

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR ---March 30, 2022**

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

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 826,910.60
TOTAL TRANSFERS BETWEEN FUNDS	\$ 149,511.71
TOTAL NURSING HOME UPL EXPENSES	\$ 1,318,599.62
TOTAL INTER-GOVERNMENT TRANSFERS	\$ 137,415.76
<b>GRAND TOTAL DISBURSEMENTS APPROVED March 30, 2022</b>	<b>\$ 2,432,437.69</b>

**APPROVED**

**MAR 30 2022**

**CALHOUN COUNTY  
COMMISSIONERS COURT**

**MEMORIAL MEDICAL CENTER**  
**COMMISSIONERS COURT APPROVAL LIST FOR ---March 30, 2022**

**PAYABLES AND PAYROLL**

3/24/2022 Weekly Payables	373,820.02
3/24/2022 Patient Refunds	19,626.66
3/28/2022 McKesson-340B Prescription Expense	8,256.21
3/28/2022 Amerisource Bergen-340B Prescription Expense	344.83
3/28/2022 Payroll Liabilities -Payroll Taxes	102,215.81
3/28/2022 Payroll	321,880.95

**Prosperity Electronic Bank Payments**

3/25/2022 Credit Card & Lease Fees	60.19
3/21-3/25/22 Pay Plus-Patient Claims Processing Fee	705.93

**TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS** **\$ 826,910.60**

**TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES**

3/24/2022 MMC Operating to Solera-correction of NH insurance payment deposited into MMC Operating in error	215.77
3/24/2022 MMC Operating to Broadmoor-correction of NH insurance payment deposited into MMC Operating	12,129.05
3/24/2022 MMC Operating to Crescent-correction of NH insurance payment deposited into MMC Operating in error	3,881.43
3/24/2022 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	37,209.79
3/24/2022 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating	9,502.15
3/24/2022 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	29,617.03
3/24/2022 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	21,780.75

**MEDICARE ADVANCE PAYMENT RECOUP**

3/28/2022 Broadmoor to MMC Operating-correction of Broadmoor medicare recoup taken from MMC Operating	2,423.32
3/28/2022 Crescent to MMC Operating-correction of Crescent medicare recoup taken from MMC Operating	2,423.32
3/28/2022 Crescent to Tuscany Village-correction of Crecent medicare recoup taken from Tuscany Village	27,905.78
3/28/2022 Solera to MMC Operating-correction of Solera medicare recoup taken from MMC Operating	2,423.32

**TOTAL TRANSFERS BETWEEN FUNDS** **\$ 149,511.71**

**NURSING HOME UPL EXPENSES**

3/28/2022 Nursing Home UPL-Cantex Transfer	636,072.87
3/28/2022 Nursing Home UPL-Nexion Transfer	102,963.84
3/28/2022 Nursing Home UPL-HMG Transfer	168,457.58
3/28/2022 Nursing Home UPL-Tuscany Transfer	164,058.80
3/28/2022 Nursing Home UPL-HSL Transfer	244,235.65

**TRANSFER BETWEEN FUNDS TO MMC OPERATING**

3/28/2022 Golden Creek-MMC insurance payment deposited into GoldenCreek in error	2,454.37
3/28/2022 Gulf Pointe PP-MMC insurance payment deposited into Gulf Pointe in error	356.51

**TOTAL NURSING HOME UPL EXPENSES** **\$ 1,318,599.62**

**INTER-GOVERNMENT TRANSFERS**

3/28/2022 IGT UC DY10 to be paid April 08, 2022	137,415.76
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**TOTAL INTER-GOVERNMENT TRANSFERS** **\$ 137,415.76**

**GRAND TOTAL DISBURSEMENTS APPROVED March 30, 2022** **\$ 2,432,437.69**

RECEIVED BY THE  
COUNTY AUDITOR ON

MAR 24 2022  
03/24/2022

10:35

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Due Dates Through: 04/14/2022

ap\_open\_invoice.template

Vendor# Vendor Name

Class Pay Code

14348 2022 MIDCOAST HURRICANE AND

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031122		03/16/20	03/11/20	03/11/20		125.00	0.00	0.00	125.00 ✓

CONFERENCE REGISTRATIO (Thomas, (Leveyr, Atkinson, Daniel and Rubio)

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
14348	2022 MIDCOAST HURRICANE AND	125.00	0.00	0.00	125.00	

Vendor# Vendor Name

Class Pay Code

A1100 ABBOTT LABORATORIES ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
615111459 ✓		03/22/20	03/04/20	04/03/20		5.79	0.00	0.00	5.79 ✓

SUPPLIES

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1100	ABBOTT LABORATORIES	5.79	0.00	0.00	5.79	

Vendor# Vendor Name

Class Pay Code

R1200 ADT COMMERCIAL ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
144403785 ✓		03/22/20	03/02/20	03/27/20		49.18	0.00	0.00	49.18 ✓

FIRE MONITORING

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
R1200	ADT COMMERCIAL	49.18	0.00	0.00	49.18	

Vendor# Vendor Name

Class Pay Code

14344 AETNA ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
		03/16/20	12/14/20	01/14/20		34.77	0.00	0.00	34.77 ✓

PT REFUND

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
14344	AETNA	34.77	0.00	0.00	34.77	

Vendor# Vendor Name

Class Pay Code

A1680 AIRGAS USA, LLC - CENTRAL DIV ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9986774475 ✓		03/21/20	02/28/20	03/30/20		224.60	0.00	0.00	224.60 ✓

OXYGEN

9986774474 ✓		03/21/20	02/28/20	03/30/20		942.46	0.00	0.00	942.46 ✓
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OXYGEN

9123340681 ✓		03/21/20	03/01/20	03/31/20		58.47	0.00	0.00	58.47 ✓
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OXYGEN

9123291168 ✓		03/21/20	03/03/20	04/02/20		2,940.09	0.00	0.00	2,940.09 ✓
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OXYGEN

9986774473 ✓		03/21/20	03/14/20	04/08/20		494.14	0.00	0.00	494.14 ✓
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RENT CYL

9123439411 ✓		03/22/20	03/07/20	04/01/20		319.42	0.00	0.00	319.42 ✓
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OXYGEN

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS USA, LLC - CENTRAL DIV	4,979.18	0.00	0.00	4,979.18	

Vendor# Vendor Name

Class Pay Code

10282 ALLIED HEALTHCARE PRODUCTS INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
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1722167	✓		03/16/20	03/03/20	04/02/20		759.25	0.00	0.00	759.25	✓
SUPPLIES											
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		10282	ALLIED HEALTHCARE PRODUCTS INC			759.25	0.00	0.00	759.25		
Vendor#	Vendor Name		Class		Pay Code						
12060	AQUA PURIFICATION INC.		✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
432178A	✓	03/23/20	01/01/20	01/01/20			5,000.00	0.00	0.00	5,000.00	
CP216 REPAIR											
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		12060	AQUA PURIFICATION INC.			5,000.00	0.00	0.00	5,000.00		
Vendor#	Vendor Name		Class		Pay Code						
A0400	AUREUS RADIOLOGY LLC		✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
2519461	✓	03/22/20	03/14/20	04/13/20			1,086.75	0.00	0.00	1,086.75	
TRAVEL LAB STAFFING (3/2-3/3/22) Clustnut											
2517335	✓	03/22/20	03/14/20	04/13/20			2,001.00	0.00	0.00	2,001.00	
TRAVEL LAB STAFFING (2/26, 3/2-3/3/22) Simonick											
2517216	✓	03/22/20	03/14/20	04/13/20			2,680.00	0.00	0.00	2,680.00	
TRAVEL LAB STAFFING (2/25, 2/28, 3/1-3/3/22) Stibby											
2517385	✓	03/22/20	03/14/20	04/13/20			2,412.00	0.00	0.00	2,412.00	
TRAVEL LAB STAFFING (2/25-2/27/22) Hawkins											
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		A0400	AUREUS RADIOLOGY LLC			8,179.75	0.00	0.00	8,179.75		
Vendor#	Vendor Name		Class		Pay Code						
A2600	AUTO PARTS & MACHINE CO.		✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
090822		03/16/20	03/08/20	03/23/20			93.20	0.00	0.00	93.20	
979675		SUPPLIES									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		A2600	AUTO PARTS & MACHINE CO.			93.20	0.00	0.00	93.20		
Vendor#	Vendor Name		Class		Pay Code						
14088	AZALEA HEALTH		✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
72335	✓	03/22/20	03/01/20	03/01/20			550.00	0.00	0.00	550.00	
MONTHLY PROCESSING FEES											
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		14088	AZALEA HEALTH			550.00	0.00	0.00	550.00		
Vendor#	Vendor Name		Class		Pay Code						
B1150	BAXTER HEALTHCARE		✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
74296490	✓	03/22/20	03/11/20	04/05/20			697.58	0.00	0.00	697.58	
SUPPLIES											
74320130	✓	03/23/20	03/14/20	04/08/20			21.33	0.00	0.00	21.33	
SUPPLIES											
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		B1150	BAXTER HEALTHCARE			718.91	0.00	0.00	718.91		
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	
5454805	✓	03/22/20	03/13/20	04/07/20			5,016.58	0.00	0.00	5,016.58	

SUPPLIES											
Vendor#	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
109758512				03/22/20	03/14/20	04/08/20		1,288.45	0.00	0.00	1,288.45
Vendor Totals											
	B1220	BECKMAN COULTER INC						6,305.03	0.00	0.00	6,305.03
Vendor#	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
14272	BESTICA										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
MMM006		03/21/20	03/05/20	04/05/20		19,308.75	0.00	0.00	19,308.75		
TRAVEL NURSE STAFFING (2/16-2/28/22) Black											
Vendor Totals											
	14272	BESTICA						19,308.75	0.00	0.00	19,308.75
Vendor#	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
B1601	BOHLS BEARING & POWER TRANS	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
272092		03/21/20	03/07/20	03/17/20		197.70	0.00	0.00	197.70		
SUPPLIES											
Vendor Totals											
	B1601	BOHLS BEARING & POWER TRANS						197.70	0.00	0.00	197.70
Vendor#	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
B1650	BOSART LOCK & KEY INC	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
123814		03/21/20	03/15/20	04/14/20		429.95	0.00	0.00	429.95		
LOCK											
Vendor Totals											
	B1650	BOSART LOCK & KEY INC						429.95	0.00	0.00	429.95
Vendor#	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
B1655	BOSTON SCIENTIFIC CORPORATION	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
983574100		03/23/20	02/25/20	03/25/20		379.00	0.00	0.00	379.00		
Vendor Totals											
	B1655	BOSTON SCIENTIFIC CORPORATION						379.00	0.00	0.00	379.00
Vendor#	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
12740	BUILDING KID STEPS										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
FEB2022A		03/23/20	03/23/20	04/07/20		1,126.00	0.00	0.00	1,126.00		
PEDI OCCUPATIONAL THERAI											
FEB2022D		03/23/20	03/23/20	04/07/20		563.00	0.00	0.00	563.00		
PEDI OCCUPATIONAL THERAI											
FEB2022B		03/23/20	03/23/20	04/07/20		1,039.00	0.00	0.00	1,039.00		
PEDI OCCUPATIONAL THERAI											
FEB2022C		03/23/20	03/23/20	04/07/20		1,013.00	0.00	0.00	1,013.00		
PEDI OCCUPATIONAL THERAI											
Vendor Totals											
	12740	BUILDING KID STEPS						3,741.00	0.00	0.00	3,741.00
Vendor#	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
14340	BUSINESS VIEW MAGAZINE										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
11120		03/16/20	03/02/20	03/03/20		1,550.00	0.00	0.00	1,550.00		
PAGE IN MAGAZINE											

Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		14340	BUSINESS VIEW MAGAZINE		1,550.00	0.00	0.00	1,550.00	
Vendor#	Vendor Name			Class	Pay Code				
B0437	C R BARD INC ✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
83842725 ✓		03/15/20	02/25/20	03/27/20		149.02	0.00	0.00	149.02 ✓
Vendor Totals		B0437	C R BARD INC			149.02	0.00	0.00	149.02
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
133165 ✓		03/21/20	03/02/20	04/02/20		822.50	0.00	0.00	822.50 ✓
	TRAVEL NURSE STAFFING								
133433 ✓		03/21/20	03/09/20	04/09/20		4,165.00	0.00	0.00	4,165.00 ✓
	TRAVEL NURSE STAFFING								
Vendor Totals		13992	CARIANT HEALTH PARTNERS			4,987.50	0.00	0.00	4,987.50
Vendor#	Vendor Name			Class	Pay Code				
C1992	CDW GOVERNMENT, INC. ✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
S817855 ✓		03/21/20	02/28/20	03/30/20		1,334.31	0.00	0.00	1,334.31 ✓
	REPLACEMENT PC IN CS								
S848918 ✓		03/21/20	03/01/20	03/31/20		939.76	0.00	0.00	939.76 ✓
	IT SPARE/PC UPGRADES								
S997247 ✓		03/21/20	03/03/20	04/02/20		4,061.40	0.00	0.00	4,061.40 ✓
	ANNUAL SUBSCRIPTION								
T009580		03/21/20	03/03/20	04/02/20		1,304.97	0.00	0.00	1,304.97 ✓
	Bomcanda Security								
T212978 ✓		03/21/20	03/09/20	04/08/20		1,491.79	0.00	0.00	1,491.79 ✓
	Dell Optiplex								
Vendor Totals		C1992	CDW GOVERNMENT, INC.			9,132.23	0.00	0.00	9,132.23
Vendor#	Vendor Name			Class	Pay Code				
12768	CHEMAQUA ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
7713501 ✓		03/23/20	03/10/20	03/20/20		518.75	0.00	0.00	518.75 ✓
	WATER TREATMENT								
Vendor Totals		12768	CHEMAQUA			518.75	0.00	0.00	518.75
Vendor#	Vendor Name			Class	Pay Code				
13760	CIGNA ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
186856		03/22/20	10/31/20	04/01/20		60.02	0.00	0.00	60.02 ✓
	PATIENT								
Vendor Totals		13760	CIGNA			60.02	0.00	0.00	60.02
Vendor#	Vendor Name			Class	Pay Code				
C1730	CITY OF PORT LAVACA ✓			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
031422B		03/21/20	03/14/20	04/05/20		171.78	0.00	0.00	171.78 ✓

	WATER									
031422		03/21/20	03/14/20	04/05/20		27.04	0.00	0.00	27.04	✓
	WATER SERVICE									
031422C		03/21/20	03/14/20	04/05/20		72.64	0.00	0.00	72.64	✓
	WATER									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					C1730	CITY OF PORT LAVACA	271.46	0.00	0.00	271.46
Vendor#	Vendor Name				Class	Pay Code				
10723	CLIA LABORATORY PROGRAM ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
030122A		03/24/20	03/01/20	04/01/20		180.00	0.00	0.00	180.00	✓
	CERTIFICATE FEE									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					10723	CLIA LABORATORY PROGRAM	180.00	0.00	0.00	180.00
Vendor#	Vendor Name				Class	Pay Code				
10786	CLINICAL PATHOLOGY ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
176562022020		03/16/20	02/28/20	03/25/20		13,507.48	0.00	0.00	13,507.48	✓
	LAB SERVICES									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					10786	CLINICAL PATHOLOGY	13,507.48	0.00	0.00	13,507.48
Vendor#	Vendor Name				Class	Pay Code				
11029	COASTAL REFRIGERATION ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
031022		03/21/20	03/10/20	04/01/20		1,071.02	0.00	0.00	1,071.02	✓
	LABOR /CAFE FREEZER									
031522		03/21/20	03/15/20	04/01/20		900.50	0.00	0.00	900.50	✓
	LABOR ROOFTOP A/C									
031522A		03/21/20	03/15/20	04/01/20		626.51	0.00	0.00	626.51	✓
	LABOR <i>Ice Machine</i>									
031522N		03/21/20	03/15/20	04/01/20		272.95	0.00	0.00	272.95	✓
	LABOR <i>Physical Therapy</i>									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					11029	COASTAL REFRIGERATION	2,870.98	0.00	0.00	2,870.98
Vendor#	Vendor Name				Class	Pay Code				
11030	COMBINED INSURANCE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
030122		03/16/20	03/01/20	03/31/20		657.70	0.00	0.00	657.70	✓
	INSURANCE									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					11030	COMBINED INSURANCE	657.70	0.00	0.00	657.70
Vendor#	Vendor Name				Class	Pay Code				
14080	CORROHEALTH, INC. ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
711498 ✓		03/21/20	03/02/20	04/01/20		1,652.00	0.00	0.00	1,652.00	✓
	HIM SERVICES									
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					14080	CORROHEALTH, INC.	1,652.00	0.00	0.00	1,652.00
Vendor#	Vendor Name				Class	Pay Code				
14292	DEARBORN LIFE INSURANCE COMPAN ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	

030122B		03/24/20	03/01/20	04/01/20		3,720.73	0.00	0.00	3,720.73	✓	
	PAYROLL DEDUCTS (ADD/life insurance)										
030122		03/24/20	03/01/20	04/01/20		3,581.89	0.00	0.00	3,581.89	✓	
	PAYROLL DEDUCTS " "										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						14292	DEARBORN LIFE INSURANCE COMPAN	7,302.62	0.00	0.00	7,302.62
Vendor#	Vendor Name					Class	Pay Code				
10368	DEWITT POTTH & SON ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
6752240 ✓		03/21/20	03/10/20	04/04/20		88.78	0.00	0.00	88.78	✓	
	SUPPLIES										
6752241 ✓		03/21/20	03/11/20	04/05/20		7.00	0.00	0.00	7.00	✓	
	SUPPLIES										
6752880 ✓		03/21/20	03/11/20	04/05/20		16.98	0.00	0.00	16.98	✓	
	SUPPLIES										
6756810 ✓		03/21/20	03/15/20	04/09/20		92.84	0.00	0.00	92.84	✓	
	SUPPLIES										
6714710 ✓		03/24/20	02/07/20	03/04/20		76.29	0.00	0.00	76.29	✓	
	SUPPLIES										
6715870 ✓		03/24/20	02/08/20	03/05/20		1,443.24	0.00	0.00	1,443.24	✓	
	SUPPLIES										
6715750 ✓		03/24/20	02/08/20	03/05/20		395.00	0.00	0.00	395.00	✓	
	SUPPLIES										
6722260 ✓		03/24/20	02/14/20	03/11/20		89.59	0.00	0.00	89.59	✓	
	SUPPLIES										
6723540 ✓		03/24/20	02/16/20	03/13/20		378.28	0.00	0.00	378.28	✓	
	SUPPLIES										
6728690 ✓		03/24/20	02/18/20	03/15/20		197.50	0.00	0.00	197.50	✓	
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10368	DEWITT POTTH & SON	2,785.50	0.00	0.00	2,785.50
Vendor#	Vendor Name					Class	Pay Code				
11011	DIAMOND HEALTHCARE CORP ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
IN20055230 ✓		03/21/20	03/01/20	03/26/20		31,144.58	0.00	0.00	31,144.58	✓	
	BEHAV HEALTH FEB 22										
IN20055231 ✓		03/21/20	03/01/20	03/26/20		19,166.67	0.00	0.00	19,166.67	✓	
	CPR FEB 2022										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11011	DIAMOND HEALTHCARE CORP	50,311.25	0.00	0.00	50,311.25
Vendor#	Vendor Name					Class	Pay Code				
10842	DOOR CONTROL SERVICES, INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
SMINV306388 ✓		03/22/20	03/08/20	04/07/20		3,205.77	0.00	0.00	3,205.77	✓	
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10842	DOOR CONTROL SERVICES, INC	3,205.77	0.00	0.00	3,205.77
Vendor#	Vendor Name					Class	Pay Code				
12044	DRIESSEN WATER INC. (CULLIGAN) ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
143027030222 ✓		03/23/20	02/28/20	03/22/20		32.50	0.00	0.00	32.50	✓	



SUPPLIES

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
Vendor Totals													
	12044	DRIESSEN WATER INC. (CULLIGAN)								32.50	0.00	0.00	32.50
11046	E-MDS, INC ✓												
	495337					03/22/20	03/21/20	03/21/20		1,110.30	0.00	0.00	1,110.30 ✓
HOSTING SUBSCR MMC CLIN													
Vendor Totals													
	11046	E-MDS, INC								1,110.30	0.00	0.00	1,110.30
C2510	EVIDENT ✓		M										
	T2203071378 ✓					03/22/20	03/07/20	04/01/20		10,522.78	0.00	0.00	10,522.78 ✓
BUSINESS SERVICES													
Vendor Totals													
	C2510	EVIDENT								10,522.78	0.00	0.00	10,522.78
14336	FIRETRON, INC ✓												
	192646					03/16/20	03/08/20	04/07/20		1,400.00	0.00	0.00	1,400.00 ✓
<i>Upgrade fire radio for fire alarm monitoring</i>													
Vendor Totals													
	14336	FIRETRON, INC								1,400.00	0.00	0.00	1,400.00
14092	FIRST CONNECT CENTER LLC ✓												
	4101 ✓					03/21/20	02/28/20	03/30/20		4,500.00	0.00	0.00	4,500.00 ✓
<i>TRAVEL NURSE STAFFING (2/21-2/27/22) Burnham</i>													
Vendor Totals													
	14092	FIRST CONNECT CENTER LLC								4,500.00	0.00	0.00	4,500.00
F1400	FISHER HEALTHCARE ✓		M										
	0438642 ✓					03/22/20	03/08/20	04/02/20		830.31	0.00	0.00	830.31 ✓
SUPPLIES													
	0608078 ✓					03/22/20	03/11/20	04/05/20		14.90	0.00	0.00	14.90 ✓
SUPPLIES													
Vendor Totals													
	F1400	FISHER HEALTHCARE								845.21	0.00	0.00	845.21
11184	FLDR DESIGNS LLC ✓												
	15424 ✓					03/16/20	02/25/20	03/27/20		3,938.60	0.00	0.00	3,938.60 ✓
MAILERS													
Vendor Totals													
	11184	FLDR DESIGNS LLC								3,938.60	0.00	0.00	3,938.60
13960	G & S MANAGEMENT GROUP LLC ✓												
	340384697 ✓					03/21/20	03/15/20	03/25/20		2,229.87	0.00	0.00	2,229.87 ✓

		TRASH SERVICE								
340384698			03/21/20	03/15/20	03/25/20		351.23	0.00	0.00	351.23
		TRASH SERVICE								
340384699			03/21/20	03/15/20	03/25/20		260.55	0.00	0.00	260.55
Vendor Totals										
	Number	Name					Gross	Discount	No-Pay	Net
	13960	G & S MANAGEMENT GROUP LLC					2,841.65	0.00	0.00	2,841.65
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
9240487638		03/23/20	03/10/20	04/04/20			472.20	0.00	0.00	472.20
	SUPPLIES									
Vendor Totals										
	Number	Name					Gross	Discount	No-Pay	Net
	W1300	GRAINGER					472.20	0.00	0.00	472.20
Vendor#	Vendor Name		Class	Pay Code						
12948	GREAT AMERICAN FINANCIAL SVCS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
31197874		03/23/20	03/07/20	03/31/20			11,142.84	0.00	0.00	11,142.84
	COPIER LEASE									
Vendor Totals										
	Number	Name					Gross	Discount	No-Pay	Net
	12948	GREAT AMERICAN FINANCIAL SVCS					11,142.84	0.00	0.00	11,142.84
Vendor#	Vendor Name		Class	Pay Code						
11984	GUERBET, LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
18598171		03/15/20	03/14/20	04/01/20			350.00	0.00	0.00	350.00
	SUPPLIES									
Vendor Totals										
	Number	Name					Gross	Discount	No-Pay	Net
	11984	GUERBET, LLC					350.00	0.00	0.00	350.00
Vendor#	Vendor Name		Class	Pay Code						
G1210	GULF COAST PAPER COMPANY		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
2201761		03/21/20	03/15/20	04/14/20			470.11	0.00	0.00	470.11
	SUPPLIES									
Vendor Totals										
	Number	Name					Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY					470.11	0.00	0.00	470.11
Vendor#	Vendor Name		Class	Pay Code						
H0032	H + H SYSTEM, INC.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
037174		03/21/20	03/08/20	04/08/20			63.81	0.00	0.00	63.81
	SUPPLIES									
Vendor Totals										
	Number	Name					Gross	Discount	No-Pay	Net
	H0032	H + H SYSTEM, INC.					63.81	0.00	0.00	63.81
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
100590037		03/16/20	03/08/20	03/08/20			7,447.86	0.00	0.00	7,447.86
	LEASE ST									
100590038		03/16/20	03/08/20	03/08/20			1,797.44	0.00	0.00	1,797.44
	LEASE									
100590035		03/22/20	03/08/20	04/01/20			4,919.41	0.00	0.00	4,919.41
	LEASE									

100590036	✓	03/22/20	03/08/20	04/01/20		7,154.17	0.00	0.00	7,154.17	✓
		LEASE								
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
	11552 HEALTHCARE FINANCIAL SERVICES					21,318.88	0.00	0.00	21,318.88	
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
H0416	HOLOGIC INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
10050652	✓	03/22/20	03/09/20	03/16/20		236.25	0.00	0.00	236.25	✓
	SUPPLIES									
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
	H0416 HOLOGIC INC					236.25	0.00	0.00	236.25	
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
14352	HSU PT DEPARTMENT ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
030822		03/16/20	03/08/20	03/08/20		250.00	0.00	0.00	250.00	✓
	CONFERENCE REGISTRATIO (4/1/22)									
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
	14352 HSU PT DEPARTMENT					250.00	0.00	0.00	250.00	
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
14216	HUMANA CLAIMS OFFICE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
032222		03/22/20	03/22/20	04/01/20		106.43	0.00	0.00	106.43	✓
	PATIENT									
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
	14216 HUMANA CLAIMS OFFICE					106.43	0.00	0.00	106.43	
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
14256	INFICARE HEALTH, INC. ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
MMC0224	✓	03/21/20	02/24/20	03/11/20		1,488.00	0.00	0.00	1,488.00	✓
	NURSE STAFFING (2/18 - 2/24/22) Nelsoney									
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
	14256 INFICARE HEALTH, INC.					1,488.00	0.00	0.00	1,488.00	
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
I1260	INTOXIMETERS INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
697918		03/21/20	01/19/20	02/13/20		2,824.00	0.00	0.00	2,824.00	✓
	OMNIBUS									
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
	I1260 INTOXIMETERS INC					2,824.00	0.00	0.00	2,824.00	
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
J0150	J & J HEALTH CARE SYSTEMS, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
928253454	✓	03/15/20	02/16/20	03/18/20		1,541.38	0.00	0.00	1,541.38	✓
	SUPPLIES									
928286956	✓	03/15/20	02/18/20	03/20/20		600.00	0.00	0.00	600.00	✓
	SUPPLIES									
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
	J0150 J & J HEALTH CARE SYSTEMS, INC					2,141.38	0.00	0.00	2,141.38	
Vendor#	Vendor Name					Gross	Discount	No-Pay	Net	
10834	JACKSON & CARTER, PLLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	

2976		03/16/20	03/06/20	04/05/20		1,917.50	0.00	0.00	1,917.50	
LEGAL SERVICES										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					10834	JACKSON & CARTER, PLLC	1,917.50	0.00	0.00	1,917.50
Vendor#	Vendor Name					Class	Pay Code			
14316	JUNXION MED STAFFING									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
REVMWCWE022022		03/21/20	02/25/20	03/27/20		9,067.50	0.00	0.00	9,067.50	
ICU NURSE STAFFING (2/14-2/19/22) Deshater										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					14316	JUNXION MED STAFFING	9,067.50	0.00	0.00	9,067.50
Vendor#	Vendor Name					Class	Pay Code			
D1710	KEEP-U-NEAT CLEANERS					W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
MAR22		03/21/20	03/03/20	03/13/20		690.30	0.00	0.00	690.30	
LAUDRY										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					D1710	KEEP-U-NEAT CLEANERS	690.30	0.00	0.00	690.30
Vendor#	Vendor Name					Class	Pay Code			
L0700	LABCORP OF AMERICA HOLDINGS					M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
72076080		03/16/20	02/26/20	03/23/20		15.00	0.00	0.00	15.00	
LAB SERVICES										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					L0700	LABCORP OF AMERICA HOLDINGS	15.00	0.00	0.00	15.00
Vendor#	Vendor Name					Class	Pay Code			
L1001	LANDAUER INC					W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
100982528		03/16/20	02/16/20	03/18/20		762.50	0.00	0.00	762.50	
DOSE BADGES										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					L1001	LANDAUER INC	762.50	0.00	0.00	762.50
Vendor#	Vendor Name					Class	Pay Code			
M2178	MCKESSON MEDICAL SURGICAL INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2193667		03/16/20	02/15/20	03/02/20		783.86	0.00	0.00	783.86	
CHARGEBACK										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					M2178	MCKESSON MEDICAL SURGICAL INC	783.86	0.00	0.00	783.86
Vendor#	Vendor Name					Class	Pay Code			
12588	MEDICAL TECHNOLOGY ASSOCIATES									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
INV198063		03/22/20	03/17/20	04/11/20		1,393.15	0.00	0.00	1,393.15	
VACUUM GAUGES										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net
					12588	MEDICAL TECHNOLOGY ASSOCIATES	1,393.15	0.00	0.00	1,393.15
Vendor#	Vendor Name					Class	Pay Code			
10613	MEDIMPACT HEALTHCARE SYS, INC.					A/P				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
30285603		03/21/20	02/28/20	04/01/20		18.95	0.00	0.00	18.95	
INDIGENT CARE										

Vendor Total#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
10613	MEDIMPACT HEALTHCARE SYS, INC.			18.95	0.00	0.00	18.95		
M2470	MEDLINE INDUSTRIES INC		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2201013035	CREDIT - SUPPLIES	03/17/20	03/06/20	03/31/20		-171.78	0.00	0.00	-171.78
2201422247	SUPPLIES	03/21/20	03/09/20	04/03/20		171.78	0.00	0.00	171.78
2201422248	SUPPLIES	03/21/20	03/09/20	04/03/20		35.32	0.00	0.00	35.32
2201422249	SUPPLIES	03/21/20	03/09/20	04/03/20		322.36	0.00	0.00	322.36
2201581345	SUPPLIES	03/21/20	03/10/20	04/04/20		101.16	0.00	0.00	101.16
2201610993	SUPPLIES	03/21/20	03/10/20	04/04/20		149.76	0.00	0.00	149.76
2201581342	SUPPLIES	03/21/20	03/10/20	04/04/20		19.90	0.00	0.00	19.90
2201581346	SUPPLIES	03/21/20	03/10/20	04/04/20		230.39	0.00	0.00	230.39
2201691388	SUPPLIES	03/22/20	03/10/20	04/04/20		259.89	0.00	0.00	259.89
2201802225	SUPPLIES	03/22/20	03/11/20	04/05/20		41.72	0.00	0.00	41.72
2201428896	CREDIT	03/22/20	03/11/20	04/05/20		-149.76	0.00	0.00	-149.76
2201905305	SUPPLIES	03/22/20	03/12/20	04/06/20		185.91	0.00	0.00	185.91
2201905306	SUPPLIES	03/22/20	03/12/20	04/06/20		128.86	0.00	0.00	128.86
2201905302	SUPPLIES	03/22/20	03/12/20	04/06/20		91.95	0.00	0.00	91.95
2201905308	SUPPLIES	03/22/20	03/12/20	04/06/20		51.58	0.00	0.00	51.58
2201905309	SUPPLIES	03/22/20	03/12/20	04/06/20		186.60	0.00	0.00	186.60
2202149020	SUPPLIES	03/22/20	03/15/20	04/09/20		25.80	0.00	0.00	25.80
2202152378	SUPPLIES	03/22/20	03/15/20	04/09/20		27.80	0.00	0.00	27.80
2202149021	SUPPLIES	03/22/20	03/15/20	04/09/20		250.53	0.00	0.00	250.53
2202149022	SUPPLIES	03/22/20	03/15/20	04/09/20		41.72	0.00	0.00	41.72
2202427229	SUPPLIES	03/22/20	03/16/20	04/10/20		57.52	0.00	0.00	57.52
2202427233	SUPPLIES	03/22/20	03/16/20	04/10/20		50.10	0.00	0.00	50.10
2202427228	SUPPLIES	03/22/20	03/16/20	04/10/20		18.45	0.00	0.00	18.45

2202427234	SUPPLIES	03/22/20	03/16/20	04/10/20		19.48	0.00	0.00	19.48		
2202427232	SUPPLIES	03/22/20	03/16/20	04/10/20		2,064.22	0.00	0.00	2,064.22		
2202318187	SUPPLIES	03/23/20	03/15/20	04/09/20		59.71	0.00	0.00	59.71		
2202444915	SUPPLIES	03/23/20	03/16/20	04/10/20		44.46	0.00	0.00	44.46		
2202444912	SUPPLIES	03/23/20	03/16/20	04/10/20		144.30	0.00	0.00	144.30		
2202444914	SUPPLIES	03/23/20	03/16/20	04/10/20		19,488.66	0.00	0.00	19,488.66		
2202444913	SUPPLIES	03/23/20	03/16/20	04/10/20		35.32	0.00	0.00	35.32		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						M2470	MEDLINE INDUSTRIES INC	23,983.71	0.00	0.00	23,983.71
Vendor#	Vendor Name	Class		Pay Code							
12248	MEMORIAL MEDICAL CENTER										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
030722		03/16/20	03/07/20	03/07/20		5.00	0.00	0.00	5.00		
						PETTY CASH REIMBURSEME					
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12248	MEMORIAL MEDICAL CENTER	5.00	0.00	0.00	5.00
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		
7986941	SUPPLIES	03/22/20	03/15/20	03/25/20		698.28	0.00	0.00	698.28		
7983461	SUPPLIES	03/22/20	03/15/20	03/25/20		198.94	0.00	0.00	198.94		
7986942	SUPPLIES	03/22/20	03/15/20	03/25/20		218.41	0.00	0.00	218.41		
7984849	SUPPLIES	03/22/20	03/15/20	03/25/20		90.90	0.00	0.00	90.90		
9838	CREDIT	03/22/20	03/15/20	03/25/20		-67.51	0.00	0.00	-67.51		
7983462	SUPPLIES	03/22/20	03/15/20	03/25/20		214.03	0.00	0.00	214.03		
7986940	SUPPLIES	03/22/20	03/15/20	03/25/20		32.51	0.00	0.00	32.51		
7990184	SUPPLIES	03/22/20	03/16/20	03/26/20		156.24	0.00	0.00	156.24		
7989966	SUPPLIES	03/22/20	03/16/20	03/26/20		241.25	0.00	0.00	241.25		
7990946	SUPPLIES	03/22/20	03/16/20	03/26/20		22.64	0.00	0.00	22.64		
7990436	SUPPLIES	03/22/20	03/16/20	03/26/20		6.85	0.00	0.00	6.85		
7991143	SUPPLIES	03/22/20	03/16/20	03/26/20		14.48	0.00	0.00	14.48		
7990945	SUPPLIES	03/22/20	03/16/20	03/26/20		47.22	0.00	0.00	47.22		

7991142	SUPPLIES	03/22/20	03/16/20	03/26/20	4.62	0.00	0.00	4.62	✓
7993769	SUPPLIES	03/22/20	03/17/20	03/27/20	46.32	0.00	0.00	46.32	✓
7993770	SUPPLIES	03/22/20	03/17/20	03/27/20	214.03	0.00	0.00	214.03	✓
7993771	SUPPLIES	03/22/20	03/17/20	03/27/20	134.78	0.00	0.00	134.78	✓
7993127	SUPPLIES	03/22/20	03/17/20	03/27/20	787.80	0.00	0.00	787.80	✓
8003254	SUPPLIES	03/22/20	03/20/20	03/30/20	159.92	0.00	0.00	159.92	✓
8003255	SUPPLIES	03/22/20	03/20/20	03/30/20	9,526.83	0.00	0.00	9,526.83	✓
8001507	SUPPLIES	03/22/20	03/20/20	03/30/20	63.69	0.00	0.00	63.69	✓
8001508	SUPPLIES	03/22/20	03/20/20	03/30/20	553.52	0.00	0.00	553.52	✓
8007500	SUPPLIES	03/22/20	03/21/20	03/31/20	333.68	0.00	0.00	333.68	✓
8008169	SUPPLIES	03/22/20	03/21/20	03/31/20	74.69	0.00	0.00	74.69	✓
8009652	SUPPLIES	03/23/20	03/22/20	04/01/20	185.52	0.00	0.00	185.52	✓
8009654	SUPPLIES	03/23/20	03/22/20	04/01/20	1,653.98	0.00	0.00	1,653.98	✓
8012760	SUPPLIES	03/23/20	03/22/20	04/01/20	113.09	0.00	0.00	113.09	✓
8012761	SUPPLIES	03/23/20	03/22/20	04/01/20	1,166.65	0.00	0.00	1,166.65	✓
CM26149	SUPPLIES	03/23/20	03/22/20	04/01/20	-32.32	0.00	0.00	-32.32	✓
8009651	CREDIT	03/23/20	03/22/20	04/01/20	74.69	0.00	0.00	74.69	✓
8011856	SUPPLIES	03/23/20	03/22/20	04/01/20	3,002.90	0.00	0.00	3,002.90	✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	19,938.63	0.00	0.00	19,938.63

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
14124	MSH HEALTH SERVICES LLC			MMC0053		03/21/20	03/07/20	03/22/20		5,580.00	0.00	0.00	5,580.00 ✓
				MMC0054	TRAVEL NURSE STAFFING (2/28 - 3/2/22) Brandman	03/21/20	03/07/20	03/22/20		4,250.00	0.00	0.00	4,250.00 ✓
				MMC0056	TRAVEL NURSE STAFFING (2/25 - 3/3/22) Dunn	03/21/20	03/15/20	03/30/20		3,487.50	0.00	0.00	3,487.50 ✓
				MMC0055	TRAVEL NURSE STAFFING (3/4 - 3/10/22) Brandman	03/21/20	03/15/20	03/30/20		2,940.00	0.00	0.00	2,940.00 ✓
					TRAVEL NURSE STAFFING (3/4 - 3/10/22) Dunn								
Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net							

	14124	MSH HEALTH SERVICES LLC					16,257.50	0.00	0.00	16,257.50
Vendor#	Vendor Name		Class	Pay Code						
13548	NACOGDOCHES TRANSCRIPTION ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
7647 ✓		03/16/20	03/15/20	03/25/20		351.26	0.00	0.00	351.26	✓
	TRANS SERVICES (2/19-3/4/22)									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	13548	NACOGDOCHES TRANSCRIPTION				351.26	0.00	0.00	351.26	
Vendor#	Vendor Name		Class	Pay Code						
14252	OLOOP TECHNOLOGY SOLUTIONS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
INVAJONES0016 ✓		03/22/20	03/08/20	03/07/20		6,098.25	0.00	0.00	6,098.25	✓
	TRAVEL NURSE STAFFING (2/25-3/3/22) Junes									
INVAJONES0017 ✓		03/22/20	03/08/20	04/07/20		6,184.75	0.00	0.00	6,184.75	✓
	TRAVEL NURSE STAFFING (3/4-3/10/22) Junes									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	14252	OLOOP TECHNOLOGY SOLUTIONS				12,283.00	0.00	0.00	12,283.00	
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	
32314848 ✓		03/21/20	03/07/20	04/01/20		1,137.51	0.00	0.00	1,137.51	✓
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	O1500	OLYMPUS AMERICA INC				1,137.51	0.00	0.00	1,137.51	
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	
1852312325 ✓		03/17/20	03/09/20	04/08/20		1,040.06	0.00	0.00	1,040.06	✓
	SUPPLIES									
1852312982 ✓		03/21/20	03/10/20	04/09/20		179.93	0.00	0.00	179.93	✓
	SUPPLIES									
1852251253 ✓		03/22/20	02/22/20	03/24/20		769.58	0.00	0.00	769.58	✓
	SUPPLIES									
1852303708 ✓		03/22/20	03/03/20	04/02/20		752.16	0.00	0.00	752.16	✓
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	O1416	ORTHO CLINICAL DIAGNOSTICS				2,741.73	0.00	0.00	2,741.73	
Vendor#	Vendor Name		Class	Pay Code						
OM425	OWENS & MINOR ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2073528292 ✓		03/17/20	03/10/20	04/09/20		138.00	0.00	0.00	138.00	✓
	SUPPLIES									
2073528297 ✓		03/17/20	03/10/20	04/09/20		275.99	0.00	0.00	275.99	✓
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	OM425	OWENS & MINOR				413.99	0.00	0.00	413.99	
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	
04257606 ✓		03/21/20	03/04/20	04/03/20		99.05	0.00	0.00	99.05	✓



Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
				10152	PARTSSOURCE, LLC					99.05	0.00	0.00	99.05
13988	PAYCHEX, ADVANCE FBO ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	006103		03/23/20	08/04/20	08/04/20		2,220.00	0.00	0.00	2,220.00 ✓			
	007210	MED/SURG STAFFING (7/23-7/25/21) Schelenz	03/23/20	10/27/20	10/27/20		3,675.00	0.00	0.00	3,675.00 ✓			
	007501	MED/SURG STAFF (10/15-10/17/21) Schelenz	03/23/20	11/10/20	11/10/20		1,575.00	0.00	0.00	1,575.00 ✓			
		MED/SURG STAFFING (10/29-10/30/21) Schelenz											
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
				13988	PAYCHEX, ADVANCE FBO					7,470.00	0.00	0.00	7,470.00
P1800	PITNEY BOWES INC ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	1020257619 ✓		03/23/20	03/10/20	04/09/20		223.92	0.00	0.00	223.92 ✓			
		POSTAGE											
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
				P1800	PITNEY BOWES INC					223.92	0.00	0.00	223.92
P2200	POWER HARDWARE ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	<del>031622</del> A82588	SUPPLIES	03/21/20	03/16/20	04/01/20		3.99	0.00	0.00	3.99 ✓			
	<del>031722</del> B65940	SUPPLIES	03/21/20	03/17/20	04/01/20		2.29	0.00	0.00	2.29 ✓			
	<del>032122</del> A82714	SUPPLIES	03/21/20	03/21/20	04/01/20		81.55	0.00	0.00	81.55 ✓			
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
				P2200	POWER HARDWARE					87.83	0.00	0.00	87.83
11024	REED, CLAYMON, MEEKER & HARGET ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	25321 ✓		03/16/20	03/14/20	03/14/20		217.50	0.00	0.00	217.50 ✓			
		LEGAL FEES											
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
				11024	REED, CLAYMON, MEEKER & HARGET					217.50	0.00	0.00	217.50
11764	ROBERT RODRIQUEZ												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	031422		03/22/20	03/14/20	03/24/20	187.40	180.14	0.00	0.00	180.14 187.40			
		SEMINAR/TRAVEL											
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
				11764	ROBERT RODRIQUEZ					187.40 180.14	0.00	0.00	180.14 187.40
S1800	SHERWIN WILLIAMS ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	<del>030222</del> 9550-5	SUPPLIES	03/22/20	03/02/20	03/17/20		8.48	0.00	0.00	8.48 ✓			
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net

	S1800	SHERWIN WILLIAMS				8.48	0.00	0.00	8.48	
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	
56382200024792 ✓		03/16/20	03/02/20	03/22/20		4,038.24	0.00	0.00	4,038.24 ✓	
	LEASE AND RENTAL;									
56382200024351 ✓		03/22/20	02/28/20	03/20/20		1,333.33	0.00	0.00	1,333.33 ✓	
	LEASE									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	10936	SIEMENS FINANCIAL SERVICES			5,371.57	0.00	0.00	5,371.57		
Vendor#	Vendor Name		Class	Pay Code						
S2270	SMILE MAKERS ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
9124952 ✓		03/21/20	03/16/20	04/10/20		31.96	0.00	0.00	31.96 ✓	
	STICKERS									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	S2270	SMILE MAKERS			31.96	0.00	0.00	31.96		
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	
031622A		03/22/20	03/16/20	03/30/20		1,675.15	0.00	0.00	1,675.15 ✓	
	INTERNET HOSP MAR 22									
031622B		03/22/20	03/16/20	03/30/20		14.02	0.00	0.00	14.02 ✓	
	INTERNET CLINIC MAR 22									
031622		03/22/20	03/16/20	03/30/20		2,250.00	0.00	0.00	2,250.00 ✓	
	CABLE									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	C1010	SPARKLIGHT			3,939.17	0.00	0.00	3,939.17		
Vendor#	Vendor Name		Class	Pay Code						
10094	ST DAVIDS HEALTHCARE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
MMCPL20212 ✓		03/22/20	03/21/20	04/01/20		570.00	0.00	0.00	570.00 ✓	
	CONNECTIVITY FEE FEB 22									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	10094	ST DAVIDS HEALTHCARE			570.00	0.00	0.00	570.00		
Vendor#	Vendor Name		Class	Pay Code						
S3940	STERIS CORPORATION ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
9959262 ✓		03/23/20	03/14/20	04/08/20		193.10	0.00	0.00	193.10 ✓	
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	S3940	STERIS CORPORATION			193.10	0.00	0.00	193.10		
Vendor#	Vendor Name		Class	Pay Code						
13528	STRYKER FLEX FINANCIAL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
243761 ✓		03/23/20	03/15/20	04/14/20		1,358.97	0.00	0.00	1,358.97 ✓	
	LEASE									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	13528	STRYKER FLEX FINANCIAL			1,358.97	0.00	0.00	1,358.97		
Vendor#	Vendor Name		Class	Pay Code						
14212	SURGICAL DIRECT SOUTH ✓									

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
8704 ✓		03/23/20	02/22/20	03/24/20		1,620.00	0.00	0.00	1,620.00 ✓		
SUPPLIES											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						14212	SURGICAL DIRECT SOUTH	1,620.00	0.00	0.00	1,620.00
Vendor#	Vendor Name				Class	Pay Code					
11944	TALX CORPORATION ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
2051092788 ✓		03/16/20	01/08/20	02/07/20		10.99	0.00	0.00	10.99 ✓		
EMPLOYEE VERIFICATION											
2051159109 ✓		03/16/20	02/08/20	03/10/20		10.99	0.00	0.00	10.99 ✓		
EMPLOYEE VERIFCATION											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						11944	TALX CORPORATION	21.98	0.00	0.00	21.98
Vendor#	Vendor Name				Class	Pay Code					
14168	TEXAS HHSC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
030822		03/16/20	03/08/20	03/08/20		500.00	0.00	0.00	500.00 ✓		
STATE INSPECTION											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						14168	TEXAS HHSC	500.00	0.00	0.00	500.00
Vendor#	Vendor Name				Class	Pay Code					
T2204	TEXAS MUTUAL INSURANCE CO ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1003526934 ✓		03/22/20	03/15/20	04/04/20		10.00	0.00	0.00	10.00 ✓		
LATE FEE											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						T2204	TEXAS MUTUAL INSURANCE CO	10.00	0.00	0.00	10.00
Vendor#	Vendor Name				Class	Pay Code					
10758	TEXAS SELECT STAFFING, LLC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
001945151079IN ✓		03/21/20	03/10/20	03/11/20		4,070.00	0.00	0.00	4,070.00 ✓		
TRAVEL NURSE STAFFING											
001951151079IN ✓		03/21/20	03/16/20	03/17/20		3,960.00	0.00	0.00	3,960.00 ✓		
TRAVEL NURSE STAFFING											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						10758	TEXAS SELECT STAFFING, LLC	8,030.00	0.00	0.00	8,030.00
Vendor#	Vendor Name				Class	Pay Code					
T2235	TEXAS SOCIAL SECURITY PROGRAM ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
020422		03/21/20	02/04/20	03/01/20		42.00	0.00	0.00	42.00 ✓		
ANNUAL FEE											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						T2235	TEXAS SOCIAL SECURITY PROGRAM	42.00	0.00	0.00	42.00
Vendor#	Vendor Name				Class	Pay Code					
T2198	TEXAS STATE BOARD OF PHARMACY ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
031622		03/23/20	03/16/20	03/23/20		513.00	0.00	0.00	513.00 ✓		
LICENSE RENEWAL											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						T2198	TEXAS STATE BOARD OF PHARMACY	513.00	0.00	0.00	513.00

Vendor#	Vendor Name	Class	Pay Code							
11067	TRIZETTO PROVIDER SOLUTIONS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
35FK032200 ✓		03/22/20	03/01/20	03/26/20		1,733.78	0.00	0.00	1,733.78	✓
	PATIENT STATEMENTS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11067	TRIZETTO PROVIDER SOLUTIONS				1,733.78	0.00	0.00	1,733.78	
Vendor#	Vendor Name	Class	Pay Code							
14208	TRUSTED HEALTH, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
INV8667 ✓		03/21/20	03/05/20	04/04/20		9,830.00	0.00	0.00	9,830.00	✓
	TRAVEL NURSE STAFFING									
INV8837 ✓		03/21/20	03/12/20	04/11/20		11,961.88	0.00	0.00	11,961.88	✓
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	14208	TRUSTED HEALTH, INC				21,791.88	0.00	0.00	21,791.88	
Vendor#	Vendor Name	Class	Pay Code							
U1064	UNIFIRST HOLDINGS INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
8400389914 ✓		03/16/20	03/10/20	04/04/20		215.91	0.00	0.00	215.91	✓
8400389911 ✓		03/16/20	03/10/20	04/04/20		42.82	0.00	0.00	42.82	✓
	LAUNDRY									
8400389915 ✓		03/16/20	03/10/20	04/04/20		199.32	0.00	0.00	199.32	✓
	LAUNDRY									
8400389912 ✓		03/16/20	03/10/20	04/04/20		137.15	0.00	0.00	137.15	✓
	SUPPLIES									
8400389932 ✓		03/16/20	03/10/20	04/04/20		1,730.53	0.00	0.00	1,730.53	✓
	LAUNDRY									
8400389927 ✓		03/16/20	03/10/20	04/04/20		80.90	0.00	0.00	80.90	✓
	LAUNDRY									
8400390117 ✓		03/16/20	03/14/20	04/08/20		2,393.02	0.00	0.00	2,393.02	✓
8400390090 ✓		03/16/20	03/14/20	04/08/20		45.15	0.00	0.00	45.15	✓
	LAUNDRY									
8400390091 ✓		03/16/20	03/14/20	04/08/20		48.46	0.00	0.00	48.46	✓
	LAUNDRY									
8400389946 ✓		03/22/20	03/10/20	04/04/20		111.55	0.00	0.00	111.55	✓
8400389913 ✓		03/22/20	03/10/20	04/04/20		151.72	0.00	0.00	151.72	✓
8400390430 ✓		03/22/20	03/17/20	04/11/20		227.30	0.00	0.00	227.30	✓
	LAUNDRY									
8400390428 ✓		03/22/20	03/17/20	04/11/20		42.82	0.00	0.00	42.82	✓
	LAUNDRY									
8400390431 ✓		03/22/20	03/17/20	04/11/20		209.37	0.00	0.00	209.37	✓
	LAUNDRY									
8400390463 ✓		03/22/20	03/17/20	04/11/20		107.01	0.00	0.00	107.01	✓
	SUPPLIES									
8400390432 ✓		03/22/20	03/17/20	04/11/20		199.32	0.00	0.00	199.32	✓
	LAUNDRY									

8400390449	✓	03/22/20	03/17/20	04/11/20		2,447.01	0.00	0.00	2,447.01	✓
	LAUNDRY									
8400390429	✓	03/22/20	03/17/20	04/11/20		137.15	0.00	0.00	137.15	✓
	LAUNDRY									
8400390443	✓	03/22/20	03/17/20	04/11/20		80.90	0.00	0.00	80.90	✓
	LAUNDRY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	8,607.41	0.00	0.00	8,607.41

Vendor# Vendor Name Class Pay Code

12208	WAGeworks									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
INV3496985	✓	03/16/20	02/24/20	03/28/20		50.00	0.00	0.00	50.00	✓
	COMLIANCE FEE									
INV3481158	✓	03/16/20	02/24/20	03/28/20		85.48	0.00	0.00	85.48	✓
	COMPLIANCE FEE									
INV3544775	✓	03/22/20	03/15/20	04/14/20		501.50	0.00	0.00	501.50	✓
	MONTHLY ADMIN/COMPLIANC									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12208	WAGeworks	636.98	0.00	0.00	636.98

Vendor# Vendor Name Class Pay Code

12548	WAGeworks, INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
0222DR46779	✓	03/22/20	03/01/20	03/31/20		155.52	0.00	0.00	155.52	✓
	COBRA									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12548	WAGeworks, INC	155.52	0.00	0.00	155.52

Vendor# Vendor Name Class Pay Code

10943	WALLER,LANSDEN, DORTCH & DAVIS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
10845971	✓	03/22/20	03/07/20	03/07/20		666.00	0.00	0.00	666.00	✓
	LEGAL FEES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10943	WALLER,LANSDEN, DORTCH & DAVIS	666.00	0.00	0.00	666.00

Vendor# Vendor Name Class Pay Code

11110	WERFEN USA LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
9111130386	✓	03/22/20	03/15/20	04/09/20		346.08	0.00	0.00	346.08	✓
	SUPPLIES									
9111129387	✓	03/22/20	03/15/20	04/09/20		1,571.67	0.00	0.00	1,571.67	✓
	SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11110	WERFEN USA LLC	1,917.75	0.00	0.00	1,917.75

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	373,812.76	0.00	0.00	373,812.76

O • C

APPROVED BY

MAR 24 2022

COURTNEY ANDERSON  
SARAH ANN GIBSON, TREAS  
CL# 194308-194410

pg 1 correction

Σ <180.14>  
Σ +187.40  
\$373,820.02

373,812.76 +  
180.14 -  
187.40 +  
373,820.02 \*

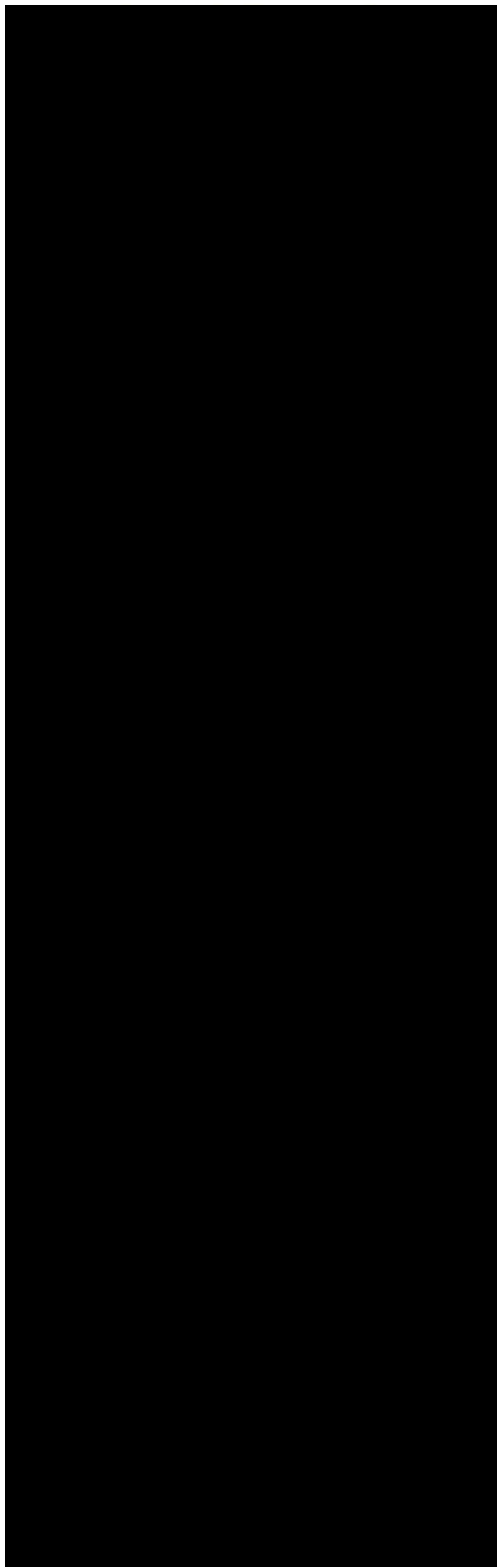
RUN DATE: 03/24/22

MEMORIAL MEDICAL CENTER  
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1  
APCDEDIT

RECEIVED BY THE  
COUNTY AUDITOR ON

PATIENT  
NUMBER  
MAR 24 2022  
PAYEE NAME



DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
030122	136.28	✓	2	REFUND FOR	
01952366					
030122	100.00	✓	3	REFUND FOR	
77979					
030122	599.87	✓	2	REFUND FOR	
00310589					
032222	791.49	✓	2	REFUND FOR	
77979					
032222	55.00	✓	5	REFUND FOR	
77983					
032222	499.07	✓	2	REFUND FOR	
77957					
030122	4184.68	✓	3	REFUND FOR	
01952366					
032222	60.00	✓	3	REFUND FOR	
77979					
030122	200.40	✓	2	REFUND FOR	
77419					
032222	550.93	✓	1	REFUND FOR	
76302					
030122	200.00	✓	3	REFUND FOR	
77979					
030122	31.64	✓	3	REFUND FOR	
77982					
032222	16.49	✓	2	REFUND FOR	
77979					
030122	20.01	✓	5	REFUND FOR	
77414					
030122	64.08	✓	2	REFUND FOR	
77414					

RUN DATE: 03/24/22  
TIME: 11:03

MEMORIAL MEDICAL CENTER  
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 2  
APCREDIT

PATIENT NUMBER	PAYER NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
		030122	121.83 ✓		2	REFUND FOR	
631952366		030122	9319.60 ✓		3	REFUND FOR	
631952366		030122	20.00 ✓		3	REFUND FOR	
77950		032222	2154.47 ✓		1	REFUND FOR	
77979		030122	146.00 ✓		2	REFUND FOR	
78880		030122	50.00 ✓		2	REFUND FOR	
77979		030122	118.49 ✓		2	REFUND FOR	
77465		030122	166.33 ✓		2	REFUND FOR	
77971		030122	20.00 ✓		2	REFUND FOR	
77979							
ARID=0001 TOTAL			19626.66				
TOTAL			19626.66				

APPROVED  
CM

MAR 24 2022

CASHIER ASSURANCE  
CASHIER: GORDON, TERRY S  
CHK#194418-194441

# MCKESSON

# STATEMENT

As of: 03/25/2022

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

DC: 8115

Territory:

Customer: 632536

Date: 03/26/2022

As of: 03/25/2022

Page: 002

Mail to:

Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 632536

PLEASE CHECK ANY

Date: 03/26/2022

ITEMS NOT PAID (✓)

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 8,429.43 USD

Future Due: 0.00

Past Due: 231.40-

Last Payment 2,451.97  
08/07/2017

If Paid By 03/29/2022,  
Pay This Amount:

8,256.21 USD

If Paid After 03/29/2022,  
Pay this Amount:

8,429.43 USD

Due If Paid On Time:

USD

8,256.21

Disc lost if paid late:

173.22

Due If Paid Late:

USD

8,429.43

7,427.54 +  
3,800 +  
676.28 +  
148.59 +  
8,256.21 \*

*[Signature]*  
3/28/22

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

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



# MCKESSON

# STATEMENT

As of: 03/25/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 03/25/2022  
Mail to:

Page: 001  
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Customer: 256342  
Date: 03/26/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 256342 PLEASE CHECK ANY  
Date: 03/26/2022 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
<b>Customer Number 256342 WALMART 1098/MEM MED PHS</b>											
03/21/2022	03/29/2022	7331338580	27755229	115Invoice	6.62	330.83		324.21 ✓		7331338580	
03/21/2022	03/29/2022	7331521587	0318220953	195Invoice	0.04	2.03		1.99 ✓		7331521587	
03/21/2022	03/29/2022	7331521588	0318221004	115Invoice	1.18	59.02		57.84 ✓		7331521588	
03/22/2022	03/29/2022	7331657858	27946528	115Invoice	0.01	0.63		0.62 ✓		7331657858	
03/22/2022	03/29/2022	7331657860	27999408	115Invoice	16.98	848.78		831.80 ✓		7331657860	
03/23/2022	03/29/2022	7331922300	28110114	115Invoice	3.19	159.26		156.07 ✓		7331922300	
03/23/2022	03/29/2022	7332105656	0322220807	195Invoice	30.26	1,513.17		1,482.91 ✓		7332105656	
03/24/2022	03/29/2022	7332170123	28147368	115Invoice	2.21	110.60		108.39 ✓		7332170123	
03/24/2022	03/29/2022	7332170125	28147368	115Invoice	13.93	696.32		682.39 ✓		7332170125	
03/24/2022	03/29/2022	7332170127	28205393	115Invoice	2.21	110.28		108.07 ✓		7332170127	
03/24/2022	03/29/2022	7332170129	28205393	115Invoice	27.85	1,392.63		1,364.78 ✓		7332170129	
03/25/2022	03/29/2022	7332430609	28242968	115Invoice	45.31	2,265.72		2,220.41 ✓		7332430609	
03/25/2022	03/29/2022	7332430610	28242968	115Invoice	1.69	84.73		83.04 ✓		7332430610	
03/25/2022	03/29/2022	7332604443	0324220730	195Invoice	0.10	5.12		5.02 ✓		7332604443	

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

**TOTAL:** Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 7,579.12 USD

*3/28/22*

Future Due: 0.00

If Paid By 03/29/2022,

Due If Paid On Time:

USD 7,427.54

Past Due: 0.00

Pay This Amount:

7,427.54 USD

Disc lost if paid late:

151.58

Last Payment 03/21/2022 5,500.05

If Paid After 03/29/2022,

Pay this Amount:

7,579.12 USD

Due If Paid Late:

USD 7,579.12

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

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# MCKESSON

# STATEMENT

As of: 03/25/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 03/25/2022  
Mail to:

Page: 001  
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Customer: 262252  
Date: 03/26/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 262252  
Date: 03/26/2022

PLEASE CHECK ANY  
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 262252 CVS PHCY 7006/MEMORIA PHS											
03/23/2022	03/29/2022	7331904865	1620831	115Invoice	0.08	3.88		3.80	✓	7331904865	

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals: 3.88 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 03/21/2022 5,500.05

If Paid By 03/29/2022,  
Pay This Amount:

3.80 USD

If Paid After 03/29/2022,  
Pay this Amount:

3.88 USD

Due If Paid On Time:

USD 3.80

Disc lost if paid late:

0.08

Due If Paid Late:

USD 3.88

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# MCKESSON

# STATEMENT

As of: 03/25/2022

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

Company: 8000

DC: 8115

As of: 03/25/2022 Page: 001  
Mail to: Comp: 8000

HEB PHY FC 490/MEM MC PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Customer: 464450  
Date: 03/26/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 464450 PLEASE CHECK ANY  
Date: 03/26/2022 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
<b>Customer Number 464450 HEB PHY FC 490/MEM MC PHS</b>											
03/21/2022	03/29/2022	7331325247	55x399406	115Invoice	6.14	306.78		300.64 ✓		7331325247	
03/22/2022	03/29/2022	7331631493	55x401660	115Invoice	1.10	54.88		53.78 ✓		7331631493	
03/23/2022	03/29/2022	7331896250	55x404312	115Invoice	4.67	233.39		228.72 ✓		7331896250	
03/23/2022	03/29/2022	7331896252	55x404346	115Invoice	0.36	18.10		17.74 ✓		7331896252	
03/24/2022	03/29/2022	7332148590	55x406706	115Invoice	1.56	78.14		76.58 ✓		7332148590	
03/25/2022	03/25/2022	7332657450	MFC PR CORR CR	Pricing Cor		231.40- P		231.40- P ✓		7332657450	
03/25/2022	03/29/2022	7332657451	MFC PR CORR IN	Pricing Cor	4.70	234.92		230.22 ✓		7332657451	

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

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

Subtotals: 694.81 USD

Future Due: 0.00

Past Due: 231.40-

Last Payment 03/21/2022 5,500.05

If Paid By 03/29/2022,  
Pay This Amount:

676.28 USD

If Paid After 03/29/2022,  
Pay this Amount:

694.81 USD

Due If Paid On Time:

USD 676.28 ✓

Disc lost if paid late:

18.53

Due If Paid Late:

USD 694.81

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

# MCKESSON

# STATEMENT

As of: 03/25/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 03/25/2022

Page: 001

CVS PHCY 7475/MEM MC PHS  
 MEMORIAL MEDICAL CENTER  
 VICKY KALISEK  
 815 N VIRGINIA ST  
 PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
 Statement for information only

Territory: 400

Mail to:

Comp: 8000

Customer: 835438

Date: 03/26/2022

AMT DUE REMITTED VIA ACH DEBIT  
 Statement for information only

Cust: 835438  
 Date: 03/26/2022

PLEASE CHECK ANY  
 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
03/23/2022	03/29/2022	7332089916	CVS PHCY 7475/MEM MC PHS	632536 1621194	115Invoice	3.03	151.62		148.59 ✓		7332089916	

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

**TOTAL:** Customer Number 835438 CVS PHCY 7475/MEM MC PHS  
 Subtotals: 151.62 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 5,500.05  
 03/21/2022

If Paid By 03/29/2022,  
 Pay This Amount: 148.59 USD

If Paid After 03/29/2022,  
 Pay this Amount: 151.62 USD

Due If Paid On Time:  
 USD 148.59 ✓

Disc lost if paid late:  
 3.03

Due If Paid Late:  
 USD 151.62

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

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

**Serviced By:**  
AMERISOURCEBERGEN DRUG CORP  
12727 W. AIRPORT BLVD.  
SUGAR LAND TX 77478-6101  
  
DEA: RA0289276  
866-451-9655

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

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

*Handwritten:*  
3/28/22

<b>Customer Number</b>	100135284 / 037028186
<b>Terms</b>	Sat - Fri Due in 7 days
<b>Summary</b>	
Not Yet Due:	0.00
Current:	344.83
Past Due:	0.00
Total Due:	344.83
Account Balance:	344.83

**Account Activity**

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
03-21-2022	04-01-2022	3087048770	165188	Invoice	51.66		0.00	51.66 ✓
03-21-2022	04-01-2022	3087048771	165189	Invoice	101.38		0.00	101.38 ✓
03-21-2022	04-01-2022	3087086731	165236	Invoice	12.50		0.00	12.50 ✓
03-22-2022	04-01-2022	3087202956	165245	Invoice	9.95		0.00	9.95 ✓
03-22-2022	04-01-2022	345499342	163809	Invoice	(54.42)		0.00	(54.42) ✓
03-22-2022	04-01-2022	345499343	163809	Invoice	42.21		0.00	42.21 ✓
03-24-2022	04-01-2022	3087429288	5214798102	Invoice	28.60		0.00	28.60 ✓
03-24-2022	04-01-2022	3087500816	165261	Invoice	22.65		0.00	22.65 ✓
03-24-2022	04-01-2022	3087500817	165262	Invoice	0.29		0.00	0.29 ✓
03-25-2022	04-01-2022	3087638103	165270	Invoice	129.92		0.00	129.92 ✓
03-25-2022	04-01-2022	3087638104	165271	Invoice	0.09		0.00	0.09 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
344.83	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
03-25-2022	(880.72)

Reminders	
Due Date	Amount
04-01-2022	344.83
<b>Total Due:</b>	<b>344.83</b>

**APPROVED**  
**MAR 28 2022**

**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="checkbox"/>	"ENTER YOUR 4-DIGIT PIN"	###		
<input type="checkbox"/>	"MAKE A PAYMENT, PRESS 1"			1
<input type="checkbox"/>	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★		941 #
<input type="checkbox"/>	"IF FEDERAL TAX DEPOSIT ENTER 1"			1
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING YEAR"	★		22
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★		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"	★		\$ 102,215.81 #
	"1 TO CONFIRM"			1
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0		\$ 53,358.54 #
	"ENTER W/CENTS AMOUNT OF MEDICARE"			\$ 12,478.98 #
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"			\$ 36,378.29 #
<input type="checkbox"/>	"6-DIGIT SETTLEMENT DATE"	CHECK		\$
	"1 TO CONFIRM"	★		1
<input type="checkbox"/>	ACKNOWLEDGEMENT NUMBER			

<b>CALLED IN BY:</b>	<input type="text"/>
<b>CALLED IN DATE:</b>	<input type="text"/>
<b>CALLED IN TIME:</b>	<input type="text"/>

Run Date: 03/28/22  
Time: 11:07

MEMORIAL MEDICAL CENTER  
Payroll Register ( Bi-Weekly )  
Pay Period 03/11/22 - 03/24/22 Run# 1

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Final Summary

*-- Pay Code Summary						*-- Deductions Summary				
PayCd	Description	Hrs	OT	SH	WE	HC	CB	Gross	Code	Amount
1	REGULAR PAY-S1	9760.00	N	N	N			204401.68	A/R	625.00
1	REGULAR PAY-S1	1784.00	N	N	N	N		74885.22	ADVANC	AWARDS
1	REGULAR PAY-S1	371.50	Y	N	N			10925.42	BOOTS	CAFE-H
2	REGULAR PAY-S2	2304.75	N	N	N			54887.81	CAFE-2	CAFE-3
2	REGULAR PAY-S2	139.00	Y	N	N			4646.76	CAFE-5	CAFE-C
3	REGULAR PAY-S3	1264.75	N	N	N			36024.58	CAFE-F	CAFE-H
3	REGULAR PAY-S3	62.75	Y	N	N			3615.55	CAFE-L	CAFE-P
C	CALL PAY	8.00	N	N	N	N		16.00	CHILD	609.70
C	CALL PAY	2014.25	N	1	N	N		4028.50	CREDUN	DD ADV
D	DOUBLE TIME	25.00	N	1	N	N		635.90	DEP-LF	DIS-LF
D	DOUBLE TIME	3.00	N	2	N	N		81.72	EATCSH	FEDTAX
D	DOUBLE TIME	5.50	Y	1	N	N		203.55	FICA-O	26679.27
D	DOUBLE TIME	3.00	Y	2	N	N		122.58	FLX FE	FIRSTC
E	EXTRA WAGES		N	N	N	N		-554.19	GIFT S	215.90
E	EXTRA WAGES		N	1	N	N	N	24497.00	GTL	GRANT
F	FUNERAL LEAVE	24.00	N	1	N	N		329.52	HOSP-I	195.52
I	INSERVICE	32.00	N	1	N	N		902.00	LEAF	LEGAL
K	EXTENDED-ILLNESS-BANK	24.00	N	N	N	N		306.72	LEAF	LEGAL
K	EXTENDED-ILLNESS-BANK	120.00	N	1	N	N		3116.26	LEAF	LEGAL
P	PAID-TIME-OFF	77.00	N	N	N	N		783.95	LEAF	LEGAL
P	PAID-TIME-OFF	1359.20	N	1	N	N		36673.58	LEAF	LEGAL
Y	CALL PAY 2	96.00	N	1	N	N		192.00	MEALS	107.58
Z	CALL PAY 3	96.00	N	1	N	N		288.00	METVIS	107.58
t	PHONE & DATA		N	N	N	N		940.00	MISC/	MMCSHR
v	COVID-FFCRA	8.00	N	1	N	N		98.96	MISC/	MMCSHR
									OTHER	PHI
									PR FIN	RELAY
									SAMS	SCRUBS
									ST-TX	STONOF
									STONE2	STUDEN
									SUNILL	805.64
									SUNSTD	1220.35
									TSA-1	TSA-2
									TSA-P	TSA-R
									UNIFOR	172.03

Grand Totals: 19601.70 / Gross: 462049.07 Deductions: 140168.12 Net: 321880.95  
 Checks Count: - FT 195 PT 9 Other 39 Female 220 Male 22 Credit OverAmt 10 ZeroNet Term Total: 242

Pay date:  
04-01-22

*[Signature]*  
3/28/22

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

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

PAY PERIOD: BEGIN	3/11/2022	VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: END	3/24/2022					
PAY DATE:	4/1/2022					
GROSS PAY:	\$ 462,049.07			\$ -		\$ 462,049.07
<b>DEDUCTIONS:</b>						
A/R	\$ 625.00					\$ 625.00
ADVANC						\$ -
BOOTS						\$ -
SUNLIFE CRITICAL ILLNESS	\$ 804.64					\$ 804.64
SUNLIFE ACCIDENT	\$ 770.12					\$ 770.12
SUNLIFE VISION	\$ -					\$ -
SUNLIFE SHORT TERM DIS	\$ 1,220.35					\$ 1,220.35
BCBS VISION	\$ 998.56					\$ 998.56
CAFÉ-D	\$ 1,598.06					\$ 1,598.06
CAFÉ-H	\$ 22,301.15					\$ 22,301.15
	\$ -					\$ -
	\$ -					\$ -
CAFÉ-P						\$ -
CANCER						\$ -
CHILD	\$ 609.70					\$ 609.70
CLINIC	\$ 155.00					\$ 155.00
COMBIN	\$ 306.09					\$ 306.09
CREDUN						\$ -
DENTAL	\$ -					\$ -
DEP-LF						\$ -
SUNLIFE TERM LIFE	\$ 791.02					\$ 791.02
SUNLIFE HOSP INDEM	\$ 498.71					\$ 498.71
FED TAX	\$ 36,378.29					\$ 36,378.29
FICA-M	\$ 6,239.49					\$ 6,239.49
FICA-O	\$ 26,679.27					\$ 26,679.27
FIRST C	\$ -					\$ -
FLEX S	\$ 3,404.01					\$ 3,404.01
FLX-FE	\$ -					\$ -
GIFT S	\$ 215.80					\$ 215.80
GRP-IN						\$ -
GTL						\$ -
HOSP-I						\$ -
LEGAL	\$ 975.02					\$ 975.02
OTHER	\$ 279.77					\$ 279.77
NATIONAL FARM LIFE	\$ 1,927.76					\$ 1,927.76
MED SURCHARGE	\$ 405.00					\$ 405.00
PR FIN	\$ -					\$ -
RELAY						\$ -
REPAY						\$ -
STONEDF	\$ 640.86					\$ 640.86
STONE						\$ -
STONE 2						\$ -
STUDEN						\$ -
TSA-R	\$ 32,343.51					\$ 32,343.51
UW/HOS	\$ -					\$ -
<b>TOTAL DEDUCTIONS:</b>	\$ 140,167.18	\$ -	\$ -	\$ -	\$ -	\$ 140,167.18
	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**
<b>NET PAY:</b>	\$ 321,881.89	\$ -	\$ -	\$ -	\$ -	\$ 321,881.89
	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**

TOTAL CAFÉ 125 PLAN: \$ 31,737.75 Less Exempt:

TAXABLE PAY:	\$ 430,311.32	\$ 430,311.32	Exempt Amt:
	**CALCULATED**	From MMC Report	Difference
FICA - MED (ER)	1.45% \$ 6,239.51		
FICA - MED (EE)	1.45% \$ 6,239.51	\$ 6,239.49	\$ 0.02
FICA - SOC SEC (ER)	6.20% \$ 26,679.30		
FICA - SOC SEC (EE)	6.20% \$ 26,679.30	\$ 26,679.27	\$ 0.03
FED WITHHOLDING	\$ 36,378.29	\$ 36,378.29	

Employees over FICA-SS Cap: \$ -  
Paycode S - Employee Reimb.: \$ -

TOTAL: \$ -

TAX DEPOSIT:	\$ 102,215.91	\$ 102,215.81
FICA - MEDICARE	2.90% \$ 12,479.02	\$12,478.98
FICA - SOCIAL SECURITY	12.40% \$ 53,358.60	\$53,358.54
FED WITHHOLDING	\$ 36,378.29	\$36,378.29
<b>TOTAL TAX:</b>	\$ 102,215.91	\$102,215.81

PREPARED BY: Caitlin Clevenger  
PREPARED DATE: 3/28/2022



Run Date: 03/28/22  
Time: 12:38

MEMORIAL MEDICAL CENTER BI-WEEKLY  
\*\*\*\* Check Register \*\*\*\*  
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Num.	Name	Amount	CHECK NUM	DATE
07007	URSULA S BRYAN	1099.28	00063132	04/01/22
20786	JAYLIN RAMIREZ	185.21	00063133	04/01/22
65583	RACQUEL MOPALES	559.79	00063134	04/01/22
65147	BLANCAROSA VILLARREAL	204.84	00063135	04/01/22
88125	LISA M TREVINO	1004.01	00063136	04/01/22
00041	CARL LEE KING	903.15	DD	04/01/22
00083	SYLVIA A VARGAS	872.15	DD	04/01/22
00094	SYLVIA A MENDOZA	894.90	DD	04/01/22
00113	JACLYN CARREON	1125.23	DD	04/01/22
00132	SANDRA A BRAUN	888.83	DD	04/01/22
00192	BRENDA D PENA	2767.35	DD	04/01/22
00270	ANGELA M BURGIN	640.68	DD	04/01/22
00344	SANDRA LEE RUDDICK	2720.10	DD	04/01/22
00387	BILLIE F DUCKWORTH	3822.17	DD	04/01/22
00392	MONICA T CARR	1282.62	DD	04/01/22
00399	LINDA J TIJERINA	1838.41	DD	04/01/22
00401	VELMA J PINA	1861.97	DD	04/01/22
00417	SHERRY L KING	2360.14	DD	04/01/22
00423	DOMN V STRINGO	2245.31	DD	04/01/22
00482	PAM FIKAC	1327.62	DD	04/01/22
00577	DIANA GARCIA	2290.34	DD	04/01/22
00581	CYNTHIA L RUSHING	1521.82	DD	04/01/22
00676	SHEILA KAY HEATHCOCK	1168.37	DD	04/01/22
00681	R RENEE WOOD	1606.87	DD	04/01/22
00692	DEBORAH E WITTEBERT	198.43	DD	04/01/22
00697	MARIA C FARIAS	1036.12	DD	04/01/22
00707	KIMBERLY R BLINKA	1375.70	DD	04/01/22
01015	SUSAN B SMALLEY	1591.55	DD	04/01/22
01191	SHARON M SPARKS	1553.30	DD	04/01/22
01234	JENISE N SVETLIK	1833.12	DD	04/01/22
01791	RAUSHANAH J MONDAY	1465.64	DD	04/01/22
02011	ERIN R CLEVINGER	3288.08	DD	04/01/22
02014	AGAPITA C CANTU	667.91	DD	04/01/22
02021	ERIKA OSORNIA-SANCHEZ	342.41	DD	04/01/22
02022	AMANDA J GRIGGS	2410.92	DD	04/01/22
02064	ANNA LAURA GARCIA	838.02	DD	04/01/22
02097	KYLIE M GAINES	1921.09	DD	04/01/22
02099	TRACI M SHEFCIK	2913.71	DD	04/01/22
02112	LESLIE THOMAS	2992.47	DD	04/01/22
02165	CAYDENCE N CAUDILL	530.23	DD	04/01/22
02193	TIKI VENGLAR	1450.74	DD	04/01/22
02271	DAWN J BUBENIK	1947.78	DD	04/01/22
02301	NICOLAS TIJERINA	4699.05	DD	04/01/22
02302	CATHERINE MARIE DECILLOS	744.89	DD	04/01/22
02303	CONNIE M LUNA	2623.04	DD	04/01/22
02315	NINA M GREEN	4768.58	DD	04/01/22
02331	JESSICA B BIFFLE	2786.00	DD	04/01/22
02346	JEANNETTE L FALCON	580.65	DD	04/01/22
02416	JANELLE SCOTT	1917.94	DD	04/01/22
02511	MAGDALENA SEPULVEDA	1152.43	DD	04/01/22
02535	STEFANIE M SOLIZ	688.13	DD	04/01/22
02552	VERONICA RAGUSIN	1688.14	DD	04/01/22
02584	BEATRICE MAGU	2250.54	DD	04/01/22

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MEMORIAL MEDICAL CENTER BI-WEEKLY  
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Num.	Name	Amount	CHECK NUM	DATE
02678	MELISSA NESLONEY	2510.35	DD	04/01/22
02701	RONDA DAWNELLE GOHLKE	2072.88	DD	04/01/22
02719	DAWN M MCCLELLAND	2004.90	DD	04/01/22
02735	ZANDRA A GARCIA	658.42	DD	04/01/22
02763	JESSICA COPPIN	1359.64	DD	04/01/22
02794	HEATHER L MUTCHLER	1798.96	DD	04/01/22
02812	BRITTANY N RUDDICK	2086.85	DD	04/01/22
02907	MARIA F LONGORIA	1150.86	DD	04/01/22
02927	MICHAEL L GAINES	3041.39	DD	04/01/22
02963	DOROTHY J RENDON	257.85	DD	04/01/22
02970	DIANNE G ATKINSON	1996.41	DD	04/01/22
03864	JACQUELINE R HERRERA	1243.75	DD	04/01/22
05003	COURTNE D THURLKILL	2892.57	DD	04/01/22
05006	REGINA A MARTINEZ	1451.87	DD	04/01/22
05007	JAMIE K NEYLAND	1706.75	DD	04/01/22
05641	AMANDA R KEY	2383.20	DD	04/01/22
05757	SHARON T HOLDER	1808.53	DD	04/01/22
07066	DELPHINE PADRON	1260.32	DD	04/01/22
07123	CYNTHIA GUERRA	1464.49	DD	04/01/22
07878	DIANA C SAUCEDA	1010.15	DD	04/01/22
10519	MARISSA LYNN HUNT	1294.69	DD	04/01/22
11197	CATHERINE A SAENZ	4542.62	DD	04/01/22
11412	COURTNEY L MORKOVSKY	715.97	DD	04/01/22
12115	LISA J HINOJOSA	1057.80	DD	04/01/22
12212	MARIA E ARREDONDO	712.39	DD	04/01/22
15097	KYLE L DANIEL	2398.32	DD	04/01/22
15131	SAVANNAH HARLEY	2362.26	DD	04/01/22
15286	DAWN M MAREK	2034.17	DD	04/01/22
15555	STEPHANIE MARTIN	701.85	DD	04/01/22
15685	KIMBERLY STAVENA	1269.45	DD	04/01/22
15915	BRIANNE J KEY	1918.60	DD	04/01/22
20112	YULMA PATRICA RODRIGUEZ	1012.85	DD	04/01/22
20144	SOPHIE M PECENA	643.58	DD	04/01/22
20156	ERIN ASHLEY WISDOM	2661.57	DD	04/01/22
20206	KELLI B GOFF	1322.27	DD	04/01/22
20207	SHAWNA G HARTL	1648.75	DD	04/01/22
20243	MELANIE CORTEZ	1734.10	DD	04/01/22
20294	JESSICA D WALTHER	964.53	DD	04/01/22
20456	SAYDI A ST CLAIR	231.89	DD	04/01/22
20484	BRIANNA S PASSMORE	286.53	DD	04/01/22
20548	JAMES D AKIN	1249.39	DD	04/01/22
20567	JESSICA L RUDDICK	337.34	DD	04/01/22
20742	CYNTHIA LOPEZ	842.78	DD	04/01/22
20759	JAMIE SADLER	1221.54	DD	04/01/22
20797	BETHANN M DIGGS	729.72	DD	04/01/22
20816	JOIE L PENA	1033.62	DD	04/01/22
20837	DAISY MADRIGAL	1150.12	DD	04/01/22
20896	DANIELA CAMACHO	435.12	DD	04/01/22
20977	CHERYL L TESCH	1826.34	DD	04/01/22
21450	DIRNA E LEAL	1398.74	DD	04/01/22
21629	JACOBY R CRAWFORD	2220.35	DD	04/01/22
21736	ALLISON GOULDEN	925.29	DD	04/01/22
26789	LORRAINE V GARZA	317.98	DD	04/01/22
28120	JESSICA V SELVEIRA	885.16	DD	04/01/22

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Num.	Name	Amount	CHECK NUM	DATE
31035	STACIE L EPLEY	1867.94	DD	04/01/22
31054	LORA L LAMBDEN	844.39	DD	04/01/22
31099	ARACELY Z GARCIA	2031.77	DD	04/01/22
31185	JERRY A FINDLEY	292.96	DD	04/01/22
31219	LAUREN PHILLIPS	558.84	DD	04/01/22
31313	KATHERINE LYNN JIMENEZ	1843.34	DD	04/01/22
31319	STACY L FARMER	1596.59	DD	04/01/22
31463	EDWARD E MATULA	2233.43	DD	04/01/22
31508	RACHEL A HEFFNER	2507.72	DD	04/01/22
31821	KAYLA M ALVAREZ	1691.87	DD	04/01/22
31832	SHANE D KRESTA	1439.44	DD	04/01/22
31849	CODY L JUREK	294.89	DD	04/01/22
38118	KRYSTELLA F KISIAH	1022.31	DD	04/01/22
38413	DEVAN ORTA	1201.64	DD	04/01/22
38702	ANNA VANESSA PENNELL	999.26	DD	04/01/22
41112	ANASTASIA L PEREZ	768.08	DD	04/01/22
41171	TOMMIE M TREVINO	160.33	DD	04/01/22
41205	JEMMETTE ALVARADO	779.34	DD	04/01/22
41225	LESLIE A CRAIGEN	976.10	DD	04/01/22
41236	PAMELA K VANNOY	1359.46	DD	04/01/22
41242	EDUARDO TORRES	599.83	DD	04/01/22
41274	KAREN GANN	1025.38	DD	04/01/22
41279	PAMELA R HARMON	623.23	DD	04/01/22
41347	ADRIANNA D STRAKOS	707.81	DD	04/01/22
41369	LORETTA A LEAL	571.54	DD	04/01/22
41418	ANGEL M CASSEL	982.35	DD	04/01/22
41507	OLGA I BETANCOURT	807.96	DD	04/01/22
41612	SONCA A GULJARDO	790.25	DD	04/01/22
41617	JACQUELINE M MARTINEZ	812.03	DD	04/01/22
41618	HEATHER DELEBOSQUE	694.66	DD	04/01/22
41705	KELSEY R TAYLOR	897.14	DD	04/01/22
41896	RENAE MICHELLE EMERY	615.40	DD	04/01/22
41897	ROXANNA MARTINEZ	736.12	DD	04/01/22
41901	JUANITA R MILLER	1172.65	DD	04/01/22
41924	BRITTNEY V STRICKLIN	511.74	DD	04/01/22
42106	CHRISTY SILVAS	798.15	DD	04/01/22
42112	SOCORRO C GONZALES	755.23	DD	04/01/22
42122	LET ANA CHAVANA	1546.85	DD	04/01/22
42125	LUCY CALZADA	755.07	DD	04/01/22
42304	MIMI T NGUYEN	1891.11	DD	04/01/22
42320	MICHAEL A PFEIL	3004.34	DD	04/01/22
42820	MARIA D CHAVEZ	837.93	DD	04/01/22
42842	SHANNA S O DONNELL	3214.08	DD	04/01/22
48680	JESSICA BUSH	179.66	DD	04/01/22
50018	MICHELLE M MORALES	1473.40	DD	04/01/22
50148	PENNY GOULDEN	3126.80	DD	04/01/22
50161	BRITTNEY MICHELLE ZAMORA	228.09	DD	04/01/22
50248	MCKENNA VILLEGAS	557.81	DD	04/01/22
50282	JACOB W HAMILTON	2465.59	DD	04/01/22
50310	JASMINE GRIGSBY	745.38	DD	04/01/22
50546	MELANIE K SAMAYOA	1845.39	DD	04/01/22
50573	DEANNA R DAVIS	1514.25	DD	04/01/22
50596	BETTY S DAVIS	1887.02	DD	04/01/22
50719	DEBRA K MUSTERED	2188.20	DD	04/01/22

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\*\*\*\* Check Register \*\*\*\*  
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Num.	Name	Amount	CHECK NUM	DATE
50928	ADINA RODRIGUEZ	609.78	DD	04/01/22
53541	JACLYN B HARTL	1518.54	DD	04/01/22
55025	LEA C RESENDEZ	528.98	DD	04/01/22
55026	IRENE B PEREZ	353.32	DD	04/01/22
55106	CRYSTAL M CHAVEZ	734.10	DD	04/01/22
55127	APRIL N KUBALA	2628.32	DD	04/01/22
55371	BLANCA HERNANDEZ	350.31	DD	04/01/22
55382	SHANNON JACILDO	1639.60	DD	04/01/22
55658	LAJUAN WILKE	721.09	DD	04/01/22
58510	RITA L POLENSKY	772.52	DD	04/01/22
60103	TODD SAVOY	813.84	DD	04/01/22
60112	ROBERT A RODRIGUEZ	2002.26	DD	04/01/22
60131	NORA OVALLE	495.85	DD	04/01/22
60163	MIGDALIA CLARO	778.89	DD	04/01/22
60165	TERESA A BENITEZ	1637.92	DD	04/01/22
60191	LOLA A RODRIGUEZ	551.67	DD	04/01/22
60271	REBEKAH GEPIK	1124.98	DD	04/01/22
60412	CHRISTOPHER GALINDO	758.14	DD	04/01/22
60615	DOROTHY A LONGORIA	955.86	DD	04/01/22
60718	ANNA C GONZALEZ	636.95	DD	04/01/22
60934	CONSUELO ZAMORA	637.49	DD	04/01/22
63124	SANJUAN M GARCIA	1113.28	DD	04/01/22
63289	JASON RUBIO	1319.04	DD	04/01/22
65100	FELICITA BONUZ	578.54	DD	04/01/22
65121	VIVIANA P MEDINA	331.07	DD	04/01/22
65151	ELIA OLACHIA	647.97	DD	04/01/22
65213	LEE SIMERLY	1142.38	DD	04/01/22
65243	LUCILA LOPEZ DE GUZMAN	1123.28	DD	04/01/22
65366	CYNTHIA GARCIA	611.05	DD	04/01/22
65393	RAMONA A PEREZ	809.45	DD	04/01/22
65453	AMALIA L FLORES	770.50	DD	04/01/22
65463	MARIA I VELOZ	653.08	DD	04/01/22
65486	ROSA RODRIGUEZ	912.43	DD	04/01/22
65513	MARIA MORALES	883.83	DD	04/01/22
65705	DOMITILA HERRERA	805.12	DD	04/01/22
65815	MELISSA R VEGAS	614.57	DD	04/01/22
65865	MARIA F LEDEZMA	617.31	DD	04/01/22
68163	CRYSTAL MARTINEZ	729.30	DD	04/01/22
68792	NAZARIO DIAZ HERNANDEZ	1679.05	DD	04/01/22
70119	SARA N ELEDSON	2256.12	DD	04/01/22
71620	ROBIN STEELE	956.99	DD	04/01/22
73749	GLORIA N REID	2285.87	DD	04/01/22
75190	RIKA MILLER	1830.68	DD	04/01/22
76003	IRMA DELEON	729.06	DD	04/01/22
76110	TARAH SUBLETT	726.53	DD	04/01/22
76115	JENNIFER R CARLOCK	740.51	DD	04/01/22
76120	RACHEL CANALES	1307.69	DD	04/01/22
76138	KAREN D GARCIA	535.43	DD	04/01/22
76210	ZOE VILLARREAL	324.75	DD	04/01/22
76300	AIDA JIMENEZ	704.10	DD	04/01/22
76313	PAMELA L BARTON	690.19	DD	04/01/22
76403	KATRINA A POKLUDA	1261.36	DD	04/01/22
76647	CHERYL A SEE	1166.75	DD	04/01/22
76706	GREGORY E MORALES	617.68	DD	04/01/22

Run Date: 03/28/22  
Time: 12:38

MEMORIAL MEDICAL CENTER BI-WEEKLY  
\*\*\*\* Check Register \*\*\*\*  
Pay Period 03/11/22--03/24/22 Run: 1  
Type=NET 10000001 OPERATING - PROSPERITY

Page 5  
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
76761	LAURA F PESINA	728.84	DD	04/01/22
76854	MARY PATTERSON	658.15	DD	04/01/22
76985	VANESSA TRISTAN	165.58	DD	04/01/22
77646	FAREN A GONZALES	1069.87	DD	04/01/22
78020	MISTY R PASSMORE	1234.46	DD	04/01/22
78058	KYANN J POWER	297.78	DD	04/01/22
78072	DONNA M RAWLINGS	1306.89	DD	04/01/22
78186	ANDREA F COOK	211.89	DD	04/01/22
78191	JAMIE J GRASSE	966.13	DD	04/01/22
78287	MARISSA D ALMANZAR	1680.75	DD	04/01/22
78336	JESSICA L GLOVER	1463.58	DD	04/01/22
78566	MELISSA K GEE	765.53	DD	04/01/22
78764	ASHLEY D HADLEY	1936.85	DD	04/01/22
78778	SARA M RUBIO	1982.63	DD	04/01/22
78781	KRISTEN R MACHICEK	2210.97	DD	04/01/22
78787	FARAH I JANAK	2723.22	DD	04/01/22
78879	YESENIA QUEZADA	554.40	DD	04/01/22
78897	DAYLE J MCLAUGHLIN	583.38	DD	04/01/22
80008	ADAM D BESIO	2481.67	DD	04/01/22
80141	JEANNE ORTA	1807.06	DD	04/01/22
82227	CAITLIN A CLEVINGER	1017.73	DD	04/01/22
86432	KRISTI L BOYD	2801.51	DD	04/01/22
86482	MEGAN M HARPER	762.15	DD	04/01/22
88808	MARLEY B O'DONNELL	2219.99	DD	04/01/22
88904	MAYRA K MARTINEZ	1437.42	DD	04/01/22
90320	ROSHANDA S THOMAS	3577.17	DD	04/01/22
93231	ANDRIE M FLORES	1151.03	DD	04/01/22
98756	ADRIANNA M GALVAN	1527.22	DD	04/01/22

321880.95

**MEMORIAL MEDICAL CENTER  
PROSPERITY BANK  
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- March 21, 2022 - March 27, 2022**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>
3/21/2022	WEBFILE TAX PYMT DD 902/05339687 21000022099	- Sales Tax
3/21/2022	PAY PLUS ACHTRANS 452579291 101000697730883	- 3rd Party Payor Fee
3/21/2022	IRS USATAXPYMT 220248014100115 6103601000522	- Payroll Taxes
3/21/2022	IRS USATAXPYMT 220248055556107 6103601000517	- Payroll Taxes
3/22/2022	PAY PLUS ACHTRANS 452579291 101000698495832	- 3rd Party Payor Fee
3/22/2022	MCKESSON DRUG AUTO ACH ACH04955030 910000137	- 340B Drug Program Expense
3/23/2022	PAY PLUS ACHTRANS 452579291 101000699300957	- 3rd Party Payor Fee
3/24/2022	PAY PLUS ACHTRANS 452579291 101000690127244	- 3rd Party Payor Fee
3/24/2022	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	- CitiBank Corporate Card Payment
3/25/2022	PAY PLUS ACHTRANS 452579291 101000691004089	- 3rd Party Payor Fee
3/25/2022	FDMS FDMS PYMT 052-1743547-000 4100012669998	- Credit Card Machine Lease Expense
3/25/2022	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense

<u>Amount</u>	<u>CPS</u>
1,163.84**	PAY PLUS 208.71 +
208.71	6.19 +
91.80**	62.03 +
100,371.34**	155.66 +
6.19	273.34 +
5,500.05*	705.93 *
62.03	
155.66	CL REC
1,090.02*	60.19 +
273.34	60.19 *
60.19	
880.72*	
<u>109,863.89</u>	705.93 +
	60.19 +
	766.12 *

Roshanda Thomas  
Memorial Medical Center

March 28, 2022

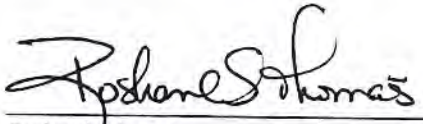
PROSPERITY BANK

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

\* Approved 03-23-22 CC  
\*\* Approved 03-16-22 CC

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>
4/8/2022	UC IGT	ACCRUED UC IGT

109,863.89 +
1,163.84 -
91.80 -
<u>100,371.34</u> -
137,415.76 -
5,500.05 -
1,090.02 -
880.72 -
<u>137,415.76</u> -
766.12 *



Roshanda Thomas  
Memorial Medical Center

March 28, 2022

766.12 +  
766.12 -  
0.00 \*



**Transaction Summary**

Transaction Complete  
Trace

**Texas Health and Human Services Commission  
Memorial Medical Center Operating County**

Payment Total	\$137,415.76
Bank Routing and Account Number	
Settlement Date	4/8/2022
UC Hospital Amount	\$137,415.76
Entered By	Marley Moehrig

## DY10 UC/SDA RURAL Allocation Form

TRACE Number: 000000005508910

*The Trace Number is in the receipt you receive from the Comptroller once you have submitted your IGT into TexNet.*

**The Trace Sheet and Allocation Form must be submitted together in the same email. All Trace Sheet submissions must be accompanied by an Allocation Form. If a governmental entity is submitting in multiple SDA's, a separate allocation form must be submitted for each SDA**

<b>SDA</b>	<b>Government Entity</b>	<b>IGT Total</b>
Nueces	Memorial Medical Center	\$ 137,415.76
		\$ 137,415.76



Application Data	Application Data	Application Data	Application Data	Application Data	Application Data	If Hospital is in the 2. State Hospitals tab, the value is Yes, otherwise it is blank	Application Data	Application Data	Application Data	Application Data	Application Data	Application Data
TPI	2021 Master TPI	UC Hospital Class	Rural Hospital	IMD	Children's Hospital	Included in State Hospital Tab?	Provider Name	SDA	County	Final Payment After Accounting for Recoupments	Final IGT Required After Accounting for Recoupments	
137909111	137909111	Small Public	Rural Hospital				Memorial Medical Center	Nueces	Calhoun	\$429,558.50	\$137,415.76	

2011 Fiscal Yr	UC Hospital Class	Rural Hospital	MD	Children in Hospital	Included in State Hospital Tab?	Provider Name	IDA	County	Medicaid Services with GI and Medicare Payments Included	Total DDD Uncovered Shortfall Refunded	UC Uncovered Charity Duplicated In DDD	088-Only Uncovered Shortfall (Refund)	UC Schedule 3 Total Charity Costs + Non- Covered Surplus	2011 DSH Payment Reserve Fund Pending for Pay. In	DSH Payment Adjustments to Charity Care	Remaining UC Schedule 3 Charity Costs after DSH	Total Schedule 3 Uncovered Charity Payments Costs	Total Schedule 3 Uncovered Charity Payments Costs	Schedule 1 Adjustment	Schedule 2 Adjustment	Schedule 3 Adjustment	Estimated Total Non-UC UC Costs (Schedules 1 and 2 and Schedules 1 and 3)	2011 DSH Adjustment for Refund	Total Uncovered UC Costs (includes State Schedule 2)	YTD UC Payments	YTD UC Payments	State Hospital UC Payments	Maximum Total Payment (State Hospital + UC)	Maximum Total UC Payment (State Hospital + UC)	Total UC DDT Commitment (Amount Capable Based Upon In Contract)	
131029111	Small Public	Rural Hospital	Skaneateles			Memorial Medical Center	Nunes	Cahoon	-754160.264	3345154.125	2500938.57	754321.531	2848633.504	908741.2	608879.507	1939954.03	100013.41	0	0	0	0	100013.41	2047467.5	319082.91	1050254.623	1536884.517	480000.1764	480000.1764	480000.1764	480000.1764	480000.1764

Row Labels	Sum of	Final Payment After Accounting for Recoupments	Sum of	Final IGT Required After Accounting for Recoupments
Bexar	\$	1,641,726.99	\$	525,188.44
Dallas	\$	857,783.72	\$	274,405.01
Harris	\$	1,728,636.69	\$	552,990.86
Hidalgo	\$	1,236,875.82	\$	395,676.57
Jefferson	\$	2,557,944.72	\$	818,286.48
Lubbock	\$	3,102,901.08	\$	992,618.01
MRSA Central	\$	7,858,926.84	\$	2,514,070.58
MRSA Northeast	\$	18,913,902.45	\$	6,050,557.30
MRSA West	\$	32,502,671.05	\$	10,397,604.15
Nueces	\$	5,243,197.05	\$	1,677,298.71
Tarrant	\$	3,474,275.04	\$	1,111,420.58
Travis	\$	4,467,188.97	\$	1,429,053.73
<b>Grand Total</b>	<b>\$</b>	<b>83,586,030.42</b>	<b>\$</b>	<b>26,739,170.42</b>

Check		83,586,030.42		26,739,170.42
		TRUE		TRUE

RECEIVED BY THE  
COUNTY AUDITOR ON

MAR 24 2022

08:59

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap\_open\_invoice.template

Class Pay Code

11828 SOLERA WEST HOUSTON

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031822		03/23/20	03/18/20	04/15/20		215.77	0.00	0.00	215.77 ✓

TRANSFER *NH insurance pymt deposited into MMC open*

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
11828	SOLERA WEST HOUSTON	215.77	0.00	0.00	215.77	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	215.77	0.00	0.00	215.77

APPROVED  
BY

MAR 24 2022

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CL# 194415

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MAR 24 2022

03/24/2022

CALVIN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

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
032122		03/23/20	03/21/20	04/15/20		12,129.05	0.00	0.00	12,129.05

TRANSFER *Net insurance pymt deposited into mmc operating*

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11832	BROADMOOR AT CREEKSIDE PARK	12,129.05	0.00	0.00	12,129.05

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	12,129.05	0.00	0.00	12,129.05

APPROVED  
OK

MAR 24 2022

COUNTY AUDITOR  
CAROLYN COLLIER, CLERK

CK# 194412

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COUNTY AUDITOR ON

MAR 24 2022  
03/24/2022

08:59  
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap\_open\_invoice.template

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
031522		03/23/20	03/15/20	04/15/20		3,520.00	0.00	0.00	3,520.00 ✓
	TRANSFER								
032122		03/23/20	03/21/20	04/15/20		361.43	0.00	0.00	361.43 ✓
	TRANSFER								
Vendor Totals									
11824	THE CRESCENT					3,881.43	0.00	0.00	3,881.43

*NH insurance pymt deposited nt mme upon ✓*  
*"*

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	3,881.43	0.00	0.00	3,881.43

APPROVED  
BY

MAR 24 2022

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CHK# 194416

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COUNTY AUDITOR ON

MAR 24 2022

03/24/2022

CALHOUN COUNTY, TEXAS

08:58

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

0

ap\_open\_invoice.template

Vendor# Vendor Name

Class Pay Code

11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031522A		03/23/20	03/15/20	04/15/20		12,651.65	0.00	0.00	12,651.65 ✓
031522	TRANSFER	03/23/20	03/15/20	04/15/20		7,999.84	0.00	0.00	7,999.84 ✓
	TRANSFER	"	"	"		"	"	"	"
031822		03/23/20	03/18/20	04/15/20		10,423.33	0.00	0.00	10,423.33 ✓
	TRANSER	"	"	"		"	"	"	"
032122		03/23/20	03/21/20	04/15/20		6,134.97	0.00	0.00	6,134.97 ✓
	TRANSFER	"	"	"		"	"	"	"

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
11836		GOLDENCREEK HEALTHCARE	37,209.79	0.00	0.00	37,209.79

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	37,209.79	0.00	0.00	37,209.79

APPROVED  
CST

MAR 24 2022

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK #194413

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COUNTY AUDITOR ON

MAR 24 2022

03/24/2022

08:58

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

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Dates Through:

Class Pay Code

Vendor# Vendor Name

12696 GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031522		03/23/20	03/15/20	04/15/20		212.32	0.00	0.00	212.32 ✓
031722	TRANSFER	<i>MH insurance point deposited into mme operating</i>				194.61	0.00	0.00	194.61 ✓
031722A	TRANSFER	"	"	"	"	0.32	0.00	0.00	0.32 ✓
032122	TRANSFER	"	"	"	"	972.50	0.00	0.00	972.50 ✓
032122A	TRANSFER	"	"	"	"	8,122.40	0.00	0.00	8,122.40 ✓

Vendor Total:	Number	Name	Gross	Discount	No-Pay	Net
	12696	GULF POINTE PLAZA	9,502.15	0.00	0.00	9,502.15

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	9,502.15	0.00	0.00	9,502.15

APPROVED  
ON

MAR 24 2022

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CL#194414



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03/24/2022  
MAR 24 2022  
08:59

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap\_open\_invoice.template

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031522A		03/23/20	03/15/20	04/15/20		1,669.50	0.00	0.00	1,669.50 ✓
	TRANSFER								
031522		03/23/20	03/15/20	04/15/20		8,990.60	0.00	0.00	8,990.60 ✓
	TRANSFER								
0311622A		03/23/20	03/16/20	04/15/20		2,690.28	0.00	0.00	2,690.28 ✓
	TRANSFER								
031622		03/23/20	03/16/20	04/15/20		1,063.03	0.00	0.00	1,063.03 ✓
	TRANSFER								
031822		03/23/20	03/18/20	04/15/20		13,603.59	0.00	0.00	13,603.59 ✓
	TRANSFER								
031822A		03/23/20	03/18/20	04/15/20		772.56	0.00	0.00	772.56 ✓
	TRANSFER								
032122		03/23/20	03/21/20	04/15/20		827.47	0.00	0.00	827.47 ✓
	TRANSFER								
Vendor Totals:									
Number Name						Gross	Discount	No-Pay	Net
13004 TUSCANY VILLAGE						29,617.03	0.00	0.00	29,617.03

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	29,617.03	0.00	0.00	29,617.03

APPROVED  
ON

MAR 24 2022

COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK#194417

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MAR 24 2022

08:57

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

12792 BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
031122		03/23/20	03/11/20	04/15/20		9,428.64	0.00	0.00	9,428.64 ✓
031722A	TRANSFER <i>NH insurance pmt deposited into MME operating</i>	03/23/20	03/17/20	04/15/20		194.50	0.00	0.00	194.50 ✓
031722	TRANSFER <i>"</i>	03/23/20	03/17/20	04/15/20		4,631.02	0.00	0.00	4,631.02 ✓
031822	TRANSFER <i>"</i>	03/23/20	03/18/20	04/15/20		7,526.59	0.00	0.00	7,526.59 ✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12792	BETHANY SENIOR LIVING	21,780.75	0.00	0.00	21,780.75

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	21,780.75	0.00	0.00	21,780.75

APPROVED  
CJ

MAR 24 2022

COUNTY AUDITOR  
GARYSON GOSWAMI, SIGNATURE

CK#194411

8

RUN DATE:03/25/22  
TIME:15:11

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
03/30/22 THRU 03/30/22

PAGE 1  
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	194308	03/30/22	125.00	2022 MIDCOAST HURRICANE AND
A/P	194309	03/30/22	5.79	ABBOTT LABORATORIES
A/P	194310	03/30/22	49.18	ADT COMMERCIAL
A/P	194311	03/30/22	34.77	AETNA
A/P	194312	03/30/22	4,979.18	AIRGAS USA, LLC - CENTRAL DIV
A/P	194313	03/30/22	759.25	ALLIED HEALTHCARE PRODUCTS INC
A/P	194314	03/30/22	5,000.00	AQUA PURIFICATION INC.
A/P	194315	03/30/22	8,179.75	AUREUS RADIOLOGY LLC
A/P	194316	03/30/22	93.20	AUTO PARTS & MACHINE CO.
A/P	194317	03/30/22	550.00	AZALEA HEALTH
A/P	194318	03/30/22	718.91	BAXTER HEALTHCARE
A/P	194319	03/30/22	6,305.03	BECKMAN COULTER INC
A/P	194320	03/30/22	19,308.75	BESTICA
A/P	194321	03/30/22	197.70	BOHLS BEARING & POWER TRANS
A/P	194322	03/30/22	429.95	BOSART LOCK & KEY INC
A/P	194323	03/30/22	379.00	BOSTON SCIENTIFIC CORPORATION
A/P	194324	03/30/22	3,741.00	BUILDING KID STEPS
A/P	194325	03/30/22	1,550.00	BUSINESS VIEW MAGAZINE
A/P	194326	03/30/22	149.02	C R BARD INC
A/P	194327	03/30/22	4,987.50	CARIANT HEALTH PARTNERS
A/P	194328	03/30/22	9,132.23	CDW GOVERNMENT, INC.
A/P	194329	03/30/22	518.75	CHEMAQUA
A/P	194330	03/30/22	60.02	CIGNA
A/P	194331	03/30/22	271.46	CITY OF PORT LAVACA
A/P	194332	03/30/22	180.00	CLIA LABORATORY PROGRAM
A/P	194333	03/30/22	13,507.48	CLINICAL PATHOLOGY
A/P	194334	03/30/22	2,870.98	COASTAL REPRIGERATION
A/P	194335	03/30/22	657.70	COMBINED INSURANCE
A/P	194336	03/30/22	1,652.00	CORROHEALTH, INC.
A/P	194337	03/30/22	7,302.62	DEARBORN LIFE INSURANCE COMPAN
A/P	194338	03/30/22	2,785.50	DEWITT POTH & SON
A/P	194339	03/30/22	50,311.25	DIAMOND HEALTHCARE CORP
A/P	194340	03/30/22	3,205.77	DOOR CONTROL SERVICES, INC
A/P	194341	03/30/22	32.50	DRIESSEN WATER INC. (CULLIGAN)
A/P	194342	03/30/22	1,110.30	E-MDS, INC
A/P	194343	03/30/22	10,522.78	EVIDENT
A/P	194344	03/30/22	1,400.00	FIRETRON, INC
A/P	194345	03/30/22	4,500.00	FIRST CONNECT CENTER LLC
A/P	194346	03/30/22	845.21	FISHER HEALTHCARE
A/P	194347	03/30/22	3,938.60	FLDR DESIGNS LLC
A/P	194348	03/30/22	2,841.65	G & S MANAGEMENT GROUP LLC
A/P	194349	03/30/22	472.20	GRAINGER
A/P	194350	03/30/22	11,142.84	GREAT AMERICAN FINANCIAL SVCS
A/P	194351	03/30/22	350.00	GUERBET, LLC
A/P	194352	03/30/22	470.11	GULF COAST PAPER COMPANY
A/P	194353	03/30/22	63.81	H + H SYSTEM, INC.
A/P	194354	03/30/22	21,318.88	HEALTHCARE FINANCIAL SERVICES
A/P	194355	03/30/22	236.25	HOLOGIC INC
A/P	194356	03/30/22	250.00	HSU PT DEPARTMENT
A/P	194357	03/30/22	106.43	HUMANA CLAIMS OFFICE

RUN DATE:03/25/22  
TIME:15:11

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
03/30/22 THRU 03/30/22

PAGE 2  
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	194358	03/30/22	1,488.00	INFICARE HEALTH, INC.
A/P	194359	03/30/22	2,824.00	INTOXIMETERS INC
A/P	194360	03/30/22	2,141.38	J & J HEALTH CARE SYSTEMS, INC
A/P	194361	03/30/22	1,917.50	JACKSON & CARTER, PLLC
A/P	194362	03/30/22	9,067.50	JUNXION MED STAFFING
A/P	194363	03/30/22	690.30	KEEP-U-NEAT CLEANERS
A/P	194364	03/30/22	15.00	LABCORP OF AMERICA HOLDINGS
A/P	194365	03/30/22	762.50	LANDAUER INC
A/P	194366	03/30/22	783.86	MCKESSON MEDICAL SURGICAL INC
A/P	194367	03/30/22	1,393.15	MEDICAL TECHNOLOGY ASSOCIATES
A/P	194368	03/30/22	18.95	MEDIMPACT HEALTHCARE SYS, INC.
A/P	194369	03/30/22	.00	VOIDED
A/P	194370	03/30/22	.00	VOIDED
A/P	194371	03/30/22	.00	VOIDED
A/P	194372	03/30/22	23,983.71	MEDLINE INDUSTRIES INC
A/P	194373	03/30/22	5.00	MEMORIAL MEDICAL CENTER
A/P	194374	03/30/22	.00	VOIDED
A/P	194375	03/30/22	.00	VOIDED
A/P	194376	03/30/22	19,938.63	MORRIS & DICKSON CO, LLC
A/P	194377	03/30/22	16,257.50	MSH HEALTH SERVICES LLC
A/P	194378	03/30/22	351.26	NACOGDOCHES TRANSCRIPTION
A/P	194379	03/30/22	12,283.00	OLOOP TECHNOLOGY SOLUTIONS
A/P	194380	03/30/22	1,137.51	OLYMPUS AMERICA INC
A/P	194381	03/30/22	2,741.73	ORTHO CLINICAL DIAGNOSTICS
A/P	194382	03/30/22	413.99	OWENS & MINOR
A/P	194383	03/30/22	99.05	PARTSSOURCE, LLC
A/P	194384	03/30/22	7,470.00	PAYCHEX, ADVANCE FBO
A/P	194385	03/30/22	223.92	PITNEY BOWES INC
A/P	194386	03/30/22	87.83	POWER HARDWARE
A/P	194387	03/30/22	217.50	REED, CLAYMON, MEEKER & HARGET
A/P	194388	03/30/22	187.40	ROBERT RODRIQUEZ
A/P	194389	03/30/22	8.48	SHERWIN WILLIAMS
A/P	194390	03/30/22	5,371.57	SIEMENS FINANCIAL SERVICES
A/P	194391	03/30/22	31.96	SMILE MAKERS
A/P	194392	03/30/22	3,939.17	SPARKLIGHT
A/P	194393	03/30/22	570.00	ST DAVIDS HEALTHCARE
A/P	194394	03/30/22	193.10	STERIS CORPORATION
A/P	194395	03/30/22	1,358.97	STRYKER FLEX FINANCIAL
A/P	194396	03/30/22	1,620.00	SURGICAL DIRECT SOUTH
A/P	194397	03/30/22	21.98	TALX CORPORATION
A/P	194398	03/30/22	500.00	TEXAS HHSC
A/P	194399	03/30/22	10.00	TEXAS MUTUAL INSURANCE CO
A/P	194400	03/30/22	8,030.00	TEXAS SELECT STAFFING, LLC
A/P	194401	03/30/22	42.00	TEXAS SOCIAL SECURITY PROGRAM
A/P	194402	03/30/22	513.00	TEXAS STATE BOARD OF PHARMACY
A/P	194403	03/30/22	1,733.78	TRIZETTO PROVIDER SOLUTIONS
A/P	194404	03/30/22	21,791.88	TRUSTED HEALTH, INC
A/P	194405	03/30/22	.00	VOIDED
A/P	194406	03/30/22	8,607.41	UNIFIRST HOLDINGS INC
A/P	194407	03/30/22	636.98	WAGWORKS
A/P	194408	03/30/22	155.52	WAGWORKS, INC

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	194409	03/30/22	666.00	WALLER, LANSDEN, DORTCH & DAVIS
A/P	194410	03/30/22	1,917.75	WERFEN USA LLC
A/P	194411	03/30/22	21,780.75	BETHANY SENIOR LIVING
A/P	194412	03/30/22	12,129.05	BROADMOOR AT CREEKSIDE PARK
A/P	194413	03/30/22	37,209.79	GOLDENCREEK HEALTHCARE
A/P	194414	03/30/22	9,502.15	GULF POINTE PLAZA
A/P	194415	03/30/22	215.77	SOLERA WEST HOUSTON
A/P	194416	03/30/22	3,881.43	THE CRESCENT
A/P	194417	03/30/22	29,617.03	TUSCANY VILLAGE
A/P	194418	03/30/22	20.01	
A/P	194419	03/30/22	64.08	
A/P	194420	03/30/22	550.93	
A/P	194421	03/30/22	136.28	
A/P	194422	03/30/22	4,184.68	
A/P	194423	03/30/22	121.83	
A/P	194424	03/30/22	9,319.60	
A/P	194425	03/30/22	16.49	
A/P	194426	03/30/22	146.00	
A/P	194427	03/30/22	2,154.47	
A/P	194428	03/30/22	200.00	
A/P	194429	03/30/22	31.64	
A/P	194430	03/30/22	50.00	
A/P	194431	03/30/22	791.49	
A/P	194432	03/30/22	100.00	
A/P	194433	03/30/22	166.33	
A/P	194434	03/30/22	55.00	
A/P	194435	03/30/22	499.07	
A/P	194436	03/30/22	200.40	
A/P	194437	03/30/22	118.49	
A/P	194438	03/30/22	60.00	
A/P	194439	03/30/22	20.00	
A/P	194440	03/30/22	20.00	
A/P	194441	03/30/22	599.87	
TOTALS:			507,782.65	

Payables 373,820.02 +  
 Patient refunds 19,626.66 +  
                   215.77 +  
                   12,129.05 +  
 NH 3,881.43 +  
                   37,209.79 +  
 Transfers 9,502.15 +  
                   29,617.03 +  
                   21,780.75 +  
                   507,782.65 \*

APPROVED ON

MAR 30 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS





## Request for Transfer of Funds

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

Date Requested: 3.25.22

Payer: MEDICARE

Requested by: RACHEL ARENAZAS

Requestor's email: rrarenazas@tuscanyvillagecare.net

Requestor's phone number: 713-770-5300

District or County: BRAZORIA

Facility: TUSCANY VILLAGE

**Please Attach:**

Remittance Advice and EOB

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

\* Patient Name, Date of Service and Amount of Payment from Remittance Advice must be filled out.

Please email request form

and Remittance Advice to : [cclevenger@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
		3.22.22	EFT	\$ 20,423.68	EFT6286205	WO/CVDAR000019557	\$ 20,423.68	Due Tuscany from Crescent
		3.23.22	EFT	\$ 7,482.10	EFT6287683	WO/CVDAR000019557	\$ 7,482.10	Due Tuscany from Crescent
			TOTAL	27,905.78			27,905.78	

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

Date Received: 3/25/2022

Approved by: MAYRA MARTINEZ

Date of transfer: 3/30/2022

From Facility: CRESCENT

To Facility: TUSCANY

Amount: 27,905.78

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

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

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

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

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

*Handwritten signature and date: 3/28/22*

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK#000229



## 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@mmcporthavaca.com](mailto:cclevenger@mmcporthavaca.com)

[mmartinez@mmcporthavaca.com](mailto:mmartinez@mmcporthavaca.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	3/9/2022	EFT	121.69	EFT6271628	CV DAR000018170	8.11	SOLERA WEST HOUSTON
N/A	N/A	3/10/2022	EFT	1,040.62	EFT6272915	CV DAR000018170	69.38	SOLERA WEST HOUSTON
N/A	N/A	3/15/2022	EFT	18,080.60	EFT6277040	CV DAR000018170	1,205.37	SOLERA WEST HOUSTON
N/A	N/A	3/15/2022	EFT	97.69	EFT6277067	CV DAR000018170	6.51	SOLERA WEST HOUSTON
N/A	N/A	3/16/2022	EFT	958.00	EFT6278696	CV DAR000018170	191.60	SOLERA WEST HOUSTON
N/A	N/A	3/16/2022	EFT	485.27	EFT6278674	CV DAR000018170	97.05	SOLERA WEST HOUSTON
N/A	N/A	3/17/2022	EFT	\$ 1,296.63	EFT6280312	CV DAR000018170	259.32	SOLERA WEST HOUSTON
N/A	N/A	3/18/2022	EFT	\$ 96.42	EFT6281983	CV DAR000018170	19.28	SOLERA WEST HOUSTON
N/A	N/A	3/21/2022	EFT	\$ 789.19	EFT6274344	CV DAR000018170	157.83	SOLERA WEST HOUSTON
N/A	N/A	3/21/2022	EFT	\$ 2,044.33	EFT6284314	CV DAR000018170	408.87	SOLERA WEST HOUSTON
<b>TOTAL</b>				<b>25,010.44</b>			<b>2,423.32</b>	

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

Date Received: 3/24/2022

Approved by: MAYRA MARTINEZ

Date of transfer: 3/30/2022

From Facility: SOLERA

To Facility: MM CLINIC

Amount: 2,423.32

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

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

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

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

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

*[Signature]* 3/28/22

**APPROVED ON**

**MAR 28 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
LIC#001228**

MEMORIAL MEDICAL CENTER

NH BROADMOOR  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000198

Date 3/30/22

88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Clinic

\$ 2,423.32

Two thousand four hundred twenty three & 32/100 DOLLARS



FOR Medicare repayment

County Auditor

County Treasurer

⑈000198⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH CRESCENT  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000227

Date 3/30/22

88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Clinic

\$ 2,423.32

Two thousand four hundred twenty three & 32/100 DOLLARS



FOR Medicare repayment

County Auditor

County Treasurer

⑈000227⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH CRESCENT  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000229

Date 3/30/22

88-2265/1131

PAY

TO THE ORDER OF TUSCANY

\$ 27,905.78

Twenty seven thousand Nine hundred five & 78/100 DOLLARS



FOR Medicare repayment

County Auditor

County Treasurer

⑈000229⑈ ⑆113122655⑆

**MEMORIAL MEDICAL CENTER**

NH SOLERA  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

001228

Date 3/30/22 88-2265/1131

**PAY**

TO THE  
ORDER OF

Memorial Medical Clinic

\$ 2423.32

Two thousand four hundred twenty three & 32/100 DOLLARS



**PROSPERITY  
BANK**

County Auditor  
MP

FOR Medicare repayment

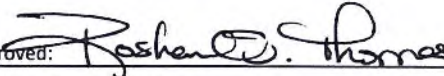
County Treasurer  
included Details on back

⑈001228⑈ ⑆113122655⑆

**Medicare Repayment**

NH Name	From CPSI Bank Acct #	CK#	Payee	GL #	Amt	CK DATE
BROADMOOR			MM CLINIC	20351000	2,423.32	3/30/2022
CRESCENT			MM CLINIC	20351000	2,423.32	3/30/2022
CRESCENT			TUSCANY	20351000	27,905.78	3/30/2022
SOLERA			MM CLINIC	20351000	2,423.32	3/30/2022
SOLERA			TUSCANY	20351000		3/30/2022
				Total	35,175.74	

Note:

Approved:   
 ROSHANDA THOMAS

3/28/2022

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Cantex Transfer  
 Prosperity Accounts  
 3/28/2022

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
<b>Ashford Gardens</b>		125,807.71 ✓	125,679.73 ✓	171,362.59 ✓		171,490.57 ✓	171,362.59
						Bank Balance Variance	
						171,490.57 ✓	
						Leave In Balance	100.00
						JAN INTEREST	14.62 ✓
						FEB INTEREST	13.36 ✓
						MAR INTEREST	
						Adjust Balance/Transfer Amt	171,362.59 ✓
<b>Broadmoor</b>		84,560.85 ✓	84,435.11 ✓	51,978.40 ✓		52,104.14 ✓	49,555.10
						Bank Balance Variance	
						52,104.14 ✓	
						Leave In Balance	100.00
						MEDICARE PAYMENT OWED TO MMCLINIC	2,423.32 ✓
						JAN INTEREST	12.36 ✓
						FEB INTEREST	13.36 ✓
						MAR INTEREST	
						Adjust Balance/Transfer Amt	49,555.10
<b>Crescent</b>		115,151.52 ✓	115,027.92 ✓	231,134.66 ✓		231,258.26 ✓	200,805.56
						Bank Balance Variance	
						231,258.26 ✓	
						Leave In Balance	100.00
						MEDICARE REPAYMENT TO MM CLINIC	2,423.32 ✓
						MEDICARE REPAYMENT TO TUSCANY	27,905.78 ✓
						JAN INTEREST	13.33 ✓
						FEB INTEREST	10.27 ✓
						MAR INTEREST	
						Adjust Balance/Transfer Amt	200,805.56 ✓
<b>Fort Bend</b>		61,543.35 ✓	61,429.92 ✓	28,668.77 ✓		28,782.20 ✓	28,668.77
						Bank Balance Variance	
						28,782.20 ✓	
						Leave In Balance	100.00
						JAN INTEREST	7.23 ✓
						FEB INTEREST	6.20 ✓
						MAR INTEREST	
						Adjust Balance/Transfer Amt	28,668.77 ✓
<b>Solera at W Houston</b>		80,996.48 ✓	80,758.16 ✓	188,104.17 ✓		188,342.49 ✓	185,680.85
						Bank Balance Variance	
						188,342.49 ✓	
						Leave In Balance	100.00
						MEDICARE REPAYMENT TO MM CLINIC	2,423.32 ✓

APPROVED ON  
 MAR 28 2022

171,362.59 +  
 49,555.10 + *Fort Bend / Broadmoor*  
 200,805.56 +  
 28,668.77 +  
 185,680.85 +  
 636,072.87 \*

CORRECTION CHECK TO MMC 100.56  
 JAN INTEREST 17.46  
 FEB INTEREST 20.30  
 MAR INTEREST  
 Adjust Balance/Transfer Amt 185,680.85 ✓

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

TOTAL TRANSFERS 636,072.87  
 Approved: *Roshanda Thomas*  
 ROSHANDA THOMAS 3/28/2022

Note 2: Each account has a base balance of \$100 that MMC deposited to open account.

Ashford Gardens	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/21/2022 Amerigroup TXSC HCCLAIMPMT 3175314413 111000	-	534.39	-	-	-	-	-	534.39
3/21/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	211.21	-	-	-	-	-	211.21
3/21/2022 NOVITAS SOLUTION HCCLAIMPMT 675423 420000101	-	276.66	-	-	-	-	-	276.66
3/21/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	11,125.33	-	-	-	-	-	11,125.33
3/22/2022 CK1170	47,258.88	-	-	-	-	-	-	-
3/22/2022 MANAGEANDNET1718 MNS PMNT 00000000000093 41	-	3,927.50	-	-	-	-	-	3,927.50
3/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000269942	-	308.49	-	-	-	-	-	308.49
3/22/2022 Amerigroup TXSC HCCLAIMPMT 3175438607 111000	-	1,298.50	-	-	-	-	-	1,298.50
3/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	355.95	-	-	-	-	-	355.95
3/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,625.54	-	-	-	-	-	1,625.54
3/22/2022 NOVITAS SOLUTION HCCLAIMPMT 675423 420000125	-	7,060.21	-	-	-	-	-	7,060.21
3/23/2022 Molina HC of TX HCCLAIMPMT PN1326436189 4200	-	44.24	-	-	-	-	-	44.24
3/23/2022 MANAGEANDNET1718 MNS PMNT 00000000000093 41	-	3,514.50	-	-	-	-	-	3,514.50
3/23/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,388.54	-	-	-	-	-	1,388.54
3/24/2022 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	78,420.85	-	-	-	-	-	-	-
3/24/2022 Molina HC of TX HCCLAIMPMT PN1326436189 4200	-	1,159.28	-	-	-	-	-	1,159.28
3/24/2022 Molina HC of TX HCCLAIMPMT PN1326436189 4200	-	16,602.41	-	-	-	-	-	16,602.41
3/24/2022 Amerigroup TXSC HCCLAIMPMT 3175682275 111000	-	7,315.72	-	-	-	-	-	7,315.72
3/24/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	12,774.50	-	-	-	-	-	12,774.50
3/24/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	5,849.52	-	-	-	-	-	5,849.52
3/25/2022 Amerigroup TXSC HCCLAIMPMT 3175756341 111000	-	31,152.24	-	-	-	-	-	31,152.24
3/25/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	46,749.18	-	-	-	-	-	46,749.18
3/25/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	5,059.35	-	-	-	-	-	5,059.35
3/25/2022 K5 PLAN ADMINIST HCCLAIMPMT 3278 11100002221	-	1,100.00	-	-	-	-	-	1,100.00
3/25/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	11,929.33	-	-	-	-	-	11,929.33
<b>125,679.73</b>	<b>171,362.59</b>							<b>171,362.59</b>

Broadmoor	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/21/2022 CK197	1,834.06	-	-	-	-	-	-	-
3/21/2022 CK195	2,596.23	-	-	-	-	-	-	-
3/21/2022 NOVITAS SOLUTION HCCLAIMPMT 676357 420000100	-	1,998.68	-	-	-	-	-	1,998.68
3/21/2022 HUMANA CHA DISB HCCLAIMPMT 390861 4200001934	-	4,604.32	-	-	-	-	-	4,604.32
3/22/2022 CK194	19,567.20	-	-	-	-	-	-	-
3/22/2022 CK196	179.78	-	-	-	-	-	-	-
3/22/2022 MANAGEANDNET1718 MNS PMNT 000000000004293 41	-	5,748.50	-	-	-	-	-	5,748.50
3/22/2022 NOVITAS SOLUTION HCCLAIMPMT 676357 420000124	-	9,313.40	-	-	-	-	-	9,313.40
3/23/2022 Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	212.52	-	-	-	-	-	212.52
3/23/2022 Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	591.49	-	-	-	-	-	591.49
3/23/2022 HNB - ECHO HCCLAIMPMT 746003411 440000297890	-	2,950.10	-	-	-	-	-	2,950.10
3/23/2022 NOVITAS SOLUTION HCCLAIMPMT 676357 420000131	-	7,964.49	-	-	-	-	-	7,964.49
3/24/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	60,257.84	-	-	-	-	-	-	-
3/24/2022 Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	2,498.24	-	-	-	-	-	2,498.24
3/24/2022 Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	5,030.89	-	-	-	-	-	5,030.89
3/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000232664	-	974.77	-	-	-	-	-	974.77
3/24/2022 HUMANA INS CO HCCLAIMPMT 390861 830000523668	-	5,618.00	-	-	-	-	-	5,618.00
3/25/2022 MANAGEANDNET1718 MNS PMNT 000000000004293 41	-	4,473.00	-	-	-	-	-	4,473.00
<b>84,435.11</b>	<b>51,978.40</b>							<b>51,978.40</b>

Crescent	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/21/2022 CK226	1,834.06	-	-	-	-	-	-	-
3/21/2022 Molina HC of TX HCCLAIMPMT PN1669860425 4200	-	112.88	-	-	-	-	-	112.88
3/21/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	5,115.00	-	-	-	-	-	5,115.00
3/21/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221503	-	2,538.46	-	-	-	-	-	2,538.46
3/21/2022 HUMANA CHA DISB HCCLAIMPMT 390864 4200001934	-	1,739.66	-	-	-	-	-	1,739.66
3/21/2022 CIGNA HCCLAIMPMT 1669860425 91000012203366	-	4,800.00	-	-	-	-	-	4,800.00
3/22/2022 CK224	15,698.40	-	-	-	-	-	-	-
3/22/2022 CK225	179.78	-	-	-	-	-	-	-
3/22/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	6,415.20	-	-	-	-	-	6,415.20
3/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000269942	-	3,989.01	-	-	-	-	-	3,989.01
3/22/2022 NOVITAS SOLUTION HCCLAIMPMT 676323 420000124	-	118,594.81	-	-	-	-	-	118,594.81
3/23/2022 Molina HC of TX HCCLAIMPMT PN1669860425 4200	-	3,234.85	-	-	-	-	-	3,234.85
3/23/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,779.50	-	-	-	-	-	2,779.50
3/23/2022 NOVITAS SOLUTION HCCLAIMPMT 676323 420000131	-	3,960.63	-	-	-	-	-	3,960.63
3/24/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	97,315.68	-	-	-	-	-	-	-
3/24/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	1,066.50	-	-	-	-	-	1,066.50
3/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000232664	-	8,949.72	-	-	-	-	-	8,949.72
3/24/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	22,910.00	-	-	-	-	-	22,910.00
3/24/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	21,542.89	-	-	-	-	-	21,542.89
3/24/2022 NOVITAS SOLUTION HCCLAIMPMT 676323 420000103	-	4,733.51	-	-	-	-	-	4,733.51
3/25/2022 HNB - ECHO HCCLAIMPMT 746003411 440000261569	-	6,317.84	-	-	-	-	-	6,317.84
3/25/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	7,106.45	-	-	-	-	-	7,106.45
3/25/2022 NOVITAS SOLUTION HCCLAIMPMT 676323 420000121	-	427.75	-	-	-	-	-	427.75
3/25/2022 K5 PLAN ADMINIST HCCLAIMPMT 14995 1110000222	-	4,800.00	-	-	-	-	-	4,800.00
<b>115,027.92</b>	<b>231,134.66</b>							<b>231,134.66</b>

Fort Bend	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/21/2022 NOVITAS SOLUTION HCCLAIMPMT 675663 420000100	-	1,157.47	-	-	-	-	-	1,157.47
3/22/2022 CK175	19,105.92	-	-	-	-	-	-	-
3/23/2022 Molina HC of TX HCCLAIMPMT PN1730577503 4200	-	4,037.37	-	-	-	-	-	4,037.37
3/24/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	42,324.00	-	-	-	-	-	-	-
3/24/2022 MANAGEANDNET1718 MNS PMNT 000000000004294 41	-	474.00	-	-	-	-	-	474.00
3/24/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	4,300.00	-	-	-	-	-	4,300.00
3/24/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	8,096.59	-	-	-	-	-	8,096.59
3/25/2022 NOVITAS SOLUTION HCCLAIMPMT 675663 420000121	-	10,603.34	-	-	-	-	-	10,603.34
<b>61,429.92</b>	<b>28,668.77</b>							<b>28,668.77</b>

Solera at West Houston	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/21/2022 CK1227	1,834.06	-	-	-	-	-	-	-

3/21/2022	HNB - ECHO HCCLAIMPMT 746003411 440000221503	-	1,205.52	-	-	1,205.52
3/21/2022	NOVITAS SOLUTION HCCLAIMPMT 676310 420000100	-	169.72	-	-	169.72
3/22/2022	CK1225	18,540.48	-	-	-	-
3/22/2022	CK1226	179.78	-	-	-	-
3/22/2022	UnitedHealthcare HCCLAIMPMT 746003411 910000	-	9,723.95	-	-	9,723.95
3/22/2022	NOVITAS SOLUTION HCCLAIMPMT 676310 420000124	-	72,262.54	-	-	72,262.54
3/22/2022	HUMANA INS CO HCCLAIMPMT 390862 830000553285	-	3,555.00	-	-	3,555.00
3/22/2022	HUMANA CHA DISB HCCLAIMPMT 390862 4200001113	-	3,255.00	-	-	3,255.00
3/22/2022	HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	-	2,039.29	-	-	2,039.29
3/23/2022	Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	5,148.79	-	-	5,148.79
3/23/2022	Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	6,494.96	-	-	6,494.96
3/23/2022	MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	319.50	-	-	319.50
3/23/2022	HNB - ECHO HCCLAIMPMT 746003411 440000297638	-	4,822.09	-	-	4,822.09
3/23/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	9,924.44	-	-	9,924.44
3/24/2022	WIRE OUT CANTEX HEALTH CARE CENTERS III	60,203.84	-	-	-	-
3/24/2022	MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	1,917.00	-	-	1,917.00
3/24/2022	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	13,120.00	-	-	13,120.00
3/24/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,183.85	-	-	2,183.85
3/24/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	22,477.73	-	-	22,477.73
3/24/2022	Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	650.00	-	-	650.00
3/25/2022	MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	4,153.50	-	-	4,153.50
3/25/2022	HNB - ECHO HCCLAIMPMT 746003411 440000261569	-	1,760.26	-	-	1,760.26
3/25/2022	Amerigroup TXSC HCCLAIMPMT 3175756342 111000	-	12,564.99	-	-	12,564.99
3/25/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	10,356.04	-	-	10,356.04
		<b>80,758.16</b>	<b>188,104.17</b>	-	-	<b>188,104.17</b>
<b>TOTALS</b>		<b>467,330.84</b>	<b>671,248.59</b>	-	-	<b>671,248.59</b>

# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Mar 28, 2022

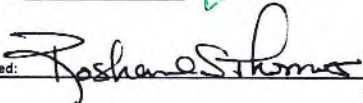
Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$9,154,087.01</b>	<b>\$9,302,912.68</b>	<b>\$9,154,087.01</b>	<b>\$8,849,492.2</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,717.60	\$5,717.60	\$5,717.60	\$5,717.6
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$105,542.96	\$105,542.96	\$105,542.96	\$145,721.1
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.19	\$536.19	\$536.19	\$536.1
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$6,678,298.07	\$6,761,063.52	\$6,678,298.07	\$6,515,580.6
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.66	\$431.66	\$431.66	\$431.6
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$171,490.57 ✓	\$177,499.86	\$171,490.57	\$75,500.4
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$52,104.14 ✓	\$68,085.75	\$52,104.14	\$47,631.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$231,258.26 ✓	\$246,659.26	\$231,258.26	\$212,606.2
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,782.20 ✓	\$28,782.20	\$28,782.20	\$18,178.6
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$188,342.49 ✓	\$213,552.52	\$188,342.49	\$159,507.7
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,109,779.55	\$1,109,779.55	\$1,109,779.55	\$1,109,779.5
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$244,385.72	\$244,385.72	\$244,385.72	\$238,857.8
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$168,573.65	\$168,643.33	\$168,573.65	\$168,573.6
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$4,685.15	\$4,685.15	\$4,685.15	\$22,509.5
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$164,158.80	\$167,547.41	\$164,158.80	\$128,360.1



Memorial Medical Center  
 Nursing Home UPL  
 Weekly Nexion Transfer  
 Prosperity Accounts  
 3/28/2022

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		175,386.35	175,261.60	105,418.21		-	102,963.84
						105,542.96	
						Bank Balance	105,542.96
						Variance	-
						Leave in Balance	100.00
						MMC PAYMENT TRANSFERED IN ERROR	2,454.37
						JAN INTEREST	11.04
						FEB INTEREST	13.71
						MAR INTEREST	-
						Adjust Balance/Transfer Amt	102,963.84

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:   
 ROSHANDA THOMAS 3/28/2022

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Golden Creek**

3/21/2022 NOVITAS SOLUTION HCCLAIMPMT 676097 420000100  
 3/21/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2  
 3/22/2022 CK157  
 3/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000269942  
 3/22/2022 NOVITAS SOLUTION HCCLAIMPMT 676097 420000124  
 3/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2  
 3/24/2022 WIRE OUT NEXION HEALTH AT GOLDEN CREEK  
 3/24/2022 Deposit  
 3/25/2022 CK158  
 3/25/2022 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	62,264.12	-	-	-	-	-	62,264.12
-	3,308.79	-	-	-	-	-	3,308.79
36,017.70	-	-	-	-	-	-	-
-	297.73	-	-	-	-	-	297.73
-	1,267.79	-	-	-	-	-	1,267.79
-	1,468.65	-	-	-	-	-	1,468.65
98,403.36	-	-	-	-	-	-	-
-	36,148.73	-	-	-	-	-	36,148.73
40,840.54	-	-	-	-	-	-	-
-	662.40	-	-	-	-	-	662.40
<b>175,261.60</b>	<b>105,418.21</b>	-	-	-	-	-	<b>105,418.21</b>

# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Mar 28, 2022

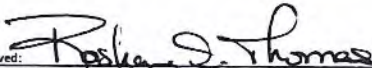
Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$9,154,087.01</b>	<b>\$9,302,912.68</b>	<b>\$9,154,087.01</b>	<b>\$8,849,492.2</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,717.60	\$5,717.60	\$5,717.60	\$5,717.6
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$105,542.96	\$105,542.96	\$105,542.96	\$145,721.1
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.19	\$536.19	\$536.19	\$536.1
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$6,678,298.07	\$6,761,063.52	\$6,678,298.07	\$6,515,580.6
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.66	\$431.66	\$431.66	\$431.6
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$171,490.57	\$177,499.86	\$171,490.57	\$75,500.4
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$52,104.14	\$68,085.75	\$52,104.14	\$47,631.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$231,258.26	\$246,659.26	\$231,258.26	\$212,606.2
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,782.20	\$28,782.20	\$28,782.20	\$18,178.8
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$188,342.49	\$213,552.52	\$188,342.49	\$159,507.7
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,109,779.55	\$1,109,779.55	\$1,109,779.55	\$1,109,779.5
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$244,385.72	\$244,385.72	\$244,385.72	\$238,857.8
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$168,573.65	\$168,643.33	\$168,573.65	\$168,573.6
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$4,685.15	\$4,685.15	\$4,685.15	\$22,509.8
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$164,158.80	\$167,547.41	\$164,158.80	\$128,360.1

Memorial Medical Center  
 Nursing Home UPL  
 Weekly HMG Transfer  
 Prosperity Accounts  
 3/28/2022

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		64,386.96	64,160.80	4,458.99			4,685.15	no transfer
						Bank Balance	4,685.15	
						Variance		
						Leave in Balance	100.00	
						ECHO PYMT THAT DOES NOT BELONG TO HMG	115.21	
						PAYMENT THAT DOES NOT BELONG TO HMG	241.30	
						JAN INTEREST	4.00	
						FEB INTEREST	4.55	
						MAR INTEREST		
						Adjust Balance/Transfer Amt	4,220.09	
Gulf Pointe Plaza-Medicare/Medicaid		25,881.37	25,765.30	168,457.58			168,573.65	168,457.58
						Bank Balance	168,573.65	
						Variance		
						Leave in Balance	100.00	
						JAN INTEREST	6.42	
						FEB INTEREST	9.65	
						MAR INTEREST		
						Adjust Balance/Transfer Amt	168,457.58	
<b>TOTAL TRANSFERS</b>							<b>172,677.67</b>	

*Routing Information for Gulf Pointe Plaza:*

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

Approved:   
 ROSHANDA THOMAS 3/28/2022

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Gulf Pointe Plaza-Private Pay**

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
3/21/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221503	-	309.24					309.24
3/22/2022 CK1075	15,896.74						-
3/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000269942	-	102.91					102.91
3/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000269942	-	220.52					220.52
3/22/2022 HUMANA INS CO HCCLAIMPMT 624982 830000553792	-	2,837.18					2,837.18
3/23/2022 HNB - ECHO HCCLAIMPMT 746003411 440000297642	-	989.14					989.14
3/24/2022 WIRE OUT HMG SERVICES, LLC	30,439.71						-
3/25/2022 CK1076	17,824.35						-
	<b>64,160.80</b>	<b>4,458.99</b>					<b>4,458.99</b>

**Gulf Pointe Plaza-Medicare/Medicaid**

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
3/21/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221503	-	3,084.91					3,084.91
3/21/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221503	-	29.74					29.74
3/22/2022 WPS-TDEFIC CONTR HCCLAIMPMT 2225181127 21000	-	3,695.50					3,695.50
3/22/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001014404	-	130,439.85					130,439.85
3/23/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001252594	-	18,817.28					18,817.28
3/24/2022 WIRE OUT HMG SERVICES, LLC	25,765.30						-
3/24/2022 Deposit	-	12,071.32					12,071.32
3/24/2022 WPS-TDEFIC CONTR HCCLAIMPMT 2225219017 21000	-	318.98					318.98
	<b>25,765.30</b>	<b>168,457.58</b>					<b>168,457.58</b>
	<b>89,926.10</b>	<b>172,916.57</b>					<b>172,916.57</b>

# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Mar 28, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$9,154,087.01</b>	<b>\$9,302,912.68</b>	<b>\$9,154,087.01</b>	<b>\$8,849,492.2</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,717.60	\$5,717.60	\$5,717.60	\$5,717.6
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$105,542.96	\$105,542.96	\$105,542.96	\$145,721.1
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.19	\$536.19	\$536.19	\$536.1
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$6,678,298.07	\$6,761,063.52	\$6,678,298.07	\$6,515,580.6
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.66	\$431.66	\$431.66	\$431.6
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$171,490.57	\$177,499.86	\$171,490.57	\$75,500.4
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$52,104.14	\$68,085.75	\$52,104.14	\$47,631.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$231,258.26	\$246,659.26	\$231,258.26	\$212,606.2
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,782.20	\$28,782.20	\$28,782.20	\$18,178.8
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$188,342.49	\$213,552.52	\$188,342.49	\$159,507.7
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,109,779.55	\$1,109,779.55	\$1,109,779.55	\$1,109,779.5
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$244,385.72	\$244,385.72	\$244,385.72	\$238,857.8
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$168,573.65	\$168,643.33	\$168,573.65	\$168,573.6
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$4,685.15	\$4,685.15	\$4,685.15	\$22,509.5
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$164,158.80	\$167,547.41	\$164,158.80	\$128,360.1

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Tuscany Transfer  
 Prosperity Accounts  
 3/28/2022

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 Village		116,845.41 ✓	116,745.41 ✓	164,058.80 ✓			164,158.80	164,058.80 ✓
						Bank Balance Variance	164,158.80	
						Leave in Balance	100.00	

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.

Adjust Balance/Transfer Amt 164,058.80 ✓  
 Approved: Roshanda Thomas 3/28/2022  
 ROSHANDA THOMAS

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Tuscany Village**

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	
3/21/2022 Deposit	-	8,098.41	-	-	-	-	-	8,098.41
3/21/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221503	-	362.64	-	-	-	-	-	362.64
3/22/2022 CK1096	27,721.44	-	-	-	-	-	-	-
3/23/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000131	-	76,494.08	-	-	-	-	-	76,494.08
3/24/2022 WIRE OUT LINBAR ENTERPRISES, LLC	89,023.97	-	-	-	-	-	-	-
3/24/2022 Deposit	-	24,235.03	-	-	-	-	-	24,235.03
3/24/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000103	-	14,964.18	-	-	-	-	-	14,964.18
3/24/2022 Molina HC of TX HCCLAIMPMT PN1275717894 4200	-	4,105.81	-	-	-	-	-	4,105.81
3/25/2022 HNB - ECHO HCCLAIMPMT 746003411 440000261814	-	3,872.38	-	-	-	-	-	3,872.38
3/25/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000121	-	22,256.27	-	-	-	-	-	22,256.27
3/25/2022 KS PLAN ADMINIST HCCLAIMPMT 179 111000022217	-	9,670.00	-	-	-	-	-	9,670.00
	<b>116,745.41</b>	<b>164,058.80</b>	-	-	-	-	-	<b>164,058.80</b>



## Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Mar 28, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$9,154,087.01</b>	<b>\$9,302,912.68</b>	<b>\$9,154,087.01</b>	<b>\$8,849,492.2</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,717.60	\$5,717.60	\$5,717.60	\$5,717.6
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$105,542.96	\$105,542.96	\$105,542.96	\$145,721.1
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.19	\$536.19	\$536.19	\$536.1
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$6,678,298.07	\$6,761,063.52	\$6,678,298.07	\$6,515,580.6
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.66	\$431.66	\$431.66	\$431.6
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$171,490.57	\$177,499.86	\$171,490.57	\$75,500.4
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$52,104.14	\$68,085.75	\$52,104.14	\$47,631.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$231,258.26	\$246,659.26	\$231,258.26	\$212,606.2
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,782.20	\$28,782.20	\$28,782.20	\$18,178.8
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$188,342.49	\$213,552.52	\$188,342.49	\$159,507.7
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,109,779.55	\$1,109,779.55	\$1,109,779.55	\$1,109,779.5
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$244,385.72	\$244,385.72	\$244,385.72	\$238,857.8
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$168,573.65	\$168,643.33	\$168,573.65	\$168,573.6
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$4,685.15	\$4,685.15	\$4,685.15	\$22,509.8
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$164,158.80	\$167,547.41	\$164,158.80	\$128,360.1

Memorial Medical Center  
 Nursing Home UPL  
 Weekly HSLTransfer  
 Prosperity Accounts  
 3/28/2022

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		77,720.63	77,570.56	244,235.65			244,385.72	244,235.65
						Bank Balance	244,385.72	
						Variance	-	
						Leave in Balance	100.00	

JAN INTEREST 25.69  
 FEB INTEREST 24.38  
 MAR INTEREST  
 Adjust Balance/Transfer Amt 244,235.65  
 Approved: *Roshanda Thomas*  
 ROSHANDA THOMAS 3/28/2022

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

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Bethany Senior Living**

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/21/2022 Deposit	-	6,352.82					-	6,352.82
3/21/2022 Deposit	-	5,673.11					-	5,673.11
3/22/2022 Deposit	-	1,606.25					-	1,606.25
3/22/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000124	-	177,228.26					-	177,228.26
3/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2	-	6,999.53					-	6,999.53
3/23/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000131	-	4,210.03					-	4,210.03
3/24/2022 WIRE OUT BETHANY SENIOR LIVING, LTD	77,570.56	-					-	-
3/24/2022 Deposit	-	36,010.71					-	36,010.71
3/24/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000103	-	627.06					-	627.06
3/25/2022 Deposit	-	2,677.22					-	2,677.22
3/25/2022 Deposit	-	342.28					-	342.28
3/25/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000121	-	1,814.80					-	1,814.80
3/25/2022 HOSPICE OF SOUTH Payments NF 113122650040716	-	693.58					-	693.58
	<b>77,570.56</b>	<b>244,235.65</b>	-	-	-	-	-	<b>244,235.65</b>

# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Mar 28, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$9,154,087.01</b>	<b>\$9,302,912.68</b>	<b>\$9,154,087.01</b>	<b>\$8,849,492.2</b>
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<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.19	\$536.19	\$536.19	\$536.1
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<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$164,158.80	\$167,547.41	\$164,158.80	\$128,360.1

GULF POINTE PLAZA

CHECK REQUEST

PAYEE MEMORIAL MEDICAL CENTER

DATE: 3/28/22

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
CK # 1016

AMOUNT \$115.21

G/L NUMBER: \_\_\_\_\_

EXPLANATION: PAYMENT THAT WAS TRANSFERRED TO HMG IN ERROR

\_\_\_\_\_

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: Richard S. Thomas

## Mayra Martinez

---

**From:** Sandra Suarez <Sandra.Suarez@healthmarkgroup.com>  
**Sent:** Wednesday, March 23, 2022 7:36 AM  
**To:** Mayra Martinez  
**Cc:** Chloe Martinez; Krystal Balsamo  
**Subject:** transfer support  
**Attachments:** NH Transfer HMG 03.14.22.pdf; WELLMED 030422 \$115.21.pdf

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning,

There is an Echo transfer on here dated 03/10/22 for \$115.21 that's not our patient. I attached the remit.

Thanks

Sandra

**From:** Mayra Martinez <mmartinez@mmcportlavaca.com>  
**Sent:** Friday, March 18, 2022 12:30 PM  
**To:** Bill Dohn <Bill.Dohn@healthmarkgroup.com>; Chloe Martinez <Chloe.Martinez@healthmarkgroup.com>; Krystal Balsamo <Krystal.Balsamo@healthmarkgroup.com>; Sandra Suarez <Sandra.Suarez@healthmarkgroup.com>; Shannin DeLong <Shannin.DeLong@healthmarkgroup.com>  
**Subject:** transfer support

This message comes from outside the HMG organization. Do not open attachments or click on links unless you are sure of the sender.

Good afternoon,

Please see attached support for this week's transfer.  
Let me know if you have any questions.

Thank you,

*Mayra Martinez*

Memorial Medical Center  
Accountant  
815 N Virginia. St  
Port Lavaca, TX 77979  
Phone: 361.552.0450  
Fax: 361.551.4504

GULF POINTE PLAZA

CHECK REQUEST

PAYEE MEMORIAL MEDICAL CENTER

DATE: 3/28/22

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
Ck# 1077

AMOUNT \$241.30

G/L NUMBER: \_\_\_\_\_

EXPLANATION: PAYMENT THAT WAS TRANSFERRED TO HMG IN ERROR

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: Rosha D. Thomas

## Mayra Martinez

---

**From:** Krystal Balsamo <Krystal.Balsamo@healthmarkgroup.com>  
**Sent:** Wednesday, March 23, 2022 9:34 AM  
**To:** Mayra Martinez  
**Subject:** Deposit not for Gulf Pointe Plaza  
**Attachments:** GP Dep Correction.pdf

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Mayra,

On the deposit dated 3/11/22, there is a request for \$241.30 that does not belong to Gulf Pointe Plaza. I attached the request from the deposit you sent over.

Regards,

*Krystal Balsamo*

Banking Associate



1780 Hughes Landing Boulevard, Suite 500  
The Woodlands Texas 77380



GOLDEN CREEK  
CHECK REQUEST

PAYEE MEMORIAL MEDICAL CENTER

DATE: 3/28/22

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPROVED ON

MAR 28 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
CL# 000151

AMOUNT \$2,454.37

G/L NUMBER: \_\_\_\_\_

EXPLANATION: PAYMENT THAT WAS TRANSFERRED TO HMG IN ERROR

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: Roshane S Thomas

## Mayra Martinez

---

**From:** Hopper, Catrina <CHopper@Nexion-Health.com>  
**Sent:** Tuesday, March 22, 2022 9:27 AM  
**To:** Mayra Martinez; Caitlin Clevenger  
**Cc:** Hartner, Beth L  
**Subject:** FW: Hospital Check #194141 \$2589.77  
**Attachments:** Golden Creek hospital check.pdf

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hello all, the attached payment was received via deposit only 135.40 paid for \_\_\_\_\_ belonged to us. The other 2454.37 belongs to someone else. Can you please recover and pay to correct home?

**Catrina Hopper**  
RCM CBO Supervisor (Texas)

Nexion Health Management, Inc.  
6937 Warfield Ave  
Sykesville, MD 21784  
mobile: 903-372-8412  
fax: 443-280-6521

✉ [CHopper@Nexion-Health.com](mailto:CHopper@Nexion-Health.com)

🌐 [www.Nexion-Health.com](http://www.Nexion-Health.com)

📘 [www.facebook.com/NexionHealthInc](https://www.facebook.com/NexionHealthInc)

\$ 2,454.37

From Golden Creek to MMC



Your local leader in nursing & rehabilitation services.

**From:** Scott, Madaline <MScott@nexion-health.com>  
**Sent:** Monday, March 21, 2022 4:39 PM  
**To:** Minton, Donna <DMinton@Nexion-Health.com>; Utley, Glinda <GUtley@nexion-health.com>  
**Cc:** Hopper, Catrina <CHopper@Nexion-Health.com>  
**Subject:** Hospital Check #194141 \$2589.77

Please see attachments. On this check from the hospital there is Humana payments on attachment. These is only one resident. \_\_\_\_\_ that I can apply payment to. The other residents are not Golden Creek residents. Please advise as to how you would like to proceed. Thanks

**MEMORIAL MEDICAL CENTER**

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

000159

Date 3/30/22

88-2265/1131

**PAY**

TO THE ORDER OF

Memorial Medical Clinic Center

\$ 2454.37

Two thousand four hundred fifty four & 37/100

DOLLARS



County auditor

County Treasurer

FOR payment was transferred in error

⑈000159⑈ ⑆113122655⑆

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

1077

88-2265/1131-87

DATE 3/30/22

CHECK AGAIN

PAY TO THE ORDER OF

Memorial Medical Center

\$ 241.30

Two hundred forty one & 30/100

DOLLARS



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

County auditor

County Treasurer

FOR payment does not belong to HMG

⑈001077⑈ ⑆113122655⑆

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

1078

88-2265/1131-87

DATE 3/30/22

CHECK AGAIN

PAY TO THE ORDER OF

Memorial Medical Clinic

\$ 115.21

One hundred fifteen & 21/100

DOLLARS



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

County auditor

County Treasurer

FOR payment does not belong to HMG

⑈001078⑈ ⑆113122655⑆

RUN DATE:03/30/22  
TIME:14:21

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
03/30/22 THRU 03/30/22

PAGE 4  
GLCKREG

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

GPP 001077 03/30/22 241.30 MEMORIAL MEDICAL CENTER  
GPP 001078 03/30/22 115.21 MEMORIAL MEDICAL CLINIC  
TOTALS: 356.51

*gulf Pointe - PY*

APPROVED ON

MAR 30 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

RUN DATE:03/30/22  
TIME:14:21

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
03/30/22 THRU 03/30/22

PAGE 7  
GLCKREG

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

NHG 000159 03/30/22 2,454.37 MEMORIAL MEDICAL CLINIC  
TOTALS: 2,454.37

*golden creek*

**APPROVED ON**

**MAR 30 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

RUN DATE:03/30/22  
TIME:14:21

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
03/30/22 THRU 03/30/22

PAGE 5  
GLCKREG

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

NHE 000198 03/30/22 2,423.32 MEMORIAL MEDICAL CLINIC *Solem*  
TOTALS: 2,423.32

**APPROVED ON**

**MAR 30 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

RUN DATE:03/30/22  
TIME:14:21

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
03/30/22 THRU 03/30/22

PAGE 6  
GLCKREG

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

NHC \* 000227 03/30/22 2,423.32 MEMORIAL MEDICAL CLINIC *Crescent*  
NHC 000229 03/30/22 27,905.78 TUSCANY  
TOTALS: 30,329.10

**APPROVED ON**

**MAR 30 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

RUN DATE:03/30/22  
TIME:14:21

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
03/30/22 THRU 03/30/22

PAGE 8  
GLCKREG

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

NHS 001228 03/30/22 2,423.32 MEMORIAL MEDICAL CLINIC *Solem*  
TOTALS: 2,423.32

**APPROVED ON**

**MAR 30 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**