

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---September 08, 2021

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 638,415.32
TOTAL TRANSFERS BETWEEN FUNDS	\$ 119,256.55
TOTAL NURSING HOME UPL EXPENSES	\$ 676,085.61
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED September 08, 2021	\$ 1,433,757.48

APPROVED

SEP 08 2021

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---September 08, 2021

PAYABLES AND PAYROLL

9/3/2021 Weekly Payables	482,034.12
9/7/2021 McKesson-340B Prescription Expense	10,233.51
9/7/2021 Amerisource Bergen-340B Prescription Expense	1,973.09

Prosperity Electronic Bank Payments

9/3/2021 Credit Card & Lease Fees	571.64
9/15/2021 TCDRS August Retirement	142,622.27
8/23-9/3/21 Pay Plus-Patient Claims Processing Fee	345.39
9/3/2021 ExpertPay- child support	614.20
9/2/2021 Authnet Gateway Billing-3rd Party Payor Fee	21.10

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **638,415.32**

TRANSFER BETWEEN FUNDS TO NURSING HOMES

9/3/2021 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	34,932.72
9/3/2021 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating	6,120.03
9/3/2021 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating in error and MMC Medicare recoup taken from Tuscany Village	30,602.69
9/3/2021 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error and MMC Medicare recoup taken from Bethany	32,605.08

MEDICARE ADVANCE PAYMENT RECOUP

9/7/2021 Broadmoor to Golden Creek-correction of Broadmoor medical recoup taken from Golden Creek	1,847.45
9/7/2021 Broadmoor to Tuscany Village-correction of Broadmoor medical recoup taken from Tuscany Village	906.27
9/7/2021 Crescent to Tuscany Village-correction of Crescent medicare recoup taken from Tuscany Village	906.27
9/7/2021 Crescent to Golden Creek-correction of Crescent medicare recoup taken from Golden Creek	1,847.45
9/7/2021 Fort Bend to Tuscany Village-correction of Fort Bend medicare recoup taken from Tuscany Village	906.27
9/7/2021 Fort Bend to Golden Creek-correction of Fort Bend medicare recoup taken from Golden Creek	1,847.45
9/7/2021 Solera to Golden Creek-correction of Solera medicare recoup taken from Golden Creek	1,847.45
9/7/2021 Solera to Tuscany Village-correction of Solera medicare recoup taken from Tuscany Village	906.27
9/7/2021 Golden Creek to Tuscany Village-correction of Golden Creek medicare recoup taken from Tuscany Village	907.71
9/7/2021 Tuscany to Golden Creek-correction of Tuscany medicare recoup taken from Golden Creek	1,847.45
9/7/2021 Bethany to Golden Creek-correction of check made out to Golden Creek deposited into Bethany in error	1,225.99

TOTAL TRANSFERS BETWEEN FUNDS \$ **119,256.55**

NURSING HOME UPL EXPENSES

9/7/2021 Nursing Home UPL-Cantex Transfer	175,741.09
9/7/2021 Nursing Home UPL-Nexion Transfer	118,244.15
9/7/2021 Nursing Home UPL-HMG Transfer	39,243.64
9/7/2021 Nursing Home UPL-Tuscany Transfer	62,589.31
9/7/2021 Nursing Home UPL-HSL Transfer	228,473.09

QIPP/RECOUP CHECKS TO MMC

9/7/2021 Golden Creek	32,541.90
9/7/2021 Gulf Pointe	19,252.43

TOTAL NURSING HOME UPL EXPENSES \$ **676,085.61**

TOTAL INTER-GOVERNMENT TRANSFERS	\$	-
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GRAND TOTAL DISBURSEMENTS APPROVED September 08, 2021	\$	1,433,757.48
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MEMORIAL MEDICAL CENTER

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09/02/2021

12:55

AP Open Invoice List

ap_open_invoice.template

Due Dates Through: 09/22/2021

Vendor#

Vendor Name

Class

Pay Code

10958

ALLYSON SWOPE ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
090121	09/01/2021	09/01/2021	09/01/2021				1,613.25	0.00	0.00	1,613.25 ✓

CONTRACT EMPLOYEE

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10958		ALLYSON SWOPE	1,613.25	0.00	0.00	1,613.25

Vendor#

Vendor Name

Class

Pay Code

A1360

AMERISOURCEBERGEN DRUG CCW ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
803087366 ✓	08/31/2021	08/15/2021	08/21/2021				245.02	0.00	0.00	245.02 ✓

LATE FEE

3065257578 ✓	08/31/2021	08/22/2021	08/28/2021				35,370.88	0.00	0.00	35,370.88 ✓
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INVENTORY

3065749357 ✓	08/31/2021	08/25/2021	08/31/2021				9,370.88	0.00	0.00	9,370.88 ✓
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INVENTORY

3065754112 ✓	08/31/2021	08/26/2021	09/01/2021				429.50	0.00	0.00	429.50 ✓
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INVENTORY

3065984337 ✓	08/31/2021	08/30/2021	09/05/2021				21.06	0.00	0.00	21.06
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INVENTORY

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
A1360		AMERISOURCEBEF	45,437.34	0.00	0.00	45,437.34

Vendor#

Vendor Name

Class

Pay Code

A0400

AUREUS RADIOLOGY LLC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2297455 2203490 ✓	08/31/2021	08/23/2021					2,680.00	0.00	0.00	2,680.00 ✓

LAB STAFFING

2297793 ✓	08/31/2021	08/23/2021	09/22/2021				3,018.75	0.00	0.00	3,018.75 ✓
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LAB STAFFING

2298032 ✓	08/31/2021	08/23/2021	09/22/2021				469.00	0.00	0.00	469.00 ✓
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LAB STAFFING

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
A0400		AUREUS RADIOLO	6,167.75	0.00	0.00	6,167.75

Vendor#

Vendor Name

Class

Pay Code

12324

BLUE CROSS BLUE SHIELD ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
081821	08/31/2021	08/18/2021	09/01/2021				214,382.49	0.00	0.00	214,382.49 ✓

INSURANCE

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12324		BLUE CROSS BLUE	214,382.49	0.00	0.00	214,382.49

Vendor#

Vendor Name

Class

Pay Code

C1325

CARDINAL HEALTH 414, INC. ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8002597156 ✓	08/31/2021	07/24/2021	08/18/2021				137.90	0.00	0.00	137.90 ✓

SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
C1325		CARDINAL HEALTH	137.90	0.00	0.00	137.90

Vendor#

Vendor Name

Class

Pay Code

13992

CARIANT HEALTH PARTNERS ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
127513 ✓	08/31/2021	08/26/2021	08/25/2021				1,608.75	0.00	0.00	1,608.75 ✓

MED SURG STAFFING

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13992		CARIANT HEALTH F	1,608.75	0.00	0.00	1,608.75

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
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2123000157	08/31/2021	08/17/2021	09/20/2021	16.12	0.00	0.00	16.12	✓
<i>15625</i>	ENERGY BILL 167653							
2123000157	08/31/2021	08/17/2021	09/20/2021	674.55	0.00	0.00	674.55	✓
<i>15634</i>	ENRGY BILL 167647							
2123000157	08/31/2021	08/17/2021	09/20/2021	1,669.35	0.00	0.00	1,669.35	✓
<i>15633</i>	ENERGY BILL 167636							
2123200157	08/31/2021	08/19/2021	09/20/2021	8.29	0.00	0.00	8.29	✓
<i>30114</i>	ENERGY BILL 167662							

Vendor#	13028	Vendor Name	CAVALLO ENERGY	Gross	2,368.31	Discount	0.00	No-Pay	0.00	Net	2,368.31									
C1730		Vendor Name	CITY OF PORT LAVACA ✓	Class	W	Pay Code														
Invoice#	081221A	Comment	08/31/2021	Tran Dt	08/12/2021	Inv Dt	09/07/2021	Due Dt		Check Dt	Pay	Gross	4,407.71	Discount	0.00	No-Pay	0.00	Net	4,407.71	✓
	081221	08/31/2021	08/12/2021	09/07/2021									69.93	0.00	0.00	69.93	✓			
	12131500	08/31/2021	08/12/2021	09/07/2021									25.68	0.00	0.00	25.68	✓			

Vendor#	C1730	Vendor Name	CITY OF PORT LAV.	Gross	4,503.32	Discount	0.00	No-Pay	0.00	Net	4,503.32									
13336		Vendor Name	COCA COLA SOUTHWEST BEVER. ✓	Class		Pay Code														
Invoice#	7992204952	Comment	09/01/2021	Tran Dt	09/01/2021	Inv Dt	09/01/2021	Due Dt		Check Dt	Pay	Gross	474.97	Discount	0.00	No-Pay	0.00	Net	474.97	✓

Vendor#	13336	Vendor Name	COCA COLA SOUTH	Gross	474.97	Discount	0.00	No-Pay	0.00	Net	474.97									
11616		Vendor Name	CONTROL SOLUTIONS ✓	Class		Pay Code														
Invoice#	CS215254	Comment	08/31/2021	Tran Dt	08/04/2021	Inv Dt	09/03/2021	Due Dt		Check Dt	Pay	Gross	64.00	Discount	0.00	No-Pay	0.00	Net	64.00	✓

Vendor#	11616	Vendor Name	CONTROL SOLUTIC	Gross	64.00	Discount	0.00	No-Pay	0.00	Net	64.00									
12884		Vendor Name	CUSTOMIZED COMMUNICATION II ✓	Class		Pay Code														
Invoice#	135466	Comment	08/31/2021	Tran Dt	08/05/2021	Inv Dt	09/04/2021	Due Dt		Check Dt	Pay	Gross	895.62	Discount	0.00	No-Pay	0.00	Net	895.62	✓

Vendor#	12884	Vendor Name	CUSTOMIZED COM	Gross	895.62	Discount	0.00	No-Pay	0.00	Net	895.62									
12988		Vendor Name	DIESEL FUEL MAINTENANCE, INC ✓	Class		Pay Code														
Invoice#	10009	Comment	08/18/2021	Tran Dt	08/18/2021	Inv Dt	09/17/2021	Due Dt		Check Dt	Pay	Gross	390.00	Discount	0.00	No-Pay	0.00	Net	390.00	✓

Vendor#	12988	Vendor Name	DIESEL FUEL MAIN	Gross	390.00	Discount	0.00	No-Pay	0.00	Net	390.00									
14706		Vendor Name	EMDTEC ✓	Class		Pay Code														
Invoice#	9693	Comment	08/31/2021	Tran Dt	08/04/2021	Inv Dt	08/19/2021	Due Dt		Check Dt	Pay	Gross	796.00	Discount	0.00	No-Pay	0.00	Net	796.00	✓

Vendor#	14706	Vendor Name	EMDTEC	Gross	796.00	Discount	0.00	No-Pay	0.00	Net	796.00									
11284		Vendor Name	EMERGENCY STAFFING Solutio	Class		Pay Code														
Invoice#	40524	Comment	08/31/2021	Tran Dt	08/31/2021	Inv Dt	08/31/2021	Due Dt		Check Dt	Pay	Gross	40,062.50	Discount	0.00	No-Pay	0.00	Net	40,062.50	✓

PRO FEES *16-000*

Vendor#	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	11284			EMERGENCY STAF				40,062.50	0.00	0.00	40,062.50
C2510			Vendor Name					Class	Pay Code		
			EVIDENT					M			
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	T2108061371	08/31/2021	08/06/2021	08/31/2021				10,045.35	0.00	0.00	10,045.35
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	C2510			EVIDENT				10,045.35	0.00	0.00	10,045.35
C2510			Vendor Name					Class	Pay Code		
			FERGUSON ENTERPRISE LLC #61								
13496	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	8904858	08/31/2021	01/14/2021	01/14/2021				47.49	0.00	0.00	47.49
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	13496			FERGUSON ENTER				47.49	0.00	0.00	47.49
12944			Vendor Name					Class	Pay Code		
			FRASIER HEALTHCARE CONSULT								
12944	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	19113	08/31/2021	08/30/2021	08/30/2021				4,503.30	0.00	0.00	4,503.30
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	12944			FRASIER HEALTHC				4,503.30	0.00	0.00	4,503.30
11183			Vendor Name					Class	Pay Code		
			FRONTIER								
11183	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	081921	09/01/2021	08/19/2021	09/13/2021				65.40	0.00	0.00	65.40
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	11183			FRONTIER				65.40	0.00	0.00	65.40
10653			Vendor Name					Class	Pay Code		
			GLOBAL EQUIPMENT CO. INC.								
10653	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	117339941	08/31/2021	03/04/2021	04/03/2021				431.90	0.00	0.00	431.90
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	10653			GLOBAL EQUIPMEN				431.90	0.00	0.00	431.90
W1300			Vendor Name					Class	Pay Code		
			GRAINGER								
W1300	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	9010095298	08/31/2021	08/03/2021	08/28/2021				109.20	0.00	0.00	109.20
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	W1300			GRAINGER				208.62	0.00	0.00	208.62
G1210			Vendor Name					Class	Pay Code		
			GULF COAST PAPER COMPANY								
G1210	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2087351	08/24/2021	08/17/2021	09/16/2021				988.19	0.00	0.00	988.19
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	G1210			GULF COAST PAPE				988.19	0.00	0.00	988.19
10829			Vendor Name					Class	Pay Code		
			HEALTHSTREAM, INC.								
10829	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	0262125	08/31/2021	08/11/2021	09/10/2021				4,042.95	0.00	0.00	4,042.95
	Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
	10829			HEALTHSTREAM, IT				4,042.95	0.00	0.00	4,042.95
10829			Vendor Name					Class	Pay Code		
			HEALTHSTREAM, IT								

12932

INTRADO ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV0023669	08/31/2021	07/31/2021	08/31/2021				665.59	0.00	0.00	665.59 ✓

91 HOUSE CALLS

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12932	INTRADO		665.59	0.00	0.00	665.59

Vendor#

Vendor Name Class Pay Code

13920

KAYLIN EASLEY ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062321	08/31/2021	06/23/2021	06/23/2021				9.63	0.00	0.00	9.63 ✓

TRAVEL LAB DRAWS (7/17-8/03-21)

070721	08/31/2021	07/07/2021	07/07/2021				9.52	0.00	0.00	9.52 ✓
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TRAVEL LAB DRAWS (8/4-9/1/21)

080421	08/31/2021	08/04/2021	08/04/2021				10.75	0.00	0.00	10.75 ✓
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Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13920	KAYLIN EASLEY		29.90	0.00	0.00	29.90

Vendor#

Vendor Name Class Pay Code

12588

MEDICAL TECHNOLOGY ASSOCIA ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV185013	08/31/2021	04/30/2021	05/25/2021				500.00	0.00	0.00	500.00 ✓

SERVICE CALL

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12588	MEDICAL TECHNOL		500.00	0.00	0.00	500.00

Vendor#

Vendor Name Class Pay Code

M2827

MEDIVATORS ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
91027728	08/31/2021	08/25/2021	08/25/2021				400.00	0.00	0.00	400.00 ✓

SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
M2827	MEDIVATORS		400.00	0.00	0.00	400.00

Vendor#

Vendor Name Class Pay Code

M2470

MEDLINE INDUSTRIES INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1963225318	08/24/2021	08/24/2021	09/18/2021				79.42	0.00	0.00	79.42 ✓

SUPPLIES

1960608248	08/25/2021	08/25/2021	09/19/2021				64.83	0.00	0.00	64.83 ✓
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SUPPLIES

1958481997	08/31/2021	07/13/2021	08/07/2021				30.00	0.00	0.00	30.00 ✓
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REFRIGERATED FEE

1958481996	08/31/2021	07/13/2021	08/07/2021				30.00	0.00	0.00	30.00 ✓
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REFRIGERATED FEE

1958481995	08/31/2021	07/13/2021	08/07/2021				30.00	0.00	0.00	30.00 ✓
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REFRIGERATED FEE

1702571581	08/31/2021	07/24/2021	08/18/2021				362.52	0.00	0.00	362.52 ✓
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INTEREST

1963613426	08/31/2021	08/12/2021	09/06/2021				2,831.33	0.00	0.00	2,831.33 ✓
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SUPPLIES

1963613427	08/31/2021	08/13/2021	09/07/2021				4,718.88	0.00	0.00	4,718.88 ✓
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SUPPLIES

1702598196	08/31/2021	08/21/2021	09/15/2021				16.27	0.00	0.00	16.27 ✓
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INTEREST

1963613429	08/31/2021	08/24/2021	09/18/2021				51.13	0.00	0.00	51.13 ✓
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SUPPLIES

1963613428	08/31/2021	08/24/2021	09/18/2021				1,087.09	0.00	0.00	1,087.09 ✓
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SUPPLIES

1963813532	08/31/2021	08/25/2021	09/19/2021				54.28	0.00	0.00	54.28 ✓
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SUPPLIES

1963875279	08/31/2021	08/25/2021	09/19/2021				18,875.53	0.00	0.00	18,875.53 ✓
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SUPPLEIS ✓

1963813527	08/31/2021	08/25/2021	09/19/2021				134.90	0.00	0.00	134.90 ✓
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SUPPLIES										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1963813531	08/31/2021	08/25/2021	09/19/2021				17.77	0.00	0.00	17.77
SUPPLIES										
1963813530	08/31/2021	08/25/2021	09/19/2021				92.52	0.00	0.00	92.52
SUPPLIES										
1963813529	08/31/2021	08/25/2021	09/19/2021				37.61	0.00	0.00	37.61
SUPPLIES										
Vendor#	Vendor Name	Number	Name				Gross	Discount	No-Pay	Net
13492	MEDVANTAGE	M2470	MEDLINE INDUSTR				28,514.08	0.00	0.00	28,514.08
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
34377	08/31/2021	03/23/2021	03/23/2021				520.30	0.00	0.00	520.30
SUPPLIES										
Vendor#	Vendor Name	Number	Name				Gross	Discount	No-Pay	Net
G0333	MEDVANTAGE	13492	MEDVANTAGE				520.30	0.00	0.00	520.30
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
083121	08/31/2021	08/31/2021	08/31/2021				2,407.84	0.00	0.00	2,407.84
REIMBURSE WORKSHOP/TRAVEL <i>Chris Workshop (7/28-7/29/21) (7/30-7/31/21)</i>										
Vendor#	Vendor Name	Number	Name				Gross	Discount	No-Pay	Net
M2621	MICHAEL GAINES	G0333	MICHAEL GAINES				2,407.84	0.00	0.00	2,407.84
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
082621	08/31/2021	08/26/2021	08/26/2021				103.92	0.00	0.00	103.92
PAYROLL DED										
Vendor#	Vendor Name	Number	Name				Gross	Discount	No-Pay	Net
10536	MORRIS & DICKSON CO, LLC	M2621	MORRIS & DICKSON CO, LLC				103.92	0.00	0.00	103.92
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0007648	08/25/2021	07/13/2021	09/16/2021				-0.37	0.00	0.00	-0.37
CREDIT										
7232490	08/31/2021	08/18/2021	08/28/2021				246.14	0.00	0.00	246.14
INVENTORY										
7229458	08/31/2021	08/18/2021	08/28/2021				548.87	0.00	0.00	548.87
INVENTORY										
7229457	08/31/2021	08/18/2021	08/28/2021				9.89	0.00	0.00	9.89
INVENTORY										
7232567	08/31/2021	08/18/2021	08/28/2021				21.13	0.00	0.00	21.13
INVENTORY										
7232568	08/31/2021	08/18/2021	08/28/2021				225.83	0.00	0.00	225.83
INVENTORY										
7232491	08/31/2021	08/18/2021	08/28/2021				389.84	0.00	0.00	389.84
INVENTORY										
7232492	08/31/2021	08/18/2021	08/28/2021				442.40	0.00	0.00	442.40
INVENTORY										
7237582	08/31/2021	08/19/2021	08/29/2021				212.53	0.00	0.00	212.53
INVENTORY										
7237581	08/31/2021	08/19/2021	08/29/2021				180.81	0.00	0.00	180.81
INVENTORY										
CM71045	08/31/2021	08/20/2021	08/30/2021				-1,388.49	0.00	0.00	-1,388.49
INVENTORY										
CM71044	08/31/2021	08/20/2021	08/30/2021				-225.79	0.00	0.00	-225.79
INVENTORY										
CM71046	08/31/2021	08/20/2021	08/30/2021				-200.61	0.00	0.00	-200.61
CREDIT										
7243983	08/31/2021	08/22/2021	09/01/2021				477.99	0.00	0.00	477.99
INVENTORY										

7243981	✓	08/31/2021	08/22/2021	09/01/2021	1,193.32	0.00	0.00	1,193.32	✓
				INVENTORY					
7243982	✓	08/31/2021	08/22/2021	09/01/2021	1,841.43	0.00	0.00	1,841.43	✓
				INVENTORY					
8845	✓	08/31/2021	08/23/2021	09/02/2021	-4.99	0.00	0.00	-4.99	✓
				CREDIT					
8969	✓	08/31/2021	08/23/2021	09/02/2021	-5.00	0.00	0.00	-5.00	✓
				CREDIT					
7248765	✓	08/31/2021	08/23/2021	09/02/2021	54.50	0.00	0.00	54.50	✓
				INVENTORY					
8659	✓	08/31/2021	08/23/2021	09/02/2021	-10.04	0.00	0.00	-10.04	✓
				CREDIT					
7248762	✓	08/31/2021	08/23/2021	09/02/2021	84.98	0.00	0.00	84.98	✓
				INVENTORY					
7248764	✓	08/31/2021	08/23/2021	09/02/2021	138.57	0.00	0.00	138.57	✓
				INVENTORY					
7248763	✓	08/31/2021	08/23/2021	09/02/2021	271.20	0.00	0.00	271.20	✓
				INVENTORY					
7245417	✓	08/31/2021	08/23/2021	09/02/2021	81.06	0.00	0.00	81.06	✓
				INVENTORY					
8846	✓	08/31/2021	08/23/2021	09/02/2021	-1.47	0.00	0.00	-1.47	✓
				CREDIT					
7252906	✓	08/31/2021	08/24/2021	09/03/2021	111.75	0.00	0.00	111.75	✓
				INVNTORY					
CM71568	✓	08/31/2021	08/24/2021	09/03/2021	-521.68	0.00	0.00	-521.68	✓
				CREDIT					
7252908	✓	08/31/2021	08/24/2021	09/03/2021	866.96	0.00	0.00	866.96	✓
				INVENTORY					
7250471	✓	08/31/2021	08/24/2021	09/03/2021	48.25	0.00	0.00	48.25	✓
				INVENTORY					
7250472	✓	08/31/2021	08/24/2021	09/03/2021	907.64	0.00	0.00	907.64	✓
				INVENTORY					
7250470	✓	08/31/2021	08/24/2021	09/03/2021	4,741.89	0.00	0.00	4,741.89	✓
				INVENTORY					
7252904	✓	08/31/2021	08/24/2021	09/03/2021	9.59	0.00	0.00	9.59	✓
				INVENTORY					
7252905	✓	08/31/2021	08/24/2021	09/03/2021	288.98	0.00	0.00	288.98	✓
				INVENTORY					
7252907	✓	08/31/2021	08/24/2021	09/03/2021	2,451.28	0.00	0.00	2,451.28	✓
				INVENTORY					
7255665	✓	08/31/2021	08/25/2021	09/04/2021	59.83	0.00	0.00	59.83	✓
				INVENTORY					
7256750	✓	08/31/2021	08/25/2021	09/04/2021	199.33	0.00	0.00	199.33	✓
				INVENTORY					
7258392	✓	08/31/2021	08/25/2021	09/04/2021	55.13	0.00	0.00	55.13	✓
				TRANSFER					
7258394	✓	08/31/2021	08/25/2021	09/04/2021	1,041.81	0.00	0.00	1,041.81	✓
				INVENTORY					
7255663	✓	08/31/2021	08/25/2021	09/04/2021	69.67	0.00	0.00	69.67	✓
				INVENTORY					
7255657	✓	08/31/2021	08/25/2021	09/04/2021	55.70	0.00	0.00	55.70	✓
				INVENTORY					
9796	✓	08/31/2021	08/25/2021	09/04/2021	-4.99	0.00	0.00	-4.99	✓
				CREDIT					
7258393	✓	08/31/2021	08/25/2021	09/04/2021	2,070.85	0.00	0.00	2,070.85	✓
				INVENTORY					
7255659	✓	08/31/2021	08/25/2021	09/04/2021	249.28	0.00	0.00	249.28	✓
				INVENTORY					
7255662	✓	08/31/2021	08/25/2021	09/04/2021	341.13	0.00	0.00	341.13	✓
				INVENTORY					
7255664	✓	08/31/2021	08/25/2021	09/04/2021	211.74	0.00	0.00	211.74	✓

		INVENTORY							
7256752	✓ 08/31/2021	08/25/2021	09/04/2021		48.44	0.00	0.00	48.44	✓
		INVENTORY							
9595	✓ 08/31/2021	08/25/2021	09/04/2021		-10.69	0.00	0.00	-10.69	✓
		CREDIT							
7255658	✓ 08/31/2021	08/25/2021	09/04/2021		320.90	0.00	0.00	320.90	✓
		INVENTORY							
7256751	✓ 08/31/2021	08/25/2021	09/04/2021		75.17	0.00	0.00	75.17	✓
		INVENTORY							
7255661	✓ 08/31/2021	08/25/2021	09/04/2021		92.06	0.00	0.00	92.06	✓
		INVENTORY							
7260523	✓ 08/31/2021	08/26/2021	09/05/2021		881.54	0.00	0.00	881.54	✓
		INVENTORY							
7260519	✓ 08/31/2021	08/26/2021	09/05/2021		124.64	0.00	0.00	124.64	✓
		INVENTORY							
7263650	✓ 08/31/2021	08/26/2021	09/05/2021		1,460.02	0.00	0.00	1,460.02	✓
		INVENTORY							
7260520	✓ 08/31/2021	08/26/2021	09/05/2021		2,038.45	0.00	0.00	2,038.45	✓
		INVENTORY							
7261453	✓ 08/31/2021	08/26/2021	09/05/2021		206.43	0.00	0.00	206.43	✓
		INVENTORY							
7260518	✓ 08/31/2021	08/26/2021	09/05/2021		59.19	0.00	0.00	59.19	✓
		INVENTORY							
7260521	✓ 08/31/2021	08/26/2021	09/05/2021		4,232.26	0.00	0.00	4,232.26	✓
		INVENTORY							
7261455	✓ 08/31/2021	08/26/2021	09/05/2021		4,429.63	0.00	0.00	4,429.63	✓
		INVENTORY							
7261456	✓ 08/31/2021	08/26/2021	09/05/2021		587.69	0.00	0.00	587.69	✓
		INVENTORY							
7263651	✓ 08/31/2021	08/26/2021	09/05/2021		1,230.31	0.00	0.00	1,230.31	✓
		INVENTORY							
7260517	✓ 08/31/2021	08/26/2021	09/05/2021		672.02	0.00	0.00	672.02	✓
		INVENTORY							
7260516	✓ 08/31/2021	08/26/2021	09/05/2021		15.72	0.00	0.00	15.72	✓
		INVENTORY							
7261454	✓ 08/31/2021	08/26/2021	09/05/2021		1,987.08	0.00	0.00	1,987.08	✓
		INVENTORY							
7263649	✓ 08/31/2021	08/26/2021	09/05/2021		19.42	0.00	0.00	19.42	✓
		INVENTORY							
7268850	✓ 08/31/2021	08/29/2021	09/08/2021		237.78	0.00	0.00	237.78	✓
		INVENTORY							
7268854	✓ 08/31/2021	08/29/2021	09/08/2021		264.75	0.00	0.00	264.75	✓
		INVENTORY							
7268852	✓ 08/31/2021	08/29/2021	09/08/2021		1,100.14	0.00	0.00	1,100.14	✓
		INVENTORY							
7268851	✓ 08/31/2021	08/29/2021	09/08/2021		847.04	0.00	0.00	847.04	✓
		INVENTORY							
7274365	✓ 08/31/2021	08/30/2021	09/09/2021		47.58	0.00	0.00	47.58	✓
		INVENTORY							
7274362	✓ 08/31/2021	08/30/2021	09/09/2021		34.68	0.00	0.00	34.68	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSOI	38,840.12	0.00	0.00	38,840.12

Vendor#
10868

Vendor Name	Class	Pay Code
NOVA BIOMEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
90873663	✓ 08/31/2021	06/23/2021	08/31/2021				65.00	0.00	0.00	65.00

SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10868	NOVA BIOMEDICAL	65.00	0.00	0.00	65.00

Vendor#

Vendor Name	Class	Pay Code
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O1500

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
31358713	08/31/2021	08/07/2021	09/01/2021				1,137.51	0.00	0.00	1,137.51
SERVICE CONTRACT										
31359750	08/31/2021	08/09/2021	09/03/2021				116.96	0.00	0.00	116.96
SUPPLIES										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
O1500		OLYMPUS AMERIC	1,254.47	0.00	0.00	1,254.47

Vendor#

13112

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
91231950	08/31/2021	08/06/2021	09/05/2021				103.41	0.00	0.00	103.41
SUPPLIES										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13112		OMNICELL, INC.	103.41	0.00	0.00	103.41

Vendor#

11069

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
083121	08/31/2021	08/31/2021	08/31/2021				2,567.50	0.00	0.00	2,567.50
CONTRACT EMPLOYEE (8/17-8/30/21)										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11069		PABLO GARZA	2,567.50	0.00	0.00	2,567.50

Vendor#

13988

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
006322	08/31/2021	08/25/2021	08/25/2021				690.00	0.00	0.00	690.00
MED SURG STAFFING										
006327	08/31/2021	08/25/2021	08/25/2021				2,250.00	0.00	0.00	2,250.00
MED SURG STAFFING										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13988		PAYCHEX, ADVANC	2,940.00	0.00	0.00	2,940.00

Vendor#

P2100

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
073121	08/31/2021	07/31/2021	08/25/2021				356.00	0.00	0.00	356.00
NEWS AD										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
P2100		PORT LAVACA WA	356.00	0.00	0.00	356.00

Vendor#

P1725

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
108	09/02/2021	09/02/2021	09/17/2021				3,350.00	0.00	0.00	3,350.00
SLEEP STUDY										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
P1725		PREMIER SLEEP DI	3,350.00	0.00	0.00	3,350.00

Vendor#

13460

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1110340922	08/31/2021	08/19/2021	09/20/2021				26,540.63	0.00	0.00	26,540.63
ELECTRICITY										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13460		RELIANT, DEPT 09E	26,540.63	0.00	0.00	26,540.63

Vendor#

10645

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
07202121	08/31/2021	07/30/2021	07/30/2021				262.50	0.00	0.00	262.50
AD										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10645		REVISTA de VICTOI	262.50	0.00	0.00	262.50

Vendor#

13940

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
3974518RI	08/24/2021	08/23/2021	09/22/2021				2,831.00	0.00	0.00	2,831.00
ICU STAFFING										
Vendor#	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
S0900	13940		RN NETWORK				2,831.00	0.00	0.00	2,831.00
	Vendor Name		Class						Pay Code	
	SAM'S CLUB DIRECT		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
004771	08/31/2021	07/26/2021	09/08/2021				168.56	0.00	0.00	168.56
SUPPLIES										
007960	08/31/2021	07/28/2021	09/08/2021				96.84	0.00	0.00	96.84
SUPPLIES										
005106	08/31/2021	07/28/2021	09/08/2021				48.92	0.00	0.00	48.92
SUPPLIES										
008419	08/31/2021	08/16/2021	09/08/2021				150.60	0.00	0.00	150.60
SUPPLIES										
L210820	08/31/2021	08/19/2021	09/08/2021				11.74	0.00	0.00	11.74
INTEREST FEE										
Vendor#	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
S0900	SAM'S CLUB DIREC						476.66	0.00	0.00	476.66
	Vendor Name		Class						Pay Code	
C1010	SPARKLIGHT		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
081621	08/31/2021	08/16/2021	08/16/2021				1,685.67	0.00	0.00	1,685.67
CABLE ACCT 100951581										
081621A	08/31/2021	08/16/2021	08/30/2021				2,250.00	0.00	0.00	2,250.00
CABLE ACCT 100987627										
081621B	08/31/2021	08/16/2021	08/30/2021				93.27	0.00	0.00	93.27
CABLE ACCT 118134105										
Vendor#	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
C1010	SPARKLIGHT						4,028.94	0.00	0.00	4,028.94
	Vendor Name		Class						Pay Code	
13880	TEXAS SELECT STAFFING									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0017993510	09/01/2021	09/01/2021	09/01/2021				3,115.25	0.00	0.00	3,115.25
MED SURG STAFFING										
Vendor#	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
13880	TEXAS SELECT ST/						3,115.25	0.00	0.00	3,115.25
	Vendor Name		Class						Pay Code	
12444	THE UPS STORE VICTORIA									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
758	08/31/2021	07/22/2021	07/22/2021				50.00	0.00	0.00	50.00
BUILDING SIGNAGE										
Vendor#	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
12444	THE UPS STORE VI						50.00	0.00	0.00	50.00
	Vendor Name		Class						Pay Code	
10732	THERACOM, LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
043021VP	08/31/2021	04/30/2021	07/29/2021				-40.00	0.00	0.00	-40.00
CREDIT										
06302021VP	08/31/2021	06/30/2021	09/01/2021				1,955.10	0.00	0.00	1,955.10
INVENTORY										
Vendor#	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
10732	THERACOM, LLC						1,915.10	0.00	0.00	1,915.10
	Vendor Name		Class						Pay Code	
T0801	TLC STAFFING		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
27653	08/31/2021	08/16/2021	08/16/2021				661.30	0.00	0.00	661.30
STAFFING										
27697	09/01/2021	08/23/2021	08/23/2021				1,250.52	0.00	0.00	1,250.52

Vendor#	Vendor Name	Number	Name	Gross	Discount	No-Pay	Net			
	T0801	TLC STAFFING		1,911.82	0.00	0.00	1,911.82			
U1054	UNIFIRST HOLDINGS ✓			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8400373998	08/31/2021	08/19/2021	09/13/2021				157.76	0.00	0.00	157.76 ✓
										LAUNDRY
8400373951	09/01/2021	08/19/2021	09/13/2021				194.90	0.00	0.00	194.90 ✓
										LAUNDRY
8400373946	09/01/2021	08/19/2021	09/13/2021				41.07	0.00	0.00	41.07 ✓
										LAUNDRY
8400373949	09/01/2021	08/19/2021	09/13/2021				156.06	0.00	0.00	156.06 ✓
										LAUNDRY
8400373982	09/01/2021	08/19/2021	09/13/2021				1,510.30	0.00	0.00	1,510.30 ✓
										LAUNDRY
8400373950	09/01/2021	08/19/2021	09/13/2021				160.47	0.00	0.00	160.47 ✓
										LAUNDRY
8400373948	09/01/2021	08/19/2021	09/13/2021				121.55	0.00	0.00	121.55 ✓
										LAUNDRY
8400373969	09/01/2021	08/19/2021	09/13/2021				79.43	0.00	0.00	79.43 ✓
										LAUNDRY
8400374242	09/01/2021	08/23/2021	09/17/2021				2,060.55	0.00	0.00	2,060.55 ✓
										LAUNDRY
8400374219	09/01/2021	08/23/2021	09/17/2021				45.15	0.00	0.00	45.15 ✓
										LAUNDRY
8400374220	09/01/2021	08/23/2021	09/17/2021				47.47	0.00	0.00	47.47 ✓
										LAUNDRY
8400374663	09/01/2021	08/26/2021	09/20/2021				41.07	0.00	0.00	41.07 ✓
										LAUNDRY
8400374685	09/01/2021	08/26/2021	09/20/2021				79.43	0.00	0.00	79.43 ✓
										LAUNDRY
8400374715	09/01/2021	08/26/2021	09/20/2021				125.92	0.00	0.00	125.92 ✓
										INVENTORY
8400374698	09/01/2021	08/26/2021	09/20/2021				1,625.26	0.00	0.00	1,625.26 ✓
										LAUNDRY
8400374665	09/01/2021	08/26/2021	09/20/2021				121.55	0.00	0.00	121.55 ✓
										LAUNDRY
8400374666	09/01/2021	08/26/2021	09/20/2021				192.33	0.00	0.00	192.33 ✓
										LAUNDRY
8400374667	09/01/2021	08/26/2021	09/20/2021				185.85	0.00	0.00	185.85 ✓
										LAUNDRY
8400374668	09/01/2021	08/26/2021	09/20/2021				194.90	0.00	0.00	194.90 ✓
										LAUNDRY
Vendor#	U1054	UNIFIRST HOLDING		7,141.02	0.00	0.00	7,141.02			
U2000	US POSTAL SERVICE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
082721	08/31/2021	08/27/2021	08/27/2021				240.00	0.00	0.00	240.00 ✓
										BUSINESS REPLY ACCOUNT
Vendor#	U2000	US POSTAL SERVIC		240.00	0.00	0.00	240.00			
13808	VITA PERSONA LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
VP20211974	08/31/2021	06/14/2021	09/01/2021				3,198.00	0.00	0.00	3,198.00 ✓
										SUPPLIES
VP20212030	08/31/2021	07/21/2021	06/24/2021				1,759.00	0.00	0.00	1,759.00 ✓
										SUPPLIES
VP20212101	08/31/2021	08/03/2021	09/01/2021				1,918.80	0.00	0.00	1,918.80 ✓
										SUPPLIES

VP20212212 08/31/2021 08/20/2021 09/02/2021 1,919.00 0.00 0.00 1,919.00

SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13808		VITA PERSONA LLC	8,794.80	0.00	0.00	8,794.80

Vendor# 11110

Vendor Name	Class	Pay Code
WERFEN USA LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9111026113	08/31/2021	08/16/2021	09/10/2021				1,571.67	0.00	0.00	1,571.67

LEASE

9111031261	08/31/2021	08/25/2021	09/19/2021				1,309.08	0.00	0.00	1,309.08
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SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11110		WERFEN USA LLC	2,880.75	0.00	0.00	2,880.75

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	482,042.00	0.00	0.00	482,042.00

<103.41>

+ 95.53

\$482,034.12

482,042.00 +
 103.41 -
 95.53 +
 482,034.12 *

APPROVED BY

SEP 03 2021

COUNTY ANCHOR CALHOUN COUNTY, TEXAS

CHK# 191770-191826

MCKESSON

STATEMENT

As of: 09/03/2021

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory:

Customer: 632536
Date: 09/04/2021

As of: 09/03/2021 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 09/04/2021 ITEMS NOT PAID (✓)

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 10,442.36 USD

Future Due: 0.00

If Paid By 09/07/2021,
Pay This Amount: 10,233.51 USD

Due If Paid On Time:
USD 10,233.51

Past Due: 0.00

Disc lost if paid late: 208.85

Last Payment 2,451.97
08/07/2017

If Paid After 09/07/2021,
Pay this Amount: 10,442.36 USD

Due If Paid Late:
USD 10,442.36

8,226.27 +
1,045.99 +
239.15 +
66.42 +
655.68 +
10,233.51 *

CK # 500228

APPROVED
ST

SEP 07 2021

CHERRY ALEXANDER
CASHIER/COURTNEY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 09/03/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 09/03/2021
Mail to:

Page: 001
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 256342
Date: 09/04/2021

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 09/04/2021 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS											
18/28/2021	09/07/2021	7290892035	0827210936	115Invoice	33.92	1,696.17		1,662.25 ✓		7290892035	
18/30/2021	09/07/2021	7290775888	14481360	115Invoice	2.16	107.99		105.83 ✓		7290775888	
18/30/2021	09/07/2021	7290775890	14521754	115Invoice	0.01	0.36		0.35 ✓		7290775890	
18/30/2021	09/07/2021	7290775891	14521754	115Invoice	0.01	0.63		0.62 ✓		7290775891	
18/30/2021	09/07/2021	7290775892	14540829	115Invoice	56.02	2,801.14		2,745.12 ✓		7290775892	
18/30/2021	09/07/2021	7290793940	14596480	115Invoice	2.89	144.51		141.62 ✓		7290793940	
18/30/2021	09/07/2021	7290984084	0827210759	195Invoice	0.01	0.44		0.43 ✓		7290984084	
18/31/2021	09/07/2021	7291099159	14647261	115Invoice	10.10	505.00		494.90 ✓		7291099159	
18/31/2021	09/07/2021	7291298090	0830210908	115Invoice	9.36	468.23		458.87 ✓		7291298090	
19/01/2021	09/07/2021	7291377094	14684831	115Invoice	2.89	144.51		141.62 ✓		7291377094	
19/01/2021	09/07/2021	7291377095	14720219	115Invoice	5.10	254.82		249.72 ✓		7291377095	
19/01/2021	09/07/2021	7291539657	0831210847	195Invoice	2.80	139.93		137.13 ✓		7291539657	
19/01/2021	09/07/2021	7291539658	0831210739	115Invoice	9.85	492.54		482.69 ✓		7291539658	
19/02/2021	09/07/2021	7291646037	14741594	115Invoice	0.03	1.27		1.24 ✓		7291646037	
19/02/2021	09/07/2021	7291646038	14741594	115Invoice	4.32	215.98		211.66 ✓		7291646038	
19/02/2021	09/07/2021	7291646039	14777870	115Invoice	5.32	266.10		260.78 ✓		7291646039	
19/03/2021	09/07/2021	7291922010	14799282	115Invoice	3.38	168.83		165.45 ✓		7291922010	
19/03/2021	09/07/2021	7291922011	14836703	115Invoice	18.68	934.02		915.34 ✓		7291922011	
19/03/2021	09/07/2021	7292079737	0902210824	195Invoice	0.43	21.64		21.21 ✓		7292079737	
19/03/2021	09/07/2021	7292079738	0902210801	115Invoice	0.60	30.04		29.44 ✓		7292079738	

For AR Inquiries please <> contact 800-867-0333

MCKESSON

STATEMENT

As of: 09/03/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 09/03/2021
Mail to:

Page: 001
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 256342
Date: 09/04/2021

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 09/04/2021 ITEMS NOT PAID (✓)

*F column legend: P = Past Due Item, F = Future Due Item, National Account 032536 blank = Current Due Item

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 8,394.15 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 22,405.04
08/30/2021

If Paid By 09/07/2021,
Pay This Amount: 8,226.27 USD

If Paid After 09/07/2021,
Pay this Amount: 8,394.15 USD

Due If Paid On Time:
USD 8,226.27
Disc lost if paid late: 167.88
Due If Paid Late:
USD 8,394.15

For AR Inquiries please <> contact 800-867-0333

MCKESSON

STATEMENT

As of: 09/03/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 09/03/2021
Mail to:

Page: 001
Comp: 8000

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

Territory: 400

Customer: 464450
Date: 09/04/2021

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450
Date: 09/04/2021

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 464450 HEB PHY FC 490/MEM MC PHS											
08/31/2021	09/07/2021	7291179957	55x592998	115Invoice	2.99	149.29		146.30	✓	7291179957	
09/03/2021	09/07/2021	7291914777	55x602204	115Invoice	18.36	917.89		899.53	✓	7291914777	
09/03/2021	09/07/2021	7291914778	55x602377	115Invoice		0.16		0.16	✓	7291914778	

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

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

Subtotals: 1,067.34 USD

Future Due: 0.00
Past Due: 0.00
Last Payment 18/30/2021 22,405.04

If Paid By 09/07/2021,
Pay This Amount: 1,045.99 USD

If Paid After 09/07/2021,
Pay this Amount: 1,067.34 USD

Due If Paid On Time: USD 1,045.99 ✓
Disc lost if paid late: 21.35
Due If Paid Late: USD 1,067.34

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 09/03/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 09/03/2021
Mail to:

Page: 001
Comp: 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

Territory: 400

Customer: 835438
Date: 09/04/2021

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438
Date: 09/04/2021

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
09/03/2021	09/07/2021	7292113777	632536 1334488	115Invoice	4.88	244.03		239.15 ✓		7292113777	

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: 244.03 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 18/30/2021 22,405.04

If Paid By 09/07/2021,
Pay This Amount:

239.15 USD

If Paid After 09/07/2021,
Pay this Amount:

244.03 USD

Due If Paid On Time:
USD

239.15 ✓

Disc lost if paid late:

4.88

Due If Paid Late:
USD

244.03

For AR Inquiries please <> contact 800-867-0333

MCKESSON

STATEMENT

As of: 09/03/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 09/03/2021
Mail to:

Page: 001
Comp: 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

Territory: 400

Customer: 190813
Date: 09/04/2021

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813
Date: 09/04/2021

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 190813 HEB PHCY 0434/MEM MED PHS											
19/01/2021	09/07/2021	7291370675	2017035065	115Invoice	1.22	60.96		59.74 ✓		7291370675	
19/03/2021	09/07/2021	7291910772	2017035297	115Invoice	0.14	6.82		6.68 ✓		7291910772	

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

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

Subtotals: 67.78 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 18/30/2021 22,405.04

If Paid By 09/07/2021,
Pay This Amount:

66.42 USD

If Paid After 09/07/2021,
Pay this Amount:

67.78 USD

Due If Paid On Time:
USD

66.42 ✓

Disc lost If paid late:

1.36

Due If Paid Late:
USD

67.78

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 09/03/2021

Page: 001

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

Company: 8000

DC: 8195

As of: 09/03/2021 Page: 001
Mail to: Comp: 8000

WALMART 5315/MEMRL MC PHS
MEMORIAL MEDICAL CENTER
A/P
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 99

Customer: 945479

Date: 09/04/2021

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 945479 PLEASE CHECK ANY
Date: 09/04/2021 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 945479 WALMART 5315/MEMRL MC PHS											
09/02/2021	09/07/2021	7291767755	060764472	195Invoice	13.38	669.06		655.68	✓	7291767755	

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

TOTAL: Customer Number 945479 WALMART 5315/MEMRL MC PHS

Subtotals: 669.06 USD

Future Due: 0.00

If Paid By 09/07/2021,
Pay This Amount:

655.68 USD

Due If Paid On Time:
USD 655.68
Disc lost If paid late:
13.38

Past Due: 0.00

If Paid After 09/07/2021,
Pay this Amount:

669.06 USD

Due If Paid Late:
USD 669.06

Past Payment: 0.00

For AR Inquiries please <> contact 800-867-0333

Served By:	AMERISOURCEBERGEN DRUG CORP 12727 W. AIRPORT BLVD. SUGAR LAND TX 77478-6101	Customer:	WALGREENS #12494 340B MEMORIAL MEDICAL CENTER 1302 N VIRGINIA ST PORT LAVACA TX 77979-2509	Customer Number	100135284 / 037028186
	DEA: RA0289276 866-451-9655			Terms	Sat - Fri Due in 7 days
Remit To:	AMERISOURCEBERGEN P.O. Box 905223 CHARLOTTE NC 28290-5223			Summary	
				Not Yet Due:	0.00
				Current:	1,973.08
				Past Due:	0.00
				Total Due:	1,973.08
				Account Balance:	1,973.08

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
08-30-2021	09-10-2021	3066075418	162655	Invoice	5.37		0.00	5.37
08-30-2021	09-10-2021	3066075419	162656	Invoice	33.62		0.00	33.62
08-30-2021	09-10-2021	3066075760	162658	Invoice	0.29		0.00	0.29
08-30-2021	09-10-2021	3066075761	162657	Invoice	9.76		0.00	9.76
08-30-2021	09-10-2021	3066101794	162704	Invoice	182.28		0.00	182.28
09-01-2021	09-10-2021	3066364145	162724	Invoice	22.61		0.00	22.61
09-02-2021	09-10-2021	3066507417	162735	Invoice	1,599.22		0.00	1,599.22
09-03-2021	09-10-2021	3066645023	162744	Invoice	119.84		0.00	119.84
09-03-2021	09-10-2021	3066645024	162745	Invoice	0.09		0.00	0.09

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,973.08	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
09-03-2021	(519.17)

Reminders	
Due Date	Amount
09-10-2021	1,973.08
Total Due:	1,973.08

CK # 500229

APPROVED BY
SEP 07 2021
COUNTRY ANESTHETIC
COUNTRY ANESTHETIC, TEXAS

Serviced By:	AMERISOURCEBERGEN DRUG CORP 501 PATRIOT PARKWAY ROANOKE TX 76262-6336	Customer:	SENDERRA RX PHY 340B MEMORIAL MEDICAL CENTER 1301 E ARAPAHO RD STE 101 RICHARDSON TX 75081	Customer Number	100288078 / 037983771
	DEA: RA0316958 866-451-9655			Terms	Sat - Fri Due in 7 days
Remit To:	AMERISOURCEBERGEN P.O. Box 978740 DALLAS TX 75397-8740			Summary	
				Not Yet Due:	0.00
				Current:	0.01
				Past Due:	0.00
				Total Due:	0.01
				Account Balance:	0.01

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
08-25-2021	09-03-2021	3065557525	1001908323	Invoice	0.01		0.00	0.01

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
0.01	0.00	0.00	0.00	0.00	0.00	0.00

Reminders	
Due Date	Amount
09-03-2021	0.01
Total Due:	
	0.01

9/3/21 - on transfers shows \$519.17
 we only reported \$519.16
 last week. I have requested
 a copy of the invoice listed
 but don't have it yet. (m)

to the report for this week

ACCEPTED
 SEP 07 2021
 COUNTY CLERK
 CASSIDY COUNTY, TEXAS

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- August 30 , 2021 - September 6, 2021**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>	<u>CP</u>
8/23/2021	PAY PLUS ACHTRANS 452579291 101000690762935	- 3rd Party Payor Fee	91.74	91.74 +
8/30/2021	PAY PLUS ACHTRANS 452579291 101000694589599	- 3rd Party Payor Fee	25.58	25.58 +
8/31/2021	PAY PLUS ACHTRANS 452579291 101000695727606	- 3rd Party Payor Fee	6.92	6.92 +
8/31/2021	MCKESSON DRUG AUTO ACH ACH04711411 910000169	- 340B Drug Program Expense	22405.04*	9.44 +
9/1/2021	PAY PLUS ACHTRANS 452579291 101000696579025	- 3rd Party Payor Fee	9.44	162.51 +
9/2/2021	PAY PLUS ACHTRANS 452579291 101000697673224	- 3rd Party Payor Fee	162.51	49.20 +
9/2/2021	AUTHNET GATEWAY BILLING 118575558 1040000155	- 3rd Party Payor Fee	21.1	345.39 *
9/3/2021	PAY PLUS ACHTRANS 452579291 101000699161365	- 3rd Party Payor Fee	49.2	21.10 +
9/3/2021	MERCHANT BANKCD FEE 971160913887 91000011311	- Credit Card Processing Fee	185.21	21.10 *
9/3/2021	MERCHANT BANKCD FEE 971160910883 91000011311	- Credit Card Processing Fee	9.95	CC Fees
9/3/2021	MERCHANT BANKCD INTERCHNG 971160913887 91000	- Credit Card Processing Fee	130.9	185.21 +
9/3/2021	MERCHANT BANKCD DISCOUNT 971160910883 910000	- Credit Card Processing Fee	19.95	9.95 +
9/3/2021	MERCHANT BANKCD DISCOUNT 971160913887 910000	- Credit Card Processing Fee	225.63	130.90 +
9/3/2021	EXPERTPAY EXPERTPAY 746003411 91000013695276	- Child Support Payment -Payroll Ending	614.2	19.95 +
9/3/2021	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	519.17*	225.63 +
9/3/2021	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	327540.09*	571.64 *
9/3/2021	IRS USATAXPYMT 220164654053425 6103601000315	- Payroll Taxes	187.21*	Expert Pay
9/3/2021	IRS USATAXPYMT 220164675852519 6103601000314	- Payroll Taxes	106962.69*	614.20 +
			<u>459,166.53</u>	614.20 *

 Jason Anglin, CEO
 Memorial Medical Center
 September 7, 2021
** Approved 09-01-21 cc*

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

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>	<u>Amount</u>	
9/15/2021	ACH Payment TEXAS COUNTY DRS RECEIVABLE 0419 21000024329	- Retirement Funding	142,622.27	459,166.53 +
			<u>142,622.27</u>	22,405.04 -
				519.17 -
				327,540.09 -
				187.21 -
				106,962.69 -
				1,552.33 *
				1,552.33 +
				1,552.33 -

 Jason Anglin, CEO
 Memorial Medical Center
 September 7, 2021

Retirement 9/15/21

Date/Time 09-03-2021 / 10:08 AM
Submitted By

Pay Date 08-31-2021

Employee Deposits	\$62,358.40
Employer Contributions	\$80,263.87
Group Term Life Premiums	\$0.00
Total	\$142,622.27

Comments

Payroll File August 2021 Retirement Upload.xlsx

CLOSE

PRINT

09/02/2021

MEMORIAL MEDICAL CENTER

0

12:39

AP Open Invoice List

ap_open_invoice.template

Dates Through:

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
081221	08/31/2021	08/12/2021	09/23/2021				13.90	0.00	0.00	13.90 ✓
		TRANSF E R <i>MT insurance pymt deposited into main acct</i>								
081321	08/31/2021	08/13/2021	09/23/2021				2,128.85	0.00	0.00	2,128.85 ✓
		TRANSFER "								
081721A	08/31/2021	08/17/2021	09/23/2021				24,536.71	0.00	0.00	24,536.71 ✓
		TRANSFER "								
081721	08/31/2021	08/17/2021	09/23/2021				5,711.84	0.00	0.00	5,711.84 ✓
		TRANSFER "								
081921	08/31/2021	08/19/2021	09/23/2021				950.46	0.00	0.00	950.46 ✓
		TRANSFER "								
081921A	08/31/2021	08/19/2021	09/23/2021				1,590.96	0.00	0.00	1,590.96 ✓
		TRANSFER "								

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11836		GOLDENCREEK HE	34,932.72	0.00	0.00	34,932.72

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	34,932.72	0.00	0.00	34,932.72

APPROVED
ON

CK#

SEP 03 2021

191828

CASHIER
CALDWELL COUNTY, TEXAS

09/02/2021

MEMORIAL MEDICAL CENTER

0

12:39

AP Open Invoice List

ap_open_invoice.template

Dates Through:

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
081221	08/31/2021	08/12/2021	09/23/2021				0.03	0.00	0.00	0.03 ✓
		TRANSFER <i>Net insurance pymt deposited into mme operating</i>								
081621	08/31/2021	08/16/2021	09/23/2021				6,120.00	0.00	0.00	6,120.00 ✓
		TRANSFER "								

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12696		GULF POINTE PLAZ	6,120.03	0.00	0.00	6,120.03

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	6,120.03	0.00	0.00	6,120.03

APPROVED
ON
SEP 03 2021
COURTNEY AUBERTON
CLERK COUNTY CLERK
CALEB COUNTY, TEXAS

CL#
191829

09/02/2021

MEMORIAL MEDICAL CENTER

0

12:38

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Vendor#
13004

Vendor Name

Class

Pay Code

TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
081321	08/31/2021	08/13/2021	09/23/2021				166.62	0.00	0.00	166.62 ✓
	TRANSFER <i>NH insurance pymt deposited into MMC operating</i>									
081721A	08/31/2021	08/17/2021	09/23/2021				9,687.44	0.00	0.00	9,687.44 ✓
	TRANSFER "									
081721	08/31/2021	08/17/2021	09/23/2021				3,243.60	0.00	0.00	3,243.60 ✓
	TRANSFER "									
081821	08/31/2021	08/18/2021	09/23/2021				4,390.00	0.00	0.00	4,390.00 ✓
	TRANSFER "									
081921	08/31/2021	08/19/2021	09/23/2021				8.41	0.00	0.00	8.41 ✓
	TRANSFER "									
083021	08/31/2021	08/30/2021	09/23/2021				13,106.62	0.00	0.00	13,106.62 ✓

MEDICARE

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13004		TUSCANY VILLAGE	30,602.69	0.00	0.00	30,602.69

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	30,602.69	0.00	0.00	30,602.69

APPROVED
OR

SEP 03 2021

CHK#

191830

COUNTY ASSESSOR
CALHOUN COUNTY, TENNESSEE

09/02/2021

MEMORIAL MEDICAL CENTER

0

12:38

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Vendor#
12792

Vendor Name

Class

Pay Code

BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
081921	08/31/2021	08/19/2021	09/23/2021				0.20	0.00	0.00	0.20 ✓
	TRANSFER									
082121	08/31/2021	08/21/2021	09/23/2021				1,524.00	0.00	0.00	1,524.00
	TRANSFER									
082721	08/31/2021	08/27/2021	09/23/2021				29,866.06	0.00	0.00	29,866.06 ✓
	TRANSFER									
083021	08/31/2021	08/30/2021	09/23/2021				1,214.82	0.00	0.00	1,214.82 ✓
	MEDICARE									

NI insurance pymt deposited into mme operating

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR I		32,605.08	0.00	0.00	32,605.08

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	32,605.08	0.00	0.00	32,605.08

APPROVED BY
 SEP 03 2021
 COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

CK#
 191827

8

RUN DATE:09/07/21
 TIME:11:51

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 09/08/21 THRU 09/08/21

PAGE 1
 GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	191770	09/08/21	1,613.25	ALLYSON SWOPE
A/P	191771	09/08/21	45,437.34	AMERISOURCEBERGEN DRUG CORP
A/P	191772	09/08/21	6,167.75	AUREUS RADIOLOGY LLC
A/P	191773	09/08/21	214,382.49	BLUE CROSS BLUE SHIELD
A/P	191774	09/08/21	137.90	CARDINAL HEALTH 414, INC.
A/P	191775	09/08/21	1,608.75	CARIANT HEALTH PARTNERS
A/P	191776	09/08/21	2,368.31	CAVALLO ENERGY TEXAS LLC
A/P	191777	09/08/21	4,503.32	CITY OF PORT LAVACA
A/P	191778	09/08/21	474.97	COCA COLA SOUTHWEST BEVERAGES
A/P	191779	09/08/21	64.00	CONTROL SOLUTIONS
A/P	191780	09/08/21	895.62	CUSTOMIZED COMMUNICATION INC
A/P	191781	09/08/21	390.00	DIESEL FUEL MAINTENANCE, INC
A/P	191782	09/08/21	796.00	EMDTEC
A/P	191783	09/08/21	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	191784	09/08/21	10,045.35	EVIDENT
A/P	191785	09/08/21	47.49	FERGUSON ENTERPRISE LLC #61
A/P	191786	09/08/21	4,503.30	FRASIER HEALTHCARE CONSULTING,
A/P	191787	09/08/21	65.40	FRONTIER
A/P	191788	09/08/21	431.90	GLOBAL EQUIPMENT CO. INC.
A/P	191789	09/08/21	208.62	GRAINGER
A/P	191790	09/08/21	988.19	GULF COAST PAPER COMPANY
A/P	191791	09/08/21	4,042.95	HEALTHSTREAM, INC.
A/P	191792	09/08/21	665.59	INTRADO
A/P	191793	09/08/21	29.90	KAYLIN EASLEY
A/P	191794	09/08/21	500.00	MEDICAL TECHNOLOGY ASSOCIATES
A/P	191795	09/08/21	400.00	MEDIVATORS
A/P	191796	09/08/21	.00	VOIDED
A/P	191797	09/08/21	28,514.08	MEDLINE INDUSTRIES INC
A/P	191798	09/08/21	520.30	MEDVANTAGE
A/P	191799	09/08/21	2,407.84	MICHAEL GAINES
A/P	191800	09/08/21	103.92	MMC AUXILIARY GIFT SHOP
A/P	191801	09/08/21	.00	VOIDED
A/P	191802	09/08/21	.00	VOIDED
A/P	191803	09/08/21	.00	VOIDED
A/P	191804	09/08/21	.00	VOIDED
A/P	191805	09/08/21	38,840.12	MORRIS & DICKSON CO, LLC
A/P	191806	09/08/21	65.00	NOVA BIOMEDICAL
A/P	191807	09/08/21	1,254.47	OLYMPUS AMERICA INC
A/P	191808	09/08/21	95.53	OMNICELL, INC.
A/P	191809	09/08/21	2,567.50	PABLO GARZA
A/P	191810	09/08/21	2,940.00	PAYCHEX, ADVANCE FBO
A/P	191811	09/08/21	356.00	PORT LAVACA WAVE
A/P	191812	09/08/21	3,350.00	PREMIER SLEEP DISORDERS CENTER
A/P	191813	09/08/21	26,540.63	RELIANT, DEPT 0954
A/P	191814	09/08/21	262.50	REVISTA de VICTORIA
A/P	191815	09/08/21	2,831.00	RN NETWORK
A/P	191816	09/08/21	476.66	SAM'S CLUB DIRECT
A/P	191817	09/08/21	4,028.94	SPARKLIGHT
A/P	191818	09/08/21	3,115.25	TEXAS SELECT STAFFING
A/P	191819	09/08/21	50.00	THE UPS STORE VICTORIA

RUN DATE:09/07/21
TIME:11:51

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	191820	09/08/21	1,915.10	THERACOM, LLC
A/P	191821	09/08/21	1,911.82	TLC STAFFING
A/P	191822	09/08/21	.00	VOIDED
A/P	191823	09/08/21	7,141.02	UNIFIRST HOLDINGS
A/P	191824	09/08/21	240.00	US POSTAL SERVICE
A/P	191825	09/08/21	8,794.80	VITA PERSONA LLC
A/P	191826	09/08/21	2,880.75	WERFEN USA LLC
A/P	191827	09/08/21	32,605.08	BETHANY SENIOR LIVING
A/P	191828	09/08/21	34,932.72	GOLDENCREEK HEALTHCARE
A/P	191829	09/08/21	6,120.03	GULF POINTE PLAZA
A/P	191830	09/08/21	30,602.69	TUSCANY VILLAGE
TOTALS:			586,294.64	

Payables 482,034.12 +
NH { 34,932.72 +
6,120.03 +
Transfers { 30,602.69 +
32,605.08 +
586,294.64 *

APPROVED
ON

SEP 08 2021

COUNTY AUDITOR
COMANCHE COUNTY, TEXAS

Request for Transfer of Funds

Transfer #: _____
 Date Requested: 8/27/2021
 Payer: Novitas
 Requested by: Catrina Hopper
 Requestor's email: Chopper@Nexion-Health.com
 Requestor's phone number: 903-372-8412
 District or County: Memorial Medicare Center
 Facility: Golden Creek

CVDAR000026869

Please Attach:

Remittance Advice and EOB

If money is taken against an overpayment or recoupment, please provide EOB of overpaid claim

* Patient Name, Date of Service and Amount of Payment from Remittance Advice must be filled out.
 Please email request form

and Remittance Advice to : cclevenger@mmcportlavaca.com
mmartinez@mmcportlavaca.com

Patient Name (REQUIRED)	Date of Service (REQUIRED)	Date of Payment	Type of Payment (Check/EFT)	Amount of Payment shown on	Check Number	Claim Number	Action needed- Enter funds (-) or Funds (+) to YOUR account	Notes
		8/12/2021	EFT6052760	\$ (40.46)	EFT6052760	CVDAR000026869	\$ 40.46	The Broadmoor Creeks
		8/19/2021	EFT6061291	\$ (1,664.53)	EFT6061291	CVDAR000026869	\$ 1,664.53	The Broadmoor Creeks
		8/25/2021	EFT6068790	\$ (142.46)	EFT6068790	CVDAR000026869	\$ 142.46	The Broadmoor Creeks
				TOTAL			\$ 1,847.45	

To be filled out by Memorial Medical Center:

Date Received: 9/2/2021
 Approved by: Mayra Martinez
 Date of transfer: 9/8/2021
 From Facility: The Broadmoor Creeks
 To Facility: Golden Creek
 Amount: \$ 1,847.45
 Requested Transfer Date #2: _____
 Date of transfer: _____
 From Facility: _____
 To Facility: _____
 Amount: _____

APPROVED
CP

SEP 07 2021

CORDELL WINSTON
 CLERK COUNTY CLERK, TEXAS

CHK# 000125

Request for Transfer of Funds

Transfer #: _____

Date Requested: 9.2.21

Payer: MEDICARE

Requested by: RACHEL ARENAZAS

Requestor's email: rrarenazas@tuscanyvillagecare.net

Requestor's phone number: 713-770-5300

District or County: BRAZORIA

Facility: TUSCANY VILLAGE

Please Attach:

Remittance Advice and EOB

If money is taken against an overpayment or recoupment, please provide EOB of overpaid claim

* Patient Name, Date of Service and Amount of Payment from Remittance Advice must be filled out. Please email request form

and Remittance Advice to : clevenger@mhcportlavaca.com

mmartinez@mhcportlavaca.com

Patient Name (REQUIRED)	Date of Service (REQUIRED)	Date of Payment	Type of Payment (Check/EFT)	Amount of Payment shown on	Check Number	Claim Number	Action needed- Enter funds (-) or Funds (+) to YOUR account	Notes
		8.30.21	EFT	\$ 44.62	EFT6074163	WO/CVDAR000026869	\$ 44.62	Broadmoor
		8.31.21	EFT	\$ 373.00	EFT6075912	WO/CVDAR000026869	\$ 373.00	Broadmoor
		9.1.21	EFT	\$ 488.65	EFT6077233	WO/CVDAR000026869	\$ 488.65	Broadmoor
TOTAL				906.27			906.27	

To be filled out by Memorial Medical Center:

Date Received: 9/2/2021

Approved by: Mayra Martinez

Date of transfer: 9/8/2021

From Facility: Broadmoor

To Facility: TUSCANY VILLAGE

Amount: 906.27

Requested Transfer Date #2: _____

Date of transfer: _____

From Facility: _____

To Facility: _____

Amount: _____

APPROVED
BY
SEP 07 2021

GISELY AUSTON
CLERK COUNTY, TEXAS
CL# 000126

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000125

88-2265/1131

Date 9/8/21

PAY

TO THE
ORDER OF

Golden Creek

\$ 1,847.45

one thousand eight hundred forty seven & 45/100 DOLLARS



PROSPERITY
BANK

County Auditor
MP

County Treasurer
Included Details on back

FOR Medicare repayment

⑈000125⑈ ⑆113122655⑆ 216844403⑈

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000126

88-2265/1131

Date 9/8/21

PAY

TO THE
ORDER OF

Tuscany

\$ 906.27

Nine hundred six & 27/100 DOLLARS



PROSPERITY
BANK

County Auditor

County Treasurer
MP
Included Details on back

FOR Medicare repayment

⑈000126⑈ ⑆113122655⑆ 216844403⑈

RUN DATE:09/08/21
TIME:14:11

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 4
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

NHB 000125 09/08/21 1,847.45 GOLDEN CREEK *Broudmoor*
NHB 000126 09/08/21 906.27 TUSCANY
TOTALS: 2,753.72

APPROVED
BY

SEP 08 2021

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Request for Transfer of Funds

Transfer #: _____

Date Requested: 9.2.21

Payer: MEDICARE

Requested by: RACHEL ARENAZAS

Requestor's email: rrarenazas@tuscanyvillagecare.net

Requestor's phone number: 713-770-5300

District or County: BRAZORIA

Facility: TUSCANY VILLAGE

Please Attach:

Remittance Advice and EOB

If money is taken against an overpayment or recoupment, please provide EOB of overpaid claim

* Patient Name, Date of Service and Amount of Payment from Remittance Advice must be filled out.
Please email request form

and Remittance Advice to : ccleavenger@mmcportlavaca.com
mmartinez@mmcportlavaca.com

<u>Patient Name (REQUIRED)</u>	<u>Date of Service (REQUIRED)</u>	<u>Date of Payment</u>	<u>Type of Payment (Check/EFT)</u>	<u>Amount of Payment shown on</u>	<u>Check Number</u>	<u>Claim Number</u>	<u>Action needed- Enter funds (-) or Funds (+) to YOUR account</u>	<u>Notes</u>
		8.30.21	EFT	\$ 44.62	EFT6074163	WO/CVDAR000019557	\$ 44.62	Cresent
		8.31.21	EFT	\$ 373.00	EFT6075912	WO/CVDAR000019557	\$ 373.00	Cresent
		9.1.21	EFT	\$ 488.65	EFT6077233	WO/CVDAR000019557	\$ 488.65	Cresent
			TOTAL	906.27			906.27	

To be filled out by Memorial Medical Center:

Date Received: 9/2/2021

Approved by: Mayra Martinez

Date of transfer: 9/8/2021

From Facility: Cresent

To Facility: TUSCANY VILLAGE

Amount: 906.27

Requested Transfer Date #2: _____

Date of transfer: _____

From Facility: _____

To Facility: _____

Amount: _____

APPROVED
BY

SEP 07 2021

GROUP MANAGER
CASSIDY COFFEE, MDCAS

CHK# 000159

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000159

88-2265/1131

Date 9/8/21

PAY
TO THE
ORDER OF

Tuscany

\$ 906.27

Nine hundred six & 27/100

DOLLARS



County Auditor

FOR Medicare repayment

County Treasurer
See back for details on back.

⑈000159⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000158

88-2265/1131

Date 9/8/21

PAY
TO THE
ORDER OF

Golden creek

\$ 1,847.45

One thousand eight hundred forty seven & 45/100

DOLLARS



County Auditor

FOR Medicare repayment

County Treasurer
See back for details on back.

⑈000158⑈ ⑆113122655⑆

RUN DATE:09/08/21
TIME:14:11

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 5
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

NHC 000158 09/08/21 1,847.45 GOLDEN CREEK *Crescent*
NHC 000159 09/08/21 906.27 TUSCANY
TOTALS: 2,753.72

APPROVED
ON

SEP 08 2021

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Request for Transfer of Funds

Transfer #: _____

Date Requested: 8/27/2021

Payer: Novitas

Requested by: Catrina Hopper

Requestor's email: Chopper@Nexion-Health.com

Requestor's phone number: 903-372-8412

District or County: Memorial Medicare Center

Facility: Golden Creek

CVDAR000019556

Please Attach:

Remittance Advice and EOB

If money is taken against an overpayment or recoupment, please provide EOB of overpaid claim

* Patient Name, Date of Service and Amount of Payment from Remittance Advice must be filled out. Please email request form

and Remittance Advice to : cclevenger@mmcportlavaca.com

mmartinez@mmcportlavaca.com

Patient Name (REQUIRED)	Date of Service (REQUIRED)	Date of Payment	Type of Payment (Check/EFT)	Amount of Payment shown on	Check Number	Claim Number	Action needed- Enter funds (-) or Funds (+) to YOUR account	Notes
		8/12/2021	EFT6052760	\$ (40.46)	EFT6052760	CVDAR000019556	\$ 40.46	Fort Bend
		8/19/2021	EFT6061291	\$ (1,664.53)	EFT6061291	CVDAR000019556	\$ 1,664.53	Fort Bend
		8/25/2021	EFT6068790	\$ (142.46)	EFT6068790	CVDAR000019556	\$ 142.46	Fort Bend
				TOTAL			\$ 1,847.45	

To be filled out by Memorial Medical Center:

Date Received: 9/2/2021

Approved by: Mayra Martinez

Date of transfer: 9/8/2021

From Facility: Fort Bend

To Facility: Golden Creek

Amount: \$ 1,847.45

Requested Transfer Date #2: _____

Date of transfer: _____

From Facility: _____

To Facility: _____

Amount: _____

APPROVED
GCM

SEP 07 2021

COURTNEY ANTHONY
CASHIERS ACCOUNT, TEXAS

ck#000152

MEMORIAL MEDICAL CENTER

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

000153

88-2265/1131

Date 9/8/21

PAY
TO THE
ORDER OF

Tuscany

\$ 906.27

Nine hundred six & 27/100 DOLLARS



County Auditor

County Treasurer
Included Details on back

FOR Medicare repayment

⑈000153⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

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

000152

88-2265/1131

Date 8/9/21

PAY
TO THE
ORDER OF

Golden Creek

\$ 1,847.45

One thousand eight hundred forty seven & 45/100 DOLLARS



County Auditor

County Treasurer
Included Details on back

FOR Medicare repayment

⑈000152⑈ ⑆113122655⑆

RUN DATE:09/08/21
TIME:14:11

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 6
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

NHF 000152 09/08/21 1,847.45 GOLDEN CREEK Fort Bend
NHF 000153 09/08/21 906.27 TUSCANY
TOTALS: 2,753.72

APPROVED
021

SEP 08 2021

COUNTY ASSISTANT
COMPTON COUNTY, TEXAS

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

001157

Date 9-8-21 88-2265/1131

PAY
TO THE
ORDER OF

Golden Creek

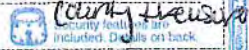
\$ 1847.45

One thousand, eight hundred forty-seven dollars & $\frac{45}{100}$ DOLLARS



_____ county treasurer
_____ MP

FOR medicare repayment



⑈001157⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH SOLERA
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001158

Date 9-8-21

88-2265/1131

PAY
TO THE
ORDER OF

Tuscany Village

\$ 906 ²⁷/₁₀₀

Nine hundred six dollars ²⁷/₁₀₀

DOLLARS



**PROSPERITY
BANK**

county auditor

FOR medicare repayment

County Treasurer
MP
Security Printing and
Inclusion Details on back

⑈001158⑈ ⑆113122655⑆

Request for Transfer of Funds

Transfer #: _____

Date Requested: 9.2.21

Payer: MEDICARE

Requested by: RACHEL ARENAZAS

Requestor's email: rrarenazas@tuscanyvillagecare.net

Requestor's phone number: 713-770-5300

District or County: BRAZORIA

Facility: TUSCANY VILLAGE

Please Attach:

Remittance Advice and EOB

If money is taken against an overpayment or recoupment, please provide EOB of overpaid claim

* Patient Name, Date of Service and Amount of Payment from Remittance Advice must be filled out. Please email request form

and Remittance Advice to : cclevenger@mmcpportlavaca.com

mmartinez@mmcpportlavaca.com

Patient Name (REQUIRED)	Date of Service (REQUIRED)	Date of Payment	Type of Payment (Check/EFT)	Amount of Payment shown on	Check Number	Claim Number	Action needed- Enter funds (-) or Funds (+) to YOUR account	Notes
		8.30.21	EFT	\$ 46.06	EFT6074163	WO/CVDAR000019540	\$ 46.06	Golden Creek
		8.31.21	EFT	\$ 373.00	EFT6075912	WO/CVDAR000019540	\$ 373.00	Golden Creek
		9.1.21	EFT	\$ 488.65	EFT6077233	WO/CVDAR000019540	\$ 488.65	Golden Creek
			TOTAL	907.71			907.71	

To be filled out by Memorial Medical Center:

Date Received: 9/2/2021

Approved by: Mayra Martinez

Date of transfer: 9/8/2021

From Facility: Golden Creek

To Facility: TUSCANY VILLAGE

Amount: 907.71

Requested Transfer Date #2: _____

Date of transfer: _____

From Facility: _____

To Facility: _____

Amount: _____

APPROVED
SEP 07 2021

GROUP 1/11/2021
CANTON COUNTY, TEXAS
CHK#000122

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

000122

Date 9/8/21

88-2265/1131

PAY

TO THE
ORDER OF

Tuscany

\$ 907.71

Nine hundred Seven & 71/100

DOLLARS



**PROSPERITY
BANK**

County Auditor

MP

FOR

County Treasurer
included. Details on back.

⑈000122⑈ ⑆11312265⑆

10

RUN DATE:09/08/21
TIME:14:11

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 7
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

~~NHG 000121 09/08/21 32,541.90 MEMORIAL MEDICAL CENTER~~ golden creek
NHG 000122 09/08/21 907.71 TUSCANY
TOTALS: 33,449.61

APPROVED
GSI

SEP 08 2021

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER 022020
NH TUSCANY VILLAGE

PH 361-553-4618
815 N VIRGINIA ST
PORT LAVACA, TX 77979

1054

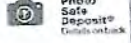
88-2255/1131-87

DATE 9/8/21



PAY TO THE ORDER OF Golden Creek \$ 1,847.45

one thousand eight hundred forty seven & 45/100 DOLLARS



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

FOR Medicare repayment

County Auditor
County Treasurer

⑈001054⑈ ⑆113122655⑆

RUN DATE:09/08/21
TIME:14:11

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 8
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

TUS 001054 09/08/21 1,847.45 GOLDEN CREEK
TOTALS: 1,847.45

**APPROVED
ON**

SEP 08 2021

**COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

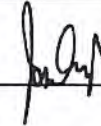
Medicare Repayment

NH Name	From CPSI Bank Acct #	CK#	Payee	GL #		Amt	Date
Broadmoor	10000019 - Prosperity		GOLDEN CREEK	20351000	Medicare repayment owed to GOLDEN CREEK	1,847.45	9/1/2021
Broadmoor	10000019 - Prosperity		TUSCANY	20351000	Medicare repayment owed to TUSCANY	906.27	9/1/2021
Crescent	10000019 - Prosperity		GOLDEN CREEK	20351000	Medicare repayment owed to GOLDEN CREEK	1,847.45	9/1/2021
Crescent	10000019 - Prosperity		TUSCANY	20351000	Medicare repayment owed to TUSCANY	906.27	9/1/2021
Fort Bend	10000020 - Prosperity		GOLDEN CREEK	20351000	Medicare repayment owed to GOLDEN CREEK	1,847.45	9/1/2021
Fort Bend	10000020 - Prosperity		TUSCANY	20351000	Medicare repayment owed to TUSCANY	906.27	9/1/2021
Solera	10000020 - Prosperity		GOLDEN CREEK	20351000	Medicare repayment owed to GOLDEN CREEK	1,847.45	9/1/2021
Solera	10000020 - Prosperity		TUSCANY	20351000	Medicare repayment owed to TUSCANY	906.27	9/1/2021
Golden Creek	10000021 - Prosperity		TUSCANY	20351000	Medicare repayment owed to TUSCANY	907.71	9/1/2021
Tuscany	10000023 - Prosperity		GOLDEN CREEK	20351000	Medicare repayment owed to GOLDEN CREEK	1,847.45	9/1/2021
					Total	13,770.04	

Note:

Approved:

Jason Anglin, CEO/CFO



9/7/2021

Bethany Senior Living
~~MEMORIAL MEDICAL CENTER~~
TRANSFER REQUEST

PAYEE GOLDEN CREEK

Date Requested: 09/07/2021

APPROVED
09
SEP 07 2021
COUSBY ABBEY
CARSON COUNTY, NEVADA

AMOUNT \$1,225.99

G/L NUMBER: _____

EXPLANATION: TO TRANSFER \$1,225.99 TO GOLDEN CREEK ACCOUNT FROM BETHANY DUE TO A DEPOSIT
ERROR

REQUESTED BY: Mayra Martinez

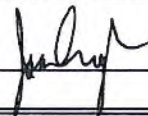
AUTHORIZED BY: 

Image Report



PROSPERITY BANK

ABA Number 113122655
 Account Number 217715506
 Amount \$1,225.99
 Deposit Date 08/19/2021

Front

DEPOSIT TICKET
 FOR CLEAR COPY, PRESS FIRMLY

DATE: 8-19-21

CURRENCY	COINS	CHECKS	DOLLARS	CENTS
		1225	99	
TOTAL				99

PLEASE BE SURE ALL ITEMS ARE PROPERLY ENDORSED

88-2265/1131-87

TOTAL ITEMS

CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE. NO ANY APPLICABLE COLLECTION AGREEMENT. DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL.

MEMORIAL MEDICAL CENTER 102019
 NH BETHANY SENIOR LIVING
 PH 361-553-4618
 815 N VIRGINIA ST
 PORT LAVACA, TX 77979

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

\$ 1225.99

⑆113122655⑆

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

Back

Front

MEMORIAL MEDICAL CENTER
 Operating
 815 N. Virginia St.
 Port Lavaca, TX 77979

PROSPERITY BANK
 88-2265
 1131

191467

11836 191467
 DATE AMOUNT
 08/11/21 \$1,225.99

One Thousand Two Hundred Twenty-Five Dollars and Ninety-Nine Cents

PAY TO THE ORDER OF: GOLDENCREEK HEALTHCARE
 2100 DOVE CROSSING LN
 NAVASOTA, TX 77868-5247

CALHOUN COUNTY TREASURER

⑆191467⑆ ⑆113122655⑆

Back



ENDORSE
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Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
9/7/2021

Nursing Home	Account Number	Previous		ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
		Beginning Balance	Transfer-Out				
Ashford Gardens		262,844.50	218,810.41	18,319.55		58,144.64	14,301.72
						Bank Balance	58,144.64
						Variance	
						Leave in Balance	100.00
						Amerigroup July QIPP	28,700.81
						Molina July QIPP	15,459.97
						Molina Year 2 Adjustment 3	25.51
						JULY INTEREST	38.78
						AUG INTEREST	17.83
						SEP INTEREST	
						Adjust Balance/Transfer Amt	14,301.72

Broadmoor		63,040.22	35,202.66	37,629.82		65,467.38	34,862.10
						Bank Balance	65,467.38
						Variance	
						Leave in Balance	100.00
						Medicare repayment owed to GOLDEN CREEK	1,847.45
						Medicare repayment owed to MMC	2,470.62
						Medicare repayment owed to Tuscany	6,553.31
						Medicare repayment owed to Tuscany 9.7.21	906.27
						Medicare repayment owed to Bethany	607.41
						Amerigroup July QIPP	11,671.35
						Molina July QIPP	6,398.33
						Molina Year 2 Adjustment 3	4.42
						JULY INTEREST	32.13
						AUG INTEREST	14.00
						SEP INTEREST	
						Adjust Balance/Transfer Amt	34,862.10

Crescent		97,616.77	73,101.10	50,721.59		75,037.06	47,958.60
						Bank Balance	75,037.06
						Variance	
						Leave in Balance	100.00
						Medicare repayment owed to GOLDEN CREEK	1,847.45
						Medicare repayment owed to MMC	2,526.19
						Medicare repayment owed to Tuscany	6,553.31
						Medicare repayment owed to Tuscany 9.7.21	906.27
						Medicare repayment owed to Bethany	607.41
						Amerigroup July QIPP	9,368.08
						Molina July QIPP	5,135.66
						Molina Year 2 Adjustment 3	3.87
						JULY INTEREST	20.96
						AUG INTEREST	9.26
						SEP INTEREST	
						Adjust Balance/Transfer Amt	47,958.60

Fort Bend		63,974.26	36,519.14	22,800.78		50,255.90	20,947.68
						Bank Balance	50,255.90
						Variance	
						Leave in Balance	100.00
						Medicare repayment owed to GOLDEN CREEK	1,847.45
						Medicare repayment owed to MMC	2,526.19
						Medicare repayment owed to Tuscany	6,553.31
						Medicare repayment owed to Tuscany 9.7.21	906.27
						Medicare repayment owed to Bethany	607.41
						Amerigroup July QIPP	11,400.34
						Molina July QIPP	6,249.79
						Molina Year 2 Adjustment 3	9.31
						JULY INTEREST	8.77
						AUG INTEREST	5.65
						SEP INTEREST	
						Adjust Balance/Transfer Amt	20,947.68

Solera at W Houston		182,898.61	89,285.83	61,347.91		154,760.69	57,670.99
						Bank Balance	154,760.69
						Variance	
						Leave in Balance	100.00
						Medicare repayment owed to GOLDEN CREEK	1,847.45
						Transfer to Tuscany for Deposit Error	66,466.47
						Medicare repayment owed to MMC	2,526.19
						Medicare repayment owed to Tuscany	7,459.58
						Medicare repayment owed to Tuscany 9.7.21	906.27
						Medicare repayment owed to Bethany	607.41
						Amerigroup July QIPP	11,061.60
						Molina July QIPP	6,064.10
						Molina Year 2 Adjustment 3	7.31
						JULY INTEREST	25.44
						AUG INTEREST	16.93
						SEP INTEREST	
						Adjust Balance/Transfer Amt	57,670.99

APPROVED BY
SEP 07 2021
CANDY AUSTON
ADJOUR COUNTY, TEXAS

14,301.72 +
34,862.10 +
47,958.60 +
20,947.68 +
57,670.99 +
175,741.09 *

TOTAL TRANSFERS 175,741.09
Approved: 
Jason Anglin, CEO 9/7/2021

		MMC PORTION					NH PORTION	
		Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI
Ashford Gardens								
8/30/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,230.81	-	-	-	-	2,230.81
8/30/2021	NOVITAS SOLUTION HCCLAIMPMT 675423 420000131	-	7,642.38	-	-	-	-	7,642.38
8/31/2021	Added to Account	-	17.83	-	-	-	-	17.83
9/1/2021	WIRE OUT ASHFORD HEALTH CARE CENTER LTD	218,819.41	-	-	-	-	-	-
9/1/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,242.94	-	-	-	-	2,242.94
9/3/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	710.36	-	-	-	-	710.36
9/3/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,475.23	-	-	-	-	1,475.23
		218,819.41	14,319.55	-	-	-	-	14,319.55

		MMC PORTION					NH PORTION	
		Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI
Broadmoor								
8/30/2021	MANAGEANDNET1718 MNS PMNT 00000000004293 41	-	3,307.50	-	-	-	-	3,307.50
8/30/2021	NOVITAS SOLUTION HCCLAIMPMT 676357 420000130	-	6,791.44	-	-	-	-	6,791.44
8/30/2021	HUMANA CHA DISB HCCLAIMPMT 390861 4200001207	-	5,237.00	-	-	-	-	5,237.00
8/30/2021	B OF A-CBIC CLMS HCCLAIMPMT 390861 111000027	-	790.00	-	-	-	-	790.00
8/31/2021	Added to Account	-	14.00	-	-	-	-	14.00
9/1/2021	CK118	8,731.17	-	-	-	-	-	-
9/1/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	26,471.49	-	-	-	-	-	-
9/1/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	10,500.00	-	-	-	-	10,500.00
9/1/2021	NOVITAS SOLUTION HCCLAIMPMT 676357 420000169	-	115.42	-	-	-	-	115.42
9/2/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	260.00	-	-	-	-	260.00
9/3/2021	NOVITAS SOLUTION HCCLAIMPMT 676357 420000130	-	10,614.46	-	-	-	-	10,614.46
		35,202.66	37,629.82	-	-	-	-	37,629.82

		MMC PORTION					NH PORTION	
		Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI
Crescent								
8/30/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	11,840.00	-	-	-	-	11,840.00
8/30/2021	NOVITAS SOLUTION HCCLAIMPMT 676323 420000130	-	2,121.75	-	-	-	-	2,121.75
8/31/2021	Added to Account	-	9.26	-	-	-	-	9.26
8/31/2021	NOVITAS SOLUTION HCCLAIMPMT 676323 420000189	-	9,327.43	-	-	-	-	9,327.43
8/31/2021	HUMANA INS CO HCCLAIMPMT 390864 830000591346	-	4,192.21	-	-	-	-	4,192.21
8/31/2021	HUMANA CHA DISB HCCLAIMPMT 390864 4200001520	-	8,704.68	-	-	-	-	8,704.68
8/31/2021	CIGNA HCCLAIMPMT 1669860425 91000015495795	-	8,302.12	-	-	-	-	8,302.12
9/1/2021	CK153	8,731.17	-	-	-	-	-	-
9/1/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	64,570.13	-	-	-	-	-	-
9/2/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	960.00	-	-	-	-	960.00
9/3/2021	HUMANA CHA DISB HCCLAIMPMT 390864 4200001226	-	5,264.14	-	-	-	-	5,264.14
		73,301.30	50,721.59	-	-	-	-	50,721.59

		MMC PORTION					NH PORTION	
		Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI
Fort Bend								
8/31/2021	Added to Account	-	5.65	-	-	-	-	5.65
8/31/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	28.34	-	-	-	-	28.34
9/1/2021	CK147	8,731.17	-	-	-	-	-	-
9/1/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	27,787.97	-	-	-	-	-	-
9/2/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	14,330.00	-	-	-	-	14,330.00
9/3/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	8,436.79	-	-	-	-	8,436.79
		36,519.14	22,800.78	-	-	-	-	22,800.78

		MMC PORTION					NH PORTION	
		Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI
Galena at West Houston								
8/30/2021	NOVITAS SOLUTION HCCLAIMPMT 676310 420000130	-	2,042.21	-	-	-	-	2,042.21
8/30/2021	HUMANA CHA DISB HCCLAIMPMT 390862 4200001207	-	5,023.66	-	-	-	-	5,023.66
8/31/2021	Added to Account	-	16.93	-	-	-	-	16.93
8/31/2021	MANAGEANDNET1718 MNS PMNT 00000000002482 41	-	16,138.45	-	-	-	-	16,138.45
9/1/2021	CK1152	8,731.17	-	-	-	-	-	-
9/1/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	80,554.66	-	-	-	-	-	-
9/1/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	7,790.00	-	-	-	-	7,790.00
9/1/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	6,970.00	-	-	-	-	6,970.00
9/3/2021	Deposit	-	6,660.00	-	-	-	-	6,660.00
9/3/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	5,774.88	-	-	-	-	5,774.88
9/3/2021	HUMANA CHA DISB HCCLAIMPMT 390862 4200001226	-	10,931.78	-	-	-	-	10,931.78
		89,285.83	61,347.93	-	-	-	-	61,347.93

TOTALS

453,128.34	186,819.65	-	-	-	-	-	-	186,819.65
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Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type

DDA

Data reported as of Sep 7, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
WAIVER CLEARING				
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$58,144.64	\$58,144.64	\$58,144.64	\$55,959.0
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$65,467.38	\$65,467.38	\$65,467.38	\$54,852.9
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$75,037.06	\$75,037.06	\$75,037.06	\$69,772.9
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$50,255.90	\$50,255.90	\$50,255.90	\$41,819.1
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$154,760.69	\$158,702.69	\$154,760.69	\$131,394.0

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 9/7/2021

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		46,194.65 ✓	36,381.26 ✓	151,704.03	✓	161,517.42	118,244.15
						Bank Balance Variance	161,517.42 ✓
						Leave in Balance	100.00
						Spuerior QJPP	32,541.90 ✓
						Medicare repayment owed to MMC	2,526.19 01/5
						Medicare repayment owed to Tuscany	6,923.31 -7,461.02-01/5
						Medicare repayment owed to Tuscany 9.7.21	907.71 01/5
						Medicare repayment owed to Bethany	607.41 01/5
						JULY INTEREST	26.48 ✓
						AUG INTEREST	10.27 ✓
						SEP INTEREST	
						Adjust Balance/Transfer Amt	118,244.15 ✓

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 9/7/2021

APPROVED
 09
 SEP 07 2021
 COUNTY CLERK
 CARROLL COUNTY, TEXAS

Golden Creek	MMC PORTION						NH PORTION
	Transfer-Out	Transfer-In	QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&L apic	
8/31/2021 Added to Account		10.27					10.27
9/1/2021 CK117	8,731.17						
9/1/2021 WIRE OUT NEXION HEALTH AT GOLDEN CREEK	27,650.09						
9/1/2021 CIGNA HCCLAIMPMT 1588075964 91000012225794		80.33					80.33
9/1/2021 Centene Managem CC+ 38888463 3110020972658		35,278.35	29,805.44	5,472.91		32,541.90	2,736.46
9/2/2021 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9		2,344.08					2,344.08
9/2/2021 GOLDENCREEKHEALT MERC DEP 1220356 9100001843		1,772.60					1,772.60
9/3/2021 Deposit		112,218.40					112,218.40
	36,381.26	151,704.03	29,805.44	5,472.91		32,541.90	119,162.14

Quick View

Select Quick View Accounts
Account Number / Name

Account Type



Search

All

Select Group
Groups

Add Group

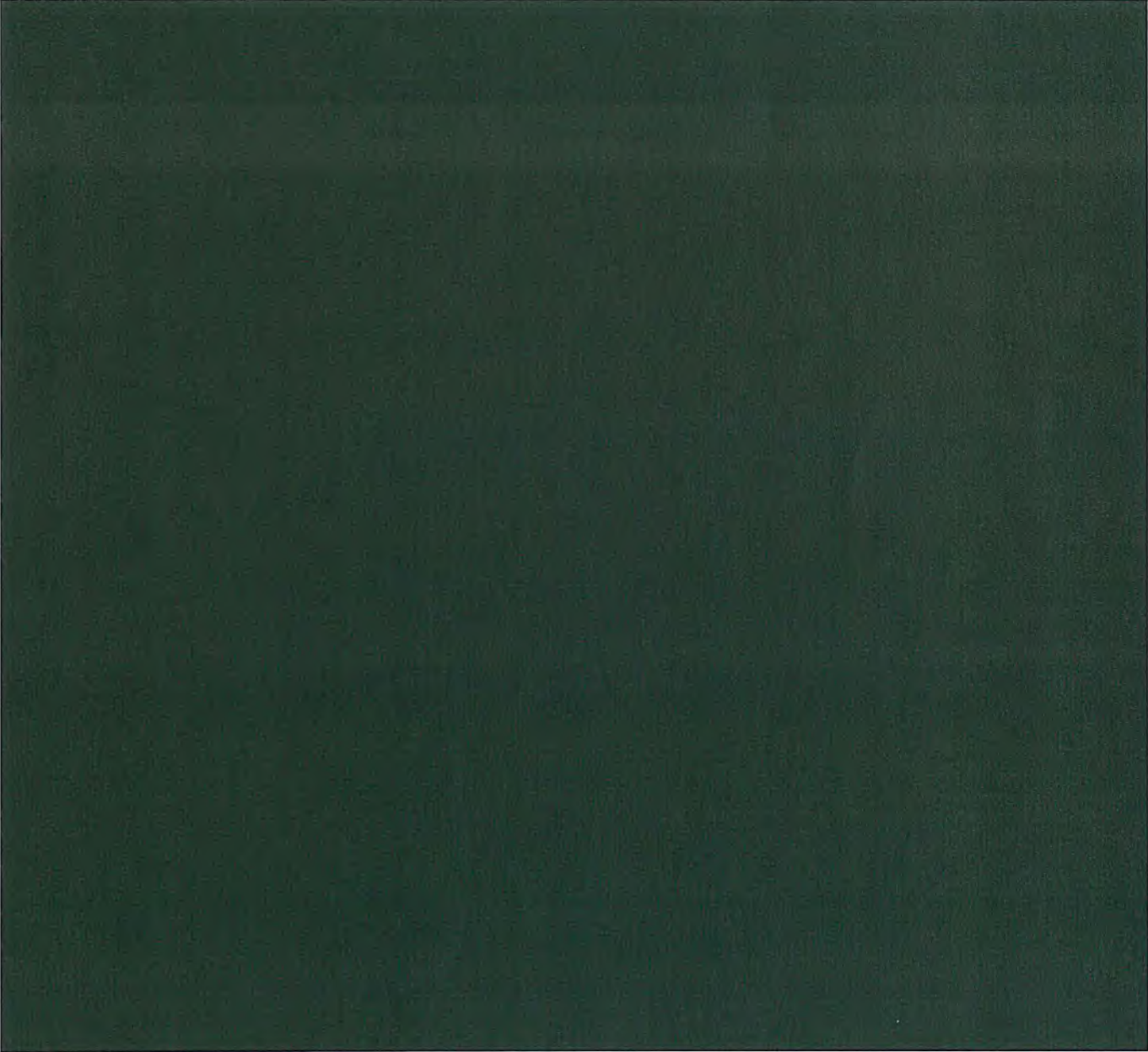
DDA

Data reported as of Sep 7, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$5,771,655.71	\$5,862,630.46	\$5,771,655.71	\$6,024,007.1



MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$161,517.42	\$170,306.42	\$161,517.42	\$49,299.0
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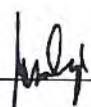


Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 9/7/2021

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- Private Pay		115,249.60	15,821.67	100,300.27			199,728.20	
						Bank Balance	199,728.20	
						Variance		
						Leave in Balance	100.00	
						ECHO CLAIM PAYMENTS TO HOLD	177,602.22	
						SPERIOR QIPP	19,252.43	
						JULY INTEREST	24.01	
						AUG INTEREST	9.54	
						SEP INTEREST		
						Adjust Balance/Transfer Amt	2,740.00	
							39,365.51	39,243.64
						Bank Balance	39,365.51	
						Variance		
						Leave in Balance	100.00	
						JULY INTEREST	15.04	
						AUG INTEREST	6.83	
						SEP INTEREST		
						Adjust Balance/Transfer Amt	39,243.64	
						TOTAL TRANSFERS	41,983.64	

Routine Information for Gulf Pointe Plaza

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

Approved: 
 Jason Anglin, CEO 9/7/2021

APPROVED
SEP 07 2021
CLERK
CLERK

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	QIPP TI	
Gulf Pointe Plaza-Private Pay								
8/30/2021 HNB - ECHO HCCLAIMPMT 746003411 440000285909	-	12.74						12.74
8/30/2021 HNB - ECHO HCCLAIMPMT 746003411 440000285909	-	190.89						190.89
8/30/2021 HNB - ECHO HCCLAIMPMT 746003411 440000285909	-	29.01						29.01
8/30/2021 HNB - ECHO HCCLAIMPMT 746003411 440000285909	-	9,896.07						9,896.07
8/31/2021 Added to Account	-	9.54						9.54
8/31/2021 HNB - ECHO HCCLAIMPMT 746003411 440000221245	-	553.36						553.36
8/31/2021 HNB - ECHO HCCLAIMPMT 746003411 440000221245	-	13,712.29						13,712.29
9/1/2021 WIRE OUT HMG SERVICES, LLC	15,821.67	-						-
9/1/2021 HNB - ECHO HCCLAIMPMT 746003411 440000250774	-	3,454.36						3,454.36
9/1/2021 HNB - ECHO HCCLAIMPMT 746003411 440000250774	-	623.93						623.93
9/1/2021 HNB - ECHO HCCLAIMPMT 746003411 440000250774	-	54.89						54.89
9/1/2021 Centene Managemen CCD+ 38888463 3110020972687	-	20,879.43	17,625.43	3,254.00			19,252.43	1,627.00
9/2/2021 HNB - ECHO HCCLAIMPMT 746003411 440000282215	-	913.65						913.65
9/2/2021 HNB - ECHO HCCLAIMPMT 746003411 440000282215	-	117.61						117.61
9/2/2021 HNB - ECHO HCCLAIMPMT 746003411 440000282215	-	17,813.07						17,813.07
9/2/2021 HNB - ECHO HCCLAIMPMT 746003411 440000282215	-	350.01						350.01
9/2/2021 HNB - ECHO HCCLAIMPMT 746003411 440000282215	-	11,722.15						11,722.15
9/2/2021 AETNA AS01 HCCLAIMPMT 1922092790 51000010466	-	1,113.00						1,113.00
9/3/2021 HNB - ECHO HCCLAIMPMT 746003411 440000214493	-	254.89						254.89
9/3/2021 HNB - ECHO HCCLAIMPMT 746003411 440000214493	-	4,081.49						4,081.49
9/3/2021 HNB - ECHO HCCLAIMPMT 746003411 440000214493	-	5,636.07						5,636.07
9/3/2021 HNB - ECHO HCCLAIMPMT 746003411 440000214493	-	8,881.82						8,881.82
	15,821.67	100,300.27	17,625.43	3,254.00	-	-	19,252.43	81,047.84

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	QIPP TI	
Gulf Pointe Plaza-Medicare/Medicaid								
8/31/2021 Added to Account	-	6.83						6.83
9/1/2021 WIRE OUT HMG SERVICES, LLC	130,892.68	-						-
9/3/2021 Deposit	-	39,243.64						39,243.64
	130,892.68	39,250.47	-	-	-	-	-	39,250.47
	146,714.35	139,550.74	17,625.43	3,254.00	-	-	19,252.43	120,298.31

Quick View

Select Quick View Accounts
Account Number / Name

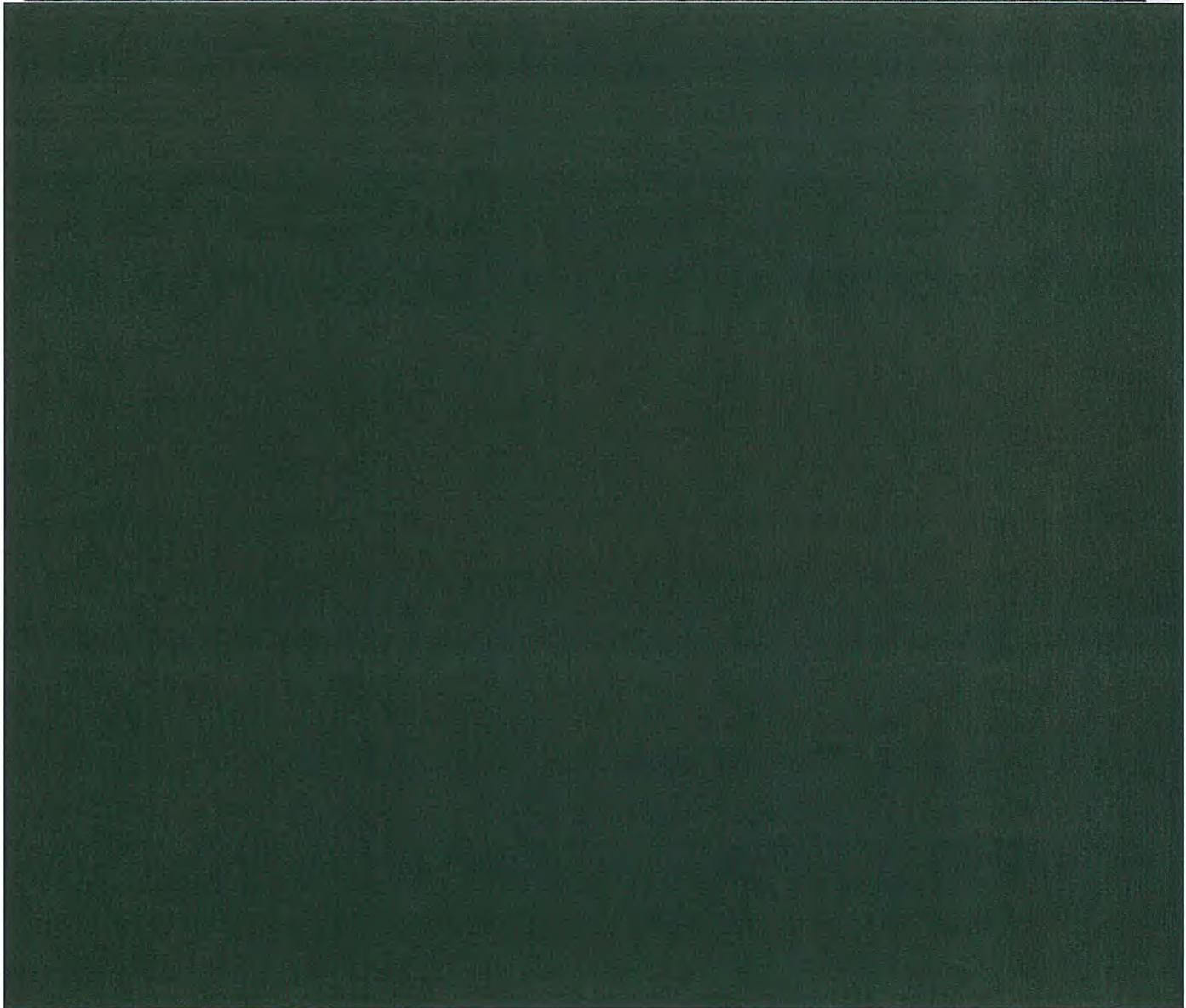
Select Group
Groups

Account Type

DDA

Data reported as of Sep 7, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
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*5441

MMC -NH GULF POINTE
PLAZA -
MEDICARE/MEDICAID

\$39,365.51

\$39,365.51

\$39,365.51

\$121.8

*5433

MMC -NH GULF POINTE
PLAZA - PRIVATE PAY

\$199,728.20

\$213,648.05


\$199,728.20

\$180,873.9

Prosperity Accounts
9/7/2021

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	Test
Tuscany Senior Living		221,597.03	215,670.62	64,436.76			70,358.17	62,589.31	62,589.31
						Bank Balance	70,358.17		
						Variance			
						Leave in Balance	100.00		
						Amerigroup July QPPP	2,687.81		
						Medicare repayment owed to MMC	2,526.39		
						Medicare repayment owed to Bethany	607.41		
						Medicare repayment owed to GOLDEN CREEK	1,847.45		
						Adjust Balance/Transfer Amt	62,589.31		

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:  9/7/2021
Jason Anglin, CEO

APPROVED
OK
SEP 17 2021
COOPER AUSTIN
CARROLL COUNTY, INDCO

Tuscany Village

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
8/31/2021 Added to Account	-	18.62					-	18.62
8/31/2021 NOVITAS SOLUTION HCCLAIMPMT 676201 420000189	-	1,117.80					-	1,117.80
9/1/2021 CK1050	8,731.17	-					-	-
9/1/2021 WIRE OUT LINBAR ENTERPRISES, LLC	206,939.45	-					-	-
9/1/2021 NOVITAS SOLUTION HCCLAIMPMT 676201 420000169	-	9,344.18					-	9,344.18
9/2/2021 NOVITAS SOLUTION HCCLAIMPMT 676201 420000104	-	12,241.25					-	12,241.25
9/3/2021 Deposit	-	41,714.91					-	41,714.91
	215,670.62	64,436.76	-	-	-	-	-	64,436.76

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type

DDA

Data reported as of Sep 7, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
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*3407

MMC -NH TUSCANY
VILLAGE

\$70,358.17

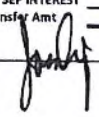


\$78,028.56

\$70,358.17

\$28,643.2

Memorial Medical Center
 Nursing Home UPL
 Weekly HSL Transfer
 Prosperity Accounts
 9/7/2021

Nursing Home	Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Bethany Senior Living		160,667.69	160,495.18	229,721.61	✓		229,894.12	228,473.09
							229,894.12	✓
							100.00	✓
							1,225.99	✓
							72.51	✓
							22.53	✓
							228,473.09	✓
Approved:								
Jason Anglin, CEO								9/7/2021

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
ON
SEP 07 2021
COMPUTER ASSISTED
CAREGIVER ACCOUNTS

MMC PORTION				
QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI

Bethany Senior Living

	Transfer-Out	Transfer-in	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
8/30/2021 Deposit	-	16,868.03	-	-	-	-	-	16,868.03
8/30/2021 Deposit	-	6,064.49	-	-	-	-	-	6,064.49
8/31/2021 Added to Account	-	22.53	-	-	-	-	-	22.53
8/31/2021 Deposit	-	1,922.92	-	-	-	-	-	1,922.92
9/1/2021 WIRE OUT BETHANY SENIOR LIVING, LTD	160,495.18	-	-	-	-	-	-	-
9/1/2021 Deposit	-	52,387.02	-	-	-	-	-	52,387.02
9/1/2021 Deposit	-	11,627.20	-	-	-	-	-	11,627.20
9/1/2021 Deposit	-	11,549.00	-	-	-	-	-	11,549.00
9/2/2021 Deposit	-	7,583.04	-	-	-	-	-	7,583.04
9/3/2021 Deposit	-	95,453.55	-	-	-	-	-	95,453.55
9/3/2021 Deposit	-	24,445.30	-	-	-	-	-	24,445.30
9/3/2021 HOSPICE OF SOUTH Payments NF 113122650020167	-	1,798.53	-	-	-	-	-	1,798.53
	160,495.18	229,721.61	-	-	-	-	-	229,721.61

Quick View

Select Quick View Accounts
Account Number / Name

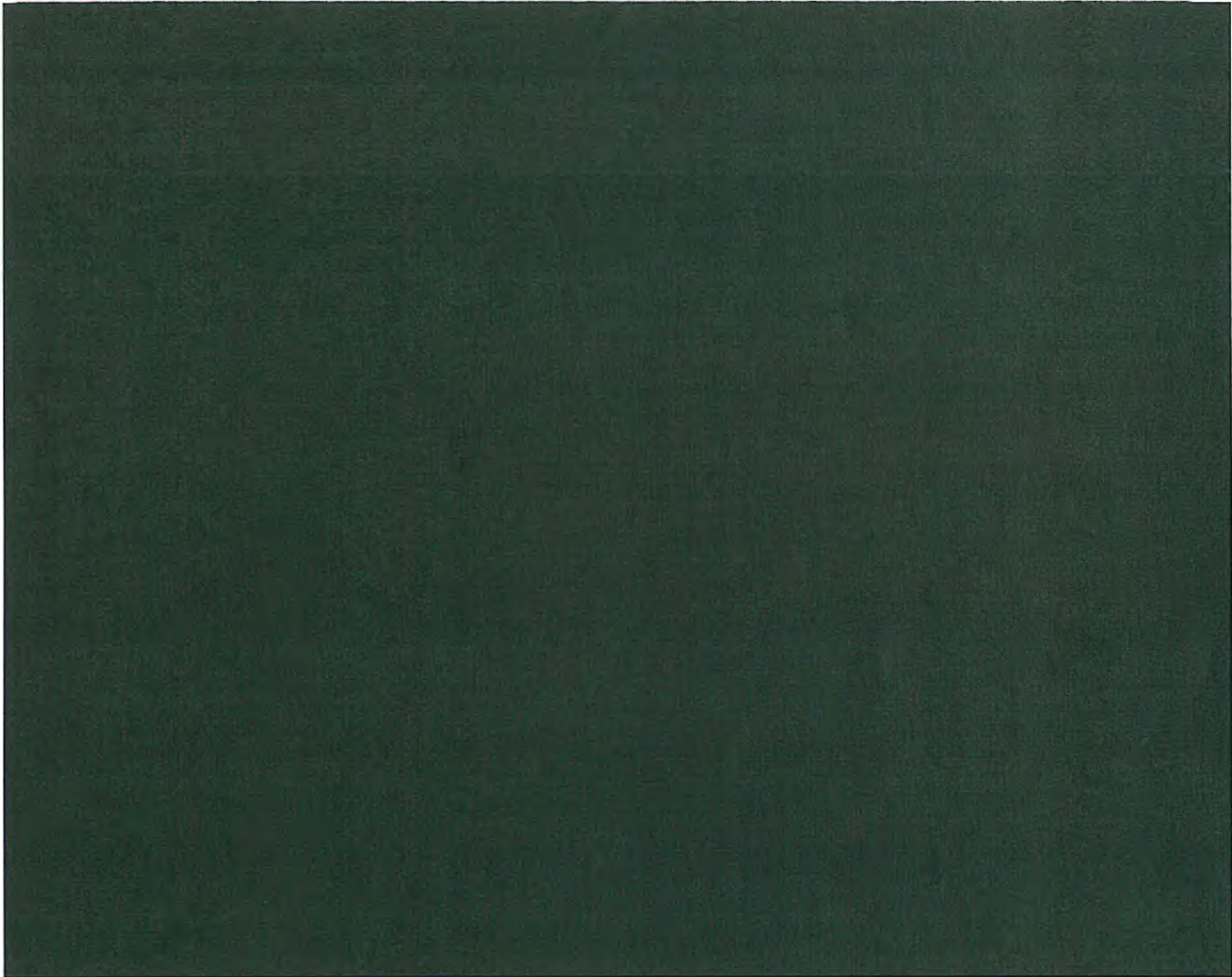
Select Group
Groups

Account Type

DDA

Data reported as of Sep 7, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
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*5506 MMC -NH BETHANY SENIOR LIVING	\$229,894.12	✓	\$229,894.12	\$229,894.12	\$108,196.7
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MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

MEMORIAL MEDICAL CENTER

Date Requested: 9/7/21

APPROVED
ON
SEP 07 2021
COURTNEY A. BERTON
CLERK OF COURT, TEXAS
Ck# 00121

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept

AMOUNT \$32,541.90

G/L NUMBER: 10255040

EXPLANATION: SUPERIOR JULY QIPP PAYMENT - golden creek

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P _____
MEMORIAL MEDICAL CENTER

Date Requested: 9/7/21

A _____

APPROVED
SR

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept.

Y _____

SEP 07 2021

E _____

CLERK/RECEIVIST
CARRISBY COUNTY, TEXAS

E _____

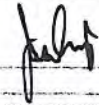
CK # 1008

AMOUNT \$19,252.43

G/L NUMBER: 10255040

EXPLANATION: SUPERIOR JULY QIPP PAYMENT - GUF Pointe - PP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

RUN DATE:09/08/21
TIME:14:03

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 3
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

GPP 001008 09/08/21 19,252.43 MEMORIAL MEDICAL CENTER *gulf Pointe*
TOTALS: 19,252.43

APPROVED
ON

SEP 08 2021

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:09/08/21
TIME:14:03

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/08/21 THRU 09/08/21

PAGE 4
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

NHG 000121 09/08/21 32,541.90 MEMORIAL MEDICAL CENTER *Golden creek*
TOTALS: 32,541.90

APPROVED
CM

SEP 08 2021

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
NH GULF POINTE - PRIVATE PAY
361-553-4618
1815 N VIRGINIA ST
PORT LAVACA, TX 77979

1008

88-2265/1131-87

DATE 9/8/21

CHECK NUMBER

PAY TO THE ORDER OF Memorial Medical Center \$ 19,252.43

Nineteen thousand two hundred fifty two & 43/100

DOLLARS



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

FOR Superior Clipp 1,2

County Auditor
County Treasurer

⑈001008⑈ ⑆113122655⑆

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

000121

Date 9/8/21

88-2265/1131

PAY TO THE ORDER OF Memorial Medical Center \$ 32,541.90

Thirty two thousand five hundred forty one & 90/100

DOLLARS



PROSPERITY BANK

FOR Superior Clipp 1,2

County Auditor

County Treasurer

⑈000121⑈ ⑆113122655⑆

QIPP Payment to MMC from Nursing Facilities

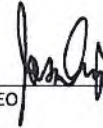
Commissioner's Court

9/8/2021

NH Name	From Bank Acct #	Ck #	Payee	GL #	Superior QIPP			TOTAL	Date
Ashford	10000018 - Prosperity		MMC -Prosperity Operating #10000001	10255040				-	9/8/2021
Broadmoor	10000019 - Prosperity		MMC -Prosperity Operating #10000001	10255040				-	9/8/2021
Crescent	10000020 - Prosperity		MMC -Prosperity Operating #10000001	10255040				-	9/8/2021
Fort Bend	10000021 - Prosperity		MMC -Prosperity Operating #10000001	10255040				-	9/8/2021
Solera	10000022 - Prosperity		MMC -Prosperity Operating #10000001	10255040				-	9/8/2021
Golden Creek	10000023 - Prosperity		MMC -Prosperity Operating #10000001	10255040	32,541.90			32,541.90	9/8/2021
Gulf Pointe-PP	10000114 - Prosperity		MMC -Prosperity Operating #10000001	10255040	19,252.43			19,252.43	9/8/2021
Gulf Pointe-MM	10000025 - Prosperity		MMC -Prosperity Operating #10000001					-	9/8/2021
Bethany			MMC -Prosperity Operating #10000001					-	9/8/2021
Tuscany			MMC -Prosperity Operating #10000001	10255040				-	9/8/2021
				Total:	51,794.33	-	-	51,794.33	

Note:

Approved:
Jason Anglin, CEO



9/7/2021