

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR ---November 16, 2022**

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 171,470.40	✓
TOTAL TRANSFERS BETWEEN FUNDS	\$ 327,032.45	✓
TOTAL NURSING HOME UPL EXPENSES	\$ 471,098.62	✓
TOTAL INTER-GOVERNMENT TRANSFERS	\$ 117,013.39	✓
GRAND TOTAL DISBURSEMENTS APPROVED November 16, 2022	\$ 1,086,614.86	✓

APPROVED

NOV 16 2022

CALHOUN COUNTY  
COMMISSIONERS COURT

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR --November 16, 2022**

**PAYABLES AND PAYROLL**

11/10/2022 Weekly Payables	160,072.93
11/14/2022 McKesson-340B Prescription Expense	2,242.38
11/14/2022 Amerisource Bergen-340B Prescription Expense	3,012.64

**Prosperity Electronic Bank Payments**

11/7-11/10/22 Credit Card & Lease Fees	4,253.81
11/14/2022 Sales Tax for September 2022	1,450.24
11/9/2022 Cleargage-Patient Financing Service	68.20
11/7-11/10/22 Pay Plus-Patient Claims Processing Fee	370.20

**TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS** \$ 171,470.40

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

11/10/2022 MMC Operating to Solera-correction of NH insurance payment deposited into MMC Operating	28,481.50
11/10/2022 MMC Operating to Fort bend-correction of NH insurance payment deposited into MMC Operating	4,279.00
11/10/2022 MMC Operating to Broadmoor-correction of NH insurance payment deposited into MMC Operating	2,723.00
11/10/2022 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	35,344.01
11/10/2022 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating	46,355.45
11/10/2022 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	87,111.90
11/10/2022 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	122,737.59

**TOTAL TRANSFERS BETWEEN FUNDS** \$ 327,032.45

**NURSING HOME UPL EXPENSES**

11/14/2022 Nursing Home UPL-Cantex Transfer	303,335.62
11/14/2022 Nursing Home UPL-Nexion Transfer	35,570.09
11/14/2022 Nursing Home UPL-HMG Transfer	51,148.71
11/14/2022 Nursing Home UPL-Tuscany Transfer	9,970.74
11/14/2022 Nursing Home UPL-HSL Transfer	27,379.07

**QIPP CHECKS TO MMC**

11/14/2022 Ashford	15,601.03
11/14/2022 Broadmoor	5,339.26
11/14/2022 Crescent	3,982.09
11/14/2022 Fort Bend	4,871.43
11/14/2022 Solera	4,670.25
11/14/2022 Tuscany	9,230.33

**TOTAL NURSING HOME UPL EXPENSES** \$ 471,098.62

**INTER-GOVERNMENT TRANSFERS**

11/14/2022 IGT RAPPS to be paid November 30, 2022	117,013.39
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**TOTAL INTER-GOVERNMENT TRANSFERS** \$ 117,013.39

**GRAND TOTAL DISBURSEMENTS APPROVED November 16, 2022** \$ 1,086,614.86

RECEIVED BY THE COUNTY AUDITOR ON

NOV 10 2022

11/10/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

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AP Open Invoice List

ap\_open\_invoice.template

Due Dates Through: 12/01/2022

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
13180	ADVANCED STERILIZATION PRODUCT ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	8020391826 ✓		11/09/20	11/09/20	11/09/20		868.68	0.00	0.00	868.68 ✓			
	SUPPLIES												
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		13180	ADVANCED STERILIZATION PRODUCT				868.68	0.00	0.00	868.68			
A1680	AIRGAS USA, LLC - CENTRAL DIV ✓	M											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	9131369386 ✓		11/10/20	10/25/20	11/19/20		3,089.81	0.00	0.00	3,089.81 ✓			
	OXYGEN												
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		A1680	AIRGAS USA, LLC - CENTRAL DIV				3,089.81	0.00	0.00	3,089.81			
14028	AMAZON CAPITAL SERVICES ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	1K36MLNWKY66 ✓		10/31/20	10/29/20	11/28/20		62.32	0.00	0.00	62.32 ✓			
	SUPPLIES												
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		14028	AMAZON CAPITAL SERVICES				62.32	0.00	0.00	62.32			
A1360	AMERISOURCEBERGEN DRUG CORP ✓	W											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	3109570845 ✓		11/10/20	10/18/20	10/24/20		24.31	0.00	0.00	24.31 ✓			
	INVENTORY												
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		A1360	AMERISOURCEBERGEN DRUG CORP				24.31	0.00	0.00	24.31			
A2218	AQUA BEVERAGE COMPANY ✓	M											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	231635 ✓		11/10/20	10/31/20	11/15/20		101.91	0.00	0.00	101.91 ✓			
	WATER												
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		A2218	AQUA BEVERAGE COMPANY				101.91	0.00	0.00	101.91			
A0400	AUREUS RADIOLOGY LLC ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	2795657 ✓		10/31/20	10/25/20	11/30/20		3,123.75	0.00	0.00	3,123.75 ✓			
	LAB STAFFING (10/17-10/13/22) Stribby												
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		A0400	AUREUS RADIOLOGY LLC				3,123.75	0.00	0.00	3,123.75			
12800	AUTHORITYRX ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	1570 ✓		11/10/20	11/02/20	11/03/20		18,973.00	0.00	0.00	18,973.00 ✓			
		340B											
	1584 ✓		11/10/20	11/05/20	11/06/20		1,254.00	0.00	0.00	1,254.00 ✓			

CVS CLAIMS

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		12800	AUTHORITYRX				20,227.00	0.00	0.00	20,227.00
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	
12572528 ✓		11/10/20	10/29/20	11/01/20		16.12	0.00	0.00	16.12	✓
LATE FEES										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1150	BAXTER HEALTHCARE				16.12	0.00	0.00	16.12
Vendor#	Vendor Name			Class	Pay Code					
M2485	BAYER HEALTHCARE ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
6010254564 ✓		10/31/20	10/25/20	11/30/20		1,424.64	0.00	0.00	1,424.64	✓
SUPPLIES										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		M2485	BAYER HEALTHCARE				1,424.64	0.00	0.00	1,424.64
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	
5464832 ✓		10/31/20	10/25/20	11/30/20		1,337.05	0.00	0.00	1,337.05	✓
LEASE										
110238532 ✓		10/31/20	10/31/20	11/30/20		3,874.83	0.00	0.00	3,874.83	✓
CONTRACT										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC				5,211.88	0.00	0.00	5,211.88
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	
103122B		11/10/20	10/31/20	11/15/20		1,052.00	0.00	0.00	1,052.00	✓
SPEECH THERAPY										
103122A		11/10/20	10/31/20	11/15/20		1,026.00	0.00	0.00	1,026.00	✓
SPEECH THERAPY										
103122		11/10/20	10/31/20	11/15/20		1,013.00	0.00	0.00	1,013.00	✓
SPEECH THERAPY										
103122C		11/10/20	10/31/20	11/15/20		713.00	0.00	0.00	713.00	✓
SPEECH THERAPY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		12740	BUILDING KID STEPS				3,804.00	0.00	0.00	3,804.00
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	
1385 ✓		11/10/20	11/05/20	11/20/20		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					
10212	CLINICAL PATHOLOGY LABS ✓			ICP						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
17656202210 ✓		11/10/20	10/31/20	11/30/20		18,275.45	0.00	0.00	18,275.45	✓
LAB SERVICES										

Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		10212	CLINICAL PATHOLOGY LABS		18,275.45	0.00	0.00	18,275.45	
Vendor#	Vendor Name		Class	Pay Code					
11029	COASTAL REFRIGERATION ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
5113812 ✓		11/10/20	03/10/20	04/10/20		263.90	0.00	0.00	263.90 ✓
WATER LEAK/ICE MACHINE									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11029	COASTAL REFRIGERATION		263.90	0.00	0.00	263.90	
Vendor#	Vendor Name		Class	Pay Code					
10060	DE TAR HOSPITAL ✓		ICP						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
DTR2210020 ✓		11/10/20	11/01/20	11/15/20		784.08	0.00	0.00	784.08 ✓
LAB SERVICES OCT 22									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		10060	DE TAR HOSPITAL		784.08	0.00	0.00	784.08	
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
6986770 ✓		11/10/20	10/28/20	11/22/20		104.38	0.00	0.00	104.38 ✓
SUPPLIES									
6986771 ✓		11/10/20	10/31/20	11/25/20		28.25	0.00	0.00	28.25 ✓
SUPPLIES									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		10368	DEWITT POTH & SON		132.63	0.00	0.00	132.63	
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
41673 ✓		11/10/20	10/31/20	11/10/20		6,240.00	0.00	0.00	6,240.00 ✓
PHYSICIAN SERVICES									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11284	EMERGENCY STAFFING SOLUTIONS		6,240.00	0.00	0.00	6,240.00	
Vendor#	Vendor Name		Class	Pay Code					
F1050	FASTENAL COMPANY ✓		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
TXPOT254454 ✓		10/31/20	10/19/20	11/30/20		144.00	0.00	0.00	144.00 ✓
SUPPLIES									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		F1050	FASTENAL COMPANY		144.00	0.00	0.00	144.00	
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
792792793 ✓		11/10/20	10/27/20	11/21/20		15.30	0.00	0.00	15.30 ✓
SHIPPING									
793448881 ✓		11/10/20	11/03/20	11/15/20		12.68	0.00	0.00	12.68 ✓
FREIGHT									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		F1100	FEDERAL EXPRESS CORP.		27.98	0.00	0.00	27.98	
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

7519360	✓		11/10/20	10/21/20	11/15/20		30.07	0.00	0.00	30.07	✓	
		SUPPLIES										
7558096	✓		11/10/20	10/24/20	11/18/20		69.40	0.00	0.00	69.40	✓	
		SUPPLIES										
7558097	✓		11/10/20	10/24/20	11/18/20		585.00	0.00	0.00	585.00	✓	
		SUPPLIES										
7599969	✓		11/10/20	10/25/20	11/19/20		280.71	0.00	0.00	280.71	✓	
		SUPPLIES										
7599970	✓		11/10/20	10/25/20	11/19/20		12,242.88	0.00	0.00	12,242.88	✓	
		SUPPLIES										
7642138	✓		11/10/20	10/26/20	11/20/20		326.34	0.00	0.00	326.34	✓	
		SUPPLIES										
7684904	✓		11/10/20	10/27/20	11/21/20		275.25	0.00	0.00	275.25	✓	
		SUPPLIES										
7684903	✓		11/10/20	10/27/20	11/21/20		218.75	0.00	0.00	218.75	✓	
		SUPPLIES										
7726314	✓		11/10/20	10/28/20	11/22/20		468.20	0.00	0.00	468.20	✓	
		SUPPLIES										
7766431	✓		11/10/20	10/31/20	11/25/20		2,060.46	0.00	0.00	2,060.46	✓	
		SUPPLIES										
7809310	✓		11/10/20	11/01/20	11/26/20		339.84	0.00	0.00	339.84	✓	
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							F1400	FISHER HEALTHCARE	16,896.90	0.00	0.00	16,896.90
Vendor#	Vendor Name		Class		Pay Code							
10599	FORVIS ✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net		
	BK01678620	✓	11/10/20	10/28/20	11/22/20		315.00	0.00	0.00	315.00	✓	
		BEHAVORIAL HEALTH ANALY!										
	BK01682638	✓	11/10/20	10/31/20	11/25/20		10,500.00	0.00	0.00	10,500.00	✓	
		COMPLIANCE AUDIT										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10599	FORVIS	10,815.00	0.00	0.00	10,815.00
Vendor#	Vendor Name		Class		Pay Code							
13960	G & S MANAGEMENT GROUP LLC ✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net		
	340373113	✓	10/31/20	01/04/20	11/30/20		168.86	0.00	0.00	168.86	✓	
	340384042B	✓	10/31/20	01/04/20	11/30/20		58.03	0.00	0.00	58.03	✓	
		DISPOSAL										
	340386319	✓	11/10/20	11/02/20	11/12/20		374.72	0.00	0.00	374.72	✓	
		DISPOSAL										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							13960	G & S MANAGEMENT GROUP LLC	601.61	0.00	0.00	601.61
									314.72			314.72
Vendor#	Vendor Name		Class		Pay Code							
W1300	GRAINGER ✓		M									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net		
	9493626650	✓	11/10/20	10/27/20	11/21/20		174.60	0.00	0.00	174.60	✓	
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							W1300	GRAINGER	174.60	0.00	0.00	174.60

Vendor#	Vendor Name	Class	Pay Code							
12380	HEALTH SOLUTIONS DIETETICS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
103122		11/10/20	10/31/20	11/15/20		3,400.00	0.00	0.00	3,400.00	✓
	DIETARY SERV									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	12380	HEALTH SOLUTIONS DIETETICS				3,400.00	0.00	0.00	3,400.00	
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	
9210 ✓		11/10/20	11/02/20	11/15/20		5.00	0.00	0.00	5.00	✓
	RECEIPT REPRINT									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	H0031	HEB CREDIT RECEIVABLES DEPT308				5.00	0.00	0.00	5.00	
Vendor#	Vendor Name	Class	Pay Code							
14540	JINDAL X LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
202223011 ✓		11/10/20	11/10/20	11/24/20		9,000.00	0.00	0.00	9,000.00	✓
	REVENUE CYCLE MGT									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	14540	JINDAL X LLC				9,000.00	0.00	0.00	9,000.00	
Vendor#	Vendor Name	Class	Pay Code							
11203	MEDI-DOSE, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
0867566 ✓		10/31/20	10/26/20	11/30/20		315.00	0.00	0.00	315.00	✓
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11203	MEDI-DOSE, INC				315.00	0.00	0.00	315.00	
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	
2216476005 ✓		10/31/20	06/22/20	11/30/20		6,150.94	0.00	0.00	6,150.94	✓
	SUPPLIES									
2235748717 ✓		11/10/20	10/26/20	11/20/20		159.57	0.00	0.00	159.57	✓
	SUPPLIES									
2235784116 ✓		11/10/20	10/27/20	11/21/20		24.55	0.00	0.00	24.55	✓
	SUPPLIES									
2235784119 ✓		11/10/20	10/27/20	11/21/20		718.92	0.00	0.00	718.92	✓
	SUPPLIES									
2235784112 ✓		11/10/20	10/27/20	11/21/20		43.50	0.00	0.00	43.50	✓
	SUPPLIES									
2235784118 ✓		11/10/20	10/27/20	11/21/20		106.65	0.00	0.00	106.65	✓
	SUPPLIES									
2235819182 ✓		11/10/20	10/27/20	11/21/20		11.60	0.00	0.00	11.60	✓
	SUPPLIES									
2235784115 ✓		11/10/20	10/27/20	11/21/20		3.89	0.00	0.00	3.89	✓
	SUPPLIES									
2235784111 ✓		11/10/20	10/27/20	11/21/20		81.88	0.00	0.00	81.88	✓
	SUPPLIES									
2235784117 ✓		11/10/20	10/27/20	11/21/20		40.82	0.00	0.00	40.82	✓
	SUPPLIES									

2235784114	✓		11/10/20	10/27/20	11/21/20		282.79	0.00	0.00	282.79	✓
		SUPPLIES									
2235983008	✓		11/10/20	10/28/20	11/22/20		23.75	0.00	0.00	23.75	✓
		SUPPLIES									
2235983010	✓		11/10/20	10/28/20	11/22/20		227.89	0.00	0.00	227.89	✓
		SUPPLIES									
2236206065	✓		11/10/20	10/28/20	11/22/20		197.91	0.00	0.00	197.91	✓
		SUPPLIES									
2235983011	✓		11/10/20	10/28/20	11/22/20		448.50	0.00	0.00	448.50	✓
		SUPPLIES									
2236447192	✓		11/10/20	10/31/20	11/25/20		370.96	0.00	0.00	370.96	✓
		SUPPLIES									
2236447191	✓		11/10/20	10/31/20	11/25/20		55.82	0.00	0.00	55.82	✓
		SUPPLIES									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
M2470 MEDLINE INDUSTRIES INC							8,949.94	0.00	0.00	8,949.94	
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	
8823635	✓		11/10/20	10/31/20	11/10/20		74.69	0.00	0.00	74.69	✓
		INVENTORY									
8825900	✓		11/10/20	10/31/20	11/10/20		239.32	0.00	0.00	239.32	✓
		INVENTORY									
8825901	✓		11/10/20	10/31/20	11/10/20		302.51	0.00	0.00	302.51	✓
		INVENTORY									
CM76909	✓		11/10/20	10/31/20	11/10/20		-363.02	0.00	0.00	-363.02	✓
		CREDIT									
8831798	✓		11/10/20	11/01/20	11/11/20		11.25	0.00	0.00	11.25	✓
		INVENTORY									
8832119	✓		11/10/20	11/01/20	11/11/20		1,046.71	0.00	0.00	1,046.71	✓
		INVENTORY									
8828819	✓		11/10/20	11/01/20	11/11/20		49.54	0.00	0.00	49.54	✓
		INVENTORY									
8832118	✓		11/10/20	11/01/20	11/11/20		14.08	0.00	0.00	14.08	✓
		INVENTORY									
88288220	✓		11/10/20	11/01/20	11/11/20		313.82	0.00	0.00	313.82	✓
		INVENTORY									
8834505	✓		11/10/20	11/02/20	11/12/20		188.20	0.00	0.00	188.20	✓
		INVENTORY									
8834510	✓		11/10/20	11/02/20	11/12/20		12.35	0.00	0.00	12.35	✓
		INVENTORY									
8834511	✓		11/10/20	11/02/20	11/12/20		204.96	0.00	0.00	204.96	✓
		INVENTORY									
8836668	✓		11/10/20	11/02/20	11/12/20		98.23	0.00	0.00	98.23	✓
		INVENTORY									
8834507	✓		11/10/20	11/02/20	11/12/20		239.32	0.00	0.00	239.32	✓
		INVENTORY									
8834506	✓		11/10/20	11/02/20	11/12/20		2.66	0.00	0.00	2.66	✓
		INVENTORY									
8834509	✓		11/10/20	11/02/20	11/12/20		228.71	0.00	0.00	228.71	✓
		INVENTORY									



8836669	✓		11/10/20	11/02/20	11/12/20		517.45	0.00	0.00	517.45	✓	
		INVENTORY										
8834508	✓		11/10/20	11/02/20	11/12/20		74.69	0.00	0.00	74.69	✓	
		INVENTORY										
8839976	✓		11/10/20	11/03/20	11/13/20		147.07	0.00	0.00	147.07	✓	
		INVENTORY										
8841739	✓		11/10/20	11/03/20	11/13/20		1,772.93	0.00	0.00	1,772.93	✓	
		INVENTORY										
8839977	✓		11/10/20	11/03/20	11/13/20		74.69	0.00	0.00	74.69	✓	
		INVENTORY										
8839975	✓		11/10/20	11/03/20	11/13/20		202.65	0.00	0.00	202.65	✓	
		INVENTORY										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			10536	MORRIS & DICKSON CO, LLC				5,452.81	0.00	0.00	5,452.81	
Vendor#	Vendor Name			Class	Pay Code							
12708	POC ELECTRIC, LLC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
3649	✓		11/10/20	11/02/20	11/10/20		1,178.75	0.00	0.00	1,178.75	✓	
	600 VOLT INSTALL											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			12708	POC ELECTRIC, LLC				1,178.75	0.00	0.00	1,178.75	
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		
9351309600	✓		11/10/20	10/17/20	11/16/20		15.05	0.00	0.00	15.05	✓	
	SUPPLIES											
9351346823	✓		11/10/20	10/20/20	11/19/20		21.42	0.00	0.00	21.42	✓	
	SUPPLIES											
9351360899	✓		11/10/20	10/21/20	11/20/20		6.02	0.00	0.00	6.02	✓	
	SUPPLIES											
9351432381	✓		11/10/20	10/29/20	11/15/20		33.30	0.00	0.00	33.30	✓	
	SUPPLIES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			10372	PRECISION DYNAMICS CORP (PDC)				75.79	0.00	0.00	75.79	
Vendor#	Vendor Name			Class	Pay Code							
P1725	PREMIER SLEEP DISORDERS CENTER ✓			M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
103122			10/31/20	10/31/20	11/30/20		2,225.00	0.00	0.00	2,225.00	✓	
	SLEEP STUDY											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			P1725	PREMIER SLEEP DISORDERS CENTER				2,225.00	0.00	0.00	2,225.00	
Vendor#	Vendor Name			Class	Pay Code							
10936	SIEMENS FINANCIAL SERVICES ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
56382300004897	✓		11/10/20	10/31/20	11/20/20		1,333.33	0.00	0.00	1,333.33	✓	
	LEASE											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
			10936	SIEMENS FINANCIAL SERVICES				1,333.33	0.00	0.00	1,333.33	
Vendor#	Vendor Name			Class	Pay Code							
12472	SOMETHING MORE MEDIA, INC. ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		

1884		11/10/20	11/01/20	11/16/20		2,225.00	0.00	0.00	2,225.00	✓	
	ADVERTISING										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net	
	12472	SOMETHING MORE MEDIA, INC.				2,225.00	0.00	0.00	2,225.00		
Vendor#	Vendor Name				Class	Pay Code					
11296	SOUTH TEXAS BLOOD & TISSUE CEN				✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
CM8088	✓	10/31/20	10/31/20	11/30/20			-3,318.00	0.00	0.00	-3,318.00	✓
	CREDIT										
107026317		10/31/20	10/31/20	11/30/20			11,803.00	0.00	0.00	11,803.00	✓
	BLOOD										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net	
	11296	SOUTH TEXAS BLOOD & TISSUE CEN					8,485.00	0.00	0.00	8,485.00	
Vendor#	Vendor Name				Class	Pay Code					
12288	SPBS CLINICAL EQUIPMENT SRVC				✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
045841022	✓	10/31/20	10/01/20	11/30/20			13,384.80	0.00	0.00	13,384.80	✓
	PM CONTRACT										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net	
	12288	SPBS CLINICAL EQUIPMENT SRVC					13,384.80	0.00	0.00	13,384.80	
Vendor#	Vendor Name				Class	Pay Code					
S3960	STERICYCLE, INC				✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
4011306104	✓	11/10/20	11/01/20	11/15/20			2,662.55	0.00	0.00	2,662.55	✓
	WASTE DISPOSAL										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net	
	S3960	STERICYCLE, INC					2,662.55	0.00	0.00	2,662.55	
Vendor#	Vendor Name				Class	Pay Code					
12704	TEXAS BURNER & BOILER SERVICES				✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
223126	✓	11/10/20	11/04/20	11/04/20			2,080.00	0.00	0.00	2,080.00	✓
	IGNITOR FAILURE										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net	
	12704	TEXAS BURNER & BOILER SERVICES					2,080.00	0.00	0.00	2,080.00	
Vendor#	Vendor Name				Class	Pay Code					
13616	TRIOSE, INC				✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
TRI132478	✓	11/10/20	09/15/20	09/30/20			92.44	0.00	0.00	92.44	✓
	FREIGHT										
TRI135943	✓	11/10/20	10/27/20	11/11/20			83.36	0.00	0.00	83.36	✓
	FREIGHT										
Vendor Totals					Number	Name	Gross	Discount	No-Pay	Net	
	13616	TRIOSE, INC					175.80	0.00	0.00	175.80	
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	
8400407456	✓	10/31/20	10/31/20	11/25/20			44.80	0.00	0.00	44.80	✓
	LAUNDRY										
8400407476	✓	10/31/20	10/31/20	11/25/20			2,219.62	0.00	0.00	2,219.62	✓
	LAUNDRY										
8400407455	✓	10/31/20	10/31/20	11/25/20			48.15	0.00	0.00	48.15	✓

Vendor#	Vendor Name	Class	Pay Code							
8400407301	LAUNDRY			11/10/20	10/27/20	11/21/20	120.02	0.00	0.00	120.02
8400407798	LAUNDRY			11/10/20	11/03/20	11/15/20	75.08	0.00	0.00	75.08
8400407804	LAUNDRY			11/10/20	11/03/20	11/15/20	1,682.40	0.00	0.00	1,682.40
8400407777	LAUNDRY			11/10/20	11/03/20	11/15/20	191.69	0.00	0.00	191.69
8400407779	LAUNDRY			11/10/20	11/03/20	11/15/20	209.12	0.00	0.00	209.12
8400407780	LAUNDRY			11/10/20	11/03/20	11/28/20	211.73	0.00	0.00	211.73
8400407776	LAUNDRY			11/10/20	11/03/20	11/28/20	32.01	0.00	0.00	32.01
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				U1064	UNIFIRST HOLDINGS INC		4,834.62	0.00	0.00	4,834.62
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
SIV12793311		11/01/20	09/13/20	09/28/20			368.74	0.00	0.00	368.74
SIV12802169		11/10/20	09/15/20	09/30/20			138.12	0.00	0.00	138.12
				UNIFORMS						
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				U1056	UNIFORM ADVANTAGE		506.86	0.00	0.00	506.86
Vendor#	Vendor Name	Class	Pay Code							
14612	WAGeworks									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
INV4206311		11/10/20	09/15/20	10/15/20			50.00	0.00	0.00	50.00
				AUG COMPLIANCE FEE						
INV4231998		11/10/20	09/23/20	10/23/20			50.00	0.00	0.00	50.00
				COMPLIANCE AUG 22						
INV4242934A		11/10/20	09/23/20	10/23/20			396.50	0.00	0.00	396.50
				COMPLIANCE FEE SEPT 22						
INV4356149		11/10/20	10/25/20	11/15/20			580.25	0.00	0.00	580.25
				OCT 22 COMPLIANCE						
Vendor Totals				Number	Name		Gross	Discount	No-Pay	Net
				14612	WAGeworks		1,076.75	0.00	0.00	1,076.75

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	161,376.57	0.00	0.00	161,376.57

pg 4 correction

pg 9 correction

$$\begin{aligned} & \{ 2601.61 \} \\ & \{ + 374.72 \} \\ \hline & 161,149.68 \\ & < 1,076.75 \} \\ \hline & \$ 160,072.93 \end{aligned}$$

APPROVED ON

NOV 10 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS  
 C#197125-197169

161,376.57 +  
 601.61 -  
 374.72 +  
 1,076.75 -  
 160,072.93 =

004

☒

RUN DATE:11/15/22  
TIME:09:42

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/16/22 THRU 11/16/22

PAGE 1  
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	197125	11/16/22	868.68	ADVANCED STERILIZATION PRODUCT
A/P	197126	11/16/22	3,089.81	AIRGAS USA, LLC - CENTRAL DIV
A/P	197127	11/16/22	62.32	AMAZON CAPITAL SERVICES
A/P	197128	11/16/22	24.31	AMERISOURCEBERGEN DRUG CORP
A/P	197129	11/16/22	101.91	AQUA BEVERAGE COMPANY
A/P	197130	11/16/22	3,123.75	AUREUS RADIOLOGY LLC
A/P	197131	11/16/22	20,227.00	AUTHORITYRX
A/P	197132	11/16/22	16.12	BAXTER HEALTHCARE
A/P	197133	11/16/22	1,424.64	BAYER HEALTHCARE
A/P	197134	11/16/22	5,211.88	BECKMAN COULTER INC
A/P	197135	11/16/22	3,804.00	BUILDING KID STEPS
A/P	197136	11/16/22	1,699.00	CERVEY, LLC
A/P	197137	11/16/22	18,275.45	CLINICAL PATHOLOGY LABS
A/P	197138	11/16/22	263.90	COASTAL REFRIGERATION
A/P	197139	11/16/22	784.08	DETAR HOSPITAL
A/P	197140	11/16/22	132.63	DEWITT POTH & SON
A/P	197141	11/16/22	6,240.00	EMERGENCY STAFFING SOLUTIONS
A/P	197142	11/16/22	144.00	FASTENAL COMPANY
A/P	197143	11/16/22	27.98	FEDERAL EXPRESS CORP.
A/P	197144	11/16/22	.00	VOIDED
A/P	197145	11/16/22	16,896.90	FISHER HEALTHCARE
A/P	197146	11/16/22	10,815.00	FORVIS
A/P	197147	11/16/22	374.72	G & S MANAGEMENT GROUP LLC
A/P	197148	11/16/22	174.60	GRAINGER
A/P	197149	11/16/22	3,400.00	HEALTH SOLUTIONS DIETETICS
A/P	197150	11/16/22	5.00	HEB CREDIT RECEIVABLES DEPT308
A/P	197151	11/16/22	9,000.00	JINDAL X LLC
A/P	197152	11/16/22	315.00	MEDI-DOSE, INC
A/P	197153	11/16/22	.00	VOIDED
A/P	197154	11/16/22	.00	VOIDED
A/P	197155	11/16/22	8,949.94	MEDLINE INDUSTRIES INC
A/P	197156	11/16/22	.00	VOIDED
A/P	197157	11/16/22	5,452.81	MORRIS & DICKSON CO, LLC
A/P	197158	11/16/22	1,178.75	POC ELECTRIC, LLC
A/P	197159	11/16/22	75.79	PRECISION DYNAMICS CORP (PDC)
A/P	197160	11/16/22	2,225.00	PREMIER SLEEP DISORDERS CENTER
A/P	197161	11/16/22	1,333.33	SIEMENS FINANCIAL SERVICES
A/P	197162	11/16/22	2,225.00	SOMETHING MORE MEDIA, INC.
A/P	197163	11/16/22	8,485.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	197164	11/16/22	13,384.80	SPBS CLINICAL EQUIPMENT SRVC
A/P	197165	11/16/22	2,662.55	STERICYCLE, INC
A/P	197166	11/16/22	2,080.00	TEXAS BURNER & BOILER SERVICES
A/P	197167	11/16/22	175.80	TRIOSE, INC
A/P	197168	11/16/22	4,834.62	UNIFIRST HOLDINGS INC
A/P	197169	11/16/22	506.86	UNIFORM ADVANTAGE
TOTALS:			160,072.93	

APPROVED ON

NOV 17 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

# MCKESSON

# STATEMENT

As of: 11/11/2022

Page: 002

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

Company: 8000

DC: 8115

As of: 11/11/2022  
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: 11/12/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 632536  
Date: 11/12/2022

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
--------------	----------	-------------------	----------------------------------	-------------	---------------	----------------	-----	--------------	-----	-------------------

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 2,288.16 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 18/07/2017 2,451.97

If Paid By 11/15/2022,  
Pay This Amount:

2,242.38 USD

If Paid After 11/15/2022,  
Pay this Amount:

2,288.16 USD

Due If Paid On Time:

USD 2,242.38 ✓

Disc lost if paid late:

45.78

Due If Paid Late:

USD 2,288.16

2,228.35 +  
14.03 +

002

2,242.386 +

*[Signature]*  
11/14/22

APPROVED ON

NOV 14 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

# MCKESSON

# STATEMENT

As of: 11/11/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 11/11/2022  
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: 11/12/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 256342  
Date: 11/12/2022

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											
1/07/2022	11/15/2022	7376724376	52384959	115Invoice	10.02	500.85		490.83	✓	7376724376	
1/07/2022	11/15/2022	7376724377	52464103	115Invoice	7.90	394.91		387.01	✓	7376724377	
1/07/2022	11/15/2022	7376918740	52507455	195Invoice	0.92	46.00		45.08	✓	7376918740	
1/08/2022	11/15/2022	7377042797	52604494	115Invoice	2.20	109.98		107.78	✓	7377042797	
1/08/2022	11/15/2022	7377042798	52604494	115Invoice	1.10	55.06		53.96	✓	7377042798	
1/08/2022	11/15/2022	7377042799	52674943	115Invoice		0.16		0.16	✓	7377042799	
1/08/2022	11/15/2022	7377205718	52616726	115Invoice	1.47	73.61		72.14	✓	7377205718	
1/09/2022	11/15/2022	7377316750	52768023	115Invoice	6.06	302.79		296.73	✓	7377316750	
1/09/2022	11/15/2022	7377494426	52780555	115Invoice	0.95	47.27		46.32	✓	7377494426	
1/10/2022	11/15/2022	7377598740	52983107	115Invoice	0.01	0.32		0.31	✓	7377598740	
1/10/2022	11/15/2022	7377598742	52995309	115Invoice	0.01	0.63		0.62	✓	7377598742	
1/10/2022	11/15/2022	7377754631	52916667	195Invoice	2.76	138.00		135.24	✓	7377754631	
1/11/2022	11/15/2022	7377859280	53034687	115Invoice	4.15	207.42		203.27	✓	7377859280	
1/11/2022	11/15/2022	7377859281	53034687	115Invoice		0.16		0.16	✓	7377859281	
1/11/2022	11/15/2022	7377859282	53105563	115Invoice	0.01	0.49		0.48	✓	7377859282	
1/11/2022	11/15/2022	7378015785	53041495	195Invoice	7.92	395.87		387.95	✓	7378015785	
1/11/2022	11/15/2022	7378015786	53047498	115Invoice	0.01	0.32		0.31	✓	7378015786	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 2,273.84 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 1/07/2022 7,233.38

If Paid By 11/15/2022,  
Pay This Amount:

2,228.35 USD

If Paid After 11/15/2022,  
Pay this Amount:

2,273.84 USD

Due If Paid On Time:

USD 2,228.35 ✓

Disc lost if paid late:

45.49

Due If Paid Late:

USD 2,273.84

APPROVED ON

NOV 14 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

# MCKESSON

# STATEMENT

As of: 11/11/2022

Page: 001

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

Company: 8000

DC: 8115

As of: 11/11/2022  
Mail to:

Page: 001  
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Customer: 835438  
Date: 11/12/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 835438  
Date: 11/12/2022

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 835438	CVS PHCY 7475/MEM MC PHS										
1/09/2022	11/15/2022	7377523171	1974643	115Invoice	0.29	14.32		14.03	✓	7377523171	

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

TOTAL: Customer Number 835438 CVS PHCY 7475/MEM MC PHS

Subtotals:

14.32 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 1/07/2022 7,233.38

If Paid By 11/15/2022,  
Pay This Amount:

14.03 USD

Due If Paid On Time:  
USD 14.03 ✓

Disc lost if paid late:  
0.29

If Paid After 11/15/2022,  
Pay this Amount:

14.32 USD

Due If Paid Late:  
USD 14.32

APPROVED ON

NOV 14 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

<b>Serviced By:</b>	AMERISOURCEBERGEN DRUG CORP 12727 W. AIRPORT BLVD. SUGAR LAND TX 77478-6101	<b>Customer:</b>	WALGREENS #12494 340B MEMORIAL MEDICAL CENTER 1302 N VIRGINIA ST PORT LAVACA TX 77979-2509
	DEA: RA0289276 866-451-9655		

<b>Customer Number</b>	100135284 / 037028186
<b>Terms</b>	Sat - Fri Due in 7 days

<b>Remit To:</b>	AMERISOURCEBERGEN PO Box 905223 CHARLOTTE NC 28290-5223
------------------	---

<b>Summary</b>	
Not Yet Due:	0.00
Current:	2,318.16
Past Due:	694.48
<b>Total Due:</b>	<b>3,012.64</b>
Account Balance:	3,012.64

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
10-31-2022	11-11-2022	3110967690	168173	Invoice	117.28		0.00	117.28 ✓
10-31-2022	11-11-2022	3110967691	168174	Invoice	230.56		0.00	230.56 ✓
10-31-2022	11-11-2022	3110967692	168175	Invoice	11.64		0.00	11.64 ✓
10-31-2022	11-11-2022	3111003454	168223	Invoice	24.50		0.00	24.50 ✓
10-31-2022	11-11-2022	3111003455	168224	Invoice	108.84		0.00	108.84 ✓
11-01-2022	11-11-2022	3111139782	168233	Invoice	110.67		0.00	110.67 ✓
11-04-2022	11-11-2022	3111586141	168259	Invoice	90.99		0.00	90.99 ✓
11-08-2022	11-18-2022	3111924905	168325	Invoice	1,743.10		0.00	1,743.10 ✓
11-08-2022	11-18-2022	3111924906	168327	Invoice	22.97		0.00	22.97 ✓
11-10-2022	11-18-2022	3112224675	168345	Invoice	333.56		0.00	333.56 ✓
11-10-2022	11-18-2022	3112224676	168346	Invoice	3.56		0.00	3.56 ✓
11-11-2022	11-18-2022	3112374494	168354	Invoice	209.15		0.00	209.15 ✓
11-11-2022	11-18-2022	3112374495	168355	Invoice	5.82		0.00	5.82 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
2,318.16	694.48	0.00	0.00	0.00	0.00	0.00

**APPROVED ON**

**NOV 14 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

<b>Reminders</b>	
<b>Due Date</b>	<b>Amount</b>
11-11-2022	694.48
11-18-2022	2,318.16
<b>Total Due:</b>	<b>3,012.64</b>

*Signature* 11/14/2022



**MEMORIAL MEDICAL CENTER  
PROSPERITY BANK**

**ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- November 07, 2022 - November 13, 2022**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>	<u>CPS</u>
11/7/2022	PAY PLUS ACHTRANS 452579291 101000692931589	- 3rd Party Payor Fee	0.91	0.91 +
11/7/2022	FDMS FDMS PYMT 052-2000500-000 4100012286134	- Credit Card Processing Fee	81.03	336.20 +
11/7/2022	FDMS FDMS PYMT 052-1601830-000 4100012283215	- Credit Card Processing Fee	32.45	31.57 +
11/8/2022	PAY PLUS ACHTRANS 452579291 101000694097587	- 3rd Party Payor Fee	336.2	1.52 +
11/8/2022	MCKESSON DRUG AUTO ACH ACH05244363 910000138	- 340B Drug Program Expense	7233.38 *	370.206 +
11/9/2022	PAY PLUS ACHTRANS 452579291 101000695157941	- 3rd Party Payor Fee	31.57	CC Fees
11/9/2022	CLEARGAGE LLC CLEARGAGE, 6BNSYZFQ3YR7VY9 242	- Patient Financing Service	68.2	81.03 +
11/10/2022	PAY PLUS ACHTRANS 452579291 101000696018310	- 3rd Party Payor Fee	1.52	32.45 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 39300982541616 6110	- Credit Card Processing Fee	572.86	572.86 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 39300982589946 6110	- Credit Card Processing Fee	129	129.00 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 41399801368397 6110	- Credit Card Processing Fee	496.64	496.64 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 41399801332419 6110	- Credit Card Processing Fee	415.09	415.09 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 41399801332385 6110	- Credit Card Processing Fee	225.02	225.02 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 41399801332401 6110	- Credit Card Processing Fee	789.15	789.15 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 41399801391837 6110	- Credit Card Processing Fee	59.99	59.99 +
11/10/2022	TSYS/TRANSFIRST DISCOUNT 41399801332393 6110	- Credit Card Processing Fee	1452.58	1452.58 +
11/10/2022	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	393079.59 *	393079.59 +
			<b>405,005.18</b>	<b>405,005.18</b>

*Roshanda Thomas*

ROSHANDA THOMAS, CEO  
Memorial Medical Center

November 7, 2022  
\* Approved 11-09-22 CC

**PROSPERITY BANK**

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

<u>Date</u>	<u>Description</u>	<u>MI</u>	<u>Amount</u>
11/30/2022	IGT	-IGT	405,005.18 +
11/20/2022	Sales Tax	-Sales Tax	7,233.38 -
			<b>393,079.59 -</b>
			<b>405,005.18 +</b>
			<b>117,013.39</b>
			<b>1,450.24</b>
			<b>118,463.63</b>

*Roshanda Thomas*

ROSHANDA THOMAS, CEO  
Memorial Medical Center

November 7, 2022

**APPROVED ON**

**NOV 14 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

0.006 +



**Transaction Summary**

Transaction Complete  
Trace #:

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

Payment Total	\$117,013.39
Bank Routing and Account Number	
Settlement Date	11/30/2022
RAPPS Amount	\$117,013.39 ✓
Entered By	Marley Moehrig

**Marley ODonnell**

**From:** Texas Health and Human Services Commission <txhhs@public.govdelivery.com>  
**Sent:** Wednesday, November 09, 2022 3:01 PM  
**To:** Marley ODonnell  
**Subject:** RAPPS IGT Notification Second Half of Year 2 (SFY23)

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



**TEXAS**  
Health and Human Services

## **RAPPS IGT Notification Second Half of Year 2 (SFY23)**

HHSC is providing notification of the Intergovernmental Transfers (IGT) call for the second half of the Rural Access to Primary and Preventive Services program (RAPPS) Year 2.

The calculations for IGT amounts by Service Delivery Area (SDA) and by provider can be found on the [RAPPS webpage](#) under "**SFY 2023 (Year 2) – Suggested IGT**".

The IGT must be entered into TexNet no later than close of business **November 29<sup>th</sup>, 2022** with a settlement date of November 30<sup>th</sup>, 2022.

- This settlement date is non-negotiable.
- The funds need to be placed in the "**RAPPS**" Bucket.
- The amount that needs to be entered into TexNet is on **Column E** of the tab named "IGT by Provider" of the "Second Half Year 2 (SFY2023) Suggested IGT Transfer" spreadsheet provided in the link above.
- The IGT will be processed at that time and there will be no further revisions or redistributions of IGT suggestions should the aggregate IGT amount not fully utilize the available pool. Please ensure you double check the number while entering to ensure the correct number has been entered.

- [TexNet instructions are available here.](#)

After entering your IGT into TexNet, email a screen shot or PDF of the confirmation/trace sheet to [PFDRAPPSPayments@hhs.texas.gov](mailto:PFDRAPPSPayments@hhs.texas.gov).

Please email any questions about this process to [PFD\\_Hospitals@hhsc.state.tx.us](mailto:PFD_Hospitals@hhsc.state.tx.us).



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This email was sent to [modonnell@mmcporthlavaca.com](mailto:modonnell@mmcporthlavaca.com) using govDelivery Communications Cloud on behalf of: Texas Health and Human Services Commission · 707 17th St, Suite 4000 · Denver, CO 80202



**Rural Access to Primary and Preventative Services  
Year 2 (State Fiscal Year 2023)**

**IGT by Provider**

Total				\$ 12,495,657.71	\$ 6,114,192.77
				Suggested Total IGT for Declaration of Intent after 10% (12 months)	Second Suggested IGT Payment (2nd 6 months)
NPI	Provider		SDA		
1497153589	Memorial Medical Center-		Nueces	\$ 149,559.24	\$ 117,013.39

✔ Confirmation: You Have Filed Successfully

## Sales and Use Tax Period Ending 10/31/2022 (2210)

<b>Taxpayer ID:</b>	<b>Taxpayer Name:</b>	<b>Entered By:</b>
<b>User ID</b>	MEMORIAL MEDICAL CENTER	<b>Email Address:</b>
<b>Reference Number:</b>	<b>Taxpayer Address:</b>	<b>Telephone Number:</b> (361) 552-0342
<b>Date and Time of Filing:</b>	815 N VIRGINIA ST PORT LAVACA, TX	
11/08/2022, 10:46:39 AM	77979-3025	
	<b>IP Address:</b>	

### PAYMENT SUMMARY

<b>Electronic Check</b>	<b>Payment Reference Number:</b>	<b>Type of Bank Account:</b> Checking
<b>State Amount:</b> \$1,098.67	<b>Trace Number:</b>	<b>Accountholder Name:</b>
<b>Local Amount:</b> \$351.57		<b>Bank Routing Number:</b>
<b>Amount to Pay:</b> \$1,450.24		<b>Bank Account Number:</b>
<b>Electronic Check:</b> \$1,450.24		<b>Payment Effective Date:</b> 11/20/2022

### CREDIT SUMMARY

#### Credits Taken

Are you taking credit to reduce taxes due on this return? No

#### Licensed Customs Broker Exported Sales

Did you refund sales tax for this filing period on items exported outside the United States based on a Texas Licenced Customs Broker Export Certifications? No

### LOCATION SUMMARY

Loc #	Total Texas Sales	Taxable Sales	Taxable Purchases	Subject to State Tax (Rate .0625)	State Tax Due	Subject to Local Tax	Local Tax Rate	Local Tax Due
00004	17667	17667	0	17667	1104.19	17667	0.02	353.34
<b>SubTotal</b>	<b>17667</b>	<b>17667</b>	<b>0</b>	<b>17667</b>	<b>1104.19</b>	<b>17667</b>		<b>353.34</b>

#### Total Tax for Locations

**\$1,457.53**

Total Tax Due:	\$1,457.53
Timely Filing Discount:	-\$7.29
Balance Due:	\$1,450.24
Pending Payments:	-\$0.00

**Total Amount Due and Payable: \$1,450.24** ✓  
( State amount due is \$1,098.67 ) ( Local amount due is \$351.57 )

RECEIVED BY THE  
COUNTY AUDITOR ON

NOV 10 2022

11/10/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

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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
110422		11/10/20	11/04/20	12/04/20		9,635.17	0.00	0.00	9,635.17 ✓
	TRANSFER	<i>Net insurance pymt deposited into MME operating</i>							
110822		11/10/20	11/08/20	12/02/20		18,846.33	0.00	0.00	18,846.33 ✓
	TRANSFER	"							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11828	SOLERA WEST HOUSTON	28,481.50	0.00	0.00	28,481.50

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	28,481.50	0.00	0.00	28,481.50

APPROVED ON

NOV 10 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK# 197175

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NOV 10 2022

11/10/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

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AP Open Invoice List

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Dates Through:

Class Pay Code

Vendor# Vendor Name

11820 FORTBEND HEALTHCARE CENTER

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
103122A		10/31/20	10/31/20	11/28/20		4,279.00	0.00	0.00	4,279.00

TRANSFER *NI insurance pymt deposited into MME open*

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11820	FORTBEND HEALTHCARE CENTER	4,279.00	0.00	0.00	4,279.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,279.00	0.00	0.00	4,279.00

APPROVED ON

NOV 10 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK#197172



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NOV 10 2022

11/10/2022

12:16

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

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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
103122A		10/31/20	10/31/20	11/28/20		2,723.00	0.00	0.00	2,723.00 ✓

TRANSFER *NH insurance pymt deposited into mmc operating*

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
11832	BROADMOOR AT CREEKSIDE PARK	2,723.00	0.00	0.00	2,723.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,723.00	0.00	0.00	2,723.00

APPROVED ON

NOV 10 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK#19771

RECEIVED BY THE  
COUNTY AUDITOR ON

NOV 10 2022

11/10/2022

12:14

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Class Pay Code

11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102922		10/31/20	10/29/20	11/28/20		8,360.25	0.00	0.00	8,360.25 ✓
103122A	TRANSFER	10/31/20	10/31/20	11/28/20		2,334.00	0.00	0.00	2,334.00 ✓
103122B	TRANSFER	10/31/20	10/31/20	11/28/20		6,922.36	0.00	0.00	6,922.36 ✓
103122C	TRANSFER	10/31/20	10/31/20	11/28/20		4,685.61	0.00	0.00	4,685.61 ✓
110122	TRANSFER	11/10/20	11/01/20	12/02/20		332.00	0.00	0.00	332.00 ✓
110222	TRANSFER	11/10/20	11/02/20	12/02/20		1,361.50	0.00	0.00	1,361.50 ✓
110322	TRANSFER	11/10/20	11/03/20	12/03/20		0.02	0.00	0.00	0.02 ✓
110822	TRANSFER	11/10/20	11/08/20	12/02/20		11,348.27	0.00	0.00	11,348.27 ✓

*NH insurance pymt deposited into mmcc open*

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	35,344.01	0.00	0.00	35,344.01

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	35,344.01	0.00	0.00	35,344.01

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NOV 10 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CL# 197173

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COUNTY AUDITOR ON

NOV 10 2022

12:10  
CALHOUN COUNTY, TEXAS

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
102922B		10/31/20	10/29/20	11/28/20		1,725.45	0.00	0.00	1,725.45 ✓
103122C	TRANSFER	10/31/20	10/31/20	11/28/20		6,392.78	0.00	0.00	6,392.78 ✓
103122A	TRANSFER	10/31/20	10/31/20	11/28/20		2,886.45	0.00	0.00	2,886.45 ✓
103122B	TRANSFER	10/31/20	10/31/20	11/28/20		3,468.21	0.00	0.00	3,468.21 ✓
103122D	TRANSFER	10/31/20	10/31/20	11/30/20		1,950.00	0.00	0.00	1,950.00 ✓
110122	TRANSFER	11/10/20	11/01/20	12/02/20		10,523.17	0.00	0.00	10,523.17 ✓
110222	TRANSFER	11/10/20	11/02/20	12/02/20		3,764.60	0.00	0.00	3,764.60 ✓
110322	TRANSFER	11/10/20	11/03/20	12/03/20		389.00	0.00	0.00	389.00 ✓
110822	TRANSFER	11/10/20	11/08/20	12/02/20		159.79	0.00	0.00	159.79 ✓
110822A	TRANSFER	11/10/20	11/08/20	12/02/20		15,096.00	0.00	0.00	15,096.00 ✓

*NI insurance point deposited into name open by*

Vendor Total:	Number	Name	Gross	Discount	No-Pay	Net
	12696	GULF POINTE PLAZA	46,355.45	0.00	0.00	46,355.45

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	46,355.45	0.00	0.00	46,355.45

APPROVED ON

NOV 10 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CLK# 197174

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NOV 10 2022

12:21

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

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Dates Through:

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
102922		10/31/20	10/29/20	11/28/20		1,562.92	0.00	0.00	1,562.92 ✓		
	TRANSFER	<i>NH insurance pymt deposited into mmc operating</i>									
103122F		10/31/20	10/31/20	11/28/20		6,224.00	0.00	0.00	6,224.00 ✓		
	TRANSFER	"									
103122C		10/31/20	10/31/20	11/28/20		3,512.00	0.00	0.00	3,512.00 ✓		
	TRANSFER	"									
103122D		10/31/20	10/31/20	11/28/20		16,424.95	0.00	0.00	16,424.95 ✓		
	TRANSFER	"									
103122A		10/31/20	10/31/20	11/28/20		1,365.00	0.00	0.00	1,365.00 ✓		
	TRANSFER	"									
103122E		10/31/20	10/31/20	11/28/20		583.50	0.00	0.00	583.50 ✓		
	TRANSFER	"									
103122B		10/31/20	10/31/20	11/28/20		3,266.90	0.00	0.00	3,266.90 ✓		
	TRANSFER	"									
103122G		10/31/20	10/31/20	11/30/20		3,822.77	0.00	0.00	3,822.77 ✓		
	TRANSFER	"									
110122A		11/10/20	11/01/20	11/02/20		9,949.38	0.00	0.00	9,949.38 ✓		
	TRANSFER	"									
110122		11/10/20	11/01/20	12/02/20		778.00	0.00	0.00	778.00 ✓		
	TRANSFER	"									
110222		11/10/20	11/02/20	12/02/20		7,023.00	0.00	0.00	7,023.00 ✓		
	TRANSFER	"									
110222A		11/10/20	11/02/20	12/02/20		6,029.50	0.00	0.00	6,029.50 ✓		
	TRANSFER	"									
110322		11/10/20	11/03/20	12/03/20		7,002.00	0.00	0.00	7,002.00 ✓		
	TRANSFER	"									
110322A		11/10/20	11/03/20	12/03/20		28.98	0.00	0.00	28.98 ✓		
	TRANSFER	"									
110422A		11/10/20	11/04/20	12/04/20		8,947.00	0.00	0.00	8,947.00 ✓		
	TRANSFER	"									
110422		11/10/20	11/04/20	12/04/20		3,112.00	0.00	0.00	3,112.00 ✓		
	TRANSFER	"									
110722		11/10/20	11/07/20	12/07/20		3,968.00	0.00	0.00	3,968.00 ✓		
	TRANSFER	"									
110822		11/10/20	11/08/20	12/02/20		3,512.00	0.00	0.00	3,512.00 ✓		
	TRANSFER	"									
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						13004	TUSCANY VILLAGE	87,111.90	0.00	0.00	87,111.90

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	87,111.90	0.00	0.00	87,111.90

APPROVED ON

NOV 10 2022

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

CL# 127177

RECEIVED BY THE  
COUNTY AUDITOR ON

NOV 10 2022

11/10/2022

12:17

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

12792 BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102922		10/31/20	10/29/20	11/28/20		6,029.50	0.00	0.00	6,029.50 ✓
	TRANSFER	<i>NH insurance pymt deposited into MME operating</i>							
103122A		10/31/20	10/31/20	11/28/20		135.04	0.00	0.00	135.04 ✓
	TRANSFER	"							
103122B		10/31/20	10/31/20	11/28/20		28,863.34	0.00	0.00	28,863.34 ✓
	TRANSFER	"							
103122		10/31/20	10/31/20	11/28/20		4,473.50	0.00	0.00	4,473.50 ✓
	TRANSFER	"							
103122c		10/31/20	10/31/20	11/28/20		52,846.89	0.00	0.00	52,846.89 ✓
	TRANSFER	"							
103122D		10/31/20	10/31/20	11/28/20		5,068.10	0.00	0.00	5,068.10 ✓
	TRANSFER	"							
103122E		10/31/20	10/31/20	11/28/20		3,990.45	0.00	0.00	3,990.45 ✓
	TRANSFER	"							
110122		11/10/20	11/01/20	12/02/20		2,723.00	0.00	0.00	2,723.00 ✓
	TRANSFER	"							
110222		11/10/20	11/02/20	12/02/20		2,302.97	0.00	0.00	2,302.97 ✓
	TRANSFER	"							
110822		11/10/20	11/08/20	12/02/20		16,304.80	0.00	0.00	16,304.80 ✓
	TRANSFER	"							

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
12792		BETHANY SENIOR LIVING	122,737.59	0.00	0.00	122,737.59

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	122,737.59	0.00	0.00	122,737.59

APPROVED ON

NOV 10 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

ck# 197170

☒

RUN DATE:11/15/22  
TIME:09:43

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/15/22 THRU 11/15/22

PAGE 1  
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	197170	11/15/22	122,737.59	BETHANY SENIOR LIVING
A/P	197171	11/15/22	2,723.00	BROADMOOR AT CREEKSIDE PARK
A/P	197172	11/15/22	4,279.00	FORTBEND HEALTHCARE CENTER
A/P	197173	11/15/22	35,344.01	GOLDENCREEK HEALTHCARE
A/P	197174	11/15/22	46,355.45	GULF POINTE PLAZA
A/P	197175	11/15/22	28,481.50	SOLERA WEST HOUSTON
A/P	197176	11/15/22	.00	VOIDED
A/P	197177	11/15/22	87,111.90	TUSCANY VILLAGE
TOTALS:			327,032.45	

APPROVED ON

NOV 17 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Cantex Transfer  
 Prosperity Accounts  
 11/14/2022

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		46,238.04 ✓	32,348.90 ✓	99,489.29 ✓		113,378.43 ✓	83,888.26
						Bank Balance	113,378.43 ✓
						Variance	-
						Leave in Balance	100.00
						MOLINA Q4 QJPP	13,764.73 019
						Molina September QJPP	15,601.03 ✓
						October Interest	24.41 ✓
						November Interest	
						December Interest	
						Adjust Balance/Transfer Amt	83,888.26 ✓
Broadmoor		56,182.35 ✓	51,374.74 ✓	50,920.67 ✓		55,728.28 ✓	45,581.41
						Bank Balance	55,728.28 ✓
						Variance	-
						Leave in Balance	100.00
						MOLINA Q4 QJPP	4,684.39 015
						Molina September QJPP	5,339.26 ✓
						October Interest	23.22 ✓
						November Interest	
						December Interest	
						Adjust Balance/Transfer Amt	45,581.41 ✓
Crescent		98,416.75 ✓	95,206.33 ✓	97,719.47 ✓		100,929.89 ✓	93,737.38
						Bank Balance	100,929.89 ✓
						Variance	-
						Leave in Balance	100.00
						MOLINA Q4 QJPP	3,084.25 015
						Molina September QJPP	3,982.09 ✓
						October Interest	26.17 ✓
						November Interest	
						December Interest	
						Adjust Balance/Transfer Amt	93,737.38 ✓
Fort Bend		31,877.55 ✓	26,100.99 ✓	22,831.23 ✓		28,607.79 ✓	17,959.80
						Bank Balance	28,607.79 ✓
						Variance	-
						Leave in Balance	100.00
						MOLINA Q4 QJPP	5,665.49 015
						Molina September QJPP	4,871.43 ✓
						October Interest	11.07 ✓
						November Interest	
						December Interest	
						Adjust Balance/Transfer Amt	17,959.80 ✓
Solera at W Houst		102,324.58 ✓	95,735.25 ✓	66,839.02 ✓		73,428.35 ✓	62,168.77
						Bank Balance	73,428.35 ✓
						Variance	-
						Leave in Balance	100.00
						MOLINA Q4 QJPP	6,448.16 015
						Molina September QJPP	4,670.25 ✓
						October Interest	41.17 ✓
						November Interest	
						December Interest	
						Adjust Balance/Transfer Amt	62,168.77 ✓

83,888.26 +  
 45,581.41 +  
 93,737.38 +  
 17,959.80 +  
 62,168.77 +  
 303,335.62 \*

**APPROVED ON**  
**NOV 14 2022**  
 BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

TOTAL TRANSFERS 303,335.62  
 Approved: *Roshanda Thomas*  
 ROSHANDA THOMAS, CEO  
 11/14/2022

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.

Ashford Gardens	Transfer-Out	Transfer-In	MMC PORTION				QIPP TI	NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse		
11/10/2022 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	32,348.90	-	-	-	-	-	-	
11/10/2022 Amerigroup TXSC HCCLAIMPMT 3194345431 111000	-	1,634.02	-	-	-	-	1,634.02	
11/9/2022 MOLINA HEALTHCAR MOLINAACH 01146780 42000019	-	17,339.90	13,862.26	3,477.54	-	15,601.03	1,738.77	
11/9/2022 Amerigroup TXSC HCCLAIMPMT 3194242478 111000	-	46,815.33	-	-	-	-	46,815.33	
11/9/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	30,709.91	-	-	-	-	30,709.91	
11/9/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	619.81	-	-	-	-	619.81	
11/8/2022 Amerigroup TXSC HCCLAIMPMT 3194066713 111000	-	1.67	-	-	-	-	1.67	
11/6/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	1,363.58	-	-	-	-	1,363.58	
11/7/2022 Amerigroup TXSC HCCLAIMPMT 3193918133 111000	-	904.69	-	-	-	-	904.69	
11/7/2022 UnitedHealthcare HCCLAIMPMT 746003411 910000	-	100.48	-	-	-	-	100.48	
<b>TOTALS</b>	<b>32,348.90</b>	<b>99,429.29</b>	<b>13,862.26</b>	<b>3,477.54</b>	<b>-</b>	<b>15,601.03</b>	<b>83,888.26</b>	

Irrawaddy	Transfer-Out	Transfer-In	MMC PORTION				QIPP TI	NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse		
11/10/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	51,374.74	-	-	-	-	-	-	
11/10/2022 HNB - ECHO HCCLAIMPMT 746003411 440000238868	-	2,950.10	-	-	-	-	2,950.10	
11/9/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	10,750.00	-	-	-	-	10,750.00	
11/9/2022 MOLINA HEALTHCAR MOLINAACH 01147327 42000019	-	5,553.21	5,125.30	427.91	-	5,339.26	213.95	
11/9/2022 MANAGEANDNET1718 MNS PMNT 0000000000419 41	-	3,417.00	-	-	-	-	3,417.00	
11/9/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	13,398.25	-	-	-	-	13,398.25	
11/8/2022 HUMANA INS CO HCCLAIMPMT 390861 930000580977	-	1,185.00	-	-	-	-	1,185.00	
11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214065	-	7,164.53	-	-	-	-	7,164.53	
11/7/2022 UnitedHealthcare HCCLAIMPMT 746003411 910000	-	26.00	-	-	-	-	26.00	
11/7/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	85.65	-	-	-	-	85.65	
11/7/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2	-	6,390.93	-	-	-	-	6,390.93	
<b>TOTALS</b>	<b>51,374.74</b>	<b>50,920.67</b>	<b>5,125.30</b>	<b>427.91</b>	<b>-</b>	<b>5,339.26</b>	<b>45,581.42</b>	

Crossett	Transfer-Out	Transfer-In	MMC PORTION				QIPP TI	NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse		
11/10/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	95,206.33	-	-	-	-	-	-	
11/10/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	8,442.00	-	-	-	-	8,442.00	
11/10/2022 HNB - ECHO HCCLAIMPMT 746003411 440000238868	-	14,480.34	-	-	-	-	14,480.34	
11/10/2022 DEVOTED HEALTH P HCCLAIMPMT 121140398293300	-	10,400.00	-	-	-	-	10,400.00	
11/10/2022 DEVOTED HEALTH P HCCLAIMPMT 121140398293300	-	8,420.00	-	-	-	-	8,420.00	
11/10/2022 DEVOTED HEALTH P HCCLAIMPMT 121140398293302	-	5,600.00	-	-	-	-	5,600.00	
11/9/2022 MOLINA HEALTHCAR MOLINAACH 01147289 42000019	-	4,341.75	3,822.42	319.33	-	3,982.09	159.87	
11/9/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	19,334.52	-	-	-	-	19,334.52	
11/9/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2	-	9,634.03	-	-	-	-	9,634.03	
11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214065	-	17,181.15	-	-	-	-	17,181.15	
11/7/2022 UnitedHealthcare HCCLAIMPMT 746003411 910000	-	85.68	-	-	-	-	85.68	
<b>TOTALS</b>	<b>95,206.33</b>	<b>97,719.47</b>	<b>3,822.42</b>	<b>319.33</b>	<b>-</b>	<b>3,982.09</b>	<b>93,737.39</b>	

Fort Bend	Transfer-Out	Transfer-In	MMC PORTION				QIPP TI	NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse		
11/10/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	26,100.99	-	-	-	-	-	-	
11/10/2022 MANAGEANDNET1718 MNS PMNT 000000000004294 41	-	4,603.00	-	-	-	-	4,603.00	
11/9/2022 MOLINA HEALTHCAR MOLINAACH 01148293 42000019	-	5,432.70	4,330.16	1,082.54	-	4,871.43	541.27	
11/9/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	8,282.20	-	-	-	-	8,282.20	
11/7/2022 MANAGEANDNET1718 MNS PMNT 000000000004294 41	-	3,402.00	-	-	-	-	3,402.00	
11/7/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,131.33	-	-	-	-	1,131.33	
<b>TOTALS</b>	<b>26,100.99</b>	<b>22,831.23</b>	<b>4,330.16</b>	<b>1,082.54</b>	<b>-</b>	<b>4,871.43</b>	<b>17,959.80</b>	

Solera at West Houston	Transfer-Out	Transfer-In	MMC PORTION				QIPP TI	NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse		
11/10/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	95,735.25	-	-	-	-	-	-	
11/10/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	8,550.00	-	-	-	-	8,550.00	
11/9/2022 MOLINA HEALTHCAR MOLINAACH 01147283 42000019	-	5,193.96	4,148.14	1,044.22	-	4,670.25	522.11	
11/9/2022 Amerigroup TXSC HCCLAIMPMT 3194242479 111000	-	13,129.96	-	-	-	-	13,129.96	
11/9/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	13,914.88	-	-	-	-	13,914.88	
11/8/2022 HNB - ECHO HCCLAIMPMT 746003411 440000262501	-	7,493.91	-	-	-	-	7,493.91	
11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214065	-	18,557.91	-	-	-	-	18,557.91	
<b>TOTALS</b>	<b>95,735.25</b>	<b>66,839.02</b>	<b>4,148.14</b>	<b>1,044.22</b>	<b>-</b>	<b>4,670.25</b>	<b>62,168.77</b>	

TOTALS

<b>300,766.21</b>	<b>337,799.68</b>	<b>31,288.28</b>	<b>6,351.54</b>	<b>-</b>	<b>34,464.05</b>	<b>303,335.63</b>
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# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Nov 14, 2022 9

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$6,030,660.79</b>	<b>\$6,342,089.66</b>	<b>\$6,030,660.79</b>	<b>\$7,033,729.02</b>
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.00
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$68,516.33	\$96,351.10	\$68,516.33	\$181,603.24
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.79	\$536.79	\$536.79	\$536.79
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,155,798.37	\$5,100,325.85	\$5,155,798.37	\$5,448,670.28
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.14	\$432.14	\$432.14	\$432.14
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$113,378.43	\$194,357.80	\$113,378.43	\$144,093.31
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$55,728.28	\$122,476.99	\$55,728.28	\$104,152.92
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$100,929.89	\$156,873.74	\$100,929.89	\$148,793.88
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,607.79	\$57,400.79	\$28,607.79	\$50,105.78
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$73,428.35	\$119,124.56	\$73,428.35	\$160,613.60
<u>*2998</u> MMC -MONEY MARKET FUND	\$296,157.77	\$296,157.77	\$296,157.77	\$296,157.77
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$27,515.91	\$25,579.01	\$27,515.91	\$174,740.71
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$39,557.59	\$69,916.86	\$39,557.59	\$107,387.73
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$38,435.03	\$59,546.29	\$38,435.03	\$64,486.92
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$31,538.12	\$42,909.97	\$31,538.12	\$151,853.95

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Nexion Transfer  
 Prosperity Accounts  
 11/14/2022

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		150,920.12 ✓	117,973.88 ✓	35,570.09 ✓		68,516.33 ✓	35,570.09
						Bank Balance	68,516.33 ✓
						Variance	-
						Leave in Balance	100.00
						SUPERIOR Q4 QIPP	32,828.28 0/6
						October Interest	17.96 ✓
						November Interest	
						December Interest	
						<del>17.96</del>	
						Adjust Balance/Transfer Amt	35,570.09 ✓

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 11/14/2022

APPROVED ON

NOV 14 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Golden Creek**

11/10/2022 WIRE OUT NIDION HEALTH d/b/a GOLDEN CREEK HC  
 11/10/2022 TSYS/TRANSFIRST CR CD DEP 543684555876917 91  
 11/10/2022 GOLDENCREEKHEALT MERC DEP 1220356 9100001060  
 11/9/2022 TSYS/TRANSFIRST CR CD DEP 543684555876917 91  
 11/9/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2  
 11/7/2022 TSYS/TRANSFIRST CR CD DEP 543684555876917 91  
 11/7/2022 TSYS/TRANSFIRST CR CD DEP 543684555876917 91  
 11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214354  
 11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214087  
 11/7/2022 GOLDENCREEKHEALT MERC DEP 1220356 9100001404  
 11/7/2022 NOVITAS SOLUTION HCCLAIMPMT 676097 420000102  
 11/7/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2

		MMC PORTION					
Transfer-Out	Transfer-in	QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4 &Lapse	QJPP TI	NH PORTION
117,973.88	-	-	-	-	-	-	-
-	1,291.67	-	-	-	-	-	1,291.67
-	3,595.30	-	-	-	-	-	3,595.30
-	176.27	-	-	-	-	-	176.27
-	10,517.97	-	-	-	-	-	10,517.97
-	3,919.31	-	-	-	-	-	3,919.31
-	640.88	-	-	-	-	-	640.88
-	719.47	-	-	-	-	-	719.47
-	1,016.75	-	-	-	-	-	1,016.75
-	4,459.75	-	-	-	-	-	4,459.75
-	3,271.60	-	-	-	-	-	3,271.60
-	5,961.12	-	-	-	-	-	5,961.12
117,973.88	35,570.09	-	-	-	-	-	35,570.09

# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type

**DDA** Data reported as of Nov 14, 2022 9

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$6,030,660.79</b>	<b>\$6,342,089.66</b>	<b>\$6,030,660.79</b>	<b>\$7,033,729.02</b>
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.00
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$68,516.33	\$96,351.10	\$68,516.33	\$181,603.24
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.79	\$536.79	\$536.79	\$536.79
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,155,798.37	\$5,100,325.85	\$5,155,798.37	\$5,448,670.28
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.14	\$432.14	\$432.14	\$432.14
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$113,378.43	\$194,357.80	\$113,378.43	\$144,093.31
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$55,728.28	\$122,476.99	\$55,728.28	\$104,152.92
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$100,929.89	\$156,873.74	\$100,929.89	\$148,793.88
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,607.79	\$57,400.79	\$28,607.79	\$50,105.78
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$73,428.35	\$119,124.56	\$73,428.35	\$160,613.60
<u>*2998</u> MMC -MONEY MARKET FUND	\$296,157.77	\$296,157.77	\$296,157.77	\$296,157.77
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$27,515.91	\$25,579.01	\$27,515.91	\$174,740.71
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$39,557.59	\$69,916.86	\$39,557.59	\$107,387.73
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$38,435.03	\$59,546.29	\$38,435.03	\$64,486.92
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$31,538.12	\$42,909.97	\$31,538.12	\$151,853.95

Memorial Medical Center  
 Nursing Home UPL  
 Weekly HMG Transfer  
 Prosperity Accounts  
 11/14/2022

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
<u>Nursing Home</u> Gulf Pointe Plaza-Private Pay	52,775.07 ✓	26,051.89 ✓	11,711.85 ✓			38,435.03	11,711.85
					Bank Balance Variance	38,435.03	
					Leave in Balance	100.00	
					SUPERIOR Q4 QIPP	23,078.11 <i>0/6</i>	
					ECHO PAYMENTS THAT BELONG TO MMC	3,542.09 <i>0/9</i>	
					October Interest	2.98 ✓	
					November Interest		
					December Interest		
					Adjust Balance/Transfer Amt	<u>11,711.85</u> ✓	

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
<u>Nursing Home</u> Gulf Pointe Plaza-Medicare/Medicaid	67,950.87 ✓	67,830.14 ✓	39,436.86 ✓			39,557.59	39,436.86
					Bank Balance Variance	39,557.59	
					Leave in Balance	100.00	
					October Interest	20.73 ✓	
					November Interest		
					December Interest		
					Adjust Balance/Transfer Amt	<u>39,436.86</u> ✓	

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.

**TOTAL TRANSFERS** 51,148.71

Approved: *Roshanda S. Thomas*  
 ROSHANDA THOMAS, CEO  
 11/14/2022

11,711.85 +  
 39,436.86 +  
 51,148.71 \*

APPROVED ON

NOV 14 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

**Guif Pointe Plaza-Private Pay**

11/10/2022 WIRE OUT HMG SERVICES, LLC  
 11/9/2022 HNB - ECHO HCCLAIMPMT 746003411 440000204239  
 11/8/2022 NDC SWEEP FAC H261 21000026428968 SWEEP FR  
 11/8/2022 HNB - ECHO HCCLAIMPMT 746003411 440000262501  
 11/8/2022 HNB - ECHO HCCLAIMPMT 746003411 440000262501  
 11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214100

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
26,051.89	-	-	-	-	-	-	-
-	203.68	-	-	-	-	-	203.68
-	11,186.45	-	-	-	-	-	11,186.45
-	274.68	-	-	-	-	-	274.68
-	23.52	-	-	-	-	-	23.52
-	23.52	-	-	-	-	-	23.52
<b>26,051.89</b>	<b>11,711.85</b>	-	-	-	-	-	<b>11,711.85</b>

**Guif Pointe Plaza-Medicare/Medicaid**

11/10/2022 WIRE OUT HMG SERVICES, LLC  
 11/8/2022 HNB - ECHO HCCLAIMPMT 746003411 440000262501  
 11/7/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001  
 11/7/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001  
 11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214354

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
67,830.14	-	-	-	-	-	-	-
-	7,755.07	-	-	-	-	-	7,755.07
-	3,577.95	-	-	-	-	-	3,577.95
-	27,496.97	-	-	-	-	-	27,496.97
-	606.87	-	-	-	-	-	606.87
<b>67,830.14</b>	<b>39,436.86</b>	-	-	-	-	-	<b>39,436.86</b>
<b>93,882.03</b>	<b>51,148.71</b>	-	-	-	-	-	<b>51,148.71</b>

## Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Nov 14, 2022 9

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$6,030,660.79</b>	<b>\$6,342,089.66</b>	<b>\$6,030,660.79</b>	<b>\$7,033,729.02</b>
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.00
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$68,516.33	\$96,351.10	\$68,516.33	\$181,603.24
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.79	\$536.79	\$536.79	\$536.79
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,155,798.37	\$5,100,325.85	\$5,155,798.37	\$5,448,670.28
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.14	\$432.14	\$432.14	\$432.14
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$113,378.43	\$194,357.80	\$113,378.43	\$144,093.31
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$55,728.28	\$122,476.99	\$55,728.28	\$104,152.92
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$100,929.89	\$156,873.74	\$100,929.89	\$148,793.88
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,607.79	\$57,400.79	\$28,607.79	\$50,105.78
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$73,428.35	\$119,124.56	\$73,428.35	\$160,613.60
<u>*2998</u> MMC -MONEY MARKET FUND	\$296,157.77	\$296,157.77	\$296,157.77	\$296,157.77
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$27,515.91	\$25,579.01	\$27,515.91	\$174,740.71
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$39,557.59	\$69,916.86	\$39,557.59	\$107,387.73
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$38,435.03	\$59,546.29	\$38,435.03	\$64,486.92
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$31,538.12	\$42,909.97	\$31,538.12	\$151,853.95

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Tuscany Transfer  
 Prosperity Accounts  
 11/14/2022

Nursing Home	Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Chs Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Tuscany Village		132,652.88 ✓	120,315.83 ✓	19,201.07 ✓			31,538.12 ✓	9,970.74
						Bank Balance Variance	31,538.12 ✓	
						Leave in Balance	100.00	
						MOLINA Q4 QPPP	12,237.05 ds	
						Molina November QPPP	9,230.33	
						Adjust Balance/Transfer Amt	9,970.74 ✓	

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 11/14/2022  
 ROSHANDA THOMAS, CEO

APPROVED ON

NOV 14 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS



Tuscany Village

MMC PORTION				
QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI

	Transfer-Out	Transfer-In	QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	NH PORTION
11/10/2022 WIRE OUT LINBAR ENTERPRISES, LLC	120,315.83	-	-	-	-	-	-	-
11/9/2022 MOLINA HEALTHCAR MOLINAACH 01147322 42000019	-	10,260.18	8,200.48	2,059.70	-	-	9,230.33	1,029.85
11/9/2022 HNB - ECHO HCCLAIMPMT 746003411 440000204235	-	5,068.51	-	-	-	-	-	5,068.51
11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214087	-	3,872.38	-	-	-	-	-	3,872.38
	<b>120,315.83</b>	<b>19,201.07</b>	<b>8,200.48</b>	<b>2,059.70</b>	<b>-</b>	<b>-</b>	<b>9,230.33</b>	<b>9,970.74</b>

### Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Nov 14, 2022 9

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$6,030,660.79</b>	<b>\$6,342,089.66</b>	<b>\$6,030,660.79</b>	<b>\$7,033,729.02</b>
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.00
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$68,516.33	\$96,351.10	\$68,516.33	\$181,603.24
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.79	\$536.79	\$536.79	\$536.79
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,155,798.37	\$5,100,325.85	\$5,155,798.37	\$5,448,670.28
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.14	\$432.14	\$432.14	\$432.14
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$113,378.43	\$194,357.80	\$113,378.43	\$144,093.31
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$55,728.28	\$122,476.99	\$55,728.28	\$104,152.92
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$100,929.89	\$156,873.74	\$100,929.89	\$148,793.88
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,607.79	\$57,400.79	\$28,607.79	\$50,105.78
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$73,428.35	\$119,124.56	\$73,428.35	\$160,613.60
<u>*2998</u> MMC -MONEY MARKET FUND	\$296,157.77	\$296,157.77	\$296,157.77	\$296,157.77
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$27,515.91	\$25,579.01	\$27,515.91	\$174,740.71
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$39,557.59	\$69,916.86	\$39,557.59	\$107,387.73
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$38,435.03	\$59,546.29	\$38,435.03	\$64,486.92
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$31,538.12 ✓	\$42,909.97	\$31,538.12	\$151,853.95

Memorial Medical Center  
 Nursing Home UPL  
 Weekly HSL Transfer  
 Prosperity Accounts  
 11/14/2022

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		150,602.11 ✓	150,465.27 ✓	27,379.07 ✓			27,515.91 ✓	27,379.07
						Bank Balance	27,515.91 ✓	
						Variance	.	
						Leave in Balance	100.00	

October Interest 36.84 ✓  
 November Interest  
 December Interest  
 Adjust Balance/Transfer Amt 27,379.07 ✓

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 11/14/2022

**APPROVED ON**  
**NOV 14 2022**  
**BY COUNTY AUDITOR**  
**CALHOUN COUNTY, TEXAS**

Bethany Senior Living

11/10/2022 WIRE OUT PORT LAVACA NH, LLC  
11/10/2022 Deposit  
11/8/2022 Deposit  
11/8/2022 HNB - ECHO HCCLAIMPMT 746003411 440000262501  
11/7/2022 Deposit  
11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214355  
11/7/2022 HNB - ECHO HCCLAIMPMT 746003411 440000214100  
11/7/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000102

Transfer-Out	Transfer-In	MEMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
150,465.27	-	-	-	-	-	-	-
-	3,240.47	-	-	-	-	-	3,240.47
-	2,582.68	-	-	-	-	-	2,582.68
-	766.80	-	-	-	-	-	766.80
-	14,625.20	-	-	-	-	-	14,625.20
-	82.72	-	-	-	-	-	82.72
-	35.02	-	-	-	-	-	35.02
-	6,046.18	-	-	-	-	-	6,046.18
150,465.27	27,379.07	-	-	-	-	-	27,379.07

## Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Nov 14, 2022 9

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$6,030,660.79</b>	<b>\$6,342,089.66</b>	<b>\$6,030,660.79</b>	<b>\$7,033,729.02</b>
<u>*3660</u> GULF POINTE PLAZA - DACA	\$100.00	\$100.00	\$100.00	\$100.00
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$68,516.33	\$96,351.10	\$68,516.33	\$181,603.24
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.79	\$536.79	\$536.79	\$536.79
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$5,155,798.37	\$5,100,325.85	\$5,155,798.37	\$5,448,670.28
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$432.14	\$432.14	\$432.14	\$432.14
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$113,378.43	\$194,357.80	\$113,378.43	\$144,093.31
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$55,728.28	\$122,476.99	\$55,728.28	\$104,152.92
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$100,929.89	\$156,873.74	\$100,929.89	\$148,793.88
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$28,607.79	\$57,400.79	\$28,607.79	\$50,105.78
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$73,428.35	\$119,124.56	\$73,428.35	\$160,613.60
<u>*2998</u> MMC -MONEY MARKET FUND	\$296,157.77	\$296,157.77	\$296,157.77	\$296,157.77
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$27,515.91	\$25,579.01	\$27,515.91	\$174,740.71
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$39,557.59	\$69,916.86	\$39,557.59	\$107,387.73
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$38,435.03	\$59,546.29	\$38,435.03	\$64,486.92
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$31,538.12	\$42,909.97	\$31,538.12	\$151,853.95

MEMORIAL MEDICAL CENTER  
CHECK REQUEST - Ashford

P Memorial Medical Center  
A \_\_\_\_\_  
Y \_\_\_\_\_  
E \_\_\_\_\_  
E \_\_\_\_\_

Date Requested: 11/14/2022


APPROVED ON  
NOV 14 2022  
BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
CL# 001190  
G/L NUMBER: 10255040

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 15,601.03

EXPLANATION: Molina Qipp Payment September

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: 

RUN DATE:11/16/22  
TIME:09:41

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/16/22 THRU 11/16/22

PAGE 2  
GLCKREG

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

NHA 001190 11/16/22 15,601.03 MEMORIAL MEDICAL CENTER Ashford  
TOTALS: 15,601.03

**APPROVED ON**

**NOV 17 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

MEMORIAL MEDICAL CENTER

CHECK REQUEST *Broadmoor*

P Memorial Medical Center  
A \_\_\_\_\_  
Y \_\_\_\_\_  
E \_\_\_\_\_  
E \_\_\_\_\_

Date Requested: 11/14/2022

**APPROVED ON**

**NOV 14 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
CK# 00222**

FOR ACCT. USE ONLY

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

AMOUNT 5339.26

G/L NUMBER: 10255040

EXPLANATION: Molina Qipp Payment September

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: *Roshanda S. Thomas*



RUN DATE:11/16/22  
TIME:09:41

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/16/22 THRU 11/16/22

PAGE 3  
GLCKREG

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

NHB 000222 11/16/22 5,339.26 MEMORIAL MEDICAL CENTER *Broudmoo*  
TOTALS: 5,339.26

**APPROVED ON**

**NOV 17 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

MEMORIAL MEDICAL CENTER

CHECK REQUEST *Crescent*

P Memorial Medical Center  
A \_\_\_\_\_  
Y \_\_\_\_\_  
E \_\_\_\_\_  
E \_\_\_\_\_

Date Requested: 11/14/2022

**APPROVED ON**  
**NOV 14 2022**  
**BY COUNTY AUDITOR**  
**CALHOUN COUNTY, TEXAS**  
*ck #000 260*

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 3982.09

G/L NUMBER: 10255040

EXPLANATION: Molina Qipp Payment September

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: *Roshane S. Thomas*

RUN DATE:11/16/22  
TIME:09:41

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/16/22 THRU 11/16/22

PAGE 4  
GLCKREG

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

NHC 000260 11/16/22 3,982.09 MEMORIAL MEDICAL CENTER  
TOTALS: 3,982.09 *Crescent*

**APPROVED ON**

**NOV 17 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

MEMORIAL MEDICAL CENTER

CHECK REQUEST *Fort Bend*

P Memorial Medical Center

Date Requested: 11/14/2022

A \_\_\_\_\_

Y \_\_\_\_\_

E \_\_\_\_\_

E \_\_\_\_\_

**APPROVED ON**

**NOV 14 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

*ck#000194*

FOR ACCT. USE ONLY

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

AMOUNT 4871.43

G/L NUMBER: 10255040

EXPLANATION: Molina Qipp Payment September

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: *Robert S. Thomas*

RUN DATE:11/16/22  
TIME:09:41

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/16/22 THRU 11/16/22

PAGE 5  
GLCKREG

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

NHF 000196 11/16/22 4,871.43 MEMORIAL MEDICAL CENTER  
TOTALS: 4,871.43

**APPROVED ON**

**NOV 17 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

MEMORIAL MEDICAL CENTER  
CHECK REQUEST *Solem*

P Memorial Medical Center  
A \_\_\_\_\_  
Y \_\_\_\_\_  
E \_\_\_\_\_  
E \_\_\_\_\_

Date Requested: 11/14/2022

**APPROVED ON**

**NOV 14 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

*CX#001252*

FOR ACCT. USE ONLY

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

AMOUNT 4670.25

G/L NUMBER: 10255040

EXPLANATION: Molina Qipp Payment September

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: *Roshanda S. Thomas*

RUN DATE:11/16/22  
TIME:09:41

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/16/22 THRU 11/16/22

PAGE 6  
GLCKREG

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

NHS 001252 11/16/22 4,670.25 MEMORIAL MEDICAL CENTER *Solem*  
TOTALS: 4,670.25

**APPROVED ON**

**NOV 17 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

MEMORIAL MEDICAL CENTER

CHECK REQUEST *Tuscany*

P Memorial Medical Center

Date Requested: 11/14/2022

A \_\_\_\_\_

Y \_\_\_\_\_

E \_\_\_\_\_

E \_\_\_\_\_

**APPROVED ON**

**NOV 14 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
CX#1111**

FOR ACCT. USE ONLY

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

AMOUNT 9230.33

G/L NUMBER: 10255040

EXPLANATION: Molina Qipp Payment September

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: *Richard S. Thomas*



RUN DATE:11/16/22  
TIME:09:41

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
11/16/22 THRU 11/16/22

PAGE 7  
GLCKREG

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

TUS 001111 11/16/22 9,230.33 MEMORIAL MEDICAL CENTER *Tuscany*  
TOTALS: 9,230.33

**APPROVED ON**

**NOV 17 2022**

**BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS**

MEMORIAL MEDICAL CENTER

NH ASHFORD  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

001190

Date 11/16/22 88-2265/1131

PAY TO THE ORDER OF Memorial Medical Center \$ 15,601.03

Fifteen thousand six hundred one & 03/100 DOLLARS



County auditor

FOR Molina September Qipp

COUNTY TREASURER  
included. Details on back

MEMORIAL MEDICAL CENTER

NH BROADMOOR  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000222

Date 11/16/22 88-2265/1131

PAY TO THE ORDER OF Memorial Medical Center \$ 5,339.26

Five thousand three hundred thirty nine & 26/100 DOLLARS



County auditor

FOR Molina Sep. Qipp

COUNTY TREASURER  
included. Details on back

MEMORIAL MEDICAL CENTER

NH CRESCENT  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

000260

Date 11/16/22 88-2265/1131

PAY TO THE ORDER OF Memorial Medical Center \$ 3982.09

Three thousand Nine hundred Eighty two & 09/100 DOLLARS



County auditor

FOR Molina September Qipp

COUNTY TREASURER  
included. Details on back

MEMORIAL MEDICAL CENTER

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

000196

88-2265/1131

Date 11/26/22

PAY

TO THE ORDER OF Memorial Medical center

\$ 4,871.43

Four thousand Eight hundred Seventy one & 43/100 DOLLARS



County Auditor

FOR Molina September Qipp

County Treasurer

11

MEMORIAL MEDICAL CENTER

NH SOLERA  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

001252

88-2265/1131

Date 11/16/22

PAY

TO THE ORDER OF Memorial Medical Center

\$ 4,670.25

Four thousand Six hundred Seventy & 25/100 DOLLARS



County Auditor

FOR Molina September Qipp

County Treasurer

MEMORIAL MEDICAL CENTER 022020  
NH TUSCANY VILLAGE

PH 361-553-4818  
815 N VIRGINIA ST  
PORT LAVACA, TX 77979

1111

88-2265/1131-87

DATE 11/16/22



PAY TO THE ORDER OF

Memorial Medical center

\$ 9,230.33

Nine thousand Two hundred Thirty & 33/100 DOLLARS



PORT LAVACA BANKING CENTER  
1107 N. HIGHWAY 35 • PORT LAVACA, TX 77979-8102  
361-552-7411 www.prosperitybankusa.com

County Auditor

FOR Molina September Qipp

County Treasurer

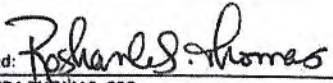
QJPP Payment to MMC from Nursing Facilities

Commissioner's Court

11/16/2022

NH Name	From Bank Acct #	Ck #	Payee	GL #	MO/INA September			TOTAL	Date
Ashford	10000018 - Prosperity		MMC - Prosperity Operating #10000001	10255040	15,601.03			15,601.03	11/16/2022
Broadmoor	10000019 - Prosperity		MMC - Prosperity Operating #10000001	10255040	5,339.26			5,339.26	11/16/2022
Crescent	10000020 - Prosperity		MMC - Prosperity Operating #10000001	10255040	3,982.09			3,982.09	11/16/2022
Fort Bend	10000021 - Prosperity		MMC - Prosperity Operating #10000001	10255040	4,871.43			4,871.43	11/16/2022
Salera	10000022 - Prosperity		MMC - Prosperity Operating #10000001	10255040	4,670.25			4,670.25	11/16/2022
Golden Creek	10000023 - Prosperity		MMC - Prosperity Operating #10000001	10255040				-	11/16/2022
Gulf Pointe-PP	10000114 - Prosperity		MMC - Prosperity Operating #10000001	10255040				-	11/16/2022
Gulf Pointe-MM	10000025 - Prosperity		MMC - Prosperity Operating #10000001	10255040				-	11/16/2022
Bethany			MMC - Prosperity Operating #10000001	10255040				-	11/16/2022
Tuscany			MMC - Prosperity Operating #10000001	10255040	9,230.33			9,230.33	11/16/2022
			<b>Total:</b>		<b>43,694.39</b>			<b>43,694.39</b>	

Note:

Approved:   
 ROSHANDA THOMAS, CEO 11/14/2022