

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---September 07, 2022

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 181,708.29	✓
TOTAL TRANSFERS BETWEEN FUNDS	\$ 315,948.08	✓
TOTAL NURSING HOME UPL EXPENSES	\$ 857,693.62	✓
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -	
GRAND TOTAL DISBURSEMENTS APPROVED September 07, 2022	\$ 1,355,349.99	✓

APPROVED

SEP 07 2022

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---September 07, 2022

PAYABLES AND PAYROLL

9/1/2022 Weekly Payables	166,573.59
9/2/2022 HEB-groceries	986.08
9/6/2022 McKesson-340B Prescription Expense	8,992.97
9/6/2022 Amerisource Bergen-340B Prescription Expense	1,665.19
9/6/2022 Payroll Liabilities for supplemental payroll-Payroll Taxes	98.18
9/6/2022 Supplemental Payroll	547.69

Prosperity Electronic Bank Payments

8/29-9/2/22 Pay Plus-Patient Claims Processing Fee	524.74
9/2/2022 ExpertPay- child support	2,290.01
9/2/2022 Authnet Gateway Billing-3rd Party Payor Fee	29.84

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ 181,708.29

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

9/1/2022 MMC Operating to Ashford-correction of NH QIPP payment deposited into MMC Operating	2,990.88
9/1/2022 MMC Operating to Solera-correction of NH insurance and QIPP payment deposited into MMC Operating	2,376.89
9/1/2022 MMC Operating to Fort bend-correction of NH insurance and QIPP payment deposited into MMC Operating	1,434.45
9/1/2022 MMC Operating to Broadmoor-correction of NH QIPP payment deposited into MMC Operating	1,460.49
9/1/2022 MMC Operating to Crescent-correction of NH insurance and QIPP payment deposited into MMC Operating in error	12,710.52
9/1/2022 MMC Operating to Golden Creek-correction of NH insurance and QIPP payment deposited into MMC Operating in error	78,895.06
9/1/2022 MMC Operating to Gulf Pointe Plaza -correction of NH insurance and QIPP payment deposited into MMC Operating	40,698.82
9/1/2022 MMC Operating to Tuscany Village-correction of NH insurance and QIPP payment deposited into MMC Operating	73,296.25
9/1/2022 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	100,737.38

MEDICARE ADVANCE PAYMENT RECOUP

9/6/2022 Crescent to Bethany-correction of Crecent medicare recoup taken from Bethany	1,347.34
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TOTAL TRANSFERS BETWEEN FUNDS \$ 315,948.08

NURSING HOME UPL EXPENSES

9/6/2022 Nursing Home UPL-Cantex Transfer	419,010.55
9/6/2022 Nursing Home UPL-Nexion Transfer	64,119.68
9/6/2022 Nursing Home UPL-HMG Transfer	34,270.79
9/6/2022 Nursing Home UPL-Tuscany Transfer	88,250.82
9/6/2022 Nursing Home UPL-HSL Transfer	120,822.50

QIPP CHECKS TO MMC

9/6/2022 Ashford	41,717.42
9/6/2022 Broadmoor	17,477.09
9/6/2022 Crescent	13,999.79
9/6/2022 Fort Bend	16,883.28
9/6/2022 Solera	16,565.06
9/6/2022 Tuscany	24,576.64

TOTAL NURSING HOME UPL EXPENSES \$ 857,693.62

TOTAL INTER-GOVERNMENT TRANSFERS \$ -

GRAND TOTAL DISBURSEMENTS APPROVED September 07, 2022 \$ 1,355,349.99

RECEIVED BY THE
COUNTY AUDITOR ON
SEP 01 2022
09/01/2022
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 09/22/2022

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Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
R1200	ADT COMMERCIAL ✓			146660484 ✓		08/31/20	08/03/20	08/28/20		53.61	0.00	0.00	53.61 ✓		
FIRE MONITORING															
Vendor Totals										Number	Name	Gross	Discount	No-Pay	Net
										R1200	ADT COMMERCIAL	53.61	0.00	0.00	53.61

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
A2218	AQUA BEVERAGE COMPANY ✓	M		135575 ✓		08/31/20	06/15/20	07/10/20		207.00	0.00	0.00	207.00 ✓		
WATER															
	212811 ✓					08/31/20	07/06/20	07/31/20		55.95	0.00	0.00	55.95 ✓		
WATER															
	212785 ✓					08/31/20	07/06/20	07/31/20		15.99	0.00	0.00	15.99 ✓		
WATER															
	217964 ✓					08/31/20	07/31/20	08/25/20		10.00	0.00	0.00	10.00 ✓		
FEE															
	217904 ✓					08/31/20	07/31/20	08/25/20		10.00	0.00	0.00	10.00 ✓		
FEE															
	218210 ✓					08/31/20	08/03/20	08/28/20		55.95	0.00	0.00	55.95 ✓		
WATER															
	218184 ✓					08/31/20	08/03/20	08/28/20		25.98	0.00	0.00	25.98 ✓		
WATER															
Vendor Totals										Number	Name	Gross	Discount	No-Pay	Net
										A2218	AQUA BEVERAGE COMPANY	380.87	0.00	0.00	380.87

370.87
370.87

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
14088	AZALEA HEALTH ✓			78169 ✓		08/31/20	09/01/20	09/01/20		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

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
B1150	BAXTER HEALTHCARE ✓	W		76225568 ✓		08/31/20	08/22/20	09/16/20		2,367.50	0.00	0.00	2,367.50 ✓		
LEASE															
	76225563 ✓					08/31/20	08/22/20	09/16/20		629.50	0.00	0.00	629.50 ✓		
LEASE															
Vendor Totals										Number	Name	Gross	Discount	No-Pay	Net
										B1150	BAXTER HEALTHCARE	2,997.00	0.00	0.00	2,997.00

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
B1220	BECKMAN COULTER INC ✓	M		110050566 ✓		08/17/20	08/01/20	08/26/20		1,237.32	0.00	0.00	1,237.32 ✓			
SUPPLIES																
Vendor Totals										Number	Name	Gross	Discount	No-Pay	Net	

	B1220	BECKMAN COULTER INC					1,237.32	0.00	0.00	1,237.32
Vendor#	Vendor Name					Class	Pay Code			
B1320	BEEKLEY CORPORATION ✓					M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	INV1530894 ✓		08/01/20	05/24/20	06/24/20		131.95	0.00	0.00	131.95 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1320	BEEKLEY CORPORATION				131.95	0.00	0.00	131.95
Vendor#	Vendor Name					Class	Pay Code			
12740	BUILDING KID STEPS ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	JULY2022B		08/31/20	08/26/20	09/10/20		602.00	0.00	0.00	602.00 ✓
	JULY SPEECH THERAPY									
	JULY2022A		08/31/20	08/26/20	09/10/20		1,052.00	0.00	0.00	1,052.00 ✓
	JULY SPEECH THERAPY									
	JULY2022		08/31/20	08/26/20	09/10/20		1,026.00	0.00	0.00	1,026.00 ✓
	JULY SPEECH THERAPY									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		12740	BUILDING KID STEPS				2,680.00	0.00	0.00	2,680.00
Vendor#	Vendor Name					Class	Pay Code			
C1048	CALHOUN COUNTY ✓					W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	082422		08/31/20	08/24/20	09/01/20		146.31	0.00	0.00	146.31
	FUEL									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1048	CALHOUN COUNTY				146.31	0.00	0.00	146.31
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
	1643682736		08/30/20	08/19/20	09/13/20		448.18	0.00	0.00	448.18 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		14064	CAPITAL ONE				448.18	0.00	0.00	448.18
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
	8002927427 ✓		08/31/20	08/06/20	08/31/20		1,061.83	0.00	0.00	1,061.83 ✓
	SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1325	CARDINAL HEALTH 414, INC.				1,061.83	0.00	0.00	1,061.83
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
	10019280907 ✓		08/31/20	08/08/20	09/01/20		1,788.00	0.00	0.00	1,788.00 ✓
	MAITENANCE									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		14260	CAREFUSION SOLUTIONS, LLC				1,788.00	0.00	0.00	1,788.00
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
	18026226 ✓		08/31/20	08/18/20	09/18/20		726.58	0.00	0.00	726.58 ✓

ELECTRICITY												
18026227	✓		08/31/20	08/18/20	09/19/20		17.05	0.00	0.00	17.05 ✓		
ELECTRICITY												
18026225	✓		08/31/20	08/18/20	09/19/20		1,877.63	0.00	0.00	1,877.63 ✓		
ELECTRICITY												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							13028	CAVALLO ENERGY TEXAS LLC	2,621.26	0.00	0.00	2,621.26
Vendor#	Vendor Name						Class	Pay Code				
C1992	CDW GOVERNMENT, INC. ✓						M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
CB40509 ✓		08/31/20	08/11/20	09/10/20			264.77	0.00	0.00	264.77 ✓		
SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							C1992	CDW GOVERNMENT, INC.	264.77	0.00	0.00	264.77
Vendor#	Vendor Name						Class	Pay Code				
C1390	CENTRAL DRUG ✓						W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
071122		08/31/20	07/11/20	08/10/20			14.55	0.00	0.00	14.55 ✓		
INVENTORY												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							C1390	CENTRAL DRUG	14.55	0.00	0.00	14.55
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		
17548 ✓		08/31/20	08/16/20	09/10/20			1,699.00	0.00	0.00	1,699.00 ✓		
LICENSE 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				
13336	COCA COLA SOUTHWEST BEVERAGES ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
24165201121 ✓		08/23/20	08/17/20	09/16/20			715.28	0.00	0.00	715.28 ✓		
BEVERAGES												
24165201122 ✓		08/23/20	08/17/20	09/16/20			-125.00	0.00	0.00	-125.00 ✓		
CREDIT												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							13336	COCA COLA SOUTHWEST BEVERAGES	590.28	0.00	0.00	590.28
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		
083122		08/31/20	08/31/20	09/01/20			612.18	0.00	0.00	612.18 ✓		
PAYROLL DEDUCT												
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				
10646	COVIDIEN ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
5866607632 ✓		08/11/20	07/20/20	08/20/20			501.26	0.00	0.00	501.26 ✓		
SUPPLIES												
5866848436 ✓		08/31/20	08/19/20	09/18/20			765.78	0.00	0.00	765.78 ✓		
SUPPLIES												

Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		10646	COVIDIEN	1,267.04	0.00	0.00	1,267.04		
Vendor#	Vendor Name			Class	Pay Code				
D1150	DATEX OHMEDA, INC. ✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
63664483 ✓		08/31/20	08/17/20	08/31/20		1,015.40	0.00	0.00	1,015.40 ✓
PCA POWER BOARD WARMEI									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		D1150	DATEX OHMEDA, INC.	1,015.40	0.00	0.00	1,015.40		
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
6905010 ✓		08/31/20	08/16/20	09/10/20		236.54	0.00	0.00	236.54 ✓
SUPPLIES									
6909440 ✓		08/31/20	08/17/20	09/11/20		135.64	0.00	0.00	135.64 ✓
SUPPLIES									
6900751 ✓		08/31/20	08/17/20	09/11/20		63.92	0.00	0.00	63.92 ✓
SUPPLIES									
6909700 ✓		08/31/20	08/17/20	09/11/20		329.87	0.00	0.00	329.87 ✓
SUPPLIES									
6910820 ✓		08/31/20	08/18/20	09/12/20		36.56	0.00	0.00	36.56 ✓
SUPPLIES									
6909701 ✓		08/31/20	08/18/20	09/12/20		12.36	0.00	0.00	12.36 ✓
SUPPLIES									
6913970 ✓		08/31/20	08/19/20	09/13/20		195.89	0.00	0.00	195.89 ✓
SUPPLIES									
6900752 ✓		08/31/20	08/22/20	09/16/20		15.46	0.00	0.00	15.46 ✓
SUPPLIES									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		10368	DEWITT POTH & SON	1,026.24	0.00	0.00	1,026.24		
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
11379 ✓		08/31/20	08/11/20	09/05/20		160.00	0.00	0.00	160.00 ✓
PEST CONTROL									
11458 ✓		08/31/20	08/16/20	09/10/20		95.00	0.00	0.00	95.00 ✓
PEST CONTROL									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		11291	DOWELL PEST CONTROL	255.00	0.00	0.00	255.00		
Vendor#	Vendor Name			Class	Pay Code				
11284	EMERGENCY STAFFING SOLUTIONS ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
41486 ✓		08/31/20	08/31/20	09/10/20		40,062.50	0.00	0.00	40,062.50 ✓
PHYSICIAN SERVICES (16-ENW-)									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		11284	EMERGENCY STAFFING SOLUTIONS	40,062.50	0.00	0.00	40,062.50		
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
08A22MMC ✓		08/31/20	08/01/20	08/16/20		495.00	0.00	0.00	495.00 ✓
WEBSITE									

Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		10689	FASTHEALTH CORPORATION		495.00	0.00	0.00	495.00	
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
4614039 ✓	SUPPLIES	08/01/20	07/14/20	08/08/20		348.01	0.00	0.00	348.01 ✓
5196242 ✓	SUPPLIES	08/11/20	08/03/20	08/28/20		672.74	0.00	0.00	672.74 ✓
5402217 ✓	SUPPLIES	08/24/20	08/10/20	09/04/20		94.98	0.00	0.00	94.98 ✓
9121231 ✓	SUPPLIES	08/31/20	02/03/20	02/28/20		1,213.23	0.00	0.00	1,213.23 ✓
5443537 ✓	SUPPLIES	08/31/20	08/11/20	09/05/20		190.15	0.00	0.00	190.15 ✓
5483048 ✓	SUPPLIES	08/31/20	08/12/20	09/06/20		143.87	0.00	0.00	143.87 ✓
5564057 ✓	SUPPLIES	08/31/20	08/16/20	09/10/20		267.28	0.00	0.00	267.28 ✓
5606375 ✓	SUPPLIES	08/31/20	08/17/20	09/11/20		474.62	0.00	0.00	474.62 ✓
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		F1400	FISHER HEALTHCARE		3,404.88	0.00	0.00	3,404.88	
Vendor#	Vendor Name		Class	Pay Code					
11183	FRONTIER ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
081922	PHONE	08/31/20	08/19/20	09/12/20		71.09	0.00	0.00	71.09 ✓
082322	PHONE	08/31/20	08/23/20	09/16/20		32.46	0.00	0.00	32.46 ✓
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11183	FRONTIER		103.55	0.00	0.00	103.55	
Vendor#	Vendor Name		Class	Pay Code					
12636	FUSION CLOUD SERVICES, LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
28632098 ✓	PHONE	08/31/20	08/16/20	09/15/20		1,067.77	0.00	0.00	1,067.77 ✓
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		12636	FUSION CLOUD SERVICES, LLC		1,067.77	0.00	0.00	1,067.77	
Vendor#	Vendor Name		Class	Pay Code					
12404	GE PRECISION HEALTHCARE, LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
6001890935 ✓	CONTRACT	08/30/20	07/01/20	07/31/20		868.16	0.00	0.00	868.16 ✓
6001933933 ✓	CONTRACT	08/30/20	09/01/20	10/01/20		3,588.58	0.00	0.00	3,588.58 ✓
6001957436 ✓	CONTRACT	08/30/20	10/01/20	10/31/20		868.16	0.00	0.00	868.16 ✓
6002048811 ✓	CONTRACT	08/30/20	02/01/20	03/03/20		5,665.83	0.00	0.00	5,665.83 ✓
6002109433 ✓	CONTRACT	08/30/20	04/18/20	05/18/20		-878.94	0.00	0.00	-878.94 ✓

CREDIT

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		12404	GE PRECISION HEALTHCARE, LLC				10,111.79	0.00	0.00	10,111.79
Vendor#	Vendor Name		Class	Pay Code						
10901	GENESIS DIAGNOSTICS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
52821 ✓		08/01/20	01/25/20	02/24/20		121.96	0.00	0.00	121.96	✓
SUPPLIES										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10901	GENESIS DIAGNOSTICS				121.96	0.00	0.00	121.96
Vendor#	Vendor Name		Class	Pay Code						
10956	GETINGE USA SALES LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
6991958801 ✓		08/31/20	07/20/20	08/31/20		51.53	0.00	0.00	51.53	✓
SUPPLIES										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10956	GETINGE USA SALES LLC				51.53	0.00	0.00	51.53
Vendor#	Vendor Name		Class	Pay Code						
14548	GREAT LAKES WEST LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
VZ0867 ✓		08/31/20	04/30/20	05/30/20		1,080.00	0.00	0.00	1,080.00	✓
HAND SINK										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		14548	GREAT LAKES WEST LLC				1,080.00	0.00	0.00	1,080.00
Vendor#	Vendor Name		Class	Pay Code						
11984	GUERBET, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
33230768 ✓		08/31/20	08/22/20	08/31/20		700.00	0.00	0.00	700.00	✓
SUPPLIES										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		11984	GUERBET, LLC				700.00	0.00	0.00	700.00
Vendor#	Vendor Name		Class	Pay Code						
G0401	GULF COAST DELIVERY ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
083122		08/31/20	08/31/20	09/15/20		125.00	0.00	0.00	125.00	✓
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		G0401	GULF COAST DELIVERY				125.00	0.00	0.00	125.00
Vendor#	Vendor Name		Class	Pay Code						
G1210	GULF COAST PAPER COMPANY ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2258216 ✓		08/01/20	07/12/20	08/11/20		978.49	0.00	0.00	978.49	✓
SUPPLIES										
2266264 ✓		08/17/20	08/02/20	09/01/20		1,332.45	0.00	0.00	1,332.45	✓
SUPPLIES										
2267776 ✓		08/17/20	08/05/20	09/04/20		77.63	0.00	0.00	77.63	✓
SUPPLIES										
2272279 ✓		08/31/20	08/16/20	09/15/20		25.90	0.00	0.00	25.90	✓
SUPPLIES										
2272282 ✓		08/31/20	08/16/20	09/15/20		773.10	0.00	0.00	773.10	✓
SUPPLIES										

2275849		08/31/20	08/23/20	09/22/20		760.00	0.00	0.00	760.00
	SUPPLIES								
Vendor Totals					Number Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY				3,947.57	0.00	0.00	3,947.57
Vendor#	Vendor Name				Class	Pay Code			
10829	HEALTHSTREAM, INC.								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
0299488		08/31/20	08/12/20	09/11/20		9.15	0.00	0.00	9.15
	HSTREAM								
Vendor Totals					Number Name	Gross	Discount	No-Pay	Net
	10829	HEALTHSTREAM, INC.				9.15	0.00	0.00	9.15
Vendor#	Vendor Name				Class	Pay Code			
H1269	HENRY SCHEIN INC.								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
22145302		08/01/20	06/22/20	07/21/20		43.05	0.00	0.00	43.05
	SUPPLIES								
Vendor Totals					Number Name	Gross	Discount	No-Pay	Net
	H1269	HENRY SCHEIN INC.				43.05	0.00	0.00	43.05
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
71163		08/01/20	07/12/20	08/06/20		240.00	0.00	0.00	240.00
	SUPPLIES								
Vendor Totals					Number Name	Gross	Discount	No-Pay	Net
	I1260	INTOXIMETERS INC				240.00	0.00	0.00	240.00
Vendor#	Vendor Name				Class	Pay Code			
11200	IRON MOUNTAIN								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
GTYT406		08/31/20	07/26/20	08/25/20		673.86	0.00	0.00	673.86
	SHREDDING								
Vendor Totals					Number Name	Gross	Discount	No-Pay	Net
	11200	IRON MOUNTAIN				673.86	0.00	0.00	673.86
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
930644319		08/24/20	08/18/20	09/17/20		1,952.88	0.00	0.00	1,952.88
	SUPPLIES								
Vendor Totals					Number Name	Gross	Discount	No-Pay	Net
	J0150	J & J HEALTH CARE SYSTEMS, INC				1,952.88	0.00	0.00	1,952.88
Vendor#	Vendor Name				Class	Pay Code			
11812	JACOB HAMILTON, PT, DPT								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
083122		08/31/20	08/31/20	09/05/20		1,571.03	0.00	0.00	1,571.03
	REIMBURSEMENT								
Vendor Totals					Number Name	Gross	Discount	No-Pay	Net
	11812	JACOB HAMILTON, PT, DPT				1,571.03	0.00	0.00	1,571.03
Vendor#	Vendor Name				Class	Pay Code			
K0530	KCI USA				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
31178447		08/31/20	07/05/20	08/05/20		806.33	0.00	0.00	806.33
	SUPPLIES								

31169459		08/31/20	07/12/20	08/12/20		1,128.54	0.00	0.00	1,128.54		
VAC ULTA THERAPY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						K0530	KCI USA	1,934.87	0.00	0.00	1,934.87
Vendor#	Vendor Name					Class	Pay Code				
L1288	LANGUAGE LINE SERVICES					W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
10226470		08/30/20	04/30/20	05/25/20		36.12	0.00	0.00	36.12		
INTERPRETATION											
10266475		08/30/20	06/30/20	07/25/20		10.32	0.00	0.00	10.32		
INTERPRETATION											
10340826		08/30/20	09/30/20	10/25/20		4.30	0.00	0.00	4.30		
INTERPRETATION											
10386956		08/30/20	10/31/20	11/25/20		3.44	0.00	0.00	3.44		
INTERPRETATION											
10470183		08/30/20	02/28/20	03/25/20		138.46	0.00	0.00	138.46		
INTERPRETATION											
10493094		08/30/20	03/31/20	04/25/20		79.98	0.00	0.00	79.98		
INTERPRETATION											
10556596		08/30/20	05/31/20	06/25/20		33.54	0.00	0.00	33.54		
INTERPRETATION											
10512765		08/30/20	05/31/20	06/25/20		24.08	0.00	0.00	24.08		
INTERPRETATION											
10579119		08/30/20	06/30/20	07/25/20		141.04	0.00	0.00	141.04		
INTERPRETATION											
10599625		08/30/20	07/31/20	08/25/20		24.08	0.00	0.00	24.08		
INTERPRETATION											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						L1288	LANGUAGE LINE SERVICES	495.36	0.00	0.00	495.36
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		
109766		08/31/20	05/19/20	06/19/20		675.00	0.00	0.00	675.00		
SERVICE CALL											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						14244	LONESTAR COMMUNICATIONS, IN	675.00	0.00	0.00	675.00
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		
082522		08/31/20	08/25/20	09/01/20		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				
J1350	M.C. JOHNSON COMPANY INC					M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
00391399		08/24/20	08/16/20	09/16/20		95.33	0.00	0.00	95.33		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						J1350	M.C. JOHNSON COMPANY INC	95.33	0.00	0.00	95.33
Vendor#	Vendor Name					Class	Pay Code				

M1511	MARKETLAB, INC ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
IN01740170 ✓		08/31/20	08/12/20	09/11/20		401.35	0.00	0.00	401.35 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	M1511 MARKETLAB, INC					401.35	0.00	0.00	401.35		
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		
19570358 ✓		08/01/20	07/11/20	07/26/20		437.41	0.00	0.00	437.41 ✓		
	SUPPLIES										
19598856 ✓		08/01/20	07/18/20	08/02/20		437.41	0.00	0.00	437.41 ✓		
	SUPPLIES										
19734124 ✓		08/31/20	08/23/20	09/07/20		95.15	0.00	0.00	95.15 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	M2178 MCKESSON MEDICAL SURGICAL INC					969.97	0.00	0.00	969.97		
Vendor#	Vendor Name				Class	Pay Code					
11141	MEDICAL DATA SYSTEMS, INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
170959 ✓		08/31/20	05/31/20	06/25/20		15.53	0.00	0.00	15.53 ✓		
	EXTENDED BUSINESSESS SERV										
171885 ✓		08/31/20	06/30/20	07/25/20		47.84	0.00	0.00	47.84 ✓		
	EXTENDED BUSINESS SERV										
172621 ✓		08/31/20	06/30/20	07/25/20		1,514.14	0.00	0.00	1,514.14 ✓		
	COLLECTION FEES										
172620 ✓		08/31/20	06/30/20	07/25/20		547.06	0.00	0.00	547.06 ✓		
	COLLECTION FEES										
173080 ✓		08/31/20	07/31/20	08/25/20		827.20	0.00	0.00	827.20 ✓		
	COLLECTION FEES										
173081 ✓		08/31/20	07/31/20	08/25/20		8,122.53	0.00	0.00	8,122.53 ✓		
	COLLECTION FEES										
172772 ✓		08/31/20	07/31/20	08/25/20		165.25	0.00	0.00	165.25 ✓		
	EXTENDED BUSINESS SERV										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	11141 MEDICAL DATA SYSTEMS, INC.					11,239.55	0.00	0.00	11,239.55		
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		
2214511811 ✓		08/01/20	06/08/20	07/03/20		1,962.51	0.00	0.00	1,962.51 ✓		
	SUPPLIES										
2216208131 ✓		08/01/20	06/21/20	07/16/20		16.96	0.00	0.00	16.96 ✓		
	SUPPLIES										
2219020736 ✓		08/01/20	07/11/20	08/05/20		773.15	0.00	0.00	773.15 ✓		
	SUPPLIES										
2219244325 ✓		08/01/20	07/12/20	08/06/20		390.00	0.00	0.00	390.00 ✓		
	SUPPLIES										
2219468447 ✓		08/01/20	07/13/20	08/07/20		1,839.96	0.00	0.00	1,839.96 ✓		
	SUPPLIES										
2219981534 ✓		08/01/20	07/16/20	08/10/20		70.83	0.00	0.00	70.83 ✓		
	SUPPLIES										

2220400956 ✓	08/31/20 07/19/20 08/13/20	-56.16	0.00	0.00	-56.16 ✓
CREDIT					
2220929392 ✓	08/31/20 07/22/20 08/16/20	-29.40	0.00	0.00	-29.40 ✓
CREDIT					
2220929393 ✓	08/31/20 07/22/20 08/16/20	-89.71	0.00	0.00	-89.71 ✓
CREDIT					
2221122396 ✓	08/31/20 07/23/20 08/17/20	-408.92	0.00	0.00	-408.92 ✓
CREDIT					
2221122397 ✓	08/31/20 07/23/20 08/17/20	-5.74	0.00	0.00	-5.74 ✓
CREDIT					
2224088512A ✓	08/31/20 08/11/20 09/05/20	-4.70	0.00	0.00	-4.70 ✓
CREDIT					
2224731351 ✓	08/31/20 08/16/20 09/10/20	1,101.45	0.00	0.00	1,101.45 ✓
SUPPLIES					
2224748082 ✓	08/31/20 08/17/20 09/11/20	78.66	0.00	0.00	78.66 ✓
SUPPLIES					
2224825946 ✓	08/31/20 08/17/20 09/11/20	86.60	0.00	0.00	86.60 ✓
SUPPLIES					
2224748080 ✓	08/31/20 08/17/20 09/11/20	1,328.76	0.00	0.00	1,328.76 ✓
SUPPLIES					
2224748075 ✓	08/31/20 08/17/20 09/11/20	61.57	0.00	0.00	61.57 ✓
SUPPLIES					
2224748083 ✓	08/31/20 08/17/20 09/11/20	8.75	0.00	0.00	8.75 ✓
SUPPLIES					
2224825945 ✓	08/31/20 08/17/20 09/11/20	754.67	0.00	0.00	754.67 ✓
SUPPLIES					
2224748078 ✓	08/31/20 08/17/20 09/11/20	776.96	0.00	0.00	776.96 ✓
SUPPLIES					
2224748084 ✓	08/31/20 08/17/20 09/11/20	3.34	0.00	0.00	3.34 ✓
SUPPLIES					
2224748076 ✓	08/31/20 08/17/20 09/11/20	2.03	0.00	0.00	2.03 ✓
SUPPLIES					
2224748077 ✓	08/31/20 08/17/20 09/11/20	53.74	0.00	0.00	53.74 ✓
SUPPLIES					
2225177799 ✓	08/31/20 08/19/20 09/13/20	737.85	0.00	0.00	737.85 ✓
SUPPLIES					
2225177798 ✓	08/31/20 08/19/20 09/13/20	103.32	0.00	0.00	103.32 ✓
SUPPLIES					
2225298773 ✓	08/31/20 08/19/20 09/13/20	666.53	0.00	0.00	666.53 ✓
SUPPLIES					
2225469617 ✓	08/31/20 08/20/20 09/14/20	374.92	0.00	0.00	374.92 ✓
SUPPLIES					
2225829063 ✓	08/31/20 08/24/20 09/18/20	829.17	0.00	0.00	829.17 ✓
SUPPLIES					
2225829054 ✓	08/31/20 08/24/20 09/18/20	416.57	0.00	0.00	416.57 ✓
SUPPLIES					
2225829065 ✓	08/31/20 08/24/20 09/18/20	89.71	0.00	0.00	89.71 ✓
SUPPLIES					
2225829058 ✓	08/31/20 08/24/20 09/18/20	18.12	0.00	0.00	18.12 ✓
SUPPLIES					
2225829057 ✓	08/31/20 08/24/20 09/18/20	59.89	0.00	0.00	59.89 ✓

		SUPPLIES										
2225829064	✓		08/31/20	08/24/20	09/18/20		54.66	0.00	0.00	54.66 ✓		
		SUPPLIES										
2225829066	✓		08/31/20	08/24/20	09/18/20		88.34	0.00	0.00	88.34 ✓		
		SUPPLIES										
2225829059	✓		08/31/20	08/24/20	09/18/20		88.34	0.00	0.00	88.34 ✓		
		SUPPLIES										
2225829061	✓		08/31/20	08/24/20	09/18/20		88.34	0.00	0.00	88.34 ✓		
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							M2470	MEDLINE INDUSTRIES INC	12,331.07	0.00	0.00	12,331.07
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			
082522		08/31/20	08/25/20	09/01/20		105.00	0.00	0.00	105.00 ✓			
PAYROLL DEDUCT												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10963	MEMORIAL MEDICAL CLINIC	105.00	0.00	0.00	105.00
Vendor#	Vendor Name					Class	Pay Code					
M2685	MICROTEK MEDICAL INC					M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
6271269203		08/24/20	08/10/20	09/16/20		352.08	0.00	0.00	352.08 ✓			
SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							M2685	MICROTEK MEDICAL INC	352.08	0.00	0.00	352.08
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			
082522		08/31/20	08/25/20	09/01/20		181.20	0.00	0.00	181.20 ✓			
PAYROLL DEDUCT												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							M2621	MMC AUXILIARY GIFT SHOP	181.20	0.00	0.00	181.20
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			
8564323	✓		08/31/20	08/21/20	08/31/20	187.92	0.00	0.00	187.92 ✓			
INVENTORY												
8564324	✓		08/31/20	08/21/20	08/31/20	7.86	0.00	0.00	7.86 ✓			
INVENTORY												
8566504	✓		08/31/20	08/21/20	08/31/20	752.92	0.00	0.00	752.92 ✓			
INVENTORY												
8566505	✓		08/31/20	08/21/20	08/31/20	1,215.04	0.00	0.00	1,215.04 ✓			
INVENTORY												
8570167	✓		08/31/20	08/22/20	09/01/20	386.94	0.00	0.00	386.94 ✓			
INVENTORY												
8567816	✓		08/31/20	08/22/20	09/01/20	5,025.68	0.00	0.00	5,025.68 ✓			
INVENTORY												
8567815	✓		08/31/20	08/22/20	09/01/20	192.23	0.00	0.00	192.23 ✓			
INVENTORY												
8570166	✓		08/31/20	08/22/20	09/01/20	498.26	0.00	0.00	498.26 ✓			
INVENTORY												

6680	✓		08/31/20	08/23/20	09/02/20		-72.65	0.00	0.00	-72.65	✓	
		CREDIT										
8575473	✓		08/31/20	08/23/20	09/02/20		17.02	0.00	0.00	17.02	✓	
		INVENTORY										
8575474	✓		08/31/20	08/23/20	09/02/20		3,332.13	0.00	0.00	3,332.13	✓	
		INVENTORY										
6681	✓		08/31/20	08/23/20	09/02/20		-308.61	0.00	0.00	-308.61	✓	
		CREDIT										
8572753	✓		08/31/20	08/23/20	09/02/20		128.66	0.00	0.00	128.66	✓	
		INVENTORY										
8580615	✓		08/31/20	08/24/20	09/03/20		466.13	0.00	0.00	466.13	✓	
		INVENTORY										
8580614	✓		08/31/20	08/24/20	09/03/20		27.92	0.00	0.00	27.92	✓	
		INVENTORY										
8577929	✓		08/31/20	08/24/20	09/03/20		74.69	0.00	0.00	74.69	✓	
		INVENTORY										
8577928	✓		08/31/20	08/24/20	09/03/20		5,784.76	0.00	0.00	5,784.76	✓	
		INVENTORY										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10536	MORRIS & DICKSON CO, LLC	17,716.90	0.00	0.00	17,716.90
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			
7802	✓		08/31/20	08/29/20	09/08/20	268.72	0.00	0.00	268.72	✓		
		TRANSCRIPTION										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							13548	NACOGDOCHES TRANSCRIPTION	268.72	0.00	0.00	268.72
Vendor#	Vendor Name				Class	Pay Code						
O1500	OLYMPUS AMERICA INC				M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
33119671	✓		08/31/20	08/22/20	09/16/20	109.44	0.00	0.00	109.44	✓		
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							O1500	OLYMPUS AMERICA INC	109.44	0.00	0.00	109.44
Vendor#	Vendor Name				Class	Pay Code						
O1416	ORTHO CLINICAL DIAGNOSTICS											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
1852544722	✓		08/31/20	08/15/20	09/14/20	752.16	0.00	0.00	752.16	✓		
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							O1416	ORTHO CLINICAL DIAGNOSTICS	752.16	0.00	0.00	752.16
Vendor#	Vendor Name				Class	Pay Code						
10372	PRECISION DYNAMICS CORP (PDC)											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
9350722796	✓		08/31/20	08/03/20	09/02/20	20.16	0.00	0.00	20.16	✓		
		SUPPLIES										
9350745122	✓		08/31/20	08/06/20	09/05/20	16.42	0.00	0.00	16.42	✓		
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10372	PRECISION DYNAMICS CORP (PDC)	36.58	0.00	0.00	36.58
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		
14087 ✓		08/31/20	06/14/20	07/14/20		56.30	0.00	0.00	56.30 ✓		
	FOAM BOARD										
14058 ✓		08/31/20	06/20/20	06/30/20		42.00	0.00	0.00	42.00 ✓		
	FLYERS										
14705 ✓		08/31/20	08/15/20	08/25/20		143.00	0.00	0.00	143.00 ✓		
	SIGNS/FOAMBOARD										
14704 ✓		08/31/20	08/15/20	08/25/20		53.00	0.00	0.00	53.00 ✓		
	BUSINESS CARDS										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	11251 RAPID PRINTING LLC					294.30	0.00	0.00	294.30		
Vendor#	Vendor Name					Class			Pay Code		
11764	ROBERT RODRIQUEZ ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
083022		08/31/20	08/30/20	09/01/20		42.88	0.00	0.00	42.88 ✓		
	REIMBURSE <i>- travel to Sam's Club, HEB, etc. sign-in</i>										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	11764 ROBERT RODRIQUEZ					42.88	0.00	0.00	42.88		
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		
082022		08/30/20	08/20/20	09/08/20		1,324.38	0.00	0.00	1,324.38 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	S0900 SAM'S CLUB DIRECT					1,324.38	0.00	0.00	1,324.38		
Vendor#	Vendor Name					Class			Pay Code		
12436	SHANNA O'DONNELL, FNP ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
082522		08/31/20	08/25/20	09/01/20		129.00	0.00	0.00	129.00 ✓		
	LICENSE RENEWAL										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	12436 SHANNA O'DONNELL, FNP					129.00	0.00	0.00	129.00		
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		
277391 ✓		08/31/20	08/01/20	08/11/20		400.00	0.00	0.00	400.00 ✓		
	ADVERTISING										
277924 ✓		08/31/20	08/01/20	08/11/20		400.00	0.00	0.00	400.00 ✓		
	ADVERTISING										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	10699 SIGN AD, LTD.					800.00	0.00	0.00	800.00		
Vendor#	Vendor Name					Class			Pay Code		
14500	SKYTRON LLC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
CD99174016 ✓		08/31/20	07/14/20	08/14/20		52.00	0.00	0.00	52.00 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	14500 SKYTRON LLC					52.00	0.00	0.00	52.00		
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		
943887063	✓	08/31/20	08/23/20	08/31/20		1,194.00	0.00	0.00	1,194.00 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						S2362	SMITH & NEPHEW	1,194.00	0.00	0.00	1,194.00
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		
10368389	✓	08/31/20	08/24/20	09/18/20		202.80	0.00	0.00	202.80 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						S3940	STERIS CORPORATION	202.80	0.00	0.00	202.80
Vendor#	Vendor Name				Class	Pay Code					
14212	SURGICAL DIRECT SOUTH ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9300	✓	08/31/20	07/28/20	08/28/20		1,155.00	0.00	0.00	1,155.00 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						14212	SURGICAL DIRECT SOUTH	1,155.00	0.00	0.00	1,155.00
Vendor#	Vendor Name				Class	Pay Code					
14524	SYSMEX AMERICA, INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
94378160	✓	08/31/20	08/24/20	08/31/20		527.44	0.00	0.00	527.44 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						14524	SYSMEX AMERICA, INC.	527.44	0.00	0.00	527.44
Vendor#	Vendor Name				Class	Pay Code					
T2204	TEXAS MUTUAL INSURANCE CO ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1003950490	✓	08/31/20	08/24/20	09/13/20		6,450.00	0.00	0.00	6,450.00 ✓		
INSURANCE											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						T2204	TEXAS MUTUAL INSURANCE CO	6,450.00	0.00	0.00	6,450.00
Vendor#	Vendor Name				Class	Pay Code					
T2250	TK ELEVATOR CORPORATION ✓				M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
6000594876	✓	08/31/20	08/12/20	08/25/20		1,700.00	0.00	0.00	1,700.00 ✓		
LABOR/REPAIR											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						T2250	TK ELEVATOR CORPORATION	1,700.00	0.00	0.00	1,700.00
Vendor#	Vendor Name				Class	Pay Code					
T3334	TRINITY PHYSICS CONSULTING LLC ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
035467	✓	08/31/20	07/21/20	08/20/20		1,600.00	0.00	0.00	1,600.00 ✓		
MAMMO EVAL											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						T3334	TRINITY PHYSICS CONSULTING LLC	1,600.00	0.00	0.00	1,600.00
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		
INV10834	✓	08/31/20	07/02/20	08/01/20		5,657.50	0.00	0.00	5,657.50 ✓		

Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		14208	TRUSTED HEALTH, INC	5,657.50	0.00	0.00	5,657.50		
Vendor#	Vendor Name	Class		Pay Code					
11001	ULINE								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
152764274		08/31/20	08/17/20	09/16/20		388.20	0.00	0.00	388.20
SUPPLIES									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		11001	ULINE	388.20	0.00	0.00	388.20		
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
8400402191		08/31/20	08/22/20	09/16/20		40.62	0.00	0.00	40.62
LAUNDRY									
8400402212		08/31/20	08/22/20	09/16/20		1,905.81	0.00	0.00	1,905.81
LAUNDRY									
8400402190		08/31/20	08/22/20	09/16/20		48.15	0.00	0.00	48.15
LAUNDRY									
8400402533		08/31/20	08/25/20	09/19/20		89.99	0.00	0.00	89.99
LAUNDRY									
8400402515		08/31/20	08/25/20	09/19/20		201.59	0.00	0.00	201.59
LAUNDRY									
8400402540		08/31/20	08/25/20	09/19/20		1,878.48	0.00	0.00	1,878.48
LAUNDRY									
8400402555		08/31/20	08/25/20	09/19/20		77.59	0.00	0.00	77.59
LAUNDRY									
8400402517		08/31/20	08/25/20	09/19/20		190.01	0.00	0.00	190.01
LAUNDRY									
8400402514		08/31/20	08/25/20	09/19/20		26.76	0.00	0.00	26.76
LAUNDRY									
8400402518		08/31/20	08/25/20	09/19/20		208.13	0.00	0.00	208.13
LAUNDRY									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		U1064	UNIFIRST HOLDINGS INC	4,667.13	0.00	0.00	4,667.13		
Vendor#	Vendor Name	Class		Pay Code					
U1056	UNIFORM ADVANTAGE	W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
SIV12611244		08/17/20	07/26/20	08/10/20		123.91	0.00	0.00	123.91
UNIFORM									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		U1056	UNIFORM ADVANTAGE	123.91	0.00	0.00	123.91		
Vendor#	Vendor Name	Class		Pay Code					
12208	WAGeworks								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
INV4127993		08/31/20	08/24/20	09/01/20		496.25	0.00	0.00	496.25
ADMIN/COMPLIANCE FEE									
INV4139366		08/31/20	08/24/20	09/01/20		396.50	0.00	0.00	396.50
COMPLIANCE FEE									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		12208	WAGeworks	892.75	0.00	0.00	892.75		

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
10793	WAGeworks, INC. ✓			082522		08/31/20	08/25/20	09/01/20		3,264.15	0.00	0.00	3,264.15 ✓		
PAYROLL DEDUCT															
Vendor Totals:										Number	Name	Gross	Discount	No-Pay	Net
										10793	WAGeworks, INC.	3,264.15	0.00	0.00	3,264.15

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
11110	WERFEN USA LLC ✓			9111191878	✓	08/01/20	07/26/20	08/20/20		1,653.90	0.00	0.00	1,653.90 ✓		
SUPPLIES															
				9111202295	✓	08/24/20	08/17/20	09/17/20		1,154.61	0.00	0.00	1,154.61 ✓		
SUPPLIES															
Vendor Totals:										Number	Name	Gross	Discount	No-Pay	Net
										11110	WERFEN USA LLC	2,808.51	0.00	0.00	2,808.51

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
11400	WEST COAST MEDICAL RESOURCES ✓			INV088703	✓	08/31/20	08/18/20	08/31/20		316.00	0.00	0.00	316.00 ✓		
SUPPLIES															
				INV088858	✓	08/31/20	08/23/20	08/31/20		9.00	0.00	0.00	9.00 ✓		
SUPPLIES															
Vendor Totals:										Number	Name	Gross	Discount	No-Pay	Net
										11400	WEST COAST MEDICAL RESOURCES	325.00	0.00	0.00	325.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	168,506.70	0.00	0.00	168,506.70

pg 1 correction Σ <10.00>
 pg 7 correction Σ <1571.03>
 pg 11 correction Σ <352.08>

 \$ 164,573.59

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

168,506.70 +
 10.00 =
 1,571.03 =
 352.08 =
 168,573.59

ck#196257-194337

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 02 2022

09/02/2022
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

H0031 HEB CREDIT RECEIVABLES DEPT308 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
082522		09/02/20	08/01/20	08/25/20			986.08	0.00	0.00	986.08 ✓

SUPPLIES

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
H0031		HEB CREDIT RECEIVABLES DEPT308	986.08	0.00	0.00	986.08

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	986.08	0.00	0.00	986.08

APPROVED ON

SEP 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CH# 186291

MCKESSON

STATEMENT

As of: 09/02/2022

Page: 002

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

Company: 8000

DC: 8115

As of: 09/02/2022 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:

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 632536

Date: 09/03/2022

Cust: 632536 PLEASE CHECK ANY
Date: 09/03/2022 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
--------------	----------	-------------------	----------------------------------	-------------	---------------	----------------	-----	--------------	-----	-------------------

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 9,176.51 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
18/07/2017

If Paid By 09/06/2022,
Pay This Amount: 8,992.97 USD

If Paid After 09/06/2022,
Pay this Amount: 9,176.51 USD

Due If Paid On Time: 8,992.97

Disc lost if paid late: 183.54

Due If Paid Late: 9,176.51

16*72 +
6*677*46 +
2*244*77 +
54*02 +
8*992*0*

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

McKESSON

STATEMENT

As of: 09/02/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 09/02/2022 Page: 001
Mail to: 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: 7001

Customer: 190813
Date: 09/03/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 09/03/2022 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											
08/31/2022	09/06/2022	7363374605	2017060501	115Invoice	0.07	3.67		3.60 ✓		7363374605	
09/02/2022	09/06/2022	7363890889	2017060763	115Invoice	0.27	13.39		13.12 ✓		7363890889	

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

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

Subtotals: 17.06 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,418.55
08/29/2022

If Paid By 09/06/2022,
Pay This Amount: 16.72 USD

If Paid After 09/06/2022,
Pay this Amount: 17.06 USD

Due If Paid On Time: 16.72 ✓
USD
Disc lost if paid late: 0.34
Due If Paid Late: 17.06
USD

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 09/02/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 09/02/2022
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: 09/03/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 09/03/2022

**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											
18/29/2022	09/06/2022	7362818172	44554518	115Invoice	22.81	1,140.73		1,117.92	✓	7362818172	
18/29/2022	09/06/2022	7362818173	44554518	115Invoice	0.02	0.95		0.93	✓	7362818173	
18/29/2022	09/06/2022	7362818174	44593768	115Invoice	7.64	381.80		374.16	✓	7362818174	
18/29/2022	09/06/2022	7362996135	44619047	195Invoice	0.02	0.95		0.93	✓	7362996135	
18/29/2022	09/06/2022	7362996136	44586966	195Invoice	3.87	193.28		189.41	✓	7362996136	
18/29/2022	09/06/2022	7362996137	44555857	115Invoice	1.98	99.12		97.14	✓	7362996137	
18/29/2022	09/06/2022	7362996138	44595138	115Invoice	0.01	0.32		0.31	✓	7362996138	
18/30/2022	09/06/2022	7363123906	44820673	115Invoice	5.70	284.90		279.20	✓	7363123906	
18/30/2022	09/06/2022	7363276997	44786408	195Invoice	23.62	1,180.97		1,157.35	✓	7363276997	
18/31/2022	09/06/2022	7363376048	44904575	115Invoice		0.02		0.02	✓	7363376048	
18/31/2022	09/06/2022	7363376049	44904575	115Invoice	0.01	0.71		0.70	✓	7363376049	
18/31/2022	09/06/2022	7363386943	44968664	115Invoice	32.99	1,649.57		1,616.58	✓	7363386943	
18/31/2022	09/06/2022	7363569584	44896370	195Invoice	2.90	145.19		142.29	✓	7363569584	
19/01/2022	09/06/2022	7363640587	45034031	115Invoice	11.40	569.80		558.40	✓	7363640587	
19/02/2022	09/06/2022	7363897551	45146336	115Invoice	13.65	682.50		668.85	✓	7363897551	
19/02/2022	09/06/2022	7363897554	45146336	115Invoice	7.02	350.99		343.97	✓	7363897554	
19/02/2022	09/06/2022	7363897555	45212360	115Invoice		0.04		0.04	✓	7363897555	
19/02/2022	09/06/2022	7363897558	45205099	115Invoice	2.64	131.90		129.26	✓	7363897558	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 6,813.74 USD

Future Due: 0.00

Past Due: 0.00

Next Payment 09/06/2022 4,418.55

APPROVED ON

SEP 06 2022

If Paid By 09/06/2022,
Pay This Amount: 6,677.46 USD

If Paid After 09/06/2022,
Pay this Amount: 6,813.74 USD

Due If Paid On Time:
USD 6,677.46 ✓

Disc lost if paid late: 136.28

Due If Paid Late:
USD 6,813.74

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 09/02/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 09/02/2022

Page: 001

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

Mail to:

Comp: 8000

Customer: 464450

Date: 09/03/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450

PLEASE CHECK ANY

Date: 09/03/2022

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											
18/29/2022	09/06/2022	7362802093	55x692738	115Invoice	2.85	142.30		139.45 ✓		7362802093	
18/30/2022	09/06/2022	7363126126	55x695042	115Invoice	2.50	125.13		122.63 ✓		7363126126	
18/31/2022	09/06/2022	7363373567	55x698916	115Invoice	0.51	25.27		24.76 ✓		7363373567	
19/01/2022	09/06/2022	7363623821	55x700422	115Invoice	0.36	17.96		17.60 ✓		7363623821	
19/02/2022	09/06/2022	7363895118	55x703548	115Invoice	38.34	1,917.00		1,878.66 ✓		7363895118	
19/02/2022	09/06/2022	7363895119	55x703652	115Invoice	1.26	62.93		61.67 ✓		7363895119	

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

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

Subtotals: 2,290.59 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,418.55
18/29/2022

If Paid By 09/06/2022,
Pay This Amount:

2,244.77 USD

If Paid After 09/06/2022,
Pay this Amount:

2,290.59 USD

Due If Paid On Time:

USD 2,244.77 ✓

Disc lost if paid late:

45.82

Due If Paid Late:

USD 2,290.59

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 09/02/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 09/02/2022
Mail to:

Page: 001
Comp: 8000

CVS PHCY 8923/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: 835434
Date: 09/03/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835434
Date: 09/03/2022

**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 835434 CVS PHCY 8923/MEM MC PHS											
18/31/2022	09/06/2022	7363380162	1854104	115Invoice	1.10	55.12		54.02 ✓		7363380162	

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

TOTAL: Customer Number 835434 CVS PHCY 8923/MEM MC PHS

Subtotals: 55.12 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,418.55
18/29/2022

If Paid By 09/06/2022,
Pay This Amount: 54.02 USD

If Paid After 09/06/2022,
Pay this Amount: 55.12 USD

Due If Paid On Time: 54.02 ✓
USD
Disc lost if paid late: 1.10
Due If Paid Late: 55.12
USD

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Served 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:	1,665.19
Past Due:	0.00
Total Due:	1,665.19
Account Balance:	1,665.19

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
08-29-2022	09-09-2022	3104253631	167300	Invoice	1.68		0.00	1.68 ✓
08-29-2022	09-09-2022	3104253632	167302	Invoice	231.15		0.00	231.15 ✓
08-29-2022	09-09-2022	3104253633	167303	Invoice	0.27		0.00	0.27 ✓
08-29-2022	09-09-2022	3104253634	167304	Invoice	12.92		0.00	12.92 ✓
08-29-2022	09-09-2022	3104289069	167351	Invoice	469.50		0.00	469.50 ✓
08-30-2022	09-09-2022	3104423894	167361	Invoice	91.79		0.00	91.79 ✓
08-30-2022	09-09-2022	348315287	166917	Invoice	(12.64)		0.00	(12.64) ✓
08-30-2022	09-09-2022	348315288	166917	Invoice	12.25		0.00	12.25 ✓
08-30-2022	09-09-2022	348315295	166983	Invoice	(12.64)		0.00	(12.64) ✓
08-30-2022	09-09-2022	348315296	166983	Invoice	12.25		0.00	12.25 ✓
08-30-2022	09-09-2022	348315486	167166	Invoice	(12.64)		0.00	(12.64) ✓
08-30-2022	09-09-2022	348315487	167166	Invoice	12.25		0.00	12.25 ✓
08-30-2022	09-09-2022	348315494	167175	Invoice	(12.64)		0.00	(12.64) ✓
08-30-2022	09-09-2022	348315495	167175	Invoice	12.25		0.00	12.25 ✓
08-31-2022	09-09-2022	3104564217	167370	Invoice	1.33		0.00	1.33 ✓
09-01-2022	09-09-2022	3104710945	167381	Invoice	825.24		0.00	825.24 ✓
09-01-2022	09-09-2022	3104710946	167382	Invoice	16.43		0.00	16.43 ✓
09-02-2022	09-09-2022	3104876716	167394	Invoice	16.44		0.00	16.44 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,665.19	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
09-02-2022	(438.61)

Reminders

Due Date	Amount
09-09-2022	1,665.19
Total Due:	
	1,665.19

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

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

<input type="checkbox"/>	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	####	ENTER:	
<input type="checkbox"/>	"ENTER YOUR 4-DIGIT PIN"	###		
<input type="checkbox"/>	"MAKE A PAYMENT, PRESS 1"			1
<input type="checkbox"/>	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★		941 #
<input type="checkbox"/>	"IF FEDERAL TAX DEPOSIT ENTER 1"			1
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING YEAR"	★		22
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★		03
	1ST QTR - 03 (MARCH) - Jan, Feb, Mar			
	2ND QTR - 06 (JUNE) - Apr, May, June			
	3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept			
	4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec			
<input type="checkbox"/>	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★		\$ 98.18 #
	"1 TO CONFIRM"			1
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"		0	\$ 79.58 #
	"ENTER W/CENTS AMOUNT OF MEDICARE"			\$ 18.60 #
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"			\$ - #
				\$ -
<input type="checkbox"/>	"6-DIGIT SETTLEMENT DATE"	CHECK	★	
	"1 TO CONFIRM"			1
<input type="checkbox"/>	ACKNOWLEDGEMENT NUMBER			

CALLED IN BY: _____

CALLED IN DATE: _____

CALLED IN TIME: _____

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

ENTER VOID CKS AS NEGATIVE NUMBERS

PAY PERIOD: BEGIN	8/12/2022	VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: END	8/25/2022					
PAY DATE:	9/7/2022					
GROSS PAY:	\$ 641.70			\$ -		\$ 641.70
DEDUCTIONS:						
A/R	\$ -					\$ -
ADVANC	\$ -					\$ -
BOOTS	\$ -					\$ -
SUNLIFE CRITICAL ILLNESS	\$ -					\$ -
SUNLIFE ACCIDENT	\$ -					\$ -
SUNLIFE VISION	\$ -					\$ -
SUNLIFE SHORT TERM DIS	\$ -					\$ -
BCBS VISION	\$ -					\$ -
CAFÉ-D	\$ -					\$ -
CAFÉ-H	\$ -					\$ -
CAFÉ-P	\$ -					\$ -
CANCER	\$ -					\$ -
CHILD	\$ -					\$ -
CLINIC	\$ -					\$ -
COMBIN	\$ -					\$ -
CREDUN	\$ -					\$ -
DENTAL	\$ -					\$ -
DEP-LF	\$ -					\$ -
SUNLIFE TERM LIFE	\$ -					\$ -
SUNLIFE HOSP INDEM	\$ -					\$ -
FED TAX	\$ -					\$ -
FICA-M	\$ 9.30					\$ 9.30
FICA-O	\$ 39.79					\$ 39.79
FIRST C	\$ -					\$ -
FLEX S	\$ -					\$ -
FLX-FE	\$ -					\$ -
GIFT S	\$ -					\$ -
GRP-JN	\$ -					\$ -
GTL	\$ -					\$ -
HOSP-I	\$ -					\$ -
LEGAL	\$ -					\$ -
OTHER	\$ -					\$ -
NATIONAL FARM LIFE	\$ -					\$ -
MED SURCHARGE	\$ -					\$ -
PR FIN	\$ -					\$ -
RELAY	\$ -					\$ -
REPAY	\$ -					\$ -
STONEDF	\$ -					\$ -
STONE	\$ -					\$ -
STONE 2	\$ -					\$ -
STUDEN	\$ -					\$ -
TSA-R	\$ 44.92					\$ 44.92
UW/HOS	\$ -					\$ -
TOTAL DEDUCTIONS:	\$ 94.01	\$ -	\$ -	\$ -	\$ -	\$ 94.01
NET PAY:	\$ 547.69	\$ -	\$ -	\$ -	\$ -	\$ 547.69

TOTAL CAFE 125 PLAN: \$ - Less Exempt:

TAXABLE PAY: \$ 641.70 \$ 641.70

	CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45% \$ 9.30		
FICA - MED (EE)	1.45% \$ 9.30	\$ 9.30	\$ -
FICA - SOC SEC (ER)	6.20% \$ 39.79		
FICA - SOC SEC (EE)	6.20% \$ 39.79	\$ 39.79	\$ -
FED WITHHOLDING	\$ -	\$ -	\$ -

Exempt Amt:

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

TOTAL: \$ -

TAX DEPOSIT:	\$ 98.18	\$ 98.18
FICA - MEDICARE 2.90%	\$ 18.60	\$ 18.60
FICA - SOCIAL SECURITY 12.40%	\$ 79.58	\$ 79.58
FED WITHHOLDING	\$ -	\$ 0.00
TOTAL TAX:	\$ 98.18	\$ 98.18

PREPARED BY: Caitlin Clevenger
 PREPARED DATE: 9/6/2022

Run Date: 09/06/22
 Time: 09:12

MEMORIAL MEDICAL CENTER
 Payroll Register (Bi-Weekly)
 Pay Period 08/12/22 - 08/25/22 Run# 2
 Dept. Sequence

Page 1
 P2REG

Department 060

-- Employee ------- Time -----*-- Deductions -----*															
Num/Type/Name/Pay/Exempt	PayCd	Dept	Hrs	OT	SH	WE	HO	CB	Rate	Gross	Code	Amount			
50163 FT Hrly: 10.3500	K	060	16.00	N		N	N	N	10.3500	165.60	FICA-M	9.30			
MIGDALIA CLARO	P	060	46.00	N		N	N	N	10.3500	476.10					
Fed-Ex: S-00 St-Ex: -00															
----- Total:			62.00	-----						Gross:	641.70	Deductions:	94.01	Net:	547.69

Department Summary

-- Pay Code Summary ------- Deductions Summary -----*										
PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross	Code	Amount
K	EXTENDED-ILLNESS-BANK	16.00	N		N	N	N	165.60	A/R	A/R2 A/R3
P	PAID-TIME-OFF	46.00	N		N	N	N	476.10	ADVANC	AWARDS BCBSVI
									BOOTS	CAFE H CAFE-1
									CAFE-2	CAFE-3 CAFE-4
									CAFE-5	CAFE-C CAFE-D
									CAFE-F	CAFE-H CAFE-I
									CAFE-L	CAFE-P CANCER
									CHILD	CLINIC COMBIN
									CREDUN	DD ADV DENTAL
									DEP-LF	DIS-LF EAT
									EATCSH	FEDTAX FICA-M 9.30
									FICA-O	39.79 FIRSTC FLEX S
									FLX FE	FORT D FUTA
									GIFT S	GRANT GRP-IN
									GIL	HOSP-I ID TFT
									LEAF	LEGAL MASA
									MEALS	METVIS MISC
									MISC/	MMCSHR NATFML
									OTHER	PHI PHI***
									PR FIN	RELAY REPAY
									SAMS	SCRUBS SIGNON
									ST-TX	STONDF STONE
									STONE2	STUDEN SUNACC
									SUNILL	SUNIND SUNLIF
									SUNSTD	SUNVIS SURCHG
									TSA-1	TSA-2 TSA-C
									TSA-P	TSA-R 44.92 TUITION
									UNIFOR	UW/HOS

*----- Department Totals:		62.00	-----		(Gross:	641.70	Deductions:	94.01	Net:	547.69			
Checks Count:-	FT	1	PT	Other	Female	1	Male	Credit	OverAmt	ZeroNet	Term	Total:	1

Run Date: 09/06/22
Time: 09:20

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 08/12/22--08/25/22 Run: 2
Type=NET 10000001 OPERATING - PROSPERITY

Page 1
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
60163	MIGDALIA CLARO	547.69	00063218	09/07/22
		547.69		

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- August 29, 2022 - September 4, 2022**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>
8/26/2022	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	-CitiBank Corporate Card Payment
8/29/2022	PAY PLUS ACHTRANS 452579291 101000695088951	- 3rd Party Payor Fee
8/30/2022	PAY PLUS ACHTRANS 452579291 101000695951770	- 3rd Party Payor Fee
8/30/2022	MCKESSON DRUG AUTO ACH ACH05156598 910000125	- 340B Drug Program Expense
8/31/2022	PAY PLUS ACHTRANS 452579291 101000696960869	- 3rd Party Payor Fee
9/1/2022	PAY PLUS ACHTRANS 452579291 101000697972525	- 3rd Party Payor Fee
9/2/2022	PAY PLUS ACHTRANS 452579291 101000698921511	- 3rd Party Payor Fee
9/2/2022	EXPERTPAY EXPERTPAY 746003411 91000011082834	-Child Support Payment
9/2/2022	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense
9/2/2022	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll
9/2/2022	AUTHNET GATEWAY BILLING 124458178 1040000175	- 3rd Party Payor Fee

<u>Amount</u>	<u>CPSI</u>
3,491.46**	207.14
207.14	63.19
63.19	73.56
4,418.55*	76.38
73.56	104.47
76.38	524.74
104.47	Export Pay
2,290.01	2,290.01
438.61*	
386,258.55*	
29.84	
397,451.76	

WILLIAM LITTLE, CFO
Memorial Medical Center



September 6, 2022

PROSPERITY BANK

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

* Approved 08.31.22 CC
** Approved 08.24.22 CC

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>	<u>Amount</u>
-------------	--------------------	------------------	---------------

WILLIAM LITTLE, CFO
Memorial Medical Center



September 6, 2022

397,451.76	
3,491.46	
4,418.55	
438.61	
386,258.55	
2,844.59	
2,844.59	
2,844.59	
2,844.59	
0.00	

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

09/01/2022

SEP 01 2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

11816 ASHFORD GARDENS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
082622		08/31/20	08/26/20	09/26/20		2,990.88	0.00	0.00	2,990.88

JULY UHC QIPP

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11816	ASHFORD GARDENS	2,990.88	0.00	0.00	2,990.88

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,990.88	0.00	0.00	2,990.88

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 196338

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 01 2022
11:22

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

11828 SOLERA WEST HOUSTON

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
082622		08/31/20	08/26/20	09/26/20		1,404.39	0.00	0.00	1,404.39

JULY UHC QIPP

082922		08/31/20	08/29/20	09/26/20		972.50	0.00	0.00	972.50
--------	--	----------	----------	----------	--	--------	------	------	--------

TRANSFER NH insurance pmt deposited into mmc opent

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11828	SOLERA WEST HOUSTON	2,376.89	0.00	0.00	2,376.89

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,376.89	0.00	0.00	2,376.89

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL#196344

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 01 2022

09/01/2022

11:22

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
082222		08/30/20	08/22/20	09/26/20		183.48	0.00	0.00	183.48
082622	TRANSFER	08/31/20	08/26/20	09/26/20		1,250.97	0.00	0.00	1,250.97

NH insurance pmt deposited into mmc operating

JULY UHC QIPP

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11820	FORTBEND HEALTHCARE CENTER	1,434.45	0.00	0.00	1,434.45

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,434.45	0.00	0.00	1,434.45

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 196341

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 01 2022

09/01/2022

11:24

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
082622		08/31/20	08/26/20	09/26/20		1,460.49	0.00	0.00	1,460.49 ✓

JULY UHC QIPP

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
11832	BROADMOOR AT CREEKSIDE PARK	1,460.49	0.00	0.00	1,460.49	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,460.49	0.00	0.00	1,460.49

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CLC #196340

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 01 2022

11:23

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Class Pay Code

11824 THE CRESCENT

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
082622		08/31/20	08/26/20	09/26/20		1,153.80	0.00	0.00	1,153.80 ✓
	JULY UHC QIPP								
082922		08/31/20	08/29/20	09/26/20		11,556.72	0.00	0.00	11,556.72 ✓

TRANSFER NH insurance pymt deposited into mmmc open

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11824	THE CRESCENT	12,710.52	0.00	0.00	12,710.52

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	12,710.52	0.00	0.00	12,710.52

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 196345

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 01 2022
09/01/2022

CALHOUN COUNTY, TEXAS

11:32

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

11836 GOLDENCREEK HEALTHCARE ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
082422		08/30/20	08/24/20	09/26/20		10,356.75	0.00	0.00	10,356.75 ✓
082522	TRANSFER	08/30/20	08/25/20	09/26/20		44,724.71	0.00	0.00	44,724.71 ✓
	TRANSFER	"	"	"				"	
082622E		08/30/20	08/26/20	09/26/20		1,387.84	0.00	0.00	1,387.84 ✓
	TRANSFER	"	"	"				"	
082622		08/30/20	08/26/20	09/26/20		446.00	0.00	0.00	446.00 ✓
	TRANSFER	"	"	"				"	
082622A		08/30/20	08/26/20	09/26/20		10,459.81	0.00	0.00	10,459.81 ✓
	TRANSFER	"	"	"				"	
082622D		08/30/20	08/26/20	09/26/20		3,863.44	0.00	0.00	3,863.44 ✓
	TRANSFER	"	"	"				"	
082622B		08/30/20	08/26/20	09/26/20		442.46	0.00	0.00	442.46 ✓
	TRANSFER	"	"	"				"	
082622F		08/30/20	08/26/20	09/26/20		867.78	0.00	0.00	867.78 ✓
	TRANSFER	"	"	"				"	
082622C		08/30/20	08/26/20	09/26/20		4,345.00	0.00	0.00	4,345.00 ✓
	TRANSFER	"	"	"				"	
082622G		08/31/20	08/26/20	09/26/20		2,001.27	0.00	0.00	2,001.27 ✓

NH insurance pymt deposited into mmmc operating

JULY UHC QIPP

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	78,895.06	0.00	0.00	78,895.06

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	78,895.06	0.00	0.00	78,895.06

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 196342

RECEIVED BY THE
COUNTY AUDITOR ON
09/01/2022
11:18
SEP 01 2022

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

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CALHOUN COUNTY, TEXAS

Vendor# Vendor Name
12696 GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
082322		08/30/20	08/23/20	09/26/20		813.82	0.00	0.00	813.82 ✓
	TRANSFER	<i>Net insurance pymt deposited into MMC operating</i>							
082422		08/30/20	08/24/20	09/26/20		4,250.68	0.00	0.00	4,250.68 ✓
	TRANSFER	"							
082422A		08/30/20	08/24/20	09/26/20		11,440.80	0.00	0.00	11,440.80 ✓
	TRANSFER	"							
082522A		08/30/20	08/25/20	09/26/20		813.82	0.00	0.00	813.82 ✓
	TRANSFER	"							
082522		08/30/20	08/25/20	09/26/20		2,139.50	0.00	0.00	2,139.50 ✓
	TRANSFER	"							
082622C		08/30/20	08/26/20	09/26/20		1,821.72	0.00	0.00	1,821.72 ✓
	TRANSFER	"							
082622A		08/30/20	08/26/20	09/26/20		4,903.20	0.00	0.00	4,903.20 ✓
	TRANSFER	"							
082622B		08/30/20	08/26/20	09/26/20		10,275.00	0.00	0.00	10,275.00 ✓
	TRANSFER	"							
082622D		08/30/20	08/26/20	09/26/20		28.59	0.00	0.00	28.59 ✓
	TRANSFER	"							
082622		08/30/20	08/26/20	09/26/20		467.99	0.00	0.00	467.99 ✓
	TRANSFER	"							
082622E		08/31/20	08/26/20	09/26/20		965.96	0.00	0.00	965.96 ✓
	JULY UHC QIPP								
082922		08/31/20	08/29/20	09/26/20		2,777.74	0.00	0.00	2,777.74 ✓
	TRANSFER	"							
Vendor Totals						Gross	Discount	No-Pay	Net
12696	GULF POINTE PLAZA					40,698.82	0.00	0.00	40,698.82

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	40,698.82	0.00	0.00	40,698.82

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CIL#146343

RECEIVED BY THE COUNTY AUDITOR ON

SEP 01 2022
09/01/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

0

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
082222		08/30/20	08/22/20	09/26/20		2,644.46	0.00	0.00	2,644.46 ✓
	TRANSFER								
082222A		08/30/20	08/22/20	09/26/20		194.50	0.00	0.00	194.50 ✓
	TRANSFER								
082322		08/30/20	08/23/20	09/26/20		9,184.28	0.00	0.00	9,184.28 ✓
	TRANSFER								
082322A		08/30/20	08/23/20	09/26/20		20.75	0.00	0.00	20.75 ✓
	TRANSFER								
082422A		08/30/20	08/24/20	09/26/20		11,189.78	0.00	0.00	11,189.78 ✓
	TRANSFER								
082422		08/30/20	08/24/20	09/26/20		16,135.34	0.00	0.00	16,135.34 ✓
	TRANSFER								
082422B		08/30/20	08/24/20	09/26/20		389.00	0.00	0.00	389.00 ✓
	TRANSFER								
082422C		08/30/20	08/24/20	09/26/20		4,804.73	0.00	0.00	4,804.73 ✓
	TRANSFER								
082622D		08/30/20	08/26/20	09/26/20		4,279.00	0.00	0.00	4,279.00 ✓
	TRANSFER								
082622		08/30/20	08/26/20	09/26/20		716.92	0.00	0.00	716.92 ✓
	TRANSFER								
082622B		08/30/20	08/26/20	09/26/20		18,288.00	0.00	0.00	18,288.00 ✓
	TRANSFER								
082622A		08/30/20	08/26/20	09/26/20		455.17	0.00	0.00	455.17 ✓
	TRANSFER								
082622C		08/30/20	08/26/20	09/26/20		765.30	0.00	0.00	765.30 ✓
	TRANSFER								
082622E		08/31/20	08/26/20	09/26/20		1,894.10	0.00	0.00	1,894.10 ✓
	JULY UHC QIPP								
082922		08/31/20	08/29/20	08/26/20		2,334.92	0.00	0.00	2,334.92 ✓
	TRANSFER								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	13004	TUSCANY VILLAGE	73,296.25	0.00	0.00	73,296.25

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	73,296.25	0.00	0.00	73,296.25

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL# 196346

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 01 2022

09/01/2022

CALHOUN COUNTY, TEXAS

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
12792	BETHANY SENIOR LIVING								
082322		08/30/20	08/23/20	09/26/20		5,962.57	0.00	0.00	5,962.57 ✓
	TRANSFER	<i>NH insurance amt deposited into MMC operating</i>							
082322A		08/30/20	08/23/20	09/26/20		1,086.00	0.00	0.00	1,086.00 ✓
	TRANSFER	"							
082422A		08/30/20	08/24/20	09/26/20		12,463.78	0.00	0.00	12,463.78 ✓
	TRANSFER	"							
082422		08/30/20	08/24/20	09/26/20		4,689.22	0.00	0.00	4,689.22 ✓
	TRANSFER	"							
082522		08/30/20	08/25/20	09/26/20		4,712.90	0.00	0.00	4,712.90 ✓
	TRANSFER	"							
082622C		08/30/20	08/26/20	09/26/20		18,198.15	0.00	0.00	18,198.15 ✓
	TRANSFER	"							
082622B		08/30/20	08/26/20	09/26/20		3,881.00	0.00	0.00	3,881.00 ✓
	TRANSFER	"							
082622		08/30/20	08/26/20	09/26/20		10,624.84	0.00	0.00	10,624.84 ✓
	TRANSFER	"							
082622A		08/30/20	08/26/20	09/26/20		156.86	0.00	0.00	156.86 ✓
	TRANSFER	"							
082922		08/31/20	08/29/20	09/26/20		5,835.00	0.00	0.00	5,835.00 ✓
	TRANSFER	"							
082922A		08/31/20	08/29/20	09/26/20		33,127.06	0.00	0.00	33,127.06 ✓
	TRANSFER	"							

Vendor Total#	Vendor Name	Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR LIVING	100,737.38	0.00	0.00	100,737.38

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	100,737.38	0.00	0.00	100,737.38

APPROVED ON

SEP 01 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL# 194339

Q

RUN DATE:09/07/22
 TIME:11:11

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 09/07/22 THRU 09/07/22

PAGE 1
 GLCKREG

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	196257	09/07/22	53.61	ADT COMMERCIAL
A/P	196258	09/07/22	370.87	AQUA BEVERAGE COMPANY
A/P	196259	09/07/22	550.00	AZALEA HEALTH
A/P	196260	09/07/22	2,997.00	BAXTER HEALTHCARE
A/P	196261	09/07/22	1,237.32	BECKMAN COULTER INC
A/P	196262	09/07/22	131.95	BEEKLEY CORPORATION
A/P	196263	09/07/22	2,680.00	BUILDING KID STEPS
A/P	196264	09/07/22	146.31	CALHOUN COUNTY
A/P	196265	09/07/22	448.18	CAPITAL ONE
A/P	196266	09/07/22	1,061.83	CARDINAL HEALTH 414, INC.
A/P	196267	09/07/22	1,788.00	CAREFUSION SOLUTIONS, LLC
A/P	196268	09/07/22	2,621.26	CAVALLO ENERGY TEXAS LLC
A/P	196269	09/07/22	264.77	CDW GOVERNMENT, INC.
A/P	196270	09/07/22	14.55	CENTRAL DRUG
A/P	196271	09/07/22	1,699.00	CERVEY, LLC
A/P	196272	09/07/22	590.28	COCA COLA SOUTHWEST BEVERAGES
A/P	196273	09/07/22	612.18	COMBINED INSURANCE
A/P	196274	09/07/22	1,267.04	COVIDIEN
A/P	196275	09/07/22	1,015.40	DATEX OHMEDA, INC.
A/P	196276	09/07/22	1,026.24	DEWITT POTH & SON
A/P	196277	09/07/22	255.00	DOWELL PEST CONTROL
A/P	196278	09/07/22	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	196279	09/07/22	495.00	FASTHEALTH CORPORATION
A/P	196280	09/07/22	3,404.88	FISHER HEALTHCARE
A/P	196281	09/07/22	103.55	FRONTIER
A/P	196282	09/07/22	1,067.77	FUSION CLOUD SERVICES, LLC
A/P	196283	09/07/22	10,111.79	GE PRECISION HEALTHCARE, LLC
A/P	196284	09/07/22	121.96	GENESIS DIAGNOSTICS
A/P	196285	09/07/22	51.53	GETINGE USA SALES LLC
A/P	196286	09/07/22	1,080.00	GREAT LAKES WEST LLC
A/P	196287	09/07/22	700.00	GUERBET, LLC
A/P	196288	09/07/22	125.00	GULF COAST DELIVERY
A/P	196289	09/07/22	3,947.57	GULF COAST PAPER COMPANY
A/P	196290	09/07/22	9.15	HEALTHSTREAM, INC.
A/P	196291	09/07/22	986.08	HEB CREDIT RECEIVABLES DEPT308
A/P	196292	09/07/22	43.05	HENRY SCHEIN INC.
A/P	196293	09/07/22	240.00	INTOXIMETERS INC
A/P	196294	09/07/22	673.86	IRON MOUNTAIN
A/P	196295	09/07/22	1,952.88	J & J HEALTH CARE SYSTEMS, INC
A/P	196296	09/07/22	1,934.87	KCI USA
A/P	196297	09/07/22	495.36	LANGUAGE LINE SERVICES
A/P	196298	09/07/22	675.00	LONESTAR COMMUNICATIONS, IN
A/P	196299	09/07/22	640.86	M G TRUST
A/P	196300	09/07/22	95.33	M.C. JOHNSON COMPANY INC
A/P	196301	09/07/22	401.35	MARKETLAB, INC
A/P	196302	09/07/22	969.97	MCKESSON MEDICAL SURGICAL INC
A/P	196303	09/07/22	11,239.55	MEDICAL DATA SYSTEMS, INC.
A/P	196304	09/07/22	.00	VOIDED
A/P	196305	09/07/22	.00	VOIDED
A/P	196306	09/07/22	.00	VOIDED

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	196307	09/07/22	.00	VOIDED
A/P	196308	09/07/22	12,331.07	MEDLINE INDUSTRIES INC
A/P	196309	09/07/22	105.00	MEMORIAL MEDICAL CLINIC
A/P	196310	09/07/22	181.20	MMC AUXILIARY GIFT SHOP
A/P	196311	09/07/22	.00	VOIDED
A/P	196312	09/07/22	17,716.90	MORRIS & DICKSON CO, LLC
A/P	196313	09/07/22	268.72	NACOGDOCHES TRANSCRIPTION
A/P	196314	09/07/22	109.44	OLYMPUS AMERICA INC
A/P	196315	09/07/22	752.16	ORTHO CLINICAL DIAGNOSTICS
A/P	196316	09/07/22	36.58	PRECISION DYNAMICS CORP (PDC)
A/P	196317	09/07/22	294.30	RAPID PRINTING LLC
A/P	196318	09/07/22	42.88	ROBERT RODRIQUEZ
A/P	196319	09/07/22	1,324.38	SAM'S CLUB DIRECT
A/P	196320	09/07/22	129.00	SHANNA O'DONNELL, FNP
A/P	196321	09/07/22	800.00	SIGN AD, LTD.
A/P	196322	09/07/22	52.00	SKYTRON LLC
A/P	196323	09/07/22	1,194.00	SMITH & NEPHEW
A/P	196324	09/07/22	202.80	STERIS CORPORATION
A/P	196325	09/07/22	1,155.00	SURGICAL DIRECT SOUTH
A/P	196326	09/07/22	527.44	SYSMEX AMERICA, INC.
A/P	196327	09/07/22	6,450.00	TEXAS MUTUAL INSURANCE CO
A/P	196328	09/07/22	1,700.00	TK ELEVATOR CORPORATION
A/P	196329	09/07/22	1,600.00	TRINITY PHYSICS CONSULTING LLC
A/P	196330	09/07/22	5,657.50	TRUSTED HEALTH, INC
A/P	196331	09/07/22	388.20	ULINE
A/P	196332	09/07/22	4,667.13	UNIFIRST HOLDINGS INC
A/P	196333	09/07/22	123.91	UNIFORM ADVANTAGE
A/P	196334	09/07/22	892.75	WAGWORKS
A/P	196335	09/07/22	3,264.15	WAGWORKS, INC.
A/P	196336	09/07/22	2,808.51	WERFEN USA LLC
A/P	196337	09/07/22	325.00	WEST COAST MEDICAL RESOURCES
A/P	196338	09/07/22	2,990.88	ASHFORD GARDENS
A/P	196339	09/07/22	100,737.38	BETHANY SENIOR LIVING
A/P	196340	09/07/22	1,460.49	BROADMOOR AT CREEKSIDE PARK
A/P	196341	09/07/22	1,434.45	FORTBEND HEALTHCARE CENTER
A/P	196342	09/07/22	78,895.06	GOLDENCREEK HEALTHCARE
A/P	196343	09/07/22	40,698.82	GULF POINTE PLAZA
A/P	196344	09/07/22	2,376.89	SOLERA WEST HOUSTON
A/P	196345	09/07/22	12,710.52	THE CRESCENT
A/P	196346	09/07/22	73,296.25	TUSCANY VILLAGE
TOTALS:			482,160.41	

0.6

Payables 166,573.59 +
critical 986-08 -
 2,990-88 +
 2,376-89 +
 1,434-45 +
NH 1,460-49 -
Transfers 12,710-52 +
 78,895-06 +
 40,698-82 +
 73,296-25 +
 100,737-38 +
 482,160-41 +

APPROVED ON

SEP 07 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

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

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000252

Date 9/7/22

88-2265/1131

**PAY
TO THE
ORDER OF**

Bethany

\$ 1347.34

One thousand three hundred forty seven & 34/100 DOLLARS



**PROSPERITY
BANK**

County auditor

FOR Medicare repayment


County Treasurer
Security features are included. Details on back.

Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 9/6/2022

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		99,762.10	99,643.41	128,435.53		128,554.22	86,698.02
						Bank Balance	128,554.22
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP QIPP	27,213.46
						MOLINA QIPP	14,503.96
						July Interest	18.69
						August Interest	20.09
						September Interest	
						Adjust Balance/Transfer Amt	86,698.02
Broadmoor		123,008.91	122,894.56	95,844.23		95,958.58	78,345.02
						Bank Balance	95,958.58
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP QIPP	11,392.73
						MOLINA QIPP	6,084.36
						July Interest	14.35
						August Interest	22.12
						September Interest	
						Adjust Balance/Transfer Amt	78,345.02
Crescent		110,451.01	110,335.74	107,056.14		107,171.41	91,687.00
						Bank Balance	107,171.41
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP QIPP	9,132.06
						MOLINA QIPP	4,867.73
						MEDICARE REPAYMENT TO BETHANY	1,347.34
						July Interest	15.27
						August Interest	22.01
						September Interest	
						Adjust Balance/Transfer Amt	91,687.00
Fort Bend		61,993.49	61,887.74	73,284.32		73,390.07	56,387.33
						Bank Balance	73,390.07
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP QIPP	11,013.27
						MOLINA QIPP	5,870.01
						July Interest	5.75
						August Interest	13.71
						September Interest	
						Adjust Balance/Transfer Amt	56,387.33
Solera at W Houston		183,891.39	183,773.85	122,489.28		122,606.82	105,893.18
						Bank Balance	122,606.82
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP QIPP	10,805.76
						MOLINA QIPP	5,759.30
						July Interest	17.54
						August Interest	31.04
						September Interest	
						Adjust Balance/Transfer Amt	105,893.18
TOTAL TRANSFERS							419,010.55

86,698.02 +
 78,345.02 +
 91,687.00 + / Fort Bend / Broadmoor
 56,387.33 +
 105,893.18 +
 419,010.55 =

APPROVED ON
SEP 06 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Approved: 
 WILLIAM LITTLE, CFO
 9/6/2022

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

Ashford Gardens	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
8/29/2022 Molina HC of TX HCCLAIMPMT PN1326436189 4200	-	215.70	-	-	-	-	215.70	
8/29/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	11,451.52	-	-	-	-	11,451.52	
8/29/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	4,513.48	-	-	-	-	4,513.48	
8/30/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	76.67	-	-	-	-	76.67	
8/31/2022 Added to Account	-	20.09	-	-	-	-	20.09	
8/31/2022 AMERIGROUP CORPO E-PAYMENT EES2420026 111000	-	28,705.51	25,721.40	2,984.11	-	-	28,705.51	
9/1/2022 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	99,643.41	-	-	-	-	-	99,643.41	
9/1/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	5,740.00	-	-	-	-	5,740.00	
9/1/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	35.19	-	-	-	-	35.19	
9/2/2022 Deposit	-	62,384.90	-	-	-	-	62,384.90	
9/2/2022 MOLINA HEALTHCAR MOLINAACH 01133091 42000015	-	15,292.47	13,715.45	1,577.02	-	-	15,292.47	
	99,643.41	128,435.53	39,436.85	4,561.13	-	-	144,641.49	

Broadmoor	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
8/29/2022 Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	4,692.21	-	-	-	-	4,692.21	
8/29/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,921.59	-	-	-	-	1,921.59	
8/29/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2	-	4,100.68	-	-	-	-	4,100.68	
8/30/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	10,373.10	-	-	-	-	10,373.10	
8/31/2022 Added to Account	-	22.12	-	-	-	-	22.12	
8/31/2022 Molina HC of TX HCCLAIMPMT PN1669860433 4200	-	3,792.29	-	-	-	-	3,792.29	
8/31/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	10,188.85	-	-	-	-	10,188.85	
8/31/2022 HUMANA CHA DISB HCCLAIMPMT 390861 4200001702	-	395.00	-	-	-	-	395.00	
8/31/2022 AMERIGROUP CORPO E-PAYMENT EES2420029 111000	-	12,144.82	10,640.64	1,504.18	-	-	12,144.82	
9/1/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	122,894.56	-	-	-	-	-	122,894.56	
9/1/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	12,021.66	-	-	-	-	12,021.66	
9/2/2022 Deposit	-	29,697.11	-	-	-	-	29,697.11	
9/2/2022 MOLINA HEALTHCAR MOLINAACH 01133574 42000015	-	6,494.80	5,673.92	820.88	-	-	6,494.80	
	122,894.56	95,844.23	16,314.56	2,325.06	-	-	141,973.85	

Crescent	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
8/29/2022 PNC-ECHO HCCLAIMPMT 746003411 41000123303154	-	190.63	-	-	-	-	190.63	
8/29/2022 UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384	-	6,029.50	-	-	-	-	6,029.50	
8/29/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,115.49	-	-	-	-	2,115.49	
8/29/2022 DEVOTED HEALTH P HCCLAIMPMT 121140391093941	-	3,405.00	-	-	-	-	3,405.00	
8/29/2022 DEVOTED HEALTH P HCCLAIMPMT 121140391093939	-	2,400.00	-	-	-	-	2,400.00	
8/30/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	3,700.00	-	-	-	-	3,700.00	
8/30/2022 DEVOTED HEALTH P HCCLAIMPMT 121140392829349	-	800.00	-	-	-	-	800.00	
8/31/2022 Added to Account	-	22.01	-	-	-	-	22.01	
8/31/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	9,456.86	-	-	-	-	9,456.86	
8/31/2022 AMERIGROUP CORPO E-PAYMENT EES2420028 111000	-	9,716.40	8,547.72	1,168.68	-	-	9,716.40	
9/1/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	110,335.74	-	-	-	-	-	110,335.74	
9/1/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	2,875.50	-	-	-	-	2,875.50	
9/1/2022 HNB - ECHO HCCLAIMPMT 746003411 440000219064	-	2,175.82	-	-	-	-	2,175.82	
9/1/2022 NOVITAS SOLUTION HCCLAIMPMT 676323 4200001179	-	11,864.96	-	-	-	-	11,864.96	
9/2/2022 Deposit	-	31,107.04	-	-	-	-	31,107.04	
9/2/2022 MOLINA HEALTHCAR MOLINAACH 01133536 42000015	-	5,177.55	4,557.91	619.64	-	-	5,177.55	
9/2/2022 KS PLAN ADMINIST HCCLAIMPMT 14995 1110000245	-	10,000.00	-	-	-	-	10,000.00	
9/2/2022 NOVITAS SOLUTION HCCLAIMPMT 676323 420000132	-	819.38	-	-	-	-	819.38	
9/2/2022 DEVOTED HEALTH P HCCLAIMPMT 121140398598170	-	2,400.00	-	-	-	-	2,400.00	
9/2/2022 DEVOTED HEALTH P HCCLAIMPMT 121140398598168	-	2,800.00	-	-	-	-	2,800.00	
	110,335.74	107,056.14	13,105.63	1,788.32	-	-	121,170.09	

Port Road	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
8/29/2022 MANAGEANDNET1718 MNS PMNT 000000000004294 41	-	3,316.50	-	-	-	-	3,316.50	
8/29/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	3,377.60	-	-	-	-	3,377.60	
8/29/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2	-	2,723.00	-	-	-	-	2,723.00	
8/29/2022 AARP Supplementa HCCLAIMPMT 746003411 124384	-	11,679.18	-	-	-	-	11,679.18	
8/30/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	4,972.24	-	-	-	-	4,972.24	
8/31/2022 Added to Account	-	13.71	-	-	-	-	13.71	
8/31/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	776.90	-	-	-	-	776.90	
8/31/2022 AMERIGROUP CORPO E-PAYMENT EES2420025 111000	-	11,640.17	10,386.36	1,253.81	-	-	11,640.17	
9/1/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	61,887.74	-	-	-	-	-	61,887.74	
9/1/2022 MANAGEANDNET1718 MNS PMNT 000000000004294 41	-	67.50	-	-	-	-	67.50	
9/2/2022 Deposit	-	28,515.84	-	-	-	-	28,515.84	
9/2/2022 MOLINA HEALTHCAR MOLINAACH 01133226 42000015	-	6,201.68	5,538.33	663.35	-	-	6,201.68	
	61,887.74	73,284.32	15,924.69	1,917.16	-	-	79,026.27	

Solera at West Houston	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
8/29/2022 PNC-ECHO HCCLAIMPMT 746003411 41000123303152	-	1,525.04	-	-	-	-	-	1,525.04
8/29/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	1,274.00	-	-	-	-	-	1,274.00
8/29/2022 HNB - ECHO HCCLAIMPMT 746003411 440000295527	-	15,867.95	-	-	-	-	-	15,867.95
8/29/2022 HNB - ECHO HCCLAIMPMT 746003411 440000294997	-	1,334.41	-	-	-	-	-	1,334.41
8/29/2022 Amerigroup TXSC HCCLAIMPMT 3188043463 111000	-	7,248.60	-	-	-	-	-	7,248.60
8/29/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	3,058.75	-	-	-	-	-	3,058.75
8/29/2022 HUMANA INS CO HCCLAIMPMT 390862 830000519775	-	1,185.00	-	-	-	-	-	1,185.00
8/29/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001269	-	2,790.00	-	-	-	-	-	2,790.00
8/29/2022 HEALTH HUMAN SVC HCCLAIMPMT 174600341133007 2	-	710.80	-	-	-	-	-	710.80
8/30/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	248.11	-	-	-	-	-	248.11
8/30/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	677.92	-	-	-	-	-	677.92
8/30/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	444.53	-	-	-	-	-	444.53
8/30/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	564.58	-	-	-	-	-	564.58
8/30/2022 HUMANA INS CO HCCLAIMPMT 390862 830000561647	-	5,530.00	-	-	-	-	-	5,530.00
8/30/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001472	-	5,115.00	-	-	-	-	-	5,115.00
8/31/2022 Added to Account	-	31.04	-	-	-	-	-	31.04
8/31/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	6,157.26	-	-	-	-	-	6,157.26
8/31/2022 AMERIGROUP CORPO E-PAYMENT EES2420027 111000	-	11,518.59	10,092.96	1,425.59	-	-	10,805.76	712.80
9/1/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	183,773.85	-	-	-	-	-	-	-
9/1/2022 MANAGEANDNET1718 MNS PMNT 00000000002482 41	-	11,314.00	-	-	-	-	-	11,314.00
9/1/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	104.05	-	-	-	-	-	104.05
9/1/2022 CIGNA HCCLAIMPMT 1497143259 91000015955783	-	2,917.50	-	-	-	-	-	2,917.50
9/2/2022 Deposit	-	27,635.28	-	-	-	-	-	27,635.28
9/2/2022 MOLINA HEALTHCAR MOLINAACH 01133500 42000015	-	6,136.72	5,381.88	754.84	-	-	5,759.30	377.42
9/2/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	1,550.04	-	-	-	-	-	1,550.04
9/2/2022 NOVITAS SOLUTION HCCLAIMPMT 676310 420000132	-	7,550.15	-	-	-	-	-	7,550.15
TOTALS	183,773.85	122,489.28	15,474.84	2,180.43	-	-	16,565.06	105,924.23
TOTALS	578,535.30	527,109.50	100,256.57	12,772.10	-	-	106,642.62	420,466.88

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

DDA

Data reported as of Sep 6, 2022


Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$4,701,817.22	\$4,808,595.44	\$4,701,817.22	\$4,843,518.7
*4551 CAL CO INDIGENT HEALTHCARE	\$6,143.87	\$6,143.87	\$6,143.87	\$6,143.8
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$64,250.12	\$80,689.36	\$64,250.12	\$8,479.2
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.61	\$536.61	\$536.61	\$536.6
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$3,538,665.91	\$3,543,856.69	\$3,538,665.91	\$4,109,790.0
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.99	\$431.99	\$431.99	\$431.9
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$128,554.22 ✓	\$134,020.98	\$128,554.22	\$50,876.8
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$95,958.58 ✓	\$97,779.67	\$95,958.58	\$59,766.6
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$107,171.41 ✓	\$117,953.29	\$107,171.41	\$54,867.4
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$73,390.07 ✓	\$73,390.07	\$73,390.07	\$38,672.5
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$122,606.82 ✓	\$145,747.89	\$122,606.82	\$79,734.6
*2998 MMC -MONEY MARKET FUND	\$295,703.93	\$295,703.93	\$295,703.93	\$295,703.9
*5506 MMC -NH BETHANY SENIOR LIVING	\$120,976.09	\$120,976.09	\$120,976.09	\$86,066.1
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$29,257.22	\$65,761.68	\$29,257.22	\$4,532.0
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$5,242.92	\$6,118.60	\$5,242.92	\$4,913.9
*3407 MMC -NH TUSCANY VILLAGE	\$112,927.46	\$119,484.72	\$112,927.46	\$43,002.8

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 9/6/2022

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		47,469.77	47,356.74	64,137.09		64,250.12	64,119.68
						Bank Balance	64,250.12
						Variance	-
						Leave in Balance	100.00

July Interest	13.03
August Interest	17.41
September Interest	<u>-30.44</u>
Adjust Balance/Transfer Amt	<u>64,119.68</u>

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 9/6/2022

APPROVED ON
SEP 06 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 Sep 6, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$4,701,817.22	\$4,808,595.44	\$4,701,817.22	\$4,843,518.7
*4551 CAL CO INDIGENT HEALTHCARE	\$6,143.87	\$6,143.87	\$6,143.87	\$6,143.8
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$64,250.12 ✓	\$80,689.36	\$64,250.12	\$8,479.2
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.61	\$536.61	\$536.61	\$536.6
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$3,538,665.91	\$3,543,856.69	\$3,538,665.91	\$4,109,790.0
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.99	\$431.99	\$431.99	\$431.9
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$128,554.22	\$134,020.98	\$128,554.22	\$50,876.8
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$95,958.58	\$97,779.67	\$95,958.58	\$59,766.6
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$107,171.41	\$117,953.29	\$107,171.41	\$54,867.4
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$73,390.07	\$73,390.07	\$73,390.07	\$38,672.5
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$122,606.82	\$145,747.89	\$122,606.82	\$79,734.6
*2998 MMC -MONEY MARKET FUND	\$295,703.93	\$295,703.93	\$295,703.93	\$295,703.9
*5506 MMC -NH BETHANY SENIOR LIVING	\$120,976.09	\$120,976.09	\$120,976.09	\$86,066.1
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$29,257.22	\$65,761.68	\$29,257.22	\$4,532.0
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$5,242.92	\$6,118.60	\$5,242.92	\$4,913.9
*3407 MMC -NH TUSCANY VILLAGE	\$112,927.46	\$119,484.72	\$112,927.46	\$43,002.8

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 9/6/2022

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		3,554.73		1,688.19			5,242.92	5,136.81
						Bank Balance	5,242.92	
						Variance		
						Leave in Balance	100.00	

July Interest 2.32
 August Interest 3.79
 September Interest
 Adjust Balance/Transfer Amt 5,136.81

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza-Medicare/Medicaid		145,377.09	145,267.24	29,147.37			29,257.22	29,133.98
						Bank Balance	29,257.22	
						Variance		
						Leave in Balance	100.00	

July Interest 9.85
 August Interest 13.39
 September Interest
 Adjust Balance/Transfer Amt 29,133.98

Routine Information for Gulf Pointe Plaza:



TOTAL TRANSFERS 34,270.79

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 9/6/2022

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
8/29/2022 HNB - ECHO HCCLAIMPMT 746003411 440000295518	-	1,160.38	-	-	-	-	-	1,160.38
8/29/2022 HNB - ECHO HCCLAIMPMT 746003411 440000295518	-	19.60	-	-	-	-	-	19.60
8/29/2022 HNB - ECHO HCCLAIMPMT 746003411 440000294997	-	23.52	-	-	-	-	-	23.52
8/30/2022 HNB - ECHO HCCLAIMPMT 746003411 440000240561	-	49.00	-	-	-	-	-	49.00
8/31/2022 Added to Account	-	3.79	-	-	-	-	-	3.79
8/31/2022 HNB - ECHO HCCLAIMPMT 746003411 440000282104	-	102.91	-	-	-	-	-	102.91
9/2/2022 AETNA AS01 HCCLAIMPMT 1922092790 51000012608	-	328.99	-	-	-	-	-	328.99
	-	1,688.19	-	-	-	-	-	1,688.19

Gulf Pointe Plaza-Medicare/Medicaid

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
8/29/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001	-	2,240.00	-	-	-	-	-	2,240.00
8/29/2022 WPS-TMEP CONTRAC HCCLAIMPMT 2301887045 21000	-	1,167.00	-	-	-	-	-	1,167.00
8/30/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001395132	-	1,001.77	-	-	-	-	-	1,001.77
8/31/2022 Added to Account	-	13.99	-	-	-	-	-	13.99
9/1/2022 WIRE OUT HMG SERVICES, LLC	145,267.24	-	-	-	-	-	-	-
9/2/2022 Deposit	-	24,725.21	-	-	-	-	-	24,725.21
	145,267.24	29,147.37	-	-	-	-	-	29,147.37
	145,267.24	30,835.56	-	-	-	-	-	30,835.56

Quick View

Select Quick View Accounts
Account Number / Name

Account Type



Select Group
Groups

DDA

Data reported as of Sep 6, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$4,701,817.22	\$4,808,595.44	\$4,701,817.22	\$4,843,518.7
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$6,143.87	\$6,143.87	\$6,143.87	\$6,143.87
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$64,250.12	\$80,689.36	\$64,250.12	\$8,479.2
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.61	\$536.61	\$536.61	\$536.61
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$3,538,665.91	\$3,543,856.69	\$3,538,665.91	\$4,109,790.0
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.99	\$431.99	\$431.99	\$431.99
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$128,554.22	\$134,020.98	\$128,554.22	\$50,876.8
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$95,958.58	\$97,779.67	\$95,958.58	\$59,766.6
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$107,171.41	\$117,953.29	\$107,171.41	\$54,867.4
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$73,390.07	\$73,390.07	\$73,390.07	\$38,672.5
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$122,606.82	\$145,747.89	\$122,606.82	\$79,734.6
<u>*2998</u> MMC -MONEY MARKET FUND	\$295,703.93	\$295,703.93	\$295,703.93	\$295,703.9
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$120,976.09	\$120,976.09	\$120,976.09	\$86,066.1
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$29,257.22 ✓	\$65,761.68	\$29,257.22	\$4,532.0
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$5,242.92 ✓	\$6,118.60	\$5,242.92	\$4,913.9
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$112,927.46	\$119,484.72	\$112,927.46	\$43,002.8

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscan Transfer
 Prosperity Accounts
 9/6/2022

Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
<u>Nursing Home</u> <u>Tuscany Village</u>	254,510.81	✓ 254,410.81	✓ 112,827.46	✓		112,927.46	88,250.82
					Bank Balance	112,927.46	✓
					Variance		
					Leave in Balance	100.00	
					AMERIGROUP QIPP	16,032.28	✓
					MOLINA QIPP	8,544.36	✓
					Adjust Balance/Transfer Amt	88,250.82	✓

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

Approved:  9/6/2022
 WILLIAM LITTLE, CFO

APPROVED ON

SEP 06 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	
8/29/2022 Molina HC of TX HCCLAIMPMT PN1275717894 4200	-	3,545.41					-	3,545.41
8/30/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000172	-	2,208.47					-	2,208.47
8/31/2022 Added to Account	-	23.17					-	23.17
8/31/2022 Molina HC of TX HCCLAIMPMT PN1275717894 4200	-	2,394.17					-	2,394.17
8/31/2022 AMERIGROUP CORPO E-PAYMENT EE52420030 111000	-	16,983.79	15,080.76	1,903.03			16,032.28	951.52
9/1/2022 WIRE OUT LINBAR ENTERPRISES, LLC	254,410.81	-					-	-
9/1/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000179	-	17,747.85					-	17,747.85
9/2/2022 Deposit	-	46,210.57					-	46,210.57
9/2/2022 MOLINA HEALTHCAR MOLINAACH 01133569 42000015	-	9,047.19	8,041.53	1,005.66			8,544.36	502.83
9/2/2022 KS PLAN ADMINIST HCCLAIMPMT 179 111000024589	-	8,360.00					-	8,360.00
9/2/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000132	-	6,306.84					-	6,306.84
	254,410.81	112,827.46	23,122.29	2,908.69	-	-	24,576.64	88,250.83

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type



DDA

Data reported as of Sep 6, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$4,701,817.22	\$4,808,595.44	\$4,701,817.22	\$4,843,518.7
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$6,143.87	\$6,143.87	\$6,143.87	\$6,143.87
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$64,250.12	\$80,689.36	\$64,250.12	\$8,479.22
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.61	\$536.61	\$536.61	\$536.61
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$3,538,665.91	\$3,543,856.69	\$3,538,665.91	\$4,109,790.00
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.99	\$431.99	\$431.99	\$431.99
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$128,554.22	\$134,020.98	\$128,554.22	\$50,876.87
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$95,958.58	\$97,779.67	\$95,958.58	\$59,766.61
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$107,171.41	\$117,953.29	\$107,171.41	\$54,867.40
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$73,390.07	\$73,390.07	\$73,390.07	\$38,672.50
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$122,606.82	\$145,747.89	\$122,606.82	\$79,734.60
<u>*2998</u> MMC -MONEY MARKET FUND	\$295,703.93	\$295,703.93	\$295,703.93	\$295,703.93
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$120,976.09	\$120,976.09	\$120,976.09	\$86,066.10
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$29,257.22	\$65,761.68	\$29,257.22	\$4,532.00
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$5,242.92	\$6,118.60	\$5,242.92	\$4,913.90
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$112,927.46 ✓	\$119,484.72	\$112,927.46	\$43,002.80

Memorial Medical Center
 Nursing Home UPL
 Weekly HSL Transfer
 Prosperity Accounts
 9/6/2022

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		237,397.78	239,164.28	122,742.59			120,976.09	120,822.50
						Bank Balance	120,976.09	
						Variance		
						Leave in Balance	100.00	

July Interest	30.43	
August Interest	23.16	
September Interest		
Adjust Balance/Transfer Amt	120,822.50	

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 9/6/2022

Bethany Senior Living

MMC PORTION

	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
8/29/2022 Deposit	-	14,901.11						14,901.11
8/29/2022 Deposit	-	3,600.56						3,600.56
8/29/2022 HNB - ECHO HCCLAIMPMT 746003411 440000294997	-	5,601.27						5,601.27
8/30/2022 Deposit	-	903.34						903.34
8/30/2022 Deposit	-	37,276.75						37,276.75
8/31/2022 Added to Account	-	23.16						23.16
8/31/2022 Deposit	-	1,377.85						1,377.85
8/31/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000173	-	11,420.77						11,420.77
9/1/2022 ck337 <i>Returned check</i>	1,896.93	-						-
9/1/2022 WIRE OUT PORT LAVACA NH, LLC	237,267.35	-						-
9/1/2022 Deposit	-	3,844.83						3,844.83
9/1/2022 Deposit	-	8,883.00						8,883.00
9/2/2022 Deposit	-	23,951.19						23,951.19
9/2/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000132	-	10,958.76						10,958.76
	239,164.28	122,742.59	-	-	-	-	-	122,742.59

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type



DDA

Data reported as of Sep 6, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 15	\$4,701,817.22	\$4,808,595.44	\$4,701,817.22	\$4,843,518.7
*4551 CAL CO INDIGENT HEALTHCARE	\$6,143.87	\$6,143.87	\$6,143.87	\$6,143.8
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$64,250.12	\$80,689.36	\$64,250.12	\$8,479.2
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.61	\$536.61	\$536.61	\$536.6
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$3,538,665.91	\$3,543,856.69	\$3,538,665.91	\$4,109,790.0
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.99	\$431.99	\$431.99	\$431.9
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$128,554.22	\$134,020.98	\$128,554.22	\$50,876.8
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$95,958.58	\$97,779.67	\$95,958.58	\$59,766.6
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$107,171.41	\$117,953.29	\$107,171.41	\$54,867.4
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$73,390.07	\$73,390.07	\$73,390.07	\$38,672.5
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$122,606.82	\$145,747.89	\$122,606.82	\$79,734.6
*2998 MMC -MONEY MARKET FUND	\$295,703.93	\$295,703.93	\$295,703.93	\$295,703.9
*5506 MMC -NH BETHANY SENIOR LIVING	\$120,976.09	\$120,976.09	\$120,976.09	\$86,066.1
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$29,257.22	\$65,761.68	\$29,257.22	\$4,532.0
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$5,242.92	\$6,118.60	\$5,242.92	\$4,913.9
*3407 MMC -NH TUSCANY VILLAGE	\$112,927.46	\$119,484.72	\$112,927.46	\$43,002.8

MEMORIAL MEDICAL CENTER
CHECK REQUEST - *Ashford*

P
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Y
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E
MEMORIAL MEDICAL CENTER

Date Requested: 9/6/22

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK#01183

FOR ACCT. USE ONLY

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

AMOUNT \$41,717.42

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AND MOLINA JULY QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST - *Broadmoor*

P
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MEMORIAL MEDICAL CENTER

Date Requested: 9/6/22

APPROVED ON
SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
Clk#000216

FOR ACCT. USE ONLY

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

AMOUNT \$17,477.09

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AND MOLINA JULY QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST - *Crescent*

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MEMORIAL MEDICAL CENTER

Date Requested: 9/6/22

FOR ACCT. USE ONLY

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

APPROVED ON
SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK # 000251
G/L NUMBER: 10255040

AMOUNT \$13,999.79

EXPLANATION: AMERIGROUP AND MOLINA JULY QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST - *Furt Bud*

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MEMORIAL MEDICAL CENTER

Date Requested: 9/6/22

APPROVED ON
SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK # 000140

FOR ACCT. USE ONLY	
<input type="checkbox"/>	Imprest Cash
<input type="checkbox"/>	A/P Check
<input type="checkbox"/>	Mail Check to Vendor
<input type="checkbox"/>	Return Check to Dept

AMOUNT \$16,883.28

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AND MOLINA JULY QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST - *Solen*

P
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MEMORIAL MEDICAL CENTER

Date Requested: 9/6/22

APPROVED ON

SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CIC# 001246

FOR ACCT. USE ONLY


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

AMOUNT \$16,565.06

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AND MOLINA JULY QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST - *Tuscany*

P MEMORIAL MEDICAL CENTER Date Requested: 9/6/22
A _____
Y _____
E _____
E _____

FOR ACCT. USE ONLY

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

APPROVED ON
SEP 06 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CV# 1108

AMOUNT \$24,576.64
S/L NUMBER: 10255040

EXPLANATION: AMERIGROUP AND MOLINA JULY QIPP

REQUESTED BY: Mayra Martinez AUTHORIZED BY: 

8

RUN DATE:09/07/22
TIME:09:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/07/22 THRU 09/07/22

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
NHA	001183	09/07/22	41,717.42	MEMORIAL MEDICAL CENTER <i>Ashford</i>
TOTALS:			41,717.42	

APPROVED ON

SEP 07 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RUN DATE:09/07/22
TIME:09:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/07/22 THRU 09/07/22

PAGE 2
GLCKREG

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

NHB 000216 09/07/22 17,477.09 MEMORIAL MEDICAL CENTER *Bradmar*
TOTALS: 17,477.09

APPROVED ON

SEP 07 2022

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

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RUN DATE:09/07/22
TIME:09:46

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/07/22 THRU 09/07/22

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHC 000251 09/07/22 13,999.79 MEMORIAL MEDICAL CENTER
NHC 000252 09/07/22 1,347.34 BETHANY
TOTALS: 15,347.13

Crescent

APPROVED ON

SEP 07 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:09/07/22
TIME:09:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/07/22 THRU 09/07/22

PAGE 4
GLCKREG

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

NHF 000190 09/07/22 16,883.28 MEMORIAL MEDICAL CENTER *Fort Bend*
TOTALS: 16,883.28

APPROVED ON

SEP 07 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:09/07/22
TIME:09:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/07/22 THRU 09/07/22

PAGE 5
GLCKREG

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

NHS 001246 09/07/22 16,565.06 MEMORIAL MEDICAL CENTER *Sulem*
TOTALS: 16,565.06

APPROVED ON

SEP 07 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:09/07/22
TIME:09:41

MEMORIAL MEDICAL CENTER
CHECK REGISTER
09/07/22 THRU 09/07/22

PAGE 6
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

TUS 001108 09/07/22 24,576.64 MEMORIAL MEDICAL CENTER
TOTALS: 24,576.64

Tuscany

APPROVED ON

SEP 07 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

NH ASHFORD
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001183

Date 9/7/22 88-2265/1131

PAY
TO THE
ORDER OF

Memorial Medical Center

\$ 41,717.42

Fourty one thousand Seven hundred seventeen & 42/100 DOLLARS



PROSPERITY
BANK

County Auditor

County Treasurer

FOR Amerigroup & Molina July clipp

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

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

000216

Date 9/7/22 88-2265/1131

PAY TO THE ORDER OF Memorial Medical Center \$ 17,477.09

Seventeen Thousand four hundred Seventy Seven & 09/100 DOLLARS

PROSPERITY BANK

County Auditor

County Treasurer

Molina - ~~110~~ 6084.34
FOR Amerigroup - 11,392.73

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

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

000251

Date 9/7/22 88-2265/1131

PAY TO THE ORDER OF Memorial Medical Center \$ 13,999.79

Thirteen thousand Nine hundred Ninety nine & 79/100 DOLLARS

PROSPERITY BANK

County Auditor

County Treasurer

Molina - 4867.73
FOR Amerigroup - 9132.06

MEMORIAL MEDICAL CENTER

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

000190

Date 9/7/22

88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Center

\$ 16,883.28

Sixteen thousand Eight hundred Eighty three & 28/100 DOLLARS



molina- 5870.01
FOR Amerigroup- 11013.27

County Auditor

County Treasurer
Included. Details on back.

MEMORIAL MEDICAL CENTER

NH SOLERA
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001246

Date 9/7/22

88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Center

\$ 16,565.06

Sixteen thousand Five hundred Sixty five & 06/100 DOLLARS



molina- 5159.30
FOR Amerigroup- 10805.76

County Auditor

County Treasurer
Included. Details on back.

MEMORIAL MEDICAL CENTER 022020
NH TUSCANY VILLAGE

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

1108

88-2265/1131-87

DATE 9/07/22



PAY TO THE ORDER OF Memorial Medical Center

\$ 24,576.64

Twenty four thousand Five hundred Seventy six & 64/100 DOLLARS



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

FOR Amerigroup- 11032.28 molina- 8544.36

County Auditor

County Treasurer

QIPP Payment to MMC from Nursing Facilities

Commissioner's Court

9/7/2022

NH Name	From Bank Acct #	Ck #	Payee	GL #	AMERIGROUP JULY	MOLINA JULY	TOTAL	Date
Ashford	10000018 - Prosperity		MMC -Prosperity Operating #10000001	10255040	27,213.46	14,503.96	41,717.42	9/7/2022
Broadmoor	10000019 - Prosperity		MMC -Prosperity Operating #10000001	10255040	11,392.73	6,084.36	17,477.09	9/7/2022
Crescent	10000020 - Prosperity		MMC -Prosperity Operating #10000001	10255040	9,132.06	4,867.73	13,999.79	9/7/2022
Fort Bend	10000021 - Prosperity		MMC -Prosperity Operating #10000001	10255040	11,013.27	5,870.01	16,883.28	9/7/2022
Solera	10000022 - Prosperity		MMC -Prosperity Operating #10000001	10255040	10,805.76	5,759.30	16,565.06	9/7/2022
Golden Creek	10000023 - Prosperity		MMC -Prosperity Operating #10000001	10255040			-	9/7/2022
Gulf Pointe-PP	10000114 - Prosperity		MMC -Prosperity Operating #10000001	10255040			-	9/7/2022
Gulf Pointe-MM	10000025 - Prosperity		MMC -Prosperity Operating #10000001				-	9/7/2022
Bethany			MMC -Prosperity Operating #10000001				-	9/7/2022
Tuscany			MMC -Prosperity Operating #10000001	10255040	16,032.28	8,544.36	24,576.64	9/7/2022
			Total:		85,589.56	45,629.72	131,219.28	

Note:

Approved: 
 WILLIAM LITTLE, CFO 9/6/2022