

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR --October 11, 2021**

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 708,860.40
TOTAL TRANSFERS BETWEEN FUNDS	\$ 460,403.21
TOTAL NURSING HOME UPL EXPENSES	\$ 258,465.89
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
<b>GRAND TOTAL DISBURSEMENTS APPROVED October 11, 2021</b>	<b>\$ 1,427,729.50</b>

**APPROVED**

**OCT 11 2021**

**CALHOUN COUNTY  
COMMISSIONERS COURT**

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR ---October 11, 2021**

**PAYABLES AND PAYROLL**

10/6/2021 Weekly Payables	306,957.78
10/8/2021 Payroll Liabilities -Payroll Taxes	96,045.10
10/8/2021 Payroll	303,300.61

**Prosperity Electronic Bank Payments**

10/4/-10/5/21 Credit Card & Lease Fees	703.13
10/20/2021 Sales Tax for September 2021	1,238.38
10/4-10/7/21 Pay Plus-Patient Claims Processing Fee	592.60
10/4/2021 Authnet Gateway Billing-3rd Party Payor Fee	22.80

**TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS** \$ **708,860.40**

**TRANSFER BETWEEN FUNDS TO NURSING HOMES**

10/6/2011 MMC Operating to Broadmoor-NH portion of QIPP deposited into MMC Operating	1,484.00
10/6/2011 MMC Operating to Crescent-correction of NH insurance payment deposited into MMC Operating in error	4,863.69
10/6/2021 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error and medicare recoup	136,820.55
10/6/2021 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating and NH portion of QIPP	26,103.65
10/6/2021 MMC Operating to Tuscany Village-correction of MMC medicare recoup taken from Tuscany	67,339.95
10/6/2021 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error and medicare recoup	167,676.46
10/6/2021 MMC Operating to Cantex Health Care Center-correction of NH insurance payment deposited into MMC Operating in error	3,524.50

**MEDICARE ADVANCE PAYMENT RECOUP**

10/8/2021 Broadmoor to MMC Operating-correction of Broadmoor medicare recoup taken from MMC Operating	10,180.27
10/8/2021 Crescent to MMC Operating-correction of Crescent medicare recoup taken from MMC Operating	10,180.27
10/8/2021 Fort Bend to MMC Operating-correction of Fort Bend medicare recoup taken from MMC Operating	1,689.06
10/8/2021 Solera to MMC Operating-correction of Solera medicare recoup taken from MMC Operating	10,180.27
10/8/2021 Golden Creek to MMC Operating-correction of Golden Creek recoup taken from MMC Operating	10,180.27
10/8/2021 Tuscany to MMC Operating-correction of Tuscany medicare recoup taken from MMC Operating	10,180.27

**TOTAL TRANSFERS BETWEEN FUNDS** \$ **460,403.21**

**NURSING HOME UPL EXPENSES**

10/8/2021 Nursing Home UPL-Cantex Transfer	49,882.89
10/8/2021 Nursing Home UPL-Nexion Transfer	15,815.95
10/8/2021 Nursing Home UPL-HMG Transfer	13,932.23
10/8/2021 Nursing Home UPL-HSL Transfer	79,645.10

**QIPP CHECKS TO MMC**

10/8/2021 Ashford	27,419.85
10/8/2021 Broadmoor	11,335.93
10/8/2021 Crescent	9,098.84
10/8/2021 Fort Bend	11,072.75
10/8/2021 Solera	10,773.18
10/8/2021 Tuscany	29,489.17

**TOTAL NURSING HOME UPL EXPENSES** \$ **258,465.89**

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

**GRAND TOTAL DISBURSEMENTS APPROVED October 11, 2021** \$ **1,427,729.50**

RECEIVED

OCT 06 2021

10/06/2021

Calhoun Community Auditor

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 10/20/2021

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ap\_open\_invoice.template

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
A0400	AUREUS RADIOLOGY LLC ✓												
				2321839 ✓		09/22/20	09/20/20	10/20/20		1,673.25	0.00	0.00	1,673.25 ✓
					LAB STAFFING								
				2321970 ✓		09/22/20	09/20/20	10/20/20		3,961.38	0.00	0.00	3,961.38 ✓
					LAB STAFFING								
				2321576 ✓		09/22/20	09/20/20	10/20/20		2,973.13	0.00	0.00	2,973.13 ✓
					LAB STAFFING								
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		A0400	AUREUS RADIOLOGY LLC							8,607.76	0.00	0.00	8,607.76
12800	AUTHORITYRX ✓												
				1192 ✓		09/30/20	09/01/20	09/29/20		11,202.00	0.00	0.00	11,202.00 ✓
					340B ADVANCED CLAIMS CAF								
				1209 ✓		10/01/20	10/01/20	10/01/20		12,859.00	0.00	0.00	12,859.00 ✓
					340B ADVANCED CAPTURE								
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		12800	AUTHORITYRX							24,061.00	0.00	0.00	24,061.00
14088	AZALEA HEALTH ✓												
				58390 ✓		10/04/20	10/01/20	10/01/20		550.00	0.00	0.00	550.00 ✓
					PROCESSEING AND SUPPOR								
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		14088	AZALEA HEALTH							550.00	0.00	0.00	550.00
B1150	BAXTER HEALTHCARE ✓		W										
				72143452 ✓		09/29/20	09/16/20	10/11/20		821.15	0.00	0.00	821.15 ✓
					SUPPLIES								
				72173740 ✓		09/29/20	09/20/20	10/15/20		1,031.77	0.00	0.00	1,031.77 ✓
					SUPPLIES								
				72198184 ✓		09/30/20	09/20/20	10/15/20		469.71	0.00	0.00	469.71 ✓
					SUPPLIES								
				72189220 ✓		09/30/20	09/21/20	10/16/20		629.50	0.00	0.00	629.50 ✓
					LEASE								
				72189290 ✓		09/30/20	09/21/20	10/16/20		2,367.50	0.00	0.00	2,367.50 ✓
					LEASE								
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		B1150	BAXTER HEALTHCARE							5,319.63	0.00	0.00	5,319.63
M2485	BAYER HEALTHCARE ✓		M										
				6009473910A ✓		09/30/20	09/14/20	09/14/20		1,780.50	0.00	0.00	1,780.50 ✓
					SUPPLIES								
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net

	M2485	BAYER HEALTHCARE					1,780.50	0.00	0.00	1,780.50
Vendor#	Vendor Name		Class	Pay Code						
B1266	BECKMAN COULTER CAPITAL ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
109331508 ✓		10/01/20	10/01/20	10/01/20		2,743.40	0.00	0.00	2,743.40 ✓	
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	B1266	BECKMAN COULTER CAPITAL				2,743.40	0.00	0.00	2,743.40	
Vendor#	Vendor Name		Class	Pay Code						
B1220	BECKMAN COULTER INC ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
4431473 ✓		09/30/20	09/25/20	10/20/20		880.00	0.00	0.00	880.00 ✓	
	MAINT CONTRACT									
4431474 ✓		09/30/20	09/25/20	10/20/20		1,842.50	0.00	0.00	1,842.50 ✓	
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	B1220	BECKMAN COULTER INC				2,722.50	0.00	0.00	2,722.50	
Vendor#	Vendor Name		Class	Pay Code						
11072	BIO-RAD LABORATORIES, INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
905018738 ✓		09/30/20	09/01/20	10/01/20		684.36	0.00	0.00	684.36 ✓	
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11072	BIO-RAD LABORATORIES, INC				684.36	0.00	0.00	684.36	
Vendor#	Vendor Name		Class	Pay Code						
11224	CABLES AND SENSORS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
118485 ✓		09/29/20	09/16/20	10/16/20		224.00	0.00	0.00	224.00 ✓	
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11224	CABLES AND SENSORS				224.00	0.00	0.00	224.00	
Vendor#	Vendor Name		Class	Pay Code						
C1048	CALHOUN COUNTY ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
092421	FUEL	09/30/20	09/25/20	09/25/20		99.33	0.00	0.00	99.33 ✓	
	FUEL									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	C1048	CALHOUN COUNTY				99.33	0.00	0.00	99.33	
Vendor#	Vendor Name		Class	Pay Code						
14120	CALHOUN COUNTY EMS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
21090002 ✓		09/30/20	09/28/20	10/15/20		3,080.00	0.00	0.00	3,080.00 ✓	
	TRANSPORT PATIENTS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	14120	CALHOUN COUNTY EMS				3,080.00	0.00	0.00	3,080.00	
Vendor#	Vendor Name		Class	Pay Code						
13992	CARIANT HEALTH PARTNERS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
128019 ✓		09/21/20	09/15/20	10/14/20		2,193.75	0.00	0.00	2,193.75 ✓	
	MED SURG STAFFING									
128018		09/21/20	09/15/20	10/14/20		200.00	0.00	0.00	200.00 ✓	

MED SURG STAFFING

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net				
Vendor Totals				13992	CARIANT HEALTH PARTNERS			2,393.75	0.00	0.00	2,393.75
13028	CAVALLO ENERGY TEXAS LLC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
212600015906705 ✓	ENERGY BILL 167647	09/30/20	09/16/20	10/18/20		642.37	0.00	0.00	642.37 ✓		
212600015906706 ✓	ENERGY BILL ACCT 167653	09/30/20	09/16/20	10/18/20		16.18	0.00	0.00	16.18 ✓		
212600015906704 ✓	ENERGY BILL ACCT 167636	09/30/20	09/16/20	10/18/20		1,037.27	0.00	0.00	1,037.27 ✓		
Vendor Totals				13028	CAVALLO ENERGY TEXAS LLC			1,695.82	0.00	0.00	1,695.82
C1992	CDW GOVERNMENT, INC. ✓		M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
K730215 ✓	SUPPLIES	09/29/20	09/14/20	10/14/20		96.92	0.00	0.00	96.92 ✓		
K734645 ✓	SUPPLIES	09/29/20	09/15/20	10/15/20		126.82	0.00	0.00	126.82 ✓		
Vendor Totals				C1992	CDW GOVERNMENT, INC.			223.74	0.00	0.00	223.74
10105	CHRIS KOVAREK ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
54 ✓	Swing bed service 9/15/21-9/27/21	09/30/20	09/30/20	09/30/20		160.00	0.00	0.00	160.00 ✓		
Vendor Totals				10105	CHRIS KOVAREK			160.00	0.00	0.00	160.00
L1629	CHRISTINA ZAPATA-ARROYO ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
100521 ✓	SLP SERVICES	09/30/20	09/25/20	09/25/20		165.00	0.00	0.00	165.00 ✓		
Vendor Totals				L1629	CHRISTINA ZAPATA-ARROYO			165.00	0.00	0.00	165.00
C1166	COASTAL OFFICE Solutons ✓		W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
OEQT185671 ✓	72' Chrome Post	09/30/20	09/28/20	10/08/20		162.72	0.00	0.00	162.72 ✓		
Vendor Totals				C1166	COASTAL OFFICE Solutons			162.72	0.00	0.00	162.72
11030	COMBINED INSURANCE ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
093021	INSURNACE	09/30/20	09/30/20	09/30/20		801.60	0.00	0.00	801.60 ✓		
Vendor Totals				11030	COMBINED INSURANCE			801.60	0.00	0.00	801.60

Vendor#	Vendor Name	Class	Pay Code							
11616	CONTROL SOLUTIONS ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	CS217751 ✓		09/29/20	09/15/20	10/14/20		254.00	0.00	0.00	254.00 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11616	CONTROL SOLUTIONS				254.00	0.00	0.00	254.00

Vendor#	Vendor Name	Class	Pay Code							
11368	CYRACOM LLC ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	1385150 ✓		09/30/20	09/30/20	09/30/20		192.78	0.00	0.00	192.78 ✓
	INTERPERTATION									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11368	CYRACOM LLC				192.78	0.00	0.00	192.78

Vendor#	Vendor Name	Class	Pay Code							
10368	DEWITT POTH & SON ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	6567710 ✓		09/29/20	09/20/20	10/15/20		315.09	0.00	0.00	315.09 ✓
	SUPPLIES									
	6574080 ✓		09/29/20	09/23/20	10/18/20		434.08	0.00	0.00	434.08 ✓
	SUPPLIES									
	6574230 ✓		09/29/20	09/23/20	10/18/20		61.28	0.00	0.00	61.28 ✓
	SUPPLIES									
	6553760 ✓		09/30/20	09/07/20	10/02/20		547.16	0.00	0.00	547.16 ✓
	SUPPLIES									
	657596-0 ✓		09/30/20	09/24/20	10/19/20		12.66	0.00	0.00	12.66 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10368	DEWITT POTH & SON				1,370.27	0.00	0.00	1,370.27

Vendor#	Vendor Name	Class	Pay Code							
12040	DRIESSEN WATER INC. ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	14302703093021		09/30/20	09/30/20	09/30/20		442.50	0.00	0.00	442.50 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		12040	DRIESSEN WATER INC.				442.50	0.00	0.00	442.50

Vendor#	Vendor Name	Class	Pay Code							
F1400	FISHER HEALTHCARE ✓	M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	2868787 ✓		09/29/20	09/21/20	10/16/20		492.26	0.00	0.00	492.26 ✓
	SUPPLIES									
	3115590 ✓		09/30/20	09/22/20	10/17/20		67.86	0.00	0.00	67.86 ✓
	SUPPLIES									
	3713937 ✓		09/30/20	09/24/20	10/19/20		73.30	0.00	0.00	73.30 ✓
	SUPPLIES									
	3713932 ✓		09/30/20	09/24/20	10/19/20		9,360.00	0.00	0.00	9,360.00 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		F1400	FISHER HEALTHCARE				9,993.42	0.00	0.00	9,993.42

Vendor#	Vendor Name	Class	Pay Code
11183	FRONTIER ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
092321		09/30/20	09/23/20			37.78	0.00	0.00	37.78 ✓		
PHONE ACCT 3615520254052f											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11183	FRONTIER	37.78	0.00	0.00	37.78
Vendor#	Vendor Name				Class	Pay Code					
12636	FUSION CLOUD SERVICES, LLC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
28311236		09/21/20	09/16/20	10/16/20		1,190.86	0.00	0.00	1,190.86 ✓		
PHONES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12636	FUSION CLOUD SERVICES, LLC	1,190.86	0.00	0.00	1,190.86
Vendor#	Vendor Name				Class	Pay Code					
10653	GLOBAL EQUIPMENT CO. INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
118182013 ✓		09/29/20	09/16/20	10/16/20		94.89	0.00	0.00	94.89 ✓		
SHOWE CURTAIN											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10653	GLOBAL EQUIPMENT CO. INC.	94.89	0.00	0.00	94.89
Vendor#	Vendor Name				Class	Pay Code					
W1300	GRAINGER ✓					M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9040956014 ✓		09/30/20	09/01/20	09/26/20		67.37	0.00	0.00	67.37 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						W1300	GRAINGER	67.37	0.00	0.00	67.37
Vendor#	Vendor Name				Class	Pay Code					
11552	HEALTHCARE FINANCIAL SERVICES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
100523624 ✓		09/30/20	10/01/20	10/01/20		230.53	0.00	0.00	230.53 ✓		
FINANCE CHARGE											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11552	HEALTHCARE FINANCIAL SERVICES	230.53	0.00	0.00	230.53
Vendor#	Vendor Name				Class	Pay Code					
H0031	HEB CREDIT RECEIVABLES DEPT308 ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
833034 ✓		09/30/20	08/01/20	09/29/20		93.49	0.00	0.00	93.49 ✓		
SUPPLIES											
599302 ✓		09/30/20	08/02/20	09/29/20		47.96	0.00	0.00	47.96 ✓		
SUPPLIES											
840973 ✓		09/30/20	08/04/20	09/29/20		60.25	0.00	0.00	60.25 ✓		
SUPPLIES											
848775 ✓		09/30/20	08/04/20	09/29/20		6.28	0.00	0.00	6.28 ✓		
SUPPLIES											
965918 ✓		09/30/20	08/04/20	09/29/20		11.52	0.00	0.00	11.52 ✓		
SUPPLIES											
446475 ✓		09/30/20	08/08/20	09/29/20		77.43	0.00	0.00	77.43 ✓		
SUPPLIES											
178588 ✓		09/30/20	08/10/20	09/29/20		11.15	0.00	0.00	11.15 ✓		
SUPPLIES											
272602		09/30/20	08/12/20	09/29/20		117.23	0.00	0.00	117.23 ✓		

491244	✓	SUPPLIES	09/30/20 08/14/20 09/29/20	95.06	0.00	0.00	95.06	✓
195709	✓	SUPPLIES	09/30/20 08/15/20 09/29/20	53.12	0.00	0.00	53.12	✓
743501	✓	SUPPLIES	09/30/20 08/16/20 09/29/20	12.96	0.00	0.00	12.96	✓
130126	✓	SUPPLIES	09/30/20 08/17/20 09/29/20	14.90	0.00	0.00	14.90	✓
190317	✓	SUPPLIES	09/30/20 08/20/20 09/29/20	23.72	0.00	0.00	23.72	✓
052063	✓	SUPPLIES	09/30/20 08/20/20 09/29/20	6.56	0.00	0.00	6.56	✓
749932	✓	SUPPLIES	09/30/20 08/21/20 09/29/20	71.37	0.00	0.00	71.37	✓
505470	✓	SUPPLIES	09/30/20 08/22/20 09/29/20	16.80	0.00	0.00	16.80	✓
976731	✓	SUPPLIES	09/30/20 08/24/20 09/29/20	39.76	0.00	0.00	39.76	✓
407981	✓	SUPPLIES	09/30/20 08/24/20 09/29/20	5.28	0.00	0.00	5.28	✓
406384	✓	SUPPLIES	09/30/20 08/24/20 09/29/20	2.64	0.00	0.00	2.64	✓
532077	✓	SUPPLIES	09/30/20 08/26/20 09/29/20	<del>25.12</del> 26.76	0.00	0.00	<del>26.76</del> 25.12	
424269	✓	SUPPLIES	09/30/20 08/28/20 09/29/20	33.46	0.00	0.00	33.46	✓
808295	✓	SUPPLIES	09/30/20 08/31/20 09/29/20	11.26	0.00	0.00	11.26	✓
172341	✓	SUPPLIES	09/30/20 09/01/20 09/29/20	<del>55.13</del> 55.95	0.00	0.00	<del>55.95</del> 55.13	
419836	✓	SUPPLIES	09/30/20 09/01/20 09/29/20	34.54	0.00	0.00	34.54	✓
433258	✓	SUPPLIES	09/30/20 09/01/20 09/29/20	12.76	0.00	0.00	12.76	✓
287621	✓	SUPPLIES	09/30/20 09/02/20 09/29/20	44.54	0.00	0.00	44.54	✓
740334	✓	SUPPLIES	09/30/20 09/04/20 09/29/20	84.25	0.00	0.00	84.25	✓
824938	✓	SUPPLIES	09/30/20 09/05/20 09/29/20	<del>25.72</del> 27.36	0.00	0.00	<del>27.36</del> 25.72	
777855	✓	SUPPLIES	09/30/20 09/07/20 09/29/20	<del>61.45</del> 63.10	0.00	0.00	<del>63.10</del> 61.45	
795683	✓	SUPPLIES	09/30/20 09/08/20 09/29/20	21.29	0.00	0.00	21.29	✓
842460	✓	SUPPLIES	09/30/20 09/11/20 09/29/20	34.52	0.00	0.00	34.52	✓
039518	✓	SUPPLIES	09/30/20 09/12/20 09/29/20	<del>41.74</del> 42.40	0.00	0.00	<del>42.40</del> 41.74	
431129	✓	SUPPLIES	09/30/20 09/12/20 09/29/20	<del>64.24</del> 66.29	0.00	0.00	<del>66.29</del> 64.24	



126546 ✓		09/30/20	09/13/20	09/29/20		24.11	0.00	0.00	24.11 ✓		
301936 ✓	SUPPLIES	09/30/20	09/14/20	09/29/20		55.84	0.00	0.00	55.84 ✓		
426132 ✓	SUPPLIES	09/30/20	09/19/20	09/29/20		105.11	-105.93	0.00	-105.93 105.11		
822991 ✓	SUPPLIES	09/30/20	09/20/20	09/29/20		69.86	71.92	0.00	71.92 69.86		
581556 ✓	SUPPLIES	09/30/20	09/20/20	09/29/20		33.52	35.17	0.00	35.17 33.52		
399285 ✓	SUPPLIES	09/30/20	09/22/20	09/29/20		24.55	0.00	0.00	24.55 ✓		
104918 ✓	SUPPLIES	09/30/20	09/23/20	09/29/20		8.52	0.00	0.00	8.52 ✓		
163574 ✓	SUPPLIES	09/30/20	09/24/20	09/29/20		9.84	0.00	0.00	9.84 ✓		
478731 ✓	SUPPLIES	09/30/20	09/26/20	09/29/20		100.21	102.46	0.00	102.46 100.21		
050442 ✓	SUPPLIES	09/30/20	09/27/20	09/29/20		31.23	0.00	0.00	31.23 ✓		
OC50634	SUPPLIES	09/30/20	09/30/20	09/30/20		4.40	0.00	0.00	4.40 ✓		
OC50633	SUPPLIES	09/30/20	09/30/20	09/30/20		14.94	0.00	0.00	14.94 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						H0031	HEB CREDIT RECEIVABLES DEPT308	1,816.10	0.00	0.00	1,816.10 1,799.63
Vendor#	Vendor Name	Class		Pay Code							
H1399	HILL-ROM COMPANY, INC ✓	M				1,799.63					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1343327 ✓	BIRTHING BED/PAD	09/29/20	09/18/20	10/18/20		18,355.14	0.00	0.00	18,355.14 ✓		
2579834 ✓	BED PARTS	09/30/20	07/31/20	08/30/20		1,646.07	0.00	0.00	1,646.07 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						H1399	HILL-ROM COMPANY, INC	20,001.21	0.00	0.00	20,001.21
Vendor#	Vendor Name	Class		Pay Code							
12596	INDEED, INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
50021685 ✓	JOB LISTING	09/30/20	09/30/20	09/30/20		1001.73	1,067.84	0.00	0.00 1,067.84 1001.73		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12596	INDEED, INC.	1001.73	1,067.84	0.00	0.00 1,067.84 1001.73
Vendor#	Vendor Name	Class		Pay Code							
11108	ITERSOURCE CORPORATION ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
INV378507 ✓	IT SERVICES	09/30/20	09/30/20	09/30/20		1,208.72	0.00	0.00	1,208.72 ✓		
711400 ✓	SUPPORT SERVICES	10/01/20	10/01/20	10/01/20		250.00	0.00	0.00	250.00 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11108	ITERSOURCE CORPORATION	1,458.72	0.00	0.00	1,458.72

Vendor#	Vendor Name	Class	Pay Code							
J0150	J & J HEALTH CARE SYSTEMS, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
926417919 ✓		09/29/20	09/15/20	10/15/20		486.68	0.00	0.00	486.68 ✓	
	SUPPLIES									
926455642 ✓		09/29/20	09/17/20	10/17/20		42.27	0.00	0.00	42.27 ✓	
	SUPPLIES									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	J0150	J & J HEALTH CARE SYSTEMS, INC ✓			528.95	0.00	0.00	528.95		
11203	MEDI-DOSE, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
0824592		09/30/20	09/28/20	09/28/20		72.30	0.00	0.00	72.30 ✓	
	SUPPLIES									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	11203	MEDI-DOSE, INC			72.30	0.00	0.00	72.30		
12588	MEDICAL TECHNOLOGY ASSOCIATES ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
INV190610 ✓		09/30/20	09/22/20	10/17/20		8,582.73	0.00	0.00	8,582.73 ✓	
	AIR DRYERS (Remove and install)									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	12588	MEDICAL TECHNOLOGY ASSOCIATES			8,582.73	0.00	0.00	8,582.73		
10613	MEDIMPACT HEALTHCARE SYS, INC. ✓	A/P								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
30203340 ✓		09/30/20	09/17/20	09/17/20		33.52	0.00	0.00	33.52 ✓	
30210259 ✓		09/30/20	09/30/20	09/30/20		19.64	0.00	0.00	19.64 ✓	
	INDIGENT									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	10613	MEDIMPACT HEALTHCARE SYS, INC.			53.16	0.00	0.00	53.16		
M2470	MEDLINE INDUSTRIES INC ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
1967005854 ✓		09/28/20	09/21/20	10/16/20		705.27	0.00	0.00	705.27 ✓	
	SUPPLIES									
1967241553 ✓		09/28/20	09/22/20	10/17/20		4,219.77	0.00	0.00	4,219.77 ✓	
	SUPPLIES									
1967241542 ✓		09/28/20	09/22/20	10/17/20		22.89	0.00	0.00	22.89 ✓	
	SUPPLIES									
1963938695 ✓		09/30/20	08/25/20	09/19/20		79.42	0.00	0.00	79.42 ✓	
	SUPPLIES									
1964038172 ✓		09/30/20	08/26/20	10/14/20		102.70	0.00	0.00	102.70 ✓	
	SUPPLIES									
1964038171 ✓		09/30/20	08/26/20	10/14/20		148.08	0.00	0.00	148.08 ✓	
	SUPPLIES									
1964038169 ✓		09/30/20	08/26/20	10/14/20		50.10	0.00	0.00	50.10 ✓	
	SUPPLIES									
1964270413 ✓		09/30/20	08/27/20	10/14/20		183.54	0.00	0.00	183.54	
	SUPPLIES									

1964268847 ✓	09/30/20 08/27/20 10/14/20	761.97	0.00	0.00	761.97 ✓
SUPPLIES					
1964367012 ✓	09/30/20 08/28/20 10/14/20	185.22	0.00	0.00	185.22 ✓
SUPPLIES					
1964367014 ✓	09/30/20 08/28/20 10/14/20	15.43	0.00	0.00	15.43 ✓
SUPPLIES					
1964480730 ✓	09/30/20 08/31/20 10/14/20	469.56	0.00	0.00	469.56 ✓
SUPPLIES					
1964480728 ✓	09/30/20 08/31/20 10/14/20	35.37	0.00	0.00	35.37 ✓
SUPPLIES					
1964480741 ✓	09/30/20 08/31/20 10/14/20	19.69	0.00	0.00	19.69 ✓
SUPPLIES					
1964480724 ✓	09/30/20 08/31/20 10/14/20	34.96	0.00	0.00	34.96 ✓
SUPPLIES					
1964480726 ✓	09/30/20 08/31/20 10/14/20	548.60	0.00	0.00	548.60 ✓
SUPPLIES					
1964480727 ✓	09/30/20 08/31/20 10/14/20	8.52	0.00	0.00	8.52 ✓
SUPPLIES					
1964743096 ✓	09/30/20 09/01/20 10/14/20	373.20	0.00	0.00	373.20 ✓
SUPPLIES					
1964743092 ✓	09/30/20 09/01/20 10/14/20	400.30	0.00	0.00	400.30 ✓
SUPPLIES					
1964716499 ✓	09/30/20 09/01/20 10/14/20	291.56	0.00	0.00	291.56 ✓
SUPPLIES					
1964743801 ✓	09/30/20 09/01/20 10/14/20	133.69	0.00	0.00	133.69 ✓
SUPPLIES					
1964743094 ✓	09/30/20 09/01/20 10/14/20	75.00	0.00	0.00	75.00 ✓
SUPPLIES					
1964743091 ✓	09/30/20 09/01/20 10/14/20	69.92	0.00	0.00	69.92 ✓
SUPPLIES					
1964743093 ✓	09/30/20 09/01/20 10/14/20	50.66	0.00	0.00	50.66 ✓
SUPPLIES					
1964743090 ✓	09/30/20 09/01/20 10/14/20	3.24	0.00	0.00	3.24 ✓
SUPPLIES					
1964743098 ✓	09/30/20 09/01/20 10/14/20	93.34	0.00	0.00	93.34 ✓
SUPPLIES					
1965205376 ✓	09/30/20 09/04/20 10/14/20	4.27	0.00	0.00	4.27 ✓
SUPPLIES					
1965331855 ✓	09/30/20 09/07/20 10/14/20	37.76	0.00	0.00	37.76 ✓
SUPPLIES					
1965331853 ✓	09/30/20 09/07/20 10/14/20	130.80	0.00	0.00	130.80 ✓
SUPPLIES					
1965331856 ✓	09/30/20 09/07/20 10/14/20	773.63	0.00	0.00	773.63 ✓
SUPPLIES					
1965723081 ✓	09/30/20 09/10/20 10/14/20	24.94	0.00	0.00	24.94 ✓
SUPPLIES					
1965971146 ✓	09/30/20 09/11/20 10/14/20	16.87	0.00	0.00	16.87 ✓
SUPPLIES					
1966325532 ✓	09/30/20 09/15/20 10/14/20	4.75	0.00	0.00	4.75 ✓
SUPPLIES					
1966325515 ✓	09/30/20 09/15/20 10/14/20	19.91	0.00	0.00	19.91 ✓

1966325506	SUPPLIES	09/30/20 09/15/20 10/14/20	42.64	0.00	0.00	42.64	✓
1966325538	SUPPLIES	09/30/20 09/15/20 10/14/20	24.94	0.00	0.00	24.94	✓
1966325500	SUPPLIES	09/30/20 09/15/20 10/14/20	88.99	0.00	0.00	88.99	✓
1966325536	SUPPLIES	09/30/20 09/15/20 10/14/20	64.83	0.00	0.00	64.83	✓
1966325502	SUPPLIES	09/30/20 09/15/20 10/14/20	23.32	0.00	0.00	23.32	✓
1966325534	SUPPLIES	09/30/20 09/15/20 10/14/20	12.98	0.00	0.00	12.98	✓
1966325535	SUPPLIES	09/30/20 09/15/20 10/14/20	9.52	0.00	0.00	9.52	✓
1966325539	SUPPLIES	09/30/20 09/15/20 10/14/20	17.77	0.00	0.00	17.77	✓
1966324699	SUPPLIES	09/30/20 09/15/20 10/14/20	44.29	0.00	0.00	44.29	✓
1966516825	SUPPLIES	09/30/20 09/16/20 10/14/20	15.26	0.00	0.00	15.26	✓
1966516824	SUPPLIES	09/30/20 09/16/20 10/14/20	37.98	0.00	0.00	37.98	✓
1966709798	SUPPLIES	09/30/20 09/17/20 10/14/20	27.95	0.00	0.00	27.95	✓
1966709797	SUPPLIES	09/30/20 09/17/20 10/14/20	4.75	0.00	0.00	4.75	✓
1967043306	SUPPLIES	09/30/20 09/21/20 10/16/20	417.48	0.00	0.00	417.48	✓
1967005867	SUPPLIES	09/30/20 09/21/20 10/16/20	30.86	0.00	0.00	30.86	✓
1967005865	Tubing	09/30/20 09/21/20 10/16/20	70.10	0.00	0.00	70.10	✓
1967005863	SUPPLIES	09/30/20 09/21/20 10/16/20	46.45	0.00	0.00	46.45	✓
1967005852	SUPPLIES	09/30/20 09/21/20 10/16/20	42.59	0.00	0.00	42.59	✓
1967005856	SUPPLIES	09/30/20 09/21/20 10/16/20	226.20	0.00	0.00	226.20	✓
1967005868	SUPPLIES	09/30/20 09/21/20 10/16/20	8.86	0.00	0.00	8.86	✓
1967043304	SUPPLIES	09/30/20 09/21/20 10/16/20	561.00	0.00	0.00	561.00	✓
1967005864	SUPPLIES	09/30/20 09/21/20 10/16/20	40.08	0.00	0.00	40.08	✓
1967241540	SUPPLIES	09/30/20 09/22/20 10/17/20	16.87	0.00	0.00	16.87	✓
1967241539	SUPPLIES	09/30/20 09/22/20 10/17/20	16.87	0.00	0.00	16.87	✓
1967241558	SUPPLIES	09/30/20 09/22/20 10/17/20	33.72	0.00	0.00	33.72	✓

1967241546	✓	09/30/20	09/22/20	10/17/20		10.76	0.00	0.00	10.76	✓	
		SUPPLIES									
1967241543	✓	09/30/20	09/22/20	10/17/20		30.52	0.00	0.00	30.52	✓	
		SUPPLIES									
1967241544	✓	09/30/20	09/22/20	10/17/20		61.52	0.00	0.00	61.52	✓	
		SUPPLIES									
1967215378	✓	09/30/20	09/22/20	10/17/20		114.31	0.00	0.00	114.31	✓	
		SUPPLIES									
1967241545	✓	09/30/20	09/22/20	10/17/20		30.52	0.00	0.00	30.52	✓	
		SUPPLIES									
1967241559	✓	09/30/20	09/22/20	10/17/20		170.29	0.00	0.00	170.29	✓	
		SUPPLIES									
1967241557	✓	09/30/20	09/22/20	10/17/20		181.88	0.00	0.00	181.88	✓	
		SUPPLIES									
1967241538	✓	09/30/20	09/22/20	10/17/20		14.19	0.00	0.00	14.19	✓	
		<i>mbo-glucerna</i>									
1702615660	✓	09/30/20	09/25/20	10/20/20		271.76	0.00	0.00	271.76	✓	
		INTEREST									
1968143318	✓	09/30/20	09/29/20	10/14/20		96.76	0.00	0.00	96.76	✓	
		SUPPLIES									
1968143325	✓	09/30/20	09/29/20	10/14/20		4,714.39	0.00	0.00	4,714.39	✓	
		SUPPLIES									
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						M2470	MEDLINE INDUSTRIES INC	17,718.13	0.00	0.00	17,718.13
Vendor#	Vendor Name				Class	Pay Code					
M2685	MICROTEK MEDICAL INC				M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
54079552	✓	09/29/20	08/24/20	09/24/20		150.93	0.00	0.00	150.93	✓	
		SUPPLIES									
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						M2685	MICROTEK MEDICAL INC	150.93	0.00	0.00	150.93
Vendor#	Vendor Name				Class	Pay Code					
11976	MID-COAST ELECTRIC SUPPLY, INC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1988741	00	09/30/20	07/12/20	08/11/20		133.14	0.00	0.00	133.14	✓	
		SUPPLIES									
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11976	MID-COAST ELECTRIC SUPPLY, INC	133.14	0.00	0.00	133.14
Vendor#	Vendor Name				Class	Pay Code					
10536	MORRIS & DICKSON CO, LLC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
7380618	✓	09/29/20	09/29/20	10/09/20		16.69	0.00	0.00	16.69	✓	
		INVENTORY									
7352889	✓	09/30/20	09/21/20	10/01/20		12.30	0.00	0.00	12.30	✓	
		INVENTORY									
7352890	✓	09/30/20	09/21/20	10/01/20		1,003.71	0.00	0.00	1,003.71	✓	
		INVENTORY									
7352613	✓	09/30/20	09/21/20	10/01/20		587.69	0.00	0.00	587.69	✓	
		INVENTORY									
7352891	✓	09/30/20	09/21/20	10/01/20		40.90	0.00	0.00	40.90	✓	
		INVENTORY									

7358031 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	23.43	0.00	0.00	23.43 ✓
7358030 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	426.17	0.00	0.00	426.17 ✓
7355255 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	980.92	0.00	0.00	980.92 ✓
7355254 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	540.40	0.00	0.00	540.40 ✓
7355253 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	27.25	0.00	0.00	27.25 ✓
7355256 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	424.41	0.00	0.00	424.41 ✓
7358378 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	8.49	0.00	0.00	8.49 ✓
7358032 ✓	INVENTORY	09/30/20 09/22/20 10/02/20	103.34	0.00	0.00	103.34 ✓
7362173 ✓	INVENTORY	09/30/20 09/23/20 10/03/20	2,024.12	0.00	0.00	2,024.12 ✓
7363370 ✓	INVENTORY	09/30/20 09/23/20 10/03/20	192.92	0.00	0.00	192.92 ✓
7380 ✓	CREDIT MEMO	09/30/20 09/23/20 10/03/20	-5.00	0.00	0.00	-5.00 ✓
7363369 ✓	INVENTORY	09/30/20 09/23/20 10/03/20	20.23	0.00	0.00	20.23 ✓
7465 ✓	CREDIT MEMO	09/30/20 09/23/20 10/03/20	-10.00	0.00	0.00	-10.00 ✓
7369052 ✓	INVENTORY	09/30/20 09/26/20 10/06/20	513.71	0.00	0.00	513.71 ✓
7369051 ✓	INVENTORY	09/30/20 09/26/20 10/06/20	455.57	0.00	0.00	455.57 ✓
7369053 ✓	INVENTORY	09/30/20 09/26/20 10/06/20	20.27	0.00	0.00	20.27 ✓
7372224 ✓	INVENTORY	09/30/20 09/27/20 10/07/20	83.41	0.00	0.00	83.41 ✓
7373746 ✓	INVENTORY	09/30/20 09/27/20 10/07/20	106.45	0.00	0.00	106.45 ✓
8149 ✓	CREDIT MEMO	09/30/20 09/27/20 10/07/20	-4.40	0.00	0.00	-4.40 ✓
7373745 ✓	INVENTORY	09/30/20 09/27/20 10/07/20	36.67	0.00	0.00	36.67 ✓
SC8416 ✓	FREIGHT	09/30/20 09/27/20 10/07/20	13.06	0.00	0.00	13.06 ✓
7373747 ✓	INVENTORY	09/30/20 09/27/20 10/07/20	210.70	0.00	0.00	210.70 ✓
7372773 ✓	INVENTORY	09/30/20 09/27/20 10/07/20	231.87	0.00	0.00	231.87 ✓
7378875 ✓	INVENTORY	09/30/20 09/28/20 10/08/20	1,003.36	0.00	0.00	1,003.36 ✓
7378874 ✓	INVENTORY	09/30/20 09/28/20 10/08/20	3,554.81	0.00	0.00	3,554.81 ✓
7378876 ✓	INVENTORY	09/30/20 09/28/20 10/08/20	406.43	0.00	0.00	406.43 ✓

	INVENTORY							
7382378	✓	09/30/20 09/29/20 10/09/20	1,499.66	0.00	0.00	1,499.66	✓	
	INVENTORY							
7383125	✓	09/30/20 09/29/20 10/09/20	1,471.87	0.00	0.00	1,471.87	✓	
	INVENTORY							
7383361	✓	09/30/20 09/29/20 10/09/20	104.41	0.00	0.00	104.41	✓	
	INVENTORY							
7383124	✓	09/30/20 09/29/20 10/09/20	17,153.86	0.00	0.00	17,153.86	✓	
	INVENTORY							
7380616	✓	09/30/20 09/29/20 10/09/20	64.17	0.00	0.00	64.17	✓	
	INVENTORY							
8686	✓	09/30/20 09/29/20 10/09/20	-5.00	0.00	0.00	-5.00	✓	
	CREDIT MEMO							
7380617	✓	09/30/20 09/29/20 10/09/20	3,942.95	0.00	0.00	3,942.95	✓	
	INVENTORY							
8777	✓	09/30/20 09/29/20 10/09/20	-5.00	0.00	0.00	-5.00	✓	
	CREDIT MEMO							
7383123	✓	09/30/20 09/29/20 10/09/20	524.19	0.00	0.00	524.19	✓	
	INVENTORY							
7383363	✓	09/30/20 09/29/20 10/09/20	299.15	0.00	0.00	299.15	✓	
	INVENTORY							
7383362	✓	09/30/20 09/29/20 10/09/20	303.79	0.00	0.00	303.79	✓	
	INVENTORY							
7381751	✓	09/30/20 09/29/20 10/09/20	17.85	0.00	0.00	17.85	✓	
	INVENTORY							
7382377	✓	09/30/20 09/29/20 10/09/20	23.62	0.00	0.00	23.62	✓	
	INVENTORY							
7382379	✓	09/30/20 09/29/20 10/09/20	1,011.15	0.00	0.00	1,011.15	✓	
	INVENTORY							
7385462	✓	09/30/20 09/30/20 10/10/20	115.94	0.00	0.00	115.94	✓	
	INVENTORY							
7385461	✓	09/30/20 09/30/20 10/10/20	482.50	0.00	0.00	482.50	✓	
	INVENTORY							
7385463	✓	09/30/20 09/30/20 10/10/20	189.15	0.00	0.00	189.15	✓	
	INVENTORY							
7387854	✓	09/30/20 09/30/20 10/10/20	347.32	0.00	0.00	347.32	✓	
	INVENTORY							
7387853	✓	09/30/20 09/30/20 10/10/20	93.94	0.00	0.00	93.94	✓	
	INVENTORY							
7385464	✓	09/30/20 09/30/20 10/10/20	29.14	0.00	0.00	29.14	✓	
	INVENTORY							
7394371	✓	10/01/20 10/03/20 10/13/20	294.16	0.00	0.00	294.16	✓	
	INVENTORY							
7394372	✓	10/05/20 10/03/20 10/13/20	1,117.81	0.00	0.00	1,117.81	✓	
	INVENTORY							
7394373	✓	10/05/20 10/03/20 10/13/20	367.54	0.00	0.00	367.54	✓	
	INVENTORY							
7395761	✓	10/05/20 10/04/20 10/14/20	86.27	0.00	0.00	86.27	✓	
	INVENTORY							
7397939	✓	10/05/20 10/04/20 10/14/20	185.00	0.00	0.00	185.00	✓	
	INVENTORY							

7397938	✓	10/05/20	10/04/20	10/14/20		2,142.75	0.00	0.00	2,142.75	✓
		INVENTORY								
7397937	✓	10/05/20	10/04/20	10/14/20		3.41	0.00	0.00	3.41	✓
		INVENTORY								
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
		10536	MORRIS & DICKSON CO, LLC			44,911.48	0.00	0.00	44,911.48	
Vendor#	Vendor Name			Class	Pay Code					
14124	MSH HEALTH SERVICES LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
MMC0001	✓	09/24/20	08/24/20	08/24/20		2,730.17	0.00	0.00	2,730.17	✓
		MED SURG TRAVEL NURSING								
MMC0002	✓	09/24/20	08/31/20	08/31/20		3,523.15	0.00	0.00	3,523.15	✓
		MED SURG TRAVEL NURSING								
MMC0004	✓	09/30/20	09/07/20	09/07/20		6,721.25	0.00	0.00	6,721.25	✓
		MED SURG TRAVEL NURSING								
MMC0005	✓	09/30/20	09/14/20	09/14/20		3,012.50	0.00	0.00	3,012.50	✓
		MED SURG TRAVEL NURSING								
MMC0008	✓	09/30/20	09/20/20	09/20/20		10,679.38	0.00	0.00	10,679.38	✓
		MED SURG TRAVEL NURSING								
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
		14124	MSH HEALTH SERVICES LLC			26,666.45	0.00	0.00	26,666.45	
Vendor#	Vendor Name			Class	Pay Code					
M2659	MXR IMAGING, INC			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
8800809475	✓	09/29/20	09/16/20	10/16/20		340.42	0.00	0.00	340.42	✓
		SUPPLIES								
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
		M2659	MXR IMAGING, INC			340.42	0.00	0.00	340.42	
Vendor#	Vendor Name			Class	Pay Code					
12388	NATIONAL FARM LIFE INSURANCE									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
3513046	✓	09/30/20	09/13/20	09/13/20		3,505.88	0.00	0.00	3,505.88	✓
		INSURANCE								
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
		12388	NATIONAL FARM LIFE INSURANCE			3,505.88	0.00	0.00	3,505.88	
Vendor#	Vendor Name			Class	Pay Code					
O1500	OLYMPUS AMERICA INC			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
31567479	✓	09/29/20	09/22/20	10/17/20		191.25	0.00	0.00	191.25	✓
		SUPPLIES								
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
		O1500	OLYMPUS AMERICA INC			191.25	0.00	0.00	191.25	
Vendor#	Vendor Name			Class	Pay Code					
O1416	ORTHO CLINICAL DIAGNOSTICS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
1852067392	✓	09/29/20	09/20/20	10/20/20		1,250.78	0.00	0.00	1,250.78	✓
		SUPPLIES								
1852062699	✓	09/30/20	09/16/20	10/16/20		759.03	0.00	0.00	759.03	✓
		SUPPLIES								
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
		O1416	ORTHO CLINICAL DIAGNOSTICS			2,009.81	0.00	0.00	2,009.81	



Vendor#	Vendor Name	Class	Pay Code								
10152	PARTSSOURCE, LLC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
04016145	SUPPLIES	09/29/20	09/14/20	10/14/20		68.05	0.00	0.00	68.05		
04020969	SUPPLIES	09/29/20	09/17/20	10/17/20		241.76	0.00	0.00	241.76		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10152	PARTSSOURCE, LLC	309.81	0.00	0.00	309.81
12544	PATRICK OCHOA										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
100121	HOSPITAL LAWN	10/05/20	10/01/20	10/01/20		520.00	0.00	0.00	520.00		
100121A	LAWN	10/05/20	10/01/20	10/01/20		380.00	0.00	0.00	380.00		
100121B	REHAB LAWN	10/05/20	10/01/20	10/01/20		200.00	0.00	0.00	200.00		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12544	PATRICK OCHOA	1,100.00	0.00	0.00	1,100.00
P1800	PITNEY BOWES INC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1018948688	SUPPLIES	09/30/20	09/09/20	10/09/20		253.92	0.00	0.00	253.92		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						P1800	PITNEY BOWES INC	253.92	0.00	0.00	253.92
12708	POC ELECTRIC, LLC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
3400	INSTALL 2 NEW CIRCUITS	10/01/20	10/01/20	10/01/20		800.00	0.00	0.00	800.00		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12708	POC ELECTRIC, LLC	800.00	0.00	0.00	800.00
P1725	PREMIER SLEEP DISORDERS CENTER										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
109		09/30/20	09/30/20	09/30/20		6,800.00	0.00	0.00	6,800.00		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						P1725	PREMIER SLEEP DISORDERS CENTER	6,800.00	0.00	0.00	6,800.00
13460	RELIANT, DEPT 0954										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1110344051566	ENERGY BILL 17121243-4	09/30/20	09/20/20	10/20/20		25,801.36	0.00	0.00	25,801.36		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						13460	RELIANT, DEPT 0954	25,801.36	0.00	0.00	25,801.36
13940	RN NETWORK										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		

3996215RI ✓		09/23/20	09/20/20	10/19/20		1,862.00	0.00	0.00	1,862.00 ✓
	STAFFING								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	13940 RN NETWORK					1,862.00	0.00	0.00	1,862.00
Vendor#	Vendor Name				Class	Pay Code			
S0900	SAM'S CLUB DIRECT				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
000090		09/30/20	08/24/20	10/08/20		91.84	0.00	0.00	91.84 ✓
	SUPPLIES								
007457		09/30/20	08/26/20	10/08/20		69.32	0.00	0.00	69.32 ✓
	SUPPLIES								
002160		09/30/20	08/26/20	10/08/20		14.88	0.00	0.00	14.88 ✓
	SUPPLIES								
0191559CM		09/30/20	08/30/20	08/30/20		-5.00	0.00	0.00	-5.00 ✓
	CREDIT								
000724		09/30/20	08/30/20	10/08/20		79.54	0.00	0.00	79.54 ✓
	SUPPLIES								
002376		09/30/20	09/09/20	10/08/20		89.70	0.00	0.00	89.70 ✓
	SUPPLIES								
003127		09/30/20	09/12/20	10/08/20		75.90	0.00	0.00	75.90 ✓
	SUPPLIES								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	S0900 SAM'S CLUB DIRECT					416.18	0.00	0.00	416.18
Vendor#	Vendor Name				Class	Pay Code			
S1001	SANOFI PASTEUR INC				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
916812639		09/30/20	09/30/20	09/30/20		-1,265.10	0.00	0.00	-1,265.10 ✓
	CREDIT MEMO								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	S1001 SANOFI PASTEUR INC					-1,265.10	0.00	0.00	-1,265.10
Vendor#	Vendor Name				Class	Pay Code			
10936	SIEMENS FINANCIAL SERVICES ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
116108773 ✓		09/29/20	09/16/20	10/16/20		2,193.83	0.00	0.00	2,193.83 ✓
	MAINT CONTRACT								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	10936 SIEMENS FINANCIAL SERVICES					2,193.83	0.00	0.00	2,193.83
Vendor#	Vendor Name				Class	Pay Code			
10699	SIGN AD, LTD. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
266117 ✓		09/30/20	09/16/20	09/26/20		400.00	0.00	0.00	400.00 ✓
	AD								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	10699 SIGN AD, LTD.					400.00	0.00	0.00	400.00
Vendor#	Vendor Name				Class	Pay Code			
C1010	SPARKLIGHT				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
100121		10/05/20	10/01/20	10/01/20		1,685.67	0.00	0.00	1,685.67 ✓
	PHONE								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
	C1010 SPARKLIGHT					1,685.67	0.00	0.00	1,685.67

Vendor#	Vendor Name		Class	Pay Code						
14100	STAFFING FIRST ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	210989 ✓		09/30/20	09/29/20	09/29/20		4,625.00	0.00	0.00	4,625.00 ✓
	LABOR DEL STAFFING									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		14100	STAFFING FIRST				4,625.00	0.00	0.00	4,625.00
10735	STRYKER SUSTAINABILITY ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	4269213 ✓		09/29/20	09/16/20	10/16/20		181.57	0.00	0.00	181.57 ✓
	SUPPLIES									
	4269777 ✓		09/29/20	09/17/20	10/17/20		181.57	0.00	0.00	181.57 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10735	STRYKER SUSTAINABILITY				363.14	0.00	0.00	363.14
12476	SUN LIFE FINANCIAL ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	092421		09/30/20	09/24/20	10/10/20		7,553.68	0.00	0.00	7,553.68 ✓
	INSURNACE									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		12476	SUN LIFE FINANCIAL				7,553.68	0.00	0.00	7,553.68
T2539	T-SYSTEM, INC. ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	49151 ✓		09/30/20	09/30/20	09/30/20		5,699.00	0.00	0.00	5,699.00 ✓
	W									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		T2539	T-SYSTEM, INC				5,699.00	0.00	0.00	5,699.00
14132	TFORCE FREIGHT ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	32263886 ✓		09/24/20	09/24/20	10/09/20		239.54	0.00	0.00	239.54 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		14132	TFORCE FREIGHT				239.54	0.00	0.00	239.54
14128	THE STAYWELL COMPANY LLC ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8261746 ✓		09/24/20	11/10/20	11/10/20		237.55	0.00	0.00	237.55 ✓
	SUPPLIES									
	90104703 ✓		09/24/20	08/17/20	09/16/20		184.60	0.00	0.00	184.60 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		14128	THE STAYWELL COMPANY LLC				422.15	0.00	0.00	422.15
12168	TRANSCAT, INC. ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	3088281 ✓		09/30/20	09/23/20	09/23/20		481.00	0.00	0.00	481.00 ✓
	CALIBRATION									

11803709 ✓		09/30/20	09/24/20	09/24/20		1,040.00	0.00	0.00	1,040.00 ✓
ONSITE SERVICE									
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
12168 TRANSCAT, INC.						1,521.00	0.00	0.00	1,521.00
Vendor#	Vendor Name			Class	Pay Code				
T3130	TRI-ANIM HEALTH SERVICES INC ✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
64728368 ✓	SUPPLIES	09/30/20	09/17/20	10/12/20		132.67	0.00	0.00	132.67 ✓
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
T3130 TRI-ANIM HEALTH SERVICES INC						132.67	0.00	0.00	132.67
Vendor#	Vendor Name			Class	Pay Code				
U1054	UNIFIRST HOLDINGS ✓			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8400377568 ✓	LAUNDRY	09/29/20	09/23/20	10/18/20		99.59	0.00	0.00	99.59 ✓
8400376814 ✓	LAUNDRY	09/30/20	09/16/20	10/11/20		169.39	0.00	0.00	169.39 ✓
8400376815 ✓	LAUNDRY	09/30/20	09/16/20	10/11/20		194.90	0.00	0.00	194.90 ✓
8400376832 ✓	LAUNDRY	09/30/20	09/16/20	10/11/20		79.43	0.00	0.00	79.43 ✓
8400376812 ✓	LAUNDRY	09/30/20	09/16/20	10/11/20		121.55	0.00	0.00	121.55 ✓
8400376856 ✓	LAUNDRY	09/30/20	09/16/20	10/11/20		140.55	0.00	0.00	140.55 ✓
8400377077 ✓	LAUNDRY	09/30/20	09/20/20	10/15/20		47.74	0.00	0.00	47.74 ✓
8400377099 ✓	LAUNDRY	09/30/20	09/20/20	10/15/20		2,257.92	0.00	0.00	2,257.92 ✓
8400377076 ✓	LAUNDRY	09/30/20	09/20/20	10/15/20		45.15	0.00	0.00	45.15 ✓
8400377546 ✓	LAUNDRY	09/30/20	09/23/20	10/18/20		79.43	0.00	0.00	79.43 ✓
8400377529 ✓	LAUNDRY	09/30/20	09/23/20	10/18/20		175.36	0.00	0.00	175.36 ✓
8400377525 ✓	LAUNDRY	09/30/20	09/23/20	10/18/20		54.25	0.00	0.00	54.25 ✓
8400377530 ✓	LAUNDRY	09/30/20	09/23/20	10/18/20		194.90	0.00	0.00	194.90 ✓
8400377552 ✓	LAUNDRY	09/30/20	09/23/20	10/18/20		2,039.97	0.00	0.00	2,039.97 ✓
8400377527 ✓	LAUNDRY	09/30/20	09/23/20	10/18/20		137.13	0.00	0.00	137.13 ✓
8400377528 ✓	LAUNDRY	09/30/20	09/23/20	10/18/20		216.34	0.00	0.00	216.34 ✓
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
U1054 UNIFIRST HOLDINGS						6,053.60	0.00	0.00	6,053.60
Vendor#	Vendor Name			Class	Pay Code				
V1058	VICTORIA ANESTHESIOLOGY ✓			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net

093021		09/30/20	09/30/20	09/30/20			37,379.59	0.00	0.00	37,379.59	✓	
ANESTHESIOLOGY SERVICES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							V1058	VICTORIA ANESTHESIOLOGY	37,379.59	0.00	0.00	37,379.59
Vendor#	Vendor Name						Class	Pay Code				
V1471	VICTORIA RADIOWORKS, LTD						W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
21090209	✓ AD	09/30/20	09/30/20	09/30/20			160.00	0.00	0.00	160.00	✓	
21090206	✓ AD	09/30/20	09/30/20	09/30/20			280.00	0.00	0.00	280.00	✓	
21090207	✓ AD	09/30/20	09/30/20	09/30/20			280.00	0.00	0.00	280.00	✓	
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							V1471	VICTORIA RADIOWORKS, LTD	720.00	0.00	0.00	720.00
Vendor#	Vendor Name						Class	Pay Code				
12000	VYAIRE MEDICAL, INC											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
9101104989	✓	09/29/20	09/23/20	10/18/20			229.46	0.00	0.00	229.46	✓	
SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							12000	VYAIRE MEDICAL, INC	229.46	0.00	0.00	229.46
Vendor#	Vendor Name						Class	Pay Code				
12208	WAGeworks											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
INV3047692	✓	09/16/20	09/15/20	10/15/20			580.25	0.00	0.00	580.25	✓	
ADMIN COMPLIANCE FEE												
INV2784544	✓	09/30/20	09/30/20				580.25	0.00	0.00	580.25	✓	
ADMIN COMPLIANCE FEE												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							12208	WAGeworks	1,160.50	0.00	0.00	1,160.50
Vendor#	Vendor Name						Class	Pay Code				
W1005	WALMART COMMUNITY						W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
CM091921		09/30/20	07/21/20				26.17	0.00	0.00	26.17	✓	
SUPPLIES												
CM072721		09/30/20	07/27/20				36.74	0.00	0.00	36.74	✓	
SUPPLIES												
CM080521		09/30/20	08/05/20				-6.27	0.00	0.00	-6.27	✓	
SUPPLIES												
CM080521B		09/30/20	08/05/20				7.94	0.00	0.00	7.94	✓	
SUPPLIES												
CM080521A		09/30/20	08/05/20				14.47	0.00	0.00	14.47	✓	
SUPPLIES												
CM081821		09/30/20	08/05/20	08/05/20			69.88	0.00	0.00	69.88	✓	
SUPPLIES												
CM080621		09/30/20	08/06/20	09/13/20			9.74	0.00	0.00	9.74	✓	
SUPPLIES												
CM081821B		09/30/20	08/18/20	08/18/20			38.32	0.00	0.00	38.32	✓	
SUPPLIES												
CM081821A		09/30/20	08/18/20	08/18/20			162.40	0.00	0.00	162.40	✓	

Vendor	Item	Description	Gross	Discount	No-Pay	Net
CM081921	SUPPLIES	09/30/20 08/19/20 09/13/20	4.19	0.00	0.00	4.19 ✓
CM072421	SUPPLIES	09/30/20 08/19/20 09/19/20	-8.78	0.00	0.00	-8.78 ✓
CM082621	CREDIT	09/30/20 08/26/20 08/26/20	22.68	0.00	0.00	22.68 ✓
090921	SUPPLIES	09/30/20 09/09/20 09/09/20	162.40	0.00	0.00	162.40 ✓
CM090921	SUPPLIES	09/30/20 09/09/20 09/09/20	10.98	0.00	0.00	10.98 ✓
091921	SUPPLIES	09/30/20 09/09/20 10/14/20	29.92	0.00	0.00	29.92 ✓
091221	SUPPLIES	09/30/20 09/12/20 09/12/20	5.43	0.00	0.00	5.43 ✓
CM090921C	FINANCE CHARGE	09/30/20 09/14/20 10/14/20	64.96	0.00	0.00	64.96 ✓
CM0914A	SUPPLIES	09/30/20 09/14/20 10/14/20	97.44	0.00	0.00	97.44 ✓
091921B	SUPPLIES	09/30/20 09/19/20	15.11	0.00	0.00	15.11 ✓
CM0723A	SUPPLIES	09/30/20 09/19/20	-3.47	0.00	0.00	-3.47 ✓
	CREDIT					

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	W1005	WALMART COMMUNITY	760.25	0.00	0.00	760.25

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	305,775.26	0.00	0.00	305,775.26

APPROVED ON  
 OCT 06 2021  
 COUNTY AUDITOR  
 GALVESTON COUNTY, TEXAS  
 CK # 192156-192240

pg 7 correction { <1816.10>  
 + 1799.63  
 <1,047.84>  
 + 1001.73  
 pg 16 correction { + 1265.10  
\$ 306,957.78

**TOLL FREE PHONE NUMBER: 1-800-555-3453**

(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

<input type="checkbox"/>	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	####	ENTER:	<input type="text"/>
<input type="checkbox"/>	"ENTER YOUR 4-DIGIT PIN"	###		<input type="text"/>
<input type="checkbox"/>	"MAKE A PAYMENT, PRESS 1"			<input type="text" value="1"/>
<input type="checkbox"/>	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★		<input type="text" value="941 #"/>
<input type="checkbox"/>	"IF FEDERAL TAX DEPOSIT ENTER 1"			<input type="text" value="1"/>
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING YEAR"	★		<input type="text" value="21"/>
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★		<input type="text" value="09"/>
	1ST QTR - 03 (MARCH) - Jan, Feb, Mar			
	2ND QTR - 06 (JUNE) - Apr, May, June			
	3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept			
	4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec			
<input type="checkbox"/>	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★		<input type="text" value="\$ 96,045.10 #"/>
	"1 TO CONFIRM"			<input type="text" value="1"/>
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0		<input type="text" value="\$ 49,355.86 #"/>
	"ENTER W/CENTS AMOUNT OF MEDICARE"			<input type="text" value="\$ 11,797.36 #"/>
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"			<input type="text" value="\$ 34,891.88 #"/>
		CHECK		<input type="text" value="\$"/>
<input type="checkbox"/>	"6-DIGIT SETTLEMENT DATE"	★		<input type="text"/>
	"1 TO CONFIRM"			<input type="text" value="1"/>
<input type="checkbox"/>	ACKNOWLEDGEMENT NUMBER			<input type="text"/>

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

Run Date: 10/08/21  
Time: 14:22

MEMORIAL MEDICAL CENTER  
Payroll Register ( Bi-Weekly )  
Pay Period 09/24/21 - 10/07/21 Run# 1

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P2REG

Final Summary

*-- Pay Code Summary				*-- Deductions Summary			
PayCd	Description	Hrs	OT SH WE HO CB	Gross	Code	Amount	
1	REGULAR PAY-S1	9777.75	N N N	204449.59	A/R	490.00	A/R2 25.00 A/R3
1	REGULAR PAY-S1	1701.00	N N N	75927.25	ADVANC	AWARDS	BOOTS
1	REGULAR PAY-S1	386.75	Y N N	10298.24	CAFE H	CAFE-1	CAFE-2
2	REGULAR PAY-S2	2158.75	N N N	52215.14	CAFE-3	CAFE-4	CAFE-5
2	REGULAR PAY-S2	134.75	Y N N	4169.94	CAFE-C	CAFE-D	1638.63 CAFE-F
3	REGULAR PAY-S3	1213.75	N N N	34320.29	CAFE-H	20050.05 CAFE-I	CAFE-L
3	REGULAR PAY-S3	63.50	Y N N	2005.61	CAFE-P	CANCER	CHILD 609.70
C	CALL PAY	2405.75	N 1 N N	4811.50	CLINIC	95.00 COMBIN	400.80 CREDUN
D	DOUBLE TIME	30.25	N 1 N N	2210.01	DD ADV	DENTAL	DEP-LF
D	DOUBLE TIME	27.25	N 2 N N	2107.16	DIS-LF	EAT	EATCSH 900.00
D	DOUBLE TIME	8.25	N 3 N N	614.63	FEDTAX	34891.88 FICA-M	5898.68 FICA-C 24677.93
D	DOUBLE TIME	1.25	Y 1 N N	132.83	FIRSTC	FLEX S	3327.29 FLX FE
D	DOUBLE TIME	12.75	Y 2 N N	1525.82	FORT D	FUTA	GIFT S 312.50
D	DOUBLE TIME	16.25	Y 3 N N	2214.23	GRANT	GRP-IN	GTL
E	EXTRA WAGES		N N N N	-591.11	HOSP-I	ID TFI	LEAF
E	EXTRA WAGES		N 1 N N N	989.00	LEGAL	270.80 MASA	827.50 MEALS 255.46
F	FUNERAL LEAVE	48.00	N 1 N N	980.56	METVIS	879.93 MISC	MISC/
I	INSERVICE	4.25	N 1 N N	112.25	MMCSHR	NATFML	1753.01 OTHER
K	EXTENDED-ILLNESS-BANK	250.00	N 1 N N	5249.81	PHI	PHI***	PR FIN
P	PAID-TIME-OFF	268.37	N N N N	3949.15	RELAY	REPAY	SMS
P	PAID-TIME-OFF	941.00	N 1 N N	23219.71	SCRUBS	SIGNON	ST-TX
V	DO NOT USE	24.00	N 1 N N	250.80	STONDF	790.86 STONE	STONE2
X	CALL PAY 2	160.00	N 1 N N	320.00	STUDEN	SUNACC	764.17 SUNILL 699.80
Z	CALL PAY 3	120.00	N 1 N N	360.00	SUNIND	518.72 SUNLIF	732.70 SUNSTD 1182.57
v	COVID-PPCRA	184.00	N 1 N N	4390.96	SUNVIS	SURCHG	450.00 TSA-1
					TSA-2	TSA-C	TSA-P
					TSA-R	30503.07 TUITION	UNIPCR -105.29
					UW/HOS		

----- Grand Totals: 19937.62 ----- | Gross: 436131.37 | Deductions: 132830.75 | Net: 303300.61 |  
 Checks Count:- FT 194 PT 11 Other 35 Female 212 Male 27 Credit | OverAmt 9 ZeroNet Term Total: 239 |

Pay date: 10/11/21



941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

PAY PERIOD: BEGIN  
 PAY PERIOD: END  
 PAY DATE:

9/24/2021  
 10/7/2021  
 10/15/2021

\*\*ENTER VOID CKS AS NEGATIVE NUMBERS\*\*

		VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
GROSS PAY:	\$ 436,131.37			\$ -		\$ 436,131.37
DEDUCTIONS:						
A/R	\$ 515.00					\$ 515.00
ADVANC						\$ -
BOOTS						\$ -
SUNLIFE CRITICAL ILLNESS	\$ 699.80					\$ 699.80
SUNLIFE ACCIDENT	\$ 764.17					\$ 764.17
SUNLIFE VISION	\$ -					\$ -
SUNLIFE SHORT TERM DIS	\$ 1,182.57					\$ 1,182.57
METLIFE VISION	\$ 879.93					\$ 879.93
CAFÉ-D	\$ 1,638.63					\$ 1,638.63
CAFÉ-H	\$ 20,050.05					\$ 20,050.05
	\$ -					\$ -
	\$ -					\$ -
CAFÉ-P						\$ -
CANCER						\$ -
CHILD	\$ 609.70					\$ 609.70
CLINIC	\$ 85.00					\$ 85.00
COMBIN	\$ 400.80					\$ 400.80
CREDUN						\$ -
DENTAL	\$ -					\$ -
DEP-LF						\$ -
SUNLIFE TERM LIFE	\$ 732.70					\$ 732.70
SUNLIFE HOSP INDEM	\$ 618.72					\$ 618.72
FED TAX	\$ 34,891.88					\$ 34,891.88
FICA-M	\$ 5,898.68					\$ 5,898.68
FICA-O	\$ 24,677.93					\$ 24,677.93
FIRST C	\$ -					\$ -
FLEX S	\$ 3,327.29					\$ 3,327.29
FLX-FE						\$ -
GIFT S	\$ 312.50					\$ 312.50
GRP-IN						\$ -
GTL						\$ -
HOSP-I						\$ -
LEGAL	\$ 1,098.30					\$ 1,098.30
OTHER	\$ 950.17					\$ 950.17
NATIONAL FARM LIFE	\$ 1,753.01					\$ 1,753.01
MED SURCHARGE	\$ 450.00					\$ 450.00
PR FIN	\$ -					\$ -
RELAY						\$ -
REPAY						\$ -
STONEDF	\$ 790.86					\$ 790.86
STONE						\$ -
STONE 2						\$ -
STUDEN						\$ -
TSA-R	\$ 30,503.07					\$ 30,503.07
UW/HOS	\$ -					\$ -
TOTAL DEDUCTIONS:	\$ 132,830.76	\$ -	\$ -	\$ -	\$ -	\$ 132,830.76
NET PAY:	\$ 303,300.61	\$ -	\$ -	\$ -	\$ -	\$ 303,300.61

TOTAL CAFÉ 125 PLAN:

\$ 29,333.30 Less Exempt:

TAXABLE PAY:

\$ 406,798.07 \$ 398,030.01

Exempt Amt:

		**CALCULATED**	From MMC Report	Difference
FICA - MED (ER)	1.45%	\$ 5,898.57		
FICA - MED (EE)	1.45%	\$ 5,898.57	\$ 5,898.68	\$ (0.11)
FICA - SOC SEC (ER)	6.20%	\$ 24,677.86		
FICA - SOC SEC (EE)	6.20%	\$ 24,677.86	\$ 24,677.93	\$ (0.07)
FED WITHHOLDING		\$ 34,891.88	\$ 34,891.88	

Employees over FICA-SS Cap:

Jason Anglin	\$ 8,768.06
Roshanda Thomas	\$ -
Paycode S - Employee Reimb.:	\$ -

TOTAL: \$ 8,768.06

TAX DEPOSIT: \$ 96,044.74 \$ 96,045.10

FICA - MEDICARE	2.90%	\$ 11,797.14	\$ 11,797.36
FICA - SOCIAL SECURITY	12.40%	\$ 49,355.72	\$ 49,355.86
FED WITHHOLDING		\$ 34,891.88	\$ 34,891.88
TOTAL TAX:		\$ 96,044.74	\$ 96,045.10

PREPARED BY:

Caitlin Clevenger

PREPARED DATE:

10/8/2021

(0.36)

Run Date: 10/08/21  
Time: 14:50

MEMORIAL MEDICAL CENTER BI-WEEKLY  
\*\*\*\* Check Register \*\*\*\*  
Pay Period 09/24/21--10/07/21 Run: 1  
Type=NET 10000001 OPERATING - PROSPERITY

Page 1  
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
65550	SAN FRANCISCO MASCORRO	590.11	00062899	10/15/21
00041	CARL LEE KING	1145.98	DD	10/15/21
00093	SYLVIA A VARGAS	972.51	DD	10/15/21
00094	SYLVIA A MENDOZA	762.60	DD	10/15/21
00113	JACLYN CARREON	928.64	DD	10/15/21
00132	SANDRA A BRAUN	877.76	DD	10/15/21
00192	BRENDA D PENA	1319.38	DD	10/15/21
00270	ANGELA M BURGIN	2456.72	DD	10/15/21
00344	SANDY LEE RUDDICK	2613.71	DD	10/15/21
00387	BILLIE F DUCKWORTH	2408.00	DD	10/15/21
00392	MONICA T CARR	880.68	DD	10/15/21
00399	LINDA J TIJERINA	2682.81	DD	10/15/21
00401	VELMA J PINA	700.85	DD	10/15/21
00417	SHERRY L KING	2135.70	DD	10/15/21
00423	DONN V STRINGO	2202.99	DD	10/15/21
00482	PAM FIKAC	1141.69	DD	10/15/21
00504	HELEN DAVIS	929.42	DD	10/15/21
00533	LAURA V DAVILA	1179.86	DD	10/15/21
00577	DIANA GARCIA	2235.88	DD	10/15/21
00581	CYNTHIA L RUSHING	1411.31	DD	10/15/21
00676	SHEILA KAY HEATHCOCK	1141.55	DD	10/15/21
00681	R RENEE WOOD	1690.90	DD	10/15/21
00692	DEBORAH E WITTNEBERT	423.34	DD	10/15/21
00697	MARIA C FARIAS	1107.20	DD	10/15/21
00707	KIMBERLY R BLINKA	1374.26	DD	10/15/21
00918	GILMA MORENO	2023.69	DD	10/15/21
01015	SUSAN B SMALLEY	1790.71	DD	10/15/21
01234	JENISE N SVETLIK	1745.98	DD	10/15/21
01367	MARILYN A SANDERS	1309.01	DD	10/15/21
01791	RAUSHANAH J MONDAY	1574.99	DD	10/15/21
02011	ERIN R CLEVINGER	3304.77	DD	10/15/21
02014	AGAPITA C CANTU	32.43	DD	10/15/21
02021	ERIKA OSCORNIA-SANCHEZ	375.67	DD	10/15/21
02022	AMANDA J GRIGGS	2420.76	DD	10/15/21
02064	ANNA LAURA GARCIA	430.84	DD	10/15/21
02097	KYLIE M GAINES	1628.31	DD	10/15/21
02099	TRACI M SHEFCIK	2661.94	DD	10/15/21
02112	LESLIE THOMAS	2222.75	DD	10/15/21
02193	TIKI VENGLAR	1488.13	DD	10/15/21
02271	DAWN J BUBENIK	1972.98	DD	10/15/21
02301	NICOLAS TIJERINA	753.85	DD	10/15/21
02302	CATHERINE MARIE DECILLOS	396.64	DD	10/15/21
02303	CONNIE M LUNA	2095.35	DD	10/15/21
02315	NINA M GREEN	2452.19	DD	10/15/21
02331	JESSICA B BIFFLE	1445.27	DD	10/15/21
02346	JEANNETTE L FALCON	469.64	DD	10/15/21
02369	BECKY N BRISENO	397.35	DD	10/15/21
02416	JANELLE SCOTT	1829.67	DD	10/15/21
02525	AUDREY D GARCIA	387.28	DD	10/15/21
02535	STEFANIE M SOLIZ	337.77	DD	10/15/21
02552	VERONICA RAGUSIN	1694.84	DD	10/15/21
02602	VANESSA GUARDIOLA	195.37	DD	10/15/21
02701	RONDA DAWNELLE GOHLKE	4063.89	DD	10/15/21

Run Date: 10/08/21  
Time: 14:50

MEMORIAL MEDICAL CENTER BI-WEEKLY  
\*\*\*\* Check Register \*\*\*\*  
Pay Period 09/24/21--10/07/21 Run: 1  
Type-NET 10000001 OPERATING - PROSPERITY

Page 2  
F2DISTP

Num.	Name	Amount	CHECK NUM	DATE
02717	PATRICIA A BRISENO	499.48	DD	10/15/21
02719	DAWN M MCCLELLAND	1910.19	DD	10/15/21
02735	ZANDRA A CUELLAR	1300.59	DD	10/15/21
02794	HEATHER L MUTCHLER	1633.52	DD	10/15/21
02797	SHELLY A MCAFFEE	1848.27	DD	10/15/21
02812	BRITTANY N RUDDICK	1739.14	DD	10/15/21
02907	MARIA F LONGORIA	985.10	DD	10/15/21
02927	MICHAEL L GAINES	2729.21	DD	10/15/21
02963	DOROTHY J RENDON	510.79	DD	10/15/21
02970	DIANNE G ATKINSON	1723.68	DD	10/15/21
03864	JACQUELINE R HERRERA	1158.59	DD	10/15/21
05003	COURTNE D THURKILL	2623.74	DD	10/15/21
05007	JAMIE K NEYLAND	2032.11	DD	10/15/21
05641	AMANDA R KEY	1624.16	DD	10/15/21
05757	SHARON T HOLDER	1751.37	DD	10/15/21
07066	DELPHINE PADRON	1307.08	DD	10/15/21
07878	DIANA C SAUCEDA	350.57	DD	10/15/21
10519	MARISSA LYNN HUNT	1297.59	DD	10/15/21
11197	CATHERINE A SAENZ	1395.34	DD	10/15/21
11412	COURTNEY L MORKOVSKY	903.53	DD	10/15/21
12011	KIMBERLY J REYNA	740.74	DD	10/15/21
12115	LISA J HINOJOSA	1061.98	DD	10/15/21
12212	MARIA B ARREDONDO	748.45	DD	10/15/21
15097	KYLE L DANIEL	3179.30	DD	10/15/21
15131	SAVANNAH HARLEY	1412.52	DD	10/15/21
15230	MEGAN GARCIA	2076.14	DD	10/15/21
15286	DAWN M MAREK	2010.46	DD	10/15/21
15400	ANDREA RODRIGUEZ	1584.92	DD	10/15/21
15555	STEPHANIE MARTIN	716.09	DD	10/15/21
15909	JULIE NGUYEN	243.10	DD	10/15/21
15915	BRIANNE J KEY	3258.05	DD	10/15/21
20112	YULMA PATRICA RODRIGUEZ	20.48	DD	10/15/21
20121	ROBERT WAHOME	28.59	DD	10/15/21
20144	SOPHIE M PECENA	1427.75	DD	10/15/21
20156	ERIN ASHLEY WISDOM	1797.41	DD	10/15/21
20206	KELLI B GOFF	1413.44	DD	10/15/21
20207	SHAWNA G HARTL	2109.28	DD	10/15/21
20294	JESSICA D WALTHER	1142.35	DD	10/15/21
20304	KAYLIN EASLEY	327.91	DD	10/15/21
20407	MISTY M RECTOR	595.47	DD	10/15/21
20484	BRIANNA S PASSMORE	209.76	DD	10/15/21
20567	JESSICA L RUDDICK	43.37	DD	10/15/21
20759	JAMIE SADLER	848.17	DD	10/15/21
20796	ANNA JIMENEZ	158.10	DD	10/15/21
20797	BETHANN M DIGGS	741.11	DD	10/15/21
20816	JOIE L PENNA	941.66	DD	10/15/21
20837	DAISY MADRIGAL	1082.73	DD	10/15/21
20896	DANIELA CAMACHO	304.92	DD	10/15/21
20977	CHERYL L TESCH	1642.30	DD	10/15/21
21450	DIANA E LEAL	1393.87	DD	10/15/21
21629	JACOBY R CRAWFORD	1373.36	DD	10/15/21
21736	ALLISON GOULDEN	449.24	DD	10/15/21
22493	BRITTANY E NAVARRO	345.23	DD	10/15/21
28120	JESSICA V SELVERA	809.47	DD	10/15/21

Run Date: 10/08/21  
Time: 14:50

MEMORIAL MEDICAL CENTER BI-WEEKLY  
\*\*\*\* Check Register \*\*\*\*  
Pay Period 09/24/21--10/07/21 Run: 1  
Type=NET 10000001 OPERATING - PROSPERITY

Page 3  
PADISTP

Num.	Name	Amount	CHECK NUM	DATE
31031	HECTOR F GARCIA	1001.10	DD	10/15/21
31035	STACIE L EPLEY	1822.52	DD	10/15/21
31054	LORA L LAMBEN	748.54	DD	10/15/21
31099	ARACELY Z GARCIA	2130.21	DD	10/15/21
31185	JERRY A FINDLEY	2149.16	DD	10/15/21
31219	LAUREN PHILLIPS	115.22	DD	10/15/21
31313	KATHERINE LYNN JIMENEZ	1849.64	DD	10/15/21
31319	STACY L FARMER	1653.84	DD	10/15/21
31463	EDWARD E MATULA	2257.47	DD	10/15/21
31508	RACHEL A HEFFNER	1360.45	DD	10/15/21
31707	LORENZO A PEREZ	1268.19	DD	10/15/21
31821	KAYLA M ALVAREZ	1256.99	DD	10/15/21
31832	SHANE D KRESTA	609.31	DD	10/15/21
31849	CODY L JUREK	1315.96	DD	10/15/21
38118	KRYSTELLA F KISIAH	921.43	DD	10/15/21
38413	DEVAN ORTA	1099.56	DD	10/15/21
38702	ANNA VANESSA PENNELL	861.23	DD	10/15/21
41112	ANASTASIA L PEREZ	487.19	DD	10/15/21
41171	TOMMIE M TREVINO	509.60	DD	10/15/21
41205	JEANETTE ALVARADO	742.67	DD	10/15/21
41236	PAMELA K VANNOY	1268.72	DD	10/15/21
41274	KAREN GANN	890.47	DD	10/15/21
41308	ISABEL LEDEZMA	765.87	DD	10/15/21
41347	ADRIANNA D STRAKOS	611.47	DD	10/15/21
41369	LORETTA A LEAL	790.13	DD	10/15/21
41418	ANGEL M CASSEL	869.59	DD	10/15/21
41507	OLGA I BETANCOURT	826.61	DD	10/15/21
41612	SONJA A GUAJARDO	835.63	DD	10/15/21
41618	HEATHER DELBOSQUE	683.53	DD	10/15/21
41705	KELSEY R TAYLOR	764.71	DD	10/15/21
41896	RENAE EMERY	564.78	DD	10/15/21
41897	ROXANNA MARTINEZ	784.88	DD	10/15/21
41901	JUANITA R MILLER	1091.73	DD	10/15/21
41924	BRITTNEY V STRICKLIN	635.95	DD	10/15/21
42106	CHRISTY SILVAS	980.43	DD	10/15/21
42112	SOCORRO C GONZALES	672.56	DD	10/15/21
42122	LEI ANA CHAVANA	1483.80	DD	10/15/21
42125	LUCY CALZADA	755.16	DD	10/15/21
42304	MIMI T NGUYEN	2346.84	DD	10/15/21
42320	MICHAEL A PFEIL	2753.66	DD	10/15/21
42820	MARIA D CHAVEZ	556.23	DD	10/15/21
42842	SHANNA S O DONNELL	3196.41	DD	10/15/21
48680	JESSICA BUSH	186.50	DD	10/15/21
50018	MICHELLE M MORALES	1523.07	DD	10/15/21
50148	PENNY GOULDEN	3314.88	DD	10/15/21
50248	MCKENNA VILLEGAS	643.05	DD	10/15/21
50282	JACOB W HAMILTON	2575.10	DD	10/15/21
50310	JASMINE GRIGSBY	772.44	DD	10/15/21
50573	DEANA R DAVIS	1593.90	DD	10/15/21
50596	BETTY S DAVIS	1961.79	DD	10/15/21
50719	DEBRA K MUSTERED	2225.48	DD	10/15/21
50928	ADINA RODRIGUEZ	518.46	DD	10/15/21
53541	JACLYN B HARTL	1574.23	DD	10/15/21
55025	LEA C RESENDEZ	428.19	DD	10/15/21

Run Date: 10/08/21  
Time: 14:50

MEMORIAL MEDICAL CENTER BI-WEEKLY  
\*\*\*\* Check Register \*\*\*\*  
Pay Period 09/24/21--10/07/21 Run: 1  
Type=NET 10000001 OPERATING - PROSPERITY

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P2DISTP

Nun.	Name	Amount	CHECK NUM	DATE
55106	CRYSTAL M CHAVEZ	736.78	DD	10/15/21
55127	APRIL N KUBALA	2577.08	DD	10/15/21
55382	SHANNON JACILDO	1336.47	DD	10/15/21
55658	LAJUAN WILKE	693.94	DD	10/15/21
58510	RITA L POLENSKY	806.43	DD	10/15/21
59999	RENEE ROULAND	2382.69	DD	10/15/21
60103	TODD SAVOY	536.58	DD	10/15/21
60112	ROBERT A RODRIQUEZ	3028.27	DD	10/15/21
60131	NORA OVALLE	649.05	DD	10/15/21
60191	LOLA A RODRIGUEZ	795.13	DD	10/15/21
60271	REBEKAH GERYK	727.99	DD	10/15/21
60412	CHRISTOPHER GALINCO	555.01	DD	10/15/21
60616	DOROTHY A LONGORIA	814.53	DD	10/15/21
60718	ANNA C GONZALEZ	693.69	DD	10/15/21
60934	CONSUELO ZAMORA	734.49	DD	10/15/21
63178	EMMANUEL ESCALONA	1010.61	DD	10/15/21
63289	JASON RUBIO	855.09	DD	10/15/21
65100	FELICITA BONUZ	540.71	DD	10/15/21
65121	VIVIANA P MEDINA	416.74	DD	10/15/21
65151	ELIA OLACHIA	567.37	DD	10/15/21
65213	LEE SIMERLY	1250.53	DD	10/15/21
65222	LAURIE J KRYCESKI	959.98	DD	10/15/21
65243	LUCILA LOPEZ	308.36	DD	10/15/21
65366	CYNTHIA GARCIA	721.46	DD	10/15/21
65393	RAMONA A PEREZ	544.63	DD	10/15/21
65413	CHRISTINA SOLIS	815.58	DD	10/15/21
65513	MARIA MORALES	1072.85	DD	10/15/21
65616	JESUS RODRIGUEZ	1128.52	DD	10/15/21
65705	DOMITILA HERRERA	748.63	DD	10/15/21
65815	MELISSA R VEGAS	871.79	DD	10/15/21
65865	MARIA F LEDEZMA	717.51	DD	10/15/21
65879	MARTHA FLORES	304.65	DD	10/15/21
68792	NAZARIO HERNANDEZ DIAZ	1692.31	DD	10/15/21
70119	SARA N BLEDSOE	2139.10	DD	10/15/21
71620	ROBIN STEELE	2439.55	DD	10/15/21
73749	GLORIA N REID	2367.97	DD	10/15/21
75190	RIKA WILLIAMS	1842.53	DD	10/15/21
76003	IRMA DELEON	556.00	DD	10/15/21
76067	PAIGE G CHATHAM	560.56	DD	10/15/21
76110	TARAH SUBLETT	506.12	DD	10/15/21
76115	JENNIFER R CARLOCK	623.28	DD	10/15/21
76120	RACHEL CANALES	1169.39	DD	10/15/21
76138	KAREN D GARCIA	581.18	DD	10/15/21
76210	ZOE VILLARREAL	1145.71	DD	10/15/21
76225	JASON YARBOROUGH	548.43	DD	10/15/21
76300	AIDA JIMENEZ	782.59	DD	10/15/21
76313	PAMELA L BARTON	595.07	DD	10/15/21
76403	KATRINA A POKLUDA	1081.50	DD	10/15/21
76647	CHERYL A SEE	1742.81	DD	10/15/21
76706	GREGORY E MORALES	601.89	DD	10/15/21
76761	LAURA F PESINA	822.21	DD	10/15/21
76854	MARY PATTERSON	806.59	DD	10/15/21
76985	VANESSA TRISTAN	211.23	DD	10/15/21
77646	FAREN A GONZALES	998.22	DD	10/15/21

Run Date: 10/08/21  
Time: 14:50

MEMORIAL MEDICAL CENTER BI-WEEKLY  
\*\*\*\* Check Register \*\*\*\*  
Pay Period 09/24/21--10/07/21 Run: 1  
Type=NET 10000001 OPERATING - PROSPERITY


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P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
78020	MISTY R PASSMORE	1123.73	DD	10/15/21
78058	KYANN J POWER	113.85	DD	10/15/21
78072	DONNA M RAWLINGS	692.18	DD	10/15/21
78186	ANDREA F COOK	357.41	DD	10/15/21
78191	JAMIE J GRASSE	767.30	DD	10/15/21
78287	MARISSA D ALMANZAR	1514.22	DD	10/15/21
78336	JESSICA L GLOVER	1466.97	DD	10/15/21
78566	MELISSA K GEE	695.62	DD	10/15/21
78764	ASHLEY D HADLEY	1942.40	DD	10/15/21
78778	SARA M RUBIO	2102.05	DD	10/15/21
78781	KRISTEN R MACHICEK	1540.16	DD	10/15/21
78787	FARAH I JANAK	2349.73	DD	10/15/21
78879	YESENIA QUEZADA	591.61	DD	10/15/21
80008	ADAM D BESIO	2330.84	DD	10/15/21
80141	JEANNIE ORTA	2186.56	DD	10/15/21
82227	CAITLIN A CLEVINGER	960.25	DD	10/15/21
86432	KRISTI L BOYD	1903.65	DD	10/15/21
86482	MEGAN M HARPER	714.47	DD	10/15/21
88150	MELISSA I MCKISSACK	2106.68	DD	10/15/21
88808	MARLEY B MOHRIG	2066.77	DD	10/15/21
88904	MAYRA K MARTINEZ	1419.84	DD	10/15/21
90320	ROSHANDA S THOMAS	3020.92	DD	10/15/21
90779	JASON W ANGLIN	6761.08	DD	10/15/21
98547	ELLEN W HEIMAN	925.28	DD	10/15/21
98756	ADRIANNA M GALVAN	1345.35	DD	10/15/21

303300.61

**MEMORIAL MEDICAL CENTER  
PROSPERITY BANK  
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- October 4, 2021 - October 7, 2021**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>	<u>CP</u>
10/4/2021	PAY PLUS ACHTRANS 452579291 101000697162307	- 3rd Party Payor Fee	66.56	<i>PAY PLUS</i> 66.56 +
10/4/2021	MERCHANT BANKCD DISCOUNT 971160913887 910000	- Credit Card Processing Fee	196.14	35.11 +
10/4/2021	MERCHANT BANKCD DISCOUNT 971160910883 910000	- Credit Card Processing Fee	19.95	346.33 +
10/4/2021	MERCHANT BANKCD FEE 971160913887 91000013960	- Credit Card Processing Fee	177.73	144.60 +
10/4/2021	MERCHANT BANKCD FEE 971160910883 91000013960	- Credit Card Processing Fee	9.95	592.60 *
10/4/2021	MERCHANT BANKCD INTERCHNG 971160913887 91000	- Credit Card Processing Fee	114.39	<i>CL Fees</i> 196.14 +
10/4/2021	AUTHNET GATEWAY BILLING 118939340 1040000116	- 3rd Party Payor Fee	22.8	19.95 +
10/5/2021	PAY PLUS ACHTRANS 452579291 101000698933515	- 3rd Party Payor Fee	35.11	177.73 +
10/5/2021	MCKESSON DRUG AUTO ACH ACH04750716 910000165	- 340B Drug Program Expense	9404.61	9.95 +
10/5/2021	FDMS FDMS PYMT 052-1479214-000 4100012024779	- Credit Card Processing Fee	40.02	114.39 +
10/5/2021	FDMS FDMS PYMT 052-1479213-000 4100012024779	- Credit Card Processing Fee	43.26	40.02 +
10/5/2021	FDMS FDMS PYMT 052-1479468-000 4100012024789	- Credit Card Processing Fee	69.24	43.26 +
10/5/2021	FDMS FDMS PYMT 052-1601830-000 4100012027977	- Credit Card Processing Fee	32.45	69.24 +
10/6/2021	PAY PLUS ACHTRANS 452579291 101000699808777	- 3rd Party Payor Fee	346.33	32.45 +
10/7/2021	PAY PLUS ACHTRANS 452579291 101000691044874	- 3rd Party Payor Fee	144.6	703.13 *
			<b>10,723.14</b>	<i>Authnet</i> 22.80 +


  
Roshanda Thomas, Assistant Administrator  
Memorial Medical Center

October 7, 2021

\* Approved 10-06-21 CC

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

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>	<u>Amount</u>
10/20/2021	Sales Tax	Sales Tax	1,238.38
			<b>1,238.38</b>

  
Roshanda Thomas, Assistant Administrator  
Memorial Medical Center

October 7, 2021

*Handwritten calculations:*  
 66.56 +  
 35.11 +  
 346.33 +  
 144.60 +  
 592.60 \*  
 CL Fees  
 196.14 +  
 19.95 +  
 177.73 +  
 9.95 +  
 9.95 +  
 114.39 +  
 40.02 +  
 43.26 +  
 69.24 +  
 32.45 +  
 703.13 \*  
 Authnet  
 22.80 +  
 22.80  
 592.60 +  
 703.13 +  
 22.80 +  
 1,318.53 =  
 10,723.14 +  
 9,404.61 -  
 1,318.53 =  
 1,318.53 +  
 1,318.53 -  
 0.00 \*

Sales Tax 10/20/21

☑ Confirmation: You Have Filed Successfully

**Sales and Use Tax** Period Ending 09/30/2021 (2109)

Taxpayer ID: 1  
User ID:  
Reference Number: 0  
Date and Time of Filing:  
10/08/2021, 07:55:31 AM

Taxpayer Name:  
MEMORIAL MEDICAL CENTER  
Taxpayer Address:  
815 N VIRGINIA ST PORT LAVACA , TX  
77979-3025  
IP Address:

Entered By:  
Email Address:  
Telephone Number:

**PAYMENT SUMMARY**

Electronic Check  
State Amount: \$938.17  
Local Amount: \$300.21  
Amount to Pay: \$1,238.38  
Electronic Check: \$1,238.38

Payment Reference Number:  
Trace Number:

Type of Bank Account: Checking  
Accountholder Name:  
Bank Routing Number:  
Bank Account Number:  
Payment Effective Date: 10/20/2021

**CREDIT SUMMARY**

**Credits Taken**

Are you taking credit to reduce taxes due on this return? No

**Licensed Customs Broker Exported Sales**

Did you refund sales tax for this filing period on items exported outside the United States based on a Texas Licenced Customs Broker Export Certifications? No

**LOCATION SUMMARY**

Loc #	Total Texas Sales	Taxable Sales	Taxable Purchases	Subject to State Tax (Rate .0625)	State Tax Due	Subject to Local Tax	Local Tax Rate	Local Tax Due
00004	15086	15086	0	15086	942.88	15086	0.02	301.72
<b>SubTotal</b>	<b>15086</b>	<b>15086</b>	<b>0</b>	<b>15086</b>	<b>942.88</b>	<b>15086</b>		<b>301.72</b>

**Total Tax for Locations**

**\$1,244.60**

Total Tax Due: \$1,244.60  
Timely Filing Discount: -\$6.22  
Balance Due: \$1,238.38  
Pending Payments: -\$0.00

**Total Amount Due and Payable: \$1,238.38**  
( State amount due is \$938.17 ) ( Local amount due is \$300.21 )

*[Signature]* 10/8/21



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AP Open Invoice List

Due Dates Through: 10/21/2021

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Vendor# Vendor Name

Class Pay Code

11832 BROADMOOR AT CREEKSIDE PARK

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
092921		09/30/20	09/29/20	10/21/20		1,298.50	0.00	0.00	1,298.50 ✓
	TRANSFER								
093021		09/30/20	09/29/20	10/21/20		185.50	0.00	0.00	185.50 ✓
	TRANSFER "								

*Net insurance pymt deposited into mme operating*

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
	11832	BROADMOOR AT CREEKSIDE PARK	1,484.00	0.00	0.00	1,484.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,484.00	0.00	0.00	1,484.00

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ON

OCT 06 2021

CK#  
192242

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CALHOUN COUNTY, TEXAS

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Due Dates Through: 10/21/2021

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Vendor# Vendor Name

Class Pay Code

11824 THE CRESCENT ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
092921B		09/30/20	09/29/20	10/21/20		2,226.00	0.00	0.00	2,226.00 ✓
	TRANSFER	<i>✓ H insurance pymt deposited into mme operating</i>							
092921		09/30/20	09/29/20	10/21/20		1,710.19	0.00	0.00	1,710.19 ✓
	TRANSFER	<i>" "</i>							
092921A		09/30/20	09/29/20	10/21/20		927.50	0.00	0.00	927.50 ✓
	TRANSFER	<i>" "</i>							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11824	THE CRESCENT	4,863.69	0.00	0.00	4,863.69

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,863.69	0.00	0.00	4,863.69

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192247

COURTNEY ANDERSON  
CALHOUN COUNTY, TEXAS

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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
091021	09/30/2021	09/10/2021	10/21/2021				14,469.42	0.00	0.00	14,469.42 ✓
	TRANSFER NH insurance pymnt deposited into mmc account									
091321	09/30/2021	09/13/2021	10/21/2021				17,226.96	0.00	0.00	17,226.96 ✓
	TRANSFER "									
091421	09/30/2021	09/14/2021	10/21/2021				3,602.70	0.00	0.00	3,602.70 ✓
	TRANSFER "									
091521A	09/30/2021	09/15/2021	10/21/2021				14,411.58	0.00	0.00	14,411.58 ✓
	TRANSFER "									
091521	09/30/2021	09/15/2021	10/21/2021				15,849.79	0.00	0.00	15,849.79 ✓
	TRANSFER "									
091721	09/30/2021	09/17/2021	10/21/2021				2,949.20	0.00	0.00	2,949.20 ✓
	TRANSFER "									
092021	09/30/2021	09/20/2021	10/21/2021				80.67	0.00	0.00	80.67 ✓
	TRANSFER "									
092421B	09/30/2021	09/24/2021	10/21/2021				1,629.53	0.00	0.00	1,629.53 ✓
	TRANSFER "									
092421	09/30/2021	09/24/2021	10/21/2021				216.59	0.00	0.00	216.59 ✓
	TRANSFER "									
092421A	09/30/2021	09/24/2021	10/21/2021				5,366.78	0.00	0.00	5,366.78 ✓
	TRANSFER "									
092721	09/30/2021	09/27/2021	10/21/2021				10,087.56	0.00	0.00	10,087.56 ✓
	TRANSFER "									
092921C	09/30/2021	09/29/2021	10/21/2021				39,736.21	0.00	0.00	39,736.21 ✓
	TRANSFER "									
092921B	09/30/2021	09/29/2021	10/21/2021				4,715.44	0.00	0.00	4,715.44 ✓
	TRANSFER "									
092921A	09/30/2021	09/29/2021	10/21/2021				114.62	0.00	0.00	114.62 ✓
	TRANSFER "									
092921D	09/30/2021	09/29/2021	10/21/2021				291.95	0.00	0.00	291.95 ✓
	TRANSFER "									
093021	09/30/2021	09/30/2021	10/21/2021				1,221.47	0.00	0.00	1,221.47 ✓
	TRANSFER "									
100421	10/01/2021	10/01/2021	10/04/2021				4,850.08	0.00	0.00	4,850.08 ✓

MEDICARE REPAYMENT

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HE		136,820.55	0.00	0.00	136,820.55

Grand Totals:

Gross	Discount	No-Pay	Net
136,820.55	0.00	0.00	136,820.55

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OCT 06 2021

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192245

GOSNEY AUBREY  
CALHOUN COUNTY, TEXAS

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AP Open Invoice List

Due Dates Through: 10/21/2021

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Vendor# Vendor Name

Class Pay Code

12696 GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
092821		09/24/20	09/29/20	10/21/20		121.90	0.00	0.00	121.90 ✓
	TRANSFER	<i>NH insurance pymt deposited into mmc operating</i>							
092921E		09/24/20	09/29/20	10/21/20		1,980.00	0.00	0.00	1,980.00 ✓
	TRANSFER	"							
092421A		09/30/20	09/24/20	10/21/20		812.52	0.00	0.00	812.52 ✓
	TRANSFER	"							
092421		09/30/20	09/24/20	10/21/20		20,118.89	0.00	0.00	20,118.89 ✓
	TRANSFER	"							
092221		09/30/20	09/24/20	10/21/20		3,070.34	0.00	0.00	3,070.34 ✓
	TRANSFER	"							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12696	GULF POINTE PLAZA	26,103.65	0.00	0.00	26,103.65

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	26,103.65	0.00	0.00	26,103.65

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OCT 06 2021

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CALHOUN COUNTY, TEXAS

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Dates Through:

Vendor# 13004  
Calhoun County Auditor

Vendor Name  
TUSCANY VILLAGE

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
092921A		09/24/2021	09/29/2021	10/21/2021			5,750.50	0.00	0.00	5,750.50 ✓	
	<i>NH insurance pymt deposited into MMCC operating</i>										
092921B		09/24/2021	09/29/2021	10/21/2021		"	6,430.15	0.00	0.00	6,430.15 ✓	
092921D		09/24/2021	09/29/2021	10/21/2021		"	943.35	0.00	0.00	943.35 ✓	
091021		09/30/2021	09/10/2021	10/21/2021		"	1,317.00	0.00	0.00	1,317.00 ✓	
	TRANSFER										
091421		09/30/2021	09/14/2021	10/21/2021		"	2,226.00	0.00	0.00	2,226.00 ✓	
	TRANSFER										
092021		09/30/2021	09/20/2021	10/21/2021		"	5,379.50	0.00	0.00	5,379.50 ✓	
	TRANSFER										
092121		09/30/2021	09/21/2021	10/21/2021		"	17,547.11	0.00	0.00	17,547.11 ✓	
	TRANSFER										
092221		09/30/2021	09/22/2021	10/21/2021		"	927.92	0.00	0.00	927.92 ✓	
	TRANSFER										
092221A		09/30/2021	09/22/2021	10/21/2021		"	158.58	0.00	0.00	158.58 ✓	
	TRANSFER										
092221B		09/30/2021	09/22/2021	10/21/2021		"	1,734.01	0.00	0.00	1,734.01 ✓	
	TRANSFER										
092421A		09/30/2021	09/24/2021	10/21/2021		"	3,601.17	0.00	0.00	3,601.17 ✓	
	TRANSFER										
092421B		09/30/2021	09/24/2021	10/21/2021		"	6,030.30	0.00	0.00	6,030.30 ✓	
	TRANSFER										
092421		09/30/2021	09/24/2021	10/21/2021		"	2,030.67	0.00	0.00	2,030.67 ✓	
	TRANSFER										
092721A		09/30/2021	09/27/2021	10/21/2021		"	8,100.97	0.00	0.00	8,100.97 ✓	
	TRANSFER										
100421		10/01/2021	10/01/2021	10/04/2021			5,162.72	0.00	0.00	5,162.72 ✓	
	MEDICARE REPAYMENT										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13004		TUSCANY VILLAGE	67,339.95	0.00	0.00	67,339.95

Grand Totals:	Gross	Discount	No-Pay	Net
	67,339.95	0.00	0.00	67,339.95

APPROVED

OCT 06 2021

COURTNEY A. GUNTER  
CALHOUN COUNTY, TEXAS

ck#  
192248

# RECEIVED

OCT 06 2021

10/06/2021

16:03  
Cathoim County Auditor

## MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap\_open\_invoice.template

Vendor#  
12792

Vendor Name  
BETHANY SENIOR LIVING ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
090821A	09/24/2021	09/08/2021	10/21/2021				6,732.00	0.00	0.00	6,732.00 ✓
	TRANSFER									
092921	09/24/2021	09/29/2021	10/21/2021				5,704.99	0.00	0.00	5,704.99 ✓
	TRANSFER									
091021	09/30/2021	09/10/2021	10/21/2021				14,428.01	0.00	0.00	14,428.01 ✓
	TRANSFER									
091321A	09/30/2021	09/13/2021	10/21/2021				976.45	0.00	0.00	976.45 ✓
	TRANSFER									
091321	09/30/2021	09/13/2021	10/21/2021				47,717.20	0.00	0.00	47,717.20 ✓
	TRANSFER									
092221A	09/30/2021	09/22/2021	10/21/2021				50.46	0.00	0.00	50.46 ✓
	TRANSFER									
092221	09/30/2021	09/22/2021	10/21/2021				4,169.52	0.00	0.00	4,169.52 ✓
	TRANSFER									
092421A	09/30/2021	09/24/2021	10/21/2021				1,261.99	0.00	0.00	1,261.99 ✓
	TRANSFER									
092421	09/30/2021	09/24/2021	10/21/2021				16,738.07	0.00	0.00	16,738.07 ✓
	TRANSFER									
092721A	09/30/2021	09/27/2021	10/21/2021				32,228.15	0.00	0.00	32,228.15 ✓
	TRANSFER									
092821	09/30/2021	09/28/2021	10/21/2021				5,008.50	0.00	0.00	5,008.50 ✓
	TRANSFER									
093021	09/30/2021	09/30/2021	09/30/2021				29,766.92	0.00	0.00	29,766.92 ✓
	TRANSFER									
100421	10/01/2021	10/01/2021	10/01/2021				2,894.20	0.00	0.00	2,894.20 ✓

*NT insurance pymt deposited into MMC operating*

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12792		BETHANY SENIOR I	167,676.46	0.00	0.00	167,676.46

Grand Totals:	Gross	Discount	No-Pay	Net
	167,676.46	0.00	0.00	167,676.46

APPROVED ON

OCT 06 2021

ck# 192241

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

10/06/2021  
16:02

MEMORIAL MEDICAL CENTER  
AP Open Invoice List

0

ap\_open\_invoice.template

Dates Through:

Vendor#  
11088

Vendor Name  
CANTEX HEALTH CARE CENTERS

Class  
Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
093021	09/30/2021	09/30/2021	09/30/2021				3,524.50	0.00	0.00	3,524.50

TRANSFER *NH insurance pymt deposited into mmc open by*

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11088	CANTEX HEALTH C		3,524.50	0.00	0.00	3,524.50

*Report Summary*

Grand Totals:	Gross	Discount	No-Pay	Net
	3,524.50	0.00	0.00	3,524.50

APPROVED  
ON

OCT 06 2021

ck#  
192243

COURNEY AUSTIN  
CALHOUN COUNTY, TEXAS

0

RUN DATE:10/08/21  
 TIME:12:37

MEMORIAL MEDICAL CENTER  
 CHECK REGISTER  
 10/11/21 THRU 10/11/21

PAGE 1  
 GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	192156	10/11/21	8,607.76	AUREUS RADIOLOGY LLC
A/P	192157	10/11/21	24,061.00	AUTHORITYRX
A/P	192158	10/11/21	550.00	AZALEA HEALTH
A/P	192159	10/11/21	5,319.63	BAXTER HEALTHCARE
A/P	192160	10/11/21	1,780.50	BAYER HEALTHCARE
A/P	192161	10/11/21	2,743.40	BECKMAN COULTER CAPITAL
A/P	192162	10/11/21	2,722.50	BECKMAN COULTER INC
A/P	192163	10/11/21	684.36	BIO-RAD LABORATORIES, INC
A/P	192164	10/11/21	224.00	CABLES AND SENSORS
A/P	192165	10/11/21	99.33	CALHOUN COUNTY
A/P	192166	10/11/21	3,080.00	CALHOUN COUNTY EMS
A/P	192167	10/11/21	.00	VOIDED
A/P	192168	10/11/21	760.25	CAPITAL ONE
A/P	192169	10/11/21	2,393.75	CARIANT HEALTH PARTNERS
A/P	192170	10/11/21	1,695.82	CAVALLO ENERGY TEXAS LLC
A/P	192171	10/11/21	223.74	CDW GOVERNMENT, INC.
A/P	192172	10/11/21	160.00	CHRIS KOVAREK
A/P	192173	10/11/21	165.00	CHRISTINA ZAPATA-ARROYO
A/P	192174	10/11/21	162.72	COASTAL OFFICE SOLUTIONS
A/P	192175	10/11/21	801.60	COMBINED INSURANCE
A/P	192176	10/11/21	254.00	CONTROL SOLUTIONS
A/P	192177	10/11/21	192.78	CYRACOM LLC
A/P	192178	10/11/21	1,370.27	DEWITT POTH & SON
A/P	192179	10/11/21	442.50	DRIESSEN WATER INC.
A/P	192180	10/11/21	9,993.42	FISHER HEALTHCARE
A/P	192181	10/11/21	37.78	FRONTIER
A/P	192182	10/11/21	1,190.86	FUSION CLOUD SERVICES, LLC
A/P	192183	10/11/21	94.89	GLOBAL EQUIPMENT CO. INC.
A/P	192184	10/11/21	67.37	GRAINGER
A/P	192185	10/11/21	230.53	HEALTHCARE FINANCIAL SERVICES
A/P	192186	10/11/21	.00	VOIDED
A/P	192187	10/11/21	.00	VOIDED
A/P	192188	10/11/21	1,799.63	HEB CREDIT RECEIVABLES DEPT308
A/P	192189	10/11/21	20,001.21	HILL-ROM COMPANY, INC
A/P	192190	10/11/21	1,001.73	INDEED, INC.
A/P	192191	10/11/21	1,458.72	ITERSOURCE CORPORATION
A/P	192192	10/11/21	528.95	J & J HEALTH CARE SYSTEMS, INC
A/P	192193	10/11/21	72.30	MEDI-DOSE, INC
A/P	192194	10/11/21	8,582.73	MEDICAL TECHNOLOGY ASSOCIATES
A/P	192195	10/11/21	53.16	MEDIMPACT HEALTHCARE SYS, INC.
A/P	192196	10/11/21	.00	VOIDED
A/P	192197	10/11/21	.00	VOIDED
A/P	192198	10/11/21	.00	VOIDED
A/P	192199	10/11/21	.00	VOIDED
A/P	192200	10/11/21	.00	VOIDED
A/P	192201	10/11/21	.00	VOIDED
A/P	192202	10/11/21	.00	VOIDED
A/P	192203	10/11/21	.00	VOIDED
A/P	192204	10/11/21	17,718.13	MEDLINE INDUSTRIES INC
A/P	192205	10/11/21	150.93	MICROTEK MEDICAL INC



RUN DATE:10/08/21  
TIME:12:37

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 2  
GLCKREG

BANK	CHECK	CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	192206	10/11/21	133.14	MID-COAST ELECTRIC SUPPLY, INC		
A/P	192207	10/11/21	.00	VOIDED		
A/P	192208	10/11/21	.00	VOIDED		
A/P	192209	10/11/21	.00	VOIDED		
A/P	192210	10/11/21	44,911.48	MORRIS & DICKSON CO, LLC		
A/P	192211	10/11/21	26,666.45	MSH HEALTH SERVICES LLC		
A/P	192212	10/11/21	340.42	MXR IMAGING, INC		
A/P	192213	10/11/21	3,505.88	NATIONAL FARM LIFE INSURANCE		
A/P	192214	10/11/21	191.25	OLYMPUS AMERICA INC		
A/P	192215	10/11/21	2,009.81	ORTHO CLINICAL DIAGNOSTICS		
A/P	192216	10/11/21	309.81	PARTSSOURCE, LLC		
A/P	192217	10/11/21	1,100.00	PATRICK OCHOA		
A/P	192218	10/11/21	253.92	PITNEY BOWES INC		
A/P	192219	10/11/21	800.00	POC ELECTRIC, LLC		
A/P	192220	10/11/21	6,800.00	PREMIER SLEEP DISORDERS CENTER		
A/P	192221	10/11/21	25,801.36	RELIANT, DBPT 0954		
A/P	192222	10/11/21	1,862.00	RN NETWORK		
A/P	192223	10/11/21	416.18	SAM'S CLUB DIRECT		
A/P	192224	10/11/21	2,193.83	SIEMENS FINANCIAL SERVICES		
A/P	192225	10/11/21	400.00	SIGN AD, LTD.		
A/P	192226	10/11/21	1,685.67	SPARKLIGHT		
A/P	192227	10/11/21	4,625.00	STAFFING FIRST		
A/P	192228	10/11/21	363.14	STRYKER SUSTAINABILITY		
A/P	192229	10/11/21	7,553.68	SUN LIFE FINANCIAL		
A/P	192230	10/11/21	5,699.00	T-SYSTEM, INC		
A/P	192231	10/11/21	239.54	TFORCE FREIGHT		
A/P	192232	10/11/21	422.15	THE STAYWELL COMPANY LLC		
A/P	192233	10/11/21	1,521.00	TRANSCAT, INC.		
A/P	192234	10/11/21	132.67	TRI-ANIM HEALTH SERVICES INC		
A/P	192235	10/11/21	.00	VOIDED		
A/P	192236	10/11/21	6,053.60	UNI-FIRST HOLDINGS		
A/P	192237	10/11/21	37,379.59	VICTORIA ANESTHESIOLOGY		
A/P	192238	10/11/21	720.00	VICTORIA RADIOWORKS, LTD		
A/P	192239	10/11/21	229.46	VYAIR MEDICAL, INC		
A/P	192240	10/11/21	1,160.50	WAGWORKS		
A/P	192241	10/11/21	167,676.46	BETHANY SENIOR LIVING		
A/P	192242	10/11/21	1,484.00	BROADMOOR AT CREEKSIDE PARK		
A/P	192243	10/11/21	3,524.50	CANTEX HEALTH CARE CENTERS LLC		
A/P	192244	10/11/21	.00	VOIDED		
A/P	192245	10/11/21	136,820.55	GOLDENCREEK HEALTHCARE		
A/P	192246	10/11/21	26,103.65	GULF POINTE PLAZA		
A/P	192247	10/11/21	4,863.69	THE CRESCENT		
A/P	192248	10/11/21	67,339.95	TUSCANY VILLAGE		
TOTALS:				714,770.58		

Payables 306,957.70  
1,484.00  
4,863.69  
136,820.55  
26,103.65  
67,339.95  
167,676.46  
3,524.50  
714,770.58

MH  
Transfers

APPROVED  
ON

OCT 11 2021

COURNEY ANDERSON  
CALHOUN COUNTY, TEXAS



## Request for Transfer of Funds

Transfer #: \_\_\_\_\_

Date Requested \_\_\_\_\_

Payer \_\_\_\_\_

Requested by: \_\_\_\_\_

Requestor's email \_\_\_\_\_

Requestor's phone number \_\_\_\_\_

District or County \_\_\_\_\_

Facility \_\_\_\_\_

**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](mailto:cclevenger@mmcportlavaca.com)

[mmartinez@mmcportlavaca.com](mailto: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
N/A	N/A	9/29/2021	EFT	4,101.10	EFT6106024	CVDAR000026869	195.18	BROADMOOR AT CREEKSIDE
N/A	N/A	9/29/2021	EFT	159.69	EFT6105999	CVDAR000019557	7.60	BROADMOOR AT CREEKSIDE
<b>TOTAL</b>				4,260.79			202.78	

**To be filled out by Memorial Medical Center:**

Date Received: 10/7/2021

Approved by: Mayra Martinez

Date of transfer: 10/13/2021

From Facility: BROADMOOR

To Facility: MM CLINIC

Amount: 202.78

Requested Transfer Date #2: \_\_\_\_\_

Date of transfer: \_\_\_\_\_

From Facility: \_\_\_\_\_

To Facility: \_\_\_\_\_

Amount: \_\_\_\_\_

**APPROVED  
ON**

**OCT 08 2021**

GOURNEY ANDERSON  
CALHOUN COUNTY, TEXAS

ck# 40143

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**MEMORIAL MEDICAL CENTER**

NH BROADMOOR  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000141

88-2265/1131

Date 10-11-21

**PAY  
TO THE  
ORDER OF**

Memorial Medical Center

\$ 9,977  $\frac{49}{100}$

Nine thousand, nine hundred seventy-seven dollars  $\frac{49}{100}$

$\frac{49}{100}$

**DOLLARS**



**PROSPERITY  
BANK**

County Auditor



**County of Freestone**  
Security features are included. Details on back.

**FOR** Medicare repayment

⑈000141⑈ ⑆113122655⑆

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**MEMORIAL MEDICAL CENTER**

NH BROADMOOR  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000143

88-2265/1131

Date 10-11-21

**PAY  
TO THE  
ORDER OF**

Memorial Medical Clinic

\$ 202  $\frac{78}{100}$

Two hundred two dollars  $\frac{78}{100}$

**DOLLARS**



**PROSPERITY  
BANK**

County Auditor



**County of Freestone**  
Security features are included. Details on back.

**FOR** Medicare repayment

⑈000143⑈ ⑆113122655⑆

## Request for Transfer of Funds

Transfer #: \_\_\_\_\_

Date Requested: 8/6/2021

Payer: Medicare

Requested by: Faren Campos

Requestor's email: fagonzales@mmcportlavaca.com

Requestor's phone number: 361-552-0226

District or County: Calhoun

Facility: Memorial Medical Center

**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](mailto:cclevenger@mmcportlavaca.com)

[mmartinez@mmcportlavaca.com](mailto: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
		8/31/2021	EFT	(340.74)	EFT6075218	CVDAR000019557	340.74	CRESCENT
		9/3/2021	EFT	(9.01)	EFT6079122	CVDAR000019557	9.01	CRESCENT
		9/9/2021	EFT	(1,773.55)	EFT6083291	CVDAR000019557	1,773.55	CRESCENT
		9/10/2021	EFT	(430.93)	EFT6084540	CVDAR000019557	430.93	CRESCENT
		9/14/2021	EFT	\$ (2,910.04)	EFT6087384	CVDAR000019557	2,910.04	CRESCENT
		9/15/2021	EFT	\$ (776.54)	EFT6088748	CVDAR000019557	776.54	CRESCENT
		9/16/2021	EFT	\$ (46.33)	EFT6090155	CVDAR000019557	46.33	CRESCENT
		9/17/2021	EFT	\$ (382.83)	EFT6092002	CVDAR000019557	382.83	CRESCENT
		9/20/2021	EFT	\$ (80.58)	EFT6093692	CVDAR000019557	80.58	CRESCENT
		9/21/2021	EFT	\$ (83.39)	EFT6095105	CVDAR000019557	83.39	CRESCENT
		9/22/2021	EFT	\$ (16.21)	EFT6096755	CVDAR000019557	16.21	CRESCENT
		9/23/2021	EFT	\$ (766.61)	EFT6098261	CVDAR000019557	766.61	CRESCENT
		9/24/2021	EFT	\$ (1,726.35)	EFT6099957	CVDAR000019557	1,726.35	CRESCENT
		9/27/2021	EFT	\$ (390.02)	EFT6101722	CVDAR000019557	390.02	CRESCENT
		9/28/2021	EFT	\$ (161.09)	EFT6103599	CVDAR000019557	161.09	CRESCENT
		9/29/2021	EFT	\$ (75.91)	EFT6105267	CVDAR000019557	75.91	CRESCENT
		8/2/2021	\$0 REMIT	\$ (7.36)	\$0 REMIT	CVDAR000019557	7.36	CRESCENT
<b>TOTAL</b>				<b>(9,977.49)</b>			<b>9,977.49</b>	

To be filled out by Memorial Medical Center:

Date Received: 10/5/2021

Approved by: Mayra Martinez

Date of transfer: 10/13/2021

From Facility: CRESCENT

To Facility: Memorial Medical Center

Amount: 9,977.49

Requested Transfer Date #2: \_\_\_\_\_

Date of transfer: \_\_\_\_\_

From Facility: \_\_\_\_\_

To Facility: \_\_\_\_\_

Amount: \_\_\_\_\_

APPROVED  
ON

OCT 08 2021

COUNCIL ANDERSON  
CALHOUN COUNTY, TEXAS  
Clk# 000175

### Request for Transfer of Funds

Transfer #: \_\_\_\_\_

Date Requested \_\_\_\_\_

Payer \_\_\_\_\_

Requested by: \_\_\_\_\_

Requestor's email \_\_\_\_\_

Requestor's phone number \_\_\_\_\_

District or County \_\_\_\_\_

Facility \_\_\_\_\_

**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](mailto:cclevenger@mmcportlavaca.com)

[mmartinez@mmcportlavaca.com](mailto: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>
N/A	N/A	9/29/2021	EFT	4,101.10	EFT6106024	CVDAR000019557	195.18	THE CRESENT
N/A	N/A	9/29/2021	EFT	159.69	EFT6105999	CVDAR000019557	7.60	THE CRESENT
<b>TOTAL</b>				4,260.79			202.78	

**To be filled out by Memorial Medical Center:**

Date Received: 10/7/2021

Approved by: Mayra Martinez

Date of transfer: 10/13/2021

From Facility: CRESCENT

To Facility: MM CLINIC

Amount: 202.78

Requested Transfer Date #2: \_\_\_\_\_

Date of transfer: \_\_\_\_\_

From Facility: \_\_\_\_\_

To Facility: \_\_\_\_\_

Amount: \_\_\_\_\_

APPROVED  
ON

OCT 08 2021

COURTNEY ANDERSON  
CLERK CALHOUN COUNTY, TEXAS

CHK# 000174

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MEMORIAL MEDICAL CENTER

NH CRESCENT  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000174

88-2265/1131

Date 10-11-21

PAY

TO THE ORDER OF Memorial Medical Clinic

\$ 202 <sup>75</sup>/<sub>100</sub>

Two hundred two dollars <sup>75</sup>/<sub>100</sub>

DOLLARS



county auditor

FOR Medicare repayment

MP  
County Treasurer  
Security features are included. Details on back.

⑈000174⑈ ⑆113122655⑆

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MEMORIAL MEDICAL CENTER

NH CRESCENT  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000175

88-2265/1131

Date 10-11-21

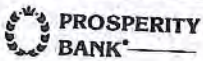
PAY

TO THE ORDER OF Memorial Medical Center

\$ 9,977. <sup>49</sup>/<sub>100</sub>

Nine thousand, nine hundred seventy-seven dollars <sup>49</sup>/<sub>100</sub>

DOLLARS



county auditor

FOR Medicare repayment

MP  
County Treasurer  
Security features are included. Details on back.

⑈000175⑈ ⑆113122655⑆





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**MEMORIAL MEDICAL CENTER**

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

000163

Date 10-11-21

88-2265/1131

**PAY**

TO THE  
ORDER OF

Memorial Medical Center

\$ 1,689 <sup>06</sup>/<sub>100</sub>

One thousand, six hundred eighty-nine dollars <sup>06</sup>/<sub>100</sub>

**DOLLARS**



**PROSPERITY  
BANK**

county auditor

FOR medicare repayment

**county treas**  
MP  
Security features are included. Details on back.

⑈000163⑈ ⑆113122655⑆



### Request for Transfer of Funds

Transfer #: \_\_\_\_\_  
 Date Requested \_\_\_\_\_  
 Payer \_\_\_\_\_  
 Requested by: \_\_\_\_\_  
 Requestor's email \_\_\_\_\_  
 Requestor's phone number \_\_\_\_\_  
 District or County \_\_\_\_\_  
 Facility \_\_\_\_\_

**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@mmcporthlavaca.com](mailto:cclevenger@mmcporthlavaca.com)

[mmartinez@mmcporthlavaca.com](mailto:mmartinez@mmcporthlavaca.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
N/A	N/A	9/29/2021	EFT	4,101.10	EFT6106024	CVDAR000018170	195.18	SOLERA WEST HOUSTON
N/A	N/A	9/29/2021	EFT	159.69	EFT6105999	CVDAR000019557	7.60	SOLERA WEST HOUSTON
<b>TOTAL</b>				4,260.79			202.78	

**To be filled out by Memorial Medical Center:**

Date Received: 10/7/2021  
 Approved by: Mayra Martinez  
 Date of transfer: 10/13/2021  
 From Facility: SOLERA  
 To Facility: MM CLINIC  
 Amount: 202.78  
 Requested Transfer Date #2: \_\_\_\_\_  
 Date of transfer: \_\_\_\_\_  
 From Facility: \_\_\_\_\_  
 To Facility: \_\_\_\_\_  
 Amount: \_\_\_\_\_

**APPROVED  
ON**

**OCT 08 2021**

COURNIE AUBIEGOR  
 CALHOUN COUNTY, TEXAS

CIC#  
 001173

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

001173

Date 10-11-21 88-2265/1131

PAY  
TO THE  
ORDER OF

Memorial Medical Clinic

\$ 202. <sup>76</sup>/<sub>100</sub>

Two hundred two dollars <sup>76</sup>/<sub>100</sub>

DOLLARS



PROSPERITY  
BANK

Country auditor

FOR medicare repayment

Country treasurer  
Security Features and  
Inclusions. Details on back.

⑈001173⑈ ⑆113122655⑆

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

001174

Date 10-11-21 88-2265/1131

PAY  
TO THE  
ORDER OF

Memorial Medical Center

\$ 9,977. <sup>49</sup>/<sub>100</sub>

Nine thousand, nine hundred seventy-seven dollars <sup>49</sup>/<sub>100</sub>

DOLLARS



PROSPERITY  
BANK

Country auditor

FOR medicare repayment

Country treasurer  
Security Features and  
Inclusions. Details on back.

⑈001174⑈ ⑆113122655⑆





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MP

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

000135

88-2265/1131

Date 10-11-21

**PAY**

TO THE  
ORDER OF

Memorial Medical Clinic

\$ 202. <sup>78</sup>/<sub>100</sub>

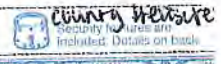
Two hundred two dollars <sup>3</sup>/<sub>100</sub>

**DOLLARS**



county auditor

FOR medicare repayment



⑈000135⑈ ⑆113122655⑆

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

000136

88-2265/1131

Date 10-11-21

**PAY**

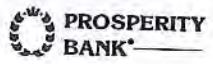
TO THE  
ORDER OF

Memorial Medical Center

\$ 9,977. <sup>49</sup>/<sub>100</sub>

Nine thousand, nine hundred seventy-seven dollars <sup>49</sup>/<sub>100</sub>

**DOLLARS**



county auditor

FOR medicare repayment



⑈000136⑈ ⑆113122655⑆







MEMORIAL MEDICAL CENTER 022020  
NH TUSCANY VILLAGE

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

1066

88-2265/1131-87

DATE 10-11-21

CHECK ARMOR

PAY TO THE ORDER OF Memorial Medical Clinic

\$ 202. <sup>78</sup>/<sub>100</sub>

Two hundred two dollars & <sup>78</sup>/<sub>100</sub>

DOLLARS

Photo Safe Deposit Details on back



PROSPERITY BANK

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

FOR Medicare repayment

county auditor

county treasurer

⑈001066⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER 022020  
NH TUSCANY VILLAGE

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

1067

88-2265/1131-87

DATE 10-11-21

CHECK ARMOR

PAY TO THE ORDER OF Memorial Medical Center

\$ 9977. <sup>49</sup>/<sub>100</sub>

Nine thousand, nine hundred seventy-seven dollars & <sup>49</sup>/<sub>100</sub>

DOLLARS

Photo Safe Deposit Details on back



PROSPERITY BANK

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

FOR Medicare repayment

county auditor

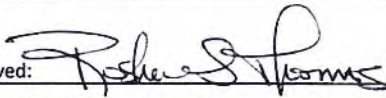
county treasurer

⑈001067⑈ ⑆113122655⑆

**Medicare Repayment**

NH Name	From CPSI Bank Acct #	CK#	Payee	GL #	Amt	Date
BROADMOOR			MMC	20351000	9,977.49	10/8/2021
BROADMOOR			MMCLINIC	20351000	202.78	10/8/2021
CRESCENT			MMCLINIC	20351000	202.78	10/8/2021
CRESCENT			MMC	20351001	9,977.49	10/8/2021
FORT BEND			MMC	20351000	1,689.06	10/8/2021
SOLERA			MMCLINIC	20351000	202.78	10/8/2021
SOLERA			MMC	20351001	9,977.49	10/8/2021
GOLDEN CREEK			MMCLINIC	20351000	202.78	10/8/2021
GOLDEN CREEK			MMC	20351000	9,977.49	10/8/2021
TUSCANY			MMCLINIC	20351000	202.78	10/8/2021
TUSCANY			MMC	20351000	9,977.49	10/8/2021
				<b>Total</b>	<b>52,590.41</b>	

Note:

Approved:   
**Roshanda Thomas, Assistant Administrator**

10/8/2021

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Cantex Transfer  
 Prosperity Accounts  
 10/8/2021

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				
<b>Ashford Gardens</b>		85,073.81	84,846.11	31,824.41		32,002.11	
						Bank Balance	32,002.11
						Variance	
						Leave in Balance	100.00
						AMERIGROUP AUG QIPP	27,419.85
						JULY INTEREST	38.78 o/s
						AUG INTEREST	17.83 o/s
						SEP INTEREST	21.09 o/s
						Adjust Balance/Transfer Amt	4,404.56
<b>Broadmoor</b>		24,059.82	16,999.21	65,086.77		72,147.38	43,570.57
						Bank Balance	72,147.38
						Variance	
						Leave in Balance	100.00
						AMERIGROUP AUG QIPP	11,335.93
						MEDICARE REPAYMENT TO MMC 10/8/21	10,180.27
						MEDICARE REPAYMENT DUE TO BETHANY	1,447.10 o/s
						MEDICARE REPAYMENT DUE TO TUSCANY	2,581.36 o/s
						MEDICARE REPAYMENT DUE TO MM CLINIC	447.42 o/s
						MEDICARE REPAYMENT DUE TO GOLDEN CREEK	2,425.04 o/s
						JULY INTEREST	32.13 o/s
						AUG INTEREST	14.00 o/s
						SEP INTEREST	13.56 o/s
						Adjust Balance/Transfer Amt	43,570.57
<b>Crescent</b>		57,885.99	50,843.75	23,745.64		30,787.88	
						Bank Balance	30,787.88
						Variance	
						Leave in Balance	100.00
						MEDICARE REPAYMENT DUE TO BETHANY	1,447.10 o/s
						MEDICARE REPAYMENT DUE TO TUSCANY	2,581.36 o/s
						MEDICARE REPAYMENT DUE TO MM CLINIC	447.42 o/s
						MEDICARE REPAYMENT DUE TO GOLDEN CREEK	2,425.04 o/s
						AMERIGROUP AUG QIPP	9,098.84
						MEDICARE REPAYMENT TO MMC 10/8/21	10,180.27
						JULY INTEREST	20.96 o/s
						AUG INTEREST	9.26 o/s
						SEP INTEREST	11.10 o/s
						Adjust Balance/Transfer Amt	4,466.53
<b>Fort Bend</b>		12,275.14	12,070.20	14,772.45		14,977.39	
						Bank Balance	14,977.39
						Variance	
						Leave in Balance	100.00
						MEDICARE REPAYMENT DUE TO MM CLINIC	78.97 o/s
						AMERISOURCE AUG QIPP	11,072.75
						MEDICARE REPAYMENT TO MMC 10/8/21	1,689.06
						JULY INTEREST	8.77 o/s
						AUG INTEREST	5.65 o/s
						SEP INTEREST	11.55 o/s
						Adjust Balance/Transfer Amt	2,010.64
<b>Solera at W Houston</b>		11,734.18	104,670.42	27,265.77		34,329.48	6,312.32
						Bank Balance	34,329.48
						Variance	
						Leave in Balance	100.00
						MEDICARE REPAYMENT DUE TO BETHANY	1,447.10 o/s
						MEDICARE REPAYMENT DUE TO TUSCANY	2,581.36 o/s
						MEDICARE REPAYMENT DUE TO MM CLINIC	447.42 o/s
						MEDICARE REPAYMENT DUE TO GOLDEN CREEK	2,425.04 o/s
						AMERISOURCE AUG QIPP	10,773.18
						MEDICARE REPAYMENT TO MMC 10/8/21	10,180.27
						JULY INTEREST	26.44 o/s
						AUG INTEREST	16.93 o/s
						SEP INTEREST	19.42 o/s
						Adjust Balance/Transfer Amt	6,312.32

APPROVED ON  
 OCT 08 2021  
 COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

43,570.57 +  
 6,312.32 +  
 49,882.89 \*

TOTAL TRANSFERS 49,882.89  
 Approved: *[Signature]*  
 Erin Clevenger, CNO 10/8/2021

		MMC PORTION							
		Transfer-Out	Transfer-In	QJPP/Comp1	QJPP/Comp2	QJPP/Comp3	QJPP/Comp4 &Lapse	QJPP TI	NH PORTION
<b>Ashford Gardens</b>									
10/4/2021	AMERIGROUP CORPO E-PAYMENT EE5240013 111000	-	29,761.66	25,078.03	4,683.63	-	-	27,419.85	2,341.82
10/5/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,062.75	-	-	-	-	-	2,062.75
10/7/2021	WIRE OUT ASHFORD HEALTH CARE CENTER LTD	84,846.11	-	-	-	-	-	-	-
		84,846.11	31,824.41	25,078.03	4,683.63	-	-	27,419.85	4,404.57

		MMC PORTION							
		Transfer-Out	Transfer-In	QJPP/Comp1	QJPP/Comp2	QJPP/Comp3	QJPP/Comp4 &Lapse	QJPP TI	NH PORTION
<b>Broadmoor</b>									
10/4/2021	UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384	-	1,694.38	-	-	-	-	-	1,694.38
10/4/2021	NOVITAS SOLUTION HCCLAIMPMT 676357 42000140	-	7,632.83	-	-	-	-	-	7,632.83
10/4/2021	AMERIGROUP CORPO E-PAYMENT EE5240016 111000	-	12,294.73	10,377.12	1,917.61	-	-	11,335.93	958.80
10/4/2021	AARP Supplementa HCCLAIMPMT 746003411 124384	-	2,782.50	-	-	-	-	-	2,782.50
10/5/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	343.05	-	-	-	-	-	343.05
10/5/2021	NOVITAS SOLUTION HCCLAIMPMT 676357 42000103	-	7,845.78	-	-	-	-	-	7,845.78
10/5/2021	HUMANA CHA DISB HCCLAIMPMT 390861 4200001754	-	5,530.00	-	-	-	-	-	5,530.00
10/6/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	520.00	-	-	-	-	-	520.00
10/6/2021	AARP Supplementa HCCLAIMPMT 746003411 124384	-	6,863.50	-	-	-	-	-	6,863.50
10/7/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	16,999.21	-	-	-	-	-	-	-
10/7/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	19,580.00	-	-	-	-	-	19,580.00
		16,999.21	65,086.77	10,377.12	1,917.61	-	-	11,335.93	53,750.85

		MMC PORTION							
		Transfer-Out	Transfer-In	QJPP/Comp1	QJPP/Comp2	QJPP/Comp3	QJPP/Comp4 &Lapse	QJPP TI	NH PORTION
<b>Crescent</b>									
10/4/2021	AMERIGROUP CORPO E-PAYMENT EE5240015 111000	-	9,869.64	8,328.03	1,541.61	-	-	9,098.84	770.80
10/5/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	4,256.00	-	-	-	-	-	4,256.00
10/6/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	6,290.00	-	-	-	-	-	6,290.00
10/7/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	50,843.75	-	-	-	-	-	-	-
10/7/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	3,330.00	-	-	-	-	-	3,330.00
		50,843.75	23,745.64	8,328.03	1,541.61	-	-	9,098.84	14,646.81

		MMC PORTION							
		Transfer-Out	Transfer-In	QJPP/Comp1	QJPP/Comp2	QJPP/Comp3	QJPP/Comp4 &Lapse	QJPP TI	NH PORTION
<b>Fort Bend</b>									
10/4/2021	NOVITAS SOLUTION HCCLAIMPMT 675663 420000140	-	88.19	-	-	-	-	-	88.19
10/4/2021	AMERIGROUP CORPO E-PAYMENT EE5240012 111000	-	12,012.76	10,132.74	1,880.02	-	-	11,072.75	940.01
10/5/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	260.00	-	-	-	-	-	260.00
10/6/2021	AARP Supplementa HCCLAIMPMT 746003411 124384	-	2,411.50	-	-	-	-	-	2,411.50
10/7/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	12,070.20	-	-	-	-	-	-	-
		12,070.20	14,772.45	10,132.74	1,880.02	-	-	11,072.75	3,699.70

		MMC PORTION							
		Transfer-Out	Transfer-In	QJPP/Comp1	QJPP/Comp2	QJPP/Comp3	QJPP/Comp4 &Lapse	QJPP TI	NH PORTION
<b>Solera at West Houston</b>									
10/4/2021	NOVITAS SOLUTION HCCLAIMPMT 676310 420000140	-	4,970.77	-	-	-	-	-	4,970.77
10/4/2021	AMERIGROUP CORPO E-PAYMENT EE5240014 111000	-	11,714.39	9,831.96	1,882.43	-	-	10,773.18	941.22
10/6/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	6,150.00	-	-	-	-	-	6,150.00
10/6/2021	HMP HCCLAIMPMT 390862 42000010028598 DISDATA	-	3,944.51	-	-	-	-	-	3,944.51
10/7/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	104,670.47	-	-	-	-	-	-	-
10/7/2021	Amerigroup TXSC HCCLAIMPMT 3162420175 111000	-	76.10	-	-	-	-	-	76.10
10/7/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	410.00	-	-	-	-	-	410.00
		104,670.47	27,265.77	9,831.96	1,882.43	-	-	10,773.18	16,492.60

TOTALS

269,429.74	162,695.04	63,747.88	11,905.30	-	-	-	-	69,700.53	92,994.51
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# Quick View

Select Quick View Accounts  
Account Number / Name

Account Type

Select Group  
Groups



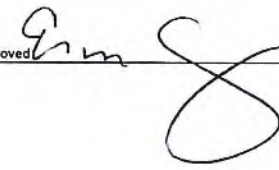

DDA Data reported as of Oct 8, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$5,842,209.48</b>	<b>\$6,012,883.37</b>	<b>\$5,842,209.48</b>	<b>\$6,323,113.7</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$6,038.14	\$6,038.14	\$6,038.14	\$6,038.1
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$62,052.98	\$62,574.77	\$62,052.98	\$88,881.4
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$535.85	\$535.85	\$535.85	\$535.8
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$3,853,891.85	\$3,940,993.85	\$3,853,891.85	\$3,843,234.1
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.41	\$431.41	\$431.41	\$431.4
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$32,002.11 ✓	\$59,060.98	\$32,002.11	\$116,848.2
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$72,147.38 ✓	\$72,147.38	\$72,147.38	\$69,566.5
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$30,787.88 ✓	\$36,658.58	\$30,787.88	\$78,301.6
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$14,977.39 ✓	\$14,977.39	\$14,977.39	\$27,047.5
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$34,329.48 ✓	\$51,545.01	\$34,329.48	\$138,513.6
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,108,632.49	\$1,108,632.49	\$1,108,632.49	\$1,108,632.4
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$79,862.12	\$81,450.71	\$79,862.12	\$210,599.0
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$126.45	\$126.45	\$126.45	\$45,660.5
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$507,544.06	\$522,145.47	\$507,544.06	\$468,609.6
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$38,849.89	\$55,564.89	\$38,849.89	\$120,213.1

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Nexion Transfer  
 Prosperity Accounts  
 10/8/2021

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		70,253.46 ✓	34,196.70 ✓	25,996.22 ✓		62,052.98	15,815.95
						Bank Balance Variance	62,052.98 ✓
						Leave in Balance	100.00
						Superior AUG/ ADJ QJPP	31,426.90 o/s
						MEDICARE REPAYMENT DUE TO BETHANY	1,447.10 o/s
						MEDICARE REPAYMENT DUE TO TUSCANY	2,581.36 o/s
						MEDICARE REPAYMENT DUE TO CLINIC	447.42 o/s
						MEDICARE REPAYMENT TO MMC 10/8/21	10,180.27 ✓
						JULY INTEREST	26.48 o/s
						AUG INTEREST	10.27 o/s
						SEP INTEREST	17.23 o/s
						Adjust Balance/Transfer Amt	15,815.95 ✓

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   
 Erin Clevenger, CNO 10/8/2021

APPROVED  
 ON  
 OCT 08 2021  
 COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Golden Creek**

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&L apse	QJPP TI	
10/4/2021 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9	-	5,500.00						5,500.00
10/5/2021 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9	-	8,568.00						8,568.00
10/5/2021 ACH SETTLEMENT SERVICE 4105523439 9601693864	-	4,560.00						4,560.00
10/7/2021 WIRE OUT NEXION HEALTH AT GOLDEN CREEK	34,196.70	-						-
10/7/2021 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9	-	1,680.00						1,680.00
10/7/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2	-	5,688.22						5,688.22
	<b>34,196.70</b>	<b>25,996.22</b>	-	-	-	-	-	<b>25,996.22</b>



# Quick View

Select Quick View Accounts  
Account Number / Name

Account Type

Select Group  
Groups




DDA

Data reported as of Oct 8, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$5,842,209.48</b>	<b>\$6,012,883.37</b>	<b>\$5,842,209.48</b>	<b>\$6,323,113.7</b>
*4551 CAL CO INDIGENT HEALTHCARE	\$6,038.14	\$6,038.14	\$6,038.14	\$6,038.1
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$62,052.98 ✓	\$62,574.77	\$62,052.98	\$88,881.4
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$535.85	\$535.85	\$535.85	\$535.8
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$3,853,891.85	\$3,940,993.85	\$3,853,891.85	\$3,843,234.1
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.41	\$431.41	\$431.41	\$431.4
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$32,002.11	\$59,060.98	\$32,002.11	\$116,848.2
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$72,147.38	\$72,147.38	\$72,147.38	\$69,566.5
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$30,787.88	\$36,658.58	\$30,787.88	\$78,301.6
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$14,977.39	\$14,977.39	\$14,977.39	\$27,047.5
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$34,329.48	\$51,545.01	\$34,329.48	\$138,513.8
*2998 MMC -MONEY MARKET FUND	\$1,108,632.49	\$1,108,632.49	\$1,108,632.49	\$1,108,632.4
*5506 MMC -NH BETHANY SENIOR LIVING	\$79,862.12	\$81,450.71	\$79,862.12	\$210,599.0
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$126.45	\$126.45	\$126.45	\$45,660.5
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$507,544.06	\$522,145.47	\$507,544.06	\$468,609.6
*3407 MMC -NH TUSCANY VILLAGE	\$38,849.89	\$55,564.89	\$38,849.89	\$120,213.1

Memorial Medical Center  
 Nursing Home UPL  
 Weekly HMG Transfer  
 Prosperity Accounts  
 10/8/2021

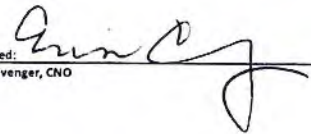
Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza- Private Pay		393,171.81		114,372.25			507,544.06	13,932.23
						Bank Balance	507,544.06	
						Variance		
						Leave in Balance	100.00	
						ECHO CLAIM PAYMENTS TO HOLD	474,496.32	
						SUPERIOR AUG QIPP	18,947.29	0/s
						JULY INTEREST	24.01	0/s
						AUG INTEREST	9.54	0/s
						SEP INTEREST	34.67	0/s
						Adjust Balance/Transfer Amt	13,932.23	

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza-Medicare/Medicaid		45,660.51	45,534.06				126.45	
						Bank Balance	126.45	
						Variance	0.00	
						Leave in Balance	100.00	
						JULY INTEREST	15.04	0/s
						AUG INTEREST	6.83	0/s
						SEP INTEREST	4.58	0/s
						Adjust Balance/Transfer Amt		

Routing Information for Gulf Pointe Plaza:

TOTAL TRANSFERS 13,932.23

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:   
 Erin Clevenger, CNO 10/8/2021

APPROVED  
 ON  
 OCT 08 2021  
 COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Gulf Pointe Plaza-Private Pay**

10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/4/2021 HNB - ECHO HCCLAIMPMT 746003411 440000290997  
 10/5/2021 PNC-ECHO HCCLAIMPMT 746003411 41000121802554  
 10/5/2021 PNC-ECHO HCCLAIMPMT 746003411 41000121802552  
 10/5/2021 HNB - ECHO HCCLAIMPMT 746003411 440000234430  
 10/5/2021 HNB - ECHO HCCLAIMPMT 746003411 440000234430  
 10/5/2021 HNB - ECHO HCCLAIMPMT 746003411 440000234430  
 10/5/2021 HNB - ECHO HCCLAIMPMT 746003411 440000234430  
 10/5/2021 HNB - ECHO HCCLAIMPMT 746003411 440000234430  
 10/5/2021 HNB - ECHO HCCLAIMPMT 746003411 440000264506  
 10/6/2021 HNB - ECHO HCCLAIMPMT 746003411 440000264506  
 10/7/2021 NDC SWEEP FAC H261 21000020327052 SWEEP FR  
 10/7/2021 HNB - ECHO HCCLAIMPMT 746003411 440000293176  
 10/7/2021 HNB - ECHO HCCLAIMPMT 746003411 440000293176  
 10/7/2021 HNB - ECHO HCCLAIMPMT 746003411 440000293176  
 10/7/2021 HNB - ECHO HCCLAIMPMT 746003411 440000293176  
 10/7/2021 HNB - ECHO HCCLAIMPMT 746003411 440000293176  
 10/7/2021 HNB - ECHO HCCLAIMPMT 746003411 440000293176  
 10/7/2021 AETNA AS01 HCCLAIMPMT 1922092790 51000019337

Transfer-Out	Transfer-In	MMC PORTION				NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	
-	1,636.28	-	-	-	-	1,636.28
-	23.52	-	-	-	-	23.52
-	401.56	-	-	-	-	401.56
-	23.52	-	-	-	-	23.52
-	31.57	-	-	-	-	31.57
-	16,901.04	-	-	-	-	16,901.04
-	2,702.14	-	-	-	-	2,702.14
-	1,465.64	-	-	-	-	1,465.64
-	541.66	-	-	-	-	541.66
-	1,033.85	-	-	-	-	1,033.85
-	8,175.01	-	-	-	-	8,175.01
-	15.68	-	-	-	-	15.68
-	4,426.72	-	-	-	-	4,426.72
-	23.52	-	-	-	-	23.52
-	7,252.46	-	-	-	-	7,252.46
-	30,783.63	-	-	-	-	30,783.63
-	8,251.88	-	-	-	-	8,251.88
-	2,009.20	-	-	-	-	2,009.20
-	6,008.49	-	-	-	-	6,008.49
-	1,989.11	-	-	-	-	1,989.11
-	8,357.93	-	-	-	-	8,357.93
-	29.74	-	-	-	-	29.74
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	114,372.25	-	-	-	-	114,372.25

**Gulf Pointe Plaza-Medicare/Medicaid**

10/7/2021 WIRE OUT HMG SERVICES, LLC

Transfer-Out	Transfer-In	MMC PORTION				NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	
45,534.06	-	-	-	-	-	-
45,534.06	-	-	-	-	-	-
45,534.06	114,372.25	-	-	-	-	114,372.25

# Quick View

Select Quick View Accounts  
Account Number / Name

Account Type

Select Group  
Groups




DDA

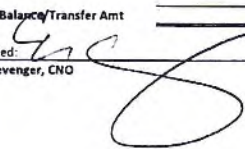
Data reported as of Oct 8, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$5,842,209.48</b>	<b>\$6,012,883.37</b>	<b>\$5,842,209.48</b>	<b>\$6,323,113.7</b>
*4551 CAL CO INDIGENT HEALTHCARE	\$6,038.14	\$6,038.14	\$6,038.14	\$6,038.1
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$62,052.98	\$62,574.77	\$62,052.98	\$88,881.4
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$535.85	\$535.85	\$535.85	\$535.8
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$3,853,891.85	\$3,940,993.85	\$3,853,891.85	\$3,843,234.1
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.41	\$431.41	\$431.41	\$431.4
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$32,002.11	\$59,060.98	\$32,002.11	\$116,848.2
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$72,147.38	\$72,147.38	\$72,147.38	\$69,566.5
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$30,787.88	\$36,658.58	\$30,787.88	\$78,301.6
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$14,977.39	\$14,977.39	\$14,977.39	\$27,047.5
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$34,329.48	\$51,545.01	\$34,329.48	\$138,513.8
*2998 MMC -MONEY MARKET FUND	\$1,108,632.49	\$1,108,632.49	\$1,108,632.49	\$1,108,632.4
*5506 MMC -NH BETHANY SENIOR LIVING	\$79,862.12	\$81,450.71	\$79,862.12	\$210,599.0
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$126.45 ✓	\$126.45	\$126.45	\$45,660.5
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$507,544.06 ✓	\$522,145.47	\$507,544.06	\$468,609.6
*3407 MMC -NH TUSCANY VILLAGE	\$38,849.89	\$55,564.89	\$38,849.89	\$120,213.1

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Tuscan Transfer  
 Prosperity Accounts  
 10/8/2021

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
Tuscany Senior Living		86,292.81	81,363.25	33,920.33			38,849.89	No Transfer
						Bank Balance	38,849.89	
						Variance		
						Leave in Balance	100.00	
						AMERIGROUP AUG QIPP	29,489.17	
						MEDICARE REPAYMENT TO MMC 10/8/21	10,180.27	
						MOLINA QIPP ADJ	510.00	
						MEDICARE REPAYMENT DUE TO BETHANY	1,447.10	
						MEDICARE REPAYMENT DUE TO MM CLINIC	447.42	
						MEDICARE REPAYMENT DUE TO GOLDEN CREEK	2,425.04	
						Adjust Balance/Transfer Amt	(5,749.11)	

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:  10/8/2021  
 Erin Clevenger, CNO

APPROVED  
 ON  
 OCT 08 2021  
 COURTNEY ANDERSON  
 CALHOUN COUNTY, TEXAS

**Tuscany Village**

		MMC PORTION					NH PORTION	
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
10/4/2021 AMERIGROUP CORPO E-PAYMENT EE52240017 111000	-	30,435.97	28,542.36	1,893.61	-	-	29,489.17	946.81
10/5/2021 NOVITAS SOLUTION HCLCLAIMPMT 676201 420000103	-	3,484.36	-	-	-	-	-	3,484.36
10/7/2021 WIRE OUT LINBAR ENTERPRISES, LLC	81,363.25	-	-	-	-	-	-	-
	81,363.25	33,920.33	28,542.36	1,893.61	-	-	29,489.17	4,431.17

# Quick View

Select Quick View Accounts  
Account Number / Name

Account Type

Select Group  
Groups




DDA

Data reported as of Oct 8, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$5,842,209.48</b>	<b>\$6,012,883.37</b>	<b>\$5,842,209.48</b>	<b>\$6,323,113.7</b>
*4551 CAL CO INDIGENT HEALTHCARE	\$6,038.14	\$6,038.14	\$6,038.14	\$6,038.1
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$62,052.98	\$62,574.77	\$62,052.98	\$88,881.4
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$535.85	\$535.85	\$535.85	\$535.8
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$3,853,891.85	\$3,940,993.85	\$3,853,891.85	\$3,843,234.1
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.41	\$431.41	\$431.41	\$431.4
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$32,002.11	\$59,060.98	\$32,002.11	\$116,848.2
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$72,147.38	\$72,147.38	\$72,147.38	\$69,566.5
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$30,787.88	\$36,658.58	\$30,787.88	\$78,301.6
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$14,977.39	\$14,977.39	\$14,977.39	\$27,047.5
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$34,329.48	\$51,545.01	\$34,329.48	\$138,513.6
*2998 MMC -MONEY MARKET FUND	\$1,108,632.49	\$1,108,632.49	\$1,108,632.49	\$1,108,632.4
*5506 MMC -NH BETHANY SENIOR LIVING	\$79,862.12	\$81,450.71	\$79,862.12	\$210,599.0
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$126.45	\$126.45	\$126.45	\$45,660.5
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$507,544.06	\$522,145.47	\$507,544.06	\$468,609.6
*3407 MMC -NH TUSCANY VILLAGE	\$38,849.89	\$55,564.89	\$38,849.89	\$120,213.1

Memorial Medical Center  
 Nursing Home UPL  
 Weekly HSLTransfer  
 Prosperity Accounts  
 10/8/2021

Nursing Home	Account Number	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		142,228.22	142,011.20	79,645.10			79,862.12	79,645.10
						Bank Balance	79,862.12	
						Variance	79,862.12	
						Leave in Balance	100.00	

JULY INTEREST 72.51 O/S  
 AUG INTEREST 22.53 O/S  
 SEP INTEREST 21.98 O/S  
 Adjust Balance/Transfer Amt 79,645.10

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:   
 Erin Clevenger, CNO 10/8/2021

APPROVED  
 ON  
 OCT 08 2021  
 COURTNEY ANDERSON  
 CLERK  
 CALHOUN COUNTY, TEXAS





## Quick View

Select Quick View Accounts  
Account Number / Name

Account Type



Select Group  
Groups




DDA

Data reported as of Oct 8, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$5,842,209.48</b>	<b>\$6,012,883.37</b>	<b>\$5,842,209.48</b>	<b>\$6,323,113.7</b>
*4551 CAL CO INDIGENT HEALTHCARE	\$6,038.14	\$6,038.14	\$6,038.14	\$6,038.1
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$62,052.98	\$62,574.77	\$62,052.98	\$88,881.4
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$535.85	\$535.85	\$535.85	\$535.8
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$3,853,891.85	\$3,940,993.85	\$3,853,891.85	\$3,843,234.1
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.41	\$431.41	\$431.41	\$431.4
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$32,002.11	\$59,060.98	\$32,002.11	\$116,848.2
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$72,147.38	\$72,147.38	\$72,147.38	\$69,566.5
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$30,787.88	\$36,658.58	\$30,787.88	\$78,301.6
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*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$34,329.48	\$51,545.01	\$34,329.48	\$138,513.8
*2998 MMC -MONEY MARKET FUND	\$1,108,632.49	\$1,108,632.49	\$1,108,632.49	\$1,108,632.4
*5506 MMC -NH BETHANY SENIOR LIVING	\$79,862.12 ✓	\$81,450.71	\$79,862.12	\$210,599.0
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$126.45	\$126.45	\$126.45	\$45,660.5
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$507,544.06	\$522,145.47	\$507,544.06	\$468,609.6
*3407 MMC -NH TUSCANY VILLAGE	\$38,849.89	\$55,564.89	\$38,849.89	\$120,213.1

Ashford

MEMORIAL MEDICAL CENTER  
CHECK REQUEST

P MEMORIAL MEDICAL CENTER

Date Requested: 10/8/21

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APPROVED  
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FOR ACCT. USE ONLY

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OCT 08 2021

Imprest Cash

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COURTNEY ANDERSON  
CALHOUN COUNTY, TEXAS

A/P Check

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Mail Check to Vendor

Return Check to Dept

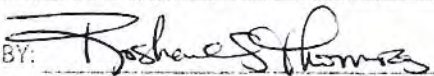
CHK# 001158

AMOUNT \$27,419.85

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AUGUST QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

Broadmoor

MEMORIAL MEDICAL CENTER  
CHECK REQUEST

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MEMORIAL MEDICAL CENTER

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Date Requested: 10/8/21

APPROVED  
ON  
OCT 08 2021  
COURNEY ARZBOR  
CALHOUN COUNTY, TEXAS  
CHK# 00140

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

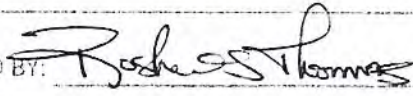
Return Check to Dept

AMOUNT \$11,335.93

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AUGUST QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

Crescent

MEMORIAL MEDICAL CENTER  
CHECK REQUEST

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MEMORIAL MEDICAL CENTER  
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Date Requested: 10/8/21

APPROVED  
ON  
OCT 08 2021

COUNTY ANGELOZ  
CALHOUN COUNTY, TEXAS  
CL# 0073

FOR ACCT. USE ONLY

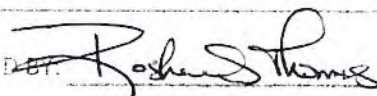
Imprest Cash  
 A/P Check  
 Mail Check to Vendor  
 Return Check to Dept

AMOUNT \$9,098.84

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AUGUST QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

Fort Bend

MEMORIAL MEDICAL CENTER  
CHECK REQUEST

P MEMORIAL MEDICAL CENTER

Date Requested: 10/8/21

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APPROVED  
BY

OCT 08 2021

GONNIE ANDRUE  
CALHOUN COUNTY, TEXAS

CK#00062

FOR ACCT. USE ONLY

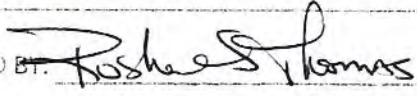
- Imprest Cash
- A/P Check
- Mail Check to Vendor
- Return Check to Dept.

AMOUNT \$11,072.75

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AUGUST QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

Solera

# MEMORIAL MEDICAL CENTER CHECK REQUEST

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MEMORIAL MEDICAL CENTER

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Date Requested: 10/8/21

APPROVED  
ON  
OCT 08 2021  
COURTNEY ANDERSON  
CALHOUN COUNTY, TEXAS  
ck# 001172

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept

AMOUNT \$10,773.18

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AUGUST QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Roshe Thomas*

Tuscany

# MEMORIAL MEDICAL CENTER CHECK REQUEST

P MEMORIAL MEDICAL CENTER

Date Requested: 10/8/21

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APPROVED  
ON  
OCT 08 2021  
COUNTY CLERK  
CALHOUN COUNTY, TEXAS  
CL#1065

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

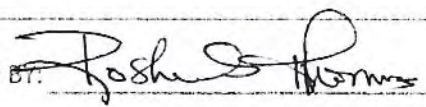
Return Check to Dept

AMOUNT \$29,489.17

G/L NUMBER: 10255040

EXPLANATION: \_\_\_\_\_

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 



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

1158

88-2265/1131-87

10-11-21

Date

CHECK ARMOR  
Photo Safe Deposit  
Details on back

Pay to the  
Order of Memorial Medical Center

\$ 27,419. <sup>85</sup>/<sub>100</sub>

Twenty-seven thousand, four hundred nineteen dollars <sup>85</sup>/<sub>100</sub> Dollars



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

For Amerigroup August QIPP

⑆ 1 1 3 1 2 2 6 5 5 ⑆

\_\_\_\_\_ county auditor

\_\_\_\_\_ county treasurer

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

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

000140

88-2265/1131

Date 10-11-21

PAY  
TO THE  
ORDER OF Memorial Medical Center

\$ 11,335. <sup>93</sup>/<sub>100</sub>

Eleven thousand, three hundred thirty-five dollars <sup>93</sup>/<sub>100</sub> DOLLARS



PROSPERITY BANK

\_\_\_\_\_ county auditor

FOR Amerigroup Aug. QIPP

\_\_\_\_\_ county treasurer  
Security features and included details on back

⑆ 000 1 4 0 ⑆ ⑆ 1 1 3 1 2 2 6 5 5 ⑆

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

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

000173

88-2265/1131

Date 10-11-21

PAY  
TO THE  
ORDER OF Memorial Medical Center

\$ 9,098. <sup>84</sup>/<sub>100</sub>

Nine thousand, ninety-eight dollars <sup>84</sup>/<sub>100</sub> DOLLARS



PROSPERITY BANK

\_\_\_\_\_ county auditor

FOR Amerigroup Aug QIPP

\_\_\_\_\_ county treasurer  
Security features and included details on back

⑆ 000 1 7 3 ⑆ ⑆ 1 1 3 1 2 2 6 5 5 ⑆

MEMORIAL MEDICAL CENTER

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

000162

88-2265/1131

Date 10-11-21

PAY TO THE ORDER OF

Memorial Medical Center

\$ 11,072. <sup>75</sup>/<sub>100</sub>

Eleven thousand, seventy-two dollars <sup>3</sup>/<sub>100</sub>

DOLLARS



County Auditor

FOR Amerigroup Aug QIPP



⑈000162⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH SOLERA  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

001172

88-2265/1131

Date 10-11-21

PAY TO THE ORDER OF

Memorial Medical Clinic

\$ 10,773. <sup>18</sup>/<sub>100</sub>

Ten thousand, seven hundred seventy-three dollars <sup>3</sup>/<sub>100</sub>

DOLLARS



County Auditor

FOR Amerigroup Aug QIPP



⑈001172⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER 022020  
NH TUSCANY VILLAGE

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

1065

88-2265/1131-87

DATE 10-11-21

PAY TO THE ORDER OF

Memorial Medical Center

\$ 29,489. <sup>17</sup>/<sub>100</sub>

Twenty-nine thousand, four hundred eighty-nine dollars <sup>3</sup>/<sub>100</sub>

DOLLARS



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



County Auditor

FOR

County Treasurer

⑈001065⑈ ⑆113122655⑆

RUN DATE:10/11/21  
TIME:12:40

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 3  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHA 001158 10/11/21 27,419.85 MMC *Ashtford*  
TOTALS: 27,419.85

APPROVED  
ON

OCT 11 2021

COUNCIL ANDERSON  
CALHOUN COUNTY, TEXAS

RUN DATE:10/11/21  
TIME:12:40

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 4  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHB 000140 10/11/21 11,335.93 MMC  
NHB \* 000141 10/11/21 9,977.49 MMC  
NHB 000143 10/11/21 202.78 MMCLINIC  
TOTALS: 21,516.20

*Broadmoor*

APPROVED  
ON

OCT 11 2021

COWNEY A. HERRICK  
CALHOUN COUNTY, TEXAS

RUN DATE:10/11/21  
TIME:12:40

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 5  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHC 000173 10/11/21 9,098.84 MMC  
NHC 000174 10/11/21 202.78 MMCLINIC  
NHC 000175 10/11/21 9,977.49 MMC  
TOTALS: 19,279.11

*Crescent*

APPROVED  
ON

OCT 11 2021

COURTNEY ANDERSON  
CALHOUN COUNTY, TEXAS

RUN DATE:10/11/21  
TIME:12:40

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 6  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHF 000162 10/11/21 11,072.75 MMC  
NHF 000163 10/11/21 1,689.06 MMC  
TOTALS: 12,761.81

*Furt Bend*

APPROVED  
ON  
OCT 11 2021  
COUNTY CLERK  
GALVEZ COUNTY, TEXAS

RUN DATE:10/11/21  
TIME:12:40

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 8  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHS \* 000172 10/11/21 10,773.18 MMC  
NHS 001173 10/11/21 202.78 MMCLINIC  
NHS 001174 10/11/21 9,977.49 MMC  
TOTALS: 20,953.45

*Solem*

APPROVED  
ON

OCT 11 2021

COURTNEY A. SUNDOR  
CALHOUN COUNTY, TEXAS

RUN DATE:10/11/21  
TIME:12:40

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 7  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHG 000135 10/11/21 202.78 MMCLINIC  
NHG 000136 10/11/21 9,977.49 MMC  
TOTALS: 10,180.27

*golden creek*

APPROVED  
ON

OCT 11 2021

COURTNEY ANDERSON  
CALHOUN COUNTY, TEXAS



RUN DATE:10/11/21  
TIME:12:40

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
10/11/21 THRU 10/11/21

PAGE 9  
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

TUS 001065 10/11/21 29,489.17 MMC  
TUS 001066 10/11/21 202.78 MMCLINIC  
TUS 001067 10/11/21 9,977.49 MMC  
TOTALS: 39,669.44

*Tuscany*

APPROVED  
ON

OCT 11 2021

COURTNEY ANDERSON  
CALHOUN COUNTY, TEXAS

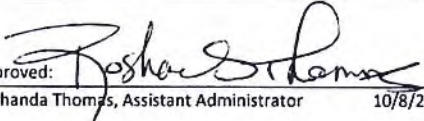
QIPP Payment to MMC from Nursing Facilities

Commissioner's Court

10/11/2021

NH Name	From Bank Acct #	Ck #	Payee	GL #	AMERIGROUP AUG QIPP				TOTAL	Date
Ashford	10000018 - Prosperity		MMC -Prosperity Operating #10000001	10255040	27,419.85				27,419.85	10/11/2021
Broadmoor	10000019 - Prosperity		MMC -Prosperity Operating #10000001	10255040	11,335.93				11,335.93	10/11/2021
Crescent	10000020 - Prosperity		MMC -Prosperity Operating #10000001	10255040	9,098.84				9,098.84	10/11/2021
Fort Bend	10000021 - Prosperity		MMC -Prosperity Operating #10000001	10255040	11,072.75				11,072.75	10/11/2021
Solera	10000022 - Prosperity		MMC -Prosperity Operating #10000001	10255040	10,773.18				10,773.18	10/11/2021
Golden Creek	10000023 - Prosperity		MMC -Prosperity Operating #10000001	10255040					-	10/11/2021
Gulf Pointe-PP	10000114 - Prosperity		MMC -Prosperity Operating #10000001	10255040					-	10/11/2021
Gulf Pointe-MM	10000025 - Prosperity		MMC -Prosperity Operating #10000001						-	10/11/2021
Bethany			MMC -Prosperity Operating #10000001						-	10/11/2021
Tuscany			MMC -Prosperity Operating #10000001	10255040	29,489.17				29,489.17	10/11/2021
				Total:	99,189.72		-	-	99,189.72	

Note:

Approved:   
 Roshanda Thomas, Assistant Administrator 10/8/2021