

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---May 04, 2022

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 445,880.23
TOTAL TRANSFERS BETWEEN FUNDS	\$ 492,056.03
TOTAL NURSING HOME UPL EXPENSES	\$ 2,444,147.36
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED May 04, 2022	\$ 3,382,083.62

APPROVED

MAY 04 2022

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---May 04, 2022

PAYABLES AND PAYROLL

4/28/2022 Weekly Payables	428,952.28
4/28/2022 Patient Refunds	2,165.66
5/3/2022 Calhoun County-Voyager Fuel Card	202.42
5/2/2022 McKesson-340B Prescription Expense	12,635.52
5/2/2022 Amerisource Bergen-340B Prescription Expense	780.53

Prosperity Electronic Bank Payments

4/25-4/28/22 Pay Plus-Patient Claims Processing Fee	529.62
4/29/2022 ExpertPay- child support	614.20

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS **\$ 445,880.23**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

4/28/2022 MMC Operating to Solera-correction of NH insurance and medicare payment deposited into MMC Operating	84,285.34
4/28/2022 MMC Operating to Fort bend-correction on NH medicare payment deposited into MMC Operating	33,664.11
4/28/2022 MMC Operating to Broadmoor-correction of NH medicare payment deposited into MMC Operating	72,192.55
4/28/2022 MMC Operating to Crescent-correction of NH insurance and medicare payment deposited into MMC Operating in error	87,745.39
4/28/2022 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	99,328.78
4/28/2022 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating	26,682.46
4/28/2022 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	24,104.81
4/28/2022 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	30,234.61

MEDICARE ADVANCE PAYMENT RECOUP

5/5/2022 Broadmoor to Golden Creek-correction of Broadmoor medical recoup taken from Golden Creek	11,272.66
5/2/2022 Crescent to Golden Creek-correction of Crescent medicare recoup taken from Golden Creek	11,272.66
5/2/2022 Solera to Golden Creek-correction of Solera medicare recoup taken from Golden Creek	11,272.66

TOTAL TRANSFERS BETWEEN FUNDS **\$ 492,056.03**

NURSING HOME UPL EXPENSES

5/2/2022 Nursing Home UPL-Cantex Transfer	977,604.10
5/2/2022 Nursing Home UPL-Nexion Transfer	457,998.16
5/2/2022 Nursing Home UPL-HMG Transfer	274,176.94
5/2/2022 Nursing Home UPL-Tuscany Transfer	268,207.30
5/2/2022 Nursing Home UPL-HSL Transfer	417,215.61

QIPP CHECKS TO MMC

5/2/2022 Ashford	15,675.04
5/2/2022 Broadmoor	6,439.63
5/2/2022 Crescent	5,191.42
5/2/2022 Fort Bend	6,327.26
5/2/2022 Solera	6,138.78
5/2/2022 Tuscany	9,173.12

TOTAL NURSING HOME UPL EXPENSES **\$ 2,444,147.36**

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

GRAND TOTAL DISBURSEMENTS APPROVED May 04, 2022 **\$ 3,382,083.62**

RECEIVED BY THE COUNTY AUDITOR ON

APR 28 2022

04/28/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

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Due Dates Through: 05/19/2022

Vendor#	Vendor Name	Class	Pay Code							
11283	ACE HARDWARE 15521 ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
033122		04/25/20	03/31/20	04/25/20		857.16	0.00	0.00	857.16	✓
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11283 ACE HARDWARE 15521					857.16	0.00	0.00	857.16	
R1200	ADT COMMERCIAL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
144865008 ✓		04/25/20	04/04/20	04/29/20		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	
A1680	AIRGAS USA, LLC - CENTRAL DIV ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
9124293021 ✓		04/25/20	03/30/20	04/24/20		252.35	0.00	0.00	252.35	✓
	OXYGEN									
9987504226 ✓		04/25/20	03/31/20	04/25/20		254.70	0.00	0.00	254.70	✓
	OXYGEN									
9987504225 ✓		04/25/20	03/31/20	04/25/20		533.63	0.00	0.00	533.63	✓
	OXYGEN									
9987716788 ✓		04/25/20	04/01/20	04/26/20		127.40	0.00	0.00	127.40	✓
	LEASE RENEWAL									
9124394923 ✓		04/25/20	04/04/20	04/29/20		390.56	0.00	0.00	390.56	✓
	OXYGEN									
9987504224 ✓		04/25/20	04/30/20	05/19/20		783.32	0.00	0.00	783.32	✓
	OXYGEN									
9124282061A ✓		04/28/20	03/31/20	04/25/20		2,385.72	0.00	0.00	2,385.72	✓
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	A1680 AIRGAS USA, LLC - CENTRAL DIV					4,727.68	0.00	0.00	4,727.68	
14416	ALLOMETRICS, INC. ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
NC121887GC ✓		04/25/20	03/31/20	04/30/20		465.00	0.00	0.00	465.00	✓
	BSC HOOD CERT ANNUAL									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	14416 ALLOMETRICS, INC.					465.00	0.00	0.00	465.00	
10958	ALLYSON SWOPE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
042722		04/27/20	04/27/20	05/01/20		2,405.25	0.00	0.00	2,405.25	✓
	TRANSCRIPTION SERVICES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	10958 ALLYSON SWOPE					2,405.25	0.00	0.00	2,405.25	

A1360	AMERISOURCEBERGEN DRUG CORP ✓	W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
3089579436 ✓		04/25/20	04/14/20	04/20/20		4,096.18	0.00	0.00	4,096.18 ✓		
	INVENTORY										
3090619676 ✓		04/27/20	04/25/20	05/01/20		423.66	0.00	0.00	423.66 ✓		
	INVENTORY										
346808454 ✓		04/27/20	04/27/20	05/03/20		55.00	0.00	0.00	55.00 ✓		
346806766 ✓		04/27/20	04/27/20	05/03/20		55.00	0.00	0.00	55.00 ✓		
	INVENTORY										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	A1360 AMERISOURCEBERGEN DRUG CORP					4,629.84	0.00	0.00	4,629.84		
Vendor#	Vendor Name					Class	Pay Code				
A1551	ASPEN SURGICAL PRODUCTS INC ✓					M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
CD2789615 ✓		04/25/20	03/25/20	04/25/20		310.98	0.00	0.00	310.98 ✓		
	BIRTH CERT										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	A1551 ASPEN SURGICAL PRODUCTS INC					310.98	0.00	0.00	310.98		
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		
2565767 ✓		04/27/20	04/18/20	05/18/20		2,780.50	0.00	0.00	2,780.50 ✓		
	LAB STAFFING (4/1-4/14/22) Hawkins										
2565672 ✓		04/27/20	04/18/20	05/18/20		536.00	0.00	0.00	536.00 ✓		
	LAB STAFFING (4/1/22) Stibley										
2565735 ✓		04/27/20	04/18/20	05/18/20		2,225.25	0.00	0.00	2,225.25 ✓		
	LAB STAFFING (4/1-4/7/22) Simonich										
2567399 ✓		04/27/20	04/18/20	05/18/20		2,673.75	0.00	0.00	2,673.75 ✓		
	LAB STAFFING (4/1-4/7/22) Chastnut										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	A0400 AUREUS RADIOLOGY LLC					8,215.50	0.00	0.00	8,215.50		
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		
74656726 ✓		04/22/20	04/07/20	05/02/20		845.79	0.00	0.00	845.79 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	B1150 BAXTER HEALTHCARE					845.79	0.00	0.00	845.79		
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		
109838252 ✓		04/27/20	04/20/20	05/15/20		1,098.22	0.00	0.00	1,098.22 ✓		
	SUPPLIES										
109842220 ✓		04/27/20	04/22/20	05/17/20		273.29	0.00	0.00	273.29 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	B1220 BECKMAN COULTER INC					1,371.51	0.00	0.00	1,371.51		
Vendor#	Vendor Name					Class	Pay Code				
10024	BECTON, DICKINSON & CO (BD) ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		

9109254664 ✓		04/25/20	01/10/20	02/09/20			371.03	0.00	0.00	371.03 ✓		
	SUPPLIES											
9109465980 ✓		04/25/20	03/01/20	03/31/20			150.24	0.00	0.00	150.24 ✓		
	SUPPLIES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10024	BECTON, DICKINSON & CO (BD)	521.27	0.00	0.00	521.27
Vendor#	Vendor Name						Class	Pay Code				
13972	BEYER MECHANICAL ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
INVSF0012679 ✓		04/25/20	04/11/20	04/26/20			5,745.45	0.00	0.00	5,745.45 ✓		
	AIR VERT DUCTING											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							13972	BEYER MECHANICAL	5,745.45	0.00	0.00	5,745.45
Vendor#	Vendor Name						Class	Pay Code				
13892	BLUE CROSS BLUE SHIELD REFUND ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
184071		04/26/20	09/30/20	10/31/20			50.93	0.00	0.00	50.93 ✓		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							13892	BLUE CROSS BLUE SHIELD REFUND	50.93	0.00	0.00	50.93
Vendor#	Vendor Name						Class	Pay Code				
14064	CAPITAL ONE ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
1641491929		04/27/20	04/19/20	05/01/20			266.08	0.00	0.00	266.08 ✓		
	SUPPLES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							14064	CAPITAL ONE	266.08	0.00	0.00	266.08
Vendor#	Vendor Name						Class	Pay Code				
C1325	CARDINAL HEALTH 414, INC. ✓						W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
8002811166 ✓		04/25/20	03/31/20	04/25/20			605.07	0.00	0.00	605.07 ✓		
	SUPPLIES											
160022974 ✓		04/25/20	04/06/20	05/01/20			53.76	0.00	0.00	53.76 ✓		
	SERVICE CHARGES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							C1325	CARDINAL HEALTH 414, INC.	658.83	0.00	0.00	658.83
Vendor#	Vendor Name						Class	Pay Code				
14260	CAREFUSION SOLUTIONS, LLC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
70001318421 ✓		04/25/20	03/31/20	05/05/20			118.64	0.00	0.00	118.64 ✓		
	SUPPLIES											
10018650490 ✓		04/25/20	04/11/20	05/01/20			1,788.00	0.00	0.00	1,788.00 ✓		
	PYXIS EQUIPMENT											
10018650507 ✓		04/25/20	04/11/20	05/01/20			2.00	0.00	0.00	2.00 ✓		
	SUPPLIES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							14260	CAREFUSION SOLUTIONS, LLC	1,908.64	0.00	0.00	1,908.64
Vendor#	Vendor Name						Class	Pay Code				
13028	CAVALLO ENERGY TEXAS LLC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
17251813 ✓		04/27/20	04/20/20	05/15/20			16.61	0.00	0.00	16.61 ✓		

		ELECTRICITY									
17251811			04/27/20	04/20/20	05/15/20			1,353.63	0.00	0.00	1,353.63
		ELECTICITY									
17251812			04/27/20	04/20/20	05/15/20			462.59	0.00	0.00	462.59
		ELECTRICITY									
Vendor Totals		Number Name						Gross	Discount	No-Pay	Net
		13028 CAVALLO ENERGY TEXAS LLC						1,832.83	0.00	0.00	1,832.83
Vendor#	Vendor Name		Class	Pay Code							
14380	CENTURION SERVICE GROUP										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
337617		04/28/20	04/28/20	05/15/20			31,960.00	0.00	0.00	31,960.00	
		ANESTHESIA MACHINE									
Vendor Totals		Number Name						Gross	Discount	No-Pay	Net
		14380 CENTURION SERVICE GROUP						31,960.00	0.00	0.00	31,960.00
Vendor#	Vendor Name		Class	Pay Code							
12768	CHEMAQUA										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
7749417		04/25/20	04/10/20	04/20/20			518.75	0.00	0.00	518.75	
		WATER TREATMENT									
Vendor Totals		Number Name						Gross	Discount	No-Pay	Net
		12768 CHEMAQUA						518.75	0.00	0.00	518.75
Vendor#	Vendor Name		Class	Pay Code							
14232	CIGNA										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
189618		04/26/20	04/18/20	05/01/20			132.01	0.00	0.00	132.01	
		REFUND									
Vendor Totals		Number Name						Gross	Discount	No-Pay	Net
		14232 CIGNA						132.01	0.00	0.00	132.01
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	
031422A		04/27/20	03/14/20	04/05/20			2,591.91	0.00	0.00	2,591.91	
		WATER									
041922		04/27/20	04/19/20	05/05/20			5,013.72	0.00	0.00	5,013.72	
		WATER									
041922B		04/27/20	04/19/20	05/05/20			27.04	0.00	0.00	27.04	
		WATER									
041922C		04/27/20	04/19/20	05/05/20			62.29	0.00	0.00	62.29	
		WATER									
041922A		04/27/20	04/19/20	05/05/20			65.49	0.00	0.00	65.49	
		WATER									
Vendor Totals		Number Name						Gross	Discount	No-Pay	Net
		C1730 CITY OF PORT LAVACA						7,760.45	0.00	0.00	7,760.45
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	
45D0054055		04/27/20	04/12/20	05/15/20			3,409.00	0.00	0.00	3,409.00	
		COMPLIANCE FEE									
Vendor Totals		Number Name						Gross	Discount	No-Pay	Net
		10723 CLIA LABORATORY PROGRAM						3,409.00	0.00	0.00	3,409.00
Vendor#	Vendor Name		Class	Pay Code							

C1166	COASTAL OFFICE SOLUTIONS ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
0E340441 ✓		04/25/20	01/28/20	02/07/20		39.68	0.00	0.00	39.68 ✓		
	SUPPLIES										
OEQT198151 ✓		04/25/20	03/25/20	04/04/20		62.50	0.00	0.00	62.50 ✓		
	BUSINESS CARDS										
OE347291 ✓		04/25/20	04/13/20	04/23/20		806.42	0.00	0.00	806.42 ✓		
	SUPPLIES										
OE346161 ✓		04/25/20	04/14/20	04/24/20		131.57	0.00	0.00	131.57 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	C1166 COASTAL OFFICE SOLUTIONS					1,040.17	0.00	0.00	1,040.17		
Vendor#	Vendor Name				Class	Pay Code					
14304	COFFEE BARREL, LLC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
042622		04/26/20	04/26/20	05/15/20		56,875.00	0.00	0.00	56,875.00 ✓		
	INTERIM PRACTICE ADMINIST (511-7131122) @ 1297. a day / 3.5 day a week										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	14304 COFFEE BARREL, LLC					56,875.00	0.00	0.00	56,875.00		
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		
APR22		04/27/20	04/01/20	05/01/20		612.18	0.00	0.00	612.18 ✓		
	INSURANCE										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	11030 COMBINED INSURANCE					612.18	0.00	0.00	612.18		
Vendor#	Vendor Name				Class	Pay Code					
10006	CUSTOM MEDICAL SPECIALTIES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
293104 ✓		04/13/20	04/11/20	04/13/20		699.39	0.00	0.00	699.39 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	10006 CUSTOM MEDICAL SPECIALTIES					699.39	0.00	0.00	699.39		
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		
050122		04/25/20	04/13/20	05/01/20		3,555.21	0.00	0.00	3,555.21 ✓		
	PAYROLL DEDUCTS										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	14292 DEARBORN LIFE INSURANCE COMPAN					3,555.21	0.00	0.00	3,555.21		
Vendor#	Vendor Name				Class	Pay Code					
10080	DETAR HOSPITAL ✓				ICP						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
DTR2003021A ✓		04/25/20	04/06/20	05/01/20		14.01	0.00	0.00	14.01 ✓		
	LAB SERVICES										
DTR2004020A ✓		04/25/20	05/01/20	06/01/20		7.78	0.00	0.00	7.78 ✓		
	LAB SERVICES										
DTR2009017A ✓		04/25/20	10/01/20	11/01/20		43.71	0.00	0.00	43.71 ✓		
	LAB SERVICES										
DTR2010021 ✓		04/25/20	11/02/20	12/01/20		14.57	0.00	0.00	14.57 ✓		
	LAB SERVICES										

DTR2011020A ✓	04/25/20 12/01/20 01/01/20	22.26	0.00	0.00	22.26 ✓
	LAB SERVICES				
DTR2012015A ✓	04/25/20 01/04/20 02/01/20	506.47	0.00	0.00	506.47 ✓
	LAB SERVICES				
DTR2102020 ✓	04/25/20 03/01/20 04/01/20	6.04	0.00	0.00	6.04 ✓
	LAB SERVICES				
DTR2002020 ✓	04/25/20 03/17/20 04/17/20	59.19	0.00	0.00	59.19 ✓
	LAB SERVICES				
DTR2103018 ✓	04/25/20 04/01/20 05/01/20	64.41	0.00	0.00	64.41 ✓
	LAB SERVICES				
DTR2104025 ✓	04/25/20 05/03/20 06/01/20	139.77	0.00	0.00	139.77 ✓
	LAB SERVICES				
DTR2105021 ✓	04/25/20 06/01/20 07/01/20	7.78	0.00	0.00	7.78 ✓
	LAB SERVICES				
DTR2008018A ✓	04/25/20 06/21/20 07/21/20	14.57	0.00	0.00	14.57 ✓
	LAB SERVICES				
DTR2112022 ✓	04/25/20 02/09/20 03/01/20	32.10	0.00	0.00	32.10 ✓
	LAB SERVICES				
DTR2110022 ✓	04/25/20 02/09/20 03/01/20	7.78	0.00	0.00	7.78 ✓
	LAB SERVICE				

Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10060 DETAR HOSPITAL	940.44	0.00	0.00	940.44

Vendor# Vendor Name Class Pay Code

10368	DEWITT POTH & SON ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
6788780 ✓	SUPPLIES	04/22/20	04/15/20	05/10/20		446.38	0.00	0.00	446.38 ✓	
6781701 ✓	SUPPLIES	04/22/20	04/18/20	05/13/20		13.08	0.00	0.00	13.08 ✓	
6788781 ✓	SUPPLIES	04/22/20	04/18/20	05/13/20		3.04	0.00	0.00	3.04 ✓	
6783840 ✓	SUPPLIES	04/25/20	04/12/20	05/07/20		55.41	0.00	0.00	55.41 ✓	
6789610 ✓	SUPPLIES	04/25/20	04/18/20	05/13/20		79.76	0.00	0.00	79.76 ✓	
6792570 ✓	SUPPLIES	04/25/20	04/19/20	05/14/20		272.20	0.00	0.00	272.20 ✓	
6792580 ✓	SUPPLIES	04/25/20	04/19/20	05/14/20		209.61	0.00	0.00	209.61 ✓	
6792581 ✓	SUPPLIES	04/25/20	04/20/20	05/15/20		11.26	0.00	0.00	11.26 ✓	

Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10368 DEWITT POTH & SON	1,090.74	0.00	0.00	1,090.74

Vendor# Vendor Name Class Pay Code

10789	DISCOVERY MEDICAL NETWORK INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
MMC041522	PRO FEES CLINIC (1-15th)	04/27/20	04/15/20	04/16/20		126,103.61	0.00	0.00	126,103.61 ✓	

Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10789 DISCOVERY MEDICAL NETWORK INC	126,103.61	0.00	0.00	126,103.61

Vendor# Vendor Name Class Pay Code

11291	DOWELL PEST CONTROL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
8641 ✓		04/25/20	04/01/20	04/26/20		505.00	0.00	0.00	505.00 ✓	
	PEST CONTROL									
8645 ✓		04/25/20	04/01/20	04/26/20		160.00	0.00	0.00	160.00 ✓	
	PEST CONTROL									
9031 ✓		04/25/20	04/22/20	05/17/20		65.00	0.00	0.00	65.00 ✓	
	PEST CONTROL									
9047 ✓		04/25/20	04/23/20	05/18/20		260.00	0.00	0.00	260.00 ✓	
	PEST CONTROL									
9098 ✓		04/27/20	04/25/20	05/15/20		105.00	0.00	0.00	105.00 ✓	
	PEST SERVICES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11291 DOWELL PEST CONTROL					1,095.00	0.00	0.00	1,095.00	
Vendor#	Vendor Name				Class	Pay Code				
F1100	FEDERAL EXPRESS CORP. ✓				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
770851237 ✓		04/25/20	03/31/20	04/25/20		15.28	0.00	0.00	15.28 ✓	
	FREIGHT									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	F1100 FEDERAL EXPRESS CORP.					15.28	0.00	0.00	15.28	
Vendor#	Vendor Name				Class	Pay Code				
F1400	FISHER HEALTHCARE ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
1791152 ✓		04/26/20	04/13/20	05/08/20		37.80	0.00	0.00	37.80 ✓	
	SUPPLIES									
1880646 ✓		04/26/20	04/15/20	05/10/20		183.88	0.00	0.00	183.88 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	F1400 FISHER HEALTHCARE					221.68	0.00	0.00	221.68	
Vendor#	Vendor Name				Class	Pay Code				
12944	FRASIER HEALTHCARE CONSULTING, ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
19222 ✓		04/25/20	04/18/20	05/01/20		3,937.69	0.00	0.00	3,937.69 ✓	
	COLLECTIONS MAR 22									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	12944 FRASIER HEALTHCARE CONSULTING,					3,937.69	0.00	0.00	3,937.69	
Vendor#	Vendor Name				Class	Pay Code				
14156	FUJI FILM ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
PJIN0190809 ✓		04/25/20	04/15/20	05/01/20		7,908.33	0.00	0.00	7,908.33 ✓	
	MAINT CONT									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	14156 FUJI FILM					7,908.33	0.00	0.00	7,908.33	
Vendor#	Vendor Name				Class	Pay Code				
F1900	FUN EXPRESS INC ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
71566671801 ✓		04/25/20	03/21/20	04/21/20		39.58	0.00	0.00	39.58 ✓	
	SUPPLIES <i>Boxes for pediatric patients going into surgery</i>									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	F1900 FUN EXPRESS INC					39.58	0.00	0.00	39.58	

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
W1300	GRAINGER ✓	M		9035967034 ✓		04/25/20	08/26/20	09/20/20		151.68	0.00	0.00	151.68 ✓
	SUPPLIES			9237021002 ✓		04/25/20	03/08/20	04/02/20		148.74	0.00	0.00	148.74 ✓
	SUPPLIES			Vendor Totals: Number Name Gross Discount No-Pay Net									
	W1300 GRAINGER			300.42 0.00 0.00 300.42									

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
11984	GUERBET, LLC ✓			18597247 ✓		04/27/20	03/08/20	03/15/20		483.20	0.00	0.00	483.20 ✓
	SUPPLIES			18599797 ✓		04/27/20	03/21/20	04/27/20		350.00	0.00	0.00	350.00 ✓
	SUPPLIES			Vendor Totals: Number Name Gross Discount No-Pay Net									
	11984 GUERBET, LLC			833.20 0.00 0.00 833.20									

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
G1210	GULF COAST PAPER COMPANY ✓	M		2216781 ✓		04/22/20	04/12/20	05/12/20		161.34	0.00	0.00	161.34 ✓
	SUPPLIES			2216782 ✓		04/22/20	04/12/20	05/12/20		831.30	0.00	0.00	831.30 ✓
	SUPPLIES			Vendor Totals: Number Name Gross Discount No-Pay Net									
	G1210 GULF COAST PAPER COMPANY			992.64 0.00 0.00 992.64									

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
10804	HEALTHCARE CODING & CONSULTING ✓			12242 ✓		04/25/20	03/31/20	04/30/20		940.75	0.00	0.00	940.75 ✓
	CODING SERVICES			Vendor Totals: Number Name Gross Discount No-Pay Net									
	10804 HEALTHCARE CODING & CONSULTING			940.75 0.00 0.00 940.75									

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
H1227	HEALTHSURE INSURANCE SERVICES ✓			2894 ✓		04/25/20	04/22/20	04/30/20		61.00	0.00	0.00	61.00 ✓
	ENDORSEMENT BOND			Vendor Totals: Number Name Gross Discount No-Pay Net									
	H1227 HEALTHSURE INSURANCE SERVICES			61.00 0.00 0.00 61.00									

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
H0031	HEB CREDIT RECEIVABLES DEPT308 ✓			042622		04/26/20	04/26/20	04/26/20		2,990.00	0.00	0.00	2,990.00 ✓
	HEALTH FAIR GC-RHC GRANT			Vendor Totals: Number Name Gross Discount No-Pay Net									
	H0031 HEB CREDIT RECEIVABLES DEPT308			2,990.00 0.00 0.00 2,990.00									

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
10530	HUMANA HEALTH CARE PLANS ✓												

197203		04/26/20	04/20/20	05/01/20		71.02	0.00	0.00	71.02	✓
REFUND										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		10530	HUMANA HEALTH CARE PLANS			71.02	0.00	0.00	71.02	
Vendor#	Vendor Name			Class	Pay Code					
I1260	INTOXIMETERS INC ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
705970 ✓		04/27/20	04/21/20	05/16/20		54.25	0.00	0.00	54.25	✓
SUPPLIES										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		I1260	INTOXIMETERS INC			54.25	0.00	0.00	54.25	
Vendor#	Vendor Name			Class	Pay Code					
14420										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
202190		04/26/20	03/31/20	04/30/20		110.00	0.00	0.00	110.00	✓
PATIENT REFUND										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		14420				110.00	0.00	0.00	110.00	
Vendor#	Vendor Name			Class	Pay Code					
12832	KRISTI BOYD									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
042622		04/27/20	04/26/20	05/01/20		579.00	0.00	0.00	579.00	✓
UP TO DATE SUBSCRIP (PT care resource)										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		12832	KRISTI BOYD			579.00	0.00	0.00	579.00	
Vendor#	Vendor Name			Class	Pay Code					
14412	LAB UNIVERSITY, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
1435 ✓		04/25/20	03/31/20	04/30/20		249.00	0.00	0.00	249.00	✓
IQCP E-OPTIMIZER RENEWAL										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		14412	LAB UNIVERSITY, LLC			249.00	0.00	0.00	249.00	
Vendor#	Vendor Name			Class	Pay Code					
12628	LEGATO ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
C2312 ✓		04/25/20	03/31/20	04/30/20		682.32	0.00	0.00	682.32	✓
STAFF APPRECIATION BILLBC										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		12628	LEGATO			682.32	0.00	0.00	682.32	
Vendor#	Vendor Name			Class	Pay Code					
14244	LONESTAR COMMUNICATIONS, IN ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
107609 ✓		04/25/20	04/13/20	05/13/20		304.00	0.00	0.00	304.00	✓
SERVICE CALL										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		14244	LONESTAR COMMUNICATIONS, IN			304.00	0.00	0.00	304.00	
Vendor#	Vendor Name			Class	Pay Code					
L1640	LOWE'S BUSINESS ACCT/SYNCB ✓			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
56390		04/28/20	03/25/20	04/28/20		406.54	0.00	0.00	406.54	✓
SUPPLIES										

Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		L1640	LOWE'S BUSINESS ACCT/SYNCB		406.54	0.00	0.00	406.54	
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
19294881	SUPPLIES	04/26/20	04/18/20	05/03/20		665.41	0.00	0.00	665.41
19228714	SUPPLIES	04/27/20	03/31/20	04/15/20		659.43	0.00	0.00	659.43
Vendor Totals		M2178	MCKESSON MEDICAL SURGICAL INC			1,324.84	0.00	0.00	1,324.84
Vendor#	Vendor Name		Class	Pay Code					
M2470	MEDLINE INDUSTRIES INC		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2206300538	SUPPLIES	04/22/20	04/10/20	05/05/20		3,084.63	0.00	0.00	3,084.63
2206438188	SUPPLIES	04/22/20	04/12/20	05/07/20		278.24	0.00	0.00	278.24
2206438187	SUPPLIES	04/22/20	04/12/20	05/07/20		287.52	0.00	0.00	287.52
2206437346	SUPPLIES	04/22/20	04/12/20	05/07/20		226.31	0.00	0.00	226.31
2206437347	SUPPLIES	04/22/20	04/12/20	05/07/20		58.12	0.00	0.00	58.12
2206437345	SUPPLIES	04/22/20	04/12/20	05/07/20		30.86	0.00	0.00	30.86
2206828800	SUPPLIES	04/25/20	04/13/20	05/08/20		49.76	0.00	0.00	49.76
2207156207	SUPPLIES	04/25/20	04/15/20	05/10/20		7,830.08	0.00	0.00	7,830.08
2207267379	SUPPLIES	04/25/20	04/16/20	05/11/20		10.76	0.00	0.00	10.76
2207536017	SUPPLIES	04/25/20	04/19/20	05/14/20		9.50	0.00	0.00	9.50
2206547267	CREDIT 2206547267	04/26/20	04/12/20	05/07/20		-18.98	0.00	0.00	-18.98
2206901673	SUPPLIES	04/26/20	04/14/20	05/09/20		277.76	0.00	0.00	277.76
2206658250	SUPPLIES	04/27/20	04/13/20	05/08/20		4.27	0.00	0.00	4.27
2206658248	SUPPLIES	04/27/20	04/13/20	05/08/20		287.27	0.00	0.00	287.27
2206658237	SUPPLIES	04/27/20	04/13/20	05/08/20		2.00	0.00	0.00	2.00
2206658238	SUPPLIES	04/27/20	04/13/20	05/08/20		33.19	0.00	0.00	33.19
2206658240	SUPPLIES	04/27/20	04/13/20	05/08/20		967.38	0.00	0.00	967.38
2206658235	SUPPLIES	04/27/20	04/13/20	05/08/20		12.86	0.00	0.00	12.86
2206658233	SUPPLIES	04/27/20	04/13/20	05/08/20		95.98	0.00	0.00	95.98

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net	
	SUPPLIES							
2206658239		04/27/20	04/13/20 05/13/20	4.00	0.00	0.00	4.00	
	SUPPLIES							
Vendor Totals								
	M2470 MEDLINE INDUSTRIES INC			13,531.51	0.00	0.00	13,531.51	
10536	MORRIS & DICKSON CO, LLC							
	Invoice#	Comment	Tran Dt Inv Dt Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8104967		04/25/20 04/17/20 04/27/20		25.44	0.00	0.00	25.44
	8104968	INVENTORY	04/25/20 04/17/20 04/27/20		74.69	0.00	0.00	74.69
	8110407	INVENTORY	04/25/20 04/18/20 04/28/20		250.49	0.00	0.00	250.49
	8108113	INVENTORY	04/25/20 04/18/20 04/28/20		909.92	0.00	0.00	909.92
	8108112	INVENTORY	04/25/20 04/18/20 04/28/20		790.00	0.00	0.00	790.00
	8110636	INVENTORY	04/25/20 04/18/20 04/28/20		376.41	0.00	0.00	376.41
	8110408	INVENTORY	04/25/20 04/18/20 04/28/20		5.20	0.00	0.00	5.20
	8110406	INVENTORY	04/25/20 04/18/20 04/28/20		1,636.72	0.00	0.00	1,636.72
	8114777	INVENTORY	04/25/20 04/19/20 04/29/20		117.48	0.00	0.00	117.48
	8112968	INVENTORY	04/25/20 04/19/20 04/29/20		5,356.65	0.00	0.00	5,356.65
	8114968	INVENTORY	04/25/20 04/19/20 04/29/20		3,615.86	0.00	0.00	3,615.86
	8114207	INVENTORY	04/25/20 04/19/20 04/29/20		164.00	0.00	0.00	164.00
	CM33354	INVENTORY	04/25/20 04/19/20 04/29/20		-0.07	0.00	0.00	-0.07
	8114208	CREDIT	04/25/20 04/19/20 04/29/20		334.72	0.00	0.00	334.72
	8114776	INVENTORY	04/25/20 04/19/20 04/29/20		0.10	0.00	0.00	0.10
	8120022	SUPPLIES	04/25/20 04/20/20 04/30/20		80.14	0.00	0.00	80.14
	CM33908	INVENTORY	04/25/20 04/20/20 04/30/20		-1.81	0.00	0.00	-1.81
	8120021	CREDIT	04/25/20 04/20/20 04/30/20		723.75	0.00	0.00	723.75
	8117979	INVENTORY	04/25/20 04/20/20 04/30/20		43.67	0.00	0.00	43.67
	8117977	INVENTORY	04/25/20 04/20/20 04/30/20		15.62	0.00	0.00	15.62
	8117978	INVENTORY	04/25/20 04/20/20 04/30/20		861.22	0.00	0.00	861.22
	8125300	INVENTORY	04/25/20 04/21/20 05/01/20		519.99	0.00	0.00	519.99

8125301	✓	INVENTORY	04/25/20	04/21/20	05/01/20			337.58	0.00	0.00	337.58	✓
CM34716	✓	INVENTORY	04/27/20	04/22/20	05/02/20			-3.82	0.00	0.00	-3.82	✓
8131040	✓	CREDIT	04/27/20	04/24/20	05/04/20			12.99	0.00	0.00	12.99	✓
8131039	✓	INVENTORY	04/27/20	04/24/20	05/04/20			3,193.42	0.00	0.00	3,193.42	✓
8131038	✓	INVENTORY	04/27/20	04/24/20	05/04/20			19.39	0.00	0.00	19.39	✓
8133619	✓	INVENTORY	04/27/20	04/25/20	05/05/20			128.92	0.00	0.00	128.92	✓
8136022	✓	INVENTORY	04/27/20	04/25/20	05/05/20			1,657.34	0.00	0.00	1,657.34	✓
8136021	✓	INVENTORY	04/27/20	04/25/20	05/05/20			386.16	0.00	0.00	386.16	✓
8140807	✓	INVENTORY	04/27/20	04/26/20	05/06/20			844.29	0.00	0.00	844.29	✓
8140806	✓	INVENTORY	04/27/20	04/26/20	05/06/20			109.95	0.00	0.00	109.95	✓
8139675	✓	INVENTORY	04/27/20	04/26/20	05/06/20			82.60	0.00	0.00	82.60	✓
CM35255	✓	INVENTORY	04/27/20	04/26/20	05/06/20			-44.97	0.00	0.00	-44.97	✓
		CREDIT										
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net			
			10536	MORRIS & DICKSON CO, LLC		22,624.04	0.00	0.00	22,624.04			
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			
7686	✓	04/25/20	04/22/20	05/02/20		501.20	0.00	0.00	501.20	✓		
	TRANSCRIPTION (4/2-4/15/22)											
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net			
			13548	NACOGDOCHES TRANSCRIPTION		501.20	0.00	0.00	501.20			
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			
04323011	✓	04/26/20	04/18/20	05/18/20		209.23	0.00	0.00	209.23	✓		
	SUPPLIES											
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net			
			10152	PARTSSOURCE, LLC		209.23	0.00	0.00	209.23			
Vendor#	Vendor Name		Class	Pay Code								
12480	PRO ENERGY PARTNERS LP	✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
22030600	✓	04/27/20	03/31/20	04/15/20		6,424.43	0.00	0.00	6,424.43	✓		
	NATURAL GAS											
Vendor Totals			Number	Name		Gross	Discount	No-Pay	Net			
			12480	PRO ENERGY PARTNERS LP		6,424.43	0.00	0.00	6,424.43			
Vendor#	Vendor Name		Class	Pay Code								
11080	RADSOURCE	✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			

SC32690522 ✓	04/26/20	04/17/20	05/12/20	1,708.33	0.00	0.00	1,708.33 ✓		
SERVICE AGREEMENT									
Vendor Total:	Number	Name		Gross	Discount	No-Pay	Net		
	11080	RADSOURCE		1,708.33	0.00	0.00	1,708.33		
Vendor#	Vendor Name		Class	Pay Code					
11251	RAPID PRINTING LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
13536 ✓		04/25/20	04/21/20	05/01/20		112.00	0.00	0.00	112.00 ✓
FOAM BOARD									
Vendor Total:	Number	Name		Gross	Discount	No-Pay	Net		
	11251	RAPID PRINTING LLC		112.00	0.00	0.00	112.00		
Vendor#	Vendor Name		Class	Pay Code					
S0900	SAM'S CLUB DIRECT ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
042022		04/27/20	04/20/20	05/08/20		847.09	0.00	0.00	847.09 ✓
SUPPLIES									
Vendor Total:	Number	Name		Gross	Discount	No-Pay	Net		
	S0900	SAM'S CLUB DIRECT		847.09	0.00	0.00	847.09		
Vendor#	Vendor Name		Class	Pay Code					
S1800	SHERWIN WILLIAMS ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
08383 ✓		04/25/20	04/01/20	04/16/20		10.00	0.00	0.00	10.00 ✓
SUPPLIES									
03943 ✓		04/25/20	04/05/20	04/20/20		10.00	0.00	0.00	10.00 ✓
SUPPLIES									
03935 ✓		04/25/20	04/05/20	04/20/20		27.72	0.00	0.00	27.72 ✓
SUPPLIES									
Vendor Total:	Number	Name		Gross	Discount	No-Pay	Net		
	S1800	SHERWIN WILLIAMS		47.72	0.00	0.00	47.72		
Vendor#	Vendor Name		Class	Pay Code					
10699	SIGN AD, LTD. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
272991 ✓		04/25/20	04/01/20	04/11/20		400.00	0.00	0.00	400.00 ✓
BILLBOARD AD									
Vendor Total:	Number	Name		Gross	Discount	No-Pay	Net		
	10699	SIGN AD, LTD.		400.00	0.00	0.00	400.00		
Vendor#	Vendor Name		Class	Pay Code					
S2362	SMITH & NEPHEW ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
943184798 ✓		04/28/20	02/02/20	03/02/20		1,768.20	0.00	0.00	1,768.20 ✓
SUPPLIES									
Vendor Total:	Number	Name		Gross	Discount	No-Pay	Net		
	S2362	SMITH & NEPHEW		1,768.20	0.00	0.00	1,768.20		
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
040122		04/26/20	04/01/20	04/30/20		2,250.00	0.00	0.00	2,250.00 ✓
CABLE									
040122B		04/26/20	04/01/20	04/30/20		1,675.15	0.00	0.00	1,675.15 ✓
CABLE									
040122C		04/26/20	04/01/20	04/30/20		131.59	0.00	0.00	131.59 ✓

	CABLE									
040122AB		04/28/20	04/15/20	04/16/20			107.35	0.00	0.00	107.35 ✓
	CABLE									
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net
	C1010 SPARKLIGHT						4,164.09	0.00	0.00	4,164.09
Vendor#	Vendor Name						Class	Pay Code		
14148	SPECTRUM HEALTH PARTNERS, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
MAY21NNC22		04/27/20	04/25/20	05/15/20		25,771.00	0.00	0.00	25,771.00 ✓	
	CFO STAFFING (4/24-5/21/22) Fee and Expenses									
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net
	14148 SPECTRUM HEALTH PARTNERS, LLC						25,771.00	0.00	0.00	25,771.00
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	
9967099 ✓		04/25/20	03/17/20	04/11/20		174.54	0.00	0.00	174.54 ✓	
	SUPPLIES									
9977910 ✓		04/25/20	03/23/20	04/17/20		36.82	0.00	0.00	36.82 ✓	
	SUPPLIES									
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net
	S3940 STERIS CORPORATION						211.36	0.00	0.00	211.36
Vendor#	Vendor Name						Class	Pay Code		
10735	STRYKER SUSTAINABILITY ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
4412633 ✓		04/25/20	04/14/20	05/14/20		4,708.16	0.00	0.00	4,708.16 ✓	
	SUPPLIES									
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net
	10735 STRYKER SUSTAINABILITY						4,708.16	0.00	0.00	4,708.16
Vendor#	Vendor Name						Class	Pay Code		
12476	SUN LIFE FINANCIAL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
032322		04/26/20	03/23/20	04/10/20		8,223.67	0.00	0.00	8,223.67 ✓	
	PAYROLL DEDUCT MAR 22									
042522		04/26/20	04/25/20	05/10/20		8,444.50	0.00	0.00	8,444.50 ✓	
	PAYROLL DEDUCT APR 22									
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net
	12476 SUN LIFE FINANCIAL						16,668.17	0.00	0.00	16,668.17
Vendor#	Vendor Name						Class	Pay Code		
10239	T&R MECHANICAL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
C2100404 ✓		04/25/20	04/18/20	05/18/20		921.25	0.00	0.00	921.25 ✓	
	CHILLER QUARTERLY MAINT									
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net
	10239 T&R MECHANICAL						921.25	0.00	0.00	921.25
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	
8400392687 ✓		04/20/20	04/18/20	05/13/20		45.15	0.00	0.00	45.15 ✓	
	LAUNDRY									
8400392688 ✓		04/20/20	04/18/20	05/13/20		56.82	0.00	0.00	56.82 ✓	
	LAUNDRY									

8400392712	✓	04/20/20 04/18/20 05/13/20	2,545.48	0.00	0.00	2,545.48	✓
	LAUNDRY						
8400392999	✓	04/25/20 04/21/20 05/16/20	42.82	0.00	0.00	42.82	✓
	LAUNDRY						
8400393003	✓	04/25/20 04/21/20 05/16/20	199.32	0.00	0.00	199.32	✓
	LAUNDRY						
8400393000	✓	04/25/20 04/21/20 05/16/20	198.59	0.00	0.00	198.59	✓
	LAUNDRY						
8400393025	✓	04/25/20 04/21/20 05/16/20	1,848.62	0.00	0.00	1,848.62	✓
	LAUNDRY						
8400393018	✓	04/25/20 04/21/20 05/16/20	80.90	0.00	0.00	80.90	✓
	LAUNDRY						
8400393002	✓	04/25/20 04/21/20 05/16/20	190.36	0.00	0.00	190.36	✓
	LAUNDRY						
8400393039	✓	04/26/20 04/21/20 05/19/20	111.98	0.00	0.00	111.98	✓
	LAUNDRY						
8400393001	✓	04/26/20 04/21/20 05/19/20	181.25	0.00	0.00	181.25	✓
	LAUNDRY						
8400393214	✓	04/26/20 04/25/20 05/19/20	45.15	0.00	0.00	45.15	✓
	LAUNDRY						
8400393240	✓	04/26/20 04/25/20 05/19/20	2,293.25	0.00	0.00	2,293.25	✓
	LAUNDRY						
8400393215	✓	04/26/20 04/25/20 05/19/20	56.82	0.00	0.00	56.82	✓
	LAUNDRY						

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	7,896.51	0.00	0.00	7,896.51

Vendor#	Vendor Name	Class	Pay Code						
U1200	UNITED AD LABEL CO INC ✓	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
256207984	✓	04/25/20	04/14/20	05/09/20		312.08	0.00	0.00	312.08 ✓
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1200	UNITED AD LABEL CO INC	312.08	0.00	0.00	312.08

Vendor#	Vendor Name	Class	Pay Code						
W1040	WATERMARK GRAPHICS INC ✓	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
136153	✓	04/25/20	03/30/20	04/29/20		233.40	0.00	0.00	233.40 ✓
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	W1040	WATERMARK GRAPHICS INC	233.40	0.00	0.00	233.40

Vendor#	Vendor Name	Class	Pay Code						
I1110	WERFEN USA LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9111142708	✓	04/13/20	04/11/20	05/06/20		1,027.87	0.00	0.00	1,027.87 ✓
9111143702	✓	04/13/20	04/12/20	05/07/20		1,027.87	0.00	0.00	1,027.87 ✓
	SUPPLIES								
9111147309	✓	04/27/20	04/19/20	05/14/20		1,236.36	0.00	0.00	1,236.36 ✓
	SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	3,292.10	0.00	0.00	3,292.10

Vendor#	Vendor Name	Class	Pay Code							
10556	WOUND CARE SPECIALISTS ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	WCS00005018 ✓		04/25/20	02/01/20	03/02/20		6,900.00	0.00	0.00	6,900.00 ✓
	WOUND CARE SERVICES									
	WCS00005090 ✓		04/25/20	03/01/20	03/30/20		6,550.00	0.00	0.00	6,550.00 ✓
	WOUND CARE SERVICE									
	WCS00005176 ✓		04/25/20	04/01/20	04/30/20		10,475.00	0.00	0.00	10,475.00 ✓
	WOUND CARE SERVICES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10556	WOUND CARE SPECIALISTS				23,925.00	0.00	0.00	23,925.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	428,952.28	0.00	0.00	428,952.28

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 194772-194848

RECEIVED BY THE
COUNTY AUDITOR ON
TIME: 09:36

APR 28 2022

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1
APCDEDIT

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
01	CALHOUN COUNTY, TEXAS	042622	226.97	✓	1	REFUND FOR	
01		033122	948.41	✓	2	REFUND FOR	
01	SC	042622	52.43	✓	3	REFUND FOR	
01	TX	042622	15.00	✓	2	REFUND FOR	
01	TX	042622	169.60	✓	2	REFUND FOR	
01	TX	042622	213.41	✓	2	REFUND FOR	
01	TX	042622	25.00	✓	2	REFUND FOR	
01	TX	042622	476.69	✓	2	REFUND FOR	
0	YES TX	042622	38.15	✓	2	REFUND FOR	
ARID=0001 TOTAL			2165.66				
TOTAL			2165.66				

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CL #194849-194857

05/03/2022 MEMORIAL MEDICAL CENTER 0
 10:11 AP Open Invoice List ap_open_invoice.template
 Dates Through:

Vendor#	Vendor Name	Class	Pay Code						
C1048	CALHOUN COUNTY	W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
042422		04/29/20	04/24/20	05/18/20		202.42	0.00	0.00	202.42
	FUEL								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net	
	C1048	CALHOUN COUNTY			202.42	0.00	0.00	202.42	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	202.42	0.00	0.00	202.42

APPROVED ON

MAY 03 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

MCKESSON

STATEMENT

As of: 04/29/2022

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: 04/30/2022

As of: 04/29/2022 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 04/30/2022 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: 12,893.39 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/07/2017 2,451.97

If Paid By 05/03/2022,
Pay This Amount:

12,635.52 USD

If Paid After 05/03/2022,
Pay this Amount:

12,893.39 USD

Due If Paid On Time:

USD 12,635.52


Disc lost if paid late:

257.87

Due If Paid Late:

USD 12,893.39

48.41 +
12,175.55 +
11.96 +
399.60 +
12,635.52 *


5/2/22

APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 04/29/2022

Page: 001

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Company: 8000

HEB PHCY 0434/MEM MED PHS
 MEMORIAL MEDICAL CENTER
 VICKY KALISEK
 815 N VIRGINIA ST
 PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

DC: 8115

Territory: 7790

Customer: 190813
 Date: 04/30/2022

As of: 04/29/2022 Page: 001
 Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

Cust: 190813 PLEASE CHECK ANY
 Date: 04/30/2022 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	
Customer Number 190813 HEB PHCY 0434/MEM MED PHS											
04/25/2022	05/03/2022	7338177788	2017049853	115Invoice	0.64	31.85		31.21 ✓		7338177788	
04/27/2022	05/03/2022	7338761927	2017050225	115Invoice	0.35	17.55		17.20 ✓		7338761927	

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

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

Subtotals: 49.40 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,689.35
 04/04/2022

If Paid By 05/03/2022,
 Pay This Amount: 48.41 USD

If Paid After 05/03/2022,
 Pay this Amount: 49.40 USD

Due If Paid On Time: 48.41
 USD
 Disc lost if paid late: 0.99
 Due If Paid Late: 49.40
 USD

APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 04/29/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 04/29/2022
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: 04/30/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 04/30/2022

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 256342 WALMART 1098/MEM MED PHS											
04/25/2022	05/03/2022	7338198267	31306789	115Invoice	5.80	289.92		284.12	✓	7338198267	
04/25/2022	05/03/2022	7338198270	31438990	115Invoice	5.80	290.12		284.32	✓	7338198270	
04/25/2022	05/03/2022	7338372215	0422220901	115Invoice	2.51	125.39		122.88	✓	7338372215	
04/25/2022	05/03/2022	7338372216	0422220854	195Invoice	0.02	0.95		0.93	✓	7338372216	
04/26/2022	05/03/2022	7338521042	31542949	115Invoice		0.04		0.04	✓	7338521042	
04/26/2022	05/03/2022	7338521044	31554819	115Invoice		0.08		0.08	✓	7338521044	
04/26/2022	05/03/2022	7338680565	0425220930	115Invoice	1.88	94.04		92.16	✓	7338680565	
04/27/2022	05/03/2022	7338795905	31618421	115Invoice	0.01	0.26		0.25	✓	7338795905	
04/27/2022	05/03/2022	7338795906	31618421	115Invoice	2.52	125.78		123.26	✓	7338795906	
04/27/2022	05/03/2022	7338795907	31676364	115Invoice	2.64	132.04		129.40	✓	7338795907	
04/27/2022	05/03/2022	7338795908	31676364	115Invoice	2.52	125.78		123.26	✓	7338795908	
04/27/2022	05/03/2022	7338795909	31676364	115Invoice	0.33	16.66		16.33	✓	7338795909	
04/27/2022	05/03/2022	7338938054	0426221013	115Invoice	3.06	152.96		149.90	✓	7338938054	
04/27/2022	05/03/2022	7338938055	0426220831	195Invoice	3.08	154.08		151.00	✓	7338938055	
04/28/2022	05/03/2022	7339061710	31736198	115Invoice	2.05	102.73		100.68	✓	7339061710	
04/28/2022	05/03/2022	7339061711	31796982	115Invoice	1.67	83.59		81.92	✓	7339061711	
04/28/2022	05/03/2022	7339061712	31796982	115Invoice	4.62	230.76		226.14	✓	7339061712	
04/28/2022	05/03/2022	7339204109	0427221106	115Invoice	37.40	1,870.03		1,832.63	✓	7339204109	
04/29/2022	05/03/2022	7339329512	31857124	115Invoice	8.49	424.55		416.06	✓	7339329512	
04/29/2022	05/03/2022	7339329513	31857124	115Invoice	3.06	153.13		150.07	✓	7339329513	
04/29/2022	05/03/2022	7339329514	31918203	115Invoice	1.95	97.63		95.68	✓	7339329514	
04/29/2022	05/03/2022	7339329515	31911594	115Invoice	0.01	0.63		0.62	✓	7339329515	
04/29/2022	05/03/2022	7339329516	31923708	115Invoice	1.03	51.47		50.44	✓	7339329516	
04/29/2022	05/03/2022	7339449793	0428220906	195Invoice	68.83	3,441.58		3,372.75	✓	7339449793	
04/29/2022	05/03/2022	7339449794	0428220808	115Invoice	89.20	4,459.83		4,370.63	✓	7339449794	

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

MCKESSON

STATEMENT

As of: 04/29/2022

Page: 002

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Company: 8000

DC: 8115

As of: 04/29/2022 Page: 002
Mail to: 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: 04/30/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 04/30/2022 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: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 12,424.03 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 04/25/2022 6,396.20

If Paid By 05/03/2022,
Pay This Amount:

12,175.55 USD

If Paid After 05/03/2022,
Pay this Amount:

12,424.03 USD

Due If Paid On Time:

USD 12,175.55

Disc lost if paid late:

248.48

Due If Paid Late:

USD 12,424.03

APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 04/29/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 04/29/2022 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: 04/30/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450 PLEASE CHECK ANY
Date: 04/30/2022 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	
Customer Number 464450 HEB PHY FC 490/MEM MC PHS											
04/25/2022	05/03/2022	7338168900	55x461006	115Invoice	0.24	12.20		11.96	✓	7338168900	

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: 12.20 USD

Future Due: 0.00

If Paid By 05/03/2022,
Pay This Amount:

11.96 USD

Due If Paid On Time:

USD 11.96

Past Due: 0.00

Disc lost if paid late:

0.24

Last Payment 04/25/2022 6,396.20

If Paid After 05/03/2022,
Pay this Amount:

12.20 USD

Due If Paid Late:

USD 12.20

APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 04/29/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 04/29/2022 Page: 001
Mail to: Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 835438
Date: 04/30/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 PLEASE CHECK ANY
Date: 04/30/2022 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	
Customer Number 835438 CVS PHCY 7475/MEM MC PHS											
04/27/2022	05/03/2022	7338967848	1669235	115Invoice	8.16	407.76		399.60	✓	7338967848	

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: 407.76 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 04/25/2022 6,396.20

If Paid By 05/03/2022,
Pay This Amount:

399.60 USD

If Paid After 05/03/2022,
Pay this Amount:

407.76 USD

Due If Paid On Time:

USD 399.60

Disc lost if paid late:

8.16

Due If Paid Late:

USD 407.76

APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333



STATEMENT

Statement Number: 62919450
Date: 04-29-2022

<p>Served By: AMERISOURCEBERGEN DRUG CORP 12727 W. AIRPORT BLVD. SUGAR LAND TX 77478-6101</p> <p>DEA: RA0289276 866-451-9655</p>	<p>Customer: WALGREENS #12494 340B MEMORIAL MEDICAL CENTER 1302 N VIRGINIA ST PORT LAVACA TX 77979-2509</p>	<p>Customer Number 100135284 / 037028186</p> <p>Terms Sat - Fri Due in 7 days</p>										
<p>Remit To: AMERISOURCEBERGEN P.O. Box 905223 CHARLOTTE NC 28290-5223</p>		<p>Summary</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td>Not Yet Due:</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Current:</td> <td style="text-align: right;">780.53</td> </tr> <tr> <td>Past Due:</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Total Due:</td> <td style="text-align: right;">780.53</td> </tr> <tr> <td>Account Balance:</td> <td style="text-align: right;">780.53</td> </tr> </table>	Not Yet Due:	0.00	Current:	780.53	Past Due:	0.00	Total Due:	780.53	Account Balance:	780.53
Not Yet Due:	0.00											
Current:	780.53											
Past Due:	0.00											
Total Due:	780.53											
Account Balance:	780.53											

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
04-25-2022	05-06-2022	3090699816	165640	Invoice	68.94		0.00	68.94
04-25-2022	05-06-2022	3090737196	165687	Invoice	308.68		0.00	308.68
04-25-2022	05-06-2022	3090737197	165688	Invoice	0.93		0.00	0.93
04-26-2022	05-06-2022	3090865927	165694	Invoice	216.52		0.00	216.52
04-27-2022	05-06-2022	3091015071	165701	Invoice	108.49		0.00	108.49
04-28-2022	05-06-2022	3091165586	165709	Invoice	32.41		0.00	32.41
04-29-2022	05-06-2022	3091306818	165717	Invoice	44.56		0.00	44.56

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
780.53	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
04-29-2022	(629.49)

Reminders	
Due Date	Amount
05-06-2022	780.53
Total Due:	
	780.53

APPROVED ON

MAY 02 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

[Signature]
5/2/22

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- April 25, 2022 - May 01, 2022**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>	
4/25/2022	PAY PLUS ACHTRANS 452579291 101000691306914	- 3rd Party Payor Fee	38.08	38.08 +
4/26/2022	PAY PLUS ACHTRANS 452579291 101000692229411	- 3rd Party Payor Fee	104.15	104.15 +
4/26/2022	MCKESSON DRUG AUTO ACH ACH05002013 910000151	- 340B Drug Program Expense	6,396.20*	96.09 +
4/27/2022	PAY PLUS ACHTRANS 452579291 101000692990953	- 3rd Party Payor Fee	96.09	204.58 +
4/27/2022	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	-CitiBank Corporate Card Payment	2,992.82*	86.72 +
4/28/2022	PAY PLUS ACHTRANS 452579291 101000694040460	- 3rd Party Payor Fee	204.58	529.62*
4/29/2022	PAY PLUS ACHTRANS 452579291 101000695081036	- 3rd Party Payor Fee	86.72	614.20 +
4/29/2022	EXPERTPAY EXPERTPAY 746003411 91000012800469	-Child Support Payment	614.20	614.20*
4/29/2022	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	629.49*	Expert Pay
4/29/2022	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	386,663.79*	529.62 +
4/29/2022	IRS USATAXPYMT 220251933756605 6103601001173	- Payroll Taxes	129,263.56*	614.20 +
			<u>527,089.68</u>	1,143.82*

Anthony Richardson
Memorial Medical Center

Roshanda S. Thomas
Roshanda S. Thomas

May 2, 2022

* Approved 05-02-22 CC

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

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>	<u>Amount</u>	
				527,089.68 +
				6,396.20 -
				2,992.82 -
				629.49 -
				386,663.79 -
				129,263.56 -
				1,143.82*
				1,143.82 +
				1,143.82 -
				0.00*

Anthony Richardson
Memorial Medical Center

Roshanda S. Thomas
Roshanda S. Thomas

May 2, 2022

**APPROVED ON
MAY 02 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RECEIVED BY THE
COUNTY AUDITOR ON

APR 28 2022

11:52

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
041422		04/26/20	04/14/20	05/20/20		11,335.62	0.00	0.00	11,335.62 ✓
042222	TRANSFER	04/26/20	04/22/20	05/20/20		72,949.72	0.00	0.00	72,949.72 ✓

MEDICARE PAYMENT

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11828	SOLERA WEST HOUSTON	84,285.34	0.00	0.00	84,285.34

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	84,285.34	0.00	0.00	84,285.34

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 194873

RECEIVED BY THE
COUNTY AUDITOR ON

APR 28 2022

04/28/2022
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

11820 FORTBEND HEALTHCARE CENTER

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
042222		04/26/20	04/22/20	05/20/20		33,664.11	0.00	0.00	33,664.11

MEDICARE REPAYMENT

Vendor Totals: Number Name

Number	Name	Gross	Discount	No-Pay	Net
11820	FORTBEND HEALTHCARE CENTER	33,664.11	0.00	0.00	33,664.11

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	33,664.11	0.00	0.00	33,664.11

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#194870

RECEIVED BY THE
COUNTY AUDITOR ON

APR 28 2022

04/28/2022

11:46

CALHOUN 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
042222		04/26/20	04/22/20	05/20/20		72,192.55	0.00	0.00	72,192.55

MEDICARE REPAYMENT

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
11832		BROADMOOR AT CREEKSIDE PARK	72,192.55	0.00	0.00	72,192.55

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	72,192.55	0.00	0.00	72,192.55

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck#194869

RECEIVED BY THE
COUNTY AUDITOR ON

APR 28 2022

04/28/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

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
041822		04/26/20	04/18/20	05/20/20		2,100.00	0.00	0.00	2,100.00 ✓
	TRANSFER	<i>Net insurance pmt deposited int mme check</i>							
042222		04/26/20	04/22/20	05/20/20		81,814.33	0.00	0.00	81,814.33 ✓
	MEDICARE REPAYMENT								
042222A		04/27/20	04/22/20	05/20/20		583.50	0.00	0.00	583.50 ✓
	TRANSFER	<i>"</i>							
042522		04/27/20	04/25/20	05/20/20		3,247.56	0.00	0.00	3,247.56 ✓
	TRANSFER	<i>"</i>							

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
11824		THE CRESCENT	87,745.39	0.00	0.00	87,745.39

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	87,745.39	0.00	0.00	87,745.39

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck #194874

RECEIVED BY THE
COUNTY AUDITOR ON

APR 28 2022

04/28/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

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
041822		04/26/20	04/18/20	05/20/20		1,676.68	0.00	0.00	1,676.68 ✓
041922	TRANSFER	<i>N/A insurance pymt deposited into MME acct</i>					7,110.00	0.00	7,110.00 ✓
041922A	TRANSFER	04/26/20	04/19/20	05/20/20		994.22	0.00	0.00	994.22 ✓
041922B	TRANSFER	04/26/20	04/19/20	05/20/20		136.57	0.00	0.00	136.57 ✓
042022	TRANSFER	04/26/20	04/20/20	05/20/20		487.68	0.00	0.00	487.68 ✓
042222	MEDICARE REPAYMENT	04/26/20	04/22/20	05/20/20		55,173.22	0.00	0.00	55,173.22 ✓
042522A	TRANSFER	04/27/20	04/25/20	05/20/20		25,617.18	0.00	0.00	25,617.18 ✓
042522B	TRANSFER	04/27/20	04/25/20	05/20/20		7,675.63	0.00	0.00	7,675.63 ✓
042522	TRANSFER	04/27/20	04/25/20	05/20/20		457.60	0.00	0.00	457.60 ✓

Vendor Total:	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	99,328.78	0.00	0.00	99,328.78

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	99,328.78	0.00	0.00	99,328.78

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck#194871

RECEIVED BY THE
COUNTY AUDITOR ON

APR 28 2022

04/28/2022
11:49
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

12696 GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
041422		04/26/20	04/14/20	05/20/20		6,030.52	0.00	0.00	6,030.52 ✓
041822	TRANSFER	04/26/20	04/18/20	05/20/20		6,247.97	0.00	0.00	6,247.97 ✓
	TRANSFER	"	"	"		"	"	"	"
041922		04/26/20	04/19/20	05/20/20		14,403.97	0.00	0.00	14,403.97 ✓
	TRANSFER	"	"	"		"	"	"	"

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12696	GULF POINTE PLAZA	26,682.46	0.00	0.00	26,682.46

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	26,682.46	0.00	0.00	26,682.46

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 194872

RECEIVED BY THE
COUNTY AUDITOR ON

APR 28 2022

04/28/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE								
041822A		04/26/20	04/18/20	05/20/20		2,124.57	0.00	0.00	2,124.57 ✓
041822	TRANSFER	04/26/20	04/18/20	05/20/20		439.00	0.00	0.00	439.00 ✓
	TRANSFER	"	"	"			"	"	
041822B	"	04/26/20	04/18/20	05/20/20		1,167.00	0.00	0.00	1,167.00 ✓
	TRANSFER	"	"	"			"	"	
041922		04/26/20	04/19/20	05/20/20		5,082.03	0.00	0.00	5,082.03 ✓
	TRANSFER	"	"	"			"	"	
042122A		04/26/20	04/21/20	05/20/20		512.46	0.00	0.00	512.46 ✓
	TRANSFER	"	"	"			"	"	
042122		04/26/20	04/21/20	05/20/20		194.50	0.00	0.00	194.50 ✓
	TRANSFER	"	"	"			"	"	
042222		04/26/20	04/22/20	05/20/20		5,366.38	0.00	0.00	5,366.38 ✓
	MEDICARE REPAYMENT								
042522		04/27/20	04/25/20	05/20/20		7,273.87	0.00	0.00	7,273.87 ✓
	TRANSFER	"	"	"			"	"	
042522A		04/27/20	04/25/20	05/20/20		1,945.00	0.00	0.00	1,945.00 ✓
	TRANSFER	"	"	"			"	"	
Vendor Totals									
13004	TUSCANY VILLAGE					Gross 24,104.81	Discount 0.00	No-Pay 0.00	Net 24,104.81

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	24,104.81	0.00	0.00	24,104.81

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL # 194875

RECEIVED BY THE
COUNTY AUDITOR ON

04/28/2022
APR 28 2022
11:50

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Vendor Vendor Name

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR LIVING								
041422		04/26/20	04/14/20	05/20/20		1,136.16	0.00	0.00	1,136.16 ✓
041922	TRANSFER	04/26/20	04/19/20	05/20/20		5,034.11	0.00	0.00	5,034.11 ✓
042022	TRANSFER	04/26/20	04/20/20	05/20/20		5,446.00	0.00	0.00	5,446.00 ✓
042222	TRANSFER	04/27/20	04/22/20	05/20/20		3,099.00	0.00	0.00	3,099.00 ✓
042522A	TRANSFER	04/27/20	04/25/20	05/20/20		5,251.50	0.00	0.00	5,251.50 ✓
042522	TRANSFER	04/27/20	04/25/20	05/20/20		201.84	0.00	0.00	201.84 ✓
042522B	TRANSFER	04/27/20	04/25/20	05/20/20		10,066.00	0.00	0.00	10,066.00 ✓
Vendor Totals						Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR LIVING					30,234.61	0.00	0.00	30,234.61

NH insurance pymt deposited into mme operating

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	30,234.61	0.00	0.00	30,234.61

APPROVED ON

APR 28 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Clk# 194868



RUN DATE:04/29/22
 TIME:14:28

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 05/04/22 THRU 05/04/22

PAGE 1
 GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	194772	05/04/22	857.16	ACE HARDWARE 15521
A/P	194773	05/04/22	49.18	ADT COMMERCIAL
A/P	194774	05/04/22	4,727.68	AIRGAS USA, LLC - CENTRAL DIV
A/P	194775	05/04/22	465.00	ALLOMETRICS, INC.
A/P	194776	05/04/22	2,405.25	ALLYSON SWOPE
A/P	194777	05/04/22	4,629.84	AMERISOURCEBERGEN DRUG CORP
A/P	194778	05/04/22	310.98	ASPEN SURGICAL PRODUCTS INC
A/P	194779	05/04/22	8,215.50	AUREUS RADIOLOGY LLC
A/P	194780	05/04/22	845.79	BAXTER HEALTHCARE
A/P	194781	05/04/22	1,371.51	BECKMAN COULTER INC
A/P	194782	05/04/22	521.27	BECTON, DICKINSON & CO (BD)
A/P	194783	05/04/22	5,745.45	BEYER MECHANICAL
A/P	194784	05/04/22	50.93	BLUE CROSS BLUE SHIELD REFUND
A/P	194785	05/04/22	266.08	CAPITAL ONE
A/P	194786	05/04/22	658.83	CARDINAL HEALTH 414, INC.
A/P	194787	05/04/22	1,908.64	CAREFUSION SOLUTIONS, LLC
A/P	194788	05/04/22	1,832.83	CAVALLO ENERGY TEXAS LLC
A/P	194789	05/04/22	31,960.00	CENTURION SERVICE GROUP
A/P	194790	05/04/22	518.75	CHEMAQUA
A/P	194791	05/04/22	132.01	CIGNA
A/P	194792	05/04/22	7,760.45	CITY OF PORT LAVACA
A/P	194793	05/04/22	3,409.00	CLIA LABORATORY PROGRAM
A/P	194794	05/04/22	1,040.17	COASTAL OFFICE SOLUTONS
A/P	194795	05/04/22	56,875.00	COFFEE BARREL, LLC
A/P	194796	05/04/22	612.18	COMBINED INSURANCE
A/P	194797	05/04/22	699.39	CUSTOM MEDICAL SPECIALTIES
A/P	194798	05/04/22	3,555.21	DEARBORN LIFE INSURANCE COMPAN
A/P	194799	05/04/22	940.44	DETAR HOSPITAL
A/P	194800	05/04/22	1,090.74	DEWITT POTH & SON
A/P	194801	05/04/22	126,103.61	DISCOVERY MEDICAL NETWORK INC
A/P	194802	05/04/22	1,095.00	DOWELL PEST CONTROL
A/P	194803	05/04/22	15.28	FEDERAL EXPRESS CORP.
A/P	194804	05/04/22	221.68	FISHER HEALTHCARE
A/P	194805	05/04/22	3,937.69	FRASIER HEALTHCARE CONSULTING,
A/P	194806	05/04/22	7,908.33	FUJI FILM
A/P	194807	05/04/22	39.58	FUN EXPRESS INC
A/P	194808	05/04/22	300.42	GRAINGER
A/P	194809	05/04/22	833.20	GUERBET, LLC
A/P	194810	05/04/22	992.64	GULF COAST PAPER COMPANY
A/P	194811	05/04/22	940.75	HEALTHCARE CODING & CONSULTING
A/P	194812	05/04/22	61.00	HEALTHSURE INSURANCE SERVICES
A/P	194813	05/04/22	2,990.00	HCB CREDIT RECEIVABLES DEPT308
A/P	194814	05/04/22	71.02	HUMANA HEALTH CARE PLANS
A/P	194815	05/04/22	54.25	INTOXIMETERS INC
A/P	194816	05/04/22	110.00	JIMMY CUMPIAN
A/P	194817	05/04/22	579.00	KRISTI BOYD
A/P	194818	05/04/22	249.00	LAB UNIVERSITY, LLC
A/P	194819	05/04/22	682.32	LEGATO
A/P	194820	05/04/22	304.00	LONESTAR COMMUNICATIONS, IN
A/P	194821	05/04/22	406.54	LOWE'S BUSINESS ACCT/SYNCR

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	194822	05/04/22	1,324.84	MCKESSON MEDICAL SURGICAL INC
A/P	194823	05/04/22	.00	VOIDED
A/P	194824	05/04/22	.00	VOIDED
A/P	194825	05/04/22	13,531.51	MEDLINE INDUSTRIES INC
A/P	194826	05/04/22	.00	VOIDED
A/P	194827	05/04/22	.00	VOIDED
A/P	194828	05/04/22	22,624.04	MORRIS & DICKSON CO, LLC
A/P	194829	05/04/22	501.20	NACOGDOCHES TRANSCRIPTION
A/P	194830	05/04/22	209.23	PARTSSOURCE, LLC
A/P	194831	05/04/22	6,424.43	PRO ENERGY PARTNERS LP
A/P	194832	05/04/22	1,708.33	RADSOURCE
A/P	194833	05/04/22	112.00	RAPID PRINTING LLC
A/P	194834	05/04/22	847.09	SAM'S CLUB DIRECT
A/P	194835	05/04/22	47.72	SHERWIN WILLIAMS
A/P	194836	05/04/22	400.00	SIGN AD, LTD.
A/P	194837	05/04/22	1,768.20	SMITH & NEPHEW
A/P	194838	05/04/22	4,164.09	SPARKLIGHT
A/P	194839	05/04/22	25,771.00	SPECTRUM HEALTH PARTNERS, LLC
A/P	194840	05/04/22	211.36	STERIS CORPORATION
A/P	194841	05/04/22	4,708.16	STRYKER SUSTAINABILITY
A/P	194842	05/04/22	16,668.17	SUN LIFE FINANCIAL
A/P	194843	05/04/22	921.25	T&R MECHANICAL
A/P	194844	05/04/22	7,896.51	UNIFIRST HOLDINGS INC
A/P	194845	05/04/22	312.08	UNITED AD LABEL CO INC
A/P	194846	05/04/22	233.40	WATERMARK GRAPHICS INC
A/P	194847	05/04/22	3,292.10	WERFEN USA LLC
A/P	194848	05/04/22	23,925.00	WOUND CARE SPECIALISTS
A/P	194849	05/04/22	213.41	
A/P	194850	05/04/22	15.00	
A/P	194851	05/04/22	169.60	
A/P	194852	05/04/22	38.15	
A/P	194853	05/04/22	226.97	
A/P	194854	05/04/22	52.43	
A/P	194855	05/04/22	25.00	
A/P	194856	05/04/22	948.41	
A/P *	194857	05/04/22	476.69	
A/P	194868	05/04/22	30,234.61	BETHANY SENIOR LIVING
A/P	194869	05/04/22	72,192.55	BROADMOOR AT CREEKSIDE PARK
A/P	194870	05/04/22	33,664.11	FORTBEND HEALTHCARE CENTER
A/P	194871	05/04/22	99,328.78	GOLDENCREEK HEALTHCARE
A/P	194872	05/04/22	26,682.46	GULF POINTE PLAZA
A/P	194873	05/04/22	84,285.34	SOLERA WEST HOUSTON
A/P	194874	05/04/22	87,745.39	THE CRESCENT
A/P	194875	05/04/22	24,104.81	TUSCANY VILLAGE
TOTALS:			889,355.99	

Payables 428,952.28 +
Patient refunds 2,165.66 +

NH { 84,285.34 +
 { 33,664.11 +
 { 72,192.55 +
Transfers { 87,745.39 +
 { 99,328.78 +
 { 26,682.46 +
 { 24,104.81 +
 { 30,234.61 +
 889,355.99 *

APPROVED ON

MAY 06 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Request for Transfer of Funds

Transfer #: _____

Date Requested: 4/26/2022

Payer: Novitas CVDAR000026869

Requested by: Catrina Hopper

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

Requestor's phone number: 903-372-8412

District or County: Memorial Medical Center

Facility: Golden Creek

Please Attach:

Remittance Advice and EOB

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

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

Please email request form and

Remittance Advice to : cclevenger@mmcportlavaca.com

mmartinez@mmcportlavaca.com

Patient Name (REQUIRED)	Date of Service (REQUIRED)	Date of Payment	Type of Payment (Check/EFT)	Amount of Payment shown on Remittance Advice (REQUIRED)	Check Number	Claim Number	Action needed- Enter funds (-) or Funds (+) to YOUR account	Notes
		1/17/2022	EFT6213406	\$ (0.41)	EFT6213406	CVDAR000026869	\$ 0.41	Due to Golden Creek from The Broadmoor Creeks
		1/21/2022	EFT6219551	\$ (4,198.89)	EFT6219551	CVDAR000026869	\$ 4,198.89	Due to Golden Creek from The Broadmoor Creeks
		1/27/2022	EFT6226293	\$ (10.26)	EFT6226293	CVDAR000026869	\$ 10.26	Due to Golden Creek from The Broadmoor Creeks
		1/20/2022	EFT7217616	\$ (9.06)	EFT7217616	CVDAR000026869	\$ 9.06	Due to Golden Creek from The Broadmoor Creeks
		3/16/2022	EFT9278125	\$ (62.06)	EFT9278125	CVDAR000026869	\$ 62.06	Due to Golden Creek from The Broadmoor Creeks
		3/2/2022	EFT6264715	\$ (666.08)	EFT6264715	CVDAR000026869	\$ 666.08	Due to Golden Creek from The Broadmoor Creeks
		3/8/2022	EFT6269776	\$ (800.91)	EFT6269776	CVDAR000026869	\$ 800.91	Due to Golden Creek from The Broadmoor Creeks
		12/22/2021	EFT6191743	\$ (5,524.99)	EFT6191743	CVDAR000026869	\$ 5,524.99	Due to Golden Creek from The Broadmoor Creeks
TOTAL				\$ (11,272.66)			\$ 11,272.66	

To be filled out by Memorial Medical Center:

Date Received: 4/26/2022

Approved by: MAYRA MARTINEZ

Date of transfer: 5/4/2022

From Facility: BROADMOOR

To Facility: GOLDEN CREEK

Amount: 11,272.66

Requested Transfer Date #2: _____

Date of transfer: _____

From Facility: _____

To Facility: _____

Amount: _____

Mayra Martinez 5/2/22

APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Clk #000206

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000206

Date 5/4/22

88-2265/1131

PAY
TO THE
ORDER OF

Golden Creek

\$ 11,272.00

Eleven thousand Two hundred Seventy two & 00/100 DOLLARS



FOR Medicare repayment

Security features are included. Details on back.

⑈000206⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000238

Date 5/4/22

88-2265/1131

PAY
TO THE
ORDER OF

Golden Creek

\$ 11,272.00

Eleven thousand Two hundred Seventy two & 00/100 DOLLARS



FOR Medicare repayment

Security features are included. Details on back.

⑈000238⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH SOLERA
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001237

Date 5/4/22

88-2265/1131

PAY
TO THE
ORDER OF

Golden Creek

\$ 11,272.00

Eleven thousand two hundred Seventy two & 00/100 DOLLARS



FOR Medicare repayment

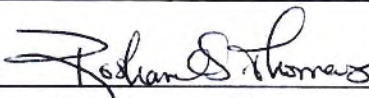
Security features are included. Details on back.

⑈001237⑈ ⑆113122655⑆

Medicare Repayment

NH Name	From CPSI Bank Acct #	CK#	Payee	GL #	Amt	CK DATE
BROADMOOR			GOLDEN CREEK	20351000	11,272.66	5/4/2022
CRESCENT			GOLDEN CREEK	20351000	11,272.66	5/4/2022
SOLERA			GOLDEN CREEK	20351000	11,272.66	5/4/2022
				Total	33,817.98	

Note:

Approved: 
 ROSHANDA THOMAS, INTERIM CEO

5/2/2022

Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 5/2/2022

Nursing Home	Account Number	Previous			Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
		Beginning Balance	Transfer-Out	ACH Transfer-In			
Ashford Gardens		22,462.01	✓ 22,362.01	✓ 44,033.76	✓	414,133.76	398,343.70
						Bank Balance	414,133.76
						Variance	-
						Leave in Balance	100.00
						MOLINA MAR QIPP	15,675.04
						JAN INTEREST	15.02
						FEB INTEREST	
						MAR INTEREST	
						Adjust Balance/Transfer Amt	398,343.70
Broadmoor		121,105.66	✓ 121,005.66	✓ 150,314.16	✓	150,414.16	132,590.21
						Bank Balance	150,414.16
						Variance	-
						Leave in Balance	100.00
						MOLINA MAR QIPP	6,439.63
						MEDICARE REPAYMENT TO GOLDEN CREEK	11,272.66
						JAN INTEREST	11.66
						FEB INTEREST	
						MAR INTEREST	
						Adjust Balance/Transfer Amt	132,590.21
Crescent		146,559.37	✓ 146,459.37	✓ 155,672.92	✓	155,772.92	139,196.77
						Bank Balance	155,772.92
						Variance	-
						Leave in Balance	100.00
						MOLINA MAR QIPP	5,191.42
						MEDICARE REPAYMENT TO GOLDEN CREEK	11,272.66
						JAN INTEREST	12.07
						FEB INTEREST	
						MAR INTEREST	
						Adjust Balance/Transfer Amt	139,196.77
Fort Bend		39,947.49	✓ 39,847.49	✓ 120,956.06	✓	121,056.06	114,623.61
						Bank Balance	121,056.06
						Variance	-
						Leave in Balance	100.00
						MOLINA MAR QIPP	6,327.26
						JAN INTEREST	5.19
						FEB INTEREST	
						MAR INTEREST	
						Adjust Balance/Transfer Amt	114,623.61
Solera at W Houston		98,678.89	✓ 98,578.89	✓ 210,275.15	✓	210,375.15	192,849.81
						Bank Balance	210,375.15
						Variance	-
						Leave in Balance	100.00
						MOLINA MAR QIPP	6,138.78
						MEDICARE REPAYMENT TO GOLDEN CREEK	11,272.66
						JAN INTEREST	13.90
						FEB INTEREST	
						MAR INTEREST	
						Adjust Balance/Transfer Amt	192,849.81
TOTAL TRANSFERS						977,604.10	

398,343.70 +
 132,590.21 +
 139,196.77 + *1 / Broadmoor*
 114,623.61 +
 192,849.81 +
 977,604.10 *

APPROVED ON
 MAY 02 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Approved: *Roshanda Thomas*
 ROSHANDA THOMAS INTERIM CEO 5/2/2022

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

		MMC PORTION					NH PORTION	
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
Ashford Gardens								
4/25/2022	Molina HC of TX HCCLAIMPMT PN1326436189 4200	-	21,182.30	-	-	-	-	21,182.30
4/25/2022	Molina HC of TX HCCLAIMPMT PN1326436189 4200	-	1,289.45	-	-	-	-	1,289.45
4/25/2022	Amerigroup TXSC HCCLAIMPMT 3178016741 111000	-	40,410.29	-	-	-	-	40,410.29
4/25/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	445.08	-	-	-	-	445.08
4/25/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,480.30	-	-	-	-	2,480.30
4/26/2022	Deposit	-	216,625.32	-	-	-	-	216,625.32
4/26/2022	Amerigroup TXSC HCCLAIMPMT 3178145715 111000	-	2,999.82	-	-	-	-	2,999.82
4/26/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	24,945.01	-	-	-	-	24,945.01
4/27/2022	MOLINA HEALTHCAR MOLINAACH 01090359 42000016	-	17,343.03	14,007.04	3,335.99	-	15,675.04	1,668.00
4/27/2022	Molina HC of TX HCCLAIMPMT PN1326436189 4200	-	5,089.62	-	-	-	-	5,089.62
4/27/2022	MANAGEANDNET1718 MNS PMNT 00000000000093 41	-	567.00	-	-	-	-	567.00
4/27/2022	HNB - ECHO HCCLAIMPMT 746003411 440000232875	-	231.71	-	-	-	-	231.71
4/27/2022	Amerigroup TXSC HCCLAIMPMT 3178294225 111000	-	556.73	-	-	-	-	556.73
4/27/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	48,191.56	-	-	-	-	48,191.56
4/28/2022	WIRE OUT ASHFORD HEALTH CARE CENTER LTD	22,362.01	-	-	-	-	-	-
4/28/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	8,499.56	-	-	-	-	8,499.56
4/28/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	9,764.80	-	-	-	-	9,764.80
4/29/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	13,397.16	-	-	-	-	13,397.16
4/30/2022	Added to Account	-	15.02	-	-	-	-	15.02
		22,362.01	414,033.76	14,007.04	3,335.99	-	15,675.04	398,343.71

		MMC PORTION					NH PORTION	
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
Broadmoor								
4/25/2022	Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	11,860.90	-	-	-	-	11,860.90
4/25/2022	Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	2,823.47	-	-	-	-	2,823.47
4/25/2022	NOVITAS SOLUTION HCCLAIMPMT 676357 420000178	-	6,876.57	-	-	-	-	6,876.57
4/26/2022	Deposit	-	76,179.39	-	-	-	-	76,179.39
4/26/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,306.91	-	-	-	-	1,306.91
4/26/2022	NOVITAS SOLUTION HCCLAIMPMT 676357 420000100	-	1,293.01	-	-	-	-	1,293.01
4/26/2022	HUMANA CHA DISB HCCLAIMPMT 390861 4200001942	-	4,650.00	-	-	-	-	4,650.00
4/27/2022	MOLINA HEALTHCAR MOLINAACH 01090809 42000016	-	7,085.98	5,793.28	1,292.70	-	6,439.63	646.35
4/27/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	23,182.39	-	-	-	-	23,182.39
4/28/2022	WIRE OUT CANTEX HEALTH CARE CENTERS III	121,005.66	-	-	-	-	-	-
4/28/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,841.19	-	-	-	-	2,841.19
4/29/2022	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	8,037.60	-	-	-	-	8,037.60
4/29/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,496.26	-	-	-	-	2,496.26
4/29/2022	HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2	-	1,668.83	-	-	-	-	1,668.83
4/30/2022	Added to Account	-	11.66	-	-	-	-	11.66
		121,005.66	150,314.16	5,793.28	1,292.70	-	6,439.63	143,862.87

		MMC PORTION					NH PORTION	
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
Crescent								
4/25/2022	Molina HC of TX HCCLAIMPMT PN1669860425 4200	-	2,143.13	-	-	-	-	2,143.13
4/25/2022	HNB - ECHO HCCLAIMPMT 746003411 440000252661	-	1,477.99	-	-	-	-	1,477.99
4/25/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	16,292.29	-	-	-	-	16,292.29
4/25/2022	NOVITAS SOLUTION HCCLAIMPMT 676323 420000178	-	3,849.49	-	-	-	-	3,849.49
4/25/2022	DEVOTED HEALTH P HCCLAIMPMT 121140397193377	-	5,400.00	-	-	-	-	5,400.00
4/26/2022	Deposit	-	63,654.97	-	-	-	-	63,654.97
4/26/2022	HNB - ECHO HCCLAIMPMT 746003411 440000296434	-	362.64	-	-	-	-	362.64
4/26/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	17,364.65	-	-	-	-	17,364.65
4/26/2022	HUMANA CHA DISB HCCLAIMPMT 390864 4200001942	-	1,580.00	-	-	-	-	1,580.00
4/26/2022	DEVOTED HEALTH P HCCLAIMPMT 121140398979495	-	1,500.00	-	-	-	-	1,500.00
4/27/2022	MOLINA HEALTHCAR MOLINAACH 01090772 42000016	-	5,730.35	4,652.48	1,077.87	-	5,191.42	538.94
4/27/2022	MANAGEANDNET1718 MNS PMNT 0000000000003268 41	-	11,679.00	-	-	-	-	11,679.00
4/28/2022	WIRE OUT CANTEX HEALTH CARE CENTERS III	146,459.37	-	-	-	-	-	-
4/28/2022	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	5,020.00	-	-	-	-	5,020.00
4/28/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,516.77	-	-	-	-	2,516.77
4/28/2022	NOVITAS SOLUTION HCCLAIMPMT 676323 420000122	-	54.98	-	-	-	-	54.98
4/29/2022	NOVITAS SOLUTION HCCLAIMPMT 676323 420000154	-	6,234.59	-	-	-	-	6,234.59
4/29/2022	CIGNA HCCLAIMPMT 1669860425 91000014396051	-	10,800.00	-	-	-	-	10,800.00
4/30/2022	Added to Account	-	12.07	-	-	-	-	12.07
		146,459.37	155,672.92	4,652.48	1,077.87	-	5,191.42	150,481.51

		MMC PORTION					NH PORTION	
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
Fort Band								
4/25/2022	Molina HC of TX HCCLAIMPMT PN1730577503 4200	-	2,288.06	-	-	-	-	2,288.06
4/25/2022	HNB - ECHO HCCLAIMPMT 746003411 440000252660	-	244.61	-	-	-	-	244.61
4/25/2022	AARP Supplementa HCCLAIMPMT 746003411 124384	-	778.00	-	-	-	-	778.00
4/26/2022	Deposit	-	65,502.46	-	-	-	-	65,502.46
4/26/2022	Molina HC of TX HCCLAIMPMT PN1730577503 4200	-	2,245.70	-	-	-	-	2,245.70
4/26/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	12,028.37	-	-	-	-	12,028.37
4/26/2022	NOVITAS SOLUTION HCCLAIMPMT 675663 420000100	-	10,963.77	-	-	-	-	10,963.77
4/27/2022	MOLINA HEALTHCAR MOLINAACH 01090489 42000016	-	6,990.19	5,664.32	1,325.87	-	6,327.26	662.94
4/27/2022	Molina HC of TX HCCLAIMPMT PN1730577503 4200	-	2,269.53	-	-	-	-	2,269.53
4/27/2022	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	6,020.00	-	-	-	-	6,020.00
4/27/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	5,958.33	-	-	-	-	5,958.33
4/28/2022	WIRE OUT CANTEX HEALTH CARE CENTERS III	39,847.49	-	-	-	-	-	-
4/28/2022	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	5,661.85	-	-	-	-	5,661.85
4/30/2022	Added to Account	-	5.19	-	-	-	-	5.19
		39,847.49	120,956.06	5,664.32	1,325.87	-	6,327.26	114,623.62

		MMC PORTION					NH PORTION	
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
Sofera at West Houston								
4/25/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	1,984.27						1,984.27
4/25/2022 Amerigroup TXSC HCCLAIMPMT 3178016742 111000	-	14,496.41						14,496.41
4/25/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	22,064.85						22,064.85
4/25/2022 NOVITAS SOLUTION HCCLAIMPMT 676310 420000178	-	1,348.50						1,348.50
4/25/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001754	-	772.55						772.55
4/26/2022 Deposit	-	61,778.22						61,778.22
4/26/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	1,294.27						1,294.27
4/26/2022 HNB - ECHO HCCLAIMPMT 746003411 440000296434	-	1,967.86						1,967.86
4/26/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	25,628.29						25,628.29
4/26/2022 HUMANA INS CO HCCLAIMPMT 390862 830000530669	-	4,020.00						4,020.00
4/26/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001942	-	5,060.00						5,060.00
4/26/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001942	-	3,160.00						3,160.00
4/27/2022 Deposit	-	7,481.39						7,481.39
4/27/2022 MOLINA HEALTHCARE MOLINAACH 01090739 42000016	-	6,781.87	5,495.68	1,286.19			6,138.78	643.09
4/27/2022 MANAGEANDNET1718 MNS PMNT 00000000002482 41	-	2,399.40						2,399.40
4/27/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	5,672.41						5,672.41
4/28/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	98,578.89	-						-
4/28/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	1,754.40						1,754.40
4/28/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	905.99						905.99
4/28/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	11,980.00						11,980.00
4/28/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	683.54						683.54
4/28/2022 NOVITAS SOLUTION HCCLAIMPMT 676310 420000122	-	144.09						144.09
4/29/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	5,091.19						5,091.19
4/29/2022 MANAGEANDNET1718 MNS PMNT 00000000002482 41	-	20,816.14						20,816.14
4/29/2022 Amerigroup TXSC HCCLAIMPMT 3178472638 111000	-	4.40						4.40
4/29/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	804.44						804.44
4/29/2022 NOVITAS SOLUTION HCCLAIMPMT 676310 420000154	-	2,166.77						2,166.77
4/30/2022 Added to Account	-	13.90						13.90
	98,578.89	210,275.15	5,495.68	1,286.19	-	-	6,138.78	204,122.48
TOTALS	428,253.42	1,051,252.05	35,612.80	8,318.62	-	-	39,772.11	1,011,434.17

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

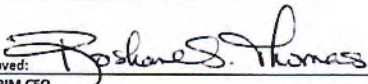
DDA Data reported as of May 2, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$8,431,328.17	\$8,612,638.81	\$8,431,328.17	\$8,431,328.1
*4551 CAL CO INDIGENT HEALTHCARE	\$52,697.70	\$52,697.70	\$52,697.70	\$52,697.7
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$458,115.72	\$466,255.72	\$458,115.72	\$458,115.7
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.33	\$536.33	\$536.33	\$536.3
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$4,786,845.48	\$4,899,104.01	\$4,786,845.48	\$4,786,845.4
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.76	\$431.76	\$431.76	\$431.7
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$414,133.76 ✓	\$424,430.62	\$414,133.76	\$414,133.7
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$150,414.16 ✓	\$152,726.80	\$150,414.16	\$150,414.1
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,772.92 ✓	\$185,426.74	\$155,772.92	\$155,772.9
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$121,056.06 ✓	\$126,112.20	\$121,056.06	\$121,056.0
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$210,375.15 ✓	\$216,520.59	\$210,375.15	\$210,375.1
*2998 MMC -MONEY MARKET FUND	\$1,110,243.27	\$1,110,243.27	\$1,110,243.27	\$1,110,243.2
*5506 MMC -NH BETHANY SENIOR LIVING	\$417,343.20	\$418,396.23	\$417,343.20	\$417,343.2
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$274,285.59	\$274,539.18	\$274,285.59	\$274,285.5
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$1,596.65	\$1,620.17	\$1,596.65	\$1,596.6
*3407 MMC -NH TUSCANY VILLAGE	\$277,480.42	\$283,597.49	\$277,480.42	\$277,480.4

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 5/2/2022

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		110,912.66	110,812.66	458,015.72		458,115.72	457,998.16
						Bank Balance Variance	458,115.72
						Leave in Balance	100.00
						JAN INTEREST	17.56
						FEB INTEREST	
						MAR INTEREST	17.56
						Adjust Balance/Transfer Amt	457,998.16

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, INTERIM CEO 5/2/2022

APPROVED ON
MAY 02 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek

MMC PORTION

	<u>Transfer-Out</u>	<u>Transfer-In</u>	QJPP/Comp4				NH PORTION	
			QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	&Lapse	QJPP TI	
4/25/2022 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9	-	2,437.74						2,437.74
4/26/2022 Deposit	-	437,399.41						437,399.41
4/27/2022 Deposit	-	10,688.78						10,688.78
4/27/2022 AETNA A501 HCCLAIMPMT 1588075964 51000014807	-	137.48						137.48
4/28/2022 WIRE OUT NEXION HEALTH AT GOLDEN CREEK	110,812.66	-						-
4/28/2022 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9	-	3,682.76						3,682.76
4/28/2022 HNB - ECHO HCCLAIMPMT 746003411 440000268453	-	3,651.99						3,651.99
4/30/2022 Added to Account	-	17.56						17.56
	110,812.66	458,015.72						458,015.72

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type

DDA

Data reported as of May 2, 2022

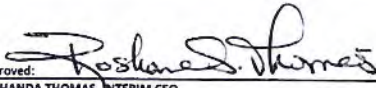
Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$8,431,328.17	\$8,612,638.81	\$8,431,328.17	\$8,431,328.1
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$52,697.70	\$52,697.70	\$52,697.70	\$52,697.7
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$458,115.72 ✓	\$466,255.72	\$458,115.72	\$458,115.7
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.33	\$536.33	\$536.33	\$536.3
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$4,786,845.48	\$4,899,104.01	\$4,786,845.48	\$4,786,845.4
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.76	\$431.76	\$431.76	\$431.7
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$414,133.76	\$424,430.62	\$414,133.76	\$414,133.7
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$150,414.16	\$152,726.80	\$150,414.16	\$150,414.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,772.92	\$185,426.74	\$155,772.92	\$155,772.9
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$121,056.06	\$126,112.20	\$121,056.06	\$121,056.0
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$210,375.15	\$216,520.59	\$210,375.15	\$210,375.1
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,110,243.27	\$1,110,243.27	\$1,110,243.27	\$1,110,243.2
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$417,343.20	\$418,396.23	\$417,343.20	\$417,343.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$274,285.59	\$274,539.18	\$274,285.59	\$274,285.5
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$1,596.65	\$1,620.17	\$1,596.65	\$1,596.6
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$277,480.42	\$283,597.49	\$277,480.42	\$277,480.4

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 5/2/2022

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		1,133.38		463.27			1,596.65	no transfer
						Bank Balance Variance	1,596.65	
						Leave in Balance	100.00	
						JAN INTEREST	2.36	
						FEB INTEREST		
						MAR INTEREST		
						Adjust Balance/Transfer Amt	1,494.29	
Gulf Pointe Plaza-Medicare/Medicaid		1,654.98		272,630.61			274,285.59	274,176.94
						Bank Balance Variance	274,285.59	
						Leave in Balance	100.00	
						JAN INTEREST	8.65	
						FEB INTEREST		
						MAR INTEREST		
						Adjust Balance/Transfer Amt	274,176.94	
TOTAL TRANSFERS							275,671.23	

Routine Information for Gulf Pointe Plaza:

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

Approved: 
 ROSHANDA THOMAS, INTERIM CEO 5/2/2022

APPROVED ON
MAY 02 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp		QIPP/Comp4		QIPP TI	
			1	2	3	&Lapse		
Gulf Pointe Plaza-Private Pay								
4/25/2022 HNB - ECHO HCCLAIMPMT 746003411 440000252660	-	117.84					117.84	
4/25/2022 HNB - ECHO HCCLAIMPMT 746003411 440000252659	-	19.60					19.60	
4/26/2022 PNC-ECHO HCCLAIMPMT 746003411 41000124336489	-	98.01					98.01	
4/28/2022 HNB - ECHO HCCLAIMPMT 746003411 440000268453	-	225.46					225.46	
4/30/2022 Added to Account	-	2.36					2.36	
	-	463.27					463.27	

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp		QIPP/Comp4		QIPP TI	
			1	2	3	&Lapse		
Gulf Pointe Plaza-Medicare/Medicaid								
4/25/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001870934	-	93,402.02					93,402.02	
4/26/2022 Deposit	-	124,476.98					124,476.98	
4/26/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113013 2	-	4,689.17					4,689.17	
4/27/2022 Deposit	-	3,153.20					3,153.20	
4/27/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001	-	2,475.00					2,475.00	
4/27/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001073100	-	34,329.53					34,329.53	
4/29/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001	-	8,668.56					8,668.56	
4/29/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001289058	-	39.82					39.82	
4/29/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113013 2	-	1,387.68					1,387.68	
4/30/2022 Added to Account	-	8.65					8.65	
	-	272,630.61					272,621.96	
	-	273,093.88					273,085.23	

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

DDA

Data reported as of May 2, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$8,431,328.17	\$8,612,638.81	\$8,431,328.17	\$8,431,328.1
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$52,697.70	\$52,697.70	\$52,697.70	\$52,697.7
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$458,115.72	\$466,255.72	\$458,115.72	\$458,115.7
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.33	\$536.33	\$536.33	\$536.3
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$4,786,845.48	\$4,899,104.01	\$4,786,845.48	\$4,786,845.4
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.76	\$431.76	\$431.76	\$431.7
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$414,133.76	\$424,430.62	\$414,133.76	\$414,133.7
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$150,414.16	\$152,726.80	\$150,414.16	\$150,414.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,772.92	\$185,426.74	\$155,772.92	\$155,772.9
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$121,056.06	\$126,112.20	\$121,056.06	\$121,056.0
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$210,375.15	\$216,520.59	\$210,375.15	\$210,375.1
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,110,243.27	\$1,110,243.27	\$1,110,243.27	\$1,110,243.2
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$417,343.20	\$418,396.23	\$417,343.20	\$417,343.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$274,285.59	\$274,539.18	\$274,285.59	\$274,285.5
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$1,596.65	\$1,620.17	\$1,596.65	\$1,596.6
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$277,480.42	\$283,597.49	\$277,480.42	\$277,480.4

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscan Transfer
 Prosperity Accounts
 5/2/2022

Nursing Home Tuscany Village	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Chs Cleared	Pending Deposits	Amount to Be Transferred to Nursing Home	
							Today's Beginning Balance	Amount to Be Transferred to Nursing Home
		85,099.01	84,999.01	277,380.42			277,480.42	268,207.30
						Bank Balance Variance	277,480.42	
						Leave in Balance	100.00	
						MOLINA MAR QJPP	9,173.12	

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 268,207.30
 Approved: *Roshanda Thomas*
 ROSHANDA THOMAS, INTERIM CEO 5/2/2022

APPROVED ON
 MAY 02 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	
4/26/2022 Deposit	-	141,183.87					-	141,183.87
4/27/2022 Deposit	-	3,009.25					-	3,009.25
4/27/2022 MOLINA HEALTHCAR MOLINAACH 01090805 42000016	-	10,132.48	8,213.76	1,918.72			9,173.12	959.36
4/27/2022 HNB - ECHO HCCLAIMPMT 746003411 440000232868	-	860.53					-	860.53
4/27/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000113	-	104,111.36					-	104,111.36
4/28/2022 WIRE OUT LINBAR ENTERPRISES, LLC	84,999.01	-					-	-
4/28/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000122	-	3,068.07					-	3,068.07
4/29/2022 Molina HC of TX HCCLAIMPMT PN1275717894 4200	-	3,302.73					-	3,302.73
4/29/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000154	-	11,696.31					-	11,696.31
4/30/2022 Added to Account	-	15.82					-	15.82
	84,999.01	277,380.42	8,213.76	1,918.72	-	-	9,173.12	268,207.30

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type

DDA

Data reported as of May 2, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$8,431,328.17	\$8,612,638.81	\$8,431,328.17	\$8,431,328.1
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$52,697.70	\$52,697.70	\$52,697.70	\$52,697.7
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$458,115.72	\$466,255.72	\$458,115.72	\$458,115.7
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.33	\$536.33	\$536.33	\$536.3
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$4,786,845.48	\$4,899,104.01	\$4,786,845.48	\$4,786,845.4
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.76	\$431.76	\$431.76	\$431.7
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$414,133.76	\$424,430.62	\$414,133.76	\$414,133.7
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$150,414.16	\$152,726.80	\$150,414.16	\$150,414.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,772.92	\$185,426.74	\$155,772.92	\$155,772.9
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$121,056.06	\$126,112.20	\$121,056.06	\$121,056.0
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$210,375.15	\$216,520.59	\$210,375.15	\$210,375.1
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,110,243.27	\$1,110,243.27	\$1,110,243.27	\$1,110,243.2
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$417,343.20	\$418,396.23	\$417,343.20	\$417,343.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$274,285.59	\$274,539.18	\$274,285.59	\$274,285.5
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$1,596.65	\$1,620.17	\$1,596.65	\$1,596.6
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$277,480.42	\$283,597.49	\$277,480.42	\$277,480.4

Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 5/2/2022

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		209,107.60	209,007.60	417,243.20			417,343.20	417,215.61
						Bank Balance	417,343.20	
						Variance		
						Leave in Balance	100.00	
						JAN INTEREST	27.59	
						FEB INTEREST		
						MAR INTEREST		
						Adjust Balance/Transfer Amt	417,215.61	
						Approved: <i>Roshanda Thomas</i>		
						ROSHANDA THOMAS, INTERIM CEO		5/2/2022

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

MAY 02 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	
4/25/2022 Deposit	-	479.09						479.09
4/25/2022 Deposit	-	26,538.36						26,538.36
4/25/2022 Deposit	-	4,237.95						4,237.95
4/26/2022 Deposit	-	244,784.08						244,784.08
4/26/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2	-	3,249.89						3,249.89
4/27/2022 Deposit	-	2,214.35						2,214.35
4/27/2022 Deposit	-	2,000.00						2,000.00
4/27/2022 Deposit	-	65,943.48						65,943.48
4/27/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2	-	2,843.78						2,843.78
4/28/2022 WIRE OUT BETHANY SENIOR LIVING, LTD	209,007.60	-						-
4/29/2022 Deposit	-	53,966.64						53,966.64
4/29/2022 Deposit	-	10,469.97						10,469.97
4/29/2022 HOSPICE OF SOUTH Payments NF 113122650040697	-	488.02						488.02
4/30/2022 Added to Account	-	27.59						27.59
	209,007.60	417,243.20	-	-	-	-	-	417,243.20

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

DDA

Data reported as of May 2, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$8,431,328.17	\$8,612,638.81	\$8,431,328.17	\$8,431,328.1
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$52,697.70	\$52,697.70	\$52,697.70	\$52,697.7
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$458,115.72	\$466,255.72	\$458,115.72	\$458,115.7
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.33	\$536.33	\$536.33	\$536.3
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$4,786,845.48	\$4,899,104.01	\$4,786,845.48	\$4,786,845.4
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.76	\$431.76	\$431.76	\$431.7
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$414,133.76	\$424,430.62	\$414,133.76	\$414,133.7
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$150,414.16	\$152,726.80	\$150,414.16	\$150,414.1
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,772.92	\$185,426.74	\$155,772.92	\$155,772.9
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$121,056.06	\$126,112.20	\$121,056.06	\$121,056.0
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$210,375.15	\$216,520.59	\$210,375.15	\$210,375.1
<u>*2998</u> MMC -MONEY MARKET FUND	\$1,110,243.27	\$1,110,243.27	\$1,110,243.27	\$1,110,243.2
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$417,343.20 ✓	\$418,396.23	\$417,343.20	\$417,343.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$274,285.59	\$274,539.18	\$274,285.59	\$274,285.5
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$1,596.65	\$1,620.17	\$1,596.65	\$1,596.6
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$277,480.42	\$283,597.49	\$277,480.42	\$277,480.4

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MEMORIAL MEDICAL CENTER - Ashford

Date Requested: 5/2/22

A _____

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APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 001174

G/L NUMBER: 10255040

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept

AMOUNT \$15,675.04

EXPLANATION: MOLINA MARCH QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: Rogland Thomas 5/2/22

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MEMORIAL MEDICAL CENTER - *Broadway*

Date Requested: 5/2/22

A _____

APPROVED ON

Y _____

MAY 02 2022

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BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

E _____

CK #000705

FOR ACCT. USE ONLY

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

AMOUNT \$6,439.63

G/L NUMBER: 10255040

EXPLANATION: MOLINA MARCH QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Roshane Thomas* 5/2/22

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MEMORIAL MEDICAL CENTER - Crescent

Date Requested: 5/2/22

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APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CL# 000231

FOR ACCT. USE ONLY

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

AMOUNT \$5,191.42

G/L NUMBER: 10255040

EXPLANATION: MOLINA MARCH QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

Rolene Thomas 5/2/22

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MEMORIAL MEDICAL CENTER - Fort Bend Date Requested: 5/2/22

A _____

Y _____

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E _____

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept

APPROVED ON
MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
ck# 000180

AMOUNT \$6,327.26 G/L NUMBER: 10255040

EXPLANATION: MOLINA MARCH QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Rolando Thomas* 5/2/22

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
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E
MEMORIAL MEDICAL CENTER - *Solem*

Date Requested: 5/2/22

APPROVED ON

MAY 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# *001234*

FOR ACCT. USE ONLY

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

AMOUNT \$6,138.78

G/L NUMBER: 10255040

EXPLANATION: MOLINA MARCH QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Roberto Thomas* 5/2/22

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
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E

MEMORIAL MEDICAL CENTER - *Tuscany*

Date Requested: 5/2/22

APPROVED ON

MAY 02 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK# 1099**

FOR ACCT. USE ONLY

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

AMOUNT \$9,173.12

G/L NUMBER: 10255040

EXPLANATION: MOLINA MARCH QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Rolando Thomas 5/2/22*

MEMORIAL MEDICAL CENTER

NH ASHFORD
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001174

Date 5/4/22 88-2265/1131

PAY
TO THE
ORDER OF

Memorial Medical Center

\$ 15,675.04

Fifteen thousand Six hundred Seventy five $\frac{1}{4}$ 04/100 DOLLARS



FOR Molina March QIPP

Security features are included. Details on back.

⑈001174⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000205

Date 5/4/22 88-2265/1131

PAY
TO THE
ORDER OF

Memorial Medical Center

\$ 6,439.63

Six thousand Four hundred Thirty nine $\frac{1}{4}$ 63/100 DOLLARS



FOR Molina March QIPP

Security features are included. Details on back.

⑈000205⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000237

Date 5/4/22 88-2265/1131

PAY
TO THE
ORDER OF

Memorial Medical Center

\$ 5,191.42

Five thousand One hundred ninety one $\frac{1}{4}$ 42/100 DOLLARS



FOR Molina March QIPP

Security features are included. Details on back.

⑈000237⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

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

000180

Date 5/4/22

88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Center

\$ 6,327.26

Six thousand three hundred twenty seven & 26/100 DOLLARS



FOR medicar molina mar. gipp

Security features are included. Details on back.

⑈000180⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER

NH SOLERA
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001236

Date 5/4/22

88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Center

\$ 6,138.78

Six thousand one hundred thirty eight & 78/100 DOLLARS



FOR molina march gipp

Security features are included. Details on back.

⑈001236⑈ ⑆113122655⑆

MEMORIAL MEDICAL CENTER 022020
NH TUSCANY VILLAGE

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

1099

88-2265/1131-87

DATE 5/4/22



PAY

TO THE ORDER OF Memorial Medical Center

\$ 9,173.12

Nine thousand one hundred seventy three & 12/100 DOLLARS



PORT LAVACA BANKING CENTER
1167 N. HIGHWAY 35 •PORT LAVACA, TX 77979-5102
361-552-7411 www.prosperitybankusa.com

FOR molina march gipp



⑈001099⑈ ⑆113122655⑆

QIPP Payment to MMC from Nursing Facilities

Commissioner's Court

5/4/2022

NH Name	From Bank Acct #	Ck #	Payee	GL #	MOLINA MARCH QIPP			TOTAL	Date
Ashford	10000018 - Prosperity		MMC -Prosperity Operating #10000001	10255040	15,675.04			15,675.04	4/20/2022
Broadmoor	10000019 - Prosperity		MMC -Prosperity Operating #10000001	10255040	6,439.63			6,439.63	4/20/2022
Crescent	10000020 - Prosperity		MMC -Prosperity Operating #10000001	10255040	5,191.42			5,191.42	4/20/2022
Fort Bend	10000021 - Prosperity		MMC -Prosperity Operating #10000001	10255040	6,327.26			6,327.26	4/20/2022
Solera	10000022 - Prosperity		MMC -Prosperity Operating #10000001	10255040	6,138.78			6,138.78	4/20/2022
Golden Creek	10000023 - Prosperity		MMC -Prosperity Operating #10000001	10255040				-	4/20/2022
Gulf Pointe-PP	10000114 - Prosperity		MMC -Prosperity Operating #10000001	10255040				-	4/20/2022
Gulf Pointe-MM	10000025 - Prosperity		MMC -Prosperity Operating #10000001					-	4/20/2022
Bethany			MMC -Prosperity Operating #10000001					-	4/20/2022
Tuscany			MMC -Prosperity Operating #10000001	10255040	9,173.12			9,173.12	4/20/2022
			Total:		48,945.25	-		48,945.25	

Note:

Approved: 
 ROSHANDIA THOMAS, INTERIM CEO 5/2/2022

RUN DATE:05/04/22
TIME:13:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/04/22 THRU 05/04/22

PAGE 4
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHA 001174 05/04/22 15,675.04 MEMORIAL MEDICAL CENTER *Ashtford*
TOTALS: 15,675.04

APPROVED ON

MAY 06 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RUN DATE:05/04/22
TIME:13:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/04/22 THRU 05/04/22

PAGE 5
GLCKREG

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

NHB 000205 05/04/22 6,439.63 MEMORIAL MEDICAL CENTER *Broadway*
NHB 000206 05/04/22 11,272.66 GOLDEN CREEK
TOTALS: 17,712.29

APPROVED ON

MAY 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:05/04/22
TIME:13:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/04/22 THRU 05/04/22

PAGE 6
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHC 000237 05/04/22 5,191.42 MEMORIAL MEDICAL CENTER
NHC 000238 05/04/22 11,272.66 GOLDEN CREEK
TOTALS: 16,464.08

Crescent

APPROVED ON

MAY 06 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RUN DATE:05/04/22
TIME:13:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/04/22 THRU 05/04/22

PAGE 7
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHF 000180 05/04/22 6,327.26 MEMORIAL MEDICAL CENTER
TOTALS: 6,327.26

Fort Bend

APPROVED ON

MAY 06 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RUN DATE:05/04/22
TIME:13:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/04/22 THRU 05/04/22

PAGE 8
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHS 001236 05/04/22 6,138.78 MEMORIAL MEDICAL CENTER
NHS 001237 05/04/22 11,272.66 GOLDEN CREEK
TOTALS: 17,411.44

Solem

APPROVED ON

MAY 06 2022

**BY: COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RUN DATE:05/04/22
TIME:13:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/04/22 THRU 05/04/22

PAGE 9
GLCKREG

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

TUS 001099 05/04/22 9,173.12 MEMORIAL MEDICAL CENTER
TOTALS: 9,173.12

Tuscany

APPROVED ON

MAY 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

5284 WEST STATE HIGHWAY 7, NACOGDOCHES, TX 75964
 MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

194866

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
7647	03/15/22	351.26			351.26
CHECK NO. 194866 05/02/22		TOTALS		TOTALS	351.26

MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

194866

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
7647	03/15/22	351.26			351.26
CHECK NO. 194866		TOTALS		TOTALS	351.26

MEMORIAL
 MEDICAL  CENTER

Operating
 815 N. Virginia St.
 Port Lavaca, TX 77979

PROSPERITY BANK

88-2265
 1131

194866

13548	194866
DATE	AMOUNT
05/02/22	\$351.26

Three Hundred Fifty-One Dollars and Twenty-Six Cents

PAY
 TO THE
 ORDER
 OF

NACOGDOCHES TRANSCRIPTION
 5284 WEST STATE HIGHWAY 7
 NACOGDOCHES, TX 75964

CALHOUN COUNTY AUDITOR

CALHOUN COUNTY TREASURER

⑈ 194866 ⑈ → ⑆ 1131 22655 ⑆

Lisa Trevino

From: rhonda kokena <rhonda.kokena@calhouncotx.org>
Sent: Monday, May 02, 2022 10:48 AM
To: Lisa Trevino
Subject: Re: FW: Invoice #7647

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.

Stop payment has been issued this date. You are clear to reissue.

Thank you.

RHONDA S. KOKENA
CALHOUN COUNTY TREASURER
202 S. ANN ST.
PORT LAVACA, TX . 77979
361-553-4619 phone
361-553-4614 fax

Enjoy the little things....For one day you will look back and realize
they were the big things.

From: "ltrevino@mmcpportlavaca.com (Lisa Trevino)" <ltrevino@mmcpportlavaca.com>
To: "rhonda.kokena@calhouncotx.org" <rhonda.kokena@calhouncotx.org>
Date: Thu, 28 Apr 2022 14:28:51 +0000
Subject: FW: Invoice #7647

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,

Nacogdoches Transcription has not received payment.
Please issue a stop payment on check # 194378 dated 3/30 in the amount of \$351.26.

Thank you,

Lisa M. Trevino
Accounts Payable
Memorial Medical Center
815 N Virginia St.
Port Lavaca, TX 77979
Ph: 361.552.0256

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
109706254	02/17/22	1,124.88			1,124.88
<i>#194063 VOIDED ; incorrect address</i>					
CHECK NO. 194867 05/02/22		TOTALS		TOTALS	
		1,124.88			1,124.88

MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

194867

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
109706254	02/17/22	1,124.88			1,124.88
CHECK NO. 194867		TOTALS		TOTALS	
		1,124.88			1,124.88

MEMORIAL
 MEDICAL  CENTER

Operating
 815 N. Virginia St.
 Port Lavaca, TX 77979

PROSPERITY BANK

88-2265
 1131

194867

B1220 194867
 DATE AMOUNT
 05/02/22 \$1,124.88

One Thousand One Hundred Twenty-Four Dollars and Eighty-Eight Cents

PAY TO THE ORDER OF
 BECKMAN COULTER INC
 DEPT CH 10164
 PALATINE, IL 60055-0164

CALHOUN COUNTY AUDITOR

CALHOUN COUNTY TREASURER

⑈ 194867 ⑈ +⑈ 113122655⑈

8

RUN DATE:05/02/22
TIME:14:14

MEMORIAL MEDICAL CENTER
CHECK REGISTER
05/02/22 THRU 05/02/22

PAGE 1
GLCKREG

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

A/P * 194063 05/02/22 1,124.88CR BECKMAN COULTER CAPITAL
A/P * 194378 05/02/22 351.26CR NACOGDOCHES TRANSCRIPTION
A/P 194866 05/02/22 351.26 NACOGDOCHES TRANSCRIPTION
A/P 194867 05/02/22 1,124.88 BECKMAN COULTER INC
TOTALS: .00