

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR --March 22, 2023

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

| | | |
|--|-----------------|---|
| TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS | \$ 480,079.06 | ✓ |
| TOTAL TRANSFERS BETWEEN FUNDS | \$ 132,250.78 | ✓ |
| TOTAL NURSING HOME UPL EXPENSES | \$ 472,892.07 | ✓ |
| TOTAL INTER-GOVERNMENT TRANSFERS | \$ - | |
| GRAND TOTAL DISBURSEMENTS APPROVED March 22, 2023 | \$ 1,085,221.91 | ✓ |

APPROVED

MAR 22 2023

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---March 22, 2023

PAYABLES AND PAYROLL

| | |
|--|------------|
| 3/20/2023 Weekly Payables | 457,150.80 |
| 3/20/2023 Patient Refunds | 1,282.64 |
| 3/20/2023 Citibank Credit Card-see attached | 4,877.42 |
| 3/20/2023 McKesson-340B Prescription Expense | 15,275.17 |
| 3/20/2023 Amerisource Bergen-340B Prescription Expense | 520.92 |

Prosperity Electronic Bank Payments

| | |
|---|--------|
| 3/15/2023 Credit Card & Lease Fees | 240.18 |
| 3/13-3/17/23 Pay Plus-Patient Claims Processing Fee | 124.66 |
| 3/17/2023 ExpertPay- child support | 607.27 |

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS **\$ 480,079.06**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

| | |
|--|-----------|
| 3/20/2023 MMC Operating to Crescent-correction of NH insurance payment deposited into MMC Operating in error | 5,003.00 |
| 3/20/2023 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error | 56,761.80 |
| 3/20/2023 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating | 46.30 |
| 3/20/2023 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating | 15,455.50 |
| 3/20/2023 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating | 48,980.18 |

TRANSFER OF FUNDS BETWEEN NURSING HOMES/MMC

| | |
|--|----------|
| 3/20/2023 Crescent to Tuscany-correction of Tuscany insurance payment deposited into Crescent in error | 6,004.00 |
|--|----------|

TOTAL TRANSFERS BETWEEN FUNDS **\$ 132,250.78**

NURSING HOME UPL EXPENSES

| | |
|---|------------|
| 3/20/2023 Nursing Home UPL-Cantex Transfer | 332,686.41 |
| 3/20/2023 Nursing Home UPL-Nexion Transfer | 11,763.01 |
| 3/20/2023 Nursing Home UPL-HMG Transfer | 17,722.04 |
| 3/20/2023 Nursing Home UPL-Tuscany Transfer | 51,827.68 |
| 3/20/2023 Nursing Home UPL-HSL Transfer | 58,818.62 |

NURSING HOME BANK FEES

| | |
|---|-------|
| 3/15/2023 Ashford-Enhanced analysis fee | 74.31 |
|---|-------|

TOTAL NURSING HOME UPL EXPENSES **\$ 472,892.07**

INTER-GOVERNMENT TRANSFERS

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

GRAND TOTAL DISBURSEMENTS APPROVED March 22, 2023 **\$ 1,085,221.91**

RECEIVED BY THE
COUNTY AUDITOR ON

MAR 16 2023

15:16

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Due Dates Through: 04/06/2023

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

| | | | | | | | | | | | |
|-------------------------|-----------------------------|-----------------------------|----------|----------|---------|-----------|----------|--------|--------|--|---|
| 14348 | 2022 MIDCOAST HURRICANE AND | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 031423 | | 03/15/20 | 03/14/20 | 03/22/20 | | 143.00 | 0.00 | 0.00 | 143.00 | | ✓ |
| CONFERENCE REGISTRATIOI | | | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | | |
| | 14348 | 2022 MIDCOAST HURRICANE AND | | | | 143.00 | 0.00 | 0.00 | 143.00 | | |

Vendor# Vendor Name

Class Pay Code

| | | | | | | | | | | | |
|---------------|-----------|-----------|----------|----------|---------|-----------|----------|--------|--------|--|---|
| 11237 | 3WON, LLC | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 3266 | | 03/15/20 | 03/03/20 | 04/01/20 | | 199.00 | 0.00 | 0.00 | 199.00 | | ✓ |
| CREDENTIALING | | | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | | |
| | 11237 | 3WON, LLC | | | | 199.00 | 0.00 | 0.00 | 199.00 | | |

Vendor# Vendor Name

Class Pay Code

| | | | | | | | | | | | |
|---------------|------------------------------|------------------------------|----------|----------|---------|-----------|----------|--------|--------|--|---|
| 10995 | ABILITY NETWORK (SHIFTHOUND) | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 23M-0032613 | | 03/15/20 | 03/06/20 | 04/05/20 | | 701.84 | 0.00 | 0.00 | 701.84 | | ✓ |
| SCHEDULING | | | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | | |
| | 10995 | ABILITY NETWORK (SHIFTHOUND) | | | | 701.84 | 0.00 | 0.00 | 701.84 | | |

Vendor# Vendor Name

Class Pay Code

| | | | | | | | | | | | |
|---------------|--------------------|--------------------|----------|----------|---------|-----------|----------|--------|--------|--|---|
| 11283 | ACE HARDWARE 15521 | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 022823 | | 03/16/20 | 02/28/20 | 03/25/20 | | 272.63 | 0.00 | 0.00 | 272.63 | | ✓ |
| SUPPLIES | | | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | | |
| | 11283 | ACE HARDWARE 15521 | | | | 272.63 | 0.00 | 0.00 | 272.63 | | |

Vendor# Vendor Name

Class Pay Code

| | | | | | | | | | | | |
|---------------|-------------------------------|-------------------------------|----------|----------|---------|-----------|----------|--------|----------|--|---|
| A1680 | AIRGAS USA, LLC - CENTRAL DIV | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 9135634968 | | 03/15/20 | 03/06/20 | 03/31/20 | | 3,216.48 | 0.00 | 0.00 | 3,216.48 | | ✓ |
| BULK OXYGEN | | | | | | | | | | | |
| 9995403873 | | 03/16/20 | 02/28/20 | 03/25/20 | | 517.94 | 0.00 | 0.00 | 517.94 | | ✓ |
| OXYGEN | | | | | | | | | | | |
| 9995403874 | | 03/16/20 | 02/28/20 | 03/25/20 | | 873.33 | 0.00 | 0.00 | 873.33 | | ✓ |
| OXYGEN | | | | | | | | | | | |
| 9995402297 | | 03/16/20 | 02/28/20 | 03/25/20 | | 272.52 | 0.00 | 0.00 | 272.52 | | ✓ |
| OXYGEN | | | | | | | | | | | |
| 9135450102 | | 03/16/20 | 02/28/20 | 03/25/20 | | 2,385.72 | 0.00 | 0.00 | 2,385.72 | | ✓ |
| BULK RENTAL | | | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | | |
| | A1680 | AIRGAS USA, LLC - CENTRAL DIV | | | | 7,265.99 | 0.00 | 0.00 | 7,265.99 | | |

Vendor# Vendor Name

Class Pay Code

| | | | | | | | | | | | |
|--------------|-------------|----------|----------|----------|---------|-----------|----------|--------|--------|--|---|
| A1705 | ALIMED INC. | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| RPSV03986693 | | 03/14/20 | 03/06/20 | 03/21/20 | | 161.40 | 0.00 | 0.00 | 161.40 | | ✓ |
| SUPPLIES | | | | | | | | | | | |

| Vendor Totals | | Number | Name | | | Gross | Discount | No-Pay | Net |
|---------------------------------------|--------------------------------|----------|------------------------------|----------|----------|-----------|----------|--------|------------|
| | | A1705 | ALIMED INC. | | | 161.40 | 0.00 | 0.00 | 161.40 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| 14028 | AMAZON CAPITAL SERVICES ✓ | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 1R344NTF7KFV ✓ | | 03/01/20 | 03/01/20 | 03/31/20 | | 196.10 | 0.00 | 0.00 | 196.10 ✓ |
| SUPPLIES | | | | | | | | | |
| 116W-49NP-6TJM ✓ | | 03/14/20 | 03/02/20 | 04/01/20 | | 502.83 | 0.00 | 0.00 | 502.83 ✓ |
| SUPPLIES | | | | | | | | | |
| 13D1-QN94-CQWT ✓ | | 03/15/20 | 03/04/20 | 04/03/20 | | 148.00 | 0.00 | 0.00 | 148.00 ✓ |
| SUPPLIES | | | | | | | | | |
| 1D47-QN44-37KR ✓ | | 03/15/20 | 03/07/20 | 04/06/20 | | 25.56 | 0.00 | 0.00 | 25.56 ✓ |
| SUPPLIES | | | | | | | | | |
| Vendor Totals | | Number | Name | | | Gross | Discount | No-Pay | Net |
| | | 14028 | AMAZON CAPITAL SERVICES | | | 872.49 | 0.00 | 0.00 | 872.49 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| 10419 | AMBU INC ✓ | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 223061329 ✓ | | 03/14/20 | 03/06/20 | 04/01/20 | | 87.00 | 0.00 | 0.00 | 87.00 ✓ |
| SUPPLIES | | | | | | | | | |
| Vendor Totals | | Number | Name | | | Gross | Discount | No-Pay | Net |
| | | 10419 | AMBU INC | | | 87.00 | 0.00 | 0.00 | 87.00 |
| 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 |
| 4523 ✓ | | 03/15/20 | 03/08/20 | 03/18/20 | | 15.00 | 0.00 | 0.00 | 15.00 ✓ |
| PRINTING | | | | | | | | | |
| Vendor Totals | | Number | Name | | | Gross | Discount | No-Pay | Net |
| | | A2150 | ANNOUNCEMENTS PLUS TOO AGAIN | | | 15.00 | 0.00 | 0.00 | 15.00 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| A2218 | AQUA BEVERAGE COMPANY ✓ | | | M | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 022823A 252146 / 253999 | WATER late pymt | 03/15/20 | 02/28/20 | 03/25/20 | | 75.94 | 0.00 | 0.00 | 75.94 ✓ |
| 022823 252143 / 254038 | WATER late pymt | 03/15/20 | 02/28/20 | 03/25/20 | | 35.98 | 0.00 | 0.00 | 35.98 |
| Vendor Totals | | Number | Name | | | Gross | Discount | No-Pay | Net |
| | | A2218 | AQUA BEVERAGE COMPANY | | | 111.92 | 0.00 | 0.00 | 111.92 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| 14768 | ASTELLAS PHARMA US, INC. ✓ | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 031623 | | 03/16/20 | 03/16/20 | 04/01/20 | | 6,653.40 | 0.00 | 0.00 | 6,653.40 ✓ |
| 340 B PAYMENT | | | | | | | | | |
| Vendor Totals | | Number | Name | | | Gross | Discount | No-Pay | Net |
| | | 14768 | ASTELLAS PHARMA US, INC. | | | 6,653.40 | 0.00 | 0.00 | 6,653.40 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| A2600 | AUTO PARTS & MACHINE CO. ✓ | | | W | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 003488 ✓ | | 03/15/20 | 03/07/20 | 03/22/20 | | 5.69 | 0.00 | 0.00 | 5.69 ✓ |
| SUPPLIES | | | | | | | | | |
| Vendor Totals | | Number | Name | | | Gross | Discount | No-Pay | Net |
| | | | | | | | | | |

| | | | | | | | | | |
|---------------|--------------------------------|---------------------------|----------|----------|----------|-----------|----------|--------|-------------|
| | A2600 | AUTO PARTS & MACHINE CO. | | | 5.69 | 0.00 | 0.00 | 5.69 | |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| 14088 | AZALEA HEALTH ✓ | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 86312 ✓ | | 03/15/20 | 03/09/20 | 03/09/20 | | 594.00 | 0.00 | 0.00 | 594.00 ✓ |
| | MONTHLY SUPPORT | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net |
| | 14088 | AZALEA HEALTH | | | | 594.00 | 0.00 | 0.00 | 594.00 |
| 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 |
| 5470189 ✓ | | 03/15/20 | 02/25/20 | 03/22/20 | | 1,337.05 | 0.00 | 0.00 | 1,337.05 ✓ |
| | CONTRACT | | | | | | | | |
| 110467539 ✓ | | 03/15/20 | 02/28/20 | 03/25/20 | | 3,874.83 | 0.00 | 0.00 | 3,874.83 ✓ |
| | CONTRACT | | | | | | | | |
| 7335126 ✓ | | 03/15/20 | 03/01/20 | 03/26/20 | | 6,935.89 | 0.00 | 0.00 | 6,935.89 ✓ |
| | SUPPLIES | | | | | | | | |
| 110473055 ✓ | | 03/15/20 | 03/01/20 | 03/26/20 | | 1,691.68 | 0.00 | 0.00 | 1,691.68 ✓ |
| | <i>Supplies</i> | | | | | | | | |
| 110473049 ✓ | | 03/15/20 | 03/01/20 | 03/26/20 | | 733.86 | 0.00 | 0.00 | 733.86 ✓ |
| | SUPPLIES | | | | | | | | |
| 110473231 ✓ | | 03/15/20 | 03/01/20 | 03/26/20 | | 305.61 | 0.00 | 0.00 | 305.61 ✓ |
| | SUPPLIES | | | | | | | | |
| 110474539 ✓ | | 03/15/20 | 03/02/20 | 03/27/20 | | 422.04 | 0.00 | 0.00 | 422.04 ✓ |
| | SUPPLIES | | | | | | | | |
| 110474551 ✓ | | 03/15/20 | 03/02/20 | 03/27/20 | | 1,725.33 | 0.00 | 0.00 | 1,725.33 ✓ |
| | SUPPLIES | | | | | | | | |
| 110477422 ✓ | | 03/15/20 | 03/05/20 | 03/30/20 | | 10,053.46 | 0.00 | 0.00 | 10,053.46 ✓ |
| | SUPPLIES | | | | | | | | |
| 110481654 ✓ | | 03/15/20 | 03/06/20 | 03/31/20 | | 1,656.78 | 0.00 | 0.00 | 1,656.78 ✓ |
| | SUPPLIES | | | | | | | | |
| 110479582 ✓ | | 03/15/20 | 03/06/20 | 03/31/20 | | 281.05 | 0.00 | 0.00 | 281.05 ✓ |
| | SUPPLIES | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net |
| | B1220 | BECKMAN COULTER INC | | | | 29,017.58 | 0.00 | 0.00 | 29,017.58 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| B1320 | BEEKLEY CORPORATION ✓ | | | M | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| INV1604134 ✓ | | 03/14/20 | 03/08/20 | 04/01/20 | | 199.00 | 0.00 | 0.00 | 199.00 ✓ |
| | SUPPLIES | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net |
| | B1320 | BEEKLEY CORPORATION | | | | 199.00 | 0.00 | 0.00 | 199.00 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| 11072 | BIO-RAD LABORATORIES, INC ✓ | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 906180388 ✓ | | 03/14/20 | 03/03/20 | 04/01/20 | | 1,077.19 | 0.00 | 0.00 | 1,077.19 ✓ |
| | SUPPLIES | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net |
| | 11072 | BIO-RAD LABORATORIES, INC | | | | 1,077.19 | 0.00 | 0.00 | 1,077.19 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | |
| 14772 | BRISTOL MYERS SQUIBB COMPANY ✓ | | | | | | | | |

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
|--------------------|---------------------------|----------|----------|----------|---------|-----------|------------------------------|-----------|-------------|--------|-----------|
| 031623 | | 03/16/20 | 03/16/20 | 04/01/20 | | 47,723.36 | 0.00 | 0.00 | 47,723.36 ✓ | | |
| 340B PAYMENT | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 14772 | BRISTOL MYERS SQUIBB COMPANY | 47,723.36 | 0.00 | 0.00 | 47,723.36 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | |
| 14120 | CALHOUN COUNTY EMS ✓ | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 2023-02 ✓ | | 03/15/20 | 03/06/20 | 04/01/20 | | 3,080.00 | 0.00 | 0.00 | 3,080.00 ✓ | | |
| FEB 23 | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 14120 | CALHOUN COUNTY EMS | 3,080.00 | 0.00 | 0.00 | 3,080.00 |
| 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 | | |
| HC65684 ✓ | | 03/14/20 | 03/01/20 | 03/31/20 | | 275.68 | 0.00 | 0.00 | 275.68 ✓ | | |
| SUPPLIES | | | | | | | | | | | |
| HC25518 ✓ | | 03/15/20 | 02/28/20 | 03/30/20 | | 201.67 | 0.00 | 0.00 | 201.67 ✓ | | |
| SUPPLIES | | | | | | | | | | | |
| HC27045 ✓ | | 03/15/20 | 02/28/20 | 03/30/20 | | 125.46 | 0.00 | 0.00 | 125.46 ✓ | | |
| SUPPLIES | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | C1992 | CDW GOVERNMENT, INC. | 602.81 | 0.00 | 0.00 | 602.81 |
| 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 | | |
| 21077 ✓ | | 03/15/20 | 03/07/20 | 04/01/20 | | 1,699.00 | 0.00 | 0.00 | 1,699.00 ✓ | | |
| LICENSE | | | | | | | | | | | |
| 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 | | | | | |
| C1600 | CITIZENS MEDICAL CENTER ✓ | | | | | W | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 2023-6 ✓ | | 03/15/20 | 03/10/20 | 04/01/20 | | 61,297.72 | 0.00 | 0.00 | 61,297.72 ✓ | | |
| FEB 23 COLLECTIONS | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | C1600 | CITIZENS MEDICAL CENTER | 61,297.72 | 0.00 | 0.00 | 61,297.72 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | |
| C2157 | COOPER SURGICAL INC ✓ | | | | | M | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 6585777 ✓ | | 03/14/20 | 03/06/20 | 03/09/20 | | 2,095.10 | 0.00 | 0.00 | 2,095.10 ✓ | | |
| SUPPLIES | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | C2157 | COOPER SURGICAL INC | 2,095.10 | 0.00 | 0.00 | 2,095.10 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | |
| 14080 | CORROHEALTH, INC. ✓ | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 899570 ✓ | | 03/15/20 | 02/28/20 | 03/30/20 | | 1,882.10 | 0.00 | 0.00 | 1,882.10 ✓ | | |
| HIM SERVICES | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 14080 | CORROHEALTH, INC. | 1,882.10 | 0.00 | 0.00 | 1,882.10 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|---------------------|--------|-------------------|----------|--|----------|----------|----------|---------|-----------|----------|--------|------------|
| 13052 | COURTNE THURLKILL ✓ | | | 031323 | | 03/16/20 | 03/13/20 | 03/22/20 | | 1,500.00 | 0.00 | 0.00 | 1,500.00 ✓ |
| | | | | | TRAVEL REIMB (2/21-3/2/23) Pharmacology Conference | | | | | | | | |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 13052 | COURTNE THURLKILL | | | | | | | 1,500.00 | 0.00 | 0.00 | 1,500.00 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|---------------|--------|----------|--------------|----------|----------|----------|----------|---------|-----------|----------|--------|----------|
| 10646 | COVIDIEN ✓ | | | 5868475793 ✓ | | 03/14/20 | 03/06/20 | 03/16/20 | | 213.50 | 0.00 | 0.00 | 213.50 ✓ |
| | | | | | SUPPLIES | | | | | | | | |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 10646 | COVIDIEN | | | | | | | 213.50 | 0.00 | 0.00 | 213.50 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|----------------------------|--------|--------------------------|---------------|----------------------|----------|----------|----------|---------|-----------|----------|--------|-------------|
| 14400 | CULINARY CONCESSIONS LLC ✓ | | | INV00000443 ✓ | | 03/16/20 | 02/28/20 | 03/30/20 | | 29,933.58 | 0.00 | 0.00 | 29,933.58 ✓ |
| | | | | | FEB 23 CONTRACT FEES | | | | | | | | |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 14400 | CULINARY CONCESSIONS LLC | | | | | | | 29,933.58 | 0.00 | 0.00 | 29,933.58 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|------------------|--------|----------------|----------|--------------|----------|----------|----------|---------|-----------|----------|--------|----------|
| 10060 | DETAR HOSPITAL ✓ | | ICP | 30 ✓ | | 03/15/20 | 03/06/20 | 03/22/20 | | 655.59 | 0.00 | 0.00 | 655.59 ✓ |
| | | | | | LAB SERVICES | | | | | | | | |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 10060 | DETAR HOSPITAL | | | | | | | 655.59 | 0.00 | 0.00 | 655.59 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|---------------------|--------|-------------------|-----------|----------|----------|----------|----------|---------|-----------|----------|--------|----------|
| 10368 | DEWITT POTH & SON ✓ | | | 7123380 ✓ | | 03/14/20 | 03/09/20 | 04/03/20 | | 170.52 | 0.00 | 0.00 | 170.52 ✓ |
| | | | | | SUPPLIES | | | | | | | | |
| | | | | 7122131 ✓ | | 03/14/20 | 03/09/20 | 04/03/20 | | 2.86 | 0.00 | 0.00 | 2.86 ✓ |
| | | | | | SUPPLIES | | | | | | | | |
| | | | | 7122130 ✓ | | 03/15/20 | 03/08/20 | 04/02/20 | | 28.89 | 0.00 | 0.00 | 28.89 ✓ |
| | | | | | SUPPLIES | | | | | | | | |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 10368 | DEWITT POTH & SON | | | | | | | 202.27 | 0.00 | 0.00 | 202.27 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|-------------------------------|--------|-------------------------------|----------|---|----------|----------|----------|---------|-----------|----------|--------|-----------|
| 10789 | DISCOVERY MEDICAL NETWORK INC | | | 022223 | | 03/15/20 | 02/22/20 | 02/23/20 | | 21,133.62 | 0.00 | 0.00 | 21,133.62 |
| | | | | 030923 | | 03/15/20 | 03/09/20 | 03/10/20 | | 21,133.62 | 0.00 | 0.00 | 21,133.62 |
| | | | | | PHYSICAN SERVICES-HOBSON (2/15-2/22/23) 24hr on-call 3,000 per day per contract | | | | | | | | |
| | | | | | PHYSICIAN SERV - HOBSON (3/11-3/18/23) 3,000 per day per contract | | | | | | | | |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 10789 | DISCOVERY MEDICAL NETWORK INC | | | | | | | 42,267.24 | 0.00 | 0.00 | 42,267.24 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|--------------|-------|----------|----------|---------|---------|--------|--------|---------|-----------|----------|--------|-----|
| 11046 | E-MDS, INC ✓ | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|---------------|--------------------------------|----------|----------|----------|---------|----------|-----------|------------------------------|-----------|-------------|--------|-----------|
| 546822 ✓ | | 03/15/20 | 03/09/20 | 03/09/20 | | | 256.57 | 0.00 | 0.00 | 256.57 ✓ | | |
| | SETUP FEE-HOBSON | | | | | | | | | | | |
| 547064 ✓ | | 03/15/20 | 03/13/20 | 04/01/20 | | | 13,432.00 | 0.00 | 0.00 | 13,432.00 ✓ | | |
| | QTRLY FEE APR-JUN 23 | | | | | | | | | | | |
| 547651 ✓ | | 03/16/20 | 03/15/20 | 03/15/20 | | | 114.54 | 0.00 | 0.00 | 114.54 ✓ | | |
| | ANNUAL SUBSCRIPTION-HOB | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 11046 | E-MDS, INC | 13,803.11 | 0.00 | 0.00 | 13,803.11 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | | |
| W1167 | ELITECH GROUP INC (WESCOR) ✓ | | | | W | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 815803 ✓ | | 03/14/20 | 03/01/20 | 04/01/20 | | | 261.20 | 0.00 | 0.00 | 261.20 ✓ | | |
| | SUPPLIES | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | W1167 | ELITECH GROUP INC (WESCOR) | 261.20 | 0.00 | 0.00 | 261.20 |
| 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 | | |
| 42027 ✓ | | 03/16/20 | 03/15/20 | 03/25/20 | | | 40,062.50 | 0.00 | 0.00 | 40,062.50 ✓ | | |
| | PHYSICIAN SERVICES (1-15th) | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 11284 | EMERGENCY STAFFING SOLUTIONS | 40,062.50 | 0.00 | 0.00 | 40,062.50 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | | |
| 14136 | EPI-EDWARD PLUMBING ✓ | | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 65988 ✓ | | 03/16/20 | 03/14/20 | 03/14/20 | | | 2,523.10 | 0.00 | 0.00 | 2,523.10 ✓ | | |
| | VALVE REPAIR | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 14136 | EPI-EDWARD PLUMBING | 2,523.10 | 0.00 | 0.00 | 2,523.10 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | | |
| 11944 | EQUIFAX WORKFORCE SOLUTIONS ✓ | | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 2053233873 ✓ | | 03/15/20 | 10/08/20 | 11/07/20 | | | 10.99 | 0.00 | 0.00 | 10.99 ✓ | | |
| | CREDIT REPORTING | | | | | | | | | | | |
| 2053798979 ✓ | | 03/15/20 | 12/08/20 | 01/07/20 | | | 10.99 | 0.00 | 0.00 | 10.99 ✓ | | |
| | CREDIT REPORTING | | | | | | | | | | | |
| 2054202678 ✓ | | 03/15/20 | 02/08/20 | 03/10/20 | | | 10.99 | 0.00 | 0.00 | 10.99 ✓ | | |
| | CREDIT REPORTING | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 11944 | EQUIFAX WORKFORCE SOLUTIONS | 32.97 | 0.00 | 0.00 | 32.97 |
| 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 | | |
| A2303031378 ✓ | | 03/15/20 | 03/03/20 | 03/28/20 | | | 17,515.00 | 0.00 | 0.00 | 17,515.00 ✓ | | |
| | TECH SUPPORT/MAINT | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | C2510 | EVIDENT | 17,515.00 | 0.00 | 0.00 | 17,515.00 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | | |
| 10689 | FASTHEALTH CORPORATION ✓ | | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 03A23MMC ✓ | | 03/15/20 | 03/01/20 | 03/16/20 | | | 545.00 | 0.00 | 0.00 | 545.00 ✓ | | |

WEBSITE

| Vendor Totals | | Number | Name | | | | Gross | Discount | No-Pay | Net |
|---------------|----------------------------|--------------------------|--------------------------|----------|----------|-----|----------|----------|--------|------------|
| | | 10689 | FASTHEALTH CORPORATION | | | | 545.00 | 0.00 | 0.00 | 545.00 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | | |
| F1300 | FIRESTONE OF PORT LAVACA ✓ | | | W | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net |
| 0081174 ✓ | | 03/15/20 | 03/09/20 | 03/15/20 | | | 947.10 | 0.00 | 0.00 | 947.10 ✓ |
| | | OIL PAN GASKET | | | | | | | | |
| Vendor Totals | | Number | Name | | | | Gross | Discount | No-Pay | Net |
| | | F1300 | FIRESTONE OF PORT LAVACA | | | | 947.10 | 0.00 | 0.00 | 947.10 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | | |
| 14336 | FIRETRON, INC ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net |
| 196045 ✓ | | 03/16/20 | 04/19/20 | 05/19/20 | | | 1,973.00 | 0.00 | 0.00 | 1,973.00 ✓ |
| | | INSPECTION/HOOD/SPRINKLE | | | | | | | | |
| 201301 ✓ | | 03/16/20 | 06/22/20 | 07/22/20 | | | 1,750.00 | 0.00 | 0.00 | 1,750.00 ✓ |
| | | INSPECTION SPRINKLER | | | | | | | | |
| 210379 ✓ | | 03/16/20 | 10/18/20 | 11/17/20 | | | 223.00 | 0.00 | 0.00 | 223.00 ✓ |
| | | HOOD INSPECTIONS | | | | | | | | |
| Vendor Totals | | Number | Name | | | | Gross | Discount | No-Pay | Net |
| | | 14336 | FIRETRON, INC | | | | 3,946.00 | 0.00 | 0.00 | 3,946.00 |
| Vendor# | Vendor Name | | | Class | Pay Code | | | | | |
| 13016 | FIRST INSURANCE FUNDING ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net |
| 021023 | | 03/16/20 | 02/10/20 | 03/10/20 | | | 3,384.89 | 0.00 | 0.00 | 3,384.89 ✓ |
| | | PMT 2 - insurance | | | | | | | | |
| 031423 | | 03/16/20 | 03/14/20 | 04/01/20 | | | 3,384.89 | 0.00 | 0.00 | 3,384.89 ✓ |
| | | PMT 3 - insurance | | | | | | | | |
| Vendor Totals | | Number | Name | | | | Gross | Discount | No-Pay | Net |
| | | 13016 | FIRST INSURANCE FUNDING | | | | 6,769.78 | 0.00 | 0.00 | 6,769.78 |
| 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 |
| 0966273 ✓ | | 03/14/20 | 03/02/20 | 03/27/20 | | | 664.95 | 0.00 | 0.00 | 664.95 ✓ |
| | | SUPPLIES | | | | | | | | |
| 1005176 ✓ | | 03/14/20 | 03/03/20 | 03/28/20 | | | 99.05 | 0.00 | 0.00 | 99.05 ✓ |
| | | SUPPLIES | | | | | | | | |
| 1043064 ✓ | | 03/14/20 | 03/06/20 | 03/31/20 | | | 721.54 | 0.00 | 0.00 | 721.54 ✓ |
| | | SUPPLIES | | | | | | | | |
| 0248020 ✓ | | 03/15/20 | 02/06/20 | 03/03/20 | | | 32.16 | 0.00 | 0.00 | 32.16 ✓ |
| | | SUPPLIES | | | | | | | | |
| 0839102 ✓ | | 03/15/20 | 02/27/20 | 03/24/20 | | | 1,044.10 | 0.00 | 0.00 | 1,044.10 ✓ |
| | | SUPPLIES | | | | | | | | |
| 0839103 ✓ | | 03/15/20 | 02/27/20 | 03/24/20 | | | 101.21 | 0.00 | 0.00 | 101.21 ✓ |
| | | SUPPLIES | | | | | | | | |
| 0839101 ✓ | | 03/15/20 | 02/27/20 | 03/24/20 | | | 110.29 | 0.00 | 0.00 | 110.29 ✓ |
| | | SUPPLIES | | | | | | | | |
| 0879433 ✓ | | 03/15/20 | 02/28/20 | 03/25/20 | | | 348.85 | 0.00 | 0.00 | 348.85 ✓ |
| | | SUPPLIES | | | | | | | | |
| 0879432 ✓ | | 03/15/20 | 02/28/20 | 03/25/20 | | | 1,828.77 | 0.00 | 0.00 | 1,828.77 ✓ |
| | | SUPPLIES | | | | | | | | |

| | | | | | | | | | | | | |
|---------------|------------------------------|----------|----------|----------|---------|----------|----------|------------------------------|-----------|----------|--------|-----------|
| 0923329 | | 03/15/20 | 03/01/20 | 03/26/20 | | | 516.12 | 0.00 | 0.00 | 516.12 | | |
| | SUPPLIES | | | | | | | | | | | |
| 0923328 | | 03/15/20 | 03/01/20 | 03/26/20 | | | 58.44 | 0.00 | 0.00 | 58.44 | | |
| | SUPPLIES | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | F1400 | FISHER HEALTHCARE | 5,525.48 | 0.00 | 0.00 | 5,525.48 |
| 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 | | |
| 340387127 | | 03/16/20 | 03/13/20 | 03/23/20 | | | 413.96 | 0.00 | 0.00 | 413.96 | | |
| | WASTE | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 13960 | G & S MANAGEMENT GROUP LLC | 413.96 | 0.00 | 0.00 | 413.96 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | | |
| 11149 | GBS ADMINISTRATORS, INC | | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 815194308367 | | 03/15/20 | 10/16/20 | 10/01/20 | | | 2,480.03 | 0.00 | 0.00 | 2,480.03 | | |
| | INSRUANCE (10/1-10/31/22) | | | | | | | | | | | |
| 641842447694 | | 03/15/20 | 11/08/20 | 11/01/20 | | | 2,132.39 | 0.00 | 0.00 | 2,132.39 | | |
| | INSURANCE (11/1-11/30/22) | | | | | | | | | | | |
| 711400796653 | | 03/15/20 | 11/22/20 | 12/01/20 | | | 2,478.83 | 0.00 | 0.00 | 2,478.83 | | |
| | INSURANCE (12/1-12/31/22) | | | | | | | | | | | |
| 406541264170 | | 03/15/20 | 12/21/20 | 01/01/20 | | | 1,620.75 | 0.00 | 0.00 | 1,620.75 | | |
| | INSURANCE (1/1-1/31/23) | | | | | | | | | | | |
| 214056862414 | | 03/15/20 | 01/22/20 | 02/01/20 | | | 1,474.62 | 0.00 | 0.00 | 1,474.62 | | |
| | INSURANCE (2/1-2/28/23) | | | | | | | | | | | |
| 591050523725 | | 03/15/20 | 02/21/20 | 03/01/20 | | | 1,484.80 | 0.00 | 0.00 | 1,484.80 | | |
| | INSURANCE (3/1-3/31/23) | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 11149 | GBS ADMINISTRATORS, INC | 11,671.42 | 0.00 | 0.00 | 11,671.42 |
| Vendor# | Vendor Name | | | | Class | Pay Code | | | | | | |
| 12404 | GE PRECISION HEALTHCARE, LLC | | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 6002347203 | | 03/15/20 | 03/01/20 | 03/31/20 | | | 2,422.50 | 0.00 | 0.00 | 2,422.50 | | |
| | CONTRACT | | | | | | | | | | | |
| 6002347201 | | 03/15/20 | 03/01/20 | 03/31/20 | | | 3,588.58 | 0.00 | 0.00 | 3,588.58 | | |
| | CONTRACT | | | | | | | | | | | |
| 6002347202 | | 03/15/20 | 03/01/20 | 03/31/20 | | | 86.67 | 0.00 | 0.00 | 86.67 | | |
| | CONTRACT | | | | | | | | | | | |
| 6002347181 | | 03/15/20 | 03/01/20 | 03/31/20 | | | 357.00 | 0.00 | 0.00 | 357.00 | | |
| | CONTRACT | | | | | | | | | | | |
| 6002347347 | | 03/15/20 | 03/01/20 | 03/31/20 | | | 868.16 | 0.00 | 0.00 | 868.16 | | |
| | CONTRACT | | | | | | | | | | | |
| 6002323316A | | 03/15/20 | 03/01/20 | 03/31/20 | | | -291.74 | 0.00 | 0.00 | -291.74 | | |
| | CREDIT | | | | | | | | | | | |
| 6002347204 | | 03/15/20 | 03/01/20 | 03/31/20 | | | 61.67 | 0.00 | 0.00 | 61.67 | | |
| | CONTRACT | | | | | | | | | | | |
| 6002347223 | | 03/16/20 | 03/01/20 | 03/31/20 | | | 5,665.83 | 0.00 | 0.00 | 5,665.83 | | |
| | CONTRACT | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 12404 | GE PRECISION HEALTHCARE, LLC | 12,758.67 | 0.00 | 0.00 | 12,758.67 |

| Vendor# | Vendor Name | Class | Pay Code | | | | | | | |
|---------------|----------------------------------|--------------------------------|----------|----------|---------|-----------|----------|--------|-------------|--|
| 13148 | GRACE FLOORING AND GLASS ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | |
| 002167 ✓ | | 03/16/20 | 03/07/20 | 03/22/20 | | 540.22 | 0.00 | 0.00 | 540.22 ✓ | |
| | LABOR/MATERIALS | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | |
| | 13148 | GRACE FLOORING AND GLASS | | | | 540.22 | 0.00 | 0.00 | 540.22 | |
| 12948 | GREAT AMERICA FINANCIAL SVCS ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | |
| 33565314REV ✓ | | 03/16/20 | 03/02/20 | 03/03/20 | | 10,344.86 | 0.00 | 0.00 | 10,344.86 ✓ | |
| | COPIER LEASE | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | |
| | 12948 | GREAT AMERICA FINANCIAL SVCS | | | | 10,344.86 | 0.00 | 0.00 | 10,344.86 | |
| 11984 | GUERBET, LLC ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | |
| 18674471 ✓ | | 03/15/20 | 03/07/20 | 04/01/20 | | 175.00 | 0.00 | 0.00 | 175.00 ✓ | |
| | SUPPLIES | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | |
| | 11984 | GUERBET, LLC | | | | 175.00 | 0.00 | 0.00 | 175.00 | |
| G1210 | GULF COAST PAPER COMPANY ✓ | M | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | |
| 2363569 ✓ | | 03/15/20 | 03/07/20 | 04/06/20 | | 803.69 | 0.00 | 0.00 | 803.69 ✓ | |
| | SUPPLIES | | | | | | | | | |
| 2363440 ✓ | | 03/15/20 | 03/07/20 | 04/06/20 | | 28.20 | 0.00 | 0.00 | 28.20 ✓ | |
| | SUPPLIES | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | |
| | G1210 | GULF COAST PAPER COMPANY | | | | 831.89 | 0.00 | 0.00 | 831.89 | |
| H1260 | HEALTHCARE BENEFITS INCORPORAT ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | |
| 13596 ✓ | | 03/15/20 | 02/28/20 | 03/30/20 | | 247.50 | 0.00 | 0.00 | 247.50 ✓ | |
| | CHARTS FEB 23 | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | |
| | H1260 | HEALTHCARE BENEFITS INCORPORAT | | | | 247.50 | 0.00 | 0.00 | 247.50 | |
| 11552 | HEALTHCARE FINANCIAL SERVICES ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | |
| 100727981 ✓ | | 03/15/20 | 02/25/20 | 04/01/20 | | 4,610.52 | 0.00 | 0.00 | 4,610.52 ✓ | |
| | LEASE | | | | | | | | | |
| 100733066 ✓ | | 03/15/20 | 03/07/20 | 04/01/20 | | 1,797.44 | 0.00 | 0.00 | 1,797.44 ✓ | |
| | LEASE | | | | | | | | | |
| Vendor Totals | Number | Name | | | | Gross | Discount | No-Pay | Net | |
| | 11552 | HEALTHCARE FINANCIAL SERVICES | | | | 6,407.96 | 0.00 | 0.00 | 6,407.96 | |
| H1269 | HENRY SCHEIN INC. ✓ | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | |
| 35435456 ✓ | | 03/14/20 | 03/09/20 | 04/01/20 | | 207.08 | 0.00 | 0.00 | 207.08 ✓ | |
| | SUPPLIES | | | | | | | | | |

| | | | | | | | | | | | |
|----------------------|-----------------------------|----------|----------|----------|---------|--------|-----------------------------|-----------|----------|-----------|-----------|
| 35445126 | | 03/14/20 | 03/10/20 | 04/01/20 | | 104.12 | 0.00 | 0.00 | 104.12 | | |
| SUPPLIES | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | H1269 | HENRY SCHEIN INC. | 311.20 | 0.00 | 0.00 | 311.20 |
| Vendor# | Vendor Name | | | | | | Class | Pay Code | | | |
| 12868 | HOLT CAT | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | |
| PIEE0042752 | | 03/14/20 | 03/06/20 | 03/21/20 | | | 65.00 | 0.00 | 0.00 | 65.00 | |
| FREIGHT | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 12868 | HOLT CAT | 65.00 | 0.00 | 0.00 | 65.00 |
| Vendor# | Vendor Name | | | | | | Class | Pay Code | | | |
| 10922 | HUNTER PHARMACY SERVICES | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | |
| 5322 | | 03/15/20 | 02/25/20 | 03/17/20 | | | 14,396.04 | 0.00 | 0.00 | 14,396.04 | |
| PHARM SALRY | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 10922 | HUNTER PHARMACY SERVICES | 14,396.04 | 0.00 | 0.00 | 14,396.04 |
| 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 | |
| 2022-23/020 | | 03/16/20 | 03/15/20 | 04/01/20 | | | 9,000.00 | 0.00 | 0.00 | 9,000.00 | |
| REVENUE CYCLE FEB 23 | | | | | | | | | | | |
| 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 | | | |
| L0700 | LABCORP OF AMERICA HOLDINGS | | | | | | M | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | |
| 75852792 | | 03/15/20 | 02/25/20 | 03/22/20 | | | 16.10 | 0.00 | 0.00 | 16.10 | |
| LAB SERV | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | L0700 | LABCORP OF AMERICA HOLDINGS | 16.10 | 0.00 | 0.00 | 16.10 |
| Vendor# | Vendor Name | | | | | | Class | Pay Code | | | |
| 10635 | N | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | |
| 030923 | | 03/16/20 | 03/09/20 | 04/01/20 | | | 65.00 | 0.00 | 0.00 | 65.00 | |
| REFUND | | | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 10635 | | 65.00 | 0.00 | 0.00 | 65.00 |
| Vendor# | Vendor Name | | | | | | Class | Pay Code | | | |
| 10972 | M G TRUST | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | |
| 031023 | | 03/15/20 | 03/10/20 | 03/22/20 | | | 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 | | | |
| M1950 | MARTIN PRINTING CO | | | | | | W | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | |
| 79295 | | 03/16/20 | 03/13/20 | 03/13/20 | | | 659.50 | 0.00 | 0.00 | 659.50 | |
| BUSINESS CARDS | | | | | | | | | | | |

| Vendor Total: | | Number | Name | | | Gross | Discount | No-Pay | Net |
|---------------|--------------------------|----------|--------------------|----------|---------|-----------|----------|--------|------------|
| | | M1950 | MARTIN PRINTING CO | | | 659.50 | 0.00 | 0.00 | 659.50 |
| 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 |
| 2255681469 ✓ | SUPPLIES | 03/14/20 | 02/28/20 | 03/25/20 | | 28.91 | 0.00 | 0.00 | 28.91 ✓ |
| 2255681468 ✓ | SUPPLIES | 03/14/20 | 02/28/20 | 03/25/20 | | 26.24 | 0.00 | 0.00 | 26.24 ✓ |
| 2255681470 ✓ | SUPPLIES | 03/14/20 | 02/28/20 | 03/25/20 | | 85.27 | 0.00 | 0.00 | 85.27 ✓ |
| 2255681467 ✓ | SUPPLIES | 03/14/20 | 02/28/20 | 03/25/20 | | 35.92 | 0.00 | 0.00 | 35.92 ✓ |
| 2255928998 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 47.48 | 0.00 | 0.00 | 47.48 ✓ |
| 2255909676 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 350.05 | 0.00 | 0.00 | 350.05 ✓ |
| 2255930105 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 4,468.31 | 0.00 | 0.00 | 4,468.31 ✓ |
| 2255928999 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 47.48 | 0.00 | 0.00 | 47.48 ✓ |
| 2255928991 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 27.26 | 0.00 | 0.00 | 27.26 ✓ |
| 2255930100 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 930.48 | 0.00 | 0.00 | 930.48 ✓ |
| 2255928989 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 151.71 | 0.00 | 0.00 | 151.71 ✓ |
| 2255930103 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 686.35 | 0.00 | 0.00 | 686.35 ✓ |
| 2255928994 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 181.26 | 0.00 | 0.00 | 181.26 ✓ |
| 2255928996 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 139.47 | 0.00 | 0.00 | 139.47 ✓ |
| 2255930102 ✓ | SUPPLIES | 03/14/20 | 03/01/20 | 03/26/20 | | 145.89 | 0.00 | 0.00 | 145.89 ✓ |
| 2256231598 ✓ | SUPPLIES | 03/14/20 | 03/02/20 | 03/27/20 | | 84.76 | 0.00 | 0.00 | 84.76 ✓ |
| 2256911859 ✓ | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | 92.23 | 0.00 | 0.00 | 92.23 ✓ |
| 2256911856 ✓ | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | 20.30 | 0.00 | 0.00 | 20.30 ✓ |
| 2256911869 ✓ | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | 68.91 | 0.00 | 0.00 | 68.91 ✓ |
| 2256911863 ✓ | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | 446.61 | 0.00 | 0.00 | 446.61 ✓ |
| 2256911857 ✓ | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | 75.36 | 0.00 | 0.00 | 75.36 ✓ |
| 2256911868 ✓ | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | 73.12 | 0.00 | 0.00 | 73.12 ✓ |
| 2256911867 ✓ | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | 11.20 | 0.00 | 0.00 | 11.20 ✓ |

| | | | | | | | | | | | | |
|----------------|--------------------------|----------|----------|----------|---------|-----|-----------|-------------------------|-----------|-----------|--------|-----------|
| 2256911871 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 83.28 | 0.00 | 0.00 | 83.28 | | |
| 2256911858 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 682.92 | 0.00 | 0.00 | 682.92 | | |
| 2256911862 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 650.43 | 0.00 | 0.00 | 650.43 | | |
| 2256911865 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 3,293.06 | 0.00 | 0.00 | 3,293.06 | | |
| 2256911870 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 214.57 | 0.00 | 0.00 | 214.57 | | |
| 2256911864 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 621.47 | 0.00 | 0.00 | 621.47 | | |
| 2256911861 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 135.04 | 0.00 | 0.00 | 135.04 | | |
| 2256911860 | SUPPLIES | 03/14/20 | 03/08/20 | 04/02/20 | | | 54.09 | 0.00 | 0.00 | 54.09 | | |
| 2254772246 | CREDIT | 03/15/20 | 02/21/20 | 03/18/20 | | | -41.16 | 0.00 | 0.00 | -41.16 | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | M2470 | MEDLINE INDUSTRIES INC | 13,918.27 | 0.00 | 0.00 | 13,918.27 |
| 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 | | |
| 031023 | | 03/15/20 | 03/10/20 | 03/22/20 | | | 316.00 | 0.00 | 0.00 | 316.00 | | |
| PAYROLL DEDUCT | | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 10963 | MEMORIAL MEDICAL CLINIC | 316.00 | 0.00 | 0.00 | 316.00 |
| 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 | | |
| 9317911 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 1.01 | 0.00 | 0.00 | 1.01 | | |
| 9320341 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 560.87 | 0.00 | 0.00 | 560.87 | | |
| 9320167 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 187.93 | 0.00 | 0.00 | 187.93 | | |
| 9319969 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 158.11 | 0.00 | 0.00 | 158.11 | | |
| 9319968 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 7.36 | 0.00 | 0.00 | 7.36 | | |
| 9320166 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 137.03 | 0.00 | 0.00 | 137.03 | | |
| 9317912 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 461.30 | 0.00 | 0.00 | 461.30 | | |
| CM17420 | CREDIT | 03/15/20 | 03/08/20 | 03/18/20 | | | -323.28 | 0.00 | 0.00 | -323.28 | | |
| 9320339 | INVENTORY | 03/15/20 | 03/08/20 | 03/18/20 | | | 113.76 | 0.00 | 0.00 | 113.76 | | |
| CM17419 | CREDIT | 03/15/20 | 03/08/20 | 03/18/20 | | | -2,104.44 | 0.00 | 0.00 | -2,104.44 | | |
| 9325478 | | 03/15/20 | 03/09/20 | 03/19/20 | | | 382.75 | 0.00 | 0.00 | 382.75 | | |

| | | | | | | | | | | | | |
|---------------|--------------------|-----------|----------|----------|----------|-----|----------|--------------------------|-----------|----------|--------|-----------|
| | | INVENTORY | | | | | | | | | | |
| 9325477 | ✓ | | 03/15/20 | 03/09/20 | 03/19/20 | | 100.94 | 0.00 | 0.00 | 100.94 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9333554 | ✓ | | 03/15/20 | 03/12/20 | 03/22/20 | | 54.81 | 0.00 | 0.00 | 54.81 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9333556 | ✓ | | 03/15/20 | 03/12/20 | 03/22/20 | | 129.70 | 0.00 | 0.00 | 129.70 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9333553 | ✓ | | 03/15/20 | 03/12/20 | 03/22/20 | | 1,248.54 | 0.00 | 0.00 | 1,248.54 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9331491 | ✓ | | 03/15/20 | 03/12/20 | 03/22/20 | | 73.73 | 0.00 | 0.00 | 73.73 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9331490 | ✓ | | 03/15/20 | 03/12/20 | 03/22/20 | | 57.90 | 0.00 | 0.00 | 57.90 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9333555 | ✓ | | 03/15/20 | 03/12/20 | 03/22/20 | | 6,847.07 | 0.00 | 0.00 | 6,847.07 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| CM18442 | ✓ | | 03/15/20 | 03/13/20 | 03/23/20 | | -171.87 | 0.00 | 0.00 | -171.87 | ✓ | |
| | | CREDIT | | | | | | | | | | |
| CM18342 | ✓ | | 03/15/20 | 03/13/20 | 03/23/20 | | -10.32 | 0.00 | 0.00 | -10.32 | ✓ | |
| | | CREDITR | | | | | | | | | | |
| 9338755 | ✓ | | 03/15/20 | 03/13/20 | 03/23/20 | | 2.11 | 0.00 | 0.00 | 2.11 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| CM18343 | ✓ | | 03/15/20 | 03/13/20 | 03/23/20 | | -10.41 | 0.00 | 0.00 | -10.41 | ✓ | |
| | | CREDIT | | | | | | | | | | |
| 9338584 | ✓ | | 03/15/20 | 03/13/20 | 03/23/20 | | 115.22 | 0.00 | 0.00 | 115.22 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| CM18344 | ✓ | | 03/15/20 | 03/13/20 | 03/23/20 | | -36.86 | 0.00 | 0.00 | -36.86 | ✓ | |
| | | CREDIT | | | | | | | | | | |
| 9343490 | ✓ | | 03/15/20 | 03/14/20 | 03/24/20 | | 1,012.30 | 0.00 | 0.00 | 1,012.30 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9343491 | ✓ | | 03/15/20 | 03/14/20 | 03/24/20 | | 2.98 | 0.00 | 0.00 | 2.98 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9342778 | ✓ | | 03/15/20 | 03/14/20 | 03/24/20 | | 173.70 | 0.00 | 0.00 | 173.70 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| 9343492 | ✓ | | 03/15/20 | 03/14/20 | 03/24/20 | | 4,026.23 | 0.00 | 0.00 | 4,026.23 | ✓ | |
| | | INVENTORY | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 10536 | MORRIS & DICKSON CO, LLC | 13,198.17 | 0.00 | 0.00 | 13,198.17 |
| Vendor# | Vendor Name | | Class | | Pay Code | | | | | | | |
| M2659 | MXR IMAGING, INC ✓ | | M | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 8801004946 | ✓ | 03/14/20 | 03/07/20 | 04/06/20 | | | 313.47 | 0.00 | 0.00 | 313.47 | ✓ | |
| | SUPPLIES | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | M2659 | MXR IMAGING, INC | 313.47 | 0.00 | 0.00 | 313.47 |
| Vendor# | Vendor Name | | Class | | Pay Code | | | | | | | |
| 10152 | PARTSSOURCE, LLC ✓ | | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay | Gross | Discount | No-Pay | Net | | |
| 04706097 | ✓ | 03/14/20 | 03/02/20 | 04/01/20 | | | 23.72 | 0.00 | 0.00 | 23.72 | ✓ | |
| | SUPPLIES | | | | | | | | | | | |
| Vendor Totals | | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | | 10152 | PARTSSOURCE, LLC | 23.72 | 0.00 | 0.00 | 23.72 |

| Vendor# | Vendor Name | Class | Pay Code | Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|---------|--------------------------------|--------|--------------------------------|------------|------------------------------------|----------|----------|----------|---------|-----------|----------|--------|-----------|
| 14764 | PL-CPR, LLC | | | | | | | | | | | | |
| | | | | 179 | BLS RECERT (13) | 03/16/20 | 03/03/20 | 04/01/20 | | 510.00 | 0.00 | 0.00 | 510.00 |
| | | | | 180 | BLS RECERT | 03/16/20 | 03/07/20 | 04/01/20 | | 330.00 | 0.00 | 0.00 | 330.00 |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 14764 | PL-CPR, LLC | | | | | | | 840.00 | 0.00 | 0.00 | 840.00 |
| 12480 | PRO ENERGY PARTNERS LLC | | | | | | | | | | | | |
| | | | | 2302-0600 | ENERGY | 03/16/20 | 02/28/20 | 03/15/20 | | 4,353.26 | 0.00 | 0.00 | 4,353.26 |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 12480 | PRO ENERGY PARTNERS LLC | | | | | | | 4,353.26 | 0.00 | 0.00 | 4,353.26 |
| 11024 | REED, CLAYMON, MEEKER & HARGET | | | | | | | | | | | | |
| | | | | 28240 | LEGAL SERVICES (2/2-2/28/23) | 03/15/20 | 03/13/20 | 04/01/20 | | 6,148.00 | 0.00 | 0.00 | 6,148.00 |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 11024 | REED, CLAYMON, MEEKER & HARGET | | | | | | | 6,148.00 | 0.00 | 0.00 | 6,148.00 |
| S3940 | STERIS CORPORATION | | M | | | | | | | | | | |
| | | | | 10871824 | SUPPLIES | 02/28/20 | 03/06/20 | 03/31/20 | | 171.92 | 0.00 | 0.00 | 171.92 |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | S3940 | STERIS CORPORATION | | | | | | | 171.92 | 0.00 | 0.00 | 171.92 |
| T0420 | TELEFLEX MEDICAL | | | | | | | | | | | | |
| | | | | 9506684651 | SUPPLIES | 03/14/20 | 03/06/20 | 03/14/20 | | 9.26 | 0.00 | 0.00 | 9.26 |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | T0420 | TELEFLEX MEDICAL | | | | | | | 9.26 | 0.00 | 0.00 | 9.26 |
| T2204 | TEXAS MUTUAL INSURANCE CO | | W | | | | | | | | | | |
| | | | | 1004471226 | INSURANCE | 03/15/20 | 03/08/20 | 03/28/20 | | 4,533.00 | 0.00 | 0.00 | 4,533.00 |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | T2204 | TEXAS MUTUAL INSURANCE CO | | | | | | | 4,533.00 | 0.00 | 0.00 | 4,533.00 |
| 13224 | TORCH | | | | | | | | | | | | |
| | | | | 2228569 | INTERIM CFO CONTRACT (2/1-2/20/23) | 03/15/20 | 02/01/20 | 02/28/20 | | 17,835.00 | 0.00 | 0.00 | 17,835.00 |
| | Vendor Totals | Number | Name | | | | | | | Gross | Discount | No-Pay | Net |
| | | 13224 | TORCH | | | | | | | 17,835.00 | 0.00 | 0.00 | 17,835.00 |

| Vendor# | Vendor Name | Class | Pay Code | | | | | | | | |
|-----------------|------------------------------------|------------------------------|----------|----------|---------|-----------|----------|--------|------------|--------|-----|
| T3130 | TRI-ANIM HEALTH SERVICES INC ✓ | M | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 65428663 ✓ | | 03/14/20 | 03/07/20 | 04/01/20 | | 305.68 | 0.00 | 0.00 | 305.68 ✓ | | |
| | SUPPLIES | | | | | | | | | | |
| Vendor Totals: | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | T3130 | TRI-ANIM HEALTH SERVICES INC | | | | 305.68 | 0.00 | 0.00 | 305.68 | | |
| Vendor# | Vendor Name | Class | Pay Code | | | | | | | | |
| 14372 | TRIAGE, LLC ✓ | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| INV1796664139 ✓ | | 03/15/20 | 12/30/20 | 01/29/20 | | 4,293.00 | 0.00 | 0.00 | 4,293.00 ✓ | | |
| | STEVEN SHAW 12/28-12/24/23 CT tech | | | | | | | | | | |
| INV96668740 ✓ | | 03/15/20 | 01/06/20 | 02/05/20 | | 5,078.00 | 0.00 | 0.00 | 5,078.00 ✓ | | |
| | STEVEN SHAW 12/25-12/31/22 CT tech | | | | | | | | | | |
| INV1796673446 ✓ | | 03/15/20 | 01/13/20 | 02/12/20 | | 4,212.00 | 0.00 | 0.00 | 4,212.00 ✓ | | |
| | STEVEN SHAW 1/1-1/7/23 CT tech | | | | | | | | | | |
| INV1796708599 ✓ | | 03/15/20 | 03/03/20 | 04/02/20 | | 4,337.70 | 0.00 | 0.00 | 4,337.70 ✓ | | |
| | STEVEN SHAW 2/19-2/25/23 CT tech | | | | | | | | | | |
| INV1796713154 ✓ | | 03/15/20 | 03/10/20 | 04/01/20 | | 4,212.00 | 0.00 | 0.00 | 4,212.00 ✓ | | |
| | STEVEN SHAW 2/26-3/4/23 CT tech | | | | | | | | | | |
| Vendor Totals: | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | 14372 | TRIAGE, LLC | | | | 22,132.70 | 0.00 | 0.00 | 22,132.70 | | |
| 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 | | |
| LF007793 ✓ | | 03/15/20 | 02/28/20 | 03/15/20 | | 2.74 | 0.00 | 0.00 | 2.74 ✓ | | |
| | LATE FEE | | | | | | | | | | |
| Vendor Totals: | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | 13616 | TRIOSE, INC | | | | 2.74 | 0.00 | 0.00 | 2.74 | | |
| Vendor# | Vendor Name | Class | Pay Code | | | | | | | | |
| 11067 | TRIZETTO PROVIDER SOLUTIONS ✓ | | | | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
| 35FK032300 ✓ | | 03/15/20 | 03/01/20 | 03/26/20 | | 1,175.80 | 0.00 | 0.00 | 1,175.80 ✓ | | |
| | STATEMENTS | | | | | | | | | | |
| Vendor Totals: | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | 11067 | TRIZETTO PROVIDER SOLUTIONS | | | | 1,175.80 | 0.00 | 0.00 | 1,175.80 | | |
| 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 | | |
| 8400416848 ✓ | | 03/15/20 | 03/06/20 | 03/31/20 | | 76.87 | 0.00 | 0.00 | 76.87 ✓ | | |
| | LAUNDRY | | | | | | | | | | |
| 8400416868 ✓ | | 03/15/20 | 03/06/20 | 03/31/20 | | 2,563.91 | 0.00 | 0.00 | 2,563.91 ✓ | | |
| | LAUNDRY | | | | | | | | | | |
| 8400417179 ✓ | | 03/15/20 | 03/09/20 | 04/03/20 | | 33.27 | 0.00 | 0.00 | 33.27 ✓ | | |
| | LAUNDRY | | | | | | | | | | |
| 8400417183 ✓ | | 03/15/20 | 03/09/20 | 04/03/20 | | 223.43 | 0.00 | 0.00 | 223.43 ✓ | | |
| | LAUNDRY | | | | | | | | | | |
| 8400417198 ✓ | | 03/15/20 | 03/09/20 | 04/03/20 | | 80.23 | 0.00 | 0.00 | 80.23 ✓ | | |
| | LAUNDRY | | | | | | | | | | |
| 8400417207 ✓ | | 03/15/20 | 03/09/20 | 04/03/20 | | 1,587.69 | 0.00 | 0.00 | 1,587.69 ✓ | | |
| | LAUNDRY | | | | | | | | | | |

| | | | | | | | | | |
|--------------------------------------|--------------------------------|----------|----------|----------|----------|-----------|----------|----------|----------|
| 8400417180 | ✓ | 03/15/20 | 03/09/20 | 04/03/20 | 213.06 | 0.00 | 0.00 | 213.06 | ✓ |
| | LAUNDRY | | | | | | | | |
| 8400417181 | ✓ | 03/15/20 | 03/09/20 | 04/03/20 | 147.50 | 0.00 | 0.00 | 147.50 | ✓ |
| | LAUNDRY | | | | | | | | |
| 8400417182 | ✓ | 03/15/20 | 03/09/20 | 04/03/20 | 207.75 | 0.00 | 0.00 | 207.75 | ✓ |
| | LAUNDRY | | | | | | | | |
| 8400417219 | ✓ | 03/15/20 | 03/09/20 | 04/03/20 | 123.73 | 0.00 | 0.00 | 123.73 | ✓ |
| | LAUNDRY | | | | | | | | |
| Vendor Totals: Number Name | | | | | Gross | Discount | No-Pay | Net | |
| U1064 UNIFIRST HOLDINGS INC | | | | | 5,257.44 | 0.00 | 0.00 | 5,257.44 | |
| Vendor# | Vendor Name | | Class | Pay Code | | | | | |
| 10943 | WALLER,LANSDEN, DORTCH & DAVIS | ✓ | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 10896942 | ✓ | 03/16/20 | 03/09/20 | 03/15/20 | | 234.00 | 0.00 | 0.00 | 234.00 |
| | LEGAL SERV | | | | | | | | |
| Vendor Totals: Number Name | | | | | Gross | Discount | No-Pay | Net | |
| 10943 WALLER,LANSDEN, DORTCH & DAVIS | | | | | 234.00 | 0.00 | 0.00 | 234.00 | |
| Vendor# | Vendor Name | | Class | Pay Code | | | | | |
| 11110 | WERFEN USA LLC | ✓ | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| 9111294570 | ✓ | 03/15/20 | 03/06/20 | 03/31/20 | | 1,110.79 | 0.00 | 0.00 | 1,110.79 |
| | SUPPLIES | | | | | | | | |
| 9111296174 | ✓ | 03/15/20 | 03/08/20 | 04/02/20 | | 717.00 | 0.00 | 0.00 | 717.00 |
| | SUPPLIES | | | | | | | | |
| Vendor Totals: Number Name | | | | | Gross | Discount | No-Pay | Net | |
| 11110 WERFEN USA LLC | | | | | 1,827.79 | 0.00 | 0.00 | 1,827.79 | |
| Vendor# | Vendor Name | | Class | Pay Code | | | | | |
| 11400 | WEST COAST MEDICAL RESOURCES | ✓ | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| INV096558 | ✓ | 03/15/20 | 03/06/20 | 04/01/20 | | 316.00 | 0.00 | 0.00 | 316.00 |
| | SUPPLIES | | | | | | | | |
| Vendor Totals: Number Name | | | | | Gross | Discount | No-Pay | Net | |
| 11400 WEST COAST MEDICAL RESOURCES | | | | | 316.00 | 0.00 | 0.00 | 316.00 | |
| Vendor# | Vendor Name | | Class | Pay Code | | | | | |
| 10556 | WOUND CARE SPECIALISTS | ✓ | | | | | | | |
| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
| WCS00005852 | ✓ | 03/16/20 | 03/01/20 | 03/30/20 | | 5,500.00 | 0.00 | 0.00 | 5,500.00 |
| | WOUND CARE | | | | | | | | |
| Vendor Totals: Number Name | | | | | Gross | Discount | No-Pay | Net | |
| 10556 WOUND CARE SPECIALISTS | | | | | 5,500.00 | 0.00 | 0.00 | 5,500.00 | |

Report Summary

| | | | | |
|---------------|--------------|----------|-----------------|-----------------|
| Grand Totals: | Gross | Discount | No-Pay | Net |
| | 499,418.04 | 0.00 | 0.00 | 499,418.04 |
| | 499,418.04 + | | | |
| | 42,267.24 - | | | |
| | 457,150.80 * | | | |
| | | | py 5 correction | Σ < 42,267.24 > |
| | | | | \$ 457,150.80 |

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 198514-198595

RUN DATE 03/16/23
RECEIVED BY THE
COUNTY AUDITOR ON
MAR 16 2023

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1
APCDEDIT

| PATIENT NUMBER | PAYEE NAME | DATE | AMOUNT | PAY CODE | PAT TYPE | DESCRIPTION | GL NUM |
|----------------|------------|--------|--------|----------|----------|-------------|--------|
| <hr/> | | | | | | | |
| | | 031623 | 45.60 | | 2 | REFUND FOR | |
| | | 031623 | 108.20 | | 2 | REFUND FOR | |
| | | 031623 | 124.15 | | 3 | REFUND FOR | |
| | | 031623 | 143.71 | | 2 | REFUND FOR | |
| | | 031623 | 556.72 | | 3 | REFUND FOR | |
| | | 031623 | 250.00 | | 3 | REFUND FOR | |
| | | 031623 | 54.26 | | 2 | REFUND FOR | |

ARID=0001 TOTAL 1282.64

TOTAL 1282.64

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 198596-198602

CITIBANK CORPORATE CARD

Account Statement

Commercial Card Account
ROSHANDA S THOMAS



Account Inquiries:

Toll Free: 1-(800)-248-4553
International: 1-(904)-954-7314
TDD/TTY: 1-(877)-505-7276

Account Number: XXXX-XXXX-XXXX-9457

Summary of Account Activity

Total Activity **\$4,877.42**

Not an invoice. For your records only.

Credit Limit **\$15,000**
Cash Advance Limit **\$0**
Statement Closing Date **03/03/2023**
Days in Billing Period **28**

Send Notice of Billing Errors and Customer Service Inquiries to:
CITIBANK, N.A., PO BOX 6125, SIOUX FALLS SD 57117-6125

Handwritten: Paid 3/20/23

Transactions

| Post Date | Trans Date | MCC | Reference Number | Description/Location | Amount |
|--|------------|------|-------------------------|--|---------------------|
| ***** NOTICE MEMO ITEM(S) LISTED BELOW ***** | | | | | |
| 02/06 | 02/04 | 5968 | 55432863035109003950061 | 1 B2B Prime*XCSL06OB3 Amzn.com/billWA D01-1219011-49794 | 98109 USA ✓179.00 ✓ |
| 02/07 | 02/06 | 9399 | 05134373038600034316697 | 2 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91116470 | 22033 USA ✓2.50 ✓ |
| 02/08 | 02/07 | 9399 | 05134373039600032958663 | 3 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91166037 | 22033 USA ✓2.50 ✓ |
| 02/08 | 02/07 | 9399 | 05134373039600032958747 | 4 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91166311 | 22033 USA ✓2.50 ✓ |
| 02/08 | 02/07 | 9399 | 05134373039600032958820 | 5 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91166643 | 22033 USA ✓2.50 ✓ |
| 02/08 | 02/07 | 9399 | 05134373039600032958903 | 6 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91167609 | 22033 USA ✓40.00 ✓ |
| 02/10 | 02/09 | 8699 | 55436873040270409848511 | 7 NATIONAL ASSOCIATION O 866-3061961 MI 2497114 | 49412 USA ✓575.00 ✓ |
| 02/10 | 02/09 | 3504 | 55436873040260402267058 | 8 HILTON ADVPURCH8002367 800-2367113 TN 5550209080 CHECK IN: 02/07/2023 555020908050327 | 38117 USA ✓390.45 ✓ |
| 02/14 | 02/13 | 9399 | 05134373045600035040933 | 9 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91306876 | 22033 USA ✓2.50 ✓ |
| 02/14 | 02/14 | 8999 | 55432863045202251002525 | 10 AMA*CREENTIALING 800-621-8335 IL | 60611 USA ✓44.00 ✓ |
| 02/21 | 02/20 | 9399 | 55488723052091278004245 | 11 TXDPS CRIME RECS 5124242936 TX | 78752 USA ✓153.63 ✓ |
| 02/22 | 02/22 | 5085 | 55432863053204442052657 | 12 MFG EDGE/PUMPCATALOG.C 732-835-4042 NJ | USA ✓551.69 ✓ |

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

Page 1 of 4

citi CITIBANK, N.A.
PO BOX 6125
SIOUX FALLS SD 57117-6125

Account Number XXXX-XXXX-XXXX-9457
Statement Closing Date March 03, 2023

Not an invoice.
For your records only.

ROSHANDA S THOMAS
202 S ANN ST
PORT LAVACA TX 77979-4204

00007905040

Account: XXXX-XXXX-XXXX-9457

Transactions (con't)

| Post Date | Trans Date | MCC | Reference Number | Description/Location | Amount |
|--|------------|------|-------------------------|--|----------------------|
| 02/23 | 02/22 | 3665 | 55436873054150548525738 | 13 HAMPTON INNS PORT LAVACA TX 00923042 CHECK IN: 02/14/2023 00923042 | 77979 USA 1,075.76 ✓ |
| 02/24 | 02/19 | 3509 | 55432863054204883897551 | 14 MARRIOTT JW HILL RSRT& 866-435-7627 TX MO5525 CHECK IN: 02/19/2023 2334316 | 78261 USA 1,855.39 ✓ |
| ***** TOTAL AMOUNT OF MEMO ITEM(S): \$4,877.42 | | | | | |

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

1

MEMORIAL MEDICAL CENTER PURCHASE ORDER

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Citi bank

Date: 3/9/2023

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

| Date Required | Expense # | Department | Deliver To | | | |
|---------------|-----------|----------------|--------------------------------|-----------|------------|---------------|
| Line No. | Qty. | Catalog Number | Description | Unit Cost | Unit Meas. | Extended Cost |
| 1 | | 179.00 + | B2B Prime - Amazon | | | 179.00 |
| 2 | | 2.50 + | membership - will credit acct. | | | |
| 3 | | 2.50 + | NPDB - 1 Enrollment | | | 2.50 |
| 4 | | 40.00 + | " " | | | 2.50 |
| 5 | | 575.00 + | " " | | | 2.50 |
| 6 | | 390.45 + | " " | | | 2.50 |
| 7 | | 2.50 + | " " | | | 2.50 |
| 8 | | 155.65 + | NPDB - 16 Renewals (Providers) | | | 40.00 |
| 9 | | 551.69 + | National Assoc. Rural Health | | | 575.00 |
| 10 | | 1,075.76 + | Conf - Registration Mimi | | | |
| | | 1,855.39 + | Nguyen - Clinic 3/10 - 3/22/23 | | | |
| | | 4,877.42 * | | | | |

Est. Freight _____

Est. Total Cost _____

TOTAL COST \$4,877.42

NOTES:

Charges made to Roshanda's credit card

| | |
|------------|--------|
| Contact: | Date: |
| Quoted By: | |
| Buyer: | E.T.A. |

| |
|--|
| Dept. Director _____ |
| Dir. Nursing _____ |
| Dir. Clinical Services _____ |
| CFO _____ |
| Administrator <u>Roshanda Flores</u> 3/10/23 |

MEMORIAL MEDICAL CENTER PURCHASE ORDER

②

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Citibank

Date: 3/9/2023

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

| Date Required | | Expense # | Department | Deliver To | | Form # 9401 |
|---------------|------|----------------|---|-----------------------|------------|---------------|
| Line No. | Qty. | Catalog Number | Description | Unit Cost | Unit Meas. | Extended Cost |
| 1 | — | | Hilton-Marden Inn Austin | Texas Rural Hospitals | Q1 | 390.45 |
| 2 | | | Univ Capital District - | Training | 3/3/23 | |
| 3 | | | Hotel for Dianne Atkinson | | | |
| 4 | — | | NPDB - 1 Enrollment | | | 2.50 |
| 5 | — | | AMA Credentialing - 1 | | | 44.00 |
| 6 | | | Unit Profile + Cont. Monitoring | | | |
| 7 | — | | TXDPS CRIME RECS - 50 | | | 153.68 |
| 8 | | | Credit for Criminal Hx Checks (HR & Cred) | | | |
| 9 | — | | MFG Edge/Pump Catalog.com | | | 551.69 |
| 10 | | | Parts for Surg Dept | | | |

Est. Freight _____ Est. Total Cost _____ TOTAL COST _____

NOTES:

Charges made to Roshanda's credit card

| | |
|------------------|--------------|
| Contact: _____ | Date: _____ |
| Quoted By: _____ | |
| Buyer: _____ | E.T.A. _____ |

| |
|---|
| Dept. Director _____ |
| Dir. Nursing _____ |
| Dir. Clinical Services _____ |
| CFO _____ |
| Administrator <u>Roshanda S. Thomas 3/10/23</u> |

MEMORIAL MEDICAL CENTER PURCHASE ORDER

③

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Citibank

Date: 3/9/2023

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

| Date Required | | Expense # | Department | Deliver To | Form # 9401 | |
|---------------|------|----------------|-------------------------|------------|-------------|---------------|
| Line No. | Qty. | Catalog Number | Description | Unit Cost | Unit Meas. | Extended Cost |
| 1 | — | | Hampton Inn - Hotel | | | 1,075.7 |
| 2 | | | for Dr. Hobson - OB/Gyn | | | |
| 3 | — | | Marriott JW Hill RSRT | | | 1,855.3 |
| 4 | | | Roshanda Thomas' hotel | | | |
| 5 | | | for AHA Rural Conf | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |

Est. Freight _____ Est. Total Cost _____ TOTAL COST _____

NOTES:

Charges made to Roshanda's credit card

| | |
|------------------|--------------|
| Contact: _____ | Date: _____ |
| Quoted By: _____ | |
| Buyer: _____ | E.T.A. _____ |

| |
|--|
| Dept. Director _____ |
| Dir. Nursing _____ |
| Dir. Clinical Services _____ |
| CFO _____ |
| Administrator <u>Roshanda Thomas 3/10/23</u> |

CITIBANK CORPORATE CARD

Account Statement



Commercial Card Account
C0001 CALHOUN COUNTY MMC

Account Inquiries:
Toll Free: 1-(800)-248-4553
International: 1-(904)-954-7314
TDD/TTY: 1-(877)-505-7276

Account Number: XXXX-XXXX-XXXX-2799
Invoice # 3653004056

Summary of Account Activity

| | |
|---------------------------|------------|
| Previous Balance | \$2,983.45 |
| Payments | \$3,240.95 |
| Credits | \$0.00 |
| Purchases & Other Charges | \$4,877.42 |
| Cash Transactions | \$0.00 |
| Cash Transaction Fees | \$0.00 |
| Interest Charges | \$0.00 |

Payment Information

| | |
|-------------------------------|-------------------|
| New Balance | \$4,619.92 |
| Past Due Amount | \$0.00 |
| Disputed Amount | \$0.00 |
| Amount Over Credit Limit | \$0.00 |
| Minimum Payment Due | \$4,619.92 |
| Payment Due Date | 03/28/2023 |
| Statement Closing Date | 03/03/2023 |
| Days in Billing Period | 28 |

| | |
|------------------------------|----------|
| Credit Limit | \$30,000 |
| Available Credit Limit | \$25,380 |
| Cash Advance Limit | \$0 |
| Available Cash Advance Limit | \$0 |

Send Notice of Billing Errors and Customer Service Inquiries to:
CITIBANK, N.A., PO BOX 6125, SIOUX FALLS SD 57117-6125

Company Transactions

| Account: XXXX-XXXX-XXXX-2799 | C0001 CALHOUN COUNTY MMC | Total Activity: -\$3,240.95 | | | |
|------------------------------|--------------------------|-----------------------------|-------------------------|----------------------|-------------|
| Post Date | Trans Date | MCC | Reference Number | Description/Location | Amount |
| 02/27 | 02/27 | 0000 | 75563973058058000001485 | 1 PAYMENT THANK YOU | 3,240.95 PY |

Cardholder Transactions

| Account: XXXX-XXXX-XXXX-9457 | ROSHANDA S THOMAS | Total Activity: \$4,877.42 | | | |
|------------------------------|-------------------|----------------------------|----------------|-----------------------|--------|
| Credit Limit: \$15,000 | Cash I | | | | |
| Post Date | Trans Date | MCC | Reference Num' | Description/Location | Amount |
| 02/06 | 02/04 | 5968 | 554328630351 | n/billWA 98109 USA | 179.00 |
| 02/07 | 02/06 | 9399 | 0513437303 | 37-6732 VA 22033 USA | 2.50 |
| 02/08 | 02/07 | 9399 | 05134373 | 767-6732 VA 22033 USA | 2.50 |

NOTICE: SEE REVERSE SIDE

* credit. Retain upper portion for your records.



CITIBANK
PO BOX
SIOUX FALLS

CITIBANK, N.A.
PO BOX 78025
PHOENIX AZ 85062-8025

Account Number XXXX-XXXX-XXXX-2799
Payment Due Date March 28, 2023
New Balance \$4,619.92
Past Due Amount* \$0.00
Minimum Payment Due \$4,619.92

Mail Checks To

\$

*Past Due Amount is included in the Minimum Payment Due.

C0001 CALHOUN COUNTY MMC
RHONDA KOKENA
STE A
202 S ANN ST
PORT LAVACA TX 77979-4204

28000 0461992 0461992 0324095 05567090005272799 0307

Account: XXXX-XXXX-XXXX-2799

Cardholder Transactions (con't)

| Post Date | Trans Date | MCC | Reference Number | Description/Location | Amount |
|-----------|------------|------|-------------------------|---|--------------------|
| 02/08 | 02/07 | 9399 | 05134373039600032958747 | 4 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91166311 | 22033 USA 2.50 |
| 02/08 | 02/07 | 9399 | 05134373039600032958820 | 5 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91166643 | 22033 USA 2.50 |
| 02/08 | 02/07 | 9399 | 05134373039600032958903 | 6 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91167609 | 22033 USA 40.00 |
| 02/10 | 02/09 | 8699 | 55436873040270409848511 | 7 NATIONAL ASSOCIATION O 866-3061961 MI 2497114 | 49412 USA 575.00 |
| 02/10 | 02/09 | 3504 | 55436873040260402267058 | 8 HILTON ADVPURCH8002367 800-2367113 TN 5550209080 CHECK IN: 02/07/2023 555020908050327 | 38117 USA 390.45 |
| 02/14 | 02/13 | 9399 | 05134373045600035040933 | 9 NPDB NPDB.HRSA.GOV 800-767-6732 VA N91306876 | 22033 USA 2.50 |
| 02/14 | 02/14 | 8999 | 55432863045202251002525 | 10 AMA*CREDENTIALING 800-621-8335 IL | 60611 USA 44.00 |
| 02/21 | 02/20 | 9399 | 55488723052091278004245 | 11 TXDPS CRIME RECS 5124242936 TX | 78752 USA 153.63 |
| 02/22 | 02/22 | 5085 | 55432863053204442052657 | 12 MFG EDGE/PUMPCATALOG.C 732-835-4042 NJ I: | USA 551.69 |
| 02/23 | 02/22 | 3665 | 55436873054150548525738 | 13 HAMPTON INNS PORT LAVACA TX 00923042 CHECK IN: 02/14/2023 00923042 | 77979 USA 1,075.76 |
| 02/24 | 02/19 | 3509 | 55432863054204883897551 | 14 MARRIOTT JW HILL RSRT& 866-435-7627 TX M05525 CHECK IN: 02/19/2023 2334316 | 78261 USA 1,855.39 |

| FINANCE CHARGE SUMMARY | | Your Annual Percentage Rate (APR) is the annual interest rate on your account. | | |
|-------------------------------|-------------------------|--|------------------------------------|--|
| Type of Balance | Annual Percentage Rates | Periodic Rate* | Balance Subject to Finance Charges | |
| PURCHASE AND FEES | 0.00% | 0.0000% (M) | \$0.00 | |
| CASH | 0.00% | 0.0000% (M) | \$0.00 | |

* (D) Daily Rate
(M) Monthly Rate

Wire Transfer

COUNTY OF CALHOUN TEXAS



Wire Details

Transaction Number .
Recurring Frequency One-Time Payment
Template Name CITI CARD PRGM - MMC
Amount USD 4,877.42
Debit Account - DDA (MEMORIAL MEDICAL CENTER - OPERATING) - Prosperity Bank

Notify Initiator Options Pending Actions: Notify via EMAIL
Pending Release: Notify via EMAIL
System Events: Notify via EMAIL
Complete - Unsuccessful: Notify via EMAIL
Complete - Successful: Notify via EMAIL
Early Action Taken: Notify via EMAIL
Early Action Removed: Notify via EMAIL
Expired: Notify via EMAIL
Payment Date 03/22/2023

Originator Information

Originator Name COUNTY OF CALHOUN TEXAS
Originator Address 1 202 S ANN STREET
Originator Address 2 SUITE A
Originator Address 3 PORT LAVACA, TX 77979

Beneficiary / Payee Information

Beneficiary Bank Information

Name
ACCOUNT Beneficiary ID Type
Beneficiary ID
Address 1
Address 2
Address 3
Beneficiary Country
Contact Name
Phone Number

Name
Beneficiary Bank ID Type
Beneficiary Bank ID
Address 1
Address 2
Address 3
Intl Routing Number
Beneficiary Bank Country

Additional Reference Information

Purpose Of Payment CARD PMT

Additional Information For
Beneficiary

Status History

| Timestamp | Status | Initiator | Description |
|------------------------------|---------|-----------|---------------|
| Mar 22, 2023 12:39:33 PM CDT | Created | | Wire Created. |

McKESSON

STATEMENT

As of: 03/17/2023

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory:

Customer: 632536

Date: 03/18/2023

As of: 03/17/2023
Mail to:

Page: 002
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 03/18/2023 ITEMS NOT PAID (✓)

| Billing Date | Due Date | Receivable Number | National Account Order Reference | Description | Cash Discount | Amount (gross) | P F | Amount (net) | P F | Receivable Number |
|--------------|----------|-------------------|----------------------------------|-------------|---------------|----------------|-----|--------------|-----|-------------------|
|--------------|----------|-------------------|----------------------------------|-------------|---------------|----------------|-----|--------------|-----|-------------------|

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 15,586.91 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 03/21/2023,
Pay This Amount:

15,275.17 USD

If Paid After 03/21/2023,
Pay this Amount:

15,586.91 USD

Due If Paid On Time:

USD 15,275.17 ✓

Disc lost if paid late:

311.74

Due If Paid Late:

USD 15,586.91

Andrew DeLeon Santos
3/20/23

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

15,185.84 +
9,78 +
81.51 +
15,275.17 *

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 03/17/2023

Page: 001

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

Company: 8000

DC: 8115

As of: 03/17/2023 Page: 001
Mail to: Comp: 8000

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 256342
Date: 03/18/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 03/18/2023 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 | | | | | | | | | | | |
| 03/13/2023 | 03/21/2023 | 7403829352 | 67225373 | 115Invoice | 30.89 | 1,544.27 | | 1,513.38 | ✓ | 7403829352 | |
| 03/13/2023 | 03/21/2023 | 7403829353 | 67309774 | 115Invoice | 24.93 | 1,246.71 | | 1,221.78 | ✓ | 7403829353 | |
| 03/13/2023 | 03/21/2023 | 7403829354 | 67309774 | 115Invoice | 18.53 | 926.59 | | 908.06 | ✓ | 7403829354 | |
| 03/13/2023 | 03/21/2023 | 7403829355 | 67347734 | 115Invoice | 14.74 | 737.16 | | 722.42 | ✓ | 7403829355 | |
| 03/13/2023 | 03/21/2023 | 7403829356 | 67347734 | 115Invoice | 18.53 | 926.59 | | 908.06 | ✓ | 7403829356 | |
| 03/13/2023 | 03/21/2023 | 7403856703 | 67445590 | 115Invoice | 12.89 | 644.57 | | 631.68 | ✓ | 7403856703 | |
| 03/13/2023 | 03/21/2023 | 7404059307 | 67316037 | 195Invoice | 1.77 | 88.57 | | 86.80 | ✓ | 7404059307 | |
| 03/13/2023 | 03/21/2023 | 7404059308 | 67231780 | 195Invoice | 11.50 | 575.17 | | 563.67 | ✓ | 7404059308 | |
| 03/14/2023 | 03/21/2023 | 7404198796 | 67558584 | 115Invoice | 35.50 | 1,774.99 | | 1,739.49 | ✓ | 7404198796 | |
| 03/14/2023 | 03/21/2023 | 7404406193 | 67494699 | 195Invoice | 0.02 | 0.95 | | 0.93 | ✓ | 7404406193 | |
| 03/15/2023 | 03/21/2023 | 7404491513 | 67648521 | 115Invoice | 15.89 | 794.45 | | 778.56 | ✓ | 7404491513 | |
| 03/15/2023 | 03/21/2023 | 7404491514 | 67648521 | 115Invoice | 12.20 | 609.80 | | 597.60 | ✓ | 7404491514 | |
| 03/15/2023 | 03/21/2023 | 7404690796 | 67661224 | 115Invoice | 1.99 | 99.44 | | 97.45 | ✓ | 7404690796 | |
| 03/16/2023 | 03/21/2023 | 7404768853 | 67788253 | 115Invoice | 15.89 | 794.45 | | 778.56 | ✓ | 7404768853 | |
| 03/16/2023 | 03/21/2023 | 7404768855 | 67788253 | 115Invoice | 0.01 | 0.32 | | 0.31 | ✓ | 7404768855 | |
| 03/16/2023 | 03/21/2023 | 7404776330 | 67874656 | 115Invoice | 49.80 | 2,489.94 | | 2,440.14 | ✓ | 7404776330 | |
| 03/16/2023 | 03/21/2023 | 7404972429 | 67785470 | 195Invoice | 6.56 | 327.89 | | 321.33 | ✓ | 7404972429 | |
| 03/17/2023 | 03/21/2023 | 7405054162 | 67909978 | 115Invoice | 31.78 | 1,588.90 | | 1,557.12 | ✓ | 7405054162 | |
| 03/17/2023 | 03/21/2023 | 7405054163 | 67909978 | 115Invoice | 4.43 | 221.62 | | 217.19 | ✓ | 7405054163 | |
| 03/17/2023 | 03/21/2023 | 7405054164 | 67977922 | 115Invoice | 1.95 | 97.58 | | 95.63 | ✓ | 7405054164 | |
| 03/17/2023 | 03/21/2023 | 7405244286 | 67921916 | 115Invoice | 0.08 | 3.80 | | 3.72 | ✓ | 7405244286 | |

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

MCKESSON

STATEMENT

As of: 03/17/2023

Page: 001

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

Company: 8000

DC: 8115

As of: 03/17/2023
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: 03/18/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 03/18/2023 ITEMS NOT PAID (✓)

PF column legend: P = Past Due Item, F = Future Due Item, National Account 832536 blank = Current Due Item

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 15,493.76 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 9,954.09
03/13/2023

If Paid By 03/21/2023,
Pay This Amount: 15,183.88 USD

If Paid After 03/21/2023,
Pay this Amount: 15,493.76 USD

Due If Paid On Time:
USD 15,183.88 ✓
Disc lost if paid late: 309.88 ✓
Due If Paid Late:
USD 15,493.76

h.d.
3/20/23

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 03/17/2023

Page: 001

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

Company: 8000

DC: 8115

As of: 03/17/2023 Page: 001
Mail to: Comp: 8000

CVS PHCY 8923/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 835434
Date: 03/18/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835434 PLEASE CHECK ANY
Date: 03/18/2023 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 | |
|--------------|------------|-------------------|--------------------------|-----------------|-------------|---------------|----------------|-----|--------------|-----|-------------------|--|
| 03/15/2023 | 03/21/2023 | 7404489608 | CVS PHCY 8923/MEM MC PHS | 2227403 | 115 Invoice | 0.20 | 9.98 | | 9.78 | ✓ | 7404489608 | |

PF 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: 9.98 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 03/13/2023 9,954.09

If Paid By 03/21/2023,
Pay This Amount: 9.78 USD

If Paid After 03/21/2023,
Pay this Amount: 9.98 USD

Due If Paid On Time: 9.78 USD ✓
Disc lost if paid late: 0.20 ✓
Due If Paid Late: 9.98 USD

A.D.
3/20/23

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 03/17/2023

Page: 001

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

Company: 8000

DC: 8115

As of: 03/17/2023
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: 03/18/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438
Date: 03/18/2023

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 | |
|--------------|------------|-------------------|----------------------------------|-------------|---------------|----------------|-----|--------------|-----|-------------------|--|
| 03/15/2023 | 03/21/2023 | 7404669949 | 632536 2227404 | 115Invoice | 1.66 | 83.17 | | 81.51 | ✓ | 7404669949 | |

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: 83.17 USD

Future Due: 0.00

If Paid By 03/21/2023,
Pay This Amount:

81.51 USD

Due If Paid On Time:

USD 81.51 ✓

Past Due: 0.00

Disc lost if paid late:

1.66

Last Payment 03/06/2023 18,668.75

If Paid After 03/21/2023,
Pay this Amount:

83.17 USD

Due If Paid Late:

USD 83.17

A.D.
3/20/23

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

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

 DEA: RA0289276
 866-451-9655

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

Remit To:
 AMERISOURCEBERGEN
 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: | 520.92 |
| Past Due: | 0.00 |
| Total Due: | 520.92 |
| Account Balance: | 520.92 |

Account Activity

| Document Date | Due Date | Reference Number | Purchase Order Number | Document Type | Original Amount | Last Receipt | Amount Received | Balance |
|---------------|------------|------------------|-----------------------|---------------|-----------------|--------------|-----------------|---------|
| 03-13-2023 | 03-24-2023 | 3126273252 | 169982 | Invoice | 207.87 | | 0.00 | 207.87 |
| 03-13-2023 | 03-24-2023 | 3126273253 | 169983 | Invoice | 0.31 | | 0.00 | 0.31 |
| 03-13-2023 | 03-24-2023 | 3126376908 | 169984 | Invoice | 46.66 | | 0.00 | 46.66 |
| 03-13-2023 | 03-24-2023 | 3126417321 | 170032 | Invoice | 33.34 | | 0.00 | 33.34 |
| 03-13-2023 | 03-24-2023 | 3126417322 | 170033 | Invoice | 57.31 | | 0.00 | 57.31 |
| 03-14-2023 | 03-24-2023 | 3126551749 | 170042 | Invoice | 13.28 | | 0.00 | 13.28 |
| 03-14-2023 | 03-24-2023 | 3126552360 | 170043 | Invoice | 114.62 | | 0.00 | 114.62 |
| 03-15-2023 | 03-24-2023 | 3126709065 | 170050 | Invoice | 41.71 | | 0.00 | 41.71 |
| 03-16-2023 | 03-24-2023 | 3126851730 | 170062 | 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 |
|---------|-----------|------------|------------|------------|-------------|---------------|
| 520.92 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

Thank You for Your Payment

| Date | Amount |
|------------|------------|
| 03-17-2023 | (3,676.73) |

Reminders

| Due Date | Amount |
|-------------------|---------------|
| 03-24-2023 | 520.92 |
| Total Due: | 520.92 |

APPROVED ON

MAR 20 2023

 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Andrew DePoz Santos
 3/20/23

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT — March 13, 2023 - March 19, 2023**

| <u>Date</u> | <u>Bank Description</u> | <u>MMC Notes</u> |
|-------------|--|------------------------------|
| 3/13/2023 | PAY PLUS ACHTRANS 452579291 101000699756491 | - 3rd Party Payor Fee |
| 3/14/2023 | PAY PLUS ACHTRANS 452579291 101000691001803 | - 3rd Party Payor Fee |
| 3/14/2023 | MCKESSON DRUG AUTO ACH ACH05412042 910000131 | - 340B Drug Program Expense |
| 3/15/2023 | PAY PLUS ACHTRANS 452579291 101000692050054 | - 3rd Party Payor Fee |
| 3/15/2023 | TEXAS COUNTY DRS RECEIVABLE 0419 21000020764 | - Retirement Funding |
| 3/15/2023 | FDMS FDMS PYMT 052-1743547-000 4100012752362 | - Credit Card Processing Fee |
| 3/15/2023 | FDMS FDMS PYMT 052-1737276-000 4100012751592 | - Credit Card Processing Fee |
| 3/15/2023 | FDMS FDMS PYMT 052-1743548-000 4100012754359 | - Credit Card Processing Fee |
| 3/16/2023 | PAY PLUS ACHTRANS 452579291 101000692969168 | - 3rd Party Payor Fee |
| 3/17/2023 | PAY PLUS ACHTRANS 452579291 101000693839446 | - 3rd Party Payor Fee |
| 3/17/2023 | EXPERTPAY EXPERTPAY 746003411 91000014444276 | - Child Support Payment |
| 3/17/2023 | AMERISOURCE BERG PAYMENTS 0100007768 2100002 | - 340B Drug Program Expense |
| 3/17/2023 | MEMORIAL MEDICAL PAYROLL 746003411 113122650 | - Payroll |

| <u>Amount</u> | <u>CPS</u> |
|-------------------|------------|
| | 0.74 + |
| | 47.23 + |
| | 30.85 + |
| | 37.92 + |
| 9,954.09* | 7.92 + |
| 30.85 | |
| 185,387.13** | 124.66 * |
| 40.03 | |
| 120.09 | CC fees |
| 80.06 | 40.03 + |
| 37.92 | 120.09 + |
| 7.92 | 80.06 * |
| 607.27 | 240.18 * |
| 3,676.73* | |
| 362,159.16* | Expert Pay |
| <u>562,149.22</u> | 607.27 + |
| | 607.27 * |

Andrew De Los Santos

ANDREW DE LOS SANTOS
Memorial Medical Center

March 20, 2023

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

* Approved 03-15-23 CC
** Approved 03-08-23 CC

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

| | |
|--|--------------|
| | 124.66 + |
| | 240.18 + |
| | 607.27 + |
| | 972.11 * |
| | 562,149.22 + |
| | 9,954.09 - |
| | 185,387.13 - |
| | 3,676.73 - |
| | 362,159.16 - |
| | 972.11 * |
| | 972.11 + |
| | 972.11 - |
| | 0.00 * |

Andrew De Los Santos

ANDREW DE LOS SANTOS
Memorial Medical Center

March 20, 2023

APPROVED ON

MAR 20 2023

**BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RECEIVED BY THE
COUNTY AUDITOR ON

MAR 16 2023

03/16/2023

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Class Pay Code

Vendor# Vendor Name

11824 THE CRESCENT

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|----------------|--------------|----------|----------|----------|---------|-----------|----------|--------|------------|
| 031023 | | 03/16/20 | 03/10/20 | 04/10/20 | | 2,723.00 | 0.00 | 0.00 | 2,723.00 ✓ |
| 031023A | TRANSFER | 03/16/20 | 03/10/20 | 04/10/20 | | 2,280.00 | 0.00 | 0.00 | 2,280.00 ✓ |
| | TRANSFER | | | | | | | | |
| Vendor Totals: | | | | | | | | | |
| Number | Name | | | | | Gross | Discount | No-Pay | Net |
| 11824 | THE CRESCENT | | | | | 5,003.00 | 0.00 | 0.00 | 5,003.00 |

NH insurance pymt deposited into mme operating

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---------------|----------|----------|--------|----------|
| | 5,003.00 | 0.00 | 0.00 | 5,003.00 |

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#198606

RECEIVED BY THE
COUNTY AUDITOR ON

MAR 16 2023

03/16/2023

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 |
|---------------|------------------------|----------|----------|----------|---------|-----------|----------|--------|-------------|
| 030923 | | 03/16/20 | 03/09/20 | 04/09/20 | | 6,296.45 | 0.00 | 0.00 | 6,296.45 ✓ |
| 031023 | TRANSFER | 03/16/20 | 03/10/20 | 04/10/20 | | 50,465.35 | 0.00 | 0.00 | 50,465.35 ✓ |
| | TRANSFER " | | | | | | | | |
| Vendor Totals | | | | | | Gross | Discount | No-Pay | Net |
| 11836 | GOLDENCREEK HEALTHCARE | | | | | 56,761.80 | 0.00 | 0.00 | 56,761.80 |

NH insurance pymt deposited into mmc operating

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---------------|-----------|----------|--------|-----------|
| | 56,761.80 | 0.00 | 0.00 | 56,761.80 |

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#19804

RECEIVED BY THE
COUNTY AUDITOR ON

MAR 16 2023

03/16/2023

CALHOUN COUNTY, TEXAS

14:49

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

12696 GULF POINTE PLAZA

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net |
|----------|---------|----------|----------|----------|---------|-----------|----------|--------|---------|
| 030923 | | 03/16/20 | 03/09/20 | 04/09/20 | | 46.30 | 0.00 | 0.00 | 46.30 ✓ |

TRANSFER *NH insurance pymt deposited into WME operating*

| Vendor Totals | Number | Name | Gross | Discount | No-Pay | Net |
|---------------|--------|-------------------|-------|----------|--------|-------|
| | 12696 | GULF POINTE PLAZA | 46.30 | 0.00 | 0.00 | 46.30 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---------------|-------|----------|--------|-------|
| | 46.30 | 0.00 | 0.00 | 46.30 |

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#148005

RECEIVED BY THE
COUNTY AUDITOR ON

03/16/2023
MAR 16 2023
14:46

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0
ap_open_invoice.template

Dates Through:

CALHOUN COUNTY, TEXAS

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 | | |
|---------------|----------|--|----------|----------|---------|-----------|-----------------|-----------|------------|--------|-----------|
| 030923 | | 03/16/20 | 03/09/20 | 04/09/20 | | 6,650.00 | 0.00 | 0.00 | 6,650.00 ✓ | | |
| 030923A | TRANSFER | NH insurance pymt deposited into MME opening | | | | | | | | | |
| 030923A | | 03/16/20 | 03/09/20 | 04/09/20 | | 2,305.50 | 0.00 | 0.00 | 2,305.50 ✓ | | |
| 031023 | TRANSFER | " | | | | | | | | | |
| 031023 | | 03/16/20 | 03/10/20 | 04/10/20 | | 6,500.00 | 0.00 | 0.00 | 6,500.00 ✓ | | |
| 031023 | TRANSFER | " | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 13004 | TUSCANY VILLAGE | 15,455.50 | 0.00 | 0.00 | 15,455.50 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---------------|-----------|----------|--------|-----------|
| | 15,455.50 | 0.00 | 0.00 | 15,455.50 |

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 198607

RECEIVED BY THE
COUNTY AUDITOR ON

03/16/2023
MAR 16 2023
14:43

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

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

12792 BETHANY SENIOR LIVING

| Invoice# | Comment | Tran Dt | Inv Dt | Due Dt | Check D | Pay Gross | Discount | No-Pay | Net | | |
|---------------|----------|--|----------|----------|---------|-----------|-----------------------|-----------|-------------|--------|-----------|
| 030923 | | 03/16/20 | 03/09/20 | 04/09/20 | | 20,590.08 | 0.00 | 0.00 | 20,590.08 ✓ | | |
| | TRANSFER | <i>Nft insurance point deposited into mme acct</i> | | | | | | | | | |
| 031023A | | 03/16/20 | 03/10/20 | 04/10/20 | | 2,247.72 | 0.00 | 0.00 | 2,247.72 ✓ | | |
| | TRANSFER | " | | | | | | | | | |
| 031023 | | 03/16/20 | 03/10/20 | 04/10/20 | | 26,142.38 | 0.00 | 0.00 | 26,142.38 ✓ | | |
| | TRANSFER | " | | | | | | | | | |
| Vendor Totals | | | | | | Number | Name | Gross | Discount | No-Pay | Net |
| | | | | | | 12792 | BETHANY SENIOR LIVING | 48,980.18 | 0.00 | 0.00 | 48,980.18 |

Report Summary

| Grand Totals: | Gross | Discount | No-Pay | Net |
|---------------|-----------|----------|--------|-----------|
| | 48,980.18 | 0.00 | 0.00 | 48,980.18 |

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK # 198603

8

RUN DATE:03/21/23
 TIME:11:46

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 03/22/23 THRU 03/22/23

PAGE 1
 GLCKREG

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

| CODE | NUMBER | DATE | AMOUNT | PAYEE |
|------|--------|----------|-----------|--------------------------------|
| A/P | 198514 | 03/22/23 | 143.00 | 2022 MIDCOAST HURRICANE AND |
| A/P | 198515 | 03/22/23 | 199.00 | 3WON, LLC |
| A/P | 198516 | 03/22/23 | 701.84 | ABILITY NETWORK (SHIFTHOUND) |
| A/P | 198517 | 03/22/23 | 272.63 | ACE HARDWARE 15521 |
| A/P | 198518 | 03/22/23 | 7,265.99 | AIRGAS USA, LLC - CENTRAL DIV |
| A/P | 198519 | 03/22/23 | 161.40 | ALIMED INC. |
| A/P | 198520 | 03/22/23 | 872.49 | AMAZON CAPITAL SERVICES |
| A/P | 198521 | 03/22/23 | 87.00 | AMBU INC |
| A/P | 198522 | 03/22/23 | 15.00 | ANNOUNCEMENTS PLUS TOO AGAIN |
| A/P | 198523 | 03/22/23 | 111.92 | AQUA BEVERAGE COMPANY |
| A/P | 198524 | 03/22/23 | 6,653.40 | ASTELLAS PHARMA US, INC. |
| A/P | 198525 | 03/22/23 | 5.69 | AUTO PARTS & MACHINE CO. |
| A/P | 198526 | 03/22/23 | 594.00 | AZALEA HEALTH |
| A/P | 198527 | 03/22/23 | 29,017.58 | BECKMAN COULTER INC |
| A/P | 198528 | 03/22/23 | 199.00 | BEEKLEY CORPORATION |
| A/P | 198529 | 03/22/23 | 1,077.19 | BIO-RAD LABORATORIES, INC |
| A/P | 198530 | 03/22/23 | 47,723.36 | BRISTOL MYERS SQUIBB COMPANY |
| A/P | 198531 | 03/22/23 | 3,080.00 | CALHOUN COUNTY EMS |
| A/P | 198532 | 03/22/23 | 602.81 | CDW GOVERNMENT, INC. |
| A/P | 198533 | 03/22/23 | 1,699.00 | CERVEY, LLC |
| A/P | 198534 | 03/22/23 | 61,297.72 | CITIZENS MEDICAL CENTER |
| A/P | 198535 | 03/22/23 | 2,095.10 | COOPER SURGICAL INC |
| A/P | 198536 | 03/22/23 | 1,882.10 | CORROHEALTH, INC. |
| A/P | 198537 | 03/22/23 | 1,500.00 | COURTNE THURLKILL |
| A/P | 198538 | 03/22/23 | 213.50 | COVIDIEN |
| A/P | 198539 | 03/22/23 | 29,933.58 | CULINARY CONCESSIONS LLC |
| A/P | 198540 | 03/22/23 | 655.59 | DE TAR HOSPITAL |
| A/P | 198541 | 03/22/23 | 202.27 | DEWITT POTH & SON |
| A/P | 198542 | 03/22/23 | 13,803.11 | E-MDS, INC |
| A/P | 198543 | 03/22/23 | 261.20 | ELITECH GROUP INC (WESCOR) |
| A/P | 198544 | 03/22/23 | 40,062.50 | EMERGENCY STAFFING SOLUTIONS |
| A/P | 198545 | 03/22/23 | 2,523.10 | EPI-EDWARD PLUMBING |
| A/P | 198546 | 03/22/23 | 32.97 | EQUIFAX WORKFORCE SOLUTIONS |
| A/P | 198547 | 03/22/23 | 17,515.00 | EVIDENT |
| A/P | 198548 | 03/22/23 | 545.00 | FASTHEALTH CORPORATION |
| A/P | 198549 | 03/22/23 | 947.10 | FIRESTONE OF PORT LAVACA |
| A/P | 198550 | 03/22/23 | 3,946.00 | FIRETRON, INC |
| A/P | 198551 | 03/22/23 | 6,769.78 | FIRST INSURANCE FUNDING |
| A/P | 198552 | 03/22/23 | .00 | VOIDED |
| A/P | 198553 | 03/22/23 | 5,525.48 | FISHER HEALTHCARE |
| A/P | 198554 | 03/22/23 | 413.96 | G & S MANAGEMENT GROUP LLC |
| A/P | 198555 | 03/22/23 | 11,671.42 | GBS ADMINISTRATORS, INC |
| A/P | 198556 | 03/22/23 | 12,758.67 | GE PRECISION HEALTHCARE, LLC |
| A/P | 198557 | 03/22/23 | 540.22 | GRACE FLOORING AND GLASS |
| A/P | 198558 | 03/22/23 | 10,344.86 | GREAT AMERICA FINANCIAL SVCS |
| A/P | 198559 | 03/22/23 | 175.00 | GUERBET, LLC |
| A/P | 198560 | 03/22/23 | 831.89 | GULF COAST PAPER COMPANY |
| A/P | 198561 | 03/22/23 | 247.50 | HEALTHCARE CODING & CONSULTING |
| A/P | 198562 | 03/22/23 | 6,407.96 | HEALTHCARE FINANCIAL SERVICES |
| A/P | 198563 | 03/22/23 | 311.20 | HENRY SCHEIN INC. |

RUN DATE:03/21/23
TIME:11:46

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/22/23 THRU 03/22/23

PAGE 2
GLCKREG

BANK--CHECK-----

| CODE | NUMBER | DATE | AMOUNT | PAYEE |
|---------|--------|----------|------------|---------------------------------|
| A/P | 198564 | 03/22/23 | 65.00 | HOLT CAT |
| A/P | 198565 | 03/22/23 | 14,396.04 | HUNTER PHARMACY SERVICES |
| A/P | 198566 | 03/22/23 | 9,000.00 | JINDAL X LLC |
| A/P | 198567 | 03/22/23 | 16.10 | LABCORP OF AMERICA HOLDINGS |
| A/P | 198568 | 03/22/23 | 65.00 | LISA AMASON |
| A/P | 198569 | 03/22/23 | 640.86 | M G TRUST |
| A/P | 198570 | 03/22/23 | 659.50 | MARTIN PRINTING CO |
| A/P | 198571 | 03/22/23 | .00 | VOIDED |
| A/P | 198572 | 03/22/23 | .00 | VOIDED |
| A/P | 198573 | 03/22/23 | .00 | VOIDED |
| A/P | 198574 | 03/22/23 | 13,918.27 | MEDLINE INDUSTRIES INC |
| A/P | 198575 | 03/22/23 | 316.00 | MEMORIAL MEDICAL CLINIC |
| A/P | 198576 | 03/22/23 | .00 | VOIDED |
| A/P | 198577 | 03/22/23 | 13,198.17 | MORRIS & DICKSON CO, LLC |
| A/P | 198578 | 03/22/23 | 313.47 | MXR IMAGING, INC |
| A/P | 198579 | 03/22/23 | 23.72 | PARTSSOURCE, LLC |
| A/P | 198580 | 03/22/23 | 840.00 | PL-CPR, LLC |
| A/P | 198581 | 03/22/23 | 4,353.26 | PRO ENERGY PARTNERS LLC |
| A/P | 198582 | 03/22/23 | 6,148.00 | REED, CLAYMON, MEEKER & HARGET |
| A/P | 198583 | 03/22/23 | 171.92 | STERIS CORPORATION |
| A/P | 198584 | 03/22/23 | 9.26 | TELEFLEX MEDICAL |
| A/P | 198585 | 03/22/23 | 4,533.00 | TEXAS MUTUAL INSURANCE CO |
| A/P | 198586 | 03/22/23 | 17,835.00 | TORCH |
| A/P | 198587 | 03/22/23 | 305.68 | TRI-ANIM HEALTH SERVICES INC |
| A/P | 198588 | 03/22/23 | 22,132.70 | TRIAGE, LLC |
| A/P | 198589 | 03/22/23 | 2.74 | TRIOSE, INC |
| A/P | 198590 | 03/22/23 | 1,175.80 | TRIZETTO PROVIDER SOLUTIONS |
| A/P | 198591 | 03/22/23 | 5,257.44 | UNIFIRST HOLDINGS INC |
| A/P | 198592 | 03/22/23 | 234.00 | WALLER, LANSDEN, DORTCH & DAVIS |
| A/P | 198593 | 03/22/23 | 1,827.79 | WERFEN USA LLC |
| A/P | 198594 | 03/22/23 | 316.00 | WEST COAST MEDICAL RESOURCES |
| A/P | 198595 | 03/22/23 | 5,500.00 | WOUND CARE SPECIALISTS |
| A/P | 198596 | 03/22/23 | 108.20 | |
| A/P | 198597 | 03/22/23 | 556.72 | |
| A/P | 198598 | 03/22/23 | 124.15 | |
| A/P | 198599 | 03/22/23 | 45.60 | |
| A/P | 198600 | 03/22/23 | 143.71 | |
| A/P | 198601 | 03/22/23 | 250.00 | |
| A/P | 198602 | 03/22/23 | 54.26 | ROL |
| A/P | 198603 | 03/22/23 | 48,980.18 | BETHANY SENIOR LIVING |
| A/P | 198604 | 03/22/23 | 56,761.80 | GOLDENCREEK HEALTHCARE |
| A/P | 198605 | 03/22/23 | 46.30 | GULF POINTE PLAZA |
| A/P | 198606 | 03/22/23 | 5,003.00 | THE CRESCENT |
| A/P | 198607 | 03/22/23 | 15,455.50 | TUSCANY VILLAGE |
| TOTALS: | | | 584,680.22 | |

APPROVED ON
MAR 22 2023
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST - *Crescent*

P TUSCANY ✓
A _____
Y _____
E _____
E _____

Date Requested: 3/20/23

APPROVED ON
MAR 20 2023
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

| 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 \$6,004.00 ✓

G/L NUMBER: _____

EXPLANATION: DEVOTED PYMT THAT BELONGS TO TUSCANY BUT WAS DEPOSITED INTO CRESCENT'S ACCOUNT

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: *Andrew DePal Santos*

3/20/23

RUN DATE:03/29/23
TIME:13:26

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/22/23 THRU 03/22/23

PAGE 3
GLCKREG

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

NHC 000275 03/22/23 6,004.00 TUSCANY
TOTALS: 6,004.00

APPROVED ON

MAR 22 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000275

88-2265/1131

Date 3/22/23

PAY
TO THE
ORDER OF

Tuscany

\$ 6,004.00

Six thousand Four Dollars

DOLLARS



PROSPERITY
BANK

county auditor

FOR Devoted payment

county treasurer
MP
Security features and
included. Details on back.

Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 3/20/2023

| Account | Previous Beginning Balance | Transfer-Out | ACH Transfer-In | Pending Deposits | Today's Beginning Balance | Amount to Be Transferred to Nursing Home |
|----------------------------|----------------------------|--------------|-----------------|------------------|---------------------------------|--|
| Ashford Gardens | 134,734.32 | 134,651.56 | 39,146.07 | | 39,228.83 | 39,071.76 |
| | | | | | Bank Balance | 39,228.83 |
| | | | | | Variance | - |
| | | | | | Leave in Balance | 100.00 |
| | | | | | January Interest | 32.60 |
| | | | | | February Interest | 24.47 |
| | | | | | March Interest | |
| | | | | | Adjust Balance/Transfer Amt | 39,071.76 |
| Broadmoor | 84,328.98 | 84,163.94 | 71,202.16 | | 71,367.20 | 71,202.16 |
| | | | | | Bank Balance | 71,367.20 |
| | | | | | Variance | - |
| | | | | | Leave in Balance | 100.00 |
| | | | | | January Interest | 37.70 |
| | | | | | February Interest | 27.34 |
| | | | | | March Interest | |
| | | | | | Adjust Balance/Transfer Amt | 71,202.16 |
| Crescent | 69,550.46 | 69,392.89 | 152,991.01 | | 153,148.58 | 146,987.01 |
| | | | | | Bank Balance | 153,148.58 |
| | | | | | Variance | - |
| | | | | | Leave in Balance | 100.00 |
| | | | | | DEVOTED PYMT BELONGS TO TUSCANY | 6,004.00 |
| | | | | | January Interest | 30.64 |
| | | | | | February Interest | 26.93 |
| | | | | | March Interest | |
| | | | | | Adjust Balance/Transfer Amt | 146,987.01 |
| Fort Bend | 44,801.91 | 44,674.74 | 7,003.40 | | 7,130.57 | 7,003.40 |
| | | | | | Bank Balance | 7,130.57 |
| | | | | | Variance | - |
| | | | | | Leave in Balance | 100.00 |
| | | | | | January Interest | 16.24 |
| | | | | | February Interest | 10.93 |
| | | | | | March Interest | |
| | | | | | Adjust Balance/Transfer Amt | 7,003.40 |
| Solera at W Houston | 160,881.52 | 160,685.05 | 68,422.08 | | 68,618.55 | 68,422.08 |
| | | | | | Bank Balance | 68,618.55 |
| | | | | | Variance | - |
| | | | | | Leave in Balance | 100.00 |
| | | | | | January Interest | 55.39 |
| | | | | | February Interest | 41.08 |
| | | | | | March Interest | |
| | | | | | Adjust Balance/Transfer Amt | 68,422.08 |

39,071.76 +
 71,202.16 +
 146,987.01 + Bend / Broadmoor
 7,003.40 +
 68,422.08 +
332,686.41

APPROVED ON
 MAR 20 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

TOTAL TRANSFERS 332,686.41

Approved: *Andrew De Los Santos*
 ANDREW DE LOS SANTOS

3/20/2023

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

Solera at West Houston ✓

MMC PORTION

| | Transfer-Out | Transfer-In | QIPP/Comp1 | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4&Lapse | QIPP TI | NH PORTION |
|--|---------------------|--------------------|------------|-------------|------------|------------------|---------|--------------------|
| 3/13/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 | - | 1,874.82 | - | - | - | - | - | 1,874.82 |
| 3/13/2023 HUMANA INS CO HCCLAIMPMT 15062744 8300005779 | - | 5,447.97 | - | - | - | - | - | 5,447.97 |
| 3/13/2023 HUMANA CHA DISB HCCLAIMPMT 15106931 42000018 | - | 640.00 | - | - | - | - | - | 640.00 |
| 3/14/2023 HUMANA INS CO HCCLAIMPMT 15192480 8300005503 | - | 2,765.00 | - | - | - | - | - | 2,765.00 |
| 3/14/2023 HNB - ECHO HCCLAIMPMT 746003411 440000260633 | - | 2,646.27 | - | - | - | - | - | 2,646.27 |
| 3/14/2023 HUMANA CHA DISB HCCLAIMPMT 15332586 42000011 | - | 1,860.00 | - | - | - | - | - | 1,860.00 |
| 3/14/2023 HUMANA CHA DISB HCCLAIMPMT 15332585 42000011 | - | 790.00 | - | - | - | - | - | 790.00 |
| 3/14/2023 AARP Supplementa HCCLAIMPMT 746003411 124384 | - | 12,000.00 | - | - | - | - | - | 12,000.00 |
| 3/15/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384 | - | 2,300.00 | - | - | - | - | - | 2,300.00 |
| 3/15/2023 HNB - ECHO HCCLAIMPMT 746003411 440000201608 | - | 1,169.84 | - | - | - | - | - | 1,169.84 |
| 3/15/2023 HNB - ECHO HCCLAIMPMT 746003411 440000201608 | - | 9,009.98 | - | - | - | - | - | 9,009.98 |
| 3/15/2023 Amerigroup TXSC HCCLAIMPMT 3205042257 111000 | - | 111.36 | - | - | - | - | - | 111.36 |
| 3/15/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384 | - | 7,650.00 | - | - | - | - | - | 7,650.00 |
| 3/15/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 | - | 21.18 | - | - | - | - | - | 21.18 |
| 3/16/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384 | - | 13,950.00 | - | - | - | - | - | 13,950.00 |
| 3/17/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III | 160,685.05 ✓ | - | - | - | - | - | - | - |
| 3/17/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 | - | 1,451.01 | - | - | - | - | - | 1,451.01 |
| 3/17/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 | - | 0.36 | - | - | - | - | - | 0.36 |
| 3/17/2023 HUMANA CHA DISB HCCLAIMPMT 15589834 42000016 | - | 194.14 | - | - | - | - | - | 194.14 |
| 3/17/2023 CIGNA HCCLAIMPMT 1497143259 91000012568523 | - | 4,540.15 | - | - | - | - | - | 4,540.15 |
| | 160,685.05 ✓ | 68,422.08 ✓ | - | - | - | - | - | 68,422.08 ✓ |
| TOTALS | 493,568.18 | 338,764.72 | - | - | - | - | - | 338,764.72 |

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balance |
|---|-----------------------|-----------------------|-----------------------|----------------------|
| Number of Accounts: 16 | \$8,180,505.20 | \$8,559,005.43 | \$8,180,505.20 | \$8,526,122.4 |
| *4551 CAL CO INDIGENT HEALTHCARE | \$5,499.54 | \$5,499.54 | \$5,499.54 | \$5,499.5 |
| *4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE | \$11,898.74 | \$14,318.06 | \$11,898.74 | \$67,047.7 |
| *4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 | \$537.22 | \$537.22 | \$537.22 | \$537.2 |
| *4357 MEMORIAL MEDICAL CENTER - OPERATING | \$5,638,199.58 | \$5,900,172.20 | \$5,638,199.58 | \$5,301,709.5 |
| *4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING | \$432.49 | \$432.49 | \$432.49 | \$432.4 |
| *4381 MEMORIAL MEDICAL CENTER / NH ASHFORD ✓ | \$39,228.83 ✓ | \$39,644.19 | \$39,228.83 | \$172,629.4 |
| *4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR ✓ | \$71,367.20 ✓ | \$79,916.41 | \$71,367.20 | \$138,723.1 |
| *4411 MEMORIAL MEDICAL CENTER / NH CRESCENT ✓ | \$153,148.58 ✓ | \$187,637.49 | \$153,148.58 | \$177,423.3 |
| *4446 MEMORIAL MEDICAL CENTER / NH FORT BEND ✓ | \$7,130.57 ✓ | \$7,418.57 | \$7,130.57 | \$48,608.9 |
| *4438 MEMORIAL MEDICAL CENTER / SOLERA AT ✓ WEST HOUSTON | \$68,618.55 ✓ | \$78,129.44 | \$68,618.55 | \$223,117.9 |
| *3660 MMC -BETHANY SR LIVING - DACA | \$100.00 | \$100.00 | \$100.00 | \$100.0 |
| *2998 MMC -MONEY MARKET FUND | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.5 |
| *5506 MMC -NH BETHANY SENIOR LIVING | \$59,020.57 | \$69,701.57 | \$59,020.57 | \$114,345.5 |
| *5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID | \$4,193.65 | \$13,314.04 | \$4,193.65 | \$71,637.9 |
| *5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY | \$17,830.46 | \$36,448.38 | \$17,830.46 | \$39,178.5 |
| *3407 MMC -NH TUSCANY VILLAGE | \$51,927.68 | \$74,364.29 | \$51,927.68 | \$113,759.1 |

* indicate:
Page generated on 03/20/2023

Memorial Medical Center ✓
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 3/20/2023

| 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 ✓ | | 57,828.70 ✓ | 57,692.97 ✓ | 11,763.01 ✓ | | 11,898.74 ✓ | 11,763.01 ✓ |
| | | | | | | Bank Balance Variance | |
| | | | | | | | |
| | | | | | | Leave in Balance | 100.00 |
| | | | | | | January Interest | 19.43 ✓ |
| | | | | | | February Interest | 16.30 ✓ |
| | | | | | | March Interest | 35.73 ✓ |
| | | | | | | Adjust Balance/Transfer Amt | 11,763.01 ✓ |

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: Andrew De Los Santos
 ANDREW DE LOS SANTOS 3/20/2023

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|--|-----------------------|-----------------------|-----------------------|----------------------|
| Number of Accounts: 16 | \$8,180,505.20 | \$8,559,005.43 | \$8,180,505.20 | \$8,526,122.4 |
| *4551 CAL CO INDIGENT HEALTHCARE | \$5,499.54 | \$5,499.54 | \$5,499.54 | \$5,499.5 |
| *4454 MEMORIAL MEDICAL / NH GOLDEN CREEK ✓ HEALTHCARE | \$11,898.74 ✓ / | \$14,318.06 | \$11,898.74 | \$67,047.7 |
| *4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 | \$537.22 | \$537.22 | \$537.22 | \$537.2 |
| *4357 MEMORIAL MEDICAL CENTER - OPERATING | \$5,638,199.58 | \$5,900,172.20 | \$5,638,199.58 | \$5,301,709.9 |
| *4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING | \$432.49 | \$432.49 | \$432.49 | \$432.4 |
| *4381 MEMORIAL MEDICAL CENTER / NH ASHFORD | \$39,228.83 | \$39,644.19 | \$39,228.83 | \$172,629.4 |
| *4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR | \$71,367.20 | \$79,916.41 | \$71,367.20 | \$138,723.1 |
| *4411 MEMORIAL MEDICAL CENTER / NH CRESCENT | \$153,148.58 | \$187,637.49 | \$153,148.58 | \$177,423.3 |
| *4446 MEMORIAL MEDICAL CENTER / NH FORT BEND | \$7,130.57 | \$7,418.57 | \$7,130.57 | \$48,608.9 |
| *4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON | \$68,618.55 | \$78,129.44 | \$68,618.55 | \$223,117.9 |
| *3660 MMC -BETHANY SR LIVING - DACA | \$100.00 | \$100.00 | \$100.00 | \$100.0 |
| *2998 MMC -MONEY MARKET FUND | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.5 |
| *5506 MMC -NH BETHANY SENIOR LIVING | \$59,020.57 | \$69,701.57 | \$59,020.57 | \$114,345.5 |
| *5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID | \$4,193.65 | \$13,314.04 | \$4,193.65 | \$71,637.9 |
| *5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY | \$17,830.46 | \$36,448.38 | \$17,830.46 | \$39,178.5 |
| *3407 MMC -NH TUSCANY VILLAGE | \$51,927.68 | \$74,364.29 | \$51,927.68 | \$113,759.1 |

* indicate:
Page generated on 03/20/2023

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 3/20/2023

| 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 | | 22,902.76 | 22,794.34 | 17,722.04 | | | 17,830.46 | 27,722.04 |
| | | | | | | Bank Balance | 17,830.46 | |
| | | | | | | Variance | | |
| | | | | | | Leave in Balance | 100.00 | |

January Interest 4.59
 February Interest 3.83
 March Interest
 Adjust Balance/Transfer Amt 17,722.04

| 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 | | 67,579.10 | 67,444.30 | 4,058.85 | | | 4,193.65 | |
| | | | | | | Bank Balance | 4,193.65 | |
| | | | | | | Variance | | |
| | | | | | | Leave in Balance | 100.00 | |

January Interest 17.36
 February Interest 17.44
 March Interest
 Adjust Balance/Transfer Amt 4,058.85

Routing Information for Gulf Pointe Plaza

TOTAL TRANSFERS 21,780.89

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: Andrew De Los Santos
 ANDREW DE LOS SANTOS 3/20/2023

APPROVED ON
 MAR 20 2023
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay ✓

3/13/2023 HNB - ECHO HCCLAIMPMT 746003411 440000213259
 3/14/2023 HUMANA CHA DISB HCCLAIMPMT 15312887 42000011
 3/15/2023 AETNA AS01 HCCLAIMPMT 1922092790 51000019196
 3/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000238960
 3/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000238959
 3/17/2023 WIRE OUT HMG Rockport SNF, LP -Commerical
 3/17/2023 HUMANA INS CO HCCLAIMPMT 15543823 8300005597

| Transfer-Out | Transfer-In | MMC PORTION | | | | | NH PORTION |
|--------------------|--------------------|-------------|---|------------|--------|--------------------|------------|
| | | QIPP/Comp | | QIPP/Comp4 | | QIPP TI | |
| | | QIPP/Comp1 | 2 | QIPP/Comp3 | &Lapse | | |
| - | 105.65 | - | - | - | - | 105.65 | |
| - | 12,087.53 | - | - | - | - | 12,087.53 | |
| - | 1,400.00 | - | - | - | - | 1,400.00 | |
| - | 462.60 | - | - | - | - | 462.60 | |
| - | 2,220.00 | - | - | - | - | 2,220.00 | |
| 22,794.34 | - | - | - | - | - | - | |
| - | 1,446.26 | - | - | - | - | 1,446.26 | |
| 22,794.34 ✓ | 17,722.04 ✓ | - | - | - | - | 17,722.04 ✓ | |

Gulf Pointe Plaza-Medicare/Medicaid ✓

3/13/2023 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 3/13/2023 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 3/16/2023 HEALTH HUMAN SVC HCCLAIMPMT 174600341113013 2
 3/17/2023 WIRE OUT HMG Rockport SNF, LP - Commerical

| Transfer-Out | Transfer-In | MMC PORTION | | | | | NH PORTION |
|--------------------|-------------------|-------------|---|------------|--------|--------------------|------------|
| | | QIPP/Comp | | QIPP/Comp4 | | QIPP TI | |
| | | QIPP/Comp1 | 2 | QIPP/Comp3 | &Lapse | | |
| - | 1,234.91 | - | - | - | - | 1,234.91 | |
| - | 1,932.74 | - | - | - | - | 1,932.74 | |
| - | 891.20 | - | - | - | - | 891.20 | |
| 67,444.30 | - | - | - | - | - | - | |
| - | - | - | - | - | - | - | |
| 67,444.30 ✓ | 4,058.85 ✓ | - | - | - | - | 4,058.85 ✓ | |
| 90,238.64 | 21,780.89 | - | - | - | - | 21,780.89 ✓ | |

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|--|-----------------------|-----------------------|-----------------------|----------------------|
| Number of Accounts: 16 | \$8,180,505.20 | \$8,559,005.43 | \$8,180,505.20 | \$8,526,122.4 |
| *4551 CAL CO INDIGENT HEALTHCARE | \$5,499.54 | \$5,499.54 | \$5,499.54 | \$5,499.5 |
| *4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE | \$11,898.74 | \$14,318.06 | \$11,898.74 | \$67,047.7 |
| *4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 | \$537.22 | \$537.22 | \$537.22 | \$537.2 |
| *4357 MEMORIAL MEDICAL CENTER - OPERATING | \$5,638,199.58 | \$5,900,172.20 | \$5,638,199.58 | \$5,301,709.5 |
| *4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING | \$432.49 | \$432.49 | \$432.49 | \$432.4 |
| *4381 MEMORIAL MEDICAL CENTER / NH ASHFORD | \$39,228.83 | \$39,644.19 | \$39,228.83 | \$172,629.4 |
| *4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR | \$71,367.20 | \$79,916.41 | \$71,367.20 | \$138,723.1 |
| *4411 MEMORIAL MEDICAL CENTER / NH CRESCENT | \$153,148.58 | \$187,637.49 | \$153,148.58 | \$177,423.3 |
| *4446 MEMORIAL MEDICAL CENTER / NH FORT BEND | \$7,130.57 | \$7,418.57 | \$7,130.57 | \$48,608.5 |
| *4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON | \$68,618.55 | \$78,129.44 | \$68,618.55 | \$223,117.5 |
| *3660 MMC -BETHANY SR LIVING - DACA | \$100.00 | \$100.00 | \$100.00 | \$100.0 |
| *2998 MMC -MONEY MARKET FUND | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.5 |
| *5506 MMC -NH BETHANY SENIOR LIVING | \$59,020.57 | \$69,701.57 | \$59,020.57 | \$114,345.5 |
| *5441 MMC -NH GULF POINTE ✓ PLAZA - MEDICARE/MEDICAID | \$4,193.65 ✓ | \$13,314.04 | \$4,193.65 | \$71,637.5 |
| *5433 MMC -NH GULF POINTE ✓ PLAZA - PRIVATE PAY | \$17,830.46 ✓ | \$36,448.38 | \$17,830.46 | \$39,178.5 |
| *3407 MMC -NH TUSCANY VILLAGE | \$51,927.68 | \$74,364.29 | \$51,927.68 | \$113,759.1 |

* indicate:
Page generated on 03/20/2023 :

Memorial Medical Center ✓
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 3/20/2023

| Nursing Home | Account Number | Previous Beginning Balance | Transfer-Out | Transfer-In | Ckts Cleared | Pending Deposits | Today's Beginning Balance | Amount to Be Transferred to Nursing Home |
|-------------------|----------------|----------------------------|--------------|-------------|--------------|-----------------------|---------------------------|--|
| Tuscany Village ✓ | | 61,931.43 ✓ | 61,831.43 ✓ | 51,827.68 ✓ | ✓ | | 51,927.68 | 51,827.68 ✓ |
| | | | | | | Bank Balance Variance | 51,927.68 | |
| | | | | | | Leave in Balance | 100.00 | |

Adjust Balance/Transfer Amt 51,827.68 ✓

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: Andrew De los Santos 3/20/2023
 ANDREW DE LOS SANTOS

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|--|-----------------------|-----------------------|-----------------------|----------------------|
| Number of Accounts: 16 | \$8,180,505.20 | \$8,559,005.43 | \$8,180,505.20 | \$8,526,122.4 |
| *4551 CAL CO INDIGENT HEALTHCARE | \$5,499.54 | \$5,499.54 | \$5,499.54 | \$5,499.5 |
| *4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE | \$11,898.74 | \$14,318.06 | \$11,898.74 | \$67,047.7 |
| *4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 | \$537.22 | \$537.22 | \$537.22 | \$537.2 |
| *4357 MEMORIAL MEDICAL CENTER - OPERATING | \$5,638,199.58 | \$5,900,172.20 | \$5,638,199.58 | \$5,301,709.9 |
| *4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING | \$432.49 | \$432.49 | \$432.49 | \$432.4 |
| *4381 MEMORIAL MEDICAL CENTER / NH ASHFORD | \$39,228.83 | \$39,644.19 | \$39,228.83 | \$172,629.4 |
| *4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR | \$71,367.20 | \$79,916.41 | \$71,367.20 | \$138,723.1 |
| *4411 MEMORIAL MEDICAL CENTER / NH CRESCENT | \$153,148.58 | \$187,637.49 | \$153,148.58 | \$177,423.3 |
| *4446 MEMORIAL MEDICAL CENTER / NH FORT BEND | \$7,130.57 | \$7,418.57 | \$7,130.57 | \$48,608.9 |
| *4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON | \$68,618.55 | \$78,129.44 | \$68,618.55 | \$223,117.9 |
| *3660 MMC -BETHANY SR LIVING - DACA | \$100.00 | \$100.00 | \$100.00 | \$100.0 |
| *2998 MMC -MONEY MARKET FUND | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.5 |
| *5506 MMC -NH BETHANY SENIOR LIVING | \$59,020.57 | \$69,701.57 | \$59,020.57 | \$114,345.5 |
| *5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID | \$4,193.65 | \$13,314.04 | \$4,193.65 | \$71,637.9 |
| *5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY | \$17,830.46 | \$36,448.38 | \$17,830.46 | \$39,178.5 |
| *3407 MMC -NH TUSCANY/ VILLAGE | \$51,927.68 ✓✓ | \$74,364.29 | \$51,927.68 | \$113,759.1 |

Memorial Medical Center ✓
 Nursing Home UPL
 Weekly HSL Transfer
 Prosperity Accounts
 3/20/2023

| Nursing Home | Account Number | Previous Beginning Balance | Transfer-Out | Transfer-In | Cks Cleared | Pending Medicare Repayment | Today's Beginning Balance | Amount to Be Transferred to Nursing Home |
|-------------------------|----------------|----------------------------|--------------|-------------|-------------|----------------------------|---------------------------|--|
| Bethany Senior Living ✓ | | 55,526.91 ✓ | 55,324.96 ✓ | 58,818.62 ✓ | ✓ | | 59,020.57 | 58,818.62 ✓ |
| | | | | | | Bank Balance | 59,020.57 | |
| | | | | | | Variance | - | |
| | | | | | | Leave in Balance | 100.00 | |

January Interest 45.81 ✓
 February Interest 56.14 ✓
 March Interest ✓
 Adjust Balance/Transfer Amt 58,818.62 ✓
 Approved: Andrew De Los Santos
 ANDREW DE LOS SANTOS 3/20/2023

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

APPROVED ON

MAR 20 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

| Account Number | Current Balance | Available Balance | Collected Balance | Prior Day Balanc |
|--|-----------------------|-----------------------|-----------------------|----------------------|
| Number of Accounts: 16 | \$8,180,505.20 | \$8,559,005.43 | \$8,180,505.20 | \$8,526,122.4 |
| *4551 CAL CO INDIGENT HEALTHCARE | \$5,499.54 | \$5,499.54 | \$5,499.54 | \$5,499.5 |
| *4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE | \$11,898.74 | \$14,318.06 | \$11,898.74 | \$67,047.7 |
| *4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 | \$537.22 | \$537.22 | \$537.22 | \$537.2 |
| *4357 MEMORIAL MEDICAL CENTER - OPERATING | \$5,638,199.58 | \$5,900,172.20 | \$5,638,199.58 | \$5,301,709.9 |
| *4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING | \$432.49 | \$432.49 | \$432.49 | \$432.4 |
| *4381 MEMORIAL MEDICAL CENTER / NH ASHFORD | \$39,228.83 | \$39,644.19 | \$39,228.83 | \$172,629.4 |
| *4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR | \$71,367.20 | \$79,916.41 | \$71,367.20 | \$138,723.1 |
| *4411 MEMORIAL MEDICAL CENTER / NH CRESCENT | \$153,148.58 | \$187,637.49 | \$153,148.58 | \$177,423.3 |
| *4446 MEMORIAL MEDICAL CENTER / NH FORT BEND | \$7,130.57 | \$7,418.57 | \$7,130.57 | \$48,608.9 |
| *4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON | \$68,618.55 | \$78,129.44 | \$68,618.55 | \$223,117.9 |
| *3660 MMC -BETHANY SR LIVING - DACA | \$100.00 | \$100.00 | \$100.00 | \$100.0 |
| *2998 MMC -MONEY MARKET FUND | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.54 | \$2,051,371.5 |
| *5506 MMC -NH BETHANY ✓ SENIOR LIVING | \$59,020.57 ✓ | \$69,701.57 | \$59,020.57 | \$114,345.5 |
| *5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID | \$4,193.65 | \$13,314.04 | \$4,193.65 | \$71,637.9 |
| *5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY | \$17,830.46 | \$36,448.38 | \$17,830.46 | \$39,178.5 |
| *3407 MMC -NH TUSCANY VILLAGE | \$51,927.68 | \$74,364.29 | \$51,927.68 | \$113,759.1 |

* indicate:
Page generated on 03/20/2023