

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---November 02, 2022

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 156,800.07	✓
TOTAL TRANSFERS BETWEEN FUNDS	\$ 132,759.15	✓
TOTAL NURSING HOME UPL EXPENSES	\$ 1,731,177.24	✓
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -	
GRAND TOTAL DISBURSEMENTS APPROVED November 02, 2022	\$ 2,020,736.46	✓

APPROVED

NOV 02 2022

CASWOLD COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---November 02, 2022

PAYABLES AND PAYROLL

10/27/2022 Weekly Payables	121,347.84
10/31/2022 Alpha Tec Systems-freight	13.03
10/31/2022 Evident-ICU Phillips Interface install	4,500.00
10/31/2022 Sign Ad-advertising	410.00
10/31/2022 Southeast Texas Health System-Quarterly dues	5,000.00
10/31/2022 Amtec Medical Inc-supplies	175.79
10/31/2022 Sherwin Williams-supplies	393.70
10/31/2022 Fusion Cloud Services-telephone	1,325.13
10/31/2022 Sparklight-cable	4,166.20
10/31/2022 McKesson-340B Prescription Expense	15,071.40
10/31/2022 Amerisource Bergen-340B Prescription Expense	1,739.31

Prosperity Electronic Bank Payments

10/24-10/28/22 Pay Plus-Patient Claims Processing Fee	285.97
10/28/2022 ExpertPay- child support	2,371.70

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **156,800.07**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

10/27/2022 MMC Operating to Crescent-correction of NH insurance payment deposited into MMC Operating in error	10,115.50
10/27/2022 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	39,544.46
10/27/2022 MMC Operating to Gulf Pointe Plaza-correction of NH insurance payment deposited into MMC Operating	16,184.76
10/27/2022 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	49,422.11
10/27/2022 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	17,492.32

TOTAL TRANSFERS BETWEEN FUNDS \$ **132,759.15**

NURSING HOME UPL EXPENSES

10/31/2022 Nursing Home UPL-Cantex Transfer	1,120,598.71
10/31/2022 Nursing Home UPL-Nexion Transfer	146,259.80
10/31/2022 Nursing Home UPL-HMG Transfer	162,721.16
10/31/2022 Nursing Home UPL-Tuscany Transfer	142,643.93
10/31/2022 Nursing Home UPL-HSL Transfer	158,265.81

QIPP CHECKS TO MMC

10/31/2022 Ashford	284.58
10/31/2022 Broadmoor	102.61
10/31/2022 Crescent	83.83
10/31/2022 Fort Bend	116.18
10/31/2022 Solera	100.63

TOTAL NURSING HOME UPL EXPENSES \$ **1,731,177.24**

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

GRAND TOTAL DISBURSEMENTS APPROVED November 02, 2022 \$ **2,020,736.46**

RECEIVED BY THE
COUNTY AUDITOR ON

OCT 27 2022

10/27/2022
CALHOUN COUNTY, TEXAS
11:01

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 11/17/2022

0

ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code							
A1680	AIRGAS USA, LLC - CENTRAL DIV ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9991821726 ✓		10/26/20	09/30/20	10/25/20			545.16	0.00	0.00	545.16 ✓
	OXYGEN									
9131155092 ✓		10/26/20	10/17/20	11/11/20			326.81	0.00	0.00	326.81 ✓
	OXYGEN									
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				A1680	AIRGAS USA, LLC - CENTRAL DIV		871.97	0.00	0.00	871.97

Vendor#	Vendor Name	Class	Pay Code							
A2150	ANNOUNCEMENTS PLUS TOO AGAIN ✓	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
713 ✓		10/26/20	04/21/20	05/01/20			72.00	0.00	0.00	72.00 ✓
	COPIES - <i>marketing stickers</i>									
718 ✓		10/26/20	05/02/20	05/12/20			145.00	0.00	0.00	145.00 ✓
	PRINTING - <i>business cards</i>									
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				A2150	ANNOUNCEMENTS PLUS TOO AGAIN		217.00	0.00	0.00	217.00

Vendor#	Vendor Name	Class	Pay Code							
14556	APRIL KUBALA ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
102122		10/26/20	10/21/20	10/31/20			60.00	0.00	0.00	60.00
	CERTIFICATION <i>Texas consortium for Physical Therapy</i>									
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				14556	APRIL KUBALA		60.00	0.00	0.00	60.00

Vendor#	Vendor Name	Class	Pay Code							
B1150	BAXTER HEALTHCARE ✓	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
76814685 ✓		10/27/20	10/13/20	11/07/20			42.67	0.00	0.00	42.67 ✓
	SUPPLIES									
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				B1150	BAXTER HEALTHCARE		42.67	0.00	0.00	42.67

Vendor#	Vendor Name	Class	Pay Code							
B1220	BECKMAN COULTER INC ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
110208538 ✓		10/19/20	10/17/20	11/11/20			115.75	0.00	0.00	115.75 ✓
	SUPPLIES									
110220843 ✓		10/27/20	10/20/20	11/14/20			600.54	0.00	0.00	600.54 ✓
	SUPPLIES									
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				B1220	BECKMAN COULTER INC		716.29	0.00	0.00	716.29

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
101922		10/27/20	10/19/20	11/01/20			143.31	0.00	0.00	143.31 ✓
	SUPPLIES									
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				14064	CAPITAL ONE		143.31	0.00	0.00	143.31

Vendor#	Vendor Name		Class	Pay Code						
A1825	CARDINAL HEALTH 414,LLC ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
8002966543 ✓		10/26/20	09/24/20	10/24/20		684.04	0.00	0.00	684.04 ✓	
	SUPPLIES									
8002972393 ✓		10/26/20	09/30/20	10/30/20		881.87	0.00	0.00	881.87 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	A1825 CARDINAL HEALTH 414,LLC					1,565.91	0.00	0.00	1,565.91	
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	
10019668658 ✓		10/26/20	10/10/20	11/01/20		2.00	0.00	0.00	2.00 ✓	
	INVENTORY									
1001966864 ✓		10/26/20	10/10/20	11/01/20		1,788.00	0.00	0.00	1,788.00 ✓	
	INVENTORY									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	14260 CAREFUSION SOLUTIONS, LLC					1,790.00	0.00	0.00	1,790.00	
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	
CF13550 ✓		10/27/20	08/17/20	09/16/20		4,605.20	0.00	0.00	4,605.20 ✓	
	SCAN 100PPM									
DJ03688 ✓		10/27/20	10/10/20	11/09/20		219.81	0.00	0.00	219.81 ✓	
	SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	C1992 CDW GOVERNMENT, INC.					4,825.01	0.00	0.00	4,825.01	
Vendor#	Vendor Name		Class	Pay Code						
C1600	CITIZENS MEDICAL CENTER ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
100722		10/26/20	10/07/20	11/01/20		55.00	0.00	0.00	55.00 ✓	
	11 BLS CARDS									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	C1600 CITIZENS MEDICAL CENTER					55.00	0.00	0.00	55.00	
Vendor#	Vendor Name		Class	Pay Code						
14304	COFFEE BARREL, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
102322		10/26/20	10/23/20	11/01/20		39,375.00	0.00	0.00	39,375.00 ✓	
	INTERIM PRAC 11-22-12-22-22									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	14304 COFFEE BARREL, LLC					39,375.00	0.00	0.00	39,375.00	
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	
696930 ✓		10/27/20	10/13/20	11/07/20		133.82	0.00	0.00	133.82 ✓	
	SUPPLIES									
6930561 ✓		10/27/20	10/14/20	11/08/20		42.80	0.00	0.00	42.80 ✓	
	SUPPLIES									
6979880 ✓		10/27/20	10/20/20	11/14/20		107.27	0.00	0.00	107.27 ✓	
	SUPPLIES									
6981400 ✓		10/27/20	10/21/20	11/15/20		455.41	0.00	0.00	455.41 ✓	

SUPPLIES

Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		10368	DEWITT POTH & SON		739.30	0.00	0.00	739.30	
Vendor#	Vendor Name		Class	Pay Code					
12044	DRIESSEN WATER INC. (CULLIGAN) ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
14302703093022 ✓	WATER	10/26/20	09/30/20	10/22/20		510.30	0.00	0.00	510.30 ✓
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		12044	DRIESSEN WATER INC. (CULLIGAN)		510.30	0.00	0.00	510.30	
Vendor#	Vendor Name		Class	Pay Code					
14172	ESO SOLUTIONS, INC. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
ESO-91832 ✓	TRAUMA REGISTRY	10/26/20	10/02/20	11/01/20		1,875.00	0.00	0.00	1,875.00 ✓
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		14172	ESO SOLUTIONS, INC.		1,875.00	0.00	0.00	1,875.00	
Vendor#	Vendor Name		Class	Pay Code					
F1100	FEDERAL EXPRESS CORP. ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
790534608 ✓	FREIGHT	10/26/20	10/06/20	10/31/20		26.25	0.00	0.00	26.25 ✓
791360669 ✓	FREIGHT	10/26/20	10/13/20	11/07/20		226.44	0.00	0.00	226.44 ✓
792090880 ✓	FREIGHT	10/26/20	10/20/20	11/14/20		32.89	0.00	0.00	32.89 ✓
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		F1100	FEDERAL EXPRESS CORP.		285.58	0.00	0.00	285.58	
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
7191841 ✓	SUPPLIES	10/27/20	10/11/20	11/05/20		3,411.36	0.00	0.00	3,411.36 ✓
7191842 ✓	SUPPLIES	10/27/20	10/11/20	11/05/20		272.11	0.00	0.00	272.11 ✓
7191840 ✓	SUPPLIES	10/27/20	10/11/20	11/05/20		82.92	0.00	0.00	82.92 ✓
7233412 ✓	SUPPLIES	10/27/20	10/12/20	11/06/20		89.83	0.00	0.00	89.83 ✓
7274774 ✓	SUPPLIES	10/27/20	10/13/20	11/07/20		26.30	0.00	0.00	26.30 ✓
7314464 ✓	SUPPLIES	10/27/20	10/14/20	11/08/20		532.98	0.00	0.00	532.98 ✓
7355434 ✓	SUPPLIES	10/27/20	10/17/20	11/11/20		1,224.00	0.00	0.00	1,224.00 ✓
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		F1400	FISHER HEALTHCARE		5,639.50	0.00	0.00	5,639.50	
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
2300963 ✓		10/19/20	10/12/20	11/11/20		1,231.92	0.00	0.00	1,231.92 ✓

2303431	SUPPLIES	10/27/20	10/18/20	11/05/20		536.90	0.00	0.00	536.90		
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY				1,768.82	0.00	0.00	1,768.82		
Vendor#	Vendor Name	Class		Pay Code							
H1100	HAYES ELECTRIC SERVICE	W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net		
A222101301		10/26/20	10/13/20	10/23/20		54.99	0.00	0.00	54.99		
	COIL CLEANER										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
	H1100	HAYES ELECTRIC SERVICE				54.99	0.00	0.00	54.99		
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		
102022		10/26/20	10/20/20	11/01/20		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		
00391854		10/27/20	10/13/20	10/27/20		190.66	0.00	0.00	190.66		
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
	J1350	M.C. JOHNSON COMPANY INC				190.66	0.00	0.00	190.66		
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		
2233183369		10/27/20	10/12/20	11/06/20		7,073.47	0.00	0.00	7,073.47		
	SUPPLIES										
2233557209		10/27/20	10/13/20	11/07/20		192.26	0.00	0.00	192.26		
	SUPPLIES										
2234008630		10/27/20	10/17/20	11/11/20		2,902.37	0.00	0.00	2,902.37		
	SUPPLIES										
2234008629		10/27/20	10/17/20	11/11/20		51.83	0.00	0.00	51.83		
	SUPPLIES										
2234360054		10/27/20	10/19/20	11/13/20		135.35	0.00	0.00	135.35		
	SUPPLIES										
2234360059		10/27/20	10/19/20	11/13/20		8.93	0.00	0.00	8.93		
	SUPPLIES										
2234360057		10/27/20	10/19/20	11/13/20		32.14	0.00	0.00	32.14		
	SUPPLIES										
2234360052		10/27/20	10/19/20	11/13/20		86.26	0.00	0.00	86.26		
	SUPPLIES										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC				10,482.61	0.00	0.00	10,482.61		
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		
102022		10/26/20	10/20/20	11/01/20		195.00	0.00	0.00	195.00		

PAYROLL DEDUCT

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net			
10963	MEMORIAL MEDICAL CLINIC			195.00	0.00	0.00	195.00			
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net			
10963	MEMORIAL MEDICAL CLINIC			195.00	0.00	0.00	195.00			
Vendor#	Vendor Name	Class	Pay Code							
M2621	MMC AUXILIARY GIFT SHOP ✓	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
102022		10/26/20	10/20/20	11/01/20			362.64	0.00	0.00	362.64 ✓
PAYROLL DEDUCT										
Vendor Totals	Number Name			Gross	Discount	No-Pay	Net			
M2621	MMC AUXILIARY GIFT SHOP			362.64	0.00	0.00	362.64			
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
8781207 ✓		10/26/20	10/19/20	10/29/20			54.25	0.00	0.00	54.25 ✓
	INVENTORY									
CM74854 ✓		10/26/20	10/19/20	10/29/20			-8.75	0.00	0.00	-8.75 ✓
	CREDIT									
8781205 ✓		10/26/20	10/19/20	10/29/20			98.43	0.00	0.00	98.43 ✓
	INVENTORY									
8783377 ✓		10/26/20	10/19/20	10/29/20			88.17	0.00	0.00	88.17 ✓
	INVENTORY									
8783378 ✓		10/26/20	10/19/20	10/29/20			1,578.20	0.00	0.00	1,578.20 ✓
	INVENTORY									
8788789 ✓		10/26/20	10/20/20	10/30/20			28.07	0.00	0.00	28.07 ✓
	INVENTORY									
8789094 ✓		10/26/20	10/20/20	10/30/20			482.50	0.00	0.00	482.50 ✓
	INVENTORY									
8795634 ✓		10/26/20	10/23/20	11/02/20			78.31	0.00	0.00	78.31 ✓
	INVENTORY									
8793525 ✓		10/26/20	10/23/20	11/02/20			376.45	0.00	0.00	376.45 ✓
	INVENTORY									
8795633 ✓		10/26/20	10/23/20	11/02/20			126.28	0.00	0.00	126.28 ✓
	INVENTORY									
8793527 ✓		10/26/20	10/23/20	11/02/20			103.33	0.00	0.00	103.33 ✓
	INVENTORY									
8797070 ✓		10/26/20	10/24/20	11/03/20			231.60	0.00	0.00	231.60 ✓
	INVENTORY									
8799599 ✓		10/26/20	10/24/20	11/03/20			427.41	0.00	0.00	427.41 ✓
	INVENTORY									
8797068 ✓		10/26/20	10/24/20	11/03/20			277.99	0.00	0.00	277.99 ✓
	INVENTORY									
8799600 ✓		10/26/20	10/24/20	11/03/20			929.89	0.00	0.00	929.89 ✓
	INVENTORY									
8797069 ✓		10/26/20	10/24/20	11/03/20			474.40	0.00	0.00	474.40 ✓
	INVENTORY									
8799318 ✓		10/26/20	10/24/20	11/03/20			1,684.50	0.00	0.00	1,684.50 ✓
	INVENTORY									
8798096 ✓		10/26/20	10/24/20	11/03/20			1.15	0.00	0.00	1.15 ✓
	INVENTORY									
8799317 ✓		10/26/20	10/24/20	11/03/20			29.14	0.00	0.00	29.14 ✓
	INVENTORY									

8803511 ✓		10/26/20	10/25/20	11/04/20			332.36	0.00	0.00	332.36 ✓			
	INVENTORY												
8802030 ✓		10/26/20	10/25/20	11/04/20			5,025.68	0.00	0.00	5,025.68 ✓			
	INVENTORY												
8803510 ✓		10/26/20	10/25/20	11/04/20			75.83	0.00	0.00	75.83 ✓			
	INVENTORY												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10536	MORRIS & DICKSON CO, LLC	12,495.19	0.00	0.00	12,495.19	
Vendor#	Vendor Name	Class		Pay Code									
12388	NATIONAL FARM LIFE INSURANCE ✓	W											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
3802639 ✓		10/26/20	10/17/20	11/01/20			3,633.48	0.00	0.00	3,633.48 ✓			
	INSURANCE DEDUCT												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							12388	NATIONAL FARM LIFE INSURANCE	3,633.48	0.00	0.00	3,633.48	
Vendor#	Vendor Name	Class		Pay Code									
N1800	NURSES CHOICE CORPORATION ✓	W											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
0162258IN ✓		10/27/20	10/17/20	10/27/20			153.33	0.00	0.00	153.33 ✓			
	SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							N1800	NURSES CHOICE CORPORATION	153.33	0.00	0.00	153.33	
Vendor#	Vendor Name	Class		Pay Code									
OM425	OWENS & MINOR ✓	W											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
2079886765 ✓		10/27/20	10/13/20	11/12/20			202.17	0.00	0.00	202.17 ✓			
	SUPPLIES												
2079886766 ✓		10/27/20	10/13/20	11/12/20			456.51	0.00	0.00	456.51 ✓			
	SUPPLISE												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							OM425	OWENS & MINOR	658.68	0.00	0.00	658.68	
Vendor#	Vendor Name	Class		Pay Code									
11764	ROBERT RODRIQUEZ ✓	W											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
102522		10/26/20	10/25/20	11/01/20			42.75	0.00	0.00	42.75 ✓			
	TRAVEL to Sam's and HEB PLUS												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							11764	ROBERT RODRIQUEZ	42.75	0.00	0.00	42.75	
Vendor#	Vendor Name	Class		Pay Code									
S1405	SERVICE SUPPLY OF VICTORIA INC ✓	W											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
701155829 ✓		10/19/20	10/13/20	11/12/20			117.42	0.00	0.00	117.42 ✓			
	SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							S1405	SERVICE SUPPLY OF VICTORIA INC	117.42	0.00	0.00	117.42	
Vendor#	Vendor Name	Class		Pay Code									
10979	SHAWNA HARTL ✓	W											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
102122		10/26/20	10/21/20	10/31/20			34.50	0.00	0.00	34.50 ✓			
	TRAVEL to Peter Hospital to drop off sample 10/19/22												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	

	10979	SHAWNA HARTL					34.50	0.00	0.00	34.50
Vendor#	Vendor Name					Class	Pay Code			
S2001	SIEMENS MEDICAL SOLUTIONS INC ✓					M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
116280916 ✓		10/26/20	10/17/20	11/11/20			2,193.83	0.00	0.00	2,193.83 ✓
	CONTRACT									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	S2001	SIEMENS MEDICAL SOLUTIONS INC					2,193.83	0.00	0.00	2,193.83
Vendor#	Vendor Name					Class	Pay Code			
S2270	SMILE MAKERS ✓					M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9243062 ✓		10/27/20	10/13/20	11/07/20			36.80	0.00	0.00	36.80 ✓
	SUPPLIES									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	S2270	SMILE MAKERS					36.80	0.00	0.00	36.80
Vendor#	Vendor Name					Class	Pay Code			
S2694	STANFORD VACUUM SERVICE ✓					M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
393045 ✓		10/26/20	10/26/20	11/15/20			540.00	0.00	0.00	540.00 ✓
	GREASE TRAP									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	S2694	STANFORD VACUUM SERVICE					540.00	0.00	0.00	540.00
Vendor#	Vendor Name					Class	Pay Code			
12476	SUN LIFE FINANCIAL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
100122		10/27/20	10/01/20	11/10/20			11,047.22	0.00	0.00	11,047.22 ✓
	PAYROLL DEDUCT									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	12476	SUN LIFE FINANCIAL					11,047.22	0.00	0.00	11,047.22
Vendor#	Vendor Name					Class	Pay Code			
10982	TELCOR ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
55687 ✓		10/27/20	09/01/20	10/27/20			3,218.62	0.00	0.00	3,218.62 ✓
	ANNUAL SUPPORT									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10982	TELCOR					3,218.62	0.00	0.00	3,218.62
Vendor#	Vendor Name					Class	Pay Code			
T0420	TELEFLEX MEDICAL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9506132519 ✓		10/27/20	10/19/20	10/27/20			158.49	0.00	0.00	158.49 ✓
	SUPPLIES									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	T0420	TELEFLEX MEDICAL					158.49	0.00	0.00	158.49
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
8400406216 ✓		10/26/20	10/13/20	11/07/20			201.59	0.00	0.00	201.59 ✓
	LAUNDRY									
8400406219 ✓		10/26/20	10/13/20	11/07/20			208.13	0.00	0.00	208.13 ✓
	LAUNDRY									
8400406218 ✓		10/26/20	10/13/20	11/07/20			195.62	0.00	0.00	195.62 ✓

	LAUNDRY											
8400406242	✓	10/26/20	10/13/20	11/07/20			1,732.30	0.00	0.00	1,732.30 ✓		
	LAUNDRY											
8400406215	✓	10/26/20	10/13/20	11/07/20			29.07	0.00	0.00	29.07 ✓		
	LAUNDRY											
8400406234	✓	10/26/20	10/13/20	11/07/20			79.78	0.00	0.00	79.78 ✓		
	LAUNDRY											
8400406411	✓	10/26/20	10/17/20	11/11/20			48.15	0.00	0.00	48.15 ✓		
	LAUNDRY											
8400406412	✓	10/26/20	10/17/20	11/11/20			44.80	0.00	0.00	44.80 ✓		
	LAUNDRY											
8400406432	✓	10/26/20	10/17/20	11/11/20			2,118.54	0.00	0.00	2,118.54 ✓		
	LAUNDRY											
8400406737	✓	10/26/20	10/20/20	11/14/20			29.07	0.00	0.00	29.07 ✓		
	LAUNDRY											
8400406758	✓	10/26/20	10/20/20	11/14/20			75.08	0.00	0.00	75.08 ✓		
	LAUNDRY											
8400406741	✓	10/26/20	10/20/20	11/14/20			208.13	0.00	0.00	208.13 ✓		
	LAUNDRY											
8400406779	✓	10/26/20	10/20/20	11/14/20			115.12	0.00	0.00	115.12 ✓		
	LAUNDRY											
8400406739	✓	10/26/20	10/20/20	11/14/20			184.16	0.00	0.00	184.16 ✓		
	LAUNDRY											
8400406738	✓	10/26/20	10/20/20	11/14/20			201.59	0.00	0.00	201.59 ✓		
	LAUNDRY											
8400406764	✓	10/26/20	10/20/20	11/14/20			1,517.90	0.00	0.00	1,517.90 ✓		
	LAUNDRY											
8400406740	✓	10/26/20	10/20/20	11/14/20			211.32	0.00	0.00	211.32 ✓		
	LAUNDRY											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							U1064	UNIFIRST HOLDINGS INC	7,200.35	0.00	0.00	7,200.35
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		
	SIV12802177 ✓		10/01/20	09/15/20	09/30/20		159.71	0.00	0.00	159.71 ✓		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							U1056	UNIFORM ADVANTAGE	159.71	0.00	0.00	159.71
Vendor#	Vendor Name				Class	Pay Code						
U1200	UNITED AD LABEL CO INC ✓					M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net		
	006449172 ✓		10/27/20	10/12/20	11/06/20		99.30	0.00	0.00	99.30 ✓		
	SUPPLIES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							U1200	UNITED AD LABEL CO INC	99.30	0.00	0.00	99.30
Vendor#	Vendor Name				Class	Pay Code						
U2000	US POSTAL SERVICE ✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net		
	102222		10/26/20	10/22/20	11/01/20		2,200.00	0.00	0.00	2,200.00 ✓		
	POSTAGE											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net

Vendor#	Vendor Name	Class	Pay Code						
U2000	US POSTAL SERVICE			2,200.00	0.00	0.00	2,200.00		
11280	VICTORIA ADVOCATE ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
0248201		10/26/20	04/30/20	05/30/20		40.20	0.00	0.00	40.20 ✓
	NEWSPAPER								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11280	VICTORIA ADVOCATE				40.20	0.00	0.00	40.20
10793	WAGeworks, INC. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102022		10/26/20	10/20/20	11/01/20		3,285.40	0.00	0.00	3,285.40 ✓
	PAYROLL DEDUCT								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10793	WAGeworks, INC.				3,285.40	0.00	0.00	3,285.40
10943	WALLER, LANSDEN, DORTCH & DAVIS ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
10876553 ✓		10/26/20	10/05/20	10/31/20		333.00	0.00	0.00	333.00 ✓
	PROF FEES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10943	WALLER, LANSDEN, DORTCH & DAVIS				333.00	0.00	0.00	333.00
11110	WERFEN USA LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9111231358 ✓		10/27/20	10/19/20	11/13/20		1,292.15	0.00	0.00	1,292.15 ✓
	SUPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11110	WERFEN USA LLC				1,292.15	0.00	0.00	1,292.15

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	121,347.84	0.00	0.00	121,347.84

APPROVED ON

OCT 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 16984-197037

RECEIVED BY THE
COUNTY AUDITOR ON

OCT 31 2022

10/31/2022
11:33
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

A1746 ALPHA TEC SYSTEMS INC ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
INV00107309A	✓	10/31/20	08/16/20	09/16/20			13.03	0.00	0.00	13.03

FREIGHT

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1746		ALPHA TEC SYSTEMS INC	13.03	0.00	0.00	13.03

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	13.03	0.00	0.00	13.03

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 196985

RECEIVED BY THE
COUNTY AUDITOR ON

OCT 31 2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

10/31/2022

11:31

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

C2510 EVIDENT ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
998034 ✓		10/31/20	05/03/20	05/28/20			4,500.00	0.00	0.00	4,500.00

PHILIPS PIIC IX

Vendor Total:	Number	Name	Gross	Discount	No-Pay	Net
	C2510	EVIDENT	4,500.00	0.00	0.00	4,500.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,500.00	0.00	0.00	4,500.00

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 197000

RECEIVED BY THE
COUNTY AUDITOR ON

OCT 31 2022

CALHOUN COUNTY, TEXAS

10/31/2022

11:32

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

10699 SIGN AD, LTD. ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
280090 ✓		10/31/20	10/16/20	10/26/20		410.00	0.00	0.00	410.00 ✓

ADVERTSING

Vendor Totals Number Name

10699 SIGN AD, LTD.

Gross	Discount	No-Pay	Net
410.00	0.00	0.00	410.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	410.00	0.00	0.00	410.00

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 197021

OCT 31 2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

10/31/2022

0

11:33

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

S2345 SOUTHEAST TEXAS HEALTH SYS

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
26692		10/31/20	10/05/20	11/05/20			5,000.00	0.00	0.00	5,000.00

QTR DUES OCT -DEC 22

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
S2345		SOUTHEAST TEXAS HEALTH SYS	5,000.00	0.00	0.00	5,000.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	5,000.00	0.00	0.00	5,000.00

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Clk# 19723

OCT 31 2022

CALHOUN COUNTY, TEXAS

10/31/2022
11:32

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

A2050 AMTEC MEDICAL INC ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
84322 ✓		10/31/20	07/12/20	08/11/20		175.79	0.00	0.00	175.79 ✓

SUPPLIES

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
A2050		AMTEC MEDICAL INC	175.79	0.00	0.00	175.79

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	175.79	0.00	0.00	175.79

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 196986

RECEIVED BY THE
COUNTY AUDITOR ON

OCT 31 2022

10/31/2022
CALHOUN COUNTY, TEXAS
11:33

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

S1800 SHERWIN WILLIAMS ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
74914 ✓		10/31/20	09/26/20	10/11/20		393.70	0.00	0.00	393.70 ✓

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
S1800	SHERWIN WILLIAMS	393.70	0.00	0.00	393.70

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	393.70	0.00	0.00	393.70

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL#197019

RECEIVED BY THE COUNTY AUDITOR ON

OCT 31 2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

11:30

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

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
28689975 ✓		10/31/20	10/16/20	11/15/20			1,325.13	0.00	0.00	1,325.13 ✓

TELEPHONE

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12636	FUSION CLOUD SERVICES, LLC	1,325.13	0.00	0.00	1,325.13

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,325.13	0.00	0.00	1,325.13

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

CK# 197003

RECEIVED BY THE
COUNTY AUDITOR ON

OCT 31 2022
10/31/2022

11:31
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

C1010 SPARKLIGHT ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
101622A		10/31/20	10/16/20	10/30/20		2,250.00	0.00	0.00	2,250.00 ✓
	CABLE								
101622C		10/31/20	10/16/20	10/30/20		1,675.15	0.00	0.00	1,675.15 ✓
	CABLE								
101622		10/31/20	10/16/20	10/30/20		117.89	0.00	0.00	117.89 ✓
	CABLE								
101622B		10/31/20	10/16/20	10/30/20		123.16	0.00	0.00	123.16 ✓
	CABLE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1010	SPARKLIGHT	4,166.20	0.00	0.00	4,166.20

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,166.20	0.00	0.00	4,166.20

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck# 197024

McKESSON

STATEMENT

As of: 10/28/2022

Page: 002

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

Company: 8000

DC: 8115

As of: 10/28/2022
Mail to:

Page: 002
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory:

Customer: 632536
Date: 10/29/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 10/29/2022 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:	15,378.97	USD	
Future Due:	0.00				
Past Due:	0.00	If Paid By 11/01/2022, Pay This Amount:	15,071.40	USD	Due If Paid On Time: USD 15,071.40
Last Payment 08/07/2017	2,451.97	If Paid After 11/01/2022, Pay this Amount:	15,378.97	USD	Disc lost if paid late: 307.57
					Due If Paid Late: USD 15,378.97

10,838.80
2,401.54
1,811.75
19.48
15,071.40


10,31.22

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/28/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 10/28/2022

Page: 001

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

Mail to:

Comp: 8000

Customer: 256342

Date: 10/29/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/29/2022 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS											
0/24/2022	11/01/2022	7373821751	50772093	115Invoice	8.32	416.18		407.86 ✓		7373821751	
0/24/2022	11/01/2022	7373821752	50808352	115Invoice	16.65	832.37		815.72 ✓		7373821752	
0/24/2022	11/01/2022	7373821753	50845064	115Invoice	0.01	0.63		0.62 ✓		7373821753	
0/24/2022	11/01/2022	7373821754	50931753	115Invoice	1.46	73.21		71.75 ✓		7373821754	
0/24/2022	11/01/2022	7374016077	50778668	195Invoice	4.06	202.77		198.71 ✓		7374016077	
0/24/2022	11/01/2022	7374016078	50781700	115Invoice	0.03	1.27		1.24 ✓		7374016078	
0/25/2022	11/01/2022	7374297239	50976488	115Invoice	2.63	131.35		128.72 ✓		7374297239	
0/26/2022	11/01/2022	7374417920	51127383	115Invoice	9.38	468.99		459.61 ✓		7374417920	
0/26/2022	11/01/2022	7374417921	51196363	115Invoice	33.29	1,664.73		1,631.44 ✓		7374417921	
0/26/2022	11/01/2022	7374576500	51134153	195Invoice	81.58	4,078.98		3,997.40 ✓		7374576500	
0/26/2022	11/01/2022	7374576501	51139091	115Invoice	37.85	1,892.53		1,854.68 ✓		7374576501	
0/27/2022	11/01/2022	7374689526	51264823	115Invoice		0.02		0.02 ✓		7374689526	
0/27/2022	11/01/2022	7374689527	51264823	115Invoice	0.46	23.01		22.55 ✓		7374689527	
0/27/2022	11/01/2022	7374689528	51336314	115Invoice	5.33	266.43		261.10 ✓		7374689528	
0/28/2022	11/01/2022	7374956842	51387103	115Invoice	6.82	341.24		334.42 ✓		7374956842	
0/28/2022	11/01/2022	7374956843	51457658	115Invoice	8.32	416.18		407.86 ✓		7374956843	
0/28/2022	11/01/2022	7375113334	51398867	115Invoice	3.86	193.02		189.16 ✓		7375113334	
0/28/2022	11/01/2022	7375113335	51393769	195Invoice	1.14	57.08		55.94 ✓		7375113335	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 11,059.99 USD

Future Due: 0.00

Past Due: 0.00

Last Payment APPROVED ON
0/24/2022 4,144.87

If Paid By 11/01/2022,
Pay This Amount: 10,838.80 USD

If Paid After 11/01/2022,
Pay this Amount: 11,059.99 USD

Due If Paid On Time:
USD 10,838.80 ✓

Disc lost if paid late:
221.19

Due If Paid Late:
USD 11,059.99

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 10/28/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 10/28/2022

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: 10/29/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450

PLEASE CHECK ANY

Date: 10/29/2022

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											
0/24/2022	11/01/2022	7373809201	B2210-055-104605	115Invoice	20.55	1,027.53		1,006.98 ✓		7373809201	
0/24/2022	11/01/2022	7373809202	B2210-055-104648	115Invoice	28.27	1,413.41		1,385.14 ✓		7373809202	
0/27/2022	11/01/2022	7374679386	B2210-055-105059	115Invoice	0.19	9.41		9.22 ✓		7374679386	

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

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

Subtotals: 2,450.35 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 0/24/2022 4,144.87

If Paid By 11/01/2022,
Pay This Amount:

2,401.34 USD

Due If Paid On Time:
USD
Disc lost if paid late:

2,401.34 ✓

49.01

If Paid After 11/01/2022,
Pay this Amount:

2,450.35 USD

Due If Paid Late:
USD

2,450.35

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 10/28/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 10/28/2022

Page: 001

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

Mail to:

Comp: 8000

Customer: 835434

Date: 10/29/2022

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835434

PLEASE CHECK ANY

Date: 10/29/2022

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 835434 CVS PHCY 8923/MEM MC PHS											
10/24/2022	11/01/2022	7373840679	1935173	115Invoice	36.98	1,848.76		1,811.78 ✓		7373840679	

*P 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: 1,848.76 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,144.87
10/24/2022

If Paid By 11/01/2022,
Pay This Amount: 1,811.78 USD

If Paid After 11/01/2022,
Pay this Amount: 1,848.76 USD

Due If Paid On Time:
USD 1,811.78 ✓

Disc lost if paid late:
36.98

Due If Paid Late:
USD 1,848.76

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 10/28/2022

Page: 001

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

DC: 8115

Territory: 400

Customer: 835438

Date: 10/29/2022

As of: 10/28/2022 Page: 001
 Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

Cust: 835438 PLEASE CHECK ANY
 Date: 10/29/2022 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835438 CVS PHCY 7475/MEM MC PHS											
0/24/2022	11/01/2022	7374067788	1935068	115Invoice	0.11	5.66		5.55 ✓		7374067788	
0/26/2022	11/01/2022	7374619884	1950076	115Invoice	0.28	14.21		13.93 ✓		7374619884	

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

TOTAL: Customer Number 835438 CVS PHCY 7475/MEM MC PHS											
Subtotals:					19.87	USD					
Future Due:	0.00						Due If Paid On Time:				
Past Due:	0.00		If Paid By 11/01/2022, Pay This Amount:		19.48	USD	USD		19.48	✓	
Fast Payment 0/24/2022	4,144.87		If Paid After 11/01/2022, Pay this Amount:		19.87	USD	Disc lost if paid late:		0.39		
							Due If Paid Late:		USD 19.87		

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

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



STATEMENT

Statement Number: 63968537
Date: 10-28-2022

Serviced By:

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

DEA: RA0289276
866-451-9655

Customer:

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

Remit To:

AMERISOURCEBERGEN
PO Box 905223
CHARLOTTE NC 28290-5223

Customer Number
100135284 / 037028186

Terms
Sat - Fri Due in 7 days

Summary
Not Yet Due: 0.00
Current: 1,739.31
Past Due: 0.00
Total Due: 1,739.31
Account Balance: 1,739.31

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
10-24-2022	11-04-2022	3110204527	168075	Invoice	204.97		0.00	204.97 ✓
10-24-2022	11-04-2022	3110240459	168123	Invoice	135.38		0.00	135.38 ✓
10-25-2022	11-04-2022	3110373938	168131	Invoice	80.79		0.00	80.79 ✓
10-28-2022	11-04-2022	3110814576	168162	Invoice	1,280.01		0.00	1,280.01 ✓
10-28-2022	11-04-2022	3110814577	168163	Invoice	29.04		0.00	29.04 ✓
10-28-2022	11-04-2022	3110814578	168165	Invoice	9.12		0.00	9.12 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,739.31	0.00	0.00	0.00	0.00	0.00	0.00

Reminders	
Due Date	Amount
11-04-2022	1,739.31 ✓
Total Due: 1,739.31	

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

10.31.22

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- October 24, 2022 - October 30, 2022**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>
10/24/2022	PAY PLUS ACHTRANS 452579291 101000693051745	- 3rd Party Payor Fee
10/25/2022	PAY PLUS ACHTRANS 452579291 101000693847588	- 3rd Party Payor Fee
10/25/2022	MCKESSON DRUG AUTO ACH ACH05230339 910000131	- 340B Drug Program Expense
10/26/2022	PAY PLUS ACHTRANS 452579291 101000694659663	- 3rd Party Payor Fee
10/27/2022	PAY PLUS ACHTRANS 452579291 101000695558984	- 3rd Party Payor Fee
10/28/2022	PAY PLUS ACHTRANS 452579291 101000696488473	- 3rd Party Payor Fee
10/28/2022	EXPERTPAY EXPERTPAY 746003411 91000012781069	- Child Support Payment
10/28/2022	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense
10/28/2022	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll

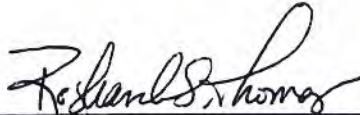
<u>Amount</u>
0.12
21.75
4,144.87*
23.69
149.98
90.43
285.97
2,371.70
2,320.43*
368,641.95*

Pay Plus
0.12 +
21.75 +
23.69 +
149.98 +
90.43 +
285.97 +
ExpertPay
2,371.70 +
2,320.43 +
368,641.95 +
2,371.70

285.97 +
2,371.70 +
2,657.67 *

377,764.92

377,764.92 +
4,144.87 -
2,320.43 -
368,641.95 -
2,657.67 *



ROSHANDA THOMAS, CEO
Memorial Medical Center
October 30, 2022
** Approved 10.26.22 cc*

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

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

<u>Amount</u>

2,657.67 +
2,657.67 -
0.00 *



ROSHANDA THOMAS, CEO
Memorial Medical Center
October 30, 2022

**APPROVED ON
OCT 31 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RECEIVED BY THE
COUNTY AUDITOR ON

10/27/2022
OCT 27 2022

08:55

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		
101722		10/26/20	10/17/20	11/19/20		9,355.50	0.00	0.00	9,355.50 ✓		
101922	TRANSFER	10/26/20	10/19/20	11/19/20		760.00	0.00	0.00	760.00 ✓		
	TRANSFER "							"			
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						11824	THE CRESCENT	10,115.50	0.00	0.00	10,115.50

NH insurance pymt deposited into MMC operating

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	10,115.50	0.00	0.00	10,115.50

APPROVED ON

OCT 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck#197041

RECEIVED BY THE COUNTY AUDITOR ON

OCT 27 2022

10/27/2022

09:29

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
101322B		10/26/20	10/13/20	11/19/20		35,193.71	0.00	0.00	35,193.71 ✓
101322A	TRANSFER	10/26/20	10/13/20	11/19/20		0.08	0.00	0.00	0.08 ✓
	TRANSFER	"	"	"			"	"	" ✓
101822A		10/26/20	10/18/20	11/19/20		1,145.02	0.00	0.00	1,145.02 ✓
	TRANSFER	"	"	"			"	"	" ✓
101822		10/26/20	10/18/20	11/19/20		864.17	0.00	0.00	864.17 ✓
	TRANSFER	"	"	"			"	"	" ✓
101822B		10/26/20	10/18/20	11/19/20		310.22	0.00	0.00	310.22 ✓
	TRANSFER	"	"	"			"	"	" ✓
101922		10/26/20	10/19/20	11/19/20		2,031.26	0.00	0.00	2,031.26 ✓
	TRANSFER	"	"	"			"	"	" ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	39,544.46	0.00	0.00	39,544.46

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	39,544.46	0.00	0.00	39,544.46

APPROVED ON

OCT 27 2022

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

CK# 197039

RECEIVED BY THE
COUNTY AUDITOR ON

OCT 27 2022

CALHOUN COUNTY, TEXAS

10/27/2022
15:55

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

12696 GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
101322B ✓		10/26/20	10/13/20	11/19/20		1,361.27	0.00	0.00	1,361.27 ✓
101322A ✓	TRANSFER	10/26/20	10/13/20	11/19/20		746.53	0.00	0.00	746.53 ✓
101722 ✓	TRANSFER	10/26/20	10/17/20	11/19/20		2,448.00	0.00	0.00	2,448.00 ✓
101722A ✓	TRANSFER	10/26/20	10/17/20	11/19/20		1,364.23	0.00	0.00	1,364.23 ✓
101822 ✓	TRANSFER	10/26/20	10/18/20	11/19/20		8,903.23	0.00	0.00	8,903.23 ✓
101722B ✓	TRANSFER	10/27/20	10/17/20	11/19/20		1,361.50	0.00	0.00	1,361.50 ✓
Vendor Totals						Gross	Discount	No-Pay	Net
12696 GULF POINTE PLAZA						16,184.76	0.00	0.00	16,184.76

NH insurance pymt deposited into MME account

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	16,184.76	0.00	0.00	16,184.76

APPROVED ON

OCT 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL#197040

RECEIVED BY THE COUNTY AUDITOR ON

OCT 27 2022

10/27/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

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
101322C		10/26/20	10/13/20	11/19/20		2,620.36	0.00	0.00	2,620.36 ✓
	TRANSFER	<i>NH insurance pymt deposited into mme operating</i>							
101322A		10/26/20	10/13/20	11/19/20		9,219.00	0.00	0.00	9,219.00 ✓
	TRANSFER	"							
101322D		10/26/20	10/13/20	11/19/20		5,917.40	0.00	0.00	5,917.40 ✓
	TRANSFER	"							
101322B		10/26/20	10/13/20	11/19/20		4,390.00	0.00	0.00	4,390.00 ✓
	TRANSFER	"							
101722		10/26/20	10/17/20	11/19/20		2,358.11	0.00	0.00	2,358.11 ✓
	TRANSFER	"							
101822A		10/26/20	10/18/20	11/19/20		15,365.00	0.00	0.00	15,365.00 ✓
	TRANSFER	"							
101822		10/26/20	10/18/20	11/19/20		9,552.24	0.00	0.00	9,552.24 ✓
	TRANSFER	"							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	13004	TUSCANY VILLAGE	49,422.11	0.00	0.00	49,422.11

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	49,422.11	0.00	0.00	49,422.11

APPROVED ON

OCT 27 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#197104

RECEIVED BY THE
COUNTY AUDITOR ON
OCT 27 2022
10/27/2022
09:33
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
AP Open Invoice List 0
Dates Through: ap_open_invoice.template
Class Pay Code

Vendor#	Vendor Name	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
12792	BETHANY SENIOR LIVING	101322A		10/26/20	10/13/20	11/19/20		1,426.30	0.00	0.00	1,426.30 ✓		
		101322	TRANSFER	10/26/20	10/13/20	11/19/20		545.58	0.00	0.00	545.58 ✓		
		101722	TRANSFER	10/26/20	10/17/20	11/19/20		538.59	0.00	0.00	538.59 ✓		
		102522C	TRANSFER	10/26/20	10/25/20	11/19/20		4,864.71	0.00	0.00	4,864.71 ✓		
		102522D	TRANSFER	10/26/20	10/25/20	11/19/20		3,783.05	0.00	0.00	3,783.05 ✓		
		102522B	TRANSFER	10/26/20	10/25/20	11/19/20		201.84	0.00	0.00	201.84 ✓		
		102522	TRANSFER	10/26/20	10/25/20	11/19/20		1,771.26	0.00	0.00	1,771.26 ✓		
		102522F	TRANSFER	10/26/20	10/25/20	11/19/20		1,373.28	0.00	0.00	1,373.28 ✓		
		102522E	TRANSFER	10/26/20	10/25/20	11/19/20		2,921.47	0.00	0.00	2,921.47 ✓		
		102522A	TRANSFER	10/26/20	10/25/20	11/19/20		66.24	0.00	0.00	66.24 ✓		
Vendor Totals:								Number	Name	Gross	Discount	No-Pay	Net
								12792	BETHANY SENIOR LIVING	17,492.32	0.00	0.00	17,492.32

NH insurance pymt deposited into MME operating

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	17,492.32	0.00	0.00	17,492.32

APPROVED ON
OCT 27 2022
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
Ck# 197038

☒

RUN DATE:11/01/22
 TIME:16:17

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 11/02/22 THRU 11/02/22

PAGE 1
 GLCKREG

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	196984	11/02/22	871.97	AIRGAS USA, LLC - CENTRAL DIV
A/P	196985	11/02/22	13.03	ALPHA TEC SYSTEMS INC
A/P	196986	11/02/22	175.79	AMTEC MEDICAL INC
A/P	196987	11/02/22	217.00	ANNOUNCEMENTS PLUS TOO AGAIN
A/P	196988	11/02/22	60.00	APRIL KUBALA
A/P	196989	11/02/22	42.67	BAXTER HEALTHCARE
A/P	196990	11/02/22	716.29	BECKMAN COULTER INC
A/P	196991	11/02/22	143.31	CAPITAL ONE
A/P	196992	11/02/22	1,565.91	CARDINAL HEALTH 414,LLC
A/P	196993	11/02/22	1,790.00	CAREFUSION SOLUTIONS, LLC
A/P	196994	11/02/22	4,825.01	CDW GOVERNMENT, INC.
A/P	196995	11/02/22	55.00	CITIZENS MEDICAL CENTER
A/P	196996	11/02/22	39,375.00	COFFEE BARREL, LLC
A/P	196997	11/02/22	739.30	DEWITT POTH & SON
A/P	196998	11/02/22	510.30	DRIESSEN WATER INC. (CULLIGAN)
A/P	196999	11/02/22	1,875.00	ESO SOLUTIONS, INC.
A/P	197000	11/02/22	4,500.00	EVIDENT
A/P	197001	11/02/22	285.58	FEDERAL EXPRESS CORP.
A/P	197002	11/02/22	5,639.50	FISHER HEALTHCARE
A/P	197003	11/02/22	1,325.13	FUSION CLOUD SERVICES, LLC
A/P	197004	11/02/22	1,768.82	GULF COAST PAPER COMPANY
A/P	197005	11/02/22	54.99	HAYES ELECTRIC SERVICE
A/P	197006	11/02/22	640.86	M G TRUST
A/P	197007	11/02/22	190.66	M.C. JOHNSON COMPANY INC
A/P	197008	11/02/22	10,482.61	MEDLINE INDUSTRIES INC
A/P	197009	11/02/22	195.00	MEMORIAL MEDICAL CLINIC
A/P	197010	11/02/22	362.64	MMC AUXILIARY GIFT SHOP
A/P	197011	11/02/22	.00	VOIDED
A/P	197012	11/02/22	12,495.19	MORRIS & DICKSON CO, LLC
A/P	197013	11/02/22	3,633.48	NATIONAL FARM LIFE INSURANCE
A/P	197014	11/02/22	153.33	NURSES CHOICE CORPORATION
A/P	197015	11/02/22	658.68	OWENS & MINOR
A/P	197016	11/02/22	42.75	ROBERT RODRIQUEZ
A/P	197017	11/02/22	117.42	SERVICE SUPPLY OF VICTORIA INC
A/P	197018	11/02/22	34.50	SHAWNA HARTL
A/P	197019	11/02/22	393.70	SHERWIN WILLIAMS
A/P	197020	11/02/22	2,193.83	SIEMENS MEDICAL SOLUTIONS INC
A/P	197021	11/02/22	410.00	SIGN AD, LTD.
A/P	197022	11/02/22	36.80	SMILE MAKERS
A/P	197023	11/02/22	5,000.00	SOUTHEAST TEXAS HEALTH SYS
A/P	197024	11/02/22	4,166.20	SPARKLIGHT
A/P	197025	11/02/22	540.00	STANFORD VACUUM SERVICE
A/P	197026	11/02/22	11,047.22	SUN LIFE FINANCIAL
A/P	197027	11/02/22	3,218.62	TELCOR
A/P	197028	11/02/22	158.49	TELEFLEX MEDICAL
A/P	197029	11/02/22	.00	VOIDED
A/P	197030	11/02/22	7,200.35	UNIFIRST HOLDINGS INC
A/P	197031	11/02/22	159.71	UNIFORM ADVANTAGE
A/P	197032	11/02/22	99.30	UNITED AD LABEL CO INC
A/P	197033	11/02/22	2,200.00	US POSTAL SERVICE

RUN DATE:11/01/22
TIME:16:17

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/02/22 THRU 11/02/22

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	197034	11/02/22	40.20	VICTORIA ADVOCATE
A/P	197035	11/02/22	3,285.40	WAGeworks, INC.
A/P	197036	11/02/22	333.00	WALLER, LANSDEN, DORTCH & DAVIS
A/P	197037	11/02/22	1,292.15	WERFEN USA LLC
A/P	197038	11/02/22	17,492.32	BETHANY SENIOR LIVING
A/P	197039	11/02/22	39,544.46	GOLDENCREEK HEALTHCARE
A/P	197040	11/02/22	16,184.76	GULF POINTE PLAZA
A/P	197041	11/02/22	10,115.50	THE CRESCENT
A/P	197042	11/02/22	49,422.11	TUSCANY VILLAGE
TOTALS:			270,090.84	

Payables 121,347.84 +
13,000 +
4,500.00 +
410.00 +
5,000.00 +
Criticals 175.79 +
393.70 +
1,325.13 +
4,166.20 +
NH Timmering 132,759.15 +
010
270,090.84 +

APPROVED ON

NOV 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 10/31/2022

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		29,664.41 ✓	29,564.41 ✓	233,826.96 ✓		233,926.96 ✓	233,542.38
						Bank Balance	233,926.96 ✓
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP YR 3 ADJ 3	284.58 ✓
						July Interest	
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	233,542.38 ✓
Broadmoor		93,754.27 ✓	93,654.27 ✓	227,583.85 ✓		227,683.85 ✓	227,481.24
						Bank Balance	227,683.85 ✓
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP YR 3 ADJ 3	102.61 ✓
						July Interest	
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	227,481.24 ✓
Crescent		73,057.98 ✓	72,957.98 ✓	126,846.98 ✓		126,946.98 ✓	126,763.15
						Bank Balance	126,946.98 ✓
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP YR 3 ADJ 3	83.83 ✓
						July Interest	
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	126,763.15 ✓
Fort Bend		15,757.04 ✓	15,657.04 ✓	117,218.82 ✓		117,318.82 ✓	117,102.64
						Bank Balance	117,318.82 ✓
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP YR 3 ADJ 3	116.18 ✓
						July Interest	
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	117,102.64 ✓
Soiera at W Houston		122,435.76 ✓	122,335.76 ✓	415,809.93 ✓		415,909.93 ✓	415,709.30
						Bank Balance	415,909.93 ✓
						Variance	-
						Leave in Balance	100.00
						AMERIGROUP YR 3 ADJ 3	100.63 ✓
						July Interest	
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	415,709.30 ✓

233,542.38
 227,481.24 +
 126,763.15 + Fort Bend / Broadmoor
 117,102.64 +
 415,709.30 +
 1,120,598.71

APPROVED ON
 OCT 31 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

TOTAL TRANSFERS 1,120,598.71
 Approved: *Roshanda S. Thomas*
 ROSHANDA THOMAS, CEO 10/31/2022

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

Fort Bend

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
10/24/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,743.50	-	-	-	-	-	2,743.50
10/24/2022 NOVITAS SOLUTION HCCLAIMPMT 675663 420000120	-	38,981.42	-	-	-	-	-	38,981.42
10/25/2022 HNB - ECHO HCCLAIMPMT 746003411 440000264442	-	345.99	-	-	-	-	-	345.99
10/25/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	8,829.90	-	-	-	-	-	8,829.90
10/25/2022 NOVITAS SOLUTION HCCLAIMPMT 675663 420000146	-	28,959.70	-	-	-	-	-	28,959.70
10/26/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,888.80	-	-	-	-	-	1,888.80
10/26/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2	-	1,905.24	-	-	-	-	-	1,905.24
10/27/2022 CK193	26.44	-	-	-	-	-	-	-
10/27/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	15,630.60	-	-	-	-	-	-	-
10/27/2022 Deposit	-	2,214.95	-	-	-	-	-	2,214.95
10/27/2022 MANAGEANDNET1718 MNS PMNT 000000000004294 41	-	1,984.50	-	-	-	-	-	1,984.50
10/27/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,967.13	-	-	-	-	-	1,967.13
10/27/2022 AMERIGROUP CORPO E-PAYMENT EE52454233 111000	-	153.36	79.00	11.88	27.72	34.76	116.18	37.18
10/28/2022 MANAGEANDNET1718 MNS PMNT 000000000004294 41	-	1,134.00	-	-	-	-	-	1,134.00
10/28/2022 HNB - ECHO HCCLAIMPMT 746003411 440000270625	-	7,864.88	-	-	-	-	-	7,864.88
10/28/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	18,245.45	-	-	-	-	-	18,245.45
TOTALS	15,657.04	117,218.82	79.00	11.88	27.72	34.76	116.18	117,102.64

Solera at West Houston

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
10/24/2022 MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	639.00	-	-	-	-	-	639.00
10/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000222733	-	409.15	-	-	-	-	-	409.15
10/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000222733	-	45.09	-	-	-	-	-	45.09
10/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221559	-	8,474.01	-	-	-	-	-	8,474.01
10/24/2022 NOVITAS SOLUTION HCCLAIMPMT 676310 420000120	-	242,706.93	-	-	-	-	-	242,706.93
10/24/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001130	-	395.00	-	-	-	-	-	395.00
10/25/2022 Deposit	-	8,681.25	-	-	-	-	-	8,681.25
10/25/2022 HNB - ECHO HCCLAIMPMT 746003411 440000264920	-	482.63	-	-	-	-	-	482.63
10/25/2022 HNB - ECHO HCCLAIMPMT 746003411 440000264920	-	41.75	-	-	-	-	-	41.75
10/25/2022 Amerigroup TXSC HCCLAIMPMT 3192853245 111000	-	14,359.10	-	-	-	-	-	14,359.10
10/25/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	10,901.62	-	-	-	-	-	10,901.62
10/25/2022 NOVITAS SOLUTION HCCLAIMPMT 676310 420000146	-	42,609.19	-	-	-	-	-	42,609.19
10/26/2022 HNB - ECHO HCCLAIMPMT 746003411 440000298953	-	4,265.75	-	-	-	-	-	4,265.75
10/26/2022 Amerigroup TXSC HCCLAIMPMT 3193016127 111000	-	2,528.50	-	-	-	-	-	2,528.50
10/26/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	4,880.74	-	-	-	-	-	4,880.74
10/26/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001396	-	4,185.00	-	-	-	-	-	4,185.00
10/27/2022 CK1249	22.88	-	-	-	-	-	-	-
10/27/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	122,312.88	-	-	-	-	-	-	-
10/27/2022 Deposit	-	5,084.06	-	-	-	-	-	5,084.06
10/27/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	658.15	-	-	-	-	-	658.15
10/27/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	24,688.73	-	-	-	-	-	24,688.73
10/27/2022 AMERIGROUP CORPO E-PAYMENT EE52454235 111000	-	132.83	68.43	10.34	23.98	30.08	100.63	32.20
10/28/2022 MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	10,402.00	-	-	-	-	-	10,402.00
10/28/2022 HNB - ECHO HCCLAIMPMT 746003411 440000270625	-	5,723.35	-	-	-	-	-	5,723.35
10/28/2022 HNB - ECHO HCCLAIMPMT 746003411 440000270625	-	9,182.86	-	-	-	-	-	9,182.86
10/28/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	3,544.24	-	-	-	-	-	3,544.24
10/28/2022 HUMANA INS CO HCCLAIMPMT 390862 830000576358	-	6,510.00	-	-	-	-	-	6,510.00
10/28/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	-	4,279.00	-	-	-	-	-	4,279.00
TOTALS	122,335.76	415,809.93	68.43	10.34	23.98	30.08	100.63	415,709.30
TOTALS	334,169.46	1,121,286.54	467.81	70.40	163.90	205.74	687.83	1,120,598.71

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type

DDA

Data reported as of Oct 31, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 16	\$7,230,560.77	\$7,464,580.43	\$7,230,560.77	\$5,822,970.5
*4551 CAL CO INDIGENT HEALTHCARE	\$5,900.67	\$5,900.67	\$5,900.67	\$5,900.6
*3660 GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.0
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$146,359.80	\$159,323.68	\$146,359.80	\$135,919.6
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.68	\$536.68	\$536.68	\$536.6
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$5,193,078.88	\$5,302,337.17	\$5,193,078.88	\$4,037,388.9
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.05	\$432.05	\$432.05	\$432.0
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$233,926.96	\$246,556.35	\$233,926.96	\$160,685.8
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$227,683.85	\$259,931.39	\$227,683.85	\$166,411.2
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$126,946.98	\$138,226.03	\$126,946.98	\$113,586.1
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$117,318.82	\$124,132.95	\$117,318.82	\$90,074.4
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$415,909.93	\$437,114.41	\$415,909.93	\$376,268.4
*2998 MMC -MONEY MARKET FUND	\$295,844.90	\$295,844.90	\$295,844.90	\$295,844.9
*5506 MMC -NH BETHANY SENIOR LIVING	\$158,365.81	\$163,137.78	\$158,365.81	\$151,412.2
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$162,821.16	\$167,753.85	\$162,821.16	\$151,113.1
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,590.35	\$2,590.35	\$2,590.35	\$2,590.3

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 10/31/2022

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		103,676.23 ✓	103,576.23 ✓	146,259.80 ✓		146,359.80	146,259.80
					Bank Balance	146,359.80 ✓	
					Variance	-	
					Leave in Balance	100.00	

July Interest _____
 August Interest _____
 September Interest _____
 Adjust Balance/Transfer Amt 146,259.80 ✓

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

Approved: Roshanda Thomas
 ROSHANDA THOMAS, CEO 10/31/2022

APPROVED ON
 OCT 31 2022
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Golden Creek

10/25/2022 Deposit
 10/26/2022 Deposit
 10/26/2022 TSYS/TRANSFIRST CR CD DEP 543684555876917 91
 10/26/2022 NOVITAS SOLUTION HCCLAIMPMT 676097 420000149
 10/27/2022 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
 10/27/2022 Deposit
 10/27/2022 TSYS/TRANSFIRST CR CD DEP 543684555876917 91
 10/27/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
 10/28/2022 TSYS/TRANSFIRST CR CD DEP 543684555876917 91
 10/28/2022 NOVITAS SOLUTION HCCLAIMPMT 676097 420000159

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
-	49,570.27					-	49,570.27
-	13,772.86					-	13,772.86
-	4,290.00					-	4,290.00
-	51,632.45					-	51,632.45
103,576.23	-					-	-
-	14,904.55					-	14,904.55
-	163.00					-	163.00
-	1,486.50					-	1,486.50
-	876.54					-	876.54
-	9,563.63					-	9,563.63
-	-					-	-
-	-					-	-
103,576.23	✓ 146,259.80 ✓	-	-	-	-	-	146,259.80

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type

DDA

Data reported as of Oct 31, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 16	\$7,230,560.77	\$7,464,580.43	\$7,230,560.77	\$5,822,970.5
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,900.67	\$5,900.67	\$5,900.67	\$5,900.6
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.0
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$146,359.80	\$159,323.68	\$146,359.80	\$135,919.6
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.68	\$536.68	\$536.68	\$536.6
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,193,078.88	\$5,302,337.17	\$5,193,078.88	\$4,037,388.9
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.05	\$432.05	\$432.05	\$432.0
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$233,926.96	\$246,556.35	\$233,926.96	\$160,685.8
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$227,683.85	\$259,931.39	\$227,683.85	\$166,411.2
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$126,946.98	\$138,226.03	\$126,946.98	\$113,586.1
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$117,318.82	\$124,132.95	\$117,318.82	\$90,074.4
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$415,909.93	\$437,114.41	\$415,909.93	\$376,268.4
<u>*2998</u> MMC -MONEY MARKET FUND	\$295,844.90	\$295,844.90	\$295,844.90	\$295,844.9
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$158,365.81	\$163,137.78	\$158,365.81	\$151,412.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$162,821.16	\$167,753.85	\$162,821.16	\$151,113.1
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,590.35	\$2,590.35	\$2,590.35	\$2,590.3

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 10/31/2022

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		10,240.67 ✓	10,140.67 ✓	2,490.35 ✓			2,590.35	no transfer
						Bank Balance	2,590.35	
						Variance	-	
						Leave in Balance	100.00	

July Interest
 August Interest
 September Interest
 Adjust Balance/Transfer Amt 2,490.35 ✓

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		98,003.35 ✓	97,903.35 ✓	162,721.16 ✓			162,821.16	162,721.16
						Bank Balance	162,821.16	
						Variance	-	
						Leave in Balance	100.00	

July Interest
 August Interest
 September Interest
 Adjust Balance/Transfer Amt 162,721.16 ✓

TOTAL TRANSFERS 165,211.51

Routing Information for Gulf Pointe Plaza:

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

Approved: Roshanda Thomas
 ROSHANDA THOMAS, CEO 10/31/2022

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

10/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221535
 10/24/2022 AETNA AS01 HCCLAIMPMT 1922092790 51000014207
 10/27/2022 WIRE OUT HMG SERVICES, LLC
 10/27/2022 HNB - ECHO HCCLAIMPMT 746003411 440000233768

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp		QIPP/Comp4		QIPP TI	
		QIPP/Comp1	2	QIPP/Comp3	&Lapse		
-	1,425.93	-	-	-	-	1,425.93	
-	966.41	-	-	-	-	966.41	
10,140.67	-	-	-	-	-	-	
-	98.01	-	-	-	-	98.01	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
10,140.67	2,490.35	-	-	-	-	2,490.35	

Gulf Pointe Plaza-Medicare/Medicaid

10/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000222356
 10/25/2022 Deposit
 10/25/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001399820
 10/26/2022 Deposit
 10/26/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 10/26/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001466891
 10/27/2022 WIRE OUT HMG SERVICES, LLC
 10/27/2022 Deposit
 10/27/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 10/28/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 10/28/2022 NORIDIAN J3A HCCLAIMPMT 675892 4200001439764
 10/28/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113013 2

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp		QIPP/Comp4		QIPP TI	
		QIPP/Comp1	2	QIPP/Comp3	&Lapse		
-	29.66	-	-	-	-	29.66	
-	21,551.76	-	-	-	-	21,551.76	
-	93,717.62	-	-	-	-	93,717.62	
-	21,383.02	-	-	-	-	21,383.02	
-	1,071.16	-	-	-	-	1,071.16	
-	1,348.70	-	-	-	-	1,348.70	
97,903.35	-	-	-	-	-	-	
-	11,774.65	-	-	-	-	11,774.65	
-	136.62	-	-	-	-	136.62	
-	2,135.00	-	-	-	-	2,135.00	
-	6,943.95	-	-	-	-	6,943.95	
-	2,629.02	-	-	-	-	2,629.02	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
-	-	-	-	-	-	-	
97,903.35	162,721.16	-	-	-	-	162,721.16	
108,044.02	165,211.51	-	-	-	-	165,211.51	

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

DDA

Data reported as of Oct 31, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 16	\$7,230,560.77	\$7,464,580.43	\$7,230,560.77	\$5,822,970.5
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,900.67	\$5,900.67	\$5,900.67	\$5,900.6
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.0
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$146,359.80	\$159,323.68	\$146,359.80	\$135,919.6
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.68	\$536.68	\$536.68	\$536.6
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,193,078.88	\$5,302,337.17	\$5,193,078.88	\$4,037,388.9
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.05	\$432.05	\$432.05	\$432.0
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$233,926.96	\$246,556.35	\$233,926.96	\$160,685.8
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$227,683.85	\$259,931.39	\$227,683.85	\$166,411.2
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$126,946.98	\$138,226.03	\$126,946.98	\$113,586.1
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$117,318.82	\$124,132.95	\$117,318.82	\$90,074.4
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$415,909.93	\$437,114.41	\$415,909.93	\$376,268.4
<u>*2998</u> MMC -MONEY MARKET FUND	\$295,844.90	\$295,844.90	\$295,844.90	\$295,844.9
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$158,365.81	\$163,137.78	\$158,365.81	\$151,412.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$162,821.16	\$167,753.85	\$162,821.16	\$151,113.1
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,590.35	\$2,590.35	\$2,590.35	\$2,590.3

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 10/31/2022

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Tuscany Village		274,923.53 ✓	274,823.53 ✓	142,643.93 ✓			142,743.93	142,643.93 ✓
						Bank Balance Variance	142,743.93	
						Leave in Balance	100.00	

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

Adjust Balance/Transfer Amt 142,643.93 ✓
 Approved: *Roshanda Thomas*
 ROSHANDA THOMAS, CEO 10/31/2022

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Tuscany Village

MMC PORTION

	<u>Transfer-Out</u>	<u>Transfer-in</u>	<u>QIPP/Comp 1</u>	<u>QIPP/Comp 2</u>	<u>QIPP/Comp 3</u>	<u>QIPP/Comp 4&Lapse</u>	<u>QIPP TI</u>	<u>NH PORTION</u>
10/24/2022 HNB - ECHO HCCLAIMPMT 746003411 440000221535	-	1,764.18	-	-	-	-	-	1,764.18
10/24/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000120	-	12,566.44	-	-	-	-	-	12,566.44
10/25/2022 Deposit	-	34,780.47	-	-	-	-	-	34,780.47
10/26/2022 Deposit	-	22,401.85	-	-	-	-	-	22,401.85
10/26/2022 Deposit	-	11,060.00	-	-	-	-	-	11,060.00
10/26/2022 HNB - ECHO HCCLAIMPMT 746003411 440000298978	-	3,251.48	-	-	-	-	-	3,251.48
10/26/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000149	-	23,859.65	-	-	-	-	-	23,859.65
10/27/2022 WIRE OUT LINBAR ENTERPRISES, LLC	274,823.53	-	-	-	-	-	-	-
10/27/2022 Deposit	-	4,899.98	-	-	-	-	-	4,899.98
10/27/2022 HNB - ECHO HCCLAIMPMT 746003411 440000234103	-	3,912.92	-	-	-	-	-	3,912.92
10/27/2022 HNB - ECHO HCCLAIMPMT 746003411 440000233768	-	3,584.11	-	-	-	-	-	3,584.11
10/27/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000135	-	12,524.60	-	-	-	-	-	12,524.60
10/28/2022 KS PLAN ADMINIST HCCLAIMPMT 179 111000024799	-	880.00	-	-	-	-	-	880.00
10/28/2022 HNB - ECHO HCCLAIMPMT 746003411 440000270625	-	345.69	-	-	-	-	-	345.69
10/28/2022 NOVITAS SOLUTION HCCLAIMPMT 676201 420000159	-	6,812.56	-	-	-	-	-	6,812.56
	274,823.53	142,643.93	-	-	-	-	-	142,643.93

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 16	\$7,230,560.77	\$7,464,580.43	\$7,230,560.77	\$5,822,970.5
*4551 CAL CO INDIGENT HEALTHCARE	\$5,900.67	\$5,900.67	\$5,900.67	\$5,900.6
*3660 GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.0
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$146,359.80	\$159,323.68	\$146,359.80	\$135,919.6
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.68	\$536.68	\$536.68	\$536.6
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$5,193,078.88	\$5,302,337.17	\$5,193,078.88	\$4,037,388.9
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.05	\$432.05	\$432.05	\$432.0
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$233,926.96	\$246,556.35	\$233,926.96	\$160,685.6
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$227,683.85	\$259,931.39	\$227,683.85	\$166,411.2
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$126,946.98	\$138,226.03	\$126,946.98	\$113,586.1
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$117,318.82	\$124,132.95	\$117,318.82	\$90,074.4
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$415,909.93	\$437,114.41	\$415,909.93	\$376,268.4
*2998 MMC -MONEY MARKET FUND	\$295,844.90	\$295,844.90	\$295,844.90	\$295,844.9
*5506 MMC -NH BETHANY SENIOR LIVING	\$158,365.81	\$163,137.78	\$158,365.81	\$151,412.2
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$162,821.16	\$167,753.85	\$162,821.16	\$151,113.1
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,590.35	\$2,590.35	\$2,590.35	\$2,590.3
*3407 MMC -NH TUSCANY VILLAGE	\$142,743.93	\$160,662.17	\$142,743.93	\$134,705.6

* indicate:
Page generated on 10/31/2022 at

Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 10/31/2022

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	335,166.66	335,066.66	158,265.81			158,365.81	158,265.81
					Bank Balance	158,365.81	
					Variance	158,365.81	
					Leave in Balance	100.00	

July Interest
 August Interest
 September Interest
 Adjust Balance/Transfer Amt 158,265.81

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

Approved: *Roshanda S. Thomas*
 ROSHANDA THOMAS, CEO 10/31/2022

Quick View

Select Quick View Accounts
Account Number / Name

Select Group
Groups

Account Type

DDA

Data reported as of Oct 31, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 16	\$7,230,560.77	\$7,464,580.43	\$7,230,560.77	\$5,822,970.5
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$5,900.67	\$5,900.67	\$5,900.67	\$5,900.6
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.0
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$146,359.80	\$159,323.68	\$146,359.80	\$135,919.6
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.68	\$536.68	\$536.68	\$536.6
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,193,078.88	\$5,302,337.17	\$5,193,078.88	\$4,037,388.5
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.05	\$432.05	\$432.05	\$432.0
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$233,926.96	\$246,556.35	\$233,926.96	\$160,685.8
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$227,683.85	\$259,931.39	\$227,683.85	\$166,411.2
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$126,946.98	\$138,226.03	\$126,946.98	\$113,586.1
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$117,318.82	\$124,132.95	\$117,318.82	\$90,074.4
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$415,909.93	\$437,114.41	\$415,909.93	\$376,268.4
<u>*2998</u> MMC -MONEY MARKET FUND	\$295,844.90	\$295,844.90	\$295,844.90	\$295,844.9
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$158,365.81	\$163,137.78	\$158,365.81	\$151,412.2
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$162,821.16	\$167,753.85	\$162,821.16	\$151,113.1
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,590.35	\$2,590.35	\$2,590.35	\$2,590.3

Ashford

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MEMORIAL MEDICAL CENTER
A _____
Y _____
E _____
E _____

Date Requested: 10/31/22

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CL#001187

FOR ACCT. USE ONLY

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

AMOUNT \$284.58

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP YEAR 3 ADJ 3 QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Roslane S. Thomas*

RUN DATE:11/02/22
TIME:13:29

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/02/22 THRU 11/02/22

PAGE 3
GLCKREG

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

NHA 001187 11/02/22 284.58 MEMORIAL MEDICAL CENTER *Ashfml*
TOTALS: 284.58

APPROVED ON

NOV 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Broadmoor

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

MEMORIAL MEDICAL CENTER

Date Requested: 10/31/22

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#000220

FOR ACCT. USE ONLY

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

AMOUNT \$102.61

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP YEAR 3 ADJ 3 QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: Roshane S. Jones

RUN DATE:11/02/22
TIME:13:29

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/02/22 THRU 11/02/22

PAGE 4
GLCKREG

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

NHB 000220 11/02/22 102.61 MEMORIAL MEDICAL CENTER *Broadman*
TOTALS: 102.61

APPROVED ON

NOV 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Crescent

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

MEMORIAL MEDICAL CENTER

Date Requested: 10/31/22

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK # 000258

FOR ACCT. USE ONLY

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

AMOUNT \$83.83

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP YEAR 3 ADJ 3 QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Roshane Thomas*

RUN DATE:11/02/22
TIME:13:29

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/02/22 THRU 11/02/22

PAGE 5
GLCKREG

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

NHC 000258 11/02/22 83.83 MEMORIAL MEDICAL CENTER *Crescent*
TOTALS: 83.83

APPROVED ON

NOV 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Fort Bend

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

MEMORIAL MEDICAL CENTER

Date Requested: 10/31/22

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept.

APPROVED ON
OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CL# 00194

AMOUNT \$116.18

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP YEAR 3 ADJ 3 QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Roshan S. Thomas*

RUN DATE:11/02/22
TIME:13:29

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/02/22 THRU 11/02/22

PAGE 6
GLCKREG

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

NHF 000194 11/02/22 116.18 MEMORIAL MEDICAL CENTER *Fort Bend*
TOTALS: 116.18

APPROVED ON

NOV 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Solera

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MEMORIAL MEDICAL CENTER

Date Requested: 10/31/22

A _____

Y _____

E _____

E _____

APPROVED ON

OCT 31 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 001250

FOR ACCT. USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept

AMOUNT \$100.68³

G/L NUMBER: 10255040

EXPLANATION: AMERIGROUP YEAR 3 ADJ 3 QIPP

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: Roshane S. Thomas

RUN DATE:11/02/22
TIME:13:29

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/02/22 THRU 11/02/22

PAGE 7
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHS 001250 11/02/22 100.63 MEMORIAL MEDICAL CENTER *Solem*
TOTALS: 100.63

APPROVED ON

NOV 02 2022

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

NH ASHFORD
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001187

Date 11/2/22 88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Center

\$ 284.58

Two hundred eighty four & 58/100

DOLLARS



County auditor

FOR Amengroup yr3 ADJ3

County treasurer
Security features are included. Details on back.

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000220

Date 11/2/22 88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Center

\$ 102.61

One hundred two & 61/100

DOLLARS



County auditor

FOR Amengroup yr3 ADJ3

County treasurer
Security features are included. Details on back.

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000258

Date 11/2/22 88-2265/1131

PAY

TO THE ORDER OF Memorial Medical Center

\$ 83.83

Eighty three & 83/100

DOLLARS



County auditor

FOR Amengroup yr3 ADJ3

County treasurer
Security features are included. Details on back.

MEMORIAL MEDICAL CENTER

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

000194

Date 11/2/22

88-2265/1131

PAY
TO THE
ORDER OF

Memorial Medical Center

\$ 116.18

One hundred sixteen & 18/100

DOLLARS



County auditor

FOR Amerigroup YR3 ADI 3

County treasurer
Security features are included. Details on back.

MEMORIAL MEDICAL CENTER

NH SOLERA
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001250

Date 11/2/22

88-2265/1131

PAY
TO THE
ORDER OF

Memorial Medical Center

\$ 100.63

One hundred & 63/100

DOLLARS



County auditor

FOR Amerigroup YR3 ADI 3

County treasurer
Security features are included. Details on back.

⑈001250⑈ ⑆113122655⑆ 216844438

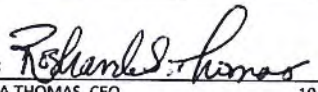
QIPP Payment to MMC from Nursing Facilities

Commissioner's Court

10/31/2022

NH Name	From Bank Acct #	Ck #	Payee	GL #	AMERIGROUP YR 3 ADJ 3				TOTAL	Date
Ashford	10000018 - Prosperity		MMC - Prosperity Operating #10000001	10255040	284.58				284.58	10/31/2022
Broadmoor	10000019 - Prosperity		MMC - Prosperity Operating #10000001	10255040	102.61				102.61	10/31/2022
Crescent	10000020 - Prosperity		MMC - Prosperity Operating #10000001	10255040	83.83				83.83	10/31/2022
Fort Bend	10000021 - Prosperity		MMC - Prosperity Operating #10000001	10255040	116.18				116.18	10/31/2022
Solera	10000022 - Prosperity		MMC - Prosperity Operating #10000001	10255040	100.68				100.68	10/31/2022
Golden Creek	10000023 - Prosperity		MMC - Prosperity Operating #10000001	10255040					-	10/31/2022
Gulf Pointe-PP	10000114 - Prosperity		MMC - Prosperity Operating #10000001	10255040					-	10/31/2022
Gulf Pointe-MM	10000025 - Prosperity		MMC - Prosperity Operating #10000001	10255040					-	10/31/2022
Bethany			MMC - Prosperity Operating #10000001	10255040					-	10/31/2022
Tuscany			MMC - Prosperity Operating #10000001	10255040					-	10/31/2022
			Total:		687.88				687.88	

Note:

Approved: 
 ROSHANDA THOMAS, CEO 10/31/2022