

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---June 29, 2022

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 492,767.71
TOTAL TRANSFERS BETWEEN FUNDS	\$ 941,710.49
TOTAL NURSING HOME UPL EXPENSES	\$ 1,328,748.62
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED June 29, 2022	\$ 2,763,226.82

APPROVED

JUN 29 2022

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---June 29, 2022

PAYABLES AND PAYROLL

6/23/2022 Weekly Payables	444,161.75
6/23/2022 Patient Refunds	2,660.00
6/23/2022 Stryker Communications-surgical table	39,334.42
6/27/2022 McKesson-340B Prescription Expense	5,607.97
6/27/2022 Amerisource Bergen-340B Prescription Expense	766.19

Prosperity Electronic Bank Payments

6/21-6/24/22 Pay Plus-Patient Claims Processing Fee	237.38
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TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS **\$ 492,767.71**

TRANSFERS BETWEEN FUNDS-MMC

6/27/2022 Transfer from Money Market Account to MMC Operating	760,000.00
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TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

6/23/2022 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	82,356.26
6/23/2022 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating	35,723.92
6/23/2022 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	40,189.30
6/23/2022 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	23,441.01

TOTAL TRANSFERS BETWEEN FUNDS **\$ 941,710.49**

NURSING HOME UPL EXPENSES

6/27/2022 Nursing Home UPL-Cantex Transfer	797,472.05
6/27/2022 Nursing Home UPL-Nexion Transfer	111,820.75
6/27/2022 Nursing Home UPL-Tuscany Transfer	133,220.96
6/27/2022 Nursing Home UPL-HSL Transfer	286,234.86

TOTAL NURSING HOME UPL EXPENSES **\$ 1,328,748.62**

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

GRAND TOTAL DISBURSEMENTS APPROVED June 29, 2022 **\$ 2,763,226.82**

RECEIVED BY THE
COUNTY AUDITOR ON

JUN 23 2022

06/23/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

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AP Open Invoice List

ap_open_invoice.template

Due Dates Through: 07/14/2022

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	
165991 ✓		06/21/20	06/14/20	07/09/20			349.99	0.00	0.00	349.99 ✓	
	DRILL										
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net	
	11283 ACE HARDWARE 15521						349.99	0.00	0.00	349.99	
10958	ALLYSON SWOPE										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
062222		06/23/20	06/22/20	06/29/20			2,331.00	0.00	0.00	2,331.00 ✓	
	TRANSCRIPTION SERV (#208702-210075)										
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net	
	10958 ALLYSON SWOPE						2,331.00	0.00	0.00	2,331.00	
A1360	AMERISOURCEBERGEN DRUG CORP ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
3096280536 ✓		06/20/20	06/15/20	06/21/20			26,000.00	0.00	0.00	26,000.00 ✓	
	INVENTORY										
3096292150 ✓		06/20/20	06/16/20	06/22/20			53.82	0.00	0.00	53.82 ✓	
	INVENTORY										
3096291569 ✓		06/20/20	06/16/20	06/22/20			13.54	0.00	0.00	13.54 ✓	
	INVENTORY										
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net	
	A1360 AMERISOURCEBERGEN DRUG CORP						26,067.36	0.00	0.00	26,067.36	
A2150	ANNOUNCEMENTS PLUS TOO AGAIN ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
728 ✓		06/21/20	06/01/20	06/11/20			40.00	0.00	0.00	40.00 ✓	
	PARKIN SIGN										
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net	
	A2150 ANNOUNCEMENTS PLUS TOO AGAIN						40.00	0.00	0.00	40.00	
14088	AZALEA HEALTH ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
75210 ✓		06/22/20	06/01/20	06/01/20			550.00	0.00	0.00	550.00 ✓	
	MONTHLY PROCESSING										
Vendor Totals	Number Name						Gross	Discount	No-Pay	Net	
	14088 AZALEA HEALTH						550.00	0.00	0.00	550.00	
B1220	BECKMAN COULTER INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
5458924 ✓		06/20/20	06/13/20	07/01/20			5,016.58	0.00	0.00	5,016.58 ✓	
	LEASE										
109955105 ✓		06/20/20	06/14/20	07/01/20			77.25	0.00	0.00	77.25 ✓	
	SUPPLIES										
109957641 ✓		06/20/20	06/15/20	07/01/20			1,236.00	0.00	0.00	1,236.00 ✓	
	SUPPLIES										

109957235 ✓		06/20/20	06/15/20	07/01/20			1,288.45	0.00	0.00	1,288.45 ✓		
	LEASE											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC						7,618.28	0.00	0.00	7,618.28	
Vendor#	Vendor Name		Class		Pay Code							
14753	BIOMERIEUX, INC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
1212777186 ✓		06/20/20	04/12/20	05/12/20			41,202.14	0.00	0.00	41,202.14 ✓		
	SUPPLIES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	14753	BIOMERIEUX, INC						41,202.14	0.00	0.00	41,202.14	
Vendor#	Vendor Name		Class		Pay Code							
13264	CERVEY, LLC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
16573 ✓		06/20/20	06/13/20	07/01/20			1,699.00	0.00	0.00	1,699.00 ✓		
	MONTHLY LICENSING FEE											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	13264	CERVEY, LLC						1,699.00	0.00	0.00	1,699.00	
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		
OE348531 ✓		06/20/20	06/09/20	06/19/20			415.00	0.00	0.00	415.00 ✓		
	SOLAR SHADES ICU											
OE348581 ✓		06/20/20	06/09/20	06/19/20			966.06	0.00	0.00	966.06 ✓		
	SHADES											
OE348521 ✓		06/20/20	06/09/20	06/19/20			6,741.22	0.00	0.00	6,741.22 ✓		
	SOLAR SHADES/MED SURG											
OE348551 ✓		06/20/20	06/09/20	06/19/20			1,225.00	0.00	0.00	1,225.00 ✓		
	SOLAR SHADES											
OE348541 ✓		06/20/20	06/09/20	06/19/20			1,584.00	0.00	0.00	1,584.00 ✓		
	BLINDS -ICU											
OEQT198001 ✓		06/23/20	06/09/20	06/19/20			49,555.29	0.00	0.00	49,555.29 ✓		
	GUEST CHAIRS- <i>waiting room seating - Main and clinic</i>											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	C1166	COASTAL OFFICE SOLUTIONS						60,486.57	0.00	0.00	60,486.57	
Vendor#	Vendor Name		Class		Pay Code							
13336	COCA COLA SOUTHWEST BEVERAGES ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
24176200459 ✓		06/23/20	05/25/20	06/24/20			332.48	0.00	0.00	332.48 ✓		
	DRINKS											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	13336	COCA COLA SOUTHWEST BEVERAGES						332.48	0.00	0.00	332.48	
Vendor#	Vendor Name		Class		Pay Code							
10368	DEWITT POTTH & SON ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
6840961 ✓		06/20/20	06/07/20	07/02/20			42.09	0.00	0.00	42.09 ✓		
	SUPPLIES											
6844850 ✓		06/20/20	06/09/20	07/04/20			125.64	0.00	0.00	125.64 ✓		
	SUPPLIES											
6844810 ✓		06/20/20	06/09/20	07/04/20			297.36	0.00	0.00	297.36 ✓		
	SUPPLIES											

6848760	✓		06/21/20	06/14/20	07/09/20		27.64	0.00	0.00	27.64	✓	
		SUPPLIES										
6848780	✓		06/21/20	06/14/20	07/09/20		87.43	0.00	0.00	87.43	✓	
		SUPPLIES										
6848310	✓		06/21/20	06/14/20	07/09/20		893.45	0.00	0.00	893.45	✓	
		SUPPLIES										
6848761	✓		06/21/20	06/15/20	07/10/20		14.23	0.00	0.00	14.23	✓	
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			10368	DEWITT POTH & SON			1,487.84	0.00	0.00	1,487.84		
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		
MMC061522	✓	06/22/20	06/15/20	06/16/20			124,745.34	0.00	0.00	124,745.34	✓	
	PHYSICIAN SERVICES JUNE 1-15											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			10789	DISCOVERY MEDICAL NETWORK INC			124,745.34	0.00	0.00	124,745.34		
Vendor#	Vendor Name		Class		Pay Code							
12488	DURFOLD CORPORATION		✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
IN9152		06/23/20	06/03/20	07/03/20			38,974.35	0.00	0.00	38,974.35	✓	
	(10) SLEEPER RECLINER and sleeper chairs (22)											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			12488	DURFOLD CORPORATION			38,974.35	0.00	0.00	38,974.35		
Vendor#	Vendor Name		Class		Pay Code							
C2510	EVIDENT		✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
A2206061378	✓	06/20/20	06/06/20	07/01/20			21,426.00	0.00	0.00	21,426.00	✓	
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			C2510	EVIDENT			21,426.00	0.00	0.00	21,426.00		
Vendor#	Vendor Name		Class		Pay Code							
10689	FASTHEALTH CORPORATION		✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
06A22MMC	✓	06/20/20	06/01/20	06/16/20			495.00	0.00	0.00	495.00	✓	
	WEBSITE											
06B22MMC	✓	06/20/20	06/01/20	06/16/20			1,095.00	0.00	0.00	1,095.00	✓	
	2022 SEC ENCRYPTION											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			10689	FASTHEALTH CORPORATION			1,590.00	0.00	0.00	1,590.00		
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		
776856851	✓	06/20/20	05/26/20	06/20/20			26.85	0.00	0.00	26.85	✓	
	FREIGHT											
778280309	✓	06/20/20	06/09/20	07/04/20			11.29	0.00	0.00	11.29	✓	
	FREIGHT											
777564160	✓	06/20/20	06/09/20	07/04/20			121.12	0.00	0.00	121.12	✓	
	FREIGHT											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			F1100	FEDERAL EXPRESS CORP.			159.26	0.00	0.00	159.26		

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		
3462022 ✓		06/20/20	06/06/20	07/01/20		9.72	0.00	0.00	9.72 ✓		
	SUPPLIES										
3462023 ✓		06/20/20	06/06/20	07/01/20		397.46	0.00	0.00	397.46 ✓		
	SUPPLIES										
3507457 ✓		06/20/20	06/07/20	07/02/20		650.48	0.00	0.00	650.48 ✓		
	SUPPLIES										
3507459 ✓		06/20/20	06/07/20	07/02/20		393.75	0.00	0.00	393.75 ✓		
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						F1400	FISHER HEALTHCARE	1,451.41	0.00	0.00	1,451.41
Vendor#	Vendor Name	Class	Pay Code								
10653	GLOBAL EQUIPMENT CO. INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
119237487 ✓		06/20/20	06/13/20	07/01/20		18.75	0.00	0.00	18.75 ✓		
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10653	GLOBAL EQUIPMENT CO. INC.	18.75	0.00	0.00	18.75
Vendor#	Vendor Name	Class	Pay Code								
W1300	GRAINGER ✓	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9335963121 ✓		06/21/20	06/07/20	07/02/20		13.05	0.00	0.00	13.05 ✓		
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						W1300	GRAINGER	13.05	0.00	0.00	13.05
Vendor#	Vendor Name	Class	Pay Code								
G1210	GULF COAST PAPER COMPANY ✓	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
2245244 ✓		06/20/20	06/07/20	07/07/20		803.69	0.00	0.00	803.69 ✓		
	SUPPLIES										
2246138 ✓		06/20/20	06/08/20	07/08/20		99.80	0.00	0.00	99.80 ✓		
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						G1210	GULF COAST PAPER COMPANY	903.49	0.00	0.00	903.49
Vendor#	Vendor Name	Class	Pay Code								
11552	HEALTHCARE FINANCIAL SERVICES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
100625295 ✓		06/22/20	06/01/20	07/01/20		7,154.17	0.00	0.00	7,154.17 ✓		
	JULY 22 LEASE										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11552	HEALTHCARE FINANCIAL SERVICES	7,154.17	0.00	0.00	7,154.17
Vendor#	Vendor Name	Class	Pay Code								
12932	INTRADO ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
646660 ✓		06/22/20	05/31/20	06/30/20		748.91	0.00	0.00	748.91 ✓		
274877	HOUSE CALLS										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12932	INTRADO	748.91	0.00	0.00	748.91

11200	IRON MOUNTAIN ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
DJJP574 ✓		06/20/20	01/31/20	02/28/20		1,055.41	0.00	0.00	1,055.41 ✓	
	SHREDD SERVICES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11200 IRON MOUNTAIN					1,055.41	0.00	0.00	1,055.41	
Vendor#	Vendor Name					Class	Pay Code			
J0150	J & J HEALTH CARE SYSTEMS, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
929818401 ✓		06/15/20	06/14/20	07/14/20		955.84	0.00	0.00	955.84 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	J0150 J & J HEALTH CARE SYSTEMS, INC					955.84	0.00	0.00	955.84	
Vendor#	Vendor Name					Class	Pay Code			
14436	JUAN CARDENAS TRUCKING ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
543713 ✓		06/21/20	06/09/20	06/14/20		14.00	0.00	0.00	14.00 ✓	
	1 YD/SAND									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	14436 JUAN CARDENAS TRUCKING					14.00	0.00	0.00	14.00	
Vendor#	Vendor Name					Class	Pay Code			
10972	M G TRUST ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
061822		06/20/20	06/18/20	07/01/20		640.86	0.00	0.00	640.86 ✓	
	PAYROLL DEDUCT									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	10972 M G TRUST					640.86	0.00	0.00	640.86	
Vendor#	Vendor Name					Class	Pay Code			
14488	MARTINA CORTEZ ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
003251		06/20/20	06/20/20	06/25/20		574.98	0.00	0.00	574.98 ✓	
	EMPLOYEE HEADSHOTS									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	14488 MARTINA CORTEZ					574.98	0.00	0.00	574.98	
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	
19491847 ✓		06/15/20	06/14/20	06/29/20		261.48	0.00	0.00	261.48 ✓	
	SUPPLIES									
19481278 ✓		06/20/20	06/10/20	06/25/20		771.17	0.00	0.00	771.17 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	M2178 MCKESSON MEDICAL SURGICAL INC					1,032.65	0.00	0.00	1,032.65	
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	
2213018784 ✓		06/20/20	05/27/20	06/21/20		4,230.87	0.00	0.00	4,230.87 ✓	
	SUPPLIES									
2214471078 ✓		06/21/20	06/08/20	07/03/20		394.79	0.00	0.00	394.79 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	M2470 MEDLINE INDUSTRIES INC					4,625.66	0.00	0.00	4,625.66	

	M2470	MEDLINE INDUSTRIES INC					4,625.66	0.00	0.00	4,625.66
Vendor#	Vendor Name		Class		Pay Code					
10963	MEMORIAL MEDICAL CLINIC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
061822		06/20/20	06/18/20	07/01/20			155.00	0.00	0.00	155.00 ✓
	PAYROLL DEDUCT									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10963	MEMORIAL MEDICAL CLINIC					155.00	0.00	0.00	155.00
Vendor#	Vendor Name		Class		Pay Code					
14472	MK ULTRA PAINTING ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
4055 ✓		06/20/20	06/10/20	06/20/20			1,650.00	0.00	0.00	1,650.00 ✓
	PRESSURE WASH/PAINT									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	14472	MK ULTRA PAINTING					1,650.00	0.00	0.00	1,650.00
Vendor#	Vendor Name		Class		Pay Code					
M2621	MMC AUXILIARY GIFT SHOP ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
061622		06/20/20	06/16/20	06/30/20			288.63	0.00	0.00	288.63 ✓
	PAYROLL DEDUCT									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP					288.63	0.00	0.00	288.63
Vendor#	Vendor Name		Class		Pay Code					
10536	MORRIS & DICKSON CO, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
8323137 ✓		06/20/20	06/15/20	06/25/20			97.03	0.00	0.00	97.03 ✓
	INVENTORY									
8323552 ✓		06/20/20	06/15/20	06/25/20			422.77	0.00	0.00	422.77 ✓
	INVENTORY									
0415 ✓		06/20/20	06/15/20	06/25/20			-2,004.18	0.00	0.00	-2,004.18 ✓
	CREDIT									
8322062 ✓		06/20/20	06/15/20	06/25/20			57.21	0.00	0.00	57.21 ✓
	INVENTORY									
8323138 ✓		06/20/20	06/15/20	06/25/20			255.61	0.00	0.00	255.61 ✓
	INVENTORY									
8323553 ✓		06/20/20	06/15/20	06/25/20			465.95	0.00	0.00	465.95 ✓
	INVENTORY									
8323313 ✓		06/20/20	06/15/20	06/25/20			1,718.12	0.00	0.00	1,718.12 ✓
	INVENTORY									
8324823 ✓		06/20/20	06/15/20	06/25/20			0.19	0.00	0.00	0.19 ✓
	INVENTORY									
8323422 ✓		06/20/20	06/15/20	06/25/20			1,113.76	0.00	0.00	1,113.76 ✓
	INVENTORY									
0472 ✓		06/20/20	06/15/20	06/25/20			-92.94	0.00	0.00	-92.94 ✓
	CREDIT									
8323312 ✓		06/20/20	06/15/20	06/25/20			35.01	0.00	0.00	35.01 ✓
	INVENTORY									
8329953 ✓		06/20/20	06/16/20	06/26/20			15.86	0.00	0.00	15.86 ✓
	INVENTORY									
8329955 ✓		06/20/20	06/16/20	06/26/20			40.75	0.00	0.00	40.75 ✓
	INVENTORY									

8329954	✓		06/20/20	06/16/20	06/26/20		2,779.70	0.00	0.00	2,779.70	✓	
		INVENTORY										
CM47424	✓		06/20/20	06/17/20	06/27/20		-138.29	0.00	0.00	-138.29	✓	
		CREDIT										
8334456	✓		06/20/20	06/19/20	06/29/20		206.51	0.00	0.00	206.51	✓	
		INVENTORY										
8336418	✓		06/20/20	06/19/20	06/29/20		450.07	0.00	0.00	450.07	✓	
		INVENTORY										
8336419	✓		06/20/20	06/19/20	06/29/20		946.33	0.00	0.00	946.33	✓	
		INVENTORY										
8334457	✓		06/20/20	06/19/20	06/29/20		221.95	0.00	0.00	221.95	✓	
		INVENTORY										
8334459	✓		06/20/20	06/19/20	06/29/20		9.15	0.00	0.00	9.15	✓	
		INVENTORY										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10536	MORRIS & DICKSON CO, LLC	6,600.56	0.00	0.00	6,600.56
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		
7740		06/20/20	06/16/20	06/26/20			281.68	0.00	0.00	281.68	✓	
	TRANSCRIPTON SERVICES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							13548	NACOGDOCHES TRANSCRIPTION	281.68	0.00	0.00	281.68
Vendor#	Vendor Name				Class	Pay Code						
00920	OFFICE DEPOT											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
245899810001		06/20/20	05/18/20	06/20/20			403.33	0.00	0.00	403.33	✓	
	SUPPLIES											
245899813001		06/20/20	05/23/20	06/20/20			289.99	0.00	0.00	289.99	✓	
	SUPPLIES											
245348166001		06/20/20	05/27/20	06/20/20			289.99	0.00	0.00	289.99	✓	
	SUPPLIES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							00920	OFFICE DEPOT	983.31	0.00	0.00	983.31
Vendor#	Vendor Name				Class	Pay Code						
14252	OLOOP TECHNOLOGY SOLUTIONS											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
INVAJONES0027		06/20/20	06/09/20	07/01/20			6,098.25	0.00	0.00	6,098.25	✓	
	TRAVEL NURSE STAFFING (5/20-5/26/22) JONES											
INVAJONES0028		06/20/20	06/09/20	07/01/20			6,228.00	0.00	0.00	6,228.00	✓	
	TRAVEL NURSE STAFFING (5/27-6/2/22) JONES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							14252	OLOOP TECHNOLOGY SOLUTIONS	12,326.25	0.00	0.00	12,326.25
Vendor#	Vendor Name				Class	Pay Code						
01500	OLYMPUS AMERICA INC				M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
32718357		05/31/20	05/26/20	06/26/20			97.26	0.00	0.00	97.26	✓	
	SUPPLIES											
32783955		06/21/20	06/09/20	07/04/20			194.03	0.00	0.00	194.03	✓	
	SUPPLIES											
32783956A		06/23/20	06/09/20	07/04/20			256.94	0.00	0.00	256.94	✓	

SUPPLIES

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
	O1500	OLYMPUS AMERICA INC								548.23	0.00	0.00	548.23
S0905	PERFORMANCE HEALTH	M											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net				
IN95215485		06/21/20	06/07/20	07/02/20		22.05	0.00	0.00	22.05				
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
	S0905	PERFORMANCE HEALTH				22.05	0.00	0.00	22.05				
P1800	PITNEY BOWES INC	W											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net				
0015036792		06/20/20	06/02/20	07/02/20		106.39	0.00	0.00	106.39				
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
	P1800	PITNEY BOWES INC				634.03	0.00	0.00	634.03				
12708	POC ELECTRIC, LLC												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net				
3559		06/21/20	06/15/20	06/20/20		275.00	0.00	0.00	275.00				
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
	12708	POC ELECTRIC, LLC				275.00	0.00	0.00	275.00				
12480	PRO ENERGY PARTNERS LP												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net				
22050600		06/21/20	05/31/20	06/15/20		4,021.94	0.00	0.00	4,021.94				
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
	12480	PRO ENERGY PARTNERS LP				4,021.94	0.00	0.00	4,021.94				
10896	QIAGEN INC												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net				
998350765		06/21/20	06/09/20	07/09/20		1,634.28	0.00	0.00	1,634.28				
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
	10896	QIAGEN INC				1,634.28	0.00	0.00	1,634.28				
10625	SARA RUBIO												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net				
061722		06/20/20	06/17/20	07/01/20		64.00	0.00	0.00	64.00				
Vendor Totals				Number	Name					Gross	Discount	No-Pay	Net
	10625	SARA RUBIO				64.00	0.00	0.00	64.00				
10699	SIGN AD, LTD.												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net				
275197		06/20/20	06/01/20	06/11/20		400.00	0.00	0.00	400.00				

ADVERTISING

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
10699	SIGN AD, LTD.			400.00	0.00	0.00	400.00		
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net		
11296	SOUTH TEXAS BLOOD & TISSUE CEN			5,464.00	0.00	0.00	5,464.00		
Vendor#	Vendor Name	Class	Pay Code						
11296	SOUTH TEXAS BLOOD & TISSUE CEN								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
I07023380	BLOOD	06/20/20	06/15/20	07/10/20		9,019.00	0.00	0.00	9,019.00
CM7165	CREDIT	06/20/20	06/15/20	07/10/20		-3,555.00	0.00	0.00	-3,555.00
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net		
11296	SOUTH TEXAS BLOOD & TISSUE CEN			5,464.00	0.00	0.00	5,464.00		
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
JULY16MMC22	CFO STAFFING FEES - 6/1/19-7/1/19 + Expenses Richardson	06/20/20	06/20/20	07/07/20		25,866.00	0.00	0.00	25,866.00
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net		
14148	SPECTRUM HEALTH PARTNERS, LLC			25,866.00	0.00	0.00	25,866.00		
Vendor#	Vendor Name	Class	Pay Code						
13528	STRYKER FLEX FINANCIAL								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
253546	LEASE	06/22/20	06/14/20	07/14/20		1,294.26	0.00	0.00	1,294.26
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net		
13528	STRYKER FLEX FINANCIAL			1,294.26	0.00	0.00	1,294.26		
Vendor#	Vendor Name	Class	Pay Code						
S2830	STRYKER SALES CORP	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
920568027	SUPPLIES	06/21/20	06/08/20	06/21/20		730.36	0.00	0.00	730.36
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net		
S2830	STRYKER SALES CORP			730.36	0.00	0.00	730.36		
Vendor#	Vendor Name	Class	Pay Code						
11039	THE BRATTON FIRM								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
062122	SERVICES	06/22/20	06/21/20	07/01/20		1,242.57	0.00	0.00	1,242.57
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net		
11039	THE BRATTON FIRM			1,242.57	0.00	0.00	1,242.57		
Vendor#	Vendor Name	Class	Pay Code						
10985	THE COMPLIANCE TEAM, INC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
00032939	ACCREDITATION CONTRACT	06/20/20	06/09/20	06/09/20		3,600.00	0.00	0.00	3,600.00
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net		
10985	THE COMPLIANCE TEAM, INC			3,600.00	0.00	0.00	3,600.00		
Vendor#	Vendor Name	Class	Pay Code						
13616	TRIOSE, INC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
TRI116683		06/20/20	06/03/20	06/18/20		953.83	0.00	0.00	953.83

FREIGHT

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		13616	TRIOSE, INC			953.83	0.00	0.00	953.83
Vendor#	Vendor Name			Class	Pay Code				
14208	TRUSTED HEALTH, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV10127 ✓		06/22/20	05/21/20	06/21/20		5,657.50	0.00	0.00	5,657.50 ✓
INV10515 ✓	TRAVEL NURSE STAFFING	06/22/20	06/11/20	07/11/20		5,580.00	0.00	0.00	5,580.00 ✓
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		14208	TRUSTED HEALTH, INC			11,237.50	0.00	0.00	11,237.50
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
8400396930 ✓	LAUNDRY	06/14/20	06/13/20	07/08/20		2,457.74	0.00	0.00	2,457.74 ✓
8400396907 ✓	LAUNDRY	06/14/20	06/13/20	07/08/20		59.82	0.00	0.00	59.82 ✓
8400396906 ✓	LAUNDRY	06/14/20	06/13/20	07/08/20		48.15	0.00	0.00	48.15 ✓
8400396705 ✓	LAUNDRY	06/20/20	06/09/20	07/04/20		280.12	0.00	0.00	280.12 ✓
8400396742 ✓	LAUNDRY	06/20/20	06/09/20	07/04/20		148.43	0.00	0.00	148.43 ✓
8400397263 ✓	LAUNDRY	06/20/20	06/16/20	07/01/20		99.57	0.00	0.00	99.57 ✓
8400397226 ✓	LAUNDRY	06/21/20	06/16/20	07/01/20		194.37	0.00	0.00	194.37 ✓
8400397242 ✓	LAUNDRY	06/21/20	06/16/20	07/01/20		83.90	0.00	0.00	83.90 ✓
8400397223 ✓	LAUNDRY	06/21/20	06/16/20	07/01/20		41.41	0.00	0.00	41.41 ✓
8400397227 ✓	LAUNDRY	06/21/20	06/16/20	07/01/20		208.13	0.00	0.00	208.13 ✓
8400397224 ✓	LAUNDRY	06/21/20	06/16/20	07/01/20		201.59	0.00	0.00	201.59 ✓
8400397438 ✓	LAUNDRY	06/21/20	06/20/20	07/01/20		48.15	0.00	0.00	48.15 ✓
8400397249 ✓	LAUNDRY	06/21/20	06/20/20	07/01/20		1,429.58	0.00	0.00	1,429.58 ✓
8400397463 ✓	LAUNDRY	06/21/20	06/20/20	07/01/20		2,295.05	0.00	0.00	2,295.05 ✓
8400397439 ✓	LAUNDRY	06/21/20	06/20/20	07/01/20		59.82	0.00	0.00	59.82 ✓
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		U1064	UNIFIRST HOLDINGS INC			7,655.83	0.00	0.00	7,655.83
Vendor#	Vendor Name			Class	Pay Code				
U2000	US POSTAL SERVICE ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
062022	BOX 25	06/22/20	06/20/20	06/30/20		1,352.00	0.00	0.00	1,352.00 ✓

ANNUAL RENEWAL												
062122			06/22/20	06/21/20	06/30/20		2,200.00	0.00	0.00	2,200.00 ✓		
POSTAGE												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							U2000	US POSTAL SERVICE	3,552.00	0.00	0.00	3,552.00
Vendor#	Vendor Name		Class		Pay Code							
V0554	VCS SECURITY SYSTEMS ✓		W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
245261 ✓		06/20/20	06/10/20	07/01/20			552.50	0.00	0.00	552.50 ✓		
SERVICE CALL DVR CAMERA												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							V0554	VCS SECURITY SYSTEMS	552.50	0.00	0.00	552.50
Vendor#	Vendor Name		Class		Pay Code							
12208	WAGeworks ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
INV3881413 ✓		06/20/20	06/15/20	07/01/20			496.25	0.00	0.00	496.25 ✓		
MAY 22 ADMIN/COMPLIANCE												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							12208	WAGeworks	496.25	0.00	0.00	496.25
Vendor#	Vendor Name		Class		Pay Code							
10793	WAGeworks, INC. ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
061622		06/20/20	06/16/20	07/01/20			3,382.90	0.00	0.00	3,382.90 ✓		
PAYROLL DEDUCT												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10793	WAGeworks, INC.	3,382.90	0.00	0.00	3,382.90

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	444,161.75	0.00	0.00	444,161.75

APPROVED ON

JUN 23 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 195463-199521

RECEIVED BY THE
COUNTY AUDITOR ON

RUN DATE: 6/8/2022
TIME: 11:52

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1
APCDEDIT

CALHOUN COUNTY, TEXAS

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM	

		062222	2660.00	2		REFUND FOR		

	ARID=0001	TOTAL	2660.00					

TOTAL			2660.00					

APPROVED ON

JUN 23 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck # 19524

RECEIVED BY THE
COUNTY AUDITOR ON

JUN 23 2022

06/23/2022

CALHOUN COUNTY, TEXAS

15:50

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

14300 STRYKER COMMUNICATIONS ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
25021910F	✓	06/23/20	06/20/20	06/29/20		39,334.42	0.00	0.00	39,334.42

SURGICAL TABLE

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
	14300	STRYKER COMMUNICATIONS	39,334.42	0.00	0.00	39,334.42

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	39,334.42	0.00	0.00	39,334.42

APPROVED ON

JUN 23 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL# 195510

McKESSON

STATEMENT

As of: 06/24/2022

Page: 002

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

Company: 8000

DC: 8115

As of: 06/24/2022 Page: 002
Mail to: Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory:

Customer: 632536
Date: 06/25/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 06/25/2022 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: 5,722.42 USD

Future Due: 0.00

If Paid By 06/28/2022,
Pay This Amount:

5,607.97 USD

Due If Paid On Time:
USD

5,607.97

Past Due: 0.00

Disc lost if paid late:

114.45

Last Payment 2,451.97
08/07/2017

If Paid After 06/28/2022,
Pay this Amount:

5,722.42 USD

Due If Paid Late:
USD

5,722.42

34.53 +
5,255.90 +
315.69 +
1.85 +
5,607.97 *

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 06/24/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 06/24/2022
Mail to:

Page: 001
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 7790

Customer: 190813
Date: 06/25/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 06/25/2022 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											
06/22/2022	06/28/2022	7349686954	2017054524	115Invoice	0.70	35.23		34.53	✓	7349686954	

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: 35.23 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 06/20/2022 2,833.14

If Paid By 06/28/2022,
Pay This Amount: 34.53 USD

If Paid After 06/28/2022,
Pay this Amount: 35.23 USD

Due If Paid On Time: USD 34.53 ✓
Disc lost if paid late: 0.70
Due If Paid Late: USD 35.23

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 06/24/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 06/24/2022
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: 06/25/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 06/25/2022 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 256342 WALMART 1098/MEM MED PHS											
06/20/2022	06/28/2022	7349140724	37260940	115Invoice	5.80	289.92		284.12 ✓		7349140724	
06/20/2022	06/28/2022	7349339959	0617220824	115Invoice	7.89	394.50		386.61 ✓		7349339959	
06/21/2022	06/28/2022	7349424957	8927809716	115Invoice	4.36	218.09		213.73 ✓		7349424957	
06/22/2022	06/28/2022	7349679778	37545526	115Invoice	1.77	88.32		86.55 ✓		7349679778	
06/22/2022	06/28/2022	7349839254	0621220724	195Invoice	1.09	54.67		53.58 ✓		7349839254	
06/22/2022	06/28/2022	7349839255	0621220924	115Invoice	2.04	102.08		100.04 ✓		7349839255	
06/23/2022	06/28/2022	7349953745	37662615	115Invoice	11.54	576.83		565.29 ✓		7349953745	
06/23/2022	06/28/2022	7349953746	37662615	115Invoice	0.02	0.78		0.76 ✓		7349953746	
06/23/2022	06/28/2022	7349953747	37725909	115Invoice	1.22	61.11		59.89 ✓		7349953747	
06/23/2022	06/28/2022	7349953748	37725909	115Invoice	8.43	421.59		413.16 ✓		7349953748	
06/23/2022	06/28/2022	7350101675	0622220918	115Invoice	37.83	1,891.43		1,853.60 ✓		7350101675	
06/24/2022	06/28/2022	7350199497	37771449	115Invoice	23.09	1,154.67		1,131.58 ✓		7350199497	
06/24/2022	06/28/2022	7350199498	37771449	115Invoice	1.39	69.63		68.24 ✓		7350199498	
06/24/2022	06/28/2022	7350199499	37835143	115Invoice		0.18		0.18 ✓		7350199499	
06/24/2022	06/28/2022	7350346541	0623220818	115Invoice	0.79	39.36		38.57 ✓		7350346541	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 5,363.16 USD

Future Due: 0.00

If Paid By 06/28/2022,

Due If Paid On Time:

Past Due: 0.00

Pay This Amount:

5,255.90 USD

USD 5,255.90 ✓

Disc lost if paid late:

Last Payment 06/20/2022 2,833.14

If Paid After 06/28/2022,
Pay this Amount:

5,363.16 USD

Due If Paid Late:
USD

107.26

5,363.16

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 06/24/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 06/24/2022
Mail to:

Page: 001
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 464450
Date: 06/25/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450 PLEASE CHECK ANY
Date: 06/25/2022 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											
06/21/2022	06/28/2022	7349425002	55x565015	115Invoice	0.04	2.04		2.00 ✓		7349425002	
06/22/2022	06/28/2022	7349685241	55x567817	115Invoice	4.85	242.26		237.41 ✓		7349685241	
06/24/2022	06/28/2022	7350179044	55x572610	115Invoice	0.05	2.52		2.47 ✓		7350179044	
06/24/2022	06/28/2022	7350179045	55x572814	115Invoice	1.51	75.32		73.81 ✓		7350179045	

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: 322.14 USD

Future Due: 0.00

If Paid By 06/28/2022,
Pay This Amount:

315.69 USD

Due If Paid On Time:
USD

315.69 ✓

Past Due: 0.00

Disc lost if paid late:

6.45

Last Payment 2,833.14
06/20/2022

If Paid After 06/28/2022,
Pay this Amount:

322.14 USD

Due If Paid Late:
USD

322.14

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 06/24/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 06/24/2022

Page: 001

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Mail to:

Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 835438

Date: 06/25/2022

Cust: 835438 PLEASE CHECK ANY
Date: 06/25/2022 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	
06/22/2022	06/28/2022	7349858437	CVS PHCY 7475/MEM MC PHS	632536 1747843	115Invoice	0.04	1.89		1.85 ✓		7349858437	

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: 1.89 USD

Future Due:	0.00	If Paid By 06/28/2022,	Due If Paid On Time:	
Past Due:	0.00	Pay This Amount:	USD	1.85 ✓
Last Payment	7,232.73	If Paid After 06/28/2022,	Disc lost if paid late:	0.04
06/13/2022		Pay this Amount:	Due If Paid Late:	
			USD	1.89

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Serviced By:
AMERISOURCEBERGEN DRUG CORP
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101

DEA: RA0289276
866-451-9655

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

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

Customer Number	
100135284 / 037028186	
Terms	
Sat - Fri Due in 7 days	
Summary	
Not Yet Due:	0.00
Current:	766.19
Past Due:	0.00
Total Due:	766.19
Account Balance:	766.19

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
06-20-2022	07-01-2022	3096692436	166364	Invoice	533.39		0.00	533.39 ✓
06-20-2022	07-01-2022	3096692437	166366	Invoice	150.14		0.00	150.14 ✓
06-20-2022	07-01-2022	3096724172	166413	Invoice	44.72		0.00	44.72 ✓
06-22-2022	07-01-2022	3097010082	166430	Invoice	17.29		0.00	17.29 ✓
06-23-2022	07-01-2022	3097152382	166442	Invoice	20.65		0.00	20.65 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
766.19	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
06-24-2022	(2,895.04)

Reminders	
Due Date	Amount
07-01-2022	766.19
Total Due:	766.19 ✓

APPROVED ON

JUN 27 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**



**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- JUNE 20, 2022 - June 26, 2022**

Pay Plus
3.32 +
190.77 +
4.06 +
39.23 +
237.38 +

Date	Bank Description	MMC Note:	Amount	CPSI "Handwritten" Check #
6/21/2022	WEBFILE TAX PYMT DD 902/06337635 21000025490	- Sales Tax	466,802.02	700070
6/21/2022	PAY PLUS ACHTRANS 452579291 101000699046403	- 3rd Party Payor Fee	1,421.02	300320
6/21/2022	MCKESSON DRUG AUTO ACH ACH05067383 910000172	- 340B Drug Program Expense	2,833.14	500310
6/22/2022	PAY PLUS ACHTRANS 452579291 101000690393761	- 3rd Party Payor Fee	190.77	300321
6/23/2022	STATE COMPTLR TEXNET 06406217/20622 2100002	-RAPPS IGT	81,141.22	110048
6/23/2022	PAY PLUS ACHTRANS 452579291 101000691464397	- 3rd Party Payor Fee	4.06	300322
6/24/2022	PAY PLUS ACHTRANS 452579291 101000692367070	- 3rd Party Payor Fee	39.23	300323
6/24/2022	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	2,895.04	500311
6/24/2022	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	373,171.72	
6/24/2022	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	-CitiBank Corporate Card Payment	5,102.50	300324
			237.38	
			466,802.02	

William Little, CFO
Memorial Medical Center

June 27, 2022

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

** Approved on 06-22-22 CC*
** * Approved on 06-13-22 CC*
(original amt approved for IGT was 85,446.92)

Date	Description	MMC Notes	Amount
7/6/2022	DSRIP IGT	-IGT PYMT	434,968.69
7/1/2022	DSH Pass 1 and Pass 2 IGT	-IGT Pymt	98,092.00
			98,092.00

William Little, CFO
Memorial Medical Center

June 27, 2022

**** included on 06-22-22 CC*

**APPROVED ON
JUN 27 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

MONEY MARKET
TRANSFER REQUEST

PAYEE Memorial Medical Center Operating

DATE REQUESTED 6/23/2022

APPROVED ON

JUN 27 2022

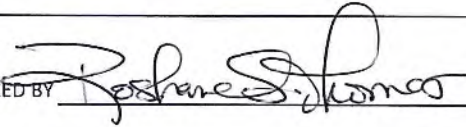
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS


AMOUNT \$760,000.00

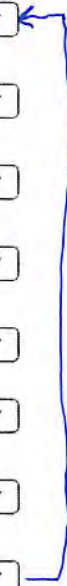
G/L NUMBER _____

EXPLANATION For liquidity purposes and increased working capital, a transfer of \$760,000.00 from Money Market Account (*2998)
to MMC Operating (*4357)

REQUESTED BY William Little

AUTHORIZED BY  6/23/22

<u>14357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$1,674,049.13	\$1,695,813.77	\$1,674,049.13	\$1,608,456.99	
<u>14373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.82	\$431.82	\$431.82	\$431.82	
<u>14381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$212,539.80	\$214,433.32	\$212,539.80	\$211,431.79	
<u>14403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$101,585.69	\$192,312.42	\$101,585.69	\$82,693.93	
<u>14411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$225,324.41	\$243,634.92	\$225,324.41	\$126,941.19	
<u>14446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$77,202.14	\$150,543.89	\$77,202.14	\$77,202.14	
<u>14438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$307,791.69	\$309,651.69	\$307,791.69	\$120,743.79	
<u>12998</u> MMC -MONEY MARKET FUND	\$760,479.01	\$760,479.01	\$760,479.01	\$760,479.01	
<u>15506</u> MMC -NH BETHANY SENIOR LIVING	\$422,826.08	\$435,541.56	\$422,826.08	\$264,422.25	
<u>15441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$43,360.52	\$44,960.52	\$43,360.52	\$43,360.52	
<u>15433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$39,110.89	\$39,110.89	\$39,110.89	\$35,936.57	
<u>13407</u> MMC -NH TUSCANY VILLAGE	\$235,952.09	\$237,384.26	\$235,952.09	\$217,450.74	



RECEIVED BY THE
COUNTY AUDITOR ON

JUN 23 2022

06/23/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE ✓								
060922		06/20/20	06/09/20	07/15/20		61,130.97	0.00	0.00	61,130.97 ✓
061022	TRANSFER <i>NH insurance pymt deposited to MMC operating</i>	06/22/20	06/10/20	07/15/20		10,845.43	0.00	0.00	10,845.43 ✓
061322	TRANSFER	06/22/20	06/13/20	07/15/20		993.89	0.00	0.00	993.89 ✓
061422A	TRANSFER	06/22/20	06/14/20	07/15/20		160.70	0.00	0.00	160.70 ✓
061422D	TRANSFER	06/22/20	06/14/20	07/15/20		3,950.00	0.00	0.00	3,950.00 ✓
061422C	TRANSFER	06/22/20	06/14/20	07/15/20		59.72	0.00	0.00	59.72 ✓
061422B	TRANSFER	06/22/20	06/14/20	07/15/20		636.89	0.00	0.00	636.89 ✓
061422E	TRANSFER	06/22/20	06/14/20	07/15/20		256.82	0.00	0.00	256.82 ✓
061422F	TRANSFER	06/22/20	06/14/20	07/15/20		3,950.00	0.00	0.00	3,950.00 ✓
061522	TRANSFER	06/22/20	06/15/20	07/15/20		371.84	0.00	0.00	371.84 ✓
Vendor Totals									
Number	Name					Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE					82,356.26	0.00	0.00	82,356.26

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	82,356.26	0.00	0.00	82,356.26

APPROVED ON

JUN 23 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK # 195523

06/23/2022
 11:42
 MEMORIAL MEDICAL CENTER
 AP Open Invoice List
 Dates Through:
 0
 ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
12696	GULF POINTE PLAZA ✓			060922		06/20/20	06/09/20	07/15/20		7,339.28	0.00	0.00	7,339.28 ✓		
				061022	TRANSFER NH insurance pymt deposited into MMC operating	06/22/20	06/10/20	07/15/20		15,054.14	0.00	0.00	15,054.14 ✓		
				061322	TRANSFER "	06/22/20	06/13/20	07/15/20		3,162.60	0.00	0.00	3,162.60 ✓		
				061422	TRANSFER "	06/22/20	06/14/20	07/15/20		10,167.90	0.00	0.00	10,167.90 ✓		
					TRANSFER "										
Vendor Totals:										Number	Name	Gross	Discount	No-Pay	Net
										12696	GULF POINTE PLAZA	35,723.92	0.00	0.00	35,723.92

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	35,723.92	0.00	0.00	35,723.92

APPROVED ON
 JUN 23 2022
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS
 CLK# 19524

RECEIVED BY THE
COUNTY AUDITOR ON

JUN 23 2022

11:41

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
060922		06/20/20	06/09/20	07/15/20		2,723.00	0.00	0.00	2,723.00 ✓		
	TRANSFER	<i>NA insurance pymt deposited into mmlc operating</i>									
061022		06/22/20	06/10/20	07/15/20		9,637.80	0.00	0.00	9,637.80 ✓		
	TRANSFER	"									
061022A		06/22/20	06/10/20	07/15/20		4,668.00	0.00	0.00	4,668.00 ✓		
	TRANSFER	"									
061322		06/22/20	06/13/20	07/15/20		3,951.00	0.00	0.00	3,951.00 ✓		
	TRANSFER	"									
061422A		06/22/20	06/14/20	07/15/20		1,133.84	0.00	0.00	1,133.84 ✓		
	TRANSFER	"									
061522		06/22/20	06/15/20	07/15/20		6,878.60	0.00	0.00	6,878.60 ✓		
	TRANSFER	"									
061522A		06/22/20	06/15/20	07/15/20		878.00	0.00	0.00	878.00 ✓		
	TRANSFER	"									
060922A		06/23/20	06/09/20	07/15/20		10,319.06	0.00	0.00	10,319.06 ✓		
	TRANSFER	"									
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						13004	TUSCANY VILLAGE	40,189.30	0.00	0.00	40,189.30

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	40,189.30	0.00	0.00	40,189.30

APPROVED ON

JUN 23 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL #195525

RECEIVED BY THE COUNTY AUDITOR ON

06/23/2022
JUN 23 2022
11:45

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name
12792 BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
060922		06/22/20	06/09/20	07/15/20		18,296.46	0.00	0.00	18,296.46 ✓		
061022	TRANSFER	06/22/20	06/10/20	07/15/20		138.52	0.00	0.00	138.52 ✓		
061022A	TRANSFER	06/22/20	06/10/20	07/15/20		579.10	0.00	0.00	579.10 ✓		
061422A	TRANSFER	06/22/20	06/14/20	07/15/20		44.04	0.00	0.00	44.04 ✓		
061522	TRANSFER	06/22/20	06/15/20	07/15/20		25.69	0.00	0.00	25.69 ✓		
061622	TRANSFER	06/22/20	06/16/20	07/15/20		1,622.72	0.00	0.00	1,622.72 ✓		
061622A	TRANSFER	06/22/20	06/16/20	07/15/20		2,734.48	0.00	0.00	2,734.48 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12792	BETHANY SENIOR LIVING	23,441.01	0.00	0.00	23,441.01

NH insurance pymt deposited into MMC operating

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	23,441.01	0.00	0.00	23,441.01

APPROVED ON

JUN 23 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 19522

RUN DATE: 06/27/22
 TIME: 14:07

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 06/29/22 THRU 06/29/22

PAGE 1
 GLCKREG

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	195463	06/29/22	349.99	ACE HARDWARE 15521
A/P	195464	06/29/22	2,331.00	ALLYSON SWOPE
A/P	195465	06/29/22	26,067.36	AMERISOURCEBERGEN DRUG CORP
A/P	195466	06/29/22	40.00	ANNOUNCEMENTS PLUS TOO AGAIN
A/P	195467	06/29/22	550.00	AZALEA HEALTH
A/P	195468	06/29/22	7,618.28	BECKMAN COULTER INC
A/P	195469	06/29/22	41,202.14	BIOMERIEUX, INC
A/P	195470	06/29/22	1,699.00	CERVEY, LLC
A/P	195471	06/29/22	60,486.57	COASTAL OFFICE SOLUTIONS
A/P	195472	06/29/22	332.48	COCA COLA SOUTHWEST BEVERAGES
A/P	195473	06/29/22	1,487.84	DEWITT POTH & SON
A/P	195474	06/29/22	124,745.34	DISCOVERY MEDICAL NETWORK INC
A/P	195475	06/29/22	38,974.35	DURFOLD CORPORATION
A/P	195476	06/29/22	21,426.00	EVIDENT
A/P	195477	06/29/22	1,590.00	FASTHEALTH CORPORATION
A/P	195478	06/29/22	159.26	FEDERAL EXPRESS CORP.
A/P	195479	06/29/22	1,451.41	FISHER HEALTHCARE
A/P	195480	06/29/22	18.75	GLOBAL EQUIPMENT CO. INC.
A/P	195481	06/29/22	13.05	GRAINGER
A/P	195482	06/29/22	903.49	GULF COAST PAPER COMPANY
A/P	195483	06/29/22	7,154.17	HEALTHCARE FINANCIAL SERVICES
A/P	195484	06/29/22	748.91	INTRADO
A/P	195485	06/29/22	1,055.41	IRON MOUNTAIN
A/P	195486	06/29/22	955.84	J & J HEALTH CARE SYSTEMS, INC
A/P	195487	06/29/22	14.00	JUAN CARDENAS TRUCKING
A/P	195488	06/29/22	640.86	M G TRUST
A/P	195489	06/29/22	574.98	MARTINA CORTEZ
A/P	195490	06/29/22	1,032.65	MCKESSON MEDICAL SURGICAL INC
A/P	195491	06/29/22	4,625.66	MEDLINE INDUSTRIES INC
A/P	195492	06/29/22	155.00	MEMORIAL MEDICAL CLINIC
A/P	195493	06/29/22	1,650.00	MK ULTRA PAINTING
A/P	195494	06/29/22	288.63	MMC AUXILIARY GIFT SHOP
A/P	195495	06/29/22	.00	VOIDED
A/P	195496	06/29/22	6,600.56	MORRIS & DICKSON CO, LLC
A/P	195497	06/29/22	281.68	NACOGDOCHES TRANSCRIPTION
A/P	195498	06/29/22	983.31	OFFICE DEPOT
A/P	195499	06/29/22	12,326.25	OLOOP TECHNOLOGY SOLUTIONS
A/P	195500	06/29/22	548.23	OLYMPUS AMERICA INC
A/P	195501	06/29/22	22.05	PERFORMANCE HEALTH
A/P	195502	06/29/22	634.03	PITNEY BOWES INC
A/P	195503	06/29/22	275.00	POC ELECTRIC, LLC
A/P	195504	06/29/22	4,021.94	PRO ENERGY PARTNERS LP
A/P	195505	06/29/22	1,634.28	QIAGEN INC
A/P	195506	06/29/22	64.00	SARA RUBIO
A/P	195507	06/29/22	400.00	SIGN AD, LTD.
A/P	195508	06/29/22	5,464.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	195509	06/29/22	25,866.00	SPECTRUM HEALTH PARTNERS, LLC
A/P	195510	06/29/22	39,334.42	STRYKER COMMUNICATIONS
A/P	195511	06/29/22	1,294.26	STRYKER FLEX FINANCIAL
A/P	195512	06/29/22	730.36	STRYKER SALES CORP

0.0

Payables 444 + 161 = 75 =
 Patient returns 2 + 660 = 00 =
 critical 39 + 334 = 42 =
 NH { 82 + 356 = 26 =
 35 + 723 = 98 =
 Transfers { 40 + 189 = 30 =
 23 + 441 = 01 =
 667 + 866 = 66 =

RUN DATE:06/27/22
TIME:14:07

MEMORIAL MEDICAL CENTER
CHECK REGISTER
06/29/22 THRU 06/29/22

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	195513	06/29/22	1,242.57	THE BRATTON FIRM
A/P	195514	06/29/22	3,600.00	THE COMPLIANCE TEAM, INC
A/P	195515	06/29/22	953.83	TRIOSE, INC
A/P	195516	06/29/22	11,237.50	TRUSTED HEALTH, INC
A/P	195517	06/29/22	7,655.83	UNIFIRST HOLDINGS INC
A/P	195518	06/29/22	3,552.00	US POSTAL SERVICE
A/P	195519	06/29/22	552.50	VCS SECURITY SYSTEMS
A/P	195520	06/29/22	496.25	WAGeworks
A/P	195521	06/29/22	3,382.90	WAGeworks, INC.
A/P	195522	06/29/22	23,441.01	BETHANY SENIOR LIVING
A/P	195523	06/29/22	82,356.26	GOLDENCREEK HEALTHCARE
A/P	195524	06/29/22	35,723.92	GULF POINTE PLAZA
A/P	195525	06/29/22	40,189.30	TUSCANY VILLAGE
A/P	195526	06/29/22	2,660.00	
TOTALS:			667,866.66	

APPROVED ON

JUN 29 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 6/27/2022

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens		207,464.99	159,371.78	78,507.52		126,600.73	78,507.52
						Bank Balance	126,600.73
						Variance	-
						Leave in Balance	100.00
						MOLINA QIPP o/s	16,245.35
						AMERIGROUP QIPP o/s	31,707.81
						April Interest	15.02
						May Interest	25.03
						June Interest	
						Adjust Balance/Transfer Amt	78,507.52
Broadmoor		81,992.08	63,210.93	160,685.64		179,466.79	160,685.64
						Bank Balance	179,466.79
						Variance	-
						Leave in Balance	100.00
						MOLINA QIPP o/s	6,309.77
						AMERIGROUP QIPP o/s	12,342.62
						April Interest	11.66
						May Interest	17.10
						June Interest	
						Adjust Balance/Transfer Amt	160,685.64
Crescent		126,941.19	110,838.23	139,495.16		155,598.12	139,495.16
						Bank Balance	155,598.12
						Variance	-
						Leave in Balance	100.00
						MOLINA QIPP o/s	5,411.21
						AMERIGROUP QIPP o/s	10,561.08
						April Interest	12.07
						May Interest	18.60
						June Interest	
						Adjust Balance/Transfer Amt	139,495.16
Fort Bend		70,490.82	1,082.06	95,512.02		164,920.78	145,512.02
						Bank Balance	164,920.78
						Variance	-
						Leave in Balance	100.00
						MOLINA QIPP o/s	6,534.75
						AMERIGROUP QIPP o/s	12,758.30
						April Interest	5.19
						May Interest	10.52
						June Interest	
						Adjust Balance/Transfer Amt	145,512.02
Solera at W Houston		101,476.79	82,578.07	273,271.71		292,170.43	273,271.71
						Bank Balance	292,170.43
						Variance	-
						Leave in Balance	100.00
						Molina QIPP o/s	6,356.84
						Amerigroup QIPP o/s	12,408.90
						April Interest	13.90
						May Interest	19.08
						June Interest	
						Adjust Balance/Transfer Amt	273,271.71

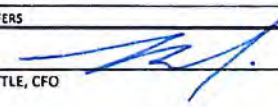
78,507.52 +
 160,685.64 +
 139,495.16 +
 145,512.02 +
 273,271.71 +
 797,472.05 +

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

TOTAL TRANSFERS 797,472.05

Approved: 
 WILLIAM LITTLE, CFO

6/27/2022

Note 1: 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

Ashford Gardens

Table with columns: Date, Description, Transfer-Out, Transfer-In

Summary table for Ashford Gardens with columns: Transfer-Out, Transfer-In, QIPP/Comp1-4, QIPP TI, NH PORTION

Broadmoor

Table with columns: Date, Description, Transfer-Out, Transfer-In

Summary table for Broadmoor with columns: Transfer-Out, Transfer-In, QIPP/Comp1-4, QIPP TI, NH PORTION

Crescent

Table with columns: Date, Description, Transfer-Out, Transfer-In

Summary table for Crescent with columns: Transfer-Out, Transfer-In, QIPP/Comp1-4, QIPP TI, NH PORTION

Port Bend

Table with columns: Date, Description, Transfer-Out, Transfer-In

Summary table for Port Bend with columns: Transfer-Out, Transfer-In, QIPP/Comp1-4, QIPP TI, NH PORTION

Solera at West Houston

Table with columns: Date, Description, Transfer-Out, Transfer-In

Summary table for Solera at West Houston with columns: Transfer-Out, Transfer-In, QIPP/Comp1-4, QIPP TI, NH PORTION

TOTALS

TOTALS summary row with columns: Transfer-Out, Transfer-In, QIPP/Comp1-4, QIPP TI, NH PORTION

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

DDA Data reported as of Jun 27, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$3,591,952.08	\$3,949,775.57	\$3,591,952.08	\$3,501,873.3
*4551 CAL CO INDIGENT HEALTHCARE	\$5,535.07	\$5,535.07	\$5,535.07	\$6,393.2
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$111,959.06	\$119,470.74	\$111,959.06	\$107,956.3
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.40	\$536.40	\$536.40	\$536.4
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$1,339,156.78	\$1,405,496.59	\$1,339,156.78	\$1,639,205.1
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.82	\$431.82	\$431.82	\$431.8
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$126,600.73 ✓	\$166,925.58	\$126,600.73	\$55,061.5
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$179,466.79 ✓	\$208,820.78	\$179,466.79	\$129,101.4
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,598.12 ✓	\$184,933.06	\$155,598.12	\$132,796.6
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$164,920.78 ✓	\$164,920.78	\$164,920.78	\$149,461.8
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$292,170.43 ✓	\$350,536.67	\$292,170.43	\$227,073.6
*2998 MMC -MONEY MARKET FUND	\$760,479.01	\$760,479.01	\$760,479.01	\$760,479.0
*5506 MMC -NH BETHANY SENIOR LIVING	\$286,389.30	\$286,389.99	\$286,389.30	\$234,310.2
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$3,854.93	\$60,093.20	\$3,854.93	\$1,719.5
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$3,398.23	\$3,466.15	\$3,398.23	\$3,398.2
*3407 MMC -NH TUSCANY VILLAGE	\$161,454.63	\$231,739.73	\$161,454.63	\$53,947.9

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 6/27/2022

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		129,790.71	✓ 129,652.40	✓ 111,820.75	✓	-	
						111,959.06	111,820.75
						Bank Balance	111,959.06 ✓
						Variance	-
						Leave in Balance	100.00
						April Interest	17.56 ✓
						May Interest	20.75 ✓
						June Interest	
						38.31	
						Adjust Balance/Transfer Amt	111,820.75 ✓

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: 
 WILLIAM LITTLE, CFO 6/27/2022

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Golden Creek

MMMC PORTION

Transfer-Out	Transfer-In	Q/PP/Comp				NH PORTION
		Comp1	Comp 2	Comp3	Comp4 &Lapse	
-	250.00	-	-	-	-	250.00
-	105,180.73	-	-	-	-	105,180.73
129,652.40	-	-	-	-	-	-
-	1,495.00	-	-	-	-	1,495.00
-	549.15	-	-	-	-	549.15
-	343.12	-	-	-	-	343.12
-	4,002.75	-	-	-	-	4,002.75
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
129,652.40	111,820.75	-	-	-	-	111,820.75

Quick View

Select Quick View Accounts
Account Number / Name

Account Type



Select Group
Groups

DDA

Data reported as of Jun 27, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$3,591,952.08	\$3,949,775.57	\$3,591,952.08	\$3,501,873.3
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,535.07	\$5,535.07	\$5,535.07	\$6,393.2
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$111,959.06	\$119,470.74	\$111,959.06	\$107,956.3
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.40	\$536.40	\$536.40	\$536.4
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$1,339,156.78	\$1,405,496.59	\$1,339,156.78	\$1,639,205.1
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.82	\$431.82	\$431.82	\$431.8
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$126,600.73	\$166,925.58	\$126,600.73	\$55,061.5
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$179,466.79	\$208,820.78	\$179,466.79	\$129,101.4
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,598.12	\$184,933.06	\$155,598.12	\$132,796.8
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$164,920.78	\$164,920.78	\$164,920.78	\$149,461.8
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$292,170.43	\$350,536.67	\$292,170.43	\$227,073.6
<u>*2998</u> MMC -MONEY MARKET FUND	\$760,479.01	\$760,479.01	\$760,479.01	\$760,479.0
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$286,389.30	\$286,389.99	\$286,389.30	\$234,310.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$3,854.93	\$60,093.20	\$3,854.93	\$1,719.9
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$3,398.23	\$3,466.15	\$3,398.23	\$3,398.2
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$161,454.63	\$231,739.73	\$161,454.63	\$53,947.9

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 6/27/2022

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-in	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home							
Gulf Pointe Plaza- Private Pay	35,818.56	35,712.66	3,292.33			3,398.23	no transfer
					Bank Balance	3,398.23	
					Variance	(0.00)	
					Leave in Balance	100.00	

April Interest	2.36
May Interest	3.54
June Interest	
Adjust Balance/Transfer Amt	3,292.33

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-in	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home							
Gulf Pointe Plaza-Medicare/Medicaid	43,360.52	43,240.59	3,735.00			3,854.93	
					Bank Balance	3,854.93	
					Variance		
					Leave in Balance	100.00	

April Interest	8.65
May Interest	11.28
June Interest	
Adjust Balance/Transfer Amt	3,735.00

Routing Information for Gulf Pointe Plaza:

TOTAL TRANSFERS	7,027.33
------------------------	-----------------

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: 
 WILLIAM LITTLE, CFO 6/27/2022

APPROVED ON
JUN 27 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

6/21/2022	PNC-ECHO HCCLAIMPMT 746003411 41000128979422
6/21/2022	HNB - ECHO HCCLAIMPMT 746003411 440000260434
6/21/2022	HNB - ECHO HCCLAIMPMT 746003411 440000260431
6/22/2022	HUMANA CHA DISB HCCLAIMPMT 624982 4200001943
6/22/2022	HNB - ECHO HCCLAIMPMT 746003411 440000223295
6/22/2022	HNB - ECHO HCCLAIMPMT 746003411 440000223295
6/23/2022	WIRE OUT HMG SERVICES, LLC

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
-	68.03	-	-	-	-	-	68.03
-	34.30	-	-	-	-	-	34.30
-	15.68	-	-	-	-	-	15.68
-	57.17	-	-	-	-	-	57.17
-	544.94	-	-	-	-	-	544.94
-	2,572.21	-	-	-	-	-	2,572.21
35,712.66	-	-	-	-	-	-	-
35,712.66	3,292.33	-	-	-	-	-	3,292.33

Gulf Pointe Plaza-Medicare/Medicaid

6/23/2022	WIRE OUT HMG SERVICES, LLC
6/23/2022	MERCHANT BANKCD DEPOSIT 496478518889 9100001
6/24/2022	MERCHANT BANKCD DEPOSIT 496478518889 9100001

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
43,240.59	-	-	-	-	-	-	-
-	1,600.00	-	-	-	-	-	1,600.00
-	2,135.00	-	-	-	-	-	2,135.00
43,240.59	3,735.00	-	-	-	-	-	3,735.00
78,953.25	7,027.33	-	-	-	-	-	7,027.33

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

DDA

Data reported as of Jun 27, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$3,591,952.08	\$3,949,775.57	\$3,591,952.08	\$3,501,873.3
*4551 CAL CO INDIGENT HEALTHCARE	\$5,535.07	\$5,535.07	\$5,535.07	\$6,393.2
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$111,959.06	\$119,470.74	\$111,959.06	\$107,956.3
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.40	\$536.40	\$536.40	\$536.4
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$1,339,156.78	\$1,405,496.59	\$1,339,156.78	\$1,639,205.1
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.82	\$431.82	\$431.82	\$431.8
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$126,600.73	\$166,925.58	\$126,600.73	\$55,061.5
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$179,466.79	\$208,820.78	\$179,466.79	\$129,101.4
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,598.12	\$184,933.06	\$155,598.12	\$132,796.6
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$164,920.78	\$164,920.78	\$164,920.78	\$149,461.8
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$292,170.43	\$350,536.67	\$292,170.43	\$227,073.6
*2998 MMC -MONEY MARKET FUND	\$760,479.01	\$760,479.01	\$760,479.01	\$760,479.0
*5506 MMC -NH BETHANY SENIOR LIVING	\$286,389.30	\$286,389.99	\$286,389.30	\$234,310.2
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$3,854.93 ✓	\$60,093.20	\$3,854.93	\$1,719.9
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$3,398.23 ✓	\$3,466.15	\$3,398.23	\$3,398.2
*3407 MMC -NH TUSCANY VILLAGE	\$161,454.63	\$231,739.73	\$161,454.63	\$53,947.9

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscan Transfer
 Prosperity Accounts
 6/27/2022

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
<u>Tuscany Village</u>		211,670.01 ✓	183,436.34 ✓	133,720.96 ✓			161,454.63	133,220.96
						Bank Balance	161,454.63	
						Variance	161,454.63 ✓	
						Leave in Balance	100.00	
						MOLINA QIPP	9,530.84	
						AMERIGROUP QIPP	18,602.73	
						Adjust Balance/Transfer Amt	133,220.96 ✓	

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: _____ 6/27/2022
 WILLIAM LITTLE, CFO

APPROVED ON
JUN 27 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Tuscany Village

MMC PORTION

	<u>Transfer-Out</u>	<u>Transfer-In</u>	QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	NH PORTION
6/21/2022 Molina HC of TX HCCLAIMPMT PN1275717894 4200	-	5,780.73	-	-	-	-	-	5,780.73
6/22/2022 HNB - ECHO HCCLAIMPMT 746003411 44000023295	-	18,501.35	-	-	-	-	-	18,501.35
6/23/2022 WIRE OUT LINBAR ENTERPRISES, LLC	183,436.34	-	-	-	-	-	-	-
6/23/2022 HNB - ECHO HCCLAIMPMT 746003411 440000261015	-	416.54	-	-	-	-	-	416.54
6/23/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000149	-	1,015.63	-	-	-	-	-	1,015.63
6/24/2022 Molina HC of TX HCCLAIMPMT PN1275717894 4200	-	1,088.06	-	-	-	-	-	1,088.06
6/24/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000167	-	106,418.65	-	-	-	-	-	106,418.65
	183,436.34 ✓	133,220.96 ✓	-	-	-	-	-	133,220.96

Quick View

Select Quick View Accounts
Account Number / NameSelect Group
Groups

Account Type



DDA


Data reported as of Jun 27, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$3,591,952.08	\$3,949,775.57	\$3,591,952.08	\$3,501,873.3
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,535.07	\$5,535.07	\$5,535.07	\$6,393.2
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$111,959.06	\$119,470.74	\$111,959.06	\$107,956.3
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.40	\$536.40	\$536.40	\$536.4
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$1,339,156.78	\$1,405,496.59	\$1,339,156.78	\$1,639,205.1
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.82	\$431.82	\$431.82	\$431.8
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$126,600.73	\$166,925.58	\$126,600.73	\$55,061.5
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$179,466.79	\$208,820.78	\$179,466.79	\$129,101.4
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$155,598.12	\$184,933.08	\$155,598.12	\$132,796.6
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$164,920.78	\$164,920.78	\$164,920.78	\$149,461.8
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$292,170.43	\$350,536.67	\$292,170.43	\$227,073.6
<u>*2998</u> MMC -MONEY MARKET FUND	\$760,479.01	\$760,479.01	\$760,479.01	\$760,479.0
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$286,389.30	\$286,389.99	\$286,389.30	\$234,310.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$3,854.93	\$60,093.20	\$3,854.93	\$1,719.9
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$3,398.23	\$3,466.15	\$3,398.23	\$3,398.2
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$161,454.63	\$231,739.73	\$161,454.63	\$53,947.9

Memorial Medical Center
 Nursing Home UPL
 Weekly HSL Transfer
 Prosperity Accounts
 6/27/2022

Nursing Home	Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Bethany Senior Living		201,385.77	201,231.33	285,234.86			286,389.30	286,234.86
						Bank Balance	286,389.30	
						Variance	-	
						Leave in Balance	100.00	
						April Interest	27.59	
						May Interest	26.85	
						June Interest		
						Adjust Balance/Transfer Amt	286,234.86	

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: 
 WILLIAM LITTLE, CFO 6/27/2022

APPROVED ON

JUN 27 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Quick View

Select Quick View Accounts
Account Number / Name

Account Type



Select Group
Groups

DDA

Data reported as of Jun 27, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$3,591,952.08	\$3,949,775.57	\$3,591,952.08	\$3,501,873.3
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