **Page:** 002
Mail to: **Comp:** 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536
Date: 04/25/2020

PLEASE CHECK ANY ITEMS NOT PAID (✓)

National Account 632536

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

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

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

Subtotals: 5,801.24 USD

Future Due: 0.00

Past Due: 471.16-

Last Payment 2,451.97
08/07/2017

If Paid By 04/28/2020, Pay This Amount: 5,675.80 USD

If Paid After 04/28/2020, Pay this Amount: 5,801.24 USD

Due If Paid On Time: USD 5,675.80

Disc lost if paid late: 125.44

Due If Paid Late: USD 5,801.24

CK # 500093

APPROVED ON
APR 27 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

316.23 +
30.31 +
1,034.56 +
912.09 +
3,382.61 +
5,675.80 *

McKESSON

Company: 8000

STATEMENT

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: 04/24/2020 **Page:** 001

DC: 8115

Territory: 400

Customer: 262252
Date: 04/25/2020

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

As of: 04/24/2020 **Page:** 001
Mail to: **Comp:** 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252 **PLEASE CHECK ANY**
Date: 04/25/2020 **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											
04/23/2020	04/28/2020	7196826162	731347	115Invoice	6.42	320.96		314.54 ✓		7196826162	
04/23/2020	04/28/2020	7196826164	731347	115Invoice	0.03	1.72		1.69 ✓		7196826164	

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: 322.68 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 8,717.77
04/13/2020

If Paid By 04/28/2020,
Pay This Amount: 316.23 USD

If Paid After 04/28/2020,
Pay this Amount: 322.68 USD

Due If Paid On Time:
USD 316.23

Disc lost if paid late:
6.45

Due If Paid Late:
USD 322.68

APPROVED
ON

APR 27 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company: 8000

STATEMENT

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

As of: 04/24/2020 **Page:** 001

DC: 8115

Territory: 400

Customer: 190813
Date: 04/25/2020

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

As of: 04/24/2020 **Page:** 001
Mail to: **Comp:** 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 **PLEASE CHECK ANY**
Date: 04/25/2020 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 190813 HEB PHCY 0434/MEM MED PHS											
04/22/2020	04/28/2020	7196555549	2017014217	115Invoice	0.55	27.62		27.07	✓	7196555549	
04/24/2020	04/28/2020	7197045314	2017014312	115Invoice	0.07	3.31		3.24	✓	7197045314	

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: 30.93 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,950.03
04/20/2020

If Paid By 04/28/2020, Pay This Amount: 30.31 USD

If Paid After 04/28/2020, Pay this Amount: 30.93 USD

Due If Paid On Time:
USD 30.31

Disc lost if paid late:
0.62

Due If Paid Late:
USD 30.93

APPROVED
ON

APR 27 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company: 8000

STATEMENT

As of: 04/24/2020 Page: 001

DC: 8115

Territory: 81

Customer: 464450
Date: 04/25/2020

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

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

As of: 04/24/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450 **PLEASE CHECK ANY**
Date: 04/25/2020 **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 464450 HEB PHY FC 490/MEM MC PHS											
04/20/2020	04/28/2020	7196095634	55x286161	115Invoice	21.11	1,055.67		1,034.56	✓	7196095634	

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

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

Subtotals: 1,055.67 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 8,717.77
04/13/2020

If Paid By 04/28/2020, Pay This Amount: 1,034.56 USD

If Paid After 04/28/2020, Pay this Amount: 1,055.67 USD

Due If Paid On Time:
USD 1,034.56

Disc lost if paid late:
21.11

Due If Paid Late:
USD 1,055.67

APPROVED
ON

APR 27 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company: 8000

STATEMENT

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: 04/24/2020 **Page:** 001

DC: 8115

Territory: 400

Customer: 835438
Date: 04/25/2020

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

As of: 04/24/2020 **Page:** 001
Mail to: **Comp:** 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 **PLEASE CHECK ANY**
Date: 04/25/2020 **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											
04/23/2020	04/28/2020	7196966653	731909	115Invoice	18.61	930.70		912.09	✓	7196966653	

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: 930.70 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,950.03
04/20/2020

If Paid By 04/28/2020,
Pay This Amount: 912.09 USD

If Paid After 04/28/2020,
Pay this Amount: 930.70 USD

Due If Paid On Time:
USD 912.09

Disc lost if paid late:
18.61

Due If Paid Late:
USD 930.70

APPROVED
ON
APR 27 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

Company: 8000

STATEMENT

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: 04/24/2020 **Page:** 001

DC: 8115

Territory: 400

Customer: 256342
Date: 04/25/2020

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

As of: 04/24/2020 **Page:** 001
Mail to: **Comp:** 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 **PLEASE CHECK ANY**
Date: 04/25/2020 **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											
04/20/2020	04/28/2020	7196098394	9523281245	115Invoice	0.05	2.69		2.64	✓	7196098394	
04/20/2020	04/20/2020	7196278582	000004012020AS	115Credit		0.62-	P	0.62-	P ✓	7196278582	
04/20/2020	04/20/2020	7196278583	797465221	115Credit		187.72-	P	187.72-	P ✓	7196278583	
04/20/2020	04/20/2020	7196278584	798097057	115Credit		2.48-	P	2.48-	P ✓	7196278584	
04/20/2020	04/20/2020	7196278585	798709269	115Credit		279.72-	P	279.72-	P ✓	7196278585	
04/20/2020	04/20/2020	7196278586	799469665	115Credit		0.62-	P	0.62-	P ✓	7196278586	
04/21/2020	04/28/2020	7196320693	0420200227-00	115Invoice	34.54	1,727.00		1,692.46	✓	7196320693	
04/21/2020	04/28/2020	7196320694	1136963	115Invoice	8.62	431.23		422.61	✓	7196320694	
04/22/2020	04/28/2020	7196570315	3618510942	115Invoice	8.63	431.39		422.76	✓	7196570315	
04/22/2020	04/28/2020	7196570316	0421200403-00	115Invoice	0.02	0.84		0.82	✓	7196570316	
04/22/2020	04/28/2020	7196730744	805176097	195Invoice	0.01	0.32		0.31	✓	7196730744	
04/23/2020	04/28/2020	7196827659	3618515349	115Invoice	23.39	1,169.59		1,146.20	✓	7196827659	
04/23/2020	04/28/2020	7196978459	805449096	195Invoice	0.04	1.90		1.86	✓	7196978459	
04/24/2020	04/28/2020	7197077668	9268520072	115Invoice	3.32	166.19		162.87	✓	7197077668	
04/24/2020	04/28/2020	7197224561	805678776	195Invoice	0.03	1.27		1.24	✓	7197224561	

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: 3,461.26 USD

Future Due: 0.00

Past Due: 471.16-

Last Payment 6,950.03
04/20/2020

If Paid By 04/28/2020, Pay This Amount: 3,382.61 USD

If Paid After 04/28/2020, Pay this Amount: 3,461.26 USD

Due If Paid On Time:
USD 3,382.61

Disc lost if paid late: 78.65

Due If Paid Late:
USD 3,461.26

APPROVED
ON

APR 27 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AmerisourceBergen

STATEMENT

Number: 59133578 Date: 04-24-2020

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:	909.47
Past Due:	0.00
Total Due:	909.47
Account Balance:	909.47

Account Activity

Activity Date	Due Date	Reference Number	Purchase Order Number	Activity Type	Amount
04-20-2020	05-01-2020	3036991390	156202	Invoice	3.74
04-20-2020	05-01-2020	3036991391	156203	Invoice	550.87
04-20-2020	05-01-2020	3036991392	156204	Invoice	1.33
04-20-2020	05-01-2020	3037008655	156252	Invoice	40.14
04-21-2020	05-01-2020	3037049032	156257	Invoice	25.87
04-22-2020	05-01-2020	3037124374	156263	Invoice	139.04
04-23-2020	05-01-2020	3037182152	156270	Invoice	11.12
04-23-2020	05-01-2020	3037182153	156271	Invoice	6.77
04-24-2020	05-01-2020	3037242674	156277	Invoice	130.59

Thank You for Your Payment

Date	Payment Number	Amount
04-24-2020		(1,404.73)

Reminders

Due Date	Amount
05-01-2020	909.47
Total Due:	909.47

Terms:
Monday - Friday due in 7 days

CK # 500094

APPROVED
ON
APR 27 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

TOLL FEE PHONE NUMBER: 1-800-555-3453
(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

	#### ###	ENTER:	
☐ "ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"			
☐ "ENTER YOUR 4-DIGIT PIN"			
☐ "MAKE A PAYMENT, PRESS 1"		1	
☐ "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★	941	#
☐ "IF FEDERAL TAX DEPOSIT ENTER 1"		1	
☐ "ENTER 2-DIGIT TAX FILING YEAR"	★	20	
☐ "ENTER 2-DIGIT TAX FILING ENDING MONTH"	★	06	

1ST QTR - 03 (MARCH) - Jan, Feb, Mar
2ND QTR - 06 (JUNE) - Apr, May, June
3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept
4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec

☐ "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★	$ 97,065.64	#
"1 TO CONFIRM"		1	
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0	$ 49,496.88	#
"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 11,576.00	#
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 35,992.76	#
CHECK		$ -	
☐ "6-DIGIT SETTLEMENT DATE"	★		
"1 TO CONFIRM"		1	
☐ ACKNOWLEDGEMENT NUMBER			

CALLED IN BY:
CALLED IN DATE:
CALLED IN TIME:

Final Summary

PayCode Summary

PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross
1	REGULAR PAY-S1	8811.50	N		N	N		176286.61
1	REGULAR PAY-S1	1859.75	N		N	N	N	82183.95
1	REGULAR PAY-S1	207.50	N		N	Y		6907.44
1	REGULAR PAY-S1	177.50	Y		N	N		5748.87
1	REGULAR PAY-S1	43.50	Y		N	N	N	3400.84
2	REGULAR PAY-S2	2456.00	N		N	N		56947.78
2	REGULAR PAY-S2	169.50	N		N	Y		6111.35
2	REGULAR PAY-S2	179.00	Y		N	N		5015.02
3	REGULAR PAY-S3	1418.75	N		N	N		37776.89
3	REGULAR PAY-S3	135.25	N		N	Y		5212.95
3	REGULAR PAY-S3	148.50	Y		N	N		5598.82
C	CALL PAY	123.00	N		N	N	N	246.00
C	CALL PAY	2318.25	N	1	N	N		4636.50
E	EXTRA WAGES		N	1	N	N	N	2132.50
F	FUNERAL LEAVE	12.00	N	1	N	N		191.88
I	INSERVICE	25.75	N	1	N	N		833.63
K	EXTENDED-ILLNESS-BANK	80.00	N		N	N	N	1666.40
K	EXTENDED-ILLNESS-BANK	356.00	N	1	N	N		7828.40
P	PAID-TIME-OFF	64.47	N		N	N	N	861.87
P	PAID-TIME-OFF	1050.00	N	1	N	N		20616.25
X	CALL PAY 2	160.00	N	1	N	N		320.00
Z	CALL PAY 3	96.00	N	1	N	N		288.00
p	PAID TIME OFF - PROBATION	8.00	N	1	N	N		346.15
t	PHONE & DATA		N		N	N	N	970.00

Deductions Summary

Code	Amount	Code	Amount	Code	Amount
A/R	779.83	A/R2	180.00	A/R3	
ADVANC		AWARDS		BOOTS	
CAFE H		CAFE-1		CAFE-2	
CAFE-3		CAFE-4		CAFE-5	
CAFE-C		CAFE-D	1774.07	CAFE-F	
CAFE-H	20063.71	CAFE-I		CAFE-L	
CAFE-P		CANCER		CHILD	
CLINIC	75.00	COMBIN	438.97	CREDUN	
DD ADV		DENTAL		DEP-LF	
DIS-LF		EAT		EATCSH	
FEDTAX	35992.76	FICA-M	5788.00	FICA-O	24748.44
FIRSTC		FLEX S	4890.93	FLX FE	
FORT D		FUTA		GIFT S	31.73
GRANT		GRP-IN		GTL	
HOSP-I		ID TFT		LEAF	
LEGAL	406.04	MASA	818.00	MEALS	141.18
MISC		MISC/		MMCSHR	
NATFML	2200.42	OTHER		PHI	
PHI***		PR FIN		RELAY	
REPAY		SAMS		SCRUBS	
SIGNON		ST-TX		STONDF	840.86
STONE		STONE2		STUDEN	
SUNACC	956.56	SUNILL	1398.36	SUNLIF	1272.48
SUNSTD	1777.13	SUNVIS	1259.18	SURCHG	855.00
TSA-1		TSA-2		TSA-C	
TSA-P		TSA-R	30256.65	TUTION	
UNIFOR	566.68	UW/HOS			

Grand Totals: 19900.22 (Gross: 432128.10 Deductions: 137511.98 Net: 294616.12)

Checks Count:- FT 202 PT 7 Other 36 Female 219 Male 24 Credit OverAmt 6 ZeroNet Term Total: 243

Pay Date
05.01.2020

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- April 20, 2020 - April 26, 2020

Date	Bank Description	MMC Notes	CPSI	Amount
4/20/2020	WEBFILE TAX PYMT DD 902/36689246 21000025703	- Sales Tax		1568.94 **
4/20/2020	PAY PLUS ACHTRANS 452579291 101000697322927	- 3rd Party Payor Fee		5.37
4/20/2020	IRS USATAXPYMT 220051112673712 6103601000161	- Payroll Taxes		98174.7 **
4/20/2020	IRS USATAXPYMT 220051194581907 6103601000171	- Payroll Taxes		1573.54 **
4/21/2020	PAY PLUS ACHTRANS 452579291 101000698095229	- 3rd Party Payor Fee		0.99
4/21/2020	MCKESSON DRUG AUTO ACH ACH04146498 910000133	- 340B Drug Program Expense		6950.03 *
4/22/2020	PAY PLUS ACHTRANS 452579291 101000698716303	- 3rd Party Payor Fee		80.92
4/23/2020	PAY PLUS ACHTRANS 452579291 101000699271353	- 3rd Party Payor Fee		3.32
4/23/2020	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	-CitiBank Corporate Card Payment		391.43 **
4/24/2020	PAY PLUS ACHTRANS 452579291 101000699858069	- 3rd Party Payor Fee		0.82
4/24/2020	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense		1404.73 *
				110,154.79

Jason Anglin, CEO
Memorial Medical Center

April 27, 2020

* Approved 04.22.2020 CC
** Approved 04.15.2020 CC

PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

Date	Description	MMC Notes	Amount

Jason Anglin, CEO
Memorial Medical Center

April 27, 2020

PAY PLUS

5.37 +
0.99 +
80.92 +
3.32 +
0.82 +
91.42 *

110,154.79 +
1,568.94 –
98,174.70 –
1,573.54 –
6,950.03 –
391.43 –
1,404.73 –
91.42 *

91.42 +
91.42 –
✓ 0.00 *

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
4/27/2020

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		253,203.02	253,103.02	150,504.30		-	150,604.30	**150,504.30**
						Bank Balance	150,604.30	
						Variance	-	
						Leave in Balance	100.00	
						Pending Ck to MMC		
						MMC Portion QIPP Yr2 Adjustment		
Routing Information for Ashford Gardens:						MMC Portion QIPP 1 &2		
Ashford Health Care Center Ltd Co						MMC Portion QIPP 3,4,Lapse		
JP Morgan Chase Bank						April Interest	-	
ABA						May Interest	-	
Acco [redacted] *7*						June Interest	-	
						Adjust Balance/Transfer Amt	**150,504.30**	
Broadmoor		817,753.44	817,653.44	265,774.51		-	265,874.51	**265,774.51**
						Bank Balance	265,874.51	
						Variance	-	
						Leave in Balance	100.00	
						MMC Portion QIPP Yr2 Adjustment		
						Pending Ck to MMC		
						MMC Portion QIPP 1 &2		
						MMC Portion QIPP 3,4,Lapse		
						April Interest	-	
						May Interest	-	
						June Interest	-	
						Adjust Balance/Transfer Amt	**265,774.51**	
Crescent		850,238.86	850,138.86	203,253.77		-	203,353.77	**203,253.77**
						Bank Balance	203,353.77	
						Variance	-	
						Leave in Balance	100.00	
						MMC Portion QIPP Yr2 Adjustment		
						Pending Ck to MMC		
						MMC Portion QIPP 1 &2		
						MMC Portion QIPP 3,4,Lapse		
						April Interest	-	
						May Interest	-	
						June Interest	-	
						Adjust Balance/Transfer Amt	**203,253.77**	
Fort Bend		280,053.44	279,953.44	58,399.01		-	58,499.01	**58,399.01**
						Bank Balance	58,499.01	
						Variance	-	
						Leave in Balance	100.00	
						MMC Portion QIPP Yr2 Adjustment		
						Pending Ck to MMC		
						MMC Portion QIPP 1 &2		
						MMC Portion QIPP 3,4,Lapse		
						April Interest	-	
						May Interest	-	
						June Interest	-	
						Adjust Balance/Transfer Amt	**58,399.01**	
Solera at W Houston	2	763,382.40	763,282.40	233,662.37			233,762.37	**233,662.37**
						Bank Balance	233,762.37	
						Variance	-	
						Leave in Balance	100.00	
						Solera/Medicare Recoup withheld from MMC		
						Pending Ck to MMC		
Routing Information for Crescent / Solera at West Hou						MMC Portion QIPP Yr2 Adjustment		
Cantex Health Care Centers III LLC						MMC Portion QIPP 1 &2		
JP Morgan Chase Bank						MMC Portion QIPP 3,4,Lapse		
ABA APPROVED						April Interest	-	
Acco [redacted]						May Interest	-	
						June Interest	-	
							-	
						Adjust Balance/Transfer Amt	**233,662.37**	

150,504.30 +
265,774.51 +
203,253.77 +
58,399.01 +
233,662.37 +
911,593.96 *

TOTAL TRANSFERS	**911,593.96**

Approved:
Jason Anglin, CEO 4/27/2020

APR 27 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

F:\NH Weekly Transfers\NH UPL Transfer Summary\2020\April\NH UPL Transfer Summary 4-27-20.xlsx

Ashford Gardens

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
4/20/2020	MANAGEANDNET1718 MNS PMNT 000000000000093 41 0251312	-	5,265.00					-	5,265.00
4/20/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004171440007*1912008361*0000TEX01\	-	13,663.66					-	13,663.66
4/20/2020	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202004171350724*1912008361*0000TEX01\	-	1,793.59					-	1,793.59
4/21/2020	Amerigroup TXSC HCCLAIMPMT 3122943297 111000 TRN*1*3122943297*1752603231\	-	177.48					-	177.48
4/21/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004181350136 8*1912008361*0000TEX01\	-	1,662.34					-	1,662.34
4/21/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004181650071 7*1912008361*0000TEX01\	-	50.48					-	50.48
4/21/2020	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202004181220027 4*1912008361*0000TEX01\	-	8,024.00					-	8,024.00
4/22/2020	WIRE OUT ASHFORD HEALTH CARE CENTER LTD	253,103.02	-					-	-
4/22/2020	NOVITAS SOLUTION HCCLAIMPMT 675423 420000167 TRN*1*EFT6938112*1205296137*000004911\	-	45,286.82					-	45,286.82
4/23/2020	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202004221680080 7*1912008361*0000TEX01\	-	3,280.00					-	3,280.00
4/24/2020	Amerigroup TXSC HCCLAIMPMT 3123168884 111000 TRN*1*3123168884*1752603231\	-	25,715.98					-	25,715.98
4/24/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004231150013 1*1912008361*0000TEX01\	-	40,442.11					-	40,442.11
4/24/2020	HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2 TRN*1*05E996371326436189*1746000156~	-	5,142.84					-	5,142.84
								-	-
		253,103.02	**150,504.30**	-	-	-	-	-	**150,504.30**

Broadmoor

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
4/20/2020	Deposit	-	10,075.00					-	10,075.00
4/21/2020	NOVITAS SOLUTION HCCLAIMPMT 676357 420000179 TRN*1*EFT5541305*1205296137*000004011\	-	175,140.51					-	175,140.51
4/22/2020	WIRE OUT CANTEX HEALTH CARE CENTERS III	817,653.44	-					-	-
4/22/2020	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*9526822315*1411289245*000087726\	-	8,694.00					-	8,694.00
4/23/2020	MANAGEANDNET1718 MNS PMNT 000000000004293 41 0251375	-	14,996.05					-	14,996.05
4/23/2020	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*9527211967*1411289245*000087726\	-	5,292.00					-	5,292.00
4/23/2020	NOVITAS SOLUTION HCCLAIMPMT 676357 420000150 TRN*1*EFT5544920*1205296137*000004011\	-	1,908.19					-	1,908.19
4/24/2020	NOVITAS SOLUTION HCCLAIMPMT 676357 420000147 TRN*1*EFT5546763*1205296137*000004011\	-	27,038.62					-	27,038.62
4/24/2020	HUMANA INS CO HCCLAIMPMT 390861 830000594497 TRN*1*001290049969644*1391263473\	-	10,789.25					-	10,789.25
4/24/2020	HUMANA CHA DISB HCCLAIMPMT 390861 4200001523 TRN*1*014840101288939*1611013183\	-	7,159.72					-	7,159.72
4/24/2020	HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2 TRN*1*05E996391669860433*1746000156~	-	4,681.17					-	4,681.17
								-	-
		817,653.44	**265,774.51**	-	-	-	-	-	**265,774.51**

Crescent

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
4/20/2020	Deposit	-	27,565.84					-	27,565.84
4/20/2020	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202004171420089 4*1912008361*0000TEX01\	-	5,011.00					-	5,011.00
4/22/2020	WIRE OUT CANTEX HEALTH CARE CENTERS III	850,138.86	-					-	-
4/22/2020	NOVITAS SOLUTION HCCLAIMPMT 676323 420000166 TRN*1*EFT5543015*1205296137*000004011\	-	123,442.83					-	123,442.83
4/23/2020	UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*9527213497*1411289245*000087726\	-	1,480.00					-	1,480.00
4/23/2020	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202004221610129 8*1912008361*0000TEX01\	-	2,220.00					-	2,220.00
4/23/2020	NOVITAS SOLUTION HCCLAIMPMT 676323 420000150 TRN*1*EFT5544902*1205296137*000004011\	-	6,738.84					-	6,738.84
4/23/2020	HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2 TRN*1*05E985601669860425*1746000156~	-	2,568.11					-	2,568.11
4/24/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004231280069 5*1912008361*0000TEX01\	-	3,879.48					-	3,879.48
4/24/2020	NOVITAS SOLUTION HCCLAIMPMT 676323 420000147 TRN*1*EFT5546750*1205296137*000004011\	-	13,833.35					-	13,833.35
4/24/2020	HUMANA CHA DISB HCCLAIMPMT 390864 4200001523 TRN*1*014840101288940*1611013183\	-	16,514.32					-	16,514.32
								-	-
		850,138.86	**203,253.77**	-	-	-	-	-	**203,253.77**

Fort Bend

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
4/21/2020	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202004181570017 1*1912008361*0000TEX01\	-	404.00					-	404.00
4/22/2020	WIRE OUT CANTEX HEALTH CARE CENTERS III	279,953.44	-					-	-
4/22/2020	UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202004191140098 6*1912008361*0000TEX01\	-	5,454.00					-	5,454.00
4/22/2020	NOVITAS SOLUTION HCCLAIMPMT 675663 420000166 TRN*1*EFT5542503*1205296137*000004011\	-	40,256.92					-	40,256.92
4/24/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004231510093 9*1912008361*0000TEX01\	-	2,770.53					-	2,770.53
4/24/2020	NOVITAS SOLUTION HCCLAIMPMT 675663 420000147 TRN*1*EFT5546288*1205296137*000004011\	-	7,376.76					-	7,376.76
4/24/2020	HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2 TRN*1*05E996461730577503*1746000156~	-	2,136.80					-	2,136.80
								-	-
		279,953.44	**58,399.01**	-	-	-	-	-	**58,399.01**

Solera at West Houston

		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
4/20/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004171510049 8*1912008361*0000TEX01\	-	2,973.45					-	2,973.45
4/20/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004171480074 0*1912008361*0000TEX01\	-	11,996.68					-	11,996.68
4/21/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004181350148 1*1912008361*0000TEX01\	-	5,300.24					-	5,300.24
4/22/2020	WIRE OUT CANTEX HEALTH CARE CENTERS III	763,282.40	-					-	-
4/22/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004191070006 4*1912008361*0000TEX01\	-	926.56					-	926.56
4/22/2020	NOVITAS SOLUTION HCCLAIMPMT 676310 420000166 TRN*1*EFT5543009*1205296137*000004011\	-	192,696.76					-	192,696.76
4/22/2020	AARP Supplementa HCCLAIMPMT 746003411 124384 TRN*1*1526675730*1362739571*000036273\	-	4,224.00					-	4,224.00
4/23/2020	NOVITAS SOLUTION HCCLAIMPMT 676310 420000150 TRN*1*EFT5544895*1205296137*000004011\	-	357.96					-	357.96
4/24/2020	Amerigroup TXSC HCCLAIMPMT 3123168885 111000 TRN*1*3123168885*1752603231\	-	1,448.36					-	1,448.36
4/24/2020	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202004231080009 7*1912008361*0000TEX01\	-	13,274.88					-	13,274.88
4/24/2020	HUMANA INS CO HCCLAIMPMT 390862 830000594497 TRN*1*001290049969645*1391263473\	-	463.48					-	463.48
								-	-
								-	-
		763,282.40	**233,662.37**	-	-	-	-	-	**233,662.37**
	TOTALS	**2,964,131.16**	**911,593.96**	-	-	-	-	-	**911,593.96**

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Search All

DDA Data reported as of Apr 27, 2020 10

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
[redacted]				
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	$150,604.30	$224,414.78	$150,604.30	$79,303.37
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	$265,874.51	$273,129.51	$265,874.51	$216,205.75
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	$203,353.77	$222,848.99	$203,353.77	$169,126.62
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	$58,499.01	$76,281.24	$58,499.01	$46,214.92
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	$233,762.37	$255,126.28	$233,762.37	$218,575.65
[redacted]				

* indicates re
Page generated on 04/27/2020 at 10

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
4/27/2020

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		347,557.63	347,457.63	56,803.90	-	-	56,903.90	56,803.90
						Bank Balance	56,903.90	
						Variance	-	
						Leave in Balance	100.00	
						Pending Ck to MMC		
						MMC Portion QIPP 1 &2		
						MMC Portion QIPP 3,4,Lapse		
						April Interest	-	
						May Interest	-	
						June Interest	-	
							-	
						Adjust Balance/Transfer Amt	56,803.90	

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

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

Approved:
Jason Anglin, CEO 4/27/2020

APPROVED
ON

APR 27 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
4/20/2020	Deposit	-	45,827.54					-	45,827.54
4/20/2020	TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 543684555876917 GOLDEN CREEK HEALTHCAR 041620	-	4,706.00					-	4,706.00
4/20/2020	ACH SETTLEMENT SERVICE 4105523439 9601693683	-	1,393.32					-	1,393.32
4/22/2020	WIRE OUT NEXION HEALTH AT GOLDEN CREEK	347,457.63	-					-	-
4/24/2020	HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2 TRN*1*05E998711588075964*1746000156~	-	4,877.04					-	4,877.04
								-	-
		347,457.63	56,803.90	-	-	-	-	-	56,803.90

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Search All

DDA Data reported as of Apr 27, 2020 10

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
[redacted]				
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$56,903.90	$56,903.90	$56,903.90	$52,026.86
[redacted]				

* indicates re
Page generated on 04/27/2020 at 10

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
4/27/2020

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
Gulf Pointe Plaza- Private Pay	-	2,208.37	-	-		-	-	2,208.37	-
							Bank Balance	2,208.37	No Transfer
							Variance	-	
							Leave in Balance	100.00	
							Pending Ck to MMC		
							MMC Portion QIPP 1 &2		
							MMC Portion QIPP 3,4,Lapse		
							April Interest	-	
							May Interest	-	
							June Interest	-	
							Adjust Balance/Transfer Amt	2,108.37	

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
Gulf Pointe Plaza-Medicare/Medicaid		6,826.47	6,726.47	66,629.64		-	-	66,729.64	66,629.64
							Bank Balance	66,729.64	
							Variance	-	
							Leave in Balance	100.00	
							MMC Portion QIPP 1 &2	-	
							MMC Portion QIPP 3,4,Lapse	-	
							April Interest	-	
							May Interest	-	
							June Interest	-	
							Adjust Balance/Transfer Amt	66,629.64	
						TOTAL TRANSFERS		66,629.64	

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:
Jason Anglin, CEO 4/27/2020

APPROVED
ON
APR 27 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
							-	-
							-	-
	-	-	-	-	-	-	-	-

Gulf Pointe Plaza-Medicare/Medicaid	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
4/20/2020 Deposit	-	37,133.45					-	37,133.45
4/20/2020 CENTENE CORP HCCLAIMPMT 61000103568187 TRN*1*0905688915*1742770	-	6,864.21					-	6,864.21
4/22/2020 WIRE OUT HMG SERVICES, LLC	6,726.47	-					-	-
4/23/2020 NORIDIAN J3A HCCLAIMPMT 675892 4200001761105 TRN*1*EFT6907862*145	-	10,040.61					-	10,040.61
4/24/2020 HEALTH HUMAN SVC HCCLAIMPMT 174600341130132 TRN*1*0SF0012119220	-	12,591.37					-	12,591.37
	6,726.47	66,629.64	-	-	-	-	-	66,629.64
	6,726.47	66,629.64	-	-	-	-	-	66,629.64

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Search All

DDA Data reported as of Apr 27, 2020 10

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
[redacted]				
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$66,729.64	$279,023.24	$66,729.64	$54,138.27
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$2,208.37	$2,208.37	$2,208.37	$2,208.37
[redacted]				

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Page generated on 04/27/2020 at 10