# MEMORIAL MEDICAL CENTER

## COMMISSIONERS COURT APPROVAL LIST FOR ---November 10, 2020

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

| | |
|---|---|
| TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS | $ 1,039,029.95 |
| TOTAL TRANSFERS BETWEEN FUNDS | $ 276,296.68 |
| TOTAL NURSING HOME UPL EXPENSES | $ 528,550.75 |
| TOTAL INTER-GOVERNMENT TRANSFERS | $ - |
| GRAND TOTAL DISBURSEMENTS APPROVED November 10, 2020 | $ 1,843,877.38 |

APPROVED

NOV 10 2020

CALHOUN COUNTY
COMMISSIONERS COURT

# MEMORIAL MEDICAL CENTER

## COMMISSIONERS COURT APPROVAL LIST FOR ---November 10, 2020

### PAYABLES AND PAYROLL

| | | | |
|---|---|---|---|
| 11/6/2020 | Weekly Payables | 413,686.74 | |
| 11/9/2020 | Maria Del Carmen Herrea-insurance reimbursement | 119.18 | |
| 11/9/2020 | Nadine Garner-insurance reimbursement | 314.18 | |
| 11/9/2020 | Anna-Haga-insurance reimbursement | 130.00 | |
| 11/9/2020 | Amerisource Bergen-340B Prescription Expense | 50.52 | |
| 11/9/2020 | Payroll Liabilities -Payroll Taxes | 100,580.23 | |
| 11/9/2020 | Payroll | 306,488.43 | |
| | **Prosperity Electronic Bank Payments** | | |
| 10/13-11/5/20 | Credit Card & Lease Fees | 5,692.26 | |
| 11/15/2020 | TCDRS October Retirement | 211,641.33 | |
| 11/2-11/4/2020 | Pay Plus-Patient Claims Processing Fee | 305.08 | |
| 11/3/2020 | Authnet Gateway Billing-3rd Party Payor Fee | 22.00 | |
| **TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS** | | | **$ 1,039,029.95** |

### TRANSFER BETWEEN FUNDS-NURSING HOMES

| | | | |
|---|---|---|---|
| 11/6/2020 | MMC Operating to Broadmoor-correction of NH insurance payment deposited into MMC Operating | 3,870.00 | |
| 11/6/2020 | MMC Operating to The Crescent-correction of NH insurance payment deposited into MMC Operating | 1,900.00 | |
| 11/6/2020 | MMC Operating to Golden Creek Healthcare-correction of NH insurance payment deposited into MMC Operating | 52,250.72 | |
| 11/6/2020 | MMC Operating to Gulf Pointe Plaza-correction of NH insurance payment deposited into MMC Operating | 39,556.49 | |
| 11/6/2020 | MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating | 103,790.33 | |
| 11/6/2020 | MMC Operating to Bethany Senior Living- correction of NH insurance payment deposited into MMC Operating | 74,929.14 | |
| **TOTAL TRANSFERS BETWEEN FUNDS** | | | **$ 276,296.68** |

### NURSING HOME UPL EXPENSES

| | | | |
|---|---|---|---|
| 11/9/2020 | Nursing Home UPL-Cantex Transfer | 252,710.63 | |
| 11/9/2020 | Nursing Home UPL-Nexion Transfer | 48,741.51 | |
| 11/9/2020 | Nursing Home UPL-HMG Transfer | 20,763.17 | |
| 11/9/2020 | Nursing Home UPL-Tuscany Transfer | 25,130.50 | |
| 11/9/2020 | Nursing Home UPL-HSL Transfer | 50,755.07 | |

### QIPP/INTEREST/RECOUP CHECKS TO MMC

| | | | |
|---|---|---|---|
| 11/9/2020 | Ashford | 44,718.60 | |
| 11/9/2020 | Broadmoor | 17,785.69 | |
| 11/9/2020 | Crescent | 14,362.33 | |
| 11/9/2020 | Fort Bend | 18,129.65 | |
| 11/9/2020 | Solera | 17,014.90 | |
| 11/9/2020 | Tuscany | 18,438.70 | |
| **TOTAL NURSING HOME UPL EXPENSES** | | | **$ 528,550.75** |

**TOTAL INTER-GOVERNMENT TRANSFERS** **$ -**

**GRAND TOTAL DISBURSEMENTS APPROVED November 10, 2020** **$ 1,843,877.38**

RECEIVED
11/05/2020
12:58 NOV 06 2020
Carroll County Auditor

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 11/25/2020



| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 11283 | ACE HARDWARE 15521 | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 148360 | SUPPLIES | 10/30/2020 | 10/01/2020 | 10/26/2020 | | | 69.97 | 0.00 | 0.00 | 69.97 |
| 148520 | SUPPLIES | 10/30/2020 | 10/07/2020 | 11/01/2020 | | | 15.93 | 0.00 | 0.00 | 15.93 |
| 148736 | SUPPLIES | 10/30/2020 | 10/14/2020 | 11/08/2020 | | | 179.99 | 0.00 | 0.00 | 179.99 |
| 148882 | SUPPLIES | 10/30/2020 | 10/19/2020 | 11/13/2020 | | | 13.16 | 0.00 | 0.00 | 13.16 |
| 148902 | SUPPLIES | 10/30/2020 | 10/20/2020 | 11/14/2020 | | | 75.98 | 0.00 | 0.00 | 75.98 |
| 148900 | SUPPLIES | 10/30/2020 | 10/20/2020 | 11/14/2020 | | | 5.99 | 0.00 | 0.00 | 5.99 |
| 148985 | SUPPLIES | 10/30/2020 | 10/22/2020 | 11/16/2020 | | | 19.96 | 0.00 | 0.00 | 19.96 |
| 149009 | SUPPLIES | 10/30/2020 | 10/23/2020 | 11/17/2020 | | | 27.03 | 0.00 | 0.00 | 27.03 |
| 149044 | INVENTORY | 10/30/2020 | 10/26/2020 | 11/20/2020 | | | 15.92 | 0.00 | 0.00 | 15.92 |
| 149108 | SUPPLIES | 10/30/2020 | 10/28/2020 | 11/22/2020 | | | 433.97 | 0.00 | 0.00 | 433.97 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 11283 | ACE HARDWARE 15 | 857.90 | 0.00 | 0.00 | 857.90 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 10950 | ACUTE CARE INC | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 25170 | RFID | 10/31/2020 | 10/20/2020 | 10/30/2020 | | | 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 |
|---|---|---|---|
| A1680 | AIRGAS USA, LLC - CENTRAL DIV | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 9106009818 | OXYGEN | 10/30/2020 | 10/12/2020 | 11/06/2020 | | | 178.69 | 0.00 | 0.00 | 178.69 |
| 9106170614 | OXYGEN | 10/30/2020 | 10/16/2020 | 11/10/2020 | | | 3,075.11 | 0.00 | 0.00 | 3,075.11 |
| 9106373541 | OXYGEN | 10/31/2020 | 10/22/2020 | 11/16/2020 | | | 229.84 | 0.00 | 0.00 | 229.84 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | A1680 | AIRGAS USA, LLC - | 3,483.64 | 0.00 | 0.00 | 3,483.64 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 10592 | AMERICAN PROFICIENCY INSTITU | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 563074 | RENEWAL | 10/20/2020 | 09/14/2020 | 10/09/2020 | | | 1,177.00 | 0.00 | 0.00 | 1,177.00 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 10592 | AMERICAN PROFIC | 1,177.00 | 0.00 | 0.00 | 1,177.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| A2271 | ARTHREX, INC | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 910930561 | SUPPLIES | 10/31/2020 | 10/21/2020 | 11/04/2020 | | | 604.78 | 0.00 | 0.00 | 604.78 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | A2271 | ARTHREX, INC | 604.78 | 0.00 | 0.00 | 604.78 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13516 | AVANTE HEALTH SOULTIONS | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| AR0006585 | | 10/30/2020 | 10/20/2020 | 11/19/2020 | | | 1,777.23 | 0.00 | 0.00 | 1,777.23 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 13516 | AVANTE HEALTH S | 1,777.23 | 0.00 | 0.00 | 1,777.23 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| B0435 | BARD PERIPHERAL VASCULAR | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 81627476 | | 10/28/2020 | 10/12/2020 | 11/20/2020 | | | 109.04 | 0.00 | 0.00 | 109.04 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | B0435 | BARD PERIPHERAL | 109.04 | 0.00 | 0.00 | 109.04 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| B1150 | BAXTER HEALTHCARE | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 68575871 | | 10/31/2020 | 10/22/2020 | 11/16/2020 | | | 410.66 | 0.00 | 0.00 | 410.66 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | B1150 | BAXTER HEALTHC/ | 410.66 | 0.00 | 0.00 | 410.66 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| M2485 | BAYER HEALTHCARE | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 6008903282 | | 10/31/2020 | 10/20/2020 | 11/04/2020 | | | 1,439.75 | 0.00 | 0.00 | 1,439.75 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | M2485 | BAYER HEALTHCAI | 1,439.75 | 0.00 | 0.00 | 1,439.75 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| B1220 | BECKMAN COULTER INC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 108661173 | | 10/31/2020 | 10/01/2020 | 10/26/2020 | | | 135.28 | 0.00 | 0.00 | 135.28 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | B1220 | BECKMAN COULTE | 135.28 | 0.00 | 0.00 | 135.28 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| B1320 | BEEKLEY CORPORATION | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| INV1385826 | | 10/31/2020 | 10/21/2020 | 11/04/2020 | | | 936.95 | 0.00 | 0.00 | 936.95 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | B1320 | BEEKLEY CORPOR | 936.95 | 0.00 | 0.00 | 936.95 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 10599 | BKD, LLP | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| BK01291697 | | 10/31/2020 | 10/19/2020 | 11/13/2020 | | | 3,900.00 | 0.00 | 0.00 | 3,900.00 |
| | CONSULTING TRI CARE/NOVITAS/ | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 10599 | BKD, LLP | 3,900.00 | 0.00 | 0.00 | 3,900.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| B1601 | BOHLS BEARING & POWER TRANS | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 264975 | | 10/30/2020 | 10/27/2020 | 10/27/2020 | | | 84.24 | 0.00 | 0.00 | 84.24 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | B1601 | BOHLS BEARING & | 84.24 | 0.00 | 0.00 | 84.24 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| C1048 | CALHOUN COUNTY | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 102420 | | 10/31/2020 | 10/24/2020 | 11/18/2020 | | | 70.30 | 0.00 | 0.00 | 70.30 |
| | FUEL | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | C1048 | CALHOUN COUNTY | 70.30 | | 0.00 | 0.00 | 70.30 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13028 | CAVALLO ENERGY TEXAS LLC | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 2029000036 | | 10/20/2020 | 10/15/2020 | 11/16/2020 | | | 552.14 | 0.00 | 0.00 | 552.14 |
| | 6074 | ENERGY BILL 167647 | | | | | | | | |
| 2029000036 | | 10/20/2020 | 10/15/2020 | 11/16/2020 | | | 18.28 | 0.00 | 0.00 | 18.28 |
| | 6075 | ENERGY BILL 167653 | | | | | | | | |
| 2029400036 | | 10/31/2020 | 10/15/2020 | 11/19/2020 | | | 1,192.43 | 0.00 | 0.00 | 1,192.43 |
| | 8977 | ENERGY BILL 167636 | | | | | | | | |
| 2029400363 | | 10/31/2020 | 10/19/2020 | 11/19/2020 | | | 7.66 | 0.00 | 0.00 | 7.66 |
| | 8978 | ENERGY BILL 167662 | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 13028 | CAVALLO ENERGY | 1,770.51 | | 0.00 | 0.00 | 1,770.51 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 12768 | CHEMAQUA | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 7129100 | | 10/20/2020 | 10/10/2020 | 10/20/2020 | | | 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# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 10105 | CHRIS KOVAREK | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 11/02/20 | | 11/03/2020 | 11/02/2020 | 11/02/2020 | | | 320.00 | 0.00 | 0.00 | 320.00 |
| | | SWING BED | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10105 | CHRIS KOVAREK | 320.00 | | 0.00 | 0.00 | 320.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| C1600 | CITIZENS MEDICAL CENTER | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 092520A | | 10/20/2020 | 09/25/2020 | 09/25/2020 | | | 82.78 | 0.00 | 0.00 | 82.78 |
| | | BLS RECERTIFICATION | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | C1600 | CITIZENS MEDICAL | 82.78 | | 0.00 | 0.00 | 82.78 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13000 | CLEARFLY | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| INV315146 | | 11/04/2020 | 11/01/2020 | 11/15/2020 | | | 990.46 | 0.00 | 0.00 | 990.46 |
| | | PHONES | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 13000 | CLEARFLY | 990.46 | | 0.00 | 0.00 | 990.46 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| C1166 | COASTAL OFFICE SOLUTONS | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| OE297431 | | 10/31/2020 | 10/30/2020 | 11/09/2020 | | | 159.80 | 0.00 | 0.00 | 159.80 |
| | | SUPPLIES | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | C1166 | COASTAL OFFICE S | 159.80 | | 0.00 | 0.00 | 159.80 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 11030 | COMBINED INSURANCE | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 102620 | | 10/31/2020 | 10/26/2020 | 11/01/2020 | | | 877.94 | 0.00 | 0.00 | 877.94 |
| | | INSURANCE | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 11030 | COMBINED INSURA | 877.94 | | 0.00 | 0.00 | 877.94 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| L1430 | CONMED LINVATEC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 3487426 | | 10/31/2020 | 10/23/2020 | 11/04/2020 | | | 37.60 | 0.00 | 0.00 | 37.60 |

SUPPLIES

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

Vendor# C2157 — Vendor Name: COOPER SURGICAL INC — Class: M — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 5637414 | | 10/28/2020 | 10/14/2020 | 10/28/2020 | | | 527.81 | 0.00 | 0.00 | 527.81 |
| | SUPPLIES | | | | | | | | | |
| 5649480 | | 10/31/2020 | 10/27/2020 | 11/04/2020 | | | 1,416.83 | 0.00 | 0.00 | 1,416.83 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | C2157 | COOPER SURGICAL | 1,944.64 | | 0.00 | 0.00 | 1,944.64 |

Vendor# C1443 — Vendor Name: CYGNUS MEDICAL LLC — Class: M — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 324026 | | 10/31/2020 | 10/26/2020 | 11/25/2020 | | | 450.00 | 0.00 | 0.00 | 450.00 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | C1443 | CYGNUS MEDICAL | 450.00 | | 0.00 | 0.00 | 450.00 |

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

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 10389 | | 11/04/2020 | 11/01/2020 | 11/01/2020 | | | 550.00 | 0.00 | 0.00 | 550.00 |
| | PROCESSING/SUPPORT FEE | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 12612 | DASHBOARD MD | 550.00 | | 0.00 | 0.00 | 550.00 |

Vendor# 10368 — Vendor Name: DEWITT POTH & SON — Class: — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 6233770 | | 10/30/2020 | 10/26/2020 | 11/20/2020 | | | 380.00 | 0.00 | 0.00 | 380.00 |
| | SUPPLIES | | | | | | | | | |
| 6237350 | | 10/30/2020 | 10/28/2020 | 11/22/2020 | | | 591.75 | 0.00 | 0.00 | 591.75 |
| | SUPPLIES | | | | | | | | | |
| 62374340 | | 10/30/2020 | 10/28/2020 | 11/22/2020 | | | 11.76 | 0.00 | 0.00 | 11.76 |
| | SUPPLIES | | | | | | | | | |
| 6238060 | | 10/30/2020 | 10/30/2020 | 11/24/2020 | | | 21.15 | 0.00 | 0.00 | 21.15 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10368 | DEWITT POTH & SC | 1,004.66 | | 0.00 | 0.00 | 1,004.66 |

Vendor# 11011 — Vendor Name: DIAMOND HEALTHCARE CORP — Class: — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| IN20054170 | | 10/31/2020 | 10/30/2020 | 11/24/2020 | | | 31,144.58 | 0.00 | 0.00 | 31,144.58 |
| | BEV HEALTH | | | | | | | | | |
| IN20054171 | | 10/31/2020 | 10/30/2020 | 11/24/2020 | | | 19,166.67 | 0.00 | 0.00 | 19,166.67 |
| | CPR | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 11011 | DIAMOND HEALTH | 50,311.25 | | 0.00 | 0.00 | 50,311.25 |

Vendor# 10789 — Vendor Name: DISCOVERY MEDICAL NETWORK — Class: — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| MMC103120 | | 10/31/2020 | 10/31/2020 | 10/31/2020 | | | 139,301.91 | 0.00 | 0.00 | 139,301.91 |
| | PRO FEES OCT 15-31, 2020 | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10789 | DISCOVERY MEDIC | 139,301.91 | | 0.00 | 0.00 | 139,301.91 |

Vendor# E0500 — Vendor Name: EAGLE FIRE & SAFETY INC — Class: M — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 80919 | | 10/30/2020 | 10/26/2020 | 10/26/2020 | | | 127.75 | 0.00 | 0.00 | 127.75 |
| | ANNUAL VENT HOOD INSPECTION | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|

E0500 EAGLE FIRE & SAFI 127.75 0.00 0.00 127.75

Vendor# 11284 Vendor Name EMERGENCY STAFFING SOLUTIO Class Pay Code

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 39687 | PRO FEES ER/SHORT FALL | 10/31/2020 | 10/30/2020 | 11/08/2020 | | | 50,500.00 | 0.00 | 0.00 | 50,500.00 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 11284 | EMERGENCY STAF | 50,500.00 | 0.00 | 0.00 | 50,500.00 |

Vendor# S0501 Vendor Name EVOQUA WATER TECHNOLOGIES Class Pay Code

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 904649646 | SUPPLIES | 10/31/2020 | 10/16/2020 | 11/10/2020 | | | 1,376.70 | 0.00 | 0.00 | 1,376.70 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | S0501 | EVOQUA WATER TI | 1,376.70 | 0.00 | 0.00 | 1,376.70 |

Vendor# F1106 Vendor Name FDA-MQSA PROGRAM Class Pay Code

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 1745400025 | ANNUAL INSPECTION | 10/31/2020 | 10/19/2020 | 11/18/2020 | | | 548.00 | 0.00 | 0.00 | 548.00 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | F1106 | FDA-MQSA PROGR | 548.00 | 0.00 | 0.00 | 548.00 |

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

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 716548697 | SHIPPING | 10/30/2020 | 10/29/2020 | 11/23/2020 | | | 30.38 | 0.00 | 0.00 | 30.38 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | F1100 | FEDERAL EXPRESS | 30.38 | 0.00 | 0.00 | 30.38 |

Vendor# 10788 Vendor Name FIRETROL PROTECTION SYSTEMS Class Pay Code

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 100683718 | LABOR/TRIP CHARGE | 10/30/2020 | 10/28/2020 | 11/07/2020 | | | 380.00 | 0.00 | 0.00 | 380.00 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 10788 | FIRETROL PROTEC | 380.00 | 0.00 | 0.00 | 380.00 |

Vendor# F1400 Vendor Name FISHER HEALTHCARE Class M Pay Code

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 0557157 | SUPPLIES | 10/20/2020 | 10/07/2020 | 11/01/2020 | | | 650.06 | 0.00 | 0.00 | 650.06 |
| 0875738 | SUPPLIES | 10/20/2020 | 10/12/2020 | 11/06/2020 | | | 3.30 | 0.00 | 0.00 | 3.30 |
| 0999821 | SUPPLIES | 10/20/2020 | 10/13/2020 | 11/07/2020 | | | 366.26 | 0.00 | 0.00 | 366.26 |
| 1114699 | SUPPLIES | 10/20/2020 | 10/14/2020 | 11/08/2020 | | | 83.40 | 0.00 | 0.00 | 83.40 |
| 1421124 | SUPPLIES | 10/20/2020 | 10/19/2020 | 11/13/2020 | | | 672.81 | 0.00 | 0.00 | 672.81 |
| 0658736 | SUPPLIES | 10/27/2020 | 10/08/2020 | 11/02/2020 | | | 2,812.45 | 0.00 | 0.00 | 2,812.45 |
| 1705083 | SUPPLIES | 10/31/2020 | 10/22/2020 | 11/16/2020 | | | 119.77 | 0.00 | 0.00 | 119.77 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | F1400 | FISHER HEALTHCA | 4,708.05 | 0.00 | 0.00 | 4,708.05 |

Vendor# 13060 Vendor Name GENZYME CORPORATION Class Pay Code

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 7030083676 | INVENTORY | 08/19/2020 | 08/13/2020 | 11/21/2020 | | | 535.41 | 0.00 | 0.00 | 535.41 |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 13060 | GENZYME CORPOF | 535.41 | | 0.00 | | 0.00 | | 535.41 |

Vendor# G1001 — Vendor Name: GETINGE USA — Class: — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 6991428636 | 10/31/2020 | 10/26/2020 | 11/04/2020 | | | | 96.46 | 0.00 | 0.00 | 96.46 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | G1001 | GETINGE USA | 96.46 | | 0.00 | 0.00 | 96.46 |

Vendor# 10956 — Vendor Name: GETINGE USA SALES LLC — Class: — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 6991428635 | 10/31/2020 | 10/26/2020 | 11/04/2020 | | | | 63.87 | 0.00 | 0.00 | 63.87 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10956 | GETINGE USA SALE | 63.87 | | 0.00 | 0.00 | 63.87 |

Vendor# W1300 — Vendor Name: GRAINGER — Class: M — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 9692056196 | 10/30/2020 | 10/21/2020 | 11/15/2020 | | | | 650.24 | 0.00 | 0.00 | 650.24 |
| | SUPPLIES | | | | | | | | | |
| 9685628886 | 10/31/2020 | 10/15/2020 | 11/09/2020 | | | | 102.85 | 0.00 | 0.00 | 102.85 |
| | SUPPLIES | | | | | | | | | |
| 9686450140 | 10/31/2020 | 10/15/2020 | 11/09/2020 | | | | 1,398.76 | 0.00 | 0.00 | 1,398.76 |
| | SUPPLIES | | | | | | | | | |
| 9685887862 | 10/31/2020 | 10/15/2020 | 11/09/2020 | | | | 20.57 | 0.00 | 0.00 | 20.57 |
| | SUPPLIES | | | | | | | | | |
| 9685628878 | 10/31/2020 | 10/15/2020 | 11/09/2020 | | | | 308.55 | 0.00 | 0.00 | 308.55 |
| | SUPPLIES | | | | | | | | | |
| 9686488033 | 10/31/2020 | 10/16/2020 | 11/10/2020 | | | | 20.57 | 0.00 | 0.00 | 20.57 |
| | SUPPLIES | | | | | | | | | |
| 9686868663 | 10/31/2020 | 10/16/2020 | 11/10/2020 | | | | 658.24 | 0.00 | 0.00 | 658.24 |
| | SUPPLIES | | | | | | | | | |
| 9965988528 | 10/31/2020 | 10/26/2020 | 11/20/2020 | | | | 1,028.50 | 0.00 | 0.00 | 1,028.50 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | W1300 | GRAINGER | 4,188.28 | | 0.00 | 0.00 | 4,188.28 |

Vendor# G0401 — Vendor Name: GULF COAST DELIVERY — Class: — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020 | 10/20/2020 | 10/30/2020 | 10/30/2020 | | | | 75.00 | 0.00 | 0.00 | 75.00 |
| | DELIVERY (807463-807485) | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | G0401 | GULF COAST DELI | 75.00 | | 0.00 | 0.00 | 75.00 |

Vendor# G1210 — Vendor Name: GULF COAST PAPER COMPANY — Class: M — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 1946603 (1950813) | 10/31/2020 | 10/20/2020 | 11/19/2020 | | | | 38.50 | 0.00 | 0.00 | 38.50 |
| | SUPPLIES | | | | | | | | | |
| 1946606 | 10/31/2020 | 10/20/2020 | 11/19/2020 | | | | 400.95 | 0.00 | 0.00 | 400.95 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | G1210 | GULF COAST PAPE | 439.45 | | 0.00 | 0.00 | 439.45 |

Vendor# 11784 — Vendor Name: HALF LEAGUE STORAGE — Class: — Pay Code:

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 102820 | 10/30/2020 | 10/28/2020 | 10/28/2020 | | | | 360.00 | 0.00 | 0.00 | 360.00 |
| | UNITS 11,12,35 NOV-JAN | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 11784 | HALF LEAGUE STO | 360.00 | | 0.00 | 0.00 | 360.00 |

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

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 307760629 | 10/30/2020 | 10/21/2020 | 11/15/2020 | | | | 29.52 | 0.00 | 0.00 | 29.52 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10334 | HEALTH CARE LOG | 29.52 | | 0.00 | 0.00 | 29.52 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 12380 | HEALTH SOLUTIONS DIETETICS | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020 | 10/31/2020 | 10/30/2020 | 10/30/2020 | | | | 3,750.00 | 0.00 | 0.00 | 3,750.00 |
| | DIETICAN (10/2-10/30/20) | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 12380 | HEALTH SOLUTION | 3,750.00 | | 0.00 | 0.00 | 3,750.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| H0416 | HOLOGIC INC | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 9497761 | 10/31/2020 | 10/22/2020 | 11/04/2020 | | | | 472.50 | 0.00 | 0.00 | 472.50 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | H0416 | HOLOGIC INC | 472.50 | | 0.00 | 0.00 | 472.50 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 12228 | INNOVATIVE STERILIZATION | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 20303 | 10/31/2020 | 10/27/2020 | 11/04/2020 | | | | 821.63 | 0.00 | 0.00 | 821.63 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 12228 | INNOVATIVE STERI | 821.63 | | 0.00 | 0.00 | 821.63 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| I1260 | INTOXIMETERS INC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 666804 | 10/31/2020 | 10/27/2020 | 11/21/2020 | | | | 205.25 | 0.00 | 0.00 | 205.25 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | I1260 | INTOXIMETERS INC | 205.25 | | 0.00 | 0.00 | 205.25 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| J0150 | J & J HEALTH CARE SYSTEMS, INC | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 923482464 | 10/31/2020 | 10/19/2020 | 11/18/2020 | | | | 200.48 | 0.00 | 0.00 | 200.48 |
| | SUPPLIES | | | | | | | | | |
| 923501318 | 10/31/2020 | 10/20/2020 | 11/19/2020 | | | | 511.45 | 0.00 | 0.00 | 511.45 |
| | SUPPLIES | | | | | | | | | |
| 923545281 | 10/31/2020 | 10/26/2020 | 11/25/2020 | | | | 876.58 | 0.00 | 0.00 | 876.58 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | J0150 | J & J HEALTH CARE | 1,588.51 | | 0.00 | 0.00 | 1,588.51 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 12024 | JAMIE NEYLAND | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 110320 | 11/04/2020 | 11/03/2020 | 11/03/2020 | | | | 35.00 | 0.00 | 0.00 | 35.00 |
| | NRP COURCE REIMBURSEMENT | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 12024 | JAMIE NEYLAND | 35.00 | | 0.00 | 0.00 | 35.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| K1070 | KEY SURGICAL INC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 1481331 | 10/28/2020 | 10/13/2020 | 10/28/2020 | | | | 43.00 | 0.00 | 0.00 | 43.00 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | K1070 | KEY SURGICAL INC | 43.00 | | 0.00 | 0.00 | 43.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| M2178 | MCKESSON MEDICAL SURGICAL I | | |

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 14664423 | 10/31/2020 | 10/20/2020 | 11/04/2020 | | | 1,354.41 | 0.00 | 0.00 | 1,354.41 |
| | SUPPLIES | | | | | | | | |
| 14673977 | 10/31/2020 | 10/20/2020 | 11/04/2020 | | | 419.84 | 0.00 | 0.00 | 419.84 |
| | SUPPLIES | | | | | | | | |
| 14950755 | 10/31/2020 | 10/27/2020 | 11/11/2020 | | | 3,186.19 | 0.00 | 0.00 | 3,186.19 |
| | SUPPLIES | | | | | | | | |
| 14965283 | 10/31/2020 | 10/27/2020 | 11/11/2020 | | | 299.71 | 0.00 | 0.00 | 299.71 |
| | SUPPLIES | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | M2178 | MCKESSON MEDIC | 5,260.15 | | 0.00 | 0.00 | 5,260.15 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| M2470 | MEDLINE INDUSTRIES INC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 1926475867 | | 10/27/2020 | 10/07/2020 | 11/01/2020 | | | 38.08 | 0.00 | 0.00 | 38.08 |
| | SUPPLIES | | | | | | | | | |
| 1927601513 | | 10/27/2020 | 10/15/2020 | 11/09/2020 | | | 119.12 | 0.00 | 0.00 | 119.12 |
| | SUPPLIES | | | | | | | | | |
| 1928054007 | | 10/27/2020 | 10/27/2020 | 11/21/2020 | | | 188.42 | 0.00 | 0.00 | 188.42 |
| | SUPPLIES | | | | | | | | | |
| 1877878126 | | 10/30/2020 | 05/24/2019 | 06/18/2019 | | | 82.18 | 0.00 | 0.00 | 82.18 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | M2470 | MEDLINE INDUSTR | 427.80 | | 0.00 | 0.00 | 427.80 |

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

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 102920 | | 10/20/2020 | 10/29/2020 | 10/29/2020 | | | 272.95 | 0.00 | 0.00 | 272.95 |
| | PAYROLL DED | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | M2621 | MMC AUXILIARY GI | 272.95 | | 0.00 | 0.00 | 272.95 |

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

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 5791 | | 10/20/2020 | 10/28/2020 | 11/07/2020 | | | -13.69 | 0.00 | 0.00 | -13.69 |
| | CREDIT | | | | | | | | | |
| 6223057 | | 10/20/2020 | 10/28/2020 | 11/07/2020 | | | 448.02 | 0.00 | 0.00 | 448.02 |
| | INVENTORY | | | | | | | | | |
| 6222925 | | 10/20/2020 | 10/28/2020 | 11/07/2020 | | | 33.47 | 0.00 | 0.00 | 33.47 |
| | INVENTORY | | | | | | | | | |
| 6223058 | | 10/20/2020 | 10/28/2020 | 11/07/2020 | | | 6,513.44 | 0.00 | 0.00 | 6,513.44 |
| | INVENTORY | | | | | | | | | |
| 5718 | | 10/20/2020 | 10/28/2020 | 11/07/2020 | | | -5.00 | 0.00 | 0.00 | -5.00 |
| | CREDIT | | | | | | | | | |
| 6223059 | | 10/20/2020 | 10/28/2020 | 11/07/2020 | | | 857.79 | 0.00 | 0.00 | 857.79 |
| | INVENTORY | | | | | | | | | |
| 6235201 | | 10/20/2020 | 11/02/2020 | 11/12/2020 | | | 1,505.40 | 0.00 | 0.00 | 1,505.40 |
| | INVENTORY | | | | | | | | | |
| SC6201 | | 10/30/2020 | 10/26/2020 | 11/05/2020 | | | 25.49 | 0.00 | 0.00 | 25.49 |
| | INVENTORY | | | | | | | | | |
| 6226327 | | 10/30/2020 | 10/29/2020 | 11/08/2020 | | | 38.60 | 0.00 | 0.00 | 38.60 |
| | INVENTORY | | | | | | | | | |
| 6226328 | | 10/30/2020 | 10/29/2020 | 11/08/2020 | | | 305.31 | 0.00 | 0.00 | 305.31 |
| | INVENTORY | | | | | | | | | |
| 6226161 | | 10/30/2020 | 10/29/2020 | 11/08/2020 | | | 180.45 | 0.00 | 0.00 | 180.45 |
| | INVENTORY | | | | | | | | | |
| 6226329 | | 10/30/2020 | 10/29/2020 | 11/08/2020 | | | 289.50 | 0.00 | 0.00 | 289.50 |
| | INVENTORY | | | | | | | | | |
| 6227182 | | 10/30/2020 | 10/29/2020 | 11/08/2020 | | | 188.21 | 0.00 | 0.00 | 188.21 |
| | INVENTORY | | | | | | | | | |
| 6227183 | | 10/30/2020 | 10/29/2020 | 11/08/2020 | | | 55.92 | 0.00 | 0.00 | 55.92 |
| | INVENTORY | | | | | | | | | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 6238164 | 11/02/2020 | 11/02/2020 | 11/12/2020 | | | 137.22 | 0.00 | 0.00 | 137.22 |
| | INVENTORY | | | | | | | | |
| 6232833 | 11/03/2020 | 11/01/2020 | 11/11/2020 | | | 78.48 | 0.00 | 0.00 | 78.48 |
| | INVENTORY | | | | | | | | |
| 6233754 | 11/03/2020 | 11/01/2020 | 11/11/2020 | | | 382.81 | 0.00 | 0.00 | 382.81 |
| | INVENTORY | | | | | | | | |
| 6233755 | 11/03/2020 | 11/01/2020 | 11/11/2020 | | | 160.38 | 0.00 | 0.00 | 160.38 |
| | INVENTORY | | | | | | | | |
| 6231632 | 11/03/2020 | 11/01/2020 | 11/11/2020 | | | 300.27 | 0.00 | 0.00 | 300.27 |
| | INVENTORY | | | | | | | | |
| 6233753 | 11/03/2020 | 11/01/2020 | 11/11/2020 | | | 57.73 | 0.00 | 0.00 | 57.73 |
| | INVENTORY | | | | | | | | |
| 6238163 | 11/03/2020 | 11/02/2020 | 11/12/2020 | | | 490.03 | 0.00 | 0.00 | 490.03 |
| | INVENTORY | | | | | | | | |
| 6238162 | 11/03/2020 | 11/02/2020 | 11/12/2020 | | | 48.01 | 0.00 | 0.00 | 48.01 |
| | INVENTORY | | | | | | | | |
| 6240325 | 11/03/2020 | 11/03/2020 | 11/13/2020 | | | 137.39 | 0.00 | 0.00 | 137.39 |
| | INVENTORY | | | | | | | | |
| 6240323 | 11/03/2020 | 11/03/2020 | 11/13/2020 | | | 95.41 | 0.00 | 0.00 | 95.41 |
| | INVENTORY | | | | | | | | |
| 6240326 | 11/03/2020 | 11/03/2020 | 11/13/2020 | | | 2.03 | 0.00 | 0.00 | 2.03 |
| | INVENTORY | | | | | | | | |
| 6240324 | 11/03/2020 | 11/03/2020 | 11/13/2020 | | | 932.10 | 0.00 | 0.00 | 932.10 |
| | INVENTORY | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10536 | MORRIS & DICKSOI | 13,244.77 | | 0.00 | 0.00 | 13,244.77 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| M2659 | MXR IMAGING, INC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 8800681183 | | 10/31/2020 | 10/22/2020 | 11/21/2020 | | | 1,223.30 | 0.00 | 0.00 | 1,223.30 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | M2659 | MXR IMAGING, INC | 1,223.30 | | 0.00 | 0.00 | 1,223.30 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 12388 | NATIONAL FARM LIFE INSURANCE | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 3280986 | | 10/31/2020 | 10/31/2020 | 11/01/2020 | | | 4,101.52 | 0.00 | 0.00 | 4,101.52 |
| | INSURANCE | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 12388 | NATIONAL FARM LI | 4,101.52 | | 0.00 | 0.00 | 4,101.52 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| O1500 | OLYMPUS AMERICA INC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 99950962 | | 10/31/2020 | 10/27/2020 | 11/21/2020 | | | 588.81 | 0.00 | 0.00 | 588.81 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | O1500 | OLYMPUS AMERIC/ | 588.81 | | 0.00 | 0.00 | 588.81 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| O1416 | ORTHO CLINICAL DIAGNOSTICS | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 1851609700 | | 10/20/2020 | 10/12/2020 | 11/11/2020 | | | 758.51 | 0.00 | 0.00 | 758.51 |
| | SUPPLIES | | | | | | | | | |
| 1851600344 | | 10/31/2020 | 10/05/2020 | 11/04/2020 | | | 231.97 | 0.00 | 0.00 | 231.97 |
| | SUPPLIES | | | | | | | | | |
| 1851606150 | | 10/31/2020 | 10/08/2020 | 11/07/2020 | | | 323.32 | 0.00 | 0.00 | 323.32 |
| | SUPPLIES | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | O1416 | ORTHO CLINICAL D | 1,313.80 | | 0.00 | 0.00 | 1,313.80 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 11155 | PARA | | |

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 7075 | 11/03/2020 | 01/01/2020 | 01/31/2020 | | | 3,084.00 | 0.00 | 0.00 | 3,084.00 |
| REVENUE INTEGRITY PROGRAM | | | | | | | | | |
| Vendor Totals: | Number | Name | | | Gross | Discount | No-Pay | | Net |
| | 11155 | PARA | 3,084.00 | | | 0.00 | 0.00 | | 3,084.00 |
| Vendor# | Vendor Name | | Class | | | Pay Code | | | |
| 10737 | PEM FILINGS | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
| 00019014PE | | 10/30/2020 | 09/11/2020 | 09/21/2020 | | | 450.57 | 0.00 | 0.00 | 450.57 |
| FUNDING 2019 | | | | | | | | | | |
| Vendor Totals: | Number | Name | | | Gross | Discount | No-Pay | | Net |
| | 10737 | PEM FILINGS | 450.57 | | | 0.00 | 0.00 | | 450.57 |
| Vendor# | Vendor Name | | Class | | | Pay Code | | | |
| P2200 | POWER HARDWARE | | W | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
| A66593 | | 10/30/2020 | 10/08/2020 | 10/18/2020 | | | 29.94 | 0.00 | 0.00 | 29.94 |
| SUPPLIES | | | | | | | | | | |
| A66749 | | 10/30/2020 | 10/14/2020 | 10/24/2020 | | | 71.96 | 0.00 | 0.00 | 71.96 |
| SUPPLIES | | | | | | | | | | |
| B57536 | | 10/30/2020 | 10/19/2020 | 10/29/2020 | | | 143.50 | 0.00 | 0.00 | 143.50 |
| SUPPLIES | | | | | | | | | | |
| A66906 | | 10/30/2020 | 10/20/2020 | 10/30/2020 | | | 13.56 | 0.00 | 0.00 | 13.56 |
| SUPPLIES | | | | | | | | | | |
| A67263 | | 10/30/2020 | 10/29/2020 | 11/08/2020 | | | 32.95 | 0.00 | 0.00 | 32.95 |
| SUPPLIES | | | | | | | | | | |
| Vendor Totals: | Number | Name | | | Gross | Discount | No-Pay | | Net |
| | P2200 | POWER HARDWAR | 291.91 | | | 0.00 | 0.00 | | 291.91 |
| Vendor# | Vendor Name | | Class | | | Pay Code | | | |
| P1725 | PREMIER SLEEP DISORDERS CEN M | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
| 99 | | 10/30/2020 | 10/30/2020 | 11/14/2020 | | | 3,425.00 | 0.00 | 0.00 | 3,425.00 |
| SLEEP STUDIES | | | | | | | | | | |
| Vendor Totals: | Number | Name | | | Gross | Discount | No-Pay | | Net |
| | P1725 | PREMIER SLEEP DI | 3,425.00 | | | 0.00 | 0.00 | | 3,425.00 |
| Vendor# | Vendor Name | | Class | | | Pay Code | | | |
| 13460 | RELIANT, DEPT 0954 | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
| 113009826201 | | 10/20/2020 | 10/19/2020 | 11/18/2020 | | | 24,891.74 | 0.00 | 0.00 | 24,891.74 |
| ENERGY BILL | | | | | | | | | | |
| Vendor Totals: | Number | Name | | | Gross | Discount | No-Pay | | Net |
| | 13460 | RELIANT, DEPT 095 | 24,891.74 | | | 0.00 | 0.00 | | 24,891.74 |
| Vendor# | Vendor Name | | Class | | | Pay Code | | | |
| S2362 | SMITH & NEPHEW | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
| 929626419 | | 10/31/2020 | 10/21/2020 | 11/04/2020 | | | 335.63 | 0.00 | 0.00 | 335.63 |
| SUPPLIES | | | | | | | | | | |
| 929628076 | | 10/31/2020 | 10/22/2020 | 11/04/2020 | | | 283.63 | 0.00 | 0.00 | 283.63 |
| SUPPLIES | | | | | | | | | | |
| 929643163 | | 10/31/2020 | 10/27/2020 | 11/04/2020 | | | 461.38 | 0.00 | 0.00 | 461.38 |
| SUPPLIES | | | | | | | | | | |
| Vendor Totals: | Number | Name | | | Gross | Discount | No-Pay | | Net |
| | S2362 | SMITH & NEPHEW | 1,080.64 | | | 0.00 | 0.00 | | 1,080.64 |
| Vendor# | Vendor Name | | Class | | | Pay Code | | | |
| 12288 | SPBS CLINICAL EQUIPMENT SRVC | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
| INV009564 | | 10/31/2020 | 09/02/2020 | 10/02/2020 | | | 12,375.00 | 0.00 | 0.00 | 12,375.00 |
| BIO MED SERVICES | | | | | | | | | | |
| Vendor Totals: | Number | Name | | | Gross | Discount | No-Pay | | Net |
| | 12288 | SPBS CLINICAL EQ | 12,375.00 | | | 0.00 | 0.00 | | 12,375.00 |
| Vendor# | Vendor Name | | Class | | | Pay Code | | | |
| 10494 | SPECTRA CORP | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 00025296RH | 10/30/2020 | 09/11/2020 | 09/11/2020 | | | 675.86 | 0.00 | 0.00 | 675.86 |
| FUND YEAR 2019 | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10494 | SPECTRA CORP | 675.86 | | 0.00 | 0.00 | 675.86 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| S3940 | STERIS CORPORATION | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 9008518 | 10/20/2020 | 10/13/2020 | 11/07/2020 | | | | 1,523.03 | 0.00 | 0.00 | 1,523.03 |
| SUPPLIES | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | S3940 | STERIS CORPORAT | 1,523.03 | | 0.00 | 0.00 | 1,523.03 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| S2830 | STRYKER SALES CORP | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 9200669153 | 10/31/2020 | 10/19/2020 | 11/04/2020 | | | | 2,191.08 | 0.00 | 0.00 | 2,191.08 |
| SUPPLIES | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | S2830 | STRYKER SALES C | 2,191.08 | | 0.00 | 0.00 | 2,191.08 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 10735 | STRYKER SUSTAINABILITY | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 4041792 | 10/31/2020 | 10/23/2020 | 11/22/2020 | | | | 7,156.98 | 0.00 | 0.00 | 7,156.98 |
| SUPPLIES | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 10735 | STRYKER SUSTAIN | 7,156.98 | | 0.00 | 0.00 | 7,156.98 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13116 | SYLVIA MENDOZA | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 110220 | 11/03/2020 | 11/02/2020 | 11/02/2020 | | | | 40.25 | 0.00 | 0.00 | 40.25 |
| TRAVEL | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 13116 | SYLVIA MENDOZA | 40.25 | | 0.00 | 0.00 | 40.25 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 11006 | THE HARTFORD | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 100820 | 10/28/2020 | 10/08/2020 | 11/20/2020 | | | | 2,405.00 | 0.00 | 0.00 | 2,405.00 |
| CRIME INSURANCE 11/20-11/23 | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 11006 | THE HARTFORD | 2,405.00 | | 0.00 | 0.00 | 2,405.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13532 | TOWER TECH SERVICES, INC | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 3877 | 10/30/2020 | 11/25/2019 | 11/03/2020 | | | | 2,779.92 | 0.00 | 0.00 | 2,779.92 |
| COOLING TOWER PARTS | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | 13532 | TOWER TECH SER | 2,779.92 | | 0.00 | 0.00 | 2,779.92 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| U1056 | UNIFORM ADVANTAGE | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 11797278 | 10/30/2020 | 10/28/2020 | 11/12/2020 | | | | 52.95 | 0.00 | 0.00 | 52.95 |
| UNIFORM DAWM MCCLELAND | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | U1056 | UNIFORM ADVANT/ | 52.95 | | 0.00 | 0.00 | 52.95 |

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

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 894647177 | 10/30/2020 | 10/20/2020 | 11/19/2020 | | | | 213.85 | 0.00 | 0.00 | 213.85 |
| SUPPLIES | | | | | | | | | | |

| Vendor Totals: | Number | Name | | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|
| | U1200 | UNITED AD LABEL ( | 213.85 | | 0.00 | 0.00 | 213.85 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|

12400 UPDOX LLC

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| INV00205965 | | 10/31/2020 | 10/31/2020 | 10/31/2020 | | | 599.00 | 0.00 | 0.00 | 599.00 |
| | FAXING | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 12400 | UPDOX LLC | 599.00 | 0.00 | 0.00 | 599.00 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| V1058 | VICTORIA ANESTHESIOLOGY | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020 | | 10/31/2020 | 10/30/2020 | 10/30/2020 | | | 38,595.51 | 0.00 | 0.00 | 38,595.51 |
| | ANESTHESA | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | V1058 | VICTORIA ANESTHI | 38,595.51 | 0.00 | 0.00 | 38,595.51 |

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| W1040 | WATERMARK GRAPHICS INC | M | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 130811 | | 10/28/2020 | 10/21/2020 | 11/20/2020 | | | 358.27 | 0.00 | 0.00 | 358.27 |
| | SHIRTS | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | W1040 | WATERMARK GRAF | 358.27 | 0.00 | 0.00 | 358.27 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 413,686.74 | 0.00 | 0.00 | 413,686.74 |

APPROVED
GM
NOV 06 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 188044-188124

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NOV 09 2020
Calhoun County Auditor



11/09/2020 MEMORIAL MEDICAL CENTER 0
08:24 AP Open Invoice List ap_open_invoice.template
Dates Through:

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13536 | MARIA DEL CARMEN HERRERA | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 110920 | 11/09/2020 | 11/09/2020 | 11/09/2020 | | | | 119.18 | 0.00 | 0.00 | 119.18 |
| | INSURANCE REIMBURSMENT | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 13536 | MARIA DEL CARME | 119.18 | 0.00 | 0.00 | 119.18 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 119.18 | 0.00 | 0.00 | 119.18 |

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BY
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 188095

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NOV 09 2020
Calhoun County Auditor

11/9/2020
08:24

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

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| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| A2252 | NADINE GARNER | W | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 110920 | 11/09/2020 | 11/09/2020 | 11/09/2020 | | | | 314.18 | 0.00 | 0.00 | 314.18 |
| | INSURANCE REIMBURSMENT | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | A2252 | NADINE GARNER | 314.18 | 0.00 | 0.00 | 314.18 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 314.18 | 0.00 | 0.00 | 314.18 |

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GM
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Ck# 188102

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NOV 09 2020
Calhoun County Auditor



11/09/2020 MEMORIAL MEDICAL CENTER 0

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Dates Through:

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13540 | ANNA HAGA | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 110920 | 11/09/2020 | 11/09/2020 | 11/09/2020 | | | | 130.00 | 0.00 | 0.00 | 130.00 |
| | INSURANCE REIMBURSEMENT | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 13540 | ANNA HAGA | 130.00 | 0.00 | 0.00 | 130.00 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 130.00 | 0.00 | 0.00 | 130.00 |

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BM
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Ck# 188048

**MEMORIAL MEDICAL CENTER**
**PROSPERITY BANK**
**ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- October 26, 2020 - November 1, 2020**

| Date | Bank Description | | MMC Notes | Amount |
|---|---|---|---|---|
| 10/30/2020 | PAY PLUS ACHTRANS 452579291 101000691808583 | | - 3rd Party Payor Fee | ~~1.32~~ |
| 10/30/2020 | AMERISOURCE BERG PAYMENTS 0100007768 2100002 | | - 340B Drug Program Expense | ~~19.1~~ |
| 10/30/2020 | MEMORIAL MEDICAL PAYROLL 746003411 113122650 | | ACH Payment PAYROLL ONLINE TRF | ~~331251.48~~ |
| 10/28/2020 | PAY PLUS ACHTRANS 452579291 101000690128852 | | - 3rd Party Payor Fee | ~~21.16~~ |
| 10/27/2020 | MCKESSON DRUG AUTO ACH ACH04356951 910000141 | | - 340B Drug Program Expense | ~~6159.27~~ |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 41399801332419 6110 41399801332419 | MMC ONLINE | - 3rd Party Payor Fee | 588.88 |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 41399801332385 6110 41399801332385 | MMC ER | - 3rd Party Payor Fee | 83.72 |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 41399801332401 6110 41399801332401 | MMC CLINIC | - 3rd Party Payor Fee | 512.82 |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 41399801391837 6110 41399801391837 | MMC CAFETE | - 3rd Party Payor Fee | 85.87 |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 41399801332393 6110 41399801332393 | MEMORIAL M | - 3rd Party Payor Fee | 2537.04 |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 41399801368397 6110 41399801368397 | CLINICAL HOS | - 3rd Party Payor Fee | 538.92 |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 39300982589946 6110 39300982589946 | MMC OUTPAT | - 3rd Party Payor Fee | 129 |
| 10/13/2020 | TSYS/TRANSFIRST DISCOUNT 39300982541616 6110 39300982541616 | MEMORIAL M | - 3rd Party Payor Fee | 564.13 |
| | | | | ~~342,492.71~~ |

November 2, 2020

Jason Anglin, CEO
Memorial Medical Center

10/13/20 Credit card fees were left off previous 11/4/20 report by mmc in error

**PROSPERITY BANK**
**ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS**

| Date | Description | MMC Notes | Amount |
|---|---|---|---|
| 11/6/2020 | ACH Payment STATE COMTRLR TEXNET | UHRIP IGT | ~~180,484.33~~ |

November 2, 2020

Jason Anglin, CEO
Memorial Medical Center

**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: 11/06/2020 Page: 002

DC: 8115

Territory:

Customer: 632536
Date: 11/06/2020

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

As of: 11/06/2020 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 **PLEASE CHECK ANY**
Date: 11/06/2020 **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 | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

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

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

Subtotals: 5,955.36- USD

Future Due: 0.00

Past Due: 12,945.32-

Last Payment 08/07/2017 2,451.97

If Paid By 11/10/2020, Pay This Amount: 6,095.14- USD

If Paid After 11/10/2020, Pay this Amount: 5,955.36- USD

Due If Paid On Time: USD 6,095.14-

Disc lost if paid late: 139.78

Due If Paid Late: USD 5,955.36-

CK # 500151

1,733.12 -
5,687.93 -
24.65 +
1,318.12 +
183.10 +
6,095.14-=

APPROVED
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NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# McKESSON

# STATEMENT

Company: 8000

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: 11/06/2020

DC: 8115

Territory: 400

Customer: 190813
Date: 11/06/2020

Page: 001

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

As of: 11/06/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 **PLEASE CHECK ANY**
Date: 11/06/2020 **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** | | | | | | | | | | | |
| 11/04/2020 | 11/10/2020 | 7233562346 | 2017021555 | 115Invoice | 3.24 | 162.18 | | 158.94 ✓ | | 7233562346 | |
| 11/05/2020 | 11/05/2020 | 7234068293 | MFC PR CORR CR | Pricing Cor | | 1,965.82- | P | 1,965.82- | P ✓ | 7234068293 | |
| 11/05/2020 | 11/10/2020 | 7234068294 | MFC PR CORR IN | Pricing Cor | 1.27 | 63.51 | | 62.24 ✓ | | 7234068294 | |
| 11/06/2020 | 11/10/2020 | 7234074634 | 2017021850 | 115Invoice | 0.24 | 11.76 | | 11.52 ✓ | | 7234074634 | |

**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:** 1,728.37- USD

**Future Due:** 0.00

**Past Due:** 1,965.82-

**Last Payment** 5,221.79
11/02/2020

**If Paid By 11/10/2020, Pay This Amount:** 1,733.12- USD

**If Paid After 11/10/2020, Pay this Amount:** 1,728.37- USD

**Due If Paid On Time:**
USD 1,733.12-

**Disc lost if paid late:** 4.75

**Due If Paid Late:**
USD 1,728.37-

CK

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NOV 09 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# McKESSON

# STATEMENT

Company: 8000

As of: 11/06/2020

Page: 001

DC: 8115

Territory: 400

Customer: 256342
Date: 11/06/2020

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: 11/06/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 11/06/2020

**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 | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Customer Number 256342** | | **WALMART 1098/MEM MED PHS** | | | | | | | | | |
| 11/02/2020 | 11/10/2020 | 7233020055 | 5420744630 | 115Invoice | 8.25 | 412.35 | | 404.10 | | 7233020055 | |
| 11/03/2020 | 11/10/2020 | 7233320708 | 5420748275 | 115Invoice | 0.02 | 0.96 | | 0.94 | | 7233320708 | |
| 11/03/2020 | 11/10/2020 | 7233320710 | 1102200200-00 | 115Invoice | 8.35 | 417.69 | | 409.34 | | 7233320710 | |
| 11/03/2020 | 11/10/2020 | 7233470982 | 841049748 | 195Invoice | 3.21 | 160.29 | | 157.08 | | 7233470982 | |
| 11/03/2020 | 11/10/2020 | 7233512734 | 00011022020TM | 115Invoice | 0.01 | 0.63 | | 0.62 | | 7233512734 | |
| 11/04/2020 | 11/10/2020 | 7233591137 | 8420873414 | 115Invoice | 2.47 | 123.47 | | 121.00 | | 7233591137 | |
| 11/04/2020 | 11/10/2020 | 7233752178 | 841280567 | 195Invoice | 0.01 | 0.63 | | 0.62 | | 7233752178 | |
| 11/05/2020 | 11/10/2020 | 7233841591 | 8420876981 | 115Invoice | 0.02 | 0.96 | | 0.94 | | 7233841591 | |
| 11/05/2020 | 11/10/2020 | 7233841593 | 8420876981 | 115Invoice | 12.70 | 635.16 | | 622.46 | | 7233841593 | |
| 11/05/2020 | 11/10/2020 | 7233841594 | 1104200252-00 | 115Invoice | 0.01 | 0.32 | | 0.31 | | 7233841594 | |
| 11/05/2020 | 11/10/2020 | 7234011609 | 841484868 | 195Invoice | 5.34 | 267.15 | | 261.81 | | 7234011609 | |
| 11/05/2020 | 11/10/2020 | 7234026701 | 00011042020TM | 115Invoice | 1.39 | 69.70 | | 68.31 | | 7234026701 | |
| 11/05/2020 | 11/05/2020 | 7234062063 | MFC PR CORR CR | Pricing Cor | | 441.94- | P | 441.94- | P | 7234062063 | |
| 11/05/2020 | 11/05/2020 | 7234062064 | MFC PR CORR CR | Pricing Cor | | 883.88- | P | 883.88- | P | 7234062064 | |
| 11/05/2020 | 11/05/2020 | 7234062065 | MFC PR CORR CR | Pricing Cor | | 403.92- | P | 403.92- | P | 7234062065 | |
| 11/05/2020 | 11/05/2020 | 7234062066 | MFC PR CORR CR | Pricing Cor | | 1,884.98- | P | 1,884.98- | P | 7234062066 | |
| 11/05/2020 | 11/05/2020 | 7234062067 | MFC PR CORR CR | Pricing Cor | | 1,729.74- | P | 1,729.74- | P | 7234062067 | |
| 11/05/2020 | 11/05/2020 | 7234062068 | MFC PR CORR CR | Pricing Cor | | 980.51- | P | 980.51- | P | 7234062068 | |
| 11/05/2020 | 11/05/2020 | 7234062069 | MFC PR CORR CR | Pricing Cor | | 1,077.14- | P | 1,077.14- | P | 7234062069 | |
| 11/05/2020 | 11/05/2020 | 7234062070 | MFC PR CORR CR | Pricing Cor | | 845.86- | P | 845.86- | P | 7234062070 | |
| 11/05/2020 | 11/05/2020 | 7234062071 | MFC PR CORR CR | Pricing Cor | | 441.94- | P | 441.94- | P | 7234062071 | |
| 11/05/2020 | 11/10/2020 | 7234062072 | MFC PR CORR IN | Pricing Cor | | 0.16 | | 0.16 | | 7234062072 | |
| 11/05/2020 | 11/10/2020 | 7234062073 | MFC PR CORR IN | Pricing Cor | 0.01 | 0.33 | | 0.32 | | 7234062073 | |
| 11/05/2020 | 11/10/2020 | 7234062074 | MFC PR CORR IN | Pricing Cor | 0.73 | 36.58 | | 35.85 | | 7234062074 | |
| 11/05/2020 | 11/10/2020 | 7234062075 | MFC PR CORR IN | Pricing Cor | 4.34 | 216.92 | | 212.58 | | 7234062075 | |
| 11/05/2020 | 11/10/2020 | 7234062076 | MFC PR CORR IN | Pricing Cor | 0.74 | 37.07 | | 36.33 | | 7234062076 | |
| 11/05/2020 | 11/10/2020 | 7234062077 | MFC PR CORR IN | Pricing Cor | 1.44 | 72.04 | | 70.60 | | 7234062077 | |
| 11/05/2020 | 11/10/2020 | 7234062078 | MFC PR CORR IN | Pricing Cor | 2.88 | 143.76 | | 140.88 | | 7234062078 | |
| 11/05/2020 | 11/10/2020 | 7234062079 | MFC PR CORR IN | Pricing Cor | 0.73 | 36.74 | | 36.01 | | 7234062079 | |
| 11/05/2020 | 11/10/2020 | 7234062080 | MFC PR CORR IN | Pricing Cor | | 0.16 | | 0.16 | | 7234062080 | |
| 11/06/2020 | 11/10/2020 | 7234103060 | 7125720057 | 115Invoice | 6.79 | 339.58 | | 332.79 | | 7234103060 | |

# McKESSON

# STATEMENT

Company: 8000

As of: 11/06/2020 Page: 002

DC: 8115

Territory: 400

Customer: 256342
Date: 11/06/2020

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

As of: 11/06/2020 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

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

Cust: 256342 **PLEASE CHECK ANY**
Date: 11/06/2020 **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 | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 11/06/2020 | 11/10/2020 | 7234103063 | 7125720057 | 115Invoice | | 0.16 | | 0.16 ✓ | | 7234103063 | |
| 11/06/2020 | 11/10/2020 | 7234246513 | 841696690 | 195Invoice | 1.81 | 90.42 | | 88.61 ✓ | | 7234246513 | |

**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:** 5,626.68- USD

**Future Due:** 0.00

**Past Due:** 8,689.91-

**Last Payment** 5,221.79
11/02/2020

**If Paid By 11/10/2020, Pay This Amount:** 5,687.93- USD

**If Paid After 11/10/2020, Pay this Amount:** 5,626.68- USD

**Due If Paid On Time:**
USD 5,687.93- ✓

**Disc lost if paid late:** 61.25

**Due If Paid Late:**
USD 5,626.68-

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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: 11/06/2020

DC: 8115

Territory: 400

Customer: 262252
Date: 11/06/2020

Page: 001

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

As of: 11/06/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252 PLEASE CHECK ANY
Date: 11/06/2020 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** | | | | | | | | | | | |
| 11/05/2020 | 11/10/2020 | 7233830978 | 942084 | 115Invoice | 0.50 | 25.19 | | 24.69 | ✓ | 7233830978 | |

**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:** 25.19 USD

**Future Due:** 0.00

**Past Due:** 0.00

**Last Payment** 5,221.79
11/02/2020

**If Paid By 11/10/2020, Pay This Amount:** 24.69 USD

**If Paid After 11/10/2020, Pay this Amount:** 25.19 USD

**Due If Paid On Time:**
USD 24.69

**Disc lost if paid late:** 0.50

**Due If Paid Late:**
USD 25.19

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COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# McKESSON

# STATEMENT

Company: 8000

As of: 11/06/2020 Page: 001

DC: 8115

Territory: 400

Customer: 464450
Date: 11/06/2020

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: 11/06/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450 **PLEASE CHECK ANY**
Date: 11/06/2020 **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** | | | | | | | | | | | |
| 11/02/2020 | 11/10/2020 | 7232952881 | 55x631657 | 115Invoice | 2.22 | 111.19 | | 108.97 | | 7232952881 | |
| 11/02/2020 | 11/10/2020 | 7232952882 | 55x632401 | 115Invoice | 2.61 | 130.53 | | 127.92 | | 7232952882 | |
| 11/02/2020 | 11/10/2020 | 7232952883 | 55x631668 | 115Invoice | 1.21 | 60.60 | | 59.39 | | 7232952883 | |
| 11/02/2020 | 11/10/2020 | 7232952884 | 55x631670 | 115Invoice | 0.44 | 21.98 | | 21.54 | | 7232952884 | |
| 11/04/2020 | 11/10/2020 | 7233560031 | 55x637751 | 115Invoice | 32.68 | 1,634.16 | | 1,601.48 | | 7233560031 | |
| 11/04/2020 | 11/10/2020 | 7233560037 | 55x639227 | 115Invoice | 0.03 | 1.27 | | 1.24 | | 7233560037 | |
| 11/04/2020 | 11/10/2020 | 7233560038 | 55x637661 | 115Invoice | 5.09 | 254.28 | | 249.19 | | 7233560038 | |
| 11/04/2020 | 11/10/2020 | 7233560040 | 55x638767 | 115Invoice | 2.50 | 125.14 | | 122.64 | | 7233560040 | |
| 11/05/2020 | 11/05/2020 | 7234068221 | MFC PR CORR CR | Pricing Cor | | 764.52- | P | 764.52- | P | 7234068221 | |
| 11/05/2020 | 11/05/2020 | 7234068223 | MFC PR CORR CR | Pricing Cor | | 845.86- | P | 845.86- | P | 7234068223 | |
| 11/05/2020 | 11/10/2020 | 7234068224 | MFC PR CORR IN | Pricing Cor | 5.70 | 284.82 | | 279.12 | | 7234068224 | |
| 11/05/2020 | 11/10/2020 | 7234068225 | MFC PR CORR IN | Pricing Cor | 0.73 | 36.74 | | 36.01 | | 7234068225 | |
| 11/06/2020 | 11/10/2020 | 7234074568 | 55x643586 | 115Invoice | 2.47 | 123.47 | | 121.00 | | 7234074568 | |

**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:** 1,173.80 USD

**Future Due:** 0.00

**Past Due:** 1,610.38-

**Last Payment** 5,221.79
11/02/2020

**If Paid By 11/10/2020, Pay This Amount:** 1,118.12 USD

**If Paid After 11/10/2020, Pay this Amount:** 1,173.80 USD

**Due If Paid On Time:**
USD 1,118.12

**Disc lost if paid late:** 55.68

**Due If Paid Late:**
USD 1,173.80

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NOV 09 2020

COUNTY ASSESSOR
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: 11/06/2020

DC: 8115

Territory: 400

Customer: 835438
Date: 11/06/2020

Page: 001

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

As of: 11/06/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 **PLEASE CHECK ANY**
Date: 11/06/2020 **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** | | | | | | | | | |
| 11/05/2020 | 11/10/2020 | 7234006640 | 942217 | 115Invoice | 4.62 | 231.00 | 226.38 ✓ | 7234006640 | |
| 11/05/2020 | 11/05/2020 | 7234044786 | MFC PR CORR CR | Pricing Cor | | 679.21- P | 679.21- P ✓ | 7234044786 | |
| 11/05/2020 | 11/10/2020 | 7234044787 | MFC PR CORR IN | Pricing Cor | 12.98 | 648.91 | 635.93 ✓ | 7234044787 | |

**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:** 200.70 USD

**Future Due:** 0.00

**Past Due:** 679.21-

**Last Payment** 5,221.79
11/02/2020

**If Paid By 11/10/2020, Pay This Amount:** 183.10 USD

**If Paid After 11/10/2020, Pay this Amount:** 200.70 USD

**Due If Paid On Time:** USD 183.10

**Disc lost if paid late:** 17.60

**Due If Paid Late:** USD 200.70

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NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AmerisourceBergen

# STATEMENT

Statement Number: 59934864
Date: 11-06-2020

**Serviced By:**
ABC DC SUGARLAND
12727 WEST AIRPORT BLVD
SUGAR LAND TX 77478-6101

DEA: RA0289276
866-451-9655

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

**Remit To:**
AMERISOURCEBERGEN
P.O. Box 905223
CHARLOTTE NC 28290-5223

**Customer Number**
0100135284 / 037028186

**Terms**
Monday - Friday Due in 7 days

**Summary**

| | |
|---|---|
| Not Yet Due: | 0.00 |
| Current: | 50.52 |
| Past Due: | 0.00 |
| Total Due: | 50.52 |
| Account Balance: | 50.52 |

## Account Activity

| Document Date | Due Date | Reference Number | Purchase Order Number | Document Type | Original Amount | Last Receipt | Amount Received | Balance |
|---|---|---|---|---|---|---|---|---|
| 11-02-2020 | 11-13-2020 | 3044175486 | 158739 | Invoice | 26.00 | | 0.00 | 26.00 |
| 11-02-2020 | 11-13-2020 | 3044175487 | 158740 | Invoice | 0.93 | | 0.00 | 0.93 |
| 11-02-2020 | 11-13-2020 | 3044175488 | 158741 | Invoice | 0.31 | | 0.00 | 0.31 |
| 11-02-2020 | 11-13-2020 | 3044188923 | 158790 | Invoice | 0.18 | | 0.00 | 0.18 |
| 11-03-2020 | 11-13-2020 | 3044238976 | 158796 | Invoice | 0.29 | | 0.00 | 0.29 |
| 11-05-2020 | 11-13-2020 | 3044331051 | 158813 | Invoice | 18.56 | | 0.00 | 18.56 |
| 11-06-2020 | 11-13-2020 | 3044381956 | 158820 | Invoice | 4.25 | | 0.00 | 4.25 |

| Current | 1-15 Days | 16-30 Days | 31-60 Days | 61-90 Days | 91-120 Days | Over 120 Days |
|---|---|---|---|---|---|---|
| 50.52 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

## Thank You for Your Payment

| Date | Amount |
|---|---|
| 11-06-2020 | (1,374.58) |

## Reminders

| Due Date | Amount |
|---|---|
| 11-13-2020 | 50.52 |
| Total Due: | 50.52 |

CK # 500152

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GST
NOV 09 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" | ★ | 12 | |
| 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" | ★ | $ 100,580.23 | # |
| "1 TO CONFIRM" | | 1 | |
| "ENTER W/CENTS AMOUNT OF SOCIAL SECURITY" | 0 | $ 50,364.28 | # |
| "ENTER W/CENTS AMOUNT OF MEDICARE" | | $ 12,207.22 | # |
| "ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING" | | $ 38,008.73 | # |
| 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 | 9812.50 | N | | N | N | | 195702.85 |
| 1 | REGULAR PAY-S1 | 1841.00 | N | | N | N | N | 81658.60 |
| 1 | REGULAR PAY-S1 | 345.00 | Y | | N | N | | 9663.50 |
| 2 | REGULAR PAY-S2 | 2505.00 | N | | N | N | | 57936.81 |
| 2 | REGULAR PAY-S2 | 133.50 | Y | | N | N | | 4231.29 |
| 3 | REGULAR PAY-S3 | 1468.75 | N | | N | N | | 38977.42 |
| 3 | REGULAR PAY-S3 | 117.25 | Y | | N | N | | 4859.76 |
| 4 | CALL BACK PAY | 4.00 | N | 1 | N | N | | 126.68 |
| C | CALL PAY | 2552.25 | N | 1 | N | N | | 5104.50 |
| E | EXTRA WAGES | | N | 1 | N | N | N | 2352.75 |
| I | INSERVICE | 21.00 | N | 1 | N | N | | 611.66 |
| K | EXTENDED-ILLNESS-BANK | 162.00 | N | 1 | N | N | | 2838.02 |
| M | MEAL REIMBURSEMENT | | N | | N | N | N | 56.00 |
| P | PAID-TIME-OFF | 627.77 | N | | N | N | N | 17328.81 |
| P | PAID-TIME-OFF | 1048.75 | N | 1 | N | N | | 23778.05 |
| X | CALL PAY 2 | 144.00 | N | 1 | N | N | | 288.00 |
| Y | YMCA/CURVES | | N | | N | N | N | 75.00 |
| Z | CALL PAY 3 | 48.00 | N | 1 | N | N | | 144.00 |
| t | PHONE & DATA | | N | | N | N | N | 980.00 |

**-- Deductions Summary --**

| Code | Amount | | | | | |
|---|---|---|---|---|---|---|
| A/R | 745.00 | A/R2 | 125.00 | A/R3 | | |
| ADVANC | | AWARDS | | BOOTS | | |
| CAFE H | | CAFE-1 | | CAFE-2 | | |
| CAFE-3 | | CAFE-4 | | CAFE-5 | | |
| CAFE-C | | CAFE-D | 1739.15 | CAFE-F | | |
| CAFE-H | 19554.55 | CAFE-I | | CAFE-L | | |
| CAFE-P | | CANCER | | CHILD | 687.70 | |
| CLINIC | 50.00 | COMBIN | 438.97 | CREDUN | | |
| DD ADV | | DENTAL | | DEP-LF | | |
| DIS-LF | | EAT | | EATCSH | | |
| FEDTAX | 38008.73 | FICA-M | 6103.61 | FICA-O | 25182.14 | |
| FIRSTC | | FLEX S | 4231.37 | FLX FE | | |
| FORT D | | FUTA | | GIFT S | 340.54 | |
| GRANT | | GRP-IN | | GTL | | |
| HOSP-I | | ID TFT | | LEAF | | |
| LEGAL | 378.60 | MASA | 832.50 | MEALS | 108.48 | |
| MISC | | MISC/ | | MMCSHR | | |
| NATFML | 2010.89 | OTHER | | PHI | | |
| PHI*** | | PR FIN | | RELAY | | |
| REPAY | | SAMS | | SCRUBS | | |
| SIGNON | | ST-TX | | STONDF | 840.86 | |
| STONE | | STONE2 | | STUDEN | | |
| SUNACC | 906.63 | SUNILL | 1283.89 | SUNLIF | 1314.82 | |
| SUNSTD | 1654.53 | SUNVIS | 1225.10 | SURCHG | 715.00 | |
| TSA-1 | | TSA-2 | | TSA-C | | |
| TSA-P | | TSA-R | 31216.07 | TUTION | | |
| UNIFOR | 531.14 | UW/HOS | | | | |

Grand Totals: 20830.77 ( Gross: 446713.70 Deductions: 140225.27 Net: 306488.43 )

Checks Count:- FT 204 PT 4 Other 45 Female 223 Male 28 Credit OverAmt 0 ZeroNet Term Total: 251

Pay date
11/13/20

**MEMORIAL MEDICAL CENTER**
**PROSPERITY BANK**
**ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- November 2, 2020 - November 8, 2020**

| Date | Bank Description | MMC Notes | Amount |
|---|---|---|---|
| 11/2/2020 | PAY PLUS ACHTRANS 452579291 101000692606173 | - 3rd Party Payor Fee | 198.64 |
| 11/2/2020 | IRS USATAXPYMT 220070751033112 6103601000137 | - Payroll Taxes | 107092.17 ** |
| 11/3/2020 | PAY PLUS ACHTRANS 452579291 101000693474572 | - 3rd Party Payor Fee | 26.14 |
| 11/3/2020 | AUTHNET GATEWAY BILLING 114833425 1040000170 | - 3rd Party Payor Fee | 22 |
| 11/4/2020 | STATE COMPTRLR TEXNET 00526619/01103 2100002 | IGT DSH | 32793.98 * |
| 11/4/2020 | PAY PLUS ACHTRANS 452579291 101000694772064 | - 3rd Party Payor Fee | 80.3 |
| 11/4/2020 | MERCH BNKCD FEE 971160913887 114902520000874 | - Credit Card Processing Fee | 163.27 |
| 11/4/2020 | MERCH BNKCD FEE 971160910883 114902520000873 | - Credit Card Processing Fee | 9.95 |
| 11/4/2020 | MERCH BNKCD DISCOUNT 971160913887 1149025200 | - Credit Card Processing Fee | 162.4 |
| 11/4/2020 | MERCH BNKCD DISCOUNT 971160910883 1149025200 | - Credit Card Processing Fee | 19.95 |
| 11/4/2020 | MERCH BNKCD INTERCHNG 971160913887 114902520 | - Credit Card Processing Fee | 111.34 |
| 11/4/2020 | MCKESSON DRUG AUTO ACH ACH04361957 910000166 | - 340B Drug Program Expense | 5221.79 * |
| 11/5/2020 | FDGL LEASE PYMT 052-1601830-000 410001213005 | - Credit Card Machine Lease Expei | 32.45 |
| 11/5/2020 | FDGL LEASE PYMT 052-1479468-000 410001212691 | - Credit Card Machine Lease Expei | 69.24 |
| 11/5/2020 | FDGL LEASE PYMT 052-1479213-000 410001212690 | - Credit Card Machine Lease Expei | 43.26 |
| 11/5/2020 | FDGL LEASE PYMT 052-1479214-000 410001212690 | - Credit Card Machine Lease Expei | 40.02 |
| 11/6/2020 | STATE COMPTRLR TEXNET 00555097/01105 2100002 | UHRIP IGT | 180484.33 * |
| 11/6/2020 | AMERISOURCE BERG PAYMENTS 0100007768 2100002 | - 340B Drug Program Expense | 1374.58 * |
| | | | **327,945.81** |

Jason Anglin, CEO
Memorial Medical Center

November 9, 2020

* Approved 11-04-20 CC
** Approved 10-28-CC

**PROSPERITY BANK**
**ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS**

| Date | Description | MMC Notes | Amount |
|---|---|---|---|
| 11/15/2020 | ACH Payment TEXAS COUNTY DRS RECEIVABLE 0419 21000024329 | - Retirement Funding | **211,641.33** |

Jason Anglin, CEO
Memorial Medical Center

November 9, 2020

| | |
|---|---|
| **Date/Time Submitted By** | 11-03-2020 / 01:24 PM |
| **Pay Date** | 10-31-2020 |
| Employee Deposits | $91,563.00 |
| Employer Contributions | $120,078.33 |
| Group Term Life Premiums | $0.00 |
| **Total** | $211,641.33 |
| **Comments** | |
| **Payroll File** | October 2020 Retirement Upload.xlsx |

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Calhoun County Auditor

11/05/2020
12:59

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 11832 | BROADMOOR AT CREEKSIDE PAF | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020 | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | | 3,870.00 | 0.00 | 0.00 | 3,870.00 |

TRANSFER - NH insurance pymt deposited into MMC operating

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 11832 | BROADMOOR AT C | 3,870.00 | 0.00 | 0.00 | 3,870.00 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 3,870.00 | 0.00 | 0.00 | 3,870.00 |

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COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 188126

11/05/2020 MEMORIAL MEDICAL CENTER 0
13:03 AP Open Invoice List ap_open_invoice.template
Dates Through:

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| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 11824 | THE CRESCENT | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020 | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | | 1,900.00 | 0.00 | 0.00 | 1,900.00 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 11824 | THE CRESCENT | 1,900.00 | 0.00 | 0.00 | 1,900.00 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 1,900.00 | 0.00 | 0.00 | 1,900.00 |

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AP Open Invoice List
Dates Through:

0
ap_open_invoice.template

Vendor# 11836 Vendor Name GOLDENCREEK HEALTHCARE Class Pay Code

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020 | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 2,549.58 | 0.00 | 0.00 | 2,549.58 |
| | TRANSFER NH insurance pymt deposited into MMC operating | | | | | | | | | |
| 103020A | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 42,439.05 | 0.00 | 0.00 | 42,439.05 |
| | TRANSFER NH insurance pymt deposited into MMC operating | | | | | | | | | |
| 103120 | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 5,753.67 | 0.00 | 0.00 | 5,753.67 |
| | TRANSFER NH insurance pymt deposited into MMC operating | | | | | | | | | |
| 103120b | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 17.16 | 0.00 | 0.00 | 17.16 |
| | TRANSFER NH insurance pymt deposited into MMC operating | | | | | | | | | |
| 103120A | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 108.45 | 0.00 | 0.00 | 108.45 |
| | TRANSFER NH insurance pymt deposited into MMC operating | | | | | | | | | |
| 103120C | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 1,382.81 | 0.00 | 0.00 | 1,382.81 |
| | TRANSFER NH insurance pymt deposited into MMC operating | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 11836 | GOLDENCREEK HE | 52,250.72 | 0.00 | 0.00 | 52,250.72 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 52,250.72 | 0.00 | 0.00 | 52,250.72 |

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AP Open Invoice List
Dates Through:

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| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 12696 | GULF POINTE PLAZA | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020B | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 23,361.72 | 0.00 | 0.00 | 23,361.72 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020A | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 2,860.00 | 0.00 | 0.00 | 2,860.00 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020 | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 2,711.66 | 0.00 | 0.00 | 2,711.66 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120 | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 5,343.11 | 0.00 | 0.00 | 5,343.11 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120A | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 5,280.00 | 0.00 | 0.00 | 5,280.00 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 12696 | GULF POINTE PLAZ | 39,556.49 | 0.00 | 0.00 | 39,556.49 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 39,556.49 | 0.00 | 0.00 | 39,556.49 |

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CALHOUN COUNTY, TEXAS

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AP Open Invoice List
Dates Through:

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| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 13004 | TUSCANY VILLAGE | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020A | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 1,416.12 | 0.00 | 0.00 | 1,416.12 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020M | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 12,353.74 | 0.00 | 0.00 | 12,353.74 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020O | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 2,823.06 | 0.00 | 0.00 | 2,823.06 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020 | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 1,584.00 | 0.00 | 0.00 | 1,584.00 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020B | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 13,010.27 | 0.00 | 0.00 | 13,010.27 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020C | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 1,232.00 | 0.00 | 0.00 | 1,232.00 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120C | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 115.20 | 0.00 | 0.00 | 115.20 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120F | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 842.68 | 0.00 | 0.00 | 842.68 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120A | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 3,126.48 | 0.00 | 0.00 | 3,126.48 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120I | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 1,701.46 | 0.00 | 0.00 | 1,701.46 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120B | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 1,491.88 | 0.00 | 0.00 | 1,491.88 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120 | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 4,829.00 | 0.00 | 0.00 | 4,829.00 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120G | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 11,088.00 | 0.00 | 0.00 | 11,088.00 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120D | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 17,251.76 | 0.00 | 0.00 | 17,251.76 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120E | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 18,357.18 | 0.00 | 0.00 | 18,357.18 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103120H | | 10/31/2020 | 10/31/2020 | 11/26/2020 | | | 213.76 | 0.00 | 0.00 | 213.76 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 110220 | | 11/03/2020 | 11/02/2020 | 11/26/2020 | | | 12,353.74 | 0.00 | 0.00 | 12,353.74 |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 13004 | TUSCANY VILLAGE | 103,790.33 | 0.00 | 0.00 | 103,790.33 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 103,790.33 | 0.00 | 0.00 | 103,790.33 |

APPROVED ON
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CALHOUN COUNTY, TEXAS

Ck # 188131

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AP Open Invoice List
Dates Through:

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ap_open_invoice.template

| Vendor# | Vendor Name | Class | Pay Code |
|---|---|---|---|
| 12792 | BETHANY SENIOR LIVING ✓ | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|---|---|---|---|
| 103020F | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 16,668.22 | 0.00 | 0.00 | 16,668.22 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020B | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 2,590.75 | 0.00 | 0.00 | 2,590.75 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020M | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 8,213.06 | 0.00 | 0.00 | 8,213.06 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020E | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 528.00 | 0.00 | 0.00 | 528.00 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020 | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 176.00 | 0.00 | 0.00 | 176.00 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020C | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 2,261.59 | 0.00 | 0.00 | 2,261.59 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020G | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 176.00 | 0.00 | 0.00 | 176.00 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020D | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 2,464.00 | 0.00 | 0.00 | 2,464.00 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020L | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 25,884.96 | 0.00 | 0.00 | 25,884.96 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020K | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 6,758.96 | 0.00 | 0.00 | 6,758.96 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 103020J | | 10/31/2020 | 10/30/2020 | 11/26/2020 | | | 8,679.60 | 0.00 | 0.00 | 8,679.60 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |
| 100320 | | 11/05/2020 | 10/03/2020 | 11/26/2020 | | | 528.00 | 0.00 | 0.00 | 528.00 ✓ |
| | TRANSFER NH insurance pymt deposited into mmc operating | | | | | | | | | |

| Vendor Totals: | Number | Name | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|---|---|
| | 12792 | BETHANY SENIOR I | 74,929.14 | 0.00 | 0.00 | 74,929.14 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---|---|---|---|---|
| | 74,929.14 | 0.00 | 0.00 | 74,929.14 |

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NOV 06 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Ck# 188125

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| BANK--CHECK-- CODE | NUMBER | DATE | AMOUNT | PAYEE |
|---|---|---|---|---|
| A/P | 188044 | 11/10/20 | 857.90 | ACE HARDWARE 15521 |
| A/P | 188045 | 11/10/20 | 1,400.00 | ACUTE CARE INC |
| A/P | 188046 | 11/10/20 | 3,483.64 | AIRGAS USA, LLC - CENTRAL DIV |
| A/P | 188047 | 11/10/20 | 1,177.00 | AMERICAN PROFICIENCY INSTITUTE |
| A/P | 188048 | 11/10/20 | 130.00 | ANNA HAGA |
| A/P | 188049 | 11/10/20 | 604.78 | ARTHREX, INC |
| A/P | 188050 | 11/10/20 | 1,777.23 | AVANTE HEALTH SOULTIONS |
| A/P | 188051 | 11/10/20 | 109.04 | BARD PERIPHERAL VASCULAR |
| A/P | 188052 | 11/10/20 | 410.66 | BAXTER HEALTHCARE |
| A/P | 188053 | 11/10/20 | 1,439.75 | BAYER HEALTHCARE |
| A/P | 188054 | 11/10/20 | 135.28 | BECKMAN COULTER INC |
| A/P | 188055 | 11/10/20 | 936.95 | BEEKLEY CORPORATION |
| A/P | 188056 | 11/10/20 | 3,900.00 | BKD, LLP |
| A/P | 188057 | 11/10/20 | 84.24 | BOHLS BEARING & POWER TRANS |
| A/P | 188058 | 11/10/20 | 70.30 | CALHOUN COUNTY |
| A/P | 188059 | 11/10/20 | 1,770.51 | CAVALLO ENERGY TEXAS LLC |
| A/P | 188060 | 11/10/20 | 500.00 | CHEMAQUA |
| A/P | 188061 | 11/10/20 | 320.00 | CHRIS KOVAREK |
| A/P | 188062 | 11/10/20 | 82.78 | CITIZENS MEDICAL CENTER |
| A/P | 188063 | 11/10/20 | 990.46 | CLEARFLY |
| A/P | 188064 | 11/10/20 | 159.80 | COASTAL OFFICE SOLUTONS |
| A/P | 188065 | 11/10/20 | 877.94 | COMBINED INSURANCE |
| A/P | 188066 | 11/10/20 | 37.60 | CONMED LINVATEC |
| A/P | 188067 | 11/10/20 | 1,944.64 | COOPER SURGICAL INC |
| A/P | 188068 | 11/10/20 | 450.00 | CYGNUS MEDICAL LLC |
| A/P | 188069 | 11/10/20 | 550.00 | DASHBOARD MD |
| A/P | 188070 | 11/10/20 | 1,004.66 | DEWITT POTH & SON |
| A/P | 188071 | 11/10/20 | 50,311.25 | DIAMOND HEALTHCARE CORP |
| A/P | 188072 | 11/10/20 | 139,301.91 | DISCOVERY MEDICAL NETWORK INC |
| A/P | 188073 | 11/10/20 | 127.75 | EAGLE FIRE & SAFETY INC |
| A/P | 188074 | 11/10/20 | 50,500.00 | EMERGENCY STAFFING SOLUTIONS |
| A/P | 188075 | 11/10/20 | 1,376.70 | EVOQUA WATER TECHNOLOGIES LLC |
| A/P | 188076 | 11/10/20 | 548.00 | FDA-MQSA PROGRAM |
| A/P | 188077 | 11/10/20 | 30.38 | FEDERAL EXPRESS CORP. |
| A/P | 188078 | 11/10/20 | 380.00 | FIRETROL PROTECTION SYSTEMS |
| A/P | 188079 | 11/10/20 | 4,708.05 | FISHER HEALTHCARE |
| A/P | 188080 | 11/10/20 | 535.41 | GENZYME CORPORATION |
| A/P | 188081 | 11/10/20 | 96.46 | GETINGE USA |
| A/P | 188082 | 11/10/20 | 63.87 | GETINGE USA SALES LLC |
| A/P | 188083 | 11/10/20 | 4,188.28 | GRAINGER |
| A/P | 188084 | 11/10/20 | 75.00 | GULF COAST DELIVERY |
| A/P | 188085 | 11/10/20 | 439.45 | GULF COAST PAPER COMPANY |
| A/P | 188086 | 11/10/20 | 360.00 | HALF LEAGUE STORAGE |
| A/P | 188087 | 11/10/20 | 29.52 | HEALTH CARE LOGISTICS INC |
| A/P | 188088 | 11/10/20 | 3,750.00 | HEALTH SOLUTIONS DIETETICS |
| A/P | 188089 | 11/10/20 | 472.50 | HOLOGIC INC |
| A/P | 188090 | 11/10/20 | 821.63 | INNOVATIVE STERILIZATION |
| A/P | 188091 | 11/10/20 | 205.25 | INTOXIMETERS INC |
| A/P | 188092 | 11/10/20 | 1,588.51 | J & J HEALTH CARE SYSTEMS, INC |
| A/P | 188093 | 11/10/20 | 35.00 | JAMIE NEYLAND |

| BANK--CHECK CODE | NUMBER | DATE | AMOUNT | PAYEE |
|---|---|---|---|---|
| A/P | 188094 | 11/10/20 | 43.00 | KEY SURGICAL INC |
| A/P | 188095 | 11/10/20 | 119.18 | MARIA DEL CARMEN HERRERA |
| A/P | 188096 | 11/10/20 | 5,260.15 | MCKESSON MEDICAL SURGICAL INC |
| A/P | 188097 | 11/10/20 | 427.80 | MEDLINE INDUSTRIES INC |
| A/P | 188098 | 11/10/20 | 272.95 | MMC AUXILIARY GIFT SHOP |
| A/P | 188099 | 11/10/20 | .00 | VOIDED |
| A/P | 188100 | 11/10/20 | 13,244.77 | MORRIS & DICKSON CO, LLC |
| A/P | 188101 | 11/10/20 | 1,223.30 | MXR IMAGING, INC |
| A/P | 188102 | 11/10/20 | 314.18 | NADINE GARNER |
| A/P | 188103 | 11/10/20 | 4,101.52 | NATIONAL FARM LIFE INSURANCE |
| A/P | 188104 | 11/10/20 | 588.81 | OLYMPUS AMERICA INC |
| A/P | 188105 | 11/10/20 | 1,313.80 | ORTHO CLINICAL DIAGNOSTICS |
| A/P | 188106 | 11/10/20 | 3,084.00 | PARA |
| A/P | 188107 | 11/10/20 | 450.57 | PEM FILINGS |
| A/P | 188108 | 11/10/20 | 291.91 | POWER HARDWARE |
| A/P | 188109 | 11/10/20 | 3,425.00 | PREMIER SLEEP DISORDERS CENTER |
| A/P | 188110 | 11/10/20 | 24,891.74 | RELIANT, DEPT 0954 |
| A/P | 188111 | 11/10/20 | 1,080.64 | SMITH & NEPHEW |
| A/P | 188112 | 11/10/20 | 12,375.00 | SPBS CLINICAL EQUIPMENT SRVC |
| A/P | 188113 | 11/10/20 | 675.86 | SPECTRA CORP |
| A/P | 188114 | 11/10/20 | 1,523.03 | STERIS CORPORATION |
| A/P | 188115 | 11/10/20 | 2,191.08 | STRYKER SALES CORP |
| A/P | 188116 | 11/10/20 | 7,156.98 | STRYKER SUSTAINABILITY |
| A/P | 188117 | 11/10/20 | 40.25 | SYLVIA MENDOZA |
| A/P | 188118 | 11/10/20 | 2,405.00 | THE HARTFORD |
| A/P | 188119 | 11/10/20 | 2,779.92 | TOWER TECH SERVICES, INC |
| A/P | 188120 | 11/10/20 | 52.95 | UNIFORM ADVANTAGE |
| A/P | 188121 | 11/10/20 | 213.85 | UNITED AD LABEL CO INC |
| A/P | 188122 | 11/10/20 | 599.00 | UPDOX LLC |
| A/P | 188123 | 11/10/20 | 38,595.51 | VICTORIA ANESTHESIOLOGY |
| A/P | 188124 | 11/10/20 | 358.27 | WATERMARK GRAPHICS INC |
| A/P | 188125 | 11/10/20 | 74,929.14 | BETHANY SENIOR LIVING |
| A/P | 188126 | 11/10/20 | 3,870.00 | BROADMOOR AT CREEKSIDE PARK |
| A/P | 188127 | 11/10/20 | 52,250.72 | GOLDENCREEK HEALTHCARE |
| A/P | 188128 | 11/10/20 | 39,556.49 | GULF POINTE PLAZA |
| A/P | 188129 | 11/10/20 | 1,900.00 | THE CRESCENT |
| A/P | 188130 | 11/10/20 | .00 | VOIDED |
| A/P | 188131 | 11/10/20 | 103,790.33 | TUSCANY VILLAGE |
| TOTALS: | | | 690,546.78 | |

Payables 413,686.74 +
Contracts 119.18 +
314.18 +
130.00 +
NH 3,870.00 +
1,900.00 +
Transfers 52,250.72 +
39,556.49 +
103,790.33 +
74,929.14 +
690,546.78 =

APPROVED
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NOV 10 2020

COUNTY AUDITOR
GALVESTON COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
11/9/2020

| 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** | | 229,052.96 ✓ | 210,737.46 ✓ | 107,846.19 ✓ | | - | 126,161.69 ✓ | 63,127.59 |
| | | | | | | Bank Balance | 126,161.69 | |
| | | | | | | Variance | - | |
| | | | | | | Leave in Balance | 100.00 | |
| | | | | | | Pending QIPP 1 & 2 | 18,134.07 ✓ | |
| *Routing Information for Ashford Gardens:* | | | | | | QIPP 1 & 2 | 31,430.28 ✓ | |
| *Ashford Health Care Center Ltd Co* | | | | | | QIPP 4 & Lapase | 13,288.32 ✓ | |
| *JP Morgan Chase Bank* | | | | | | October Interest | 81.43 ✓ | |
| | | | | | | November Interest | - | |
| *157* | | | | | | December Interest | - | |
| | | | | | | Adjust Balance/Transfer Amt | 63,127.59 ✓ | |
| **Broadmoor** | | 95,494.67 ✓ | 87,849.22 ✓ | 70,968.89 ✓ | | - | 78,614.34 ✓ | 53,183.20 |
| | | | | | | Bank Balance | 78,614.34 | |
| | | | | | | Variance | - | |
| | | | | | | Leave in Balance | 100.00 | |
| | | | | | | Pending QIPP 1 & 2 | 7,507.12 ✓ | |
| | | | | | | QIPP 1 & 2 | 13,011.46 ✓ | QIPP |
| | | | | | | QIPP 4 & Lapse | 4,774.23 ✓ | |
| | | | | | | October Interest | 38.33 ✓ | |
| | | | | | | November Interest | - | |
| | | | | | | December Interest | - | |
| | | | | | | Adjust Balance/Transfer Amt | 53,183.20 ✓ | |
| **Crescent** | | 101,203.12 ✓ | 95,030.56 ✓ | 63,165.00 ✓ | | - | 69,337.56 ✓ | 48,802.67 |
| | | | | | | Bank Balance | 69,337.56 | |
| | | | | | | Variance | - | |
| | | | | | | Leave in Balance | 100.00 | |
| | | | | | | Pending QIPP 1 & 2 | 6,027.49 ✓ | |
| | | | | | | QIPP 1 & 2 | 10,446.94 ✓ | |
| | | | | | | QIPP 4 & Lapse | 3,915.39 ✓ | |
| | | | | | | October Interest | 45.07 ✓ | |
| | | | | | | November Interest | - | |
| | | | | | | December Interest | - | |
| | | | | | | Adjust Balance/Transfer Amt | 48,802.67 ✓ | |
| **Fort Bend** | 5 | 133,656.16 ✓ | 126,206.02 | 75,913.15 ✓ | | - | 83,363.29 ✓ | 57,783.50 |
| | | | | | | Bank Balance | 83,363.29 | |
| | | | | | | Variance | - | |
| | | | | | | Leave in Balance | 100.00 | |
| | | | | | | Pending QIPP 1 & 2 | 7,329.33 ✓ | |
| | | | | | | QIPP 1 & 2 | 12,703.32 ✓ | |
| | | | | | | QIPP 4 & Lapse | 5,426.33 ✓ | |
| | | | | | | October Interest | 20.81 ✓ | |
| | | | | | | November Interest | - | |
| | | | | | | December Interest | - | |
| | | | | | | Adjust Balance/Transfer Amt | 57,783.50 ✓ | |
| **Solera at W Houston** | | 140,954.86 ✓ | 133,697.37 ✓ | 46,828.57 ✓ | | | 54,086.06 ✓ | 29,813.67 |
| | | | | | | Bank Balance | 54,086.06 | |
| | | | | | | Variance | - | |
| | | | | | | Leave in Balance | 100.00 | |
| | | | | | | Pending QIPP 1 & 2 | 7,105.67 ✓ | |
| *Routing Information for Crescent / Solera at West Houston / Fort Be* | | | | | | QIPP 1 & 2 | 12,315.66 ✓ | |
| *Cantex Health Care Centers III LLC* | | | | | | QIPP 4 & Lapse | 4,699.24 ✓ | |
| *JP Morgan Chase Bank* | | | | | | October Interest | 51.82 ✓ | |
| | | | | | | November Interest | - | |
| | | | | | | December Interest | - | |
| | | | | | | | - | |
| | | | | | | Adjust Balance/Transfer Amt | 29,813.67 ✓ | |

APPROVED
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NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

| | |
|---|---|
| **TOTAL TRANSFERS** | **252,710.63** |

*Note: Only balances of over $5,000 will be transferred to the nurs*
*Note 2: Each account has a base balance of $100 that MMC depc*

Approved:
Jason Anglin, CEO — 11/9/2020

J:\NH Weekly Transfers\NH UPL Transfer Summary\2020\Novem

## Ashford Gardens

| | | Transfer-Out | Transfer-In | MMC PORTION QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4 &Lapse | QIPP TI | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| 11/2/2020 | Amerigroup TXSC HCCLAIMPMT 3135703506 111000 TRN*1*3135703506*1752603231\ | - | 2,385.54 | | | | | - | 2,385.54 |
| 11/2/2020 | AMERIGROUP CORPO E-PAYMENT EE52091672 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 26,576.63 | | | | 26,576.63 | 13,288.32 | 13,288.32 |
| 11/2/2020 | UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010301560701*1912008361*0000TEX01\ | - | 170.34 | | | | | - | 170.34 |
| 11/2/2020 | UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010301260127*1912008361*0000TEX01\ | - | 796.38 | | | | | - | 796.38 |
| 11/2/2020 | UHC Community Pl HCCLAIMPMT 746003411 910000 TRN*1*202010301170754*1912008361*0000TEX01\ | - | 5,330.00 | | | | | - | 5,330.00 |
| 11/4/2020 | WIRE OUT ASHFORD HEALTH CARE CENTER LTD | 210,737.46 | - | | | | | - | - |
| 11/5/2020 | Deposit | - | 27,703.97 | | | | | - | 27,703.97 |
| 11/5/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2 TRN*1*05G301761326436189*1746000156~ | - | 899.01 | | | | | - | 899.01 |
| 11/6/2020 | AMERIGROUP CORPO E-PAYMENT EE52093626 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 33,855.64 | 29,004.92 | 4,850.72 | | | 31,430.28 | 2,425.36 |
| 11/6/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2 TRN*1*05G312601326436189*1746000156~ | - | 10,128.68 | | | | | - | 10,128.68 |
| | | | | | | | | - | - |
| | | 210,737.46 | 107,846.19 | 29,004.92 | 4,850.72 | - | 26,576.63 | 44,718.60 | 63,127.60 |

## Broadmoor

| | | Transfer-Out | Transfer-In | MMC PORTION QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4 &Lapse | QIPP TI | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| 11/2/2020 | AMERIGROUP CORPO E-PAYMENT EE52091675 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 9,548.45 | | | | 9,548.45 | 4,774.23 | 4,774.23 |
| 11/2/2020 | NOVITAS SOLUTION HCCLAIMPMT 676357 420000177 TRN*1*EFT5744855*1205296137*0000004011\ | - | 2,847.56 | | | | | - | 2,847.56 |
| 11/2/2020 | HUMANA INS CO HCCLAIMPMT 390861 830000590002 TRN*1*001290053363113*1391263473\ | - | 11,994.07 | | | | | - | 11,994.07 |
| 11/2/2020 | HUMANA CHA DISB HCCLAIMPMT 390861 4200001727 TRN*1*014840101819652*1611013183\ | - | 5,552.18 | | | | | - | 5,552.18 |
| 11/3/2020 | HUMANA INS CO HCCLAIMPMT 390861 830000534552 TRN*1*001290053397888*1391263473\ | - | 10,114.78 | | | | | - | 10,114.78 |
| 11/4/2020 | WIRE OUT CANTEX HEALTH CARE CENTERS III | 87,849.22 | - | | | | | - | - |
| 11/5/2020 | Deposit | - | 9,948.00 | | | | | - | 9,948.00 |
| 11/5/2020 | NOVITAS SOLUTION HCCLAIMPMT 676357 420000120 TRN*1*EFT5749004*1205296137*0000004011\ | - | 6,948.45 | | | | | - | 6,948.45 |
| 11/6/2020 | AMERIGROUP CORPO E-PAYMENT EE52093629 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 14,015.40 | 12,007.52 | 2,007.88 | | | 13,011.46 | 1,003.94 |
| | | | | | | | | - | - |
| | | 87,849.22 | 70,968.89 | 12,007.52 | 2,007.88 | - | 9,548.45 | 17,785.69 | 53,183.21 |

## Crescent

| | | Transfer-Out | Transfer-In | MMC PORTION QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4 &Lapse | QIPP TI | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| 11/2/2020 | AMERIGROUP CORPO E-PAYMENT EE52091674 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 7,830.78 | | | | 7,830.78 | 3,915.39 | 3,915.39 |
| 11/2/2020 | NOVITAS SOLUTION HCCLAIMPMT 676323 420000177 TRN*1*EFT5744846*1205296137*0000004011\ | - | 3,930.34 | | | | | - | 3,930.34 |
| 11/3/2020 | HUMANA INS CO HCCLAIMPMT 390864 830000534552 TRN*1*001290053397889*1391263473\ | - | 7,255.25 | | | | | - | 7,255.25 |
| 11/3/2020 | HUMANA CHA DISB HCCLAIMPMT 390864 4200001239 TRN*1*014840101824930*1611013183\ | - | 6,082.33 | | | | | - | 6,082.33 |
| 11/4/2020 | Check | 91.72 | - | | | | | - | - |
| 11/4/2020 | WIRE OUT CANTEX HEALTH CARE CENTERS III | 94,938.84 | - | | | | | - | - |
| 11/4/2020 | MANAGEANDNET1718 MNS PMNT 000000000003268 41 0256756 | - | 360.00 | | | | | - | 360.00 |
| 11/4/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2 TRN*1*05G295571669860425*1746000156~ | - | 7,040.00 | | | | | - | 7,040.00 |
| 11/4/2020 | CIGNA HCCLAIMPMT 1669860425 91000010672660 TRN*1*201031090046208*1591031071\ | - | 5,850.00 | | | | | - | 5,850.00 |
| 11/5/2020 | Deposit | - | 8,173.46 | | | | | - | 8,173.46 |
| 11/5/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2 TRN*1*05G301791669860425*1746000156~ | - | 520.69 | | | | | - | 520.69 |
| 11/6/2020 | AMERIGROUP CORPO E-PAYMENT EE52093628 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 11,252.08 | 9,641.80 | 1,610.28 | | | 10,446.94 | 805.14 |
| 11/6/2020 | UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202011051620266*1912008361*0000TEX01\ | - | 4,870.07 | | | | | - | 4,870.07 |
| | | | | | | | | - | - |
| | | 95,030.56 | 63,165.00 | 9,641.80 | 1,610.28 | - | 7,830.78 | 14,362.33 | 48,802.67 |

## Fort Bend

| | | Transfer-Out | Transfer-In | MMC PORTION QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4 &Lapse | QIPP TI | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| 11/2/2020 | AMERIGROUP CORPO E-PAYMENT EE52091671 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 10,852.66 | | | | 10,852.66 | 5,426.33 | 5,426.33 |
| 11/2/2020 | UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010301530164*1912008361*0000TEX01\ | - | 5,465.26 | | | | | - | 5,465.26 |
| 11/2/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2 TRN*1*05G281871730577503*1746000156~ | - | 2,014.49 | | | | | - | 2,014.49 |
| 11/3/2020 | UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010311610060 4*1912008361*0000TEX01\ | - | 29,830.76 | | | | | - | 29,830.76 |
| 11/4/2020 | Check | 50,162.03 | - | | | | | - | - |
| 11/4/2020 | WIRE OUT CANTEX HEALTH CARE CENTERS III | 75,912.45 | - | | | | | - | - |
| 11/4/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2 TRN*1*05G295581730577503*1746000156~ | - | 2,737.22 | | | | | - | 2,737.22 |
| 11/5/2020 | Check | 131.54 | - | | | | | - | - |
| 11/5/2020 | Deposit | - | 11,335.32 | | | | | - | 11,335.32 |
| 11/6/2020 | AMERIGROUP CORPO E-PAYMENT EE52093625 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 13,677.44 | 11,729.20 | 1,948.24 | | | 12,703.32 | 974.12 |
| | | | | | | | | - | - |
| | | 126,206.02 | 75,913.15 | 11,729.20 | 1,948.24 | - | 10,852.66 | 18,129.65 | 57,783.50 |

## Solara at West Houston

| | | Transfer-Out | Transfer-In | MMC PORTION QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4 &Lapse | QIPP TI | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| 11/2/2020 | AMERIGROUP CORPO E-PAYMENT EE52091673 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 9,398.48 | | | | 9,398.48 | 4,699.24 | 4,699.24 |
| 11/2/2020 | NOVITAS SOLUTION HCCLAIMPMT 676310 420000177 TRN*1*EFT5744842*1205296137*0000004011\ | - | 3,571.00 | | | | | - | 3,571.00 |
| 11/3/2020 | MANAGEANDNET1718 MNS PMNT 000000000002482 41 0256725 | - | 1,252.50 | | | | | - | 1,252.50 |
| 11/3/2020 | UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010311210044 5*1912008361*0000TEX01\ | - | 37.19 | | | | | - | 37.19 |
| 11/4/2020 | WIRE OUT CANTEX HEALTH CARE CENTERS III | 133,697.37 | - | | | | | - | - |
| 11/5/2020 | Deposit | - | 9,790.14 | | | | | - | 9,790.14 |
| 11/6/2020 | MANAGEANDNET1718 MNS PMNT 000000000002482 41 0256807 | - | 7,292.50 | | | | | - | 7,292.50 |
| 11/6/2020 | AMERIGROUP CORPO E-PAYMENT EE52093627 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG | - | 13,259.96 | 11,371.36 | 1,888.60 | | | 12,315.66 | 944.30 |
| 11/6/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2 TRN*1*05G312701497143259*1746000156~ | - | 2,226.80 | | | | | - | 2,226.80 |
| | | | | | | | | - | - |
| | | 133,697.37 | 46,828.57 | 11,371.36 | 1,888.60 | - | 9,398.48 | 17,014.90 | 29,813.67 |

TOTALS

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 653,520.63 | 364,721.80 | 73,754.80 | 12,305.72 | - | 64,207.00 | 112,011.16 | 252,710.64 |

Account Number / Name

Account Type

Search All

Groups

Add Group

DDA

Data reported as of Nov 9, 202

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|---|---|---|---|---|
| [redacted] | | | | |
| *4381 MEMORIAL MEDICAL CENTER / NH ASHFORD | $126,161.69 | $135,494.81 | $126,161.69 | $82,177.3 |
| *4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR | $78,614.34 | $78,614.34 | $78,614.34 | $64,598.9 |
| *4411 MEMORIAL MEDICAL CENTER / NH CRESCENT | $69,337.56 | $76,876.52 | $69,337.56 | $53,215.4 |
| *4446 MEMORIAL MEDICAL CENTER / NH FORT BEND | $83,363.29 | $83,363.29 | $83,363.29 | $69,685.8 |
| *4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON | $54,086.06 | $64,653.32 | $54,086.06 | $31,306.8 |
| [redacted] | | | | |

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Page generated on 11/09/2020

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Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
11/9/2020

| 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 | | 105,407.31 | 55,231.38 | 48,741.51 | - | - | 98,917.44 | 48,741.51 |
| | | | | | | Bank Balance | 98,917.44 | |
| | | | | | | Variance | - | |
| | | | | | | Leave in Balance | 100.00 | |
| | | | | | | | - | |
| | | | | | | Pending QIPP 1& 2 | 50,024.94 | |
| | | | | | | October Interest | 50.99 | |
| | | | | | | November Interest | - | |
| | | | | | | December Interest | - | |
| | | | | | | | - | |
| | | | | | | Adjust Balance/Transfer Amt | 48,741.51 | |

*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 11/9/2020

APPROVED
ON
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

| Golden Creek | | Transfer-Out | Transfer-In | MMC PORTION | | | | | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| | | | | QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4&Lapse | QIPP TI | |
| 11/2/2020 | TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 543684555876917 GOLDEN CREEK HEALTHCAR 102920 | - | 456.00 | | | | | - | 456.00 |
| 11/2/2020 | NOVITAS SOLUTION HCCLAIMPMT 676097 420000177 TRN*1*EFT5744471*1205296137*000004011\ | - | 16,854.54 | | | | | - | 16,854.54 |
| 11/4/2020 | WIRE OUT NEXION HEALTH AT GOLDEN CREEK | 55,231.38 | - | | | | | - | - |
| 11/5/2020 | Deposit | - | 19,784.02 | | | | | - | 19,784.02 |
| 11/6/2020 | TSYS/TRANSFIRST BKCD STLMT 543684555876917 9 543684555876917 GOLDEN CREEK HEALTHCAR 110420 | - | 304.00 | | | | | - | 304.00 |
| 11/6/2020 | NOVITAS SOLUTION HCCLAIMPMT 676097 420000130 TRN*1*EFT5750042*1205296137*000004011\ | - | 8,273.22 | | | | | - | 8,273.22 |
| 11/6/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2 TRN*1*05G314711588075964*1746000156~ | - | 3,069.73 | | | | | - | 3,069.73 |
| | | | | | | | | - | - |
| | | 55,231.38 | 48,741.51 | - | - | - | - | - | 48,741.51 |

Account Number / Name

Account Type

Search All

Groups

Add Group

DDA

Data reported as of Nov 9, 202

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|---|---|---|---|---|
| [redacted] | | | | |
| *4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE | $98,917.44 | $107,230.62 | $98,917.44 | $87,270.4 |
| [redacted] | | | | |

* indicate

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Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
11/9/2020

| 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 | | 38,737.99 | - | 4,071.27 | | - | - | 42,809.26 | 7,100.61 |
| | | | | | | | Bank Balance | 42,809.26 | |
| | | | | | | | Variance | - | |
| | | | | | | | Leave in Balance | 100.00 | |
| | | | | | | | Pending QIPP 1 & 2 | 35,602.30 | |
| | | | | | | | October Interest | 6.35 | |
| | | | | | | | November Interest | - | |
| | | | | | | | December Interest | - | |
| | | | | | | | Adjust Balance/Transfer Amt | 7,100.61 | |

| Nursing Home | Account | 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 | | 55,935.83 | 55,816.51 | 13,662.56 | | - | - | 13,781.88 | 13,662.56 |
| | | | | | | | Bank Balance | 13,781.88 | |
| | | | | | | | Variance | - | |
| | | | | | | | Leave in Balance | 100.00 | |
| | | | | | | | October Interest | 19.32 | |
| | | | | | | | November Interest | - | |
| | | | | | | | December Interest | - | |
| | | | | | | | Adjust Balance/Transfer Amt | 13,662.56 | |
| | | | | | | | TOTAL TRANSFERS | ~~13,662.56~~ 20,763.17 | |

*Routing Information for Gulf Pointe Plaza:*

7,100.61
13,662.56

*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 11/9/2020

APPROVED
BY

NOV 09 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 |
|---|---|---|---|---|---|---|---|---|
| 11/3/2020 HUMANA INS CO HCCLAIMPMT 624982 830000535374 TRN*1*001290053441446*1391263473\ | - | 4,071.27 | | | | | - | 4,071.27 |
| | | | | | | | - | - |
| | - | 4,071.27 | - | - | - | - | - | 4,071.27 |

**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 |
|---|---|---|---|---|---|---|---|---|
| 11/4/2020 WIRE OUT HMG SERVICES, LLC | 55,816.51 | - | | | | | - | - |
| 11/5/2020 Deposit | - | 13,662.56 | | | | | - | 13,662.56 |
| | | | | | | | - | - |
| | 55,816.51 | 13,662.56 | - | - | - | - | - | 13,662.56 |
| | 55,816.51 | 17,733.83 | - | - | - | - | - | 17,733.83 |

Account Number / Name

Account Type

Groups

Add Group

Search All

DDA

Data reported as of Nov 9, 202

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|---|---|---|---|---|
| [redacted] | | | | |
| *5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID | $13,781.88 | $13,781.88 | $13,781.88 | $13,781.8 |
| *5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY | $42,809.26 | $42,809.26 | $42,809.26 | $42,809.2 |
| [redacted] | | | | |

* indicate

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Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
11/9/2020

| Nursing Home | Account | Previous Beginning Balance | Transfer-Out | Transfer-In | CKs Cleared | Pending Deposits | | Today's Beginning Balance | Amount to Be Transferred to Nursing Home | | Test |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Tuscany Senior Living | | 323,659.07 | 312,916.06 | 43,569.20 | - | - | - | 54,312.21 | 25,130.50 | 25,130.50 | 29,181.71 |
| | | | | | | | Bank Balance | 54,312.21 | | | |
| | | | | | | | Variance | - | | | |
| | | | | | | | Leave in Balance | 100.00 | | | |
| | | | | | | | Pending QIPP 1& 2 | 10,638.43 | | | |
| | | | | | | | QIPP 1 & 2 | 18,438.70 | | | |
| | | | | | | | October Interest | 4.58 | | | |
| | | | | | | | November Interest | - | | | |
| | | | | | | | December Interest | - | | | |
| | | | | | | | Adjust Balance/Transfer Amt | 25,130.50 | | | |

*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 11/9/2020

APPROVED
BY
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

| Tuscany Senior Living | | Transfer-Out | Transfer-In | MMC PORTION QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4 &Lapse | QIPP TI | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| 11/2/2020 | Molina HC of TX HCCLAIMPMT PN1275717894 4200 TRN*1*EFT | - | 5,369.03 | | | | | - | 5,369.03 |
| 11/2/2020 | NOVITAS SOLUTION HCCLAIMPMT 676201 420000177 TRN*1*E | - | 3,872.04 | | | | | - | 3,872.04 |
| 11/3/2020 | Molina HC of TX HCCLAIMPMT PN1275717894 4200 TRN*1*EFT | - | 47.24 | | | | | - | 47.24 |
| 11/4/2020 | WIRE OUT LINBAR ENTERPRISES, LLC | 312,916.06 | - | | | | | - | - |
| 11/4/2020 | Molina HC of TX HCCLAIMPMT PN1275717894 4200 TRN*1*EFT | - | 9,762.39 | | | | | - | 9,762.39 |
| 11/6/2020 | AMERIGROUP CORPO E-PAYMENT EE52093630 111000 ISA*00* | - | 19,860.12 | 17,017.28 | 2,842.84 | | | 18,438.70 | 1,421.42 |
| 11/6/2020 | NOVITAS SOLUTION HCCLAIMPMT 676201 420000130 TRN*1*E | - | 4,658.38 | | | | | - | 4,658.38 |
| | | 312,916.06 | 43,569.20 | 17,017.28 | 2,842.84 | - | - | 18,438.70 | 25,130.50 |

Account Number / Name

Account Type

Search All

Groups

Add Group

DDA Data reported as of Nov 9, 202

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|---|---|---|---|---|
| [redacted] | | | | |
| *3407 MMC -NH TUSCANY VILLAGE | $54,312.21 | $66,230.25 | $54,312.21 | $29,793.7 |

* indicate
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Memorial Medical Center
Nursing Home UPL
Weekly HSLTransfer
Prosperity Accounts
11/9/2020

| 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 |
|---|---|---|---|---|---|---|---|---|---|
| Bethany Senior Living | | 363,211.70 | 363,027.76 | 50,755.07 | - | - | | 50,939.01 | 50,755.07 |
| | | | | | | | Bank Balance | 50,939.01 | |
| | | | | | | | Variance | - | |
| | | | | | | | Leave in Balance | 100.00 | |

| | |
|---|---|
| October Interest | 83.94 |
| November Interest | - |
| December Interest | - |
| Adjust Balance/Transfer Amt | 50,755.07 |

*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 11/9/2020

APPROVED
ON
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

| Bethany Senior Living | | Transfer-Out | Transfer-In | MMC PORTION QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4 &Lapse | QIPP TI | NH PORTION |
|---|---|---|---|---|---|---|---|---|---|
| 11/2/2020 | Deposit | - | 28,294.91 | | | | | - | 28,294.91 |
| 11/2/2020 | NOVITAS SOLUTION HCCLAIMPMT 676481 420000177 TF | - | 8,315.76 | | | | | - | 8,315.76 |
| 11/3/2020 | NOVITAS SOLUTION HCCLAIMPMT 676481 420000119 TF | - | 3,588.43 | | | | | - | 3,588.43 |
| 11/4/2020 | WIRE OUT BETHANY SENIOR LIVING, LTD | 363,027.76 | - | | | | | - | - |
| 11/4/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2 T | - | 9,370.67 | | | | | - | 9,370.67 |
| 11/6/2020 | HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2 T | - | 1,185.30 | | | | | - | 1,185.30 |
| | | | | | | | | - | - |
| | | 363,027.76 | 50,755.07 | - | - | - | - | - | 50,755.07 |

Account Number / Name

Account Type

Groups

Add Group

Search All

DDA

Data reported as of Nov 9, 202

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|---|---|---|---|---|
| [redacted] | | | | |
| *5506 MMC -NH BETHANY SENIOR LIVING | $50,939.01 | $50,939.01 | $50,939.01 | $49,753.7 |
| [redacted] | | | | |

* indicate

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# MEMORIAL MEDICAL CENTER
## CHECK REQUEST

PAY TO THE ORDER OF: MMC OPERATING

Date Requested: 11/9/20

APPROVED BY

NOV 09 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 00112

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

AMOUNT 44,718.60

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP QIPP 1 &2 AND YR 3 QIPP 4 & LAPSE – Ashford

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

Ø

RUN DATE:11/11/20 MEMORIAL MEDICAL CENTER PAGE 1
TIME:13:19 CHECK REGISTER GLCKREG
11/11/20 THRU 11/11/20

| BANK--CHECK | NUMBER | DATE | AMOUNT | PAYEE |
|---|---|---|---|---|
| NHA | 001112 | 11/11/20 | 44,718.60 | MMC OPERATING |
| TOTALS: | | | 44,718.60 | |

AshPrd

APPROVED
GN

NOV 10 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# MEMORIAL MEDICAL CENTER
## CHECK REQUEST

PAY TO THE ORDER OF: MMC OPERATING

Date Requested: 11/9/20

APPROVED
GM

NOV 09 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK # 000073

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

AMOUNT: 17,785.69

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP QIPP 1 &2 AND YR 3 QIPP 4 & LAPSE - Broadmoor

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

| BANK--CHECK-- CODE | NUMBER | DATE | AMOUNT | PAYEE |
|---|---|---|---|---|
| NHB | 000073 | 11/11/20 | 17,785.69 | MMC OPERATING |
| TOTALS: | | | 17,785.69 | |

Broadmoor ✓

APPROVED
ON

NOV 10 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# MEMORIAL MEDICAL CENTER
## CHECK REQUEST

PAY TO: MMC OPERATING

Date Requested: 11/9/20

APPROVED
GM
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
Ck # 000016

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

AMOUNT 14,362.33

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP QIPP 1 &2 AND YR 3 QIPP 4 & LAPSE – Crescent

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

| BANK--CHECK | | | | |
|---|---|---|---|---|
| CODE | NUMBER | DATE | AMOUNT | PAYEE |
| NHC | 000106 | 11/11/20 | 14,362.33 | MMC OPERATING |
| TOTALS: | | | 14,362.33 | |

Crescent

APPROVED
ON

NOV 10 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# MEMORIAL MEDICAL CENTER
## CHECK REQUEST

PAYEE: MMC OPERATING

Date Requested: 11/9/20

APPROVED
GW

NOV 09 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 000103

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

AMOUNT: 18,129.65

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP QIPP 1 &2 AND YR 3 QIPP 4 & LAPSE – Fort Bend

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

| BANK--CHECK | | | | |
|---|---|---|---|---|
| CODE | NUMBER | DATE | AMOUNT | PAYEE |
| NHF | 000103 | 11/11/20 | 18,129.65 | MMC OPERATING |
| TOTALS: | | | 18,129.65 | |

Fort Bend

APPROVED ON

NOV 10 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# MEMORIAL MEDICAL CENTER
## CHECK REQUEST

PAY TO THE ORDER OF: MMC OPERATING

Date Requested: 11/9/20

APPROVED
GH
NOV 09 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Ck # 001105

AMOUNT: 17,014.90

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP QIPP 1 &2 AND YR 3 QIPP 4 & LAPSE – Solem

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

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

| CODE | NUMBER | DATE | AMOUNT | PAYEE |
|---|---|---|---|---|
| NHS | 001105 | 11/11/20 | 17,014.90 | MMC OPERATING Solen |
| TOTALS: | | | 17,014.90 | |

APPROVED
ON

NOV 10 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

# MEMORIAL MEDICAL CENTER
## CHECK REQUEST

PAY TO THE ORDER OF: MMC OPERATING

Date Requested: 11/9/20

APPROVED GM

NOV 09 2020

COUNTY AUDITOR CALHOUN COUNTY, TEXAS

CK # 001002

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

AMOUNT 18,438.70

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP QIPP 1 &2 - Tuscany

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

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

| CODE | NUMBER | DATE | AMOUNT | PAYEE |
|---|---|---|---|---|
| TUS | 001002 | 11/11/20 | 18,438.70 | MMC OPERATING |
| TOTALS: | | | 18,438.70 | |

Tuscany

APPROVED
BY

NOV 10 2020

COUNTY AUDITOR
GALVESTON COUNTY, TEXAS

**QIPP Payment to MMC from Nursing Facilities** **Commissioner's Court** **11/11/2020**

| NH Name | From Bank Acct # | Ck # | Payee | GL # | SEPT QIPP 1 & 2 | YR 3 QIPP 4 & LAPSE | | | TOTAL | | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Ashford | 10000018 - Prosperity | | MMC -Prosperity Operating #10000001 | 10255040 | 31,430.28 | 13,288.32 | | | 44,718.60 | | 11/11/2020 |
| Broadmoor | 10000019 - Prosperity | | MMC -Prosperity Operating #10000001 | 10255040 | 13,011.46 | 4,774.23 | | | 17,785.69 | | 11/11/2020 |
| Crescent | 10000020 - Prosperity | | MMC -Prosperity Operating #10000001 | 10255040 | 10,446.94 | 3,915.39 | | | 14,362.33 | | 11/11/2020 |
| Fort Bend | 10000021 - Prosperity | | MMC -Prosperity Operating #10000001 | 10255040 | 12,703.32 | 5,426.33 | | | 18,129.65 | | 11/11/2020 |
| Solera | 10000022 - Prosperity | | MMC -Prosperity Operating #10000001 | 10255040 | 12,315.66 | 4,699.24 | | | 17,014.90 | | 11/11/2020 |
| Golden Creek | 10000023 - Prosperity | | MMC -Prosperity Operating #10000001 | 10255040 | - | - | | | - | | 11/11/2020 |
| Gulf Pointe-PP | 10000114 - Prosperity | | MMC -Prosperity Operating #10000001 | 10255040 | - | - | | | - | | 11/11/2020 |
| Gulf Pointe-MM | 10000025 - Prosperity | | MMC -Prosperity Operating #10000001 | | - | - | | | - | | 11/11/2020 |
| Bethany | | | MMC -Prosperity Operating #10000001 | | - | | | | - | | 11/11/2020 |
| Tuscany | | | MMC -Prosperity Operating #10000001 | 10255040 | 18,438.70 | | | | 18,438.70 | | 11/11/2020 |
| | | | | Total: | 98,346.36 | 32,103.51 | - | - | 130,449.87 | | |
| | Note: | | | | | | | | | | |

Approved:
Jason Anglin, CEO 11/11/2020

APPROVED
BY

NOV 10 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

44,718.60 +
17,785.69 +
14,362.33 +
18,129.65 +
17,014.90 +
18,438.70 +
130,449.87

**MEMORIAL MEDICAL CENTER**
**NH ASHFORD**
202 S ANN ST STE A
PORT LAVACA TX 77979

1112
88-2265/1131-87

11/11/2020
Date

CHECK ARMOR

Pay to the Order of MMC - Prosperity Operating | $ 44,718.60

Fourty-Four thousand Seven hundred eighteen and 60/100 Dollars

Photo Safe Deposit® Details on back

**PROSPERITY BANK®**
PORT LAVACA BANKING CENTER
1107 N. HIGHWAY 35 • PORT LAVACA, TX 77979-5102
361-552-7411 www.prosperitybankusa.com

County Auditor

For YR 4 QUPP 1 & 2 & YR 3 QUPP 4 & lapse

MP
County Treasurer

---

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

000073

88-2265/1131

Date 11/11/2020

**PAY TO THE ORDER OF** MMC Prosperity Operating | $ 17,785.69

Seventeen thousand seven hundred eighty five dollars & 69/100 **DOLLARS**

**PROSPERITY BANK®**

County Auditor

MP
County Treasurer

FOR YR 3 QUPP 4 & lapse & YR 4 QUPP 1 & 2

Security features are included. Details on back.

---

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

000106

88-2265/1131

Date 11/11/2020

**PAY TO THE ORDER OF** MMC Operating | $ 14,362.33

Fourteen thousand three hundred sixty two dollars and 33/100 **DOLLARS**

**PROSPERITY BANK®**

County Auditor

County Treasurer

FOR YR 3 QUPP 4 & lapse & YR 4 QUPP 1 & 2

Security features are included. Details on back.

**MEMORIAL MEDICAL CENTER**
**NH SOLERA AT WEST HOUSTON**
202 S ANN ST STE A
PORT LAVACA TX 77979

1105
88-2265/1131-87

11/11/20
Date

CHECK ARMOR

Pay to the Order of MMC Operating $ 17,014.90

Seventeen Thousand Fourteen dollars and 90/100 Dollars

Photo Safe Deposit®

**PROSPERITY BANK®**
PORT LAVACA BANKING CENTER
1107 N. HIGHWAY 35 • PORT LAVACA, TX 77979-5102
361-552-7411 www.prosperitybankusa.com

For YR 3 QIPP 4% lapse & QIPP 1&2

County Auditor

MP

County Treasurer

---

**MEMORIAL MEDICAL CENTER 022020**
**NH TUSCANY VILLAGE**
PH 361-553-4618
815 N VIRGINIA ST
PORT LAVACA, TX 77979

1002
88-2265/1131-87

DATE 11/11/2020

CHECK ARMOR

PAY TO THE ORDER OF MMC Prospenty Operating $ 18,438.70

Eighteen Thousand Four hundred thirty eight dollars and 70/100 DOLLARS

Photo Safe Deposit®

**PROSPERITY BANK®**
PORT LAVACA BANKING CENTER
1107 N. HIGHWAY 35 • PORT LAVACA, TX 77979-5102
361-552-7411 www.prosperitybankusa.com

FOR YR 4 QIPP 1&2

County Auditor

MP

County Treasurer

---

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MP

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

000103

88-2265/1131

Date 11/11/2020

**PAY TO THE ORDER OF** MMC Prosperity Operating $ 18,129.65

Eighteen Thousand one hundred twenty nine dollars and 65/100 **DOLLARS**

**PROSPERITY BANK®**

County Auditor

MP

County Treasurer

FOR YR 3 QIPP 4% lapse & YR 4 QIPP 1&2