

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---November 08, 2023

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 1,129,680.48	✓
TOTAL TRANSFERS BETWEEN FUNDS	\$ 60,272.67	✓
TOTAL NURSING HOME UPL EXPENSES	\$ 15,274.54	✓
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -	
GRAND TOTAL DISBURSEMENTS APPROVED November 08, 2023	\$ 1,205,227.69	✓

APPROVED

NOV 08 2023

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---November 08, 2023

PAYABLES AND PAYROLL

11/2/2023 Weekly Payables	380,683.47
11/2/2023 Patient Refunds	1,388.65
11/7/2023 Blue Cross Blue Shield	222,566.17
11/7/2023 Sun Life Financial	11,596.00
11/7/2023 McKesson-340B Prescription Expense	9,965.13
11/7/2023 Amerisource Bergen-340B Prescription Expense	730.83
11/7/2023 Amerisource Bergen-340B Prescription Expense	3,570.64
11/6/2023 Payroll Liabilities -Payroll Taxes	117,623.43
11/6/2023 Payroll	376,581.07
11/7/2023 Health Equity-Wage works employee FSA	3,467.50

Prosperity Electronic Bank Payments

11/7/2023 Credit Card & Lease Fees	742.89
11/7/2023 Payroll Liabilities difference	22.32
11/7/2023 Debt Management Services-wage garnishment	328.67
11/7/2023 Pay Plus-Patient Claims Processing Fee	329.51
11/7/2023 Harland Clarke-checks for NH accounts	52.00
11/7/2023 Authnet Gateway Billing-3rd Party Payor Fee	32.20

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ 1,129,680.48

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

11/2/2023 MMC Operating to Broadmoor-correction of NH insurance payment deposited into MMC Operating	1,000.00
11/2/2023 MMC Operating to Crescent-correction of NH insurance payment deposited into MMC Operating in error	4,200.00
11/2/2023 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	14,071.80
11/2/2023 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating	388.98
11/2/2023 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	18,242.14
11/2/2023 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating	22,369.75

TOTAL TRANSFERS BETWEEN FUNDS \$ 60,272.67

TRANSFER BETWEEN FUNDS FROM NURSING HOMES TO MMC

11/7/2023 Broadmoor to MMC - MMC's Portion of Molina Y5 adjustment payment deposited into Broadmoor in error	11,299.47
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TRANSFER OF FUNDS BETWEEN NURSING HOMES

11/7/2023 Broadmoor to Fort Bend - Nursing home's portion of Molina Y5 adjustment payment deposited into Broadmoor in error	618.26
11/7/2023 Broadmoor to Tuscany - Nursing home's portion of Molina Y5 adjustment payment deposited into Broadmoor in error	977.42
11/7/2023 Broadmoor to Solera - Nursing Home's portion of Molina Y5 adjustment payment deposited into Broadmoor in error	589.39
11/7/2023 Broadmoor to Crescent - Nursing Home's portion of Molina Y5 adjustment payment deposited into Broadmoor in error	378.90
11/7/2023 Broadmoor to Ashford - Nursing Home's portion of Molina Y5 adjustment payment deposited into Broadmoor in error	1,411.10

TOTAL NURSING HOME UPL EXPENSES \$ 15,274.54

GRAND TOTAL DISBURSEMENTS APPROVED November 08, 2023 \$ 1,205,227.69

RECEIVED BY THE COUNTY AUDITOR ON

NOV 02 2023

11/02/2023

15:07

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

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ap_open_invoice.template

Due Dates Through: 11/24/2023

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
14028	AMAZON CAPITAL SERVICES ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	1V73-Y3KV-FCTG ✓		10/18/20	10/12/20	11/11/20		900.95	0.00	0.00	900.95 ✓			
		SUPPLIES (5) Task chairs											
	1F3J-KDGL-3D9Q ✓		10/18/20	10/15/20	11/14/20		46.49	0.00	0.00	46.49 ✓			
		SUPPLIES											
	19GF-9T3N-9XKH ✓		10/31/20	10/25/20	11/24/20		540.57	0.00	0.00	540.57 ✓			
		SUPPLIES (3) Task chairs											
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		14028	AMAZON CAPITAL SERVICES				1,488.01	0.00	0.00	1,488.01			
10419	AMBU INC ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	224009244 ✓		10/30/20	10/23/20	11/01/20		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			
10592	AMERICAN PROFICIENCY INSTITUTE ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	672544 ✓		10/30/20	10/24/20	11/18/20		17,414.00	0.00	0.00	17,414.00 ✓			
		SUPPLIES											
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		10592	AMERICAN PROFICIENCY INSTITUTE				17,414.00	0.00	0.00	17,414.00			
A2218	AQUA BEVERAGE COMPANY ✓		M										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	09302023 116403		10/31/20	09/30/20	10/25/20		60.50	0.00	0.00	60.50 ✓			
		WATER-LAB											
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		A2218	AQUA BEVERAGE COMPANY				60.50	0.00	0.00	60.50			
A1551	ASPEN SURGICAL PRODUCTS INC ✓		M										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	CD2997933 ✓		10/01/20	08/03/20	09/03/20		397.52	0.00	0.00	397.52 ✓			
		SUPPLIES											
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		A1551	ASPEN SURGICAL PRODUCTS INC				397.52	0.00	0.00	397.52			
14088	AZALEA HEALTH ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	96439 ✓		11/01/20	11/01/20	11/02/20		594.00	0.00	0.00	594.00 ✓			
		MONTHLY PROCESSING											
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net			
		14088	AZALEA HEALTH				594.00	0.00	0.00	594.00			
M2485	BAYER HEALTHCARE ✓		M										

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
6010867701	✓	10/30/20	10/12/20	11/01/20		552.04	0.00	0.00	552.04 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						M2485	BAYER HEALTHCARE	552.04	0.00	0.00	552.04
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		
5479837	✓	10/31/20	10/13/20	11/07/20		5,016.58	0.00	0.00	5,016.58 ✓		
LEASE											
110918251	✓	10/31/20	10/16/20	11/10/20		1,288.45	0.00	0.00	1,288.45 ✓		
CONTRACT											
5480160	✓	10/31/20	10/21/20	11/15/20		1,935.15	0.00	0.00	1,935.15 ✓		
LEASE											
110929687	✓	10/31/20	10/23/20	11/17/20		1,142.70	0.00	0.00	1,142.70 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						B1220	BECKMAN COULTER INC	9,382.88	0.00	0.00	9,382.88
Vendor#	Vendor Name				Class	Pay Code					
13972	BEYER MECHANICAL LTD ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
IN-032448	✓	10/31/20	07/22/20	08/06/20		1,581.00	0.00	0.00	1,581.00 ✓ 1460.50		
LABOR											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						13972	BEYER MECHANICAL LTD	1,581.00	0.00	0.00	1,581.00 ✓ 1460.50
Vendor#	Vendor Name				Class	Pay Code					
14753	BIOMERIEUX, INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1213127731	✓	11/01/20	10/24/20	11/15/20		34,977.26	0.00	0.00	34,977.26 ✓		
BIOFIRE											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						14753	BIOMERIEUX, INC	34,977.26	0.00	0.00	34,977.26
Vendor#	Vendor Name				Class	Pay Code					
B1650	BOSART LOCK & KEY INC ✓				M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
127061	✓	10/31/20	10/25/20	11/24/20		39.25	0.00	0.00	39.25 ✓		
REKEY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						B1650	BOSART LOCK & KEY INC	39.25	0.00	0.00	39.25
Vendor#	Vendor Name				Class	Pay Code					
C1048	CALHOUN COUNTY ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
102423		10/31/20	10/24/20	11/08/20		164.05	0.00	0.00	164.05 ✓		
FUEL Voyager											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						C1048	CALHOUN COUNTY	164.05	0.00	0.00	164.05
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		
2023-09	✓	10/24/20	10/23/20	11/20/20		5,280.00	0.00	0.00	5,280.00 ✓		
SEPT TRANSFERS											

Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		14120	CALHOUN COUNTY EMS	5,280.00	0.00	0.00	5,280.00		
Vendor#	Vendor Name	Class		Pay Code					
C1325	CARDINAL HEALTH 414, INC. ✓	W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8002410531 ✓	SUPPLIES	10/31/20	12/06/20	12/31/20		488.30	0.00	0.00	488.30 ✓
8002621297 ✓	SUPPLIES	10/31/20	05/15/20	06/09/20		391.48	0.00	0.00	391.48 ✓
8002591271 ✓	SUPPLIES	10/31/20	07/11/20	08/05/20		311.95	0.00	0.00	311.95 ✓
8002585596 ✓	SUPPLIES	10/31/20	07/21/20	08/15/20		366.56	0.00	0.00	366.56 ✓
8002634725 ✓	SUPPLIES	10/31/20	09/01/20	09/26/20		54.60	0.00	0.00	54.60 ✓
8002703125 ✓	SUPPLIES	10/31/20	11/21/20	12/16/20		380.31	0.00	0.00	380.31 ✓
8002718434 ✓	SUPPLIES	10/31/20	12/12/20	01/06/20		444.77	0.00	0.00	444.77 ✓
8002738732 ✓	SUPPLIES	10/31/20	01/01/20	01/26/20		432.41	0.00	0.00	432.41 ✓
8002750515 ✓	SUPPLIES	10/31/20	01/16/20	02/10/20		362.17	0.00	0.00	362.17 ✓
8002767328 ✓	SUPPLIES	10/31/20	02/01/20	02/26/20		57.55	0.00	0.00	57.55 ✓
1600016061 ✓	SERVICE CHARGE	10/31/20	02/04/20	03/01/20		32.64	0.00	0.00	32.64 ✓
8002798544 ✓	SUPPLIES	10/31/20	03/06/20	03/31/20		399.39	0.00	0.00	399.39 ✓
8002852934 ✓	SUPPLIES	10/31/20	05/08/20	06/02/20		285.97	0.00	0.00	285.97 ✓
8002884981 ✓	SUPPLIES	10/31/20	06/12/20	07/07/20		152.95	0.00	0.00	152.95 ✓
8003318819 ✓	SUPPLIES	10/31/20	10/01/20	10/26/20		462.93	0.00	0.00	462.93 ✓
8003330991 ✓	SUPPLIES	10/31/20	10/15/20	11/09/20		169.66	0.00	0.00	169.66 ✓
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		C1325	CARDINAL HEALTH 414, INC.	4,793.64	0.00	0.00	4,793.64		
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
MJ18869 ✓	INOVATE (a)	10/24/20	10/04/20	11/03/20		76,477.43	0.00	0.00	76,477.43 ✓
MM75221 ✓	SUPPLIES	10/30/20	10/13/20	11/12/20		294.22	0.00	0.00	294.22 ✓
MN02892 ✓	SUPPLIES	10/30/20	10/13/20	11/12/20		42.71	0.00	0.00	42.71 ✓
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		C1992	CDW GOVERNMENT, INC.	76,814.36	0.00	0.00	76,814.36		
Vendor#	Vendor Name	Class		Pay Code					

C1390	CENTRAL DRUG ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
102323 ✓		10/25/20	10/23/20	11/22/20		29.10	0.00	0.00	29.10 ✓		
	INVENTORY										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	C1390 CENTRAL DRUG					29.10	0.00	0.00	29.10		
Vendor#	Vendor Name				Class	Pay Code					
10105	CHRIS KOVAREK ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
102723		10/31/20	10/27/20	11/08/20		75.00	0.00	0.00	75.00 ✓		
	DIRECTOR RENEWAL										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	10105 CHRIS KOVAREK					75.00	0.00	0.00	75.00		
Vendor#	Vendor Name				Class	Pay Code					
10368	DEWITT POTH & SON ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
696789-0 ✓		10/01/20	10/13/20	11/07/20		420.94	0.00	0.00	420.94 ✓		
	SUPPLIES										
733752-0 ✓		10/31/20	10/16/20	11/10/20		490.26	0.00	0.00	490.26 ✓		
	SUPPLIES										
734203-0 ✓		10/31/20	10/18/20	11/12/20		551.81	0.00	0.00	551.81 ✓		
	SUPPLIES										
734203-1 ✓		10/31/20	10/19/20	11/13/20		91.10	0.00	0.00	91.10 ✓		
	SUPPLIES										
734279-0 ✓		10/31/20	10/19/20	11/13/20		102.02	0.00	0.00	102.02 ✓		
	SUPPLIES										
734950-0 ✓		10/31/20	10/25/20	11/19/20		91.67	0.00	0.00	91.67 ✓		
	SUPPLIES										
735107-0 ✓		10/31/20	10/26/20	11/20/20		28.74	0.00	0.00	28.74 ✓		
	SUPPLIES										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	10368 DEWITT POTH & SON					1,776.54	0.00	0.00	1,776.54		
Vendor#	Vendor Name				Class	Pay Code					
11291	DOWELL PEST CONTROL ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
22178 ✓		10/31/20	10/26/20	10/27/20		40.00	0.00	0.00	40.00 ✓		
	ANT SPRAY										
22301 ✓		10/31/20	10/30/20	10/31/20		505.00	0.00	0.00	505.00 ✓		
	PEST CONTROL										
22335 ✓		10/31/20	10/30/20	11/01/20		105.00	0.00	0.00	105.00 ✓		
	PEST CONTROL										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	11291 DOWELL PEST CONTROL					650.00	0.00	0.00	650.00		
Vendor#	Vendor Name				Class	Pay Code					
11284	EMERGENCY STAFFING SOLUTIONS ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
42657 ✓		10/31/20	10/31/20	11/10/20		40,062.50	0.00	0.00	40,062.50 ✓		
	PHYSICIAN SERVICES (11-EOM)										
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					

F1400 FISHER HEALTHCARE ✓				M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
6894937 ✓		10/31/20	10/11/20	11/05/20		147.53	0.00	0.00	147.53 ✓		
	SUPPLIES										
6962299 ✓		10/31/20	10/13/20	11/07/20		56.73	0.00	0.00	56.73 ✓		
	SUPPLIES										
6996760 ✓		10/31/20	10/16/20	11/10/20		-1,578.60	0.00	0.00	-1,578.60 ✓		
	CREDIT										
6996761 ✓		10/31/20	10/16/20	11/10/20		348.85	0.00	0.00	348.85 ✓		
	SUPPLIES										
7036662 ✓		10/31/20	10/17/20	11/11/20		49.43	0.00	0.00	49.43 ✓		
	SUPPLIES										
7036663 ✓		10/31/20	10/17/20	11/11/20		15.38	0.00	0.00	15.38 ✓		
	SUPPLIES										
7036664 ✓		10/31/20	10/17/20	11/11/20		15,178.35	0.00	0.00	15,178.35 ✓		
	SUPPLIES										
7115507 ✓		10/31/20	10/19/20	11/13/20		498.21	0.00	0.00	498.21 ✓		
	SUPPLIES										
7115505 ✓		10/31/20	10/19/20	11/13/20		140.84	0.00	0.00	140.84 ✓		
	SUPPLIES										
7184319 ✓		10/31/20	10/23/20	11/17/20		2,508.72	0.00	0.00	2,508.72 ✓		
	SUPPLIES										
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						F1400	FISHER HEALTHCARE	17,365.44	0.00	0.00	17,365.44

Vendor#	Vendor Name			Class	Pay Code						
11183	FRONTIER ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
102323		10/31/20	10/23/20	11/16/20		25.82	0.00	0.00	25.82 ✓		
	PHONE										
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						11183	FRONTIER	25.82	0.00	0.00	25.82

Vendor#	Vendor Name			Class	Pay Code						
10653	GLOBAL EQUIPMENT CO. INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
121113820 ✓		10/24/20	10/18/20	11/17/20		3,550.95	0.00	0.00	3,550.95 ✓		
	SUPPLIES <i>Portable Air Conditioner w/ cold Air Nozzles</i>										
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						10653	GLOBAL EQUIPMENT CO. INC.	3,550.95	0.00	0.00	3,550.95

Vendor#	Vendor Name			Class	Pay Code						
W1300	GRAINGER ✓			M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9872297040 ✓		10/31/20	10/16/20	11/10/20		152.00	0.00	0.00	152.00 ✓		
	SUPPLIES										
9875265069 ✓		10/31/20	10/18/20	11/12/20		338.80	0.00	0.00	338.80 ✓		
	SUPPLIES										
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						W1300	GRAINGER	490.80	0.00	0.00	490.80

Vendor#	Vendor Name			Class	Pay Code					
G1210	GULF COAST PAPER COMPANY ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2453600 ✓		10/18/20	10/10/20	11/09/20		42.21	0.00	0.00	42.21 ✓	

2455019	SUPPLIES	10/24/20	10/12/20	11/11/20			45.00	0.00	0.00	45.00		
2456836	SUPPLIES	10/31/20	10/17/20	11/16/20			449.88	0.00	0.00	449.88		
2460001	SUPPLIES	10/31/20	10/24/20	11/23/20			377.88	0.00	0.00	377.88		
2460000	SUPPLIES	10/31/20	10/24/20	11/23/20			72.38	0.00	0.00	72.38		
2460004	SUPPLIES	10/31/20	10/24/20	11/23/20			659.66	0.00	0.00	659.66		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							G1210	GULF COAST PAPER COMPANY	1,647.01	0.00	0.00	1,647.01
Vendor#	Vendor Name				Class	Pay Code						
H1399	HILL-ROM COMPANY, INC				M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
3174810		10/31/20	08/31/20	09/30/20			451.05	0.00	0.00	451.05		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							H1399	HILL-ROM COMPANY, INC	451.05	0.00	0.00	451.05
Vendor#	Vendor Name				Class	Pay Code						
15096												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
101823		10/31/20	10/18/20	11/18/20			103.00	0.00	0.00	103.00		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							15096		103.00	0.00	0.00	103.00
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		
7985779858		10/31/20	10/27/20	10/28/20			427.00	0.00	0.00	427.00		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							M1950	MARTIN PRINTING CO	427.00	0.00	0.00	427.00
Vendor#	Vendor Name				Class	Pay Code						
M2470	MEDLINE INDUSTRIES INC				M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
2280917783	SUPPLIES	10/26/20	08/16/20	11/18/20			2,732.21	0.00	0.00	2,732.21		
2280917780	SUPPLIES	10/26/20	08/16/20	11/18/20			3,575.46	0.00	0.00	3,575.46		
2280917784	SUPPLIES	10/26/20	08/16/20	11/18/20			24.55	0.00	0.00	24.55		
2280917773	SUPPLIES	10/26/20	08/16/20	11/18/20			24.95	0.00	0.00	24.95		
2283617942	SUPPLIES	10/26/20	10/26/20	11/20/20			63.29	0.00	0.00	63.29		
2283617935	SUPPLIES	10/26/20	10/26/20	11/20/20			153.01	0.00	0.00	153.01		
2283617938	SUPPLIES	10/26/20	10/26/20	11/20/20			227.95	0.00	0.00	227.95		

2280917774 ✓	10/26/20 10/26/20 11/20/20	246.19	0.00	0.00	246.19 ✓
SUPPLIES					
2288147039 ✓	10/31/20 10/06/20 10/31/20	-32.77	0.00	0.00	-32.77 ✓
CREDIT					
2288060104 ✓	10/31/20 10/06/20 10/31/20	357.48	0.00	0.00	357.48 ✓
SUPPLIES					
2288576941 ✓	10/31/20 10/09/20 11/03/20	75.00	0.00	0.00	75.00 ✓
CREDIT <i>Dmp Ship Fee</i>					
2288652514 ✓	10/31/20 10/10/20 11/04/20	92.28	0.00	0.00	92.28 ✓
SUPPLIES					
2288652517 ✓	10/31/20 10/10/20 11/04/20	84.75	0.00	0.00	84.75 ✓
SUPPLIES					
2288652513 ✓	10/31/20 10/10/20 11/04/20	182.04	0.00	0.00	182.04 ✓
SUPPLIES					
2288652512 ✓	10/31/20 10/10/20 11/04/20	204.01	0.00	0.00	204.01 ✓
SUPPLIES					
2288652516 ✓	10/31/20 10/10/20 11/04/20	36.32	0.00	0.00	36.32 ✓
SUPPLIES					
2288652515 ✓	10/31/20 10/10/20 11/04/20	184.76	0.00	0.00	184.76 ✓
SUPPLIES					
2288652518 ✓	10/31/20 10/10/20 11/04/20	342.44	0.00	0.00	342.44 ✓
SUPPLIES					
2288791101 ✓	10/31/20 10/11/20 11/05/20	7,411.45	0.00	0.00	7,411.45 ✓
SUPPLIES					
2288789490 ✓	10/31/20 10/11/20 11/05/20	22.22	0.00	0.00	22.22 ✓
SUPPLIES					
2288789493 ✓	10/31/20 10/11/20 11/05/20	145.09	0.00	0.00	145.09 ✓
SUPPLIES					
2288789496 ✓	10/31/20 10/11/20 11/05/20	270.96	0.00	0.00	270.96 ✓
SUPPLIES					
2288789499 ✓	10/31/20 10/11/20 11/05/20	229.21	0.00	0.00	229.21 ✓
SUPPLIES					
2288789497 ✓	10/31/20 10/11/20 11/05/20	1,714.09	0.00	0.00	1,714.09 ✓
SUPPLIES					
2288789491 ✓	10/31/20 10/11/20 11/05/20	197.61	0.00	0.00	197.61 ✓
SUPPLIES					
2288789489 ✓	10/31/20 10/11/20 11/05/20	97.74	0.00	0.00	97.74 ✓
SUPPLIES					
2288791102 ✓	10/31/20 10/11/20 11/05/20	105.42	0.00	0.00	105.42 ✓
SUPPLIES					
2288789494 ✓	10/31/20 10/11/20 11/05/20	81.87	0.00	0.00	81.87 ✓
SUPPLIES					
2289028040 ✓	10/31/20 10/12/20 11/06/20	-68.30	0.00	0.00	-68.30 ✓
CREDIT					
2289028039 ✓	10/31/20 10/12/20 11/06/20	-68.30	0.00	0.00	-68.30 ✓
CREDIT					
2289370186 ✓	10/31/20 10/13/20 11/07/20	-44.34	0.00	0.00	-44.34 ✓
CREDIT					
2289792994 ✓	10/31/20 10/17/20 11/11/20	416.18	0.00	0.00	416.18 ✓
SUPPLIES					
2289792997 ✓	10/31/20 10/17/20 11/11/20	292.89	0.00	0.00	292.89 ✓

2289964220	✓	SUPPLIES	10/31/20 10/17/20 11/11/20	94.36	0.00	0.00	94.36	✓
2289792993	✓	SUPPLIES	10/31/20 10/17/20 11/11/20	119.90	0.00	0.00	119.90	✓
2289792996	✓	SUPPLIES	10/31/20 10/17/20 11/11/20	25.06	0.00	0.00	25.06	✓
2290108757	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	12.29	0.00	0.00	12.29	✓
2290108759	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	24.54	0.00	0.00	24.54	✓
2290108763	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	109.07	0.00	0.00	109.07	✓
2290108768	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	3,440.47	0.00	0.00	3,440.47	✓
2290108764	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	204.01	0.00	0.00	204.01	✓
2290108765	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	27.29	0.00	0.00	27.29	✓
2290108758	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	33.44	0.00	0.00	33.44	✓
2290108760	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	254.80	0.00	0.00	254.80	✓
2290108767	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	268.66	0.00	0.00	268.66	✓
2290108766	✓	SUPPLIES	10/31/20 10/18/20 11/12/20	16,938.77	0.00	0.00	16,938.77	✓
2291086672	✓	SUPPLIES	10/31/20 10/24/20 11/18/20	-60.79	0.00	0.00	-60.79	✓
2291058434	✓	CREDIT	10/31/20 10/24/20 11/18/20	44.96	0.00	0.00	44.96	✓
2291058436	✓	SUPPLIES	10/31/20 10/24/20 11/18/20	61.52	0.00	0.00	61.52	✓
2291058432	✓	SUPPLIES	10/31/20 10/24/20 11/18/20	18.72	0.00	0.00	18.72	✓
2291058433	✓	SUPPLIES	10/31/20 10/24/20 11/18/20	151.32	0.00	0.00	151.32	✓
2291058435	✓	SUPPLIES	10/31/20 10/24/20 11/18/20	37.02	0.00	0.00	37.02	✓
2291292135	✓	SUPPLIES	10/31/20 10/25/20 11/19/20	60.79	0.00	0.00	60.79	✓
2291292131	✓	SUPPLIES	10/31/20 10/25/20 11/19/20	7,119.84	0.00	0.00	7,119.84	✓
2291292138	✓	SUPPLIES	10/31/20 10/25/20 11/19/20	51.63	0.00	0.00	51.63	✓
2291292130	✓	SUPPLIES	10/31/20 10/25/20 11/19/20	92.57	0.00	0.00	92.57	✓
2291292127	✓	SUPPLIES	10/31/20 10/25/20 11/19/20	97.74	0.00	0.00	97.74	✓
2291292133	✓	SUPPLIES	10/31/20 10/25/20 11/19/20	4,275.30	0.00	0.00	4,275.30	✓
		SUPPLIES						

2291292137	✓		10/31/20	10/25/20	11/19/20		53.83	0.00	0.00	53.83	✓	
		SUPPLIES										
2291292128	✓		10/31/20	10/25/20	11/19/20		28.76	0.00	0.00	28.76	✓	
		SUPPLIES										
2291292139	✓		10/31/20	10/25/20	11/19/20		57.00	0.00	0.00	57.00	✓	
		SUPPLIES										
2291292136	✓		10/31/20	10/25/20	11/19/20		126.95	0.00	0.00	126.95	✓	
		SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
		M2470	MEDLINE INDUSTRIES INC				53,147.53	0.00	0.00	53,147.53		
Vendor#	Vendor Name		Class		Pay Code							
M2621	MMC AUXILIARY GIFT SHOP ✓		W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
102623		10/31/20	10/26/20	11/08/20			220.97	0.00	0.00	220.97	✓	
	PAYROLL DEDUCT											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
		M2621	MMC AUXILIARY GIFT SHOP				220.97	0.00	0.00	220.97		
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		
1202298	✓		10/31/20	10/24/20	11/03/20		35.13	0.00	0.00	35.13	✓	
	INVENTORY											
1202300	✓		10/31/20	10/24/20	11/03/20		11.25	0.00	0.00	11.25	✓	
	INVENTORY											
1202641	✓		10/31/20	10/24/20	11/03/20		370.01	0.00	0.00	370.01	✓	
	INVENTORY											
1202640	✓		10/31/20	10/24/20	11/03/20		3.55	0.00	0.00	3.55	✓	
	INVENTORY											
SC3660	✓		10/31/20	10/25/20	11/04/20		22.29	0.00	0.00	22.29	✓	
	INVENTORY <i>Service charge</i>											
1206494	✓		10/31/20	10/25/20	11/04/20		1,768.09	0.00	0.00	1,768.09	✓	
	INVENTORY											
1207340	✓		10/31/20	10/25/20	11/04/20		93.63	0.00	0.00	93.63	✓	
	INVENTORY											
SC3659	✓		10/31/20	10/25/20	11/04/20		131.90	0.00	0.00	131.90	✓	
	SERVICE CHARGE											
1206830	✓		10/31/20	10/25/20	11/04/20		5,436.54	0.00	0.00	5,436.54	✓	
	INVENTORY											
1207341	✓		10/31/20	10/25/20	11/04/20		320.57	0.00	0.00	320.57	✓	
	INVENTORY											
SC3658	✓		10/31/20	10/25/20	11/04/20		52.67	0.00	0.00	52.67	✓	
	SERVICE CHARGE											
1212129	✓		10/31/20	10/26/20	11/05/20		381.73	0.00	0.00	381.73	✓	
	INVENTORY											
1210137	✓		10/31/20	10/26/20	11/05/20		410.85	0.00	0.00	410.85	✓	
	INVENTORY											
1209620	✓		10/31/20	10/26/20	11/05/20		3,611.54	0.00	0.00	3,611.54	✓	
	INVENTORY											
1210138	✓		10/31/20	10/26/20	11/05/20		8.20	0.00	0.00	8.20	✓	
	INVENTORY											
1218871	✓		10/31/20	10/29/20	11/08/20		9.59	0.00	0.00	9.59	✓	

1220046	✓	INVENTORY	10/31/20	10/29/20	11/08/20		962.24	0.00	0.00	962.24	✓	
1220047	✓	INVENTORY	10/31/20	10/29/20	11/08/20		1,681.27	0.00	0.00	1,681.27	✓	
1218874	✓	INVENTORY	10/31/20	10/29/20	11/08/20		31.92	0.00	0.00	31.92	✓	
1218872	✓	INVENTORY	10/31/20	10/29/20	11/08/20		25.57	0.00	0.00	25.57	✓	
1218873	✓	INVENTORY	10/31/20	10/29/20	11/08/20		21.33	0.00	0.00	21.33	✓	
1217986	✓	INVENTORY	10/31/20	10/29/20	11/08/20		67.74	0.00	0.00	67.74	✓	
1221666	✓	INVENTORY	10/31/20	10/30/20	11/09/20		620.75	0.00	0.00	620.75	✓	
1224749	✓	INVENTORY	10/31/20	10/30/20	11/09/20		18.27	0.00	0.00	18.27	✓	
1224750	✓	INVENTORY	10/31/20	10/30/20	11/09/20		714.46	0.00	0.00	714.46	✓	
1222637	✓	INVENTORY	10/31/20	10/30/20	11/09/20		715.95	0.00	0.00	715.95	✓	
1222635	✓	INVENTORY	10/31/20	10/30/20	11/09/20		160.78	0.00	0.00	160.78	✓	
1221665	✓	INVENTORY	10/31/20	10/30/20	11/09/20		9.59	0.00	0.00	9.59	✓	
1221668	✓	INVENTORY	10/31/20	10/30/20	11/09/20		14.77	0.00	0.00	14.77	✓	
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10536	MORRIS & DICKSON CO, LLC	17,712.18	0.00	0.00	17,712.18
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		
8801074063	✓	10/18/20	09/30/20	10/30/20			161.38	0.00	0.00	161.38	✓	
SUPPLIES												
8801079130	✓	10/30/20	10/13/20	11/12/20			403.85	0.00	0.00	403.85	✓	
SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							M2659	MXR IMAGING, INC	565.23	0.00	0.00	565.23
Vendor#	Vendor Name		Class		Pay Code							
10188	NATUS MEDICAL INC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
1041522673	✓	10/31/20	10/27/20	11/21/20			85.27	0.00	0.00	85.27	✓	
SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10188	NATUS MEDICAL INC	85.27	0.00	0.00	85.27
Vendor#	Vendor Name		Class		Pay Code							
O1500	OLYMPUS AMERICA INC ✓		M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
35176184	✓	10/30/20	10/16/20	11/10/20			204.60	0.00	0.00	204.60	✓	
SUPPLIES												
35176183	✓	10/30/20	10/16/20	11/10/20			184.30	0.00	0.00	184.30	✓	

SUPPLIES										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		O1500	OLYMPUS AMERICA INC			388.90	0.00	0.00	388.90	
Vendor#	Vendor Name			Class	Pay Code					
O1416	ORTHO CLINICAL DIAGNOSTICS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
1853203944 ✓		10/30/20	10/16/20	11/15/20		164.91	0.00	0.00	164.91 ✓	
SUPPLIES										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		O1416	ORTHO CLINICAL DIAGNOSTICS			164.91	0.00	0.00	164.91	
Vendor#	Vendor Name			Class	Pay Code					
11155	PARAREV ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
907236 ✓		10/31/20	10/01/20	10/31/20		3,084.00	0.00	0.00	3,084.00 ✓	
REVENUE INT PROGRAM										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		11155	PARAREV			3,084.00	0.00	0.00	3,084.00	
Vendor#	Vendor Name			Class	Pay Code					
12708	POC ELECTRIC, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
3918 ✓		10/31/20	10/16/20	10/31/20		1,335.00	0.00	0.00	1,335.00 ✓	
SUPPLIES repair conduit										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		12708	POC ELECTRIC, LLC			1,335.00	0.00	0.00	1,335.00	
Vendor#	Vendor Name			Class	Pay Code					
14920	REPUBLIC SERVICES, INC. ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
0847-001302277 ✓		10/31/20	10/26/20	11/15/20		1,526.77	0.00	0.00	1,526.77 ✓	
WASTE										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		14920	REPUBLIC SERVICES, INC.			1,526.77	0.00	0.00	1,526.77	
Vendor#	Vendor Name			Class	Pay Code					
15104	ROMERO BROTHERS CONSTRUCTION ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
067485		10/31/20	10/25/20	11/02/20		43,136.00	0.00	0.00	43,136.00 ✓	
CONCRETE WORK										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		15104	ROMERO BROTHERS CONSTRUCTION			43,136.00	0.00	0.00	43,136.00	
Vendor#	Vendor Name			Class	Pay Code					
S1001	SANOPI PASTEUR INC ✓			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
920655191 ✓		10/31/20	06/07/20	07/01/20		-5,120.22	0.00	0.00	-5,120.22 ✓	
CREDIT										
920689534 ✓		10/31/20	06/15/20	08/14/20		2,417.69	0.00	0.00	2,417.69 ✓	
INVENTORY										
921107178 ✓		10/31/20	08/23/20	11/21/20		14,040.17	0.00	0.00	14,040.17 ✓	
INVENTORY										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		S1001	SANOPI PASTEUR INC			11,337.64	0.00	0.00	11,337.64	
Vendor#	Vendor Name			Class	Pay Code					
10936	SIEMENS FINANCIAL SERVICES ✓									

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
56382400006271	LEASE ✓	10/31/20	10/30/20	11/19/20		1,333.33	0.00	0.00	1,333.33 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10936	SIEMENS FINANCIAL SERVICES	1,333.33	0.00	0.00	1,333.33
Vendor#	Vendor Name				Class	Pay Code					
S2353	SMITHS MEDICAL ASD INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
17186692	SUPPLIES ✓	10/31/20	10/17/20	11/01/20		133.64	0.00	0.00	133.64 ✓		
17188763	SUPPLIES ✓	10/31/20	10/18/20	11/01/20		198.84	0.00	0.00	198.84 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						S2353	SMITHS MEDICAL ASD INC	332.48	0.00	0.00	332.48
Vendor#	Vendor Name				Class	Pay Code					
12472	SOMETHING MORE MEDIA, INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
2152	ADVERTISING ✓	10/31/20	10/30/20	11/14/20		2,525.00	0.00	0.00	2,525.00 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12472	SOMETHING MORE MEDIA, INC.	2,525.00	0.00	0.00	2,525.00
Vendor#	Vendor Name				Class	Pay Code					
S3940	STERIS CORPORATION ✓					M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
11342007	CREDIT ✓	10/31/20	07/07/20	08/01/20		-19.90	0.00	0.00	-19.90 ✓		
11693526	SUPPLIES ✓	10/31/20	10/20/20	11/14/20		140.96	0.00	0.00	140.96 ✓		
11701251	SUPPLIES ✓	10/31/20	10/24/20	11/18/20		202.80	0.00	0.00	202.80 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						S3940	STERIS CORPORATION	323.86	0.00	0.00	323.86
Vendor#	Vendor Name				Class	Pay Code					
15092	STEVE BROCK ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
102523	TRAVEL EXPENSES/MOVING ✓	10/31/20	10/25/20	11/01/20		4,000.00	0.00	0.00	4,000.00 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						15092	STEVE BROCK	4,000.00	0.00	0.00	4,000.00
Vendor#	Vendor Name				Class	Pay Code					
14212	SURGICAL DIRECT SOUTH ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9314	SUPPLIES ✓	10/25/20	10/24/20	11/23/20		3,300.00	0.00	0.00	3,300.00 ✓		
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						14212	SURGICAL DIRECT SOUTH	3,300.00	0.00	0.00	3,300.00
Vendor#	Vendor Name				Class	Pay Code					
T0420	TELEFLEX MEDICAL ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9507557599	SUPPLIES ✓	10/24/20	10/09/20	10/24/20		119.50	0.00	0.00	119.50 ✓		

Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		T0420	TELEFLEX MEDICAL		119.50	0.00	0.00	119.50	
Vendor#	Vendor Name			Class	Pay Code				
14168	TEXAS HHSC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102723		10/31/20	10/27/20	11/15/20		500.00	0.00	0.00	500.00 ✓
INSPECTION -SURGERY									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		14168	TEXAS HHSC		500.00	0.00	0.00	500.00	
Vendor#	Vendor Name			Class	Pay Code				
11908	TMS SOUTH ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV97684 ✓		10/11/20	09/21/20	10/21/20		492.30	0.00	0.00	492.30 ✓
SUPPLIES									
INV99014 ✓		10/30/20	10/30/20	11/18/20		117.05	0.00	0.00	117.05 ✓
SUPPLIES									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11908	TMS SOUTH		609.35	0.00	0.00	609.35	
Vendor#	Vendor Name			Class	Pay Code				
13144	TRI WHOLESALE CO. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
188294 ✓		10/31/20	09/07/20	10/07/20		31.78	0.00	0.00	31.78 ✓
BELTS									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		13144	TRI WHOLESALE CO.		31.78	0.00	0.00	31.78	
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
600026273 ✓		10/30/20	10/23/20	11/17/20		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				
13616	TRIOSE, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
TRI136546 ✓		10/25/20	11/04/20	12/04/20		74.80	0.00	0.00	74.80 ✓
FREIGHT									
TRI137654 ✓		10/25/20	11/18/20	12/03/20		237.23	0.00	0.00	237.23 ✓
FREIGHT									
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		13616	TRIOSE, INC		312.03	0.00	0.00	312.03	
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
2921016937 ✓		10/31/20	10/26/20	11/20/20		213.10	0.00	0.00	213.10 ✓
LAUNDRY									
2921016943 ✓		10/31/20	10/26/20	11/20/20		102.46	0.00	0.00	102.46 ✓
LAUNDRY									
2921016942 ✓		10/31/20	10/26/20	11/20/20		230.46	0.00	0.00	230.46 ✓
LAUNDRY									
2921016941 ✓		10/31/20	10/26/20	11/20/20		244.19	0.00	0.00	244.19 ✓

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
2921016936	LAUNDRY			108.27	0.00	0.00	108.27
2921016938	LAUNDRY			2,323.02	0.00	0.00	2,323.02
2921016940	LAUNDRY			298.08	0.00	0.00	298.08
2921016939	LAUNDRY			29.95	0.00	0.00	29.95
2921017136	LAUNDRY			91.80	0.00	0.00	91.80
2921017135	LAUNDRY			2,775.51	0.00	0.00	2,775.51

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	6,416.84	0.00	0.00	6,416.84

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
I1110	WERFEN USA LLC			7,710.00	0.00	0.00	7,710.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	7,710.00	0.00	0.00	7,710.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	380,803.97	0.00	0.00	380,803.97

pg 2 correction
(sales tax included)
 $\{ < 1581.00 >$
 $\{ + 1460.50$
\$380,683.47

380,803.97 +
 1,581.00 -
 1,460.50 +
380,683.47 *

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS
 CK #201442-201507

RECEIVED BY THE
COUNTY AUDITOR ON

NOV 02 2023

11/02/2023
GALHOUN COUNTY, TEXAS
14:14

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

12792 BETHANY SENIOR LIVING ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102523		10/31/20	10/25/20	11/25/20		30.11	0.00	0.00	30.11 ✓
	TRANSFER	<i>NH insurance payment deposited into MME operating</i>							
102623		10/31/20	10/26/20	11/26/20		4,287.14	0.00	0.00	4,287.14 ✓
	TRANSFER	"							
103123		10/31/20	10/31/20	11/30/20		1,815.10	0.00	0.00	1,815.10 ✓
	TRANSFER	"							
103123B		10/31/20	10/31/20	11/30/20		219.50	0.00	0.00	219.50 ✓
	TRANSFER	"							
103123A		10/31/20	10/31/20	11/30/20		16,017.90	0.00	0.00	16,017.90 ✓
	TRANSFER	"							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12792	BETHANY SENIOR LIVING	22,369.75	0.00	0.00	22,369.75

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	22,369.75	0.00	0.00	22,369.75

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
GALHOUN COUNTY, TEXAS

CK # 201508

RUN DATE: 11/02/23
TIME: 14:17
RECEIVED BY THE COUNTY AUDITOR ON

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1
APCDEDIT

PATIENT NUMBER
NOV 02 2023
PAYEE NAME

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
		110123	20.00	✓	2	REFUND FOR	
		110123	25.23	✓	2	REFUND FOR	
		110123	95.32	✓	2	REFUND FOR	
		110123	286.40	✓	3	REFUND FOR	
		110123	725.70	✓	2	REFUND FOR	
		110123	136.00	✓	2	REFUND FOR	
		110123	100.00	✓	2	REFUND FOR	

ARID=0001 TOTAL

1388.65

TOTAL

1388.65

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 201514-201520

11/06/2023
09:39

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

Vendor# Vendor Name
12476 SUN LIFE FINANCIAL ✓
Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
102423		10/31/20	10/13/20	11/01/20			11,596.00	0.00	0.00	11,596.00 ✓
LIFE INSURANCE OCT 23										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12476	SUN LIFE FINANCIAL	11,596.00	0.00	0.00	11,596.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	11,596.00	0.00	0.00	11,596.00

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 201196

002

11,374.72	+
221.28	+
11,596.00	=

11/06/2023	MEMORIAL MEDICAL CENTER				0				
09:39	AP Open Invoice List					ap_open_invoice.template			
					Dates Through:				
Vendor#	Vendor Name			Class	Pay Code				
12324	BLUE CROSS BLUE SHIELD ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
101823		10/31/20	10/13/20	11/01/20		222,566.17	0.00	0.00	222,566.17 ✓
INSURANCE NOV 23									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	12324	BLUE CROSS BLUE SHIELD				222,566.17	0.00	0.00	222,566.17
Report Summary									
Grand Totals:			Gross	Discount	No-Pay	Net			
			222,566.17	0.00	0.00	222,566.17			

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 701452

MCKESSON

STATEMENT

As of: 11/03/2023

Page: 002

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

Company: 8000

DC: 8115

As of: 11/03/2023
Mail to:

Page: 002
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory:

Customer: 632536
Date: 11/04/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536
Date: 11/04/2023

**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	
--------------	----------	-------------------	----------------------------------	-------------	---------------	----------------	-----	--------------	-----	-------------------	--

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 10,168.51 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/07/2017 2,451.97

If Paid By 11/07/2023,
Pay This Amount: 9,965.13 USD

If Paid After 11/07/2023,
Pay this Amount: 10,168.51 USD

Due If Paid On Time:
USD 9,965.13 ✓

Disc lost if paid late:
203.38

Due If Paid Late:
USD 10,168.51

Andrew De Los Santos
11/6/23

9,945.75 +
13.49 +
5.89 +

003

9,965.13

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 11/03/2023

Page: 002

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

Company: 8000

DC: 8115

As of: 11/03/2023
Mail to:

Page: 002
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: 7001

Customer: 256342
Date: 11/04/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 11/04/2023 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: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 10,148.73 USD

Future Due: 0.00

If Paid By 11/07/2023,
Pay This Amount:

9,945.75 USD

Due If Paid On Time:
USD 9,945.75 ✓
Disc lost if paid late:
202.98

Past Due: 0.00

If Paid After 11/07/2023,
Pay this Amount:

10,148.73 USD

Due If Paid Late:
USD 10,148.73

Last Payment 10/30/2023 6,745.20

Andrew D. Santos
11/6/23

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 11/03/2023

Page: 001

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

Company: 8000

DC: 8115

As of: 11/03/2023
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: 7001

Customer: 256342
Date: 11/04/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 11/04/2023 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											
10/30/2023	11/07/2023	7454323719	93661081	115Invoice	16.03	801.74		785.71	✓	7454323719	
10/30/2023	11/07/2023	7454323720	93661081	115Invoice	4.09	204.40		200.31	✓	7454323720	
10/30/2023	11/07/2023	7454323721	93697788	115Invoice	95.92	4,795.93		4,700.01	✓	7454323721	
10/30/2023	11/07/2023	7454339833	93798291	115Invoice	0.84	42.07		41.23	✓	7454339833	
10/30/2023	11/07/2023	7454536568	93574170	195Invoice	1.99	99.27		97.28	✓	7454536568	
10/30/2023	11/07/2023	7454536569	93584283	115Invoice	0.04	1.90		1.86	✓	7454536569	
10/31/2023	11/07/2023	7454664666	93841715	115Invoice	0.01	0.63		0.62	✓	7454664666	
10/31/2023	11/07/2023	7454830394	93832690	195Invoice	0.02	0.95		0.93	✓	7454830394	
10/31/2023	11/07/2023	7454830395	93735936	115Invoice	0.01	0.32		0.31	✓	7454830395	
11/01/2023	11/07/2023	7454952902	93912007	115Invoice		0.16		0.16	✓	7454952902	
11/01/2023	11/07/2023	7454952903	94004003	115Invoice	15.96	798.13		782.17	✓	7454952903	
11/01/2023	11/07/2023	7454952905	94004003	115Invoice	2.41	120.69		118.28	✓	7454952905	
11/01/2023	11/07/2023	7455112613	93994893	195Invoice	1.10	54.90		53.80	✓	7455112613	
11/01/2023	11/07/2023	7455176843	89390331	115Invoice	2.36	117.99		115.63	✓	7455176843	
11/02/2023	11/07/2023	7455227251	94072692	115Invoice	0.02	0.82		0.80	✓	7455227251	
11/02/2023	11/07/2023	7455227252	94141290	115Invoice	47.93	2,396.55		2,348.62	✓	7455227252	
11/02/2023	11/07/2023	7455227254	94141290	115Invoice	1.54	76.91		75.37	✓	7455227254	
11/02/2023	11/07/2023	7455390783	94147955	195Invoice		0.10		0.10	✓	7455390783	
11/03/2023	11/07/2023	7455499658	94263445	115Invoice		0.16		0.16	✓	7455499658	
11/03/2023	11/07/2023	7455499659	94263445	115Invoice	0.01	0.32		0.31	✓	7455499659	
11/03/2023	11/07/2023	7455499660	94334101	115Invoice	12.67	633.32		620.65	✓	7455499660	
11/03/2023	11/07/2023	7455499661	94347172	115Invoice	0.03	1.47		1.44	✓	7455499661	

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 11/03/2023

Page: 001

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

Company: 8000

DC: 8115

As of: 11/03/2023
Mail to:

Page: 001
Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 7001

Customer: 835434
Date: 11/04/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835434
Date: 11/04/2023
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	
Customer Number 835434 CVS PHCY 8923/MEM MC PHS											
11/01/2023	11/07/2023	7454960639	2796834	115Invoice	0.28	13.77		13.49	✓	7454960639	

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: 13.77 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 10/23/2023 10,510.49

If Paid By 11/07/2023,
Pay This Amount: 13.49 USD

If Paid After 11/07/2023,
Pay this Amount: 13.77 USD

Due If Paid On Time: 13.49 ✓
USD
Disc lost if paid late: 0.28
Due If Paid Late: 13.77
USD

Andrew De los Santos
11/6/23

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 11/03/2023

Page: 001

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 7001

Customer: 835438

Date: 11/04/2023

As of: 11/03/2023
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 PLEASE CHECK ANY
Date: 11/04/2023 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 835438 CVS PHCY 7475/MEM MC PHS												
11/01/2023	11/07/2023	7455131759		2796835	115Invoice	0.12	6.01		5.89 ✓		7455131759	

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: 6.01 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 10/30/2023 6,745.20

If Paid By 11/07/2023,
Pay This Amount: 5.89 USD

If Paid After 11/07/2023,
Pay this Amount: 6.01 USD

Due If Paid On Time: 5.89 ✓
USD
Disc lost if paid late: 0.12
Due If Paid Late: 6.01
USD

Andrew DeLosSantos
11/6/23

APPROVED ON

NOV 07 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:
MEMORIAL MEDICAL CENTER - TX
815 NORTH VIRGINIA
PORT LAVACA TX 77979-3025

Remit To:
AMERISOURCEBERGEN
PO Box 978526
DALLAS TX 75397-8526

Customer Number	100055589 / 037086553
Terms	Semi-Monthly Due in 10 days ✓
Summary	
Not Yet Due:	0.00
Current:	0.00
Past Due:	3,570.64
Total Due:	3,570.64
Account Balance:	3,570.64

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
03-23-2023	08-25-2021	A128852	080521RETjh	Customer Document	(7,003.16)	08-07-2021	855.80	(7,858.96)
10-04-2023	10-25-2023	3149392510	20231004jh	Invoice	11,429.60		0.00	11,429.60

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
0.00	11,429.60	0.00	0.00	0.00	0.00	(7,858.96)

Thank You for Your Payment

Date	Payment Number	Amount
10-16-2023	201093	(356.40)

Reminders

Due Date	Amount
08-25-2021	(7,858.96)
10-25-2023	11,429.60
Total Due:	3,570.64 ✓

Andrew D. Santos
11/6/23

APPROVED ON
NOV 07 2023
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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	Customer Number 100135284 / 037028186 Terms Sat - Fri Due in 7 days ✓ Summary Not Yet Due: 0.00 Current: 730.83 Past Due: 0.00 Total Due: 730.83 Account Balance: 730.83
Remit To: AMERISOURCEBERGEN PO Box 905223 CHARLOTTE NC 28290-5223		

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
10-30-2023	11-10-2023	3152191117	7004542634	Invoice	3.09		0.00	3.09
10-30-2023	11-10-2023	3152191118	7004553016	Invoice	134.73		0.00	134.73
10-30-2023	11-10-2023	3152191119	7004553489	Invoice	127.44		0.00	127.44
10-30-2023	11-10-2023	3152299791	7004569676	Invoice	246.72		0.00	246.72
10-31-2023	11-10-2023	3152480838	7004577367	Invoice	4.09		0.00	4.09
11-01-2023	11-10-2023	3152642301	7004585952	Invoice	174.13		0.00	174.13
11-02-2023	11-10-2023	3152780681	7004595434	Invoice	6.67		0.00	6.67
11-03-2023	11-10-2023	3152953502	7004604810	Invoice	33.96		0.00	33.96

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
730.83	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
11-03-2023	(371.62)

Reminders	
Due Date	Amount
11-10-2023	730.83
Total Due: 730.83	

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Andrew De la Santa

11/6/23

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

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

<input type="checkbox"/>	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	####	ENTER:	<input type="text"/>
<input type="checkbox"/>	"ENTER YOUR 4-DIGIT PIN"	####		<input type="text"/>
<input type="checkbox"/>	"MAKE A PAYMENT, PRESS 1"			<input type="text" value="1"/>
<input type="checkbox"/>	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★		<input type="text" value="941"/> #
<input type="checkbox"/>	"IF FEDERAL TAX DEPOSIT ENTER 1"			<input type="text" value="1"/>
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING YEAR"	★		<input type="text" value="23"/>
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★		<input type="text" value="03"/>
	1ST QTR - 03 (MARCH) - Jan, Feb, Mar			
	2ND QTR - 06 (JUNE) - Apr, May, June			
	3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept			
	4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec			
<input type="checkbox"/>	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★		<input type="text" value="\$ 117,623.43"/> #
	"1 TO CONFIRM"			<input type="text" value="1"/>
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0		<input type="text" value="\$ 60,500.26"/> #
	"ENTER W/CENTS AMOUNT OF MEDICARE"			<input type="text" value="\$ 14,612.09"/> #
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"			<input type="text" value="\$ 42,511.08"/> #
<input type="checkbox"/>	"6-DIGIT SETTLEMENT DATE"	★		<input type="text"/>
	"1 TO CONFIRM"			<input type="text" value="1"/>
<input type="checkbox"/>	ACKNOWLEDGEMENT NUMBER			<input type="text"/>

CALLED IN BY:	<input type="text"/>
CALLED IN DATE:	<input type="text"/>
CALLED IN TIME:	<input type="text"/>

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

ENTER VOID CKS AS NEGATIVE NUMBERS

	10/20/2023 11/2/2023 11/10/2023	VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: BEGIN	10/20/2023					
PAY PERIOD: END	11/2/2023					
PAY DATE:	11/10/2023					
GROSS PAY:	\$ 535,263.20			\$ -		\$ 535,263.20
DEDUCTIONS:						
A/R	\$ 250.00					\$ 250.00
ADVANC						\$ -
BOOTS						\$ -
SUNLIFE CRITICAL ILLNESS	\$ 1,206.28					\$ 1,206.28
SUNLIFE ACCIDENT	\$ 786.88					\$ 786.88
IRS TAX	\$ 175.45					\$ 175.45
SUNLIFE SHORT TERM DIS	\$ 1,915.54					\$ 1,915.54
BCBS VISION	\$ 1,032.38					\$ 1,032.38
CAFÉ-D	\$ 1,598.09					\$ 1,598.09
CAFÉ-H	\$ 23,088.95					\$ 23,088.95
	\$ -					\$ -
	\$ -					\$ -
CAFÉ-P						\$ -
CANCER						\$ -
CHILD	\$ 570.69					\$ 570.69
CLINIC						\$ -
COMBIN	\$ 271.83					\$ 271.83
CREDUN						\$ -
DENTAL						\$ -
DEP-LF						\$ -
SUNLIFE TERM LIFE	\$ 1,035.60					\$ 1,035.60
SUNLIFE HOSP INDEM	\$ 739.47					\$ 739.47
FED TAX	\$ 42,511.08					\$ 42,511.08
FICA-M	\$ 7,265.04					\$ 7,265.04
FICA-O	\$ 30,250.13					\$ 30,250.13
FICA-M ADDITIONAL	\$ 82.01					\$ 82.01
FIRST C						\$ -
FLEX S	\$ 3,309.33					\$ 3,309.33
FLX-FE						\$ -
GIFT S	\$ 354.39					\$ 354.39
GRP-IN						\$ -
GTL						\$ -
HOSP-I						\$ -
LEGAL	\$ 1,015.04					\$ 1,015.04
OTHER	\$ 1,253.98					\$ 1,253.98
NATIONAL FARM LIFE	\$ 1,523.92					\$ 1,523.92
MED SURCHARGE	\$ 360.00					\$ 360.00
PR FIN						\$ -
RELAY						\$ -
REPAY						\$ -
STONEDF	\$ 1,115.86					\$ 1,115.86
STONE						\$ -
STONE 2						\$ -
STUDEN						\$ -
TSA-R	\$ 36,970.19					\$ 36,970.19
UW/HOS						\$ -
TOTAL DEDUCTIONS:	\$ 158,682.13	\$ -	\$ -	\$ -	\$ -	\$ 158,682.13
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**
NET PAY:	\$ 376,581.07	\$ -	\$ -	\$ -	\$ -	\$ 376,581.07
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**
TOTAL CAFÉ 125 PLAN:	\$ 34,228.76	Less Exempt:				
TAXABLE PAY:	\$ 501,034.44	\$ 487,905.39				

	CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45% \$ 7,265.00		
FICA - MED (EE)	1.45% \$ 7,265.00	\$ 7,265.04	\$ (0.04)
FICA - SOC SEC (ER)	6.20% \$ 30,250.13		
FICA - SOC SEC (EE)	6.20% \$ 30,250.13	\$ 30,250.13	\$ -
FED WITHHOLDING	\$ 42,511.08	\$ 42,511.08	

Employees over FICA-SS Cap:

Roshanda Thomas	\$ 9,112.45
Michael Gaines	\$ 4,016.60
	\$ -

Paycode S - Employee Reimb.:

TOTAL: \$ 13,129.05

TAX DEPOSIT:	\$ 117,541.34	\$ 117,541.42
FICA - MEDICARE	2.90% \$ 14,530.00	\$ 14,530.08
FICA - SOCIAL SECURITY	12.40% \$ 60,500.26	\$ 60,500.26
FED WITHHOLDING	\$ 42,511.08	\$ 42,511.08
TOTAL TAX:	\$ 117,541.34	\$ 117,541.42

PREPARED BY: Andrie Flores
 PREPARED DATE: 11/6/2023

Final Summary

*-- Pay Code Summary				*-- Deductions Summary			
PayCd	Description	Hrs	OT SH WE HC CB	Gross	Code	Amount	
1	REGULAR PAY-S1	9852.00	N N N	237773.66	A/R	250.00	A/R2 A/R3
1	REGULAR PAY-S1	2031.00	N N N N	98586.99	ADVANC		AWARDS BCBSVI 1032.38 ✓
1	REGULAR PAY-S1	312.25	Y N N	11222.00	BOOTS		CAFE H CAFE-1
2	REGULAR PAY-S2	2730.50	N N N	74416.26	CAFE-2		CAFE-3 CAFE-4
2	REGULAR PAY-S2	177.75	Y N N	7306.16	CAFE-5		CAFE-C CAFE-D 1598.09 ✓
2	REGULAR PAY-S2	2.25	Y N N N	54.00	CAFE-F		CAFE-H 23088.95 CAFE-I
3	REGULAR PAY-S3	1555.25	N N N	54797.89	CAFE-L		CAFE-P CANCER
3	REGULAR PAY-S3	82.00	Y N N	4017.13	CHILD	570.69	CLINIC COMEIN 271.83 ✓
4	CALL BACK PAY	34.00	N 1 N N Y	1547.00	CREDUN		DC ADV DENTAL
4	CALL BACK PAY	29.50	N 2 N N Y	1200.71	DEP-LF		DIS-LF EAT
4	CALL BACK PAY	4.00	N 3 N N Y	169.07	EATGSH		FEDTAX 42511.08 FICA-M 7347.05 ✓
4	CALL BACK PAY	.25	Y 1 N N Y	15.77	FICA-O	30250.13	FIRSTC FLEX S 3309.33 ✓
4	CALL BACK PAY	.50	Y 2 N N Y	25.17	FLX FE		FORT D FUTA
C	CALL PAY	2215.50	N 1 N N	4431.00	GIFT S	354.39	GRANT GRP-IN
D	DOUBLE TIME	15.00	N 2 N N	1209.23	GTL		HOSP-I ID TPT
D	DOUBLE TIME	31.00	N 3 N N	2585.61	IRSTAX	175.45	LEAF LEGAL 200.54 ✓
E	EXTRA WAGES		N N N N	40.00	MASA	814.50	MEALS 1253.98 METVIS
E	EXTRA WAGES		N 1 N N N	2181.25	MISC		MISC/ MMCSHR
I	INSERVICE	7.00	N 1 N N	282.79	KATFML	1523.92	OTHER PHI
J	JURY LEAVE	54.00	N 1 N N	1853.22	PHI***		PR FIN RELAY
K	EXTENDED-ILLNESS-BANK	89.00	N 1 N N	1808.57	REPAY		SAMS SCRUBS
P	PAID-TIME-OFF	80.00	N N N N	1390.40	SIGNON		ST-TX STONDF 1115.86 ✓
P	PAID-TIME-OFF	1054.00	N 1 N N	26846.32	STONE		STONE2 STUDEN
X	CALL PAY 2	64.00	N 1 N N	128.00	SUNACC	786.88	SUNILL 1206.28 SUNIND 739.47 ✓
t	PHONE & DATA		N N N N	1375.00	SUNLIF	1035.60	SUNSTD 1915.54 SUNVIS
					SURCHG	360.00	TSA-1 TSA-2
					TSA-C		TSA-P TSA-R 36970.19 ✓
					TUTION		UNIFOR UW/HOS

*----- Grand Totals: 20420.75 ----- (Gross: 535263.20 ✓ Deductions: 158682.13 ✓ Net: 376581.07 ✓)
| Checks Count:- FT 206 PT 14 Other 36 Female 230 Male 25 Credit OverAmt 14 ZeroNet Term Total: 255 |

Andrew DeLoe Lenta
11/6/23

Run Date: 11/06/23
Time: 10:15

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 10/20/23--11/02/23 Run: 1
Type-NET 10000001 OPERATING - PROSPERITY

Page 1
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
02135	NORMA ALLISON	1203.70	00063353	11/10/23
65865	MARIA F LEDEZMA	825.69	00063354	11/10/23
63127	KELVIN JUAREZ	148.69	00063355	11/10/23
00041	CARL LEE KING	991.92	DD	11/10/23
00083	SYLVIA A VARGAS	2034.42	DD	11/10/23
00094	SYLVIA A MENDOZA	1001.44	DD	11/10/23
00113	JACLYN CARREON	1414.76	DD	11/10/23
00132	SANDRA A BRAUN	831.52	DD	11/10/23
00192	BRENDA D PENA	1481.42	DD	11/10/23
00344	SANDRA LEE RUDDICK	3062.83	DD	11/10/23
00387	BILLIE F DUCKWORTH	2841.07	DD	11/10/23
00392	MONICA T CARR	1317.80	DD	11/10/23
00399	LINDA J TIJERINA	2334.29	DD	11/10/23
00401	VELMA J PINA	1692.17	DD	11/10/23
00417	SHERRY L KING	2552.95	DD	11/10/23
00423	DONN V STRINGO	1964.57	DD	11/10/23
00482	PAM FIKAC	1469.18	DD	11/10/23
00581	CYNTHIA L RUSHING	1732.90	DD	11/10/23
00681	RILLA RENEE WOOD	1673.54	DD	11/10/23
00692	DEBORAH E WITTEBERT	211.66	DD	11/10/23
00697	MARIA C FARIAS	1200.90	DD	11/10/23
00707	KIMBERLY RESENDEZ	1784.49	DD	11/10/23
00895	EMILIE DIANE WILKEY	696.59	DD	11/10/23
01015	SUSAN B SMALLEY	2671.47	DD	11/10/23
01191	SHARON M SPARKS	518.02	DD	11/10/23
01234	JENISE N SVETLIK	2275.82	DD	11/10/23
01241	MANDY MACE	1964.73	DD	11/10/23
01367	MARILYN A SANDERS	604.56	DD	11/10/23
01451	JENNIFER L ZISSA	400.75	DD	11/10/23
01791	RAUSHANAH J MONDAY	1731.73	DD	11/10/23
02011	ERIN R CLEVINGER	3839.50	DD	11/10/23
02014	AGAPITA C CANTU	706.25	DD	11/10/23
02021	ERIKA OSORNIA-SANCHEZ	1981.37	DD	11/10/23
02022	AMANDA J GRIGGS, OTR	2551.86	DD	11/10/23
02064	ANNA LAURA GARCIA	1673.14	DD	11/10/23
02099	TRACI M SHEFCIK	2851.46	DD	11/10/23
02112	LESLIE THOMAS	3673.78	DD	11/10/23
02132	JASMINE RUIZ	1729.83	DD	11/10/23
02136	TAMMY ESQUIVEL	351.21	DD	11/10/23
02154	JUSTINE STRELCTZYK	1146.35	DD	11/10/23
02168	JENSICA KNIGHT	2530.01	DD	11/10/23
02193	TIKI VENGLAR	1720.47	DD	11/10/23
02202	SENON I SANCHEZ	78.12	DD	11/10/23
02271	DAWN J BUBENIK	2319.00	DD	11/10/23
02301	NICOLAS TIJERINA	1197.74	DD	11/10/23
02303	CONNIE M LUNA	2420.65	DD	11/10/23
02315	NINA M GREEN	2323.26	DD	11/10/23
02331	JESSICA B BIFFLE	787.64	DD	11/10/23
02346	JEANNETTE L FALCON	1872.64	DD	11/10/23
02416	JANELLE SCOTT	1858.25	DD	11/10/23
02511	MAGDALENA SEPULVEDA	689.79	DD	11/10/23
02535	STEFANIE M SOLIZ	801.00	DD	11/10/23
02552	VERONICA RAGUSIN	2004.09	DD	11/10/23

Run Date: 11/06/23
Time: 10:15

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 10/20/23--11/02/23 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 2
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
02622	JESUSA MARIE BENAVIDES	1089.77	DD	11/10/23
02678	MELISSA NESLONEY	2219.68	DD	11/10/23
02685	JULIANA TORRES	238.61	DD	11/10/23
02701	RONDA DAWNELLE GOHLKE	3731.00	DD	11/10/23
02719	DAWN M MCCLELLAND	1991.47	DD	11/10/23
02720	ELDA M LUERA	1959.37	DD	11/10/23
02733	ROBIN N PLEDGER	2019.25	DD	11/10/23
02735	ZANDRA A GARCIA	370.45	DD	11/10/23
02763	JESSICA MARQUEZ	1751.53	DD	11/10/23
02794	HEATHER L MUTCHLER	2042.06	DD	11/10/23
02812	BRITTANY N RUDDICK	2068.13	DD	11/10/23
02907	MARIA F LONGORIA	1325.35	DD	11/10/23
02927	MICHAEL L GAINES	3268.90	DD	11/10/23
02963	DOROTHY J RENDON	853.57	DD	11/10/23
02970	DIANNE G ATKINSON	2233.66	DD	11/10/23
03864	JACQUELINE R HERRERA	1414.13	DD	11/10/23
05003	COURTNE D THURLKILL	3225.92	DD	11/10/23
05006	REGINA A MARTINEZ	2407.15	DD	11/10/23
05122	MARISSA RANGEL	838.56	DD	11/10/23
05345	ERICA NGUYEN	1144.80	DD	11/10/23
05641	AMANDA R KEY	2066.27	DD	11/10/23
05757	SHARON T HOLDER	1591.57	DD	11/10/23
07123	CYNTHIA GUERRA	1619.11	DD	11/10/23
07147	CHAD A VORCE	2132.17	DD	11/10/23
07878	DIANA C SAUCEDA	1150.82	DD	11/10/23
11197	CATHERINE A SAENZ	1940.62	DD	11/10/23
11412	COURTNEY L MORKOVSKY	426.02	DD	11/10/23
12011	KIMBERLY J REYNA	982.51	DD	11/10/23
12115	LISA J HINOJOSA	993.12	DD	11/10/23
12129	MICHAEL HERMES	1809.60	DD	11/10/23
15097	KYLE L DANIEL	3178.94	DD	11/10/23
15131	SAVANNAH HARLEY	2159.12	DD	11/10/23
15139	KRISTEN NICOLE BALLARD	2183.24	DD	11/10/23
15163	KELSEY HEINOLD	3878.80	DD	11/10/23
15171	JESSICA BARRON	1596.68	DD	11/10/23
15286	DAWN M MAREK	2140.88	DD	11/10/23
15555	STEPHANIE MARTIN	398.59	DD	11/10/23
15909	JULIE NGUYEN	2538.89	DD	11/10/23
15915	BRIANNE J KEY	2684.84	DD	11/10/23
20112	YULMA PATRICA RODRIGUEZ	398.37	DD	11/10/23
20156	ERIN ASHLEY WISDOM	1782.56	DD	11/10/23
20169	JOSHUA PEPPERS	1569.29	DD	11/10/23
20178	AMY GARCIA	3415.41	DD	11/10/23
20184	MELISSA ZAMORANO	840.75	DD	11/10/23
20206	KELLI B GOFF	2152.64	DD	11/10/23
20207	SHAWNA G HARTL	2503.06	DD	11/10/23
20243	MELANIE CORTEZ	2207.26	DD	11/10/23
20272	ANGELA YEAGER	2063.88	DD	11/10/23
20290	DELORISE CAMPBELL	985.20	DD	11/10/23
20294	JESSICA D WALTHER	914.81	DD	11/10/23
20324	PATRICIA STRIBLEY	2443.34	DD	11/10/23
20343	SAVANNAH N SOCARRAS	331.53	DD	11/10/23
20456	SAYDI A ST CLAIR	372.38	DD	11/10/23
20484	BRIANNA S PASSMORE	546.35	DD	11/10/23

Run Date: 11/06/23
Time: 10:15

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 10/20/23--11/02/23 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 3
F2DISTP

Num.	Name	Amount	CHECK NUM	DATE
20759	JAMIE SADLER	805.27	DD	11/10/23
20788	JAYLIN RAMIREZ	637.33	DD	11/10/23
20797	BETHANN M DIGGS	2197.91	DD	11/10/23
20977	CHERYL L TESCH	1904.54	DD	11/10/23
20980	SAVANA LENTO	628.59	DD	11/10/23
21450	DIANA E LEAL	1587.61	DD	11/10/23
21629	JACOBY R CRAWFORD	1634.05	DD	11/10/23
22618	HEATHER L LOPEZ	865.81	DD	11/10/23
28034	KRISTINA A BUENGER	586.58	DD	11/10/23
28120	JESSICA V SELVERA	1110.44	DD	11/10/23
29199	KELLY A SCHOTT	2257.07	DD	11/10/23
31035	STACIE L EPLEY	1712.03	DD	11/10/23
31054	LORA L LAMBDEN	955.91	DD	11/10/23
31219	LAUREN PHILLIPS	1535.35	DD	11/10/23
31241	MONICA SALAZAR	618.19	DD	11/10/23
31251	CYNTHIA L BIAS	2079.62	DD	11/10/23
31313	KATHERINE LYNN JIMENEZ	1981.09	DD	11/10/23
31319	STACY L FARMER	1815.29	DD	11/10/23
31463	EDWARD E MATULA	2552.17	DD	11/10/23
31508	RACHEL A HEFFNER	2015.67	DD	11/10/23
31821	KAYLA M ALVAREZ	1629.92	DD	11/10/23
38118	KRYSTELLA F KISIAH	1079.49	DD	11/10/23
38188	MADELINE ANDERSON	1042.97	DD	11/10/23
41112	ANASTASIA L PEREZ	700.62	DD	11/10/23
41171	TOMMIE M TREVINO	803.07	DD	11/10/23
41219	GUADALUPE OLANDEZ	830.66	DD	11/10/23
41225	LESLIE A CRAIGEN	1357.54	DD	11/10/23
41236	PAMELA K VANNOY	1543.41	DD	11/10/23
41251	SARA YBARBO	773.12	DD	11/10/23
41261	BERNICE AGUILAR	836.55	DD	11/10/23
41269	BERENICE LUGO	743.60	DD	11/10/23
41274	KAREN GANN	1215.09	DD	11/10/23
41279	PAMELA R HARMON	851.54	DD	11/10/23
41347	ADRIANNA D STRAKOS	788.34	DD	11/10/23
41418	ANGEL M CASSEL	904.91	DD	11/10/23
41426	TASHA NORMAN	3504.70	DD	11/10/23
41506	JOSEFAT LUGO TORRES	762.13	DD	11/10/23
41612	SONJA A GUAJARDO	1126.72	DD	11/10/23
41617	JACQUELINE M MARTINEZ	881.22	DD	11/10/23
41896	RENAE MICHELLE EMERY	668.08	DD	11/10/23
41897	ROXANNA MUNOZ	889.89	DD	11/10/23
41901	JUANITA R MILLER	1304.59	DD	11/10/23
41953	KAYLENN TREVINO	826.18	DD	11/10/23
42106	CHRISTY SILVAS	967.32	DD	11/10/23
42112	SOCORRO C GONZALES	946.19	DD	11/10/23
42122	LEI ANA CHAVANA	1747.19	DD	11/10/23
42125	LUCY CALZADA	863.28	DD	11/10/23
42304	MIMI T NGUYEN	2187.78	DD	11/10/23
42536	MARIAH A SOCARRAS	623.26	DD	11/10/23
42820	MARIA D CHAVEZ	920.78	DD	11/10/23
42842	SHANNA S C DONNELL	3283.75	DD	11/10/23
48680	JESSICA BUSH	152.36	DD	11/10/23
50018	MICHELLE M MORALES	1437.16	DD	11/10/23
50148	PENNY GOULDEN	3382.78	DD	11/10/23

Run Date: 11/06/23
Time: 10:15

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 10/20/23--11/02/23 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 4
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
50161	BRITTNEY MICHELLE ZAMORA	804.96	DD	11/10/23
50250	SUMMER E NICHOLSON	732.88	DD	11/10/23
50282	JACOB W HAMILTON, PT, DPT	2585.46	DD	11/10/23
50310	JASMINE GRIGSBY	830.39	DD	11/10/23
50546	MELANIE K SAMAYOA	2101.37	DD	11/10/23
50573	DEANA R DAVIS	1657.56	DD	11/10/23
50596	BETTY S DAVIS	1908.62	DD	11/10/23
50719	DEBRA K MUSTERED	2313.01	DD	11/10/23
50928	ADINA RODRIGUEZ	718.40	DD	11/10/23
53541	JACLYN B HARTL	1623.40	DD	11/10/23
54024	MONICA A ESCALANTE	1125.00	DD	11/10/23
55025	LEA C RESENDEZ	1416.65	DD	11/10/23
55026	IRENE B PEREZ	809.16	DD	11/10/23
55127	APRIL N KUBALA, PT, DPT	2787.62	DD	11/10/23
55371	BLANCA HERNANDEZ	410.48	DD	11/10/23
55382	SHANNON JACILDO	447.80	DD	11/10/23
55658	LAJUAN WILKE	789.06	DD	11/10/23
58115	BECKY MARIE SALINAS	84.35	DD	11/10/23
58510	RITA L POLENSKY	880.05	DD	11/10/23
60112	ROBERT A RODRIQUEZ	1987.46	DD	11/10/23
60131	NORA OVALLE	518.38	DD	11/10/23
60156	DANIELLE M KALISEK	1005.39	DD	11/10/23
60165	TERESA A BENITEZ	1896.01	DD	11/10/23
60587	NANCI S GARCIA	819.55	DD	11/10/23
60589	JASON J LOYA	1119.36	DD	11/10/23
60616	DOROTHY A LONGORIA	878.16	DD	11/10/23
62322	ALAN KNIGHT	1663.69	DD	11/10/23
63124	SANJUAN M GARCIA	1011.67	DD	11/10/23
63193	MICHAEL SOCARRAS	1098.83	DD	11/10/23
63458	VIRGINIA C BERNARDINO	948.52	DD	11/10/23
65100	FELICITA BONUZ	664.62	DD	11/10/23
65125	MARTHA CUMPEAN	845.15	DD	11/10/23
65127	VERONICA ORTIZ	739.30	DD	11/10/23
65136	TINA KORANEK	1161.66	DD	11/10/23
65148	MARTA INIGUEZ	757.16	DD	11/10/23
65151	ELIA OLACHIA	1051.24	DD	11/10/23
65168	NORA MIRELES	695.64	DD	11/10/23
65189	ELVIRA SANCHEZ	730.80	DD	11/10/23
65205	JUANA SANTILLAN	714.82	DD	11/10/23
65213	LEE SIMERLY	1318.00	DD	11/10/23
65269	NATALIE BAREFIELD	966.85	DD	11/10/23
65315	ELVA RODRIGUEZ	819.36	DD	11/10/23
65393	RAMONA A PEREZ	1145.73	DD	11/10/23
65453	AMALIA L FLORES	1347.35	DD	11/10/23
65463	MARIA I VELOZ	783.35	DD	11/10/23
65486	ROSA RODRIGUEZ	863.70	DD	11/10/23
65513	MARIA MORALES	996.04	DD	11/10/23
65705	DOMITILA HERRERA	1026.85	DD	11/10/23
65715	MARIA R GOMEZ	931.20	DD	11/10/23
68368	DOMITILA GARCIA	97.62	DD	11/10/23
68568	CHRISTOPHER RUTHERFORD	904.15	DD	11/10/23
68792	NAZARIO DIAZ HERNANDEZ	2116.01	DD	11/10/23
70119	SARA N BLEDSOE	2432.00	DD	11/10/23
72727	CHRISANDRA LYNN KOVAREK	68.28	DD	11/10/23

Run Date: 11/06/23
Time: 10:15

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 10/20/23--11/02/23 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 5
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
73749	GLORIA N REID	2313.24	DD	11/10/23
74159	CAROL VILLARREAL	1297.67	DD	11/10/23
75190	RIKA MILLER	2063.71	DD	11/10/23
76003	IRMA DELEON	733.32	DD	11/10/23
76115	JENNIFER R CARLOCK	741.90	DD	11/10/23
76120	RACHEL CANALES	1310.63	DD	11/10/23
76138	KAREN D GARCIA	753.43	DD	11/10/23
76210	ZOE VILLARREAL	316.86	DD	11/10/23
76300	AIDA JIMENEZ	1104.05	DD	11/10/23
76313	PAMELA L BARTON	840.42	DD	11/10/23
76403	KATRINA A POKLUDA	1277.95	DD	11/10/23
76647	CHERYL A SEE	1300.12	DD	11/10/23
76706	GREGORY E MORALES	720.66	DD	11/10/23
76854	MARY PATTERSON	975.96	DD	11/10/23
76985	VANESSA TRISTAN	298.66	DD	11/10/23
77646	FAREN A GONZALES	1086.75	DD	11/10/23
78020	MISTY R PASSMORE	1629.04	DD	11/10/23
78058	KYANN J POWER	231.09	DD	11/10/23
78072	DONNA M RAWLINGS	1453.66	DD	11/10/23
78128	ALEXA QUINTANILLA	970.20	DD	11/10/23
78287	MARISSA D ALMANZAR	1922.54	DD	11/10/23
78336	JESSICA L GLOVER	1595.57	DD	11/10/23
78566	MELISSA K GEE	853.03	DD	11/10/23
78764	ASHLEY D HADLEY	2083.39	DD	11/10/23
78781	KRISTEN R MACHICEK	2645.73	DD	11/10/23
78787	FARAH I JANAK	2822.80	DD	11/10/23
78897	DAYLE J ROBINSON	636.22	DD	11/10/23
80008	ADAM D BESIO	2741.17	DD	11/10/23
80141	JEANNIE ORTA	1851.26	DD	11/10/23
80928	BRYAN HOBGOOD	1675.08	DD	11/10/23
82227	CAITLIN A CLEVINGER	1211.59	DD	11/10/23
86482	MEGAN M HARPER	828.87	DD	11/10/23
86576	ELSA HERRERA	853.17	DD	11/10/23
88125	LISA M TREVINO	1210.77	DD	11/10/23
88148	MICHELLE CUMBERLAND	2187.39	DD	11/10/23
88321	ANDREW DE LOS SANTOS	2651.53	DD	11/10/23
88435	JOE GARCIA	1829.47	DD	11/10/23
90320	ROSHANDA S THOMAS	6374.24	DD	11/10/23
90929	STEVE BROCK	4949.10	DD	11/10/23
93231	ANDRIE M FLORES	1419.16	DD	11/10/23
98756	ADRIANNA M GALVAN	1675.87	DD	11/10/23

376581.07

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- Oct 30, 2023 - Nov 5, 2023**

Date	Bank Description	MMC Notes	Amount	CPSI "Handwritten Check" #
11/3/2023	PAY PLUS ACHTrans 000000005645011 1010006946	- 3rd Party Payor Fee	\$ 53.29 ✓	
11/3/2023	MERCHANT BANKCD FEE 971160910883 91000014767	- Credit Card Processing Fee	\$ 9.95 ✓	Pay Plus
11/3/2023	MERCHANT BANKCD FEE 971160913887 91000014767	- Credit Card Processing Fee	\$ 185.80 ✓	53-29
11/3/2023	MERCHANT BANKCD INTERCHNG 971160913887 910000	- Credit Card Processing Fee	\$ 206.18 ✓	142-10
11/3/2023	MERCHANT BANKCD DISCOUNT 971160913887 910000	- Credit Card Processing Fee	\$ 321.01 ✓	80-76
11/3/2023	MERCHANT BANKCD DISCOUNT 971160910883 910000	- Credit Card Processing Fee	\$ 19.95 ✓	13-55
11/3/2023	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	\$ 371.62 *	39-77
11/2/2023	PAY PLUS ACHTrans 000000005479155 1010006930	- 3rd Party Payor Fee	\$ 142.14 ✓	322-01 *
11/2/2023	AUTHNET GATEWAY BILLING 132279748 1040000171	- 3rd Party Payor Fee	\$ 32.20 ✓	CC Fees
11/1/2023	PAY PLUS ACHTrans 000000005367381 1010006918	- 3rd Party Payor Fee	\$ 80.76 ✓	9-95
11/1/2023	HARLAND CLARKE CHK ORDERS 143J408702212R5 91	- Deposit Book Operating	\$ 52.00 ✓	185-80
10/31/2023	PAY PLUS ACHTrans 000000005323020 1010006905	- 3rd Party Payor Fee	\$ 13.55 ✓	206-18
10/31/2023	MCKESSON DRUG AUTO ACH ACH05720141 910000182	- 340B Drug Program Expense	\$ 6,745.20 *	321-01
10/31/2023	DEBTMGMTSERVICES PAYMENT 0000 41036041588828	- Wage Garnishment	\$ 328.67 ✓	19-95
10/30/2023	PAY PLUS ACHTrans 000000005186504 1010006992	- 3rd Party Payor Fee	\$ 39.77 ✓	742-89
10/30/2023	IRS USATAXPYMT 270370324377955 6103601003658	- Payroll Taxes	\$ 128,227.83 *	Auth Gateway
			136,829.92 ✓	32-20

* Approved 11/1/23 cc
** Approved 10/25/23 cc

Andrew De Los Santos
ANDREW DE LOS SANTOS
Memorial Medical Center

November 6, 2023

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

Date	Description	Amount	Handwritten
	** 128(227.83) = 0 ICI 136-829.92	136-829.92	
	128(227.83) =	371.62	
	22-32 =	21745-20	
	difference in Payroll liabilities	1-485-27	
		1-485-27	
		1-485-27	
		0-00	

Andrew De Los Santos
ANDREW DE LOS SANTOS
Memorial Medical Center

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

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

<input type="checkbox"/>	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"		1/5/2017 1/12/2017	ENTER:	<input type="text"/>
<input type="checkbox"/>	"ENTER YOUR 4-DIGIT PIN"				<input type="text"/>
<input type="checkbox"/>	"MAKE A PAYMENT, PRESS 1"				<input type="text" value="1"/>
<input type="checkbox"/>	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★			<input type="text" value="941"/> #
<input type="checkbox"/>	"IF FEDERAL TAX DEPOSIT ENTER 1"				<input type="text" value="1"/>
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING YEAR"	★			<input type="text" value="23"/>
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★			<input type="text" value="03"/>
	1ST QTR - 03 (MARCH) - Jan, Feb, Mar				
	2ND QTR - 06 (JUNE) - Apr, May, June				
	3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept				
	4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec				
<input type="checkbox"/>	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★			<input type="text" value="\$ 128,227.83"/> #
	"1 TO CONFIRM"				<input type="text" value="1"/>
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"			0	<input type="text" value="\$ 63,587.34"/> #
	"ENTER W/CENTS AMOUNT OF MEDICARE"				<input type="text" value="\$ 15,290.02"/> #
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"				<input type="text" value="\$ 49,350.47"/> #
					<input type="text" value="\$ -"/>
<input type="checkbox"/>	"6-DIGIT SETTLEMENT DATE"	CHECK ★			<input type="text"/>
	"1 TO CONFIRM"				<input type="text" value="1"/>
<input type="checkbox"/>	ACKNOWLEDGEMENT NUMBER				<input type="text"/>

CALLED IN BY:
CALLED IN DATE:
CALLED IN TIME:

Memorial Medical Center
Transfer Request

Amount: 3,467.50

From Account: Operating- *4357

To Account: US BANCORP FSA/HRA/DC ACCT ACCT

Account Number: 158300195894

Routing Number: 122235821

Explanation:
Invoice numbers: 5700867, 5730303, 5747465, 5763704, 5795222

Requested by: Caitlin Clevenger

Date: 11/6/2023

Authorized by: Andrew DeLeon Santos

Date: 11/6/23

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

783.92 +
130.68 +
562.18 +
685.28 +
1,305.44 +
3,467.50 *

HealthEquity WageWorks

INVOICE

To: Memorial Medical Center
 PO Box 25
 Port Lavaca TX 77979 ✓

WageWorks, Inc.
 4609 Regent Blvd.
 Irving, TX 75063
 214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
 FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821

Please include invoice # in your payment addenda for ACH
 Credit or Wire payment.

Log on to our employer website to view detailed invoice
 reports: employer.wageworks.com

Account #	Invoice Date
2052366	10/02/2023
PO #	DUE DATE
	01/01/2024 ✓
Invoice #	AMOUNT DUE
INV5700867	\$783.92

Description	Plan Code	Amount
Visa Card Payments - HCFSA 2023	HCFSA2023	783.92 ✓

Total Amount Due

*P.D.
11/6/23*

\$783.92 ✓

HealthEquity WageWorks

INVOICE

To: Memorial Medical Center ✓
 PO Box 25
 Port Lavaca TX 77979

WageWorks, Inc.
 4609 Regent Blvd.
 Irving, TX 75063
 214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
 FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821

Please include invoice # in your payment addenda for ACH Credit or Wire payment.

Log on to our employer website to view detailed invoice reports: employer.wageworks.com

Account #	Invoice Date
2052366	10/10/2023
PO #	DUE DATE
	01/08/2024 ✓
Invoice #	AMOUNT DUE
INV5730303	\$130.68

Description	Plan Code	Amount
Visa Card Payments - HCFSA 2023	HCFSA2023	130.68 ✓

AD
 11/6/23

Total Amount Due

\$130.68 ✓

INVOICE

To: Memorial Medical Center ✓
 PO Box 25
 Port Lavaca TX 77979

WageWorks, Inc.
 4609 Regent Blvd.
 Irving, TX 75063
 214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
 FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821

Please include invoice # in your payment addenda for ACH Credit or Wire payment.

Log on to our employer website to view detailed invoice reports: employer.wageworks.com

Account #	Invoice Date
2052366	10/16/2023
PO #	DUE DATE
	01/15/2024 ✓
Invoice #	AMOUNT DUE
INV5747465	\$562.18

Description	Plan Code	Amount
Visa Card Payments - HCFA 2023	HCFA2023	562.18 ✓

Handwritten: 0.0.
11/6/23

Total Amount Due

\$562.18 ✓

HealthEquity WageWorks

INVOICE

To: Memorial Medical Center ✓
 PO Box 25
 Port Lavaca TX 77979

WageWorks, Inc.
 4609 Regent Blvd.
 Irving, TX 75063
 214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
 FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821

Please include invoice # in your payment addenda for ACH Credit or Wire payment.

Log on to our employer website to view detailed invoice reports: employer.wageworks.com

Account #	Invoice Date
2052366	10/23/2023
PO #	DUE DATE
	01/22/2024 ✓
Invoice #	AMOUNT DUE
INV5763704	\$685.28

Description	Plan Code	Amount
PMB Payments - HCFA 2023	HCFA2023	176.24
Visa Card Payments - HCFA 2023	HCFA2023	509.04

h.d.
 11/6/23

Total Amount Due

\$685.28 ✓

HealthEquity[®] WageWorks

INVOICE

To: Memorial Medical Center ✓
 PO Box 25
 Port Lavaca TX 77979

WageWorks, Inc.
 4609 Regent Blvd.
 Irving, TX 75063
 214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
 FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821

Please include invoice # in your payment addenda for ACH
 Credit or Wire payment.

Log on to our employer website to view detailed invoice
 reports: employer.wageworks.com

Account #	Invoice Date
2052366	10/30/2023
PO #	DUE DATE
	01/29/2024 ✓
Invoice #	AMOUNT DUE
INV5795222	\$1,305.44

Description	Plan Code	Amount
Visa Card Payments - HCFA 2023	HCFA2023	1,305.44 ✓

Total Amount Due

G.D.
11/6/23

\$1,305.44 ✓

Wire Transfer

- COUNTY OF CALHOUN TEXAS



Wire Details

Transaction Number
Recurring Frequency One-Time Payment
Template Name WAGeworks
Amount USD 3,467.50
Debit Account 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 11/09/2023

Originator Information

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

Beneficiary / Payee Information

Name HEALTHEQUITY
Beneficiary ID Type Account Number
Beneficiary ID
Address 1 WAGeworks, INC
Address 2
Address 3
Beneficiary Country US
Contact Name
Phone Number

Beneficiary Bank Information

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

Additional Reference Information

Purpose Of Payment October Invoices

Additional Information For Beneficiary INV5700867, INV5730303, INV5747465, INV5795222

Status History

Timestamp	Status	Initiator	Description
Nov 9, 2023 8:09:56 AM CST	Created	fmckissack (MELISSA MCKISSACK)	Wire Created.

M 11/9/23

RECEIVED BY THE COUNTY AUDITOR ON

NOV 02 2023

CALHOUN COUNTY, TEXAS

11/02/2023

14:16

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

11832 BROADMOOR AT CREEKSIDE PARK ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102523		10/31/20	10/25/20	11/25/20		1,000.00	0.00	0.00	1,000.00 ✓

TRANSFER *Net insurance payment deposited into MMC operating.* ✓

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
11832		BROADMOOR AT CREEKSIDE PARK	1,000.00	0.00	0.00	1,000.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,000.00	0.00	0.00	1,000.00

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL# 201509

RECEIVED BY THE
COUNTY AUDITOR ON

NOV 02 2023

11/02/2023

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

11824 THE CRESCENT ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102523		10/31/20	10/25/20	11/25/20		2,200.00	0.00	0.00	2,200.00 ✓
	TRANSFER								
102623		10/31/20	10/26/20	11/26/20		1,400.00	0.00	0.00	1,400.00 ✓
	TRANSFER								
103023		10/31/20	10/30/20	11/30/20		600.00	0.00	0.00	600.00 ✓
	TRANSFER								

NH insurance payment deposited into MML operating

Vendor Totals Number Name

Gross Discount No-Pay Net

11824 THE CRESCENT

4,200.00 0.00 0.00 4,200.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,200.00	0.00	0.00	4,200.00

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL# 201512

RECEIVED BY THE
COUNTY AUDITOR ON

NOV 02 2023

11/02/2023
CALHOUN COUNTY, TEXAS
14:13

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

Vendor#	Vendor Name	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE ✓	102023		10/31/20	10/20/20	11/25/20		995.82	0.00	0.00	995.82 ✓
		102423A	TRANSFER	10/31/20	10/24/20	11/25/20		2,734.80	0.00	0.00	2,734.80 ✓
		102523A	TRANSFER	10/31/20	10/25/20	11/25/20		6,268.95	0.00	0.00	6,268.95 ✓
		102623A	TRANSFER	10/31/20	10/26/20	11/26/20		2,497.30	0.00	0.00	2,497.30 ✓
		102623B	TRANSFER	10/31/20	10/26/20	11/26/20		1,042.81	0.00	0.00	1,042.81 ✓
		102623	TRANSFER	10/31/20	10/26/20	11/26/20		532.12	0.00	0.00	532.12 ✓
Vendor Totals								Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE							14,071.80	0.00	0.00	14,071.80

NH insurance payment deposited into MMC operating

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	14,071.80	0.00	0.00	14,071.80

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL#201510

RECEIVED BY THE
COUNTY AUDITOR ON

NOV 02 2023

14:10

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Class Pay Code

12696 GULF POINTE PLAZA ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
102523		10/31/20	10/25/20	11/25/20		220.85	0.00	0.00	220.85 ✓
103023	TRANSFER	10/31/20	10/30/20	11/30/20		23.02	0.00	0.00	23.02 ✓
	TRANSFER	"	"	"		"	"	"	" ✓
103123		10/31/20	10/31/20	11/30/20		145.11	0.00	0.00	145.11 ✓
	TRANSFER	"	"	"		"	"	"	" ✓

NH insurance payment deposited into MMC opening

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12696	GULF POINTE PLAZA	388.98	0.00	0.00	388.98

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	388.98	0.00	0.00	388.98

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CLH 201511

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NOV 02 2023

11/02/2023
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
101923A		10/31/20	10/19/20	11/24/20		12,960.00	0.00	0.00	12,960.00 ✓
	TRANSFER	<i>NH insurance payment deposited into MMC openly</i>							
101923		10/31/20	10/19/20	11/25/20		3,182.14	0.00	0.00	3,182.14 ✓
	TRANSFER	<i>"</i>							
102423A		10/31/20	10/24/20	11/25/20		2,100.00	0.00	0.00	2,100.00 ✓
	TRANSFER	<i>"</i>							

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE		18,242.14	0.00	0.00	18,242.14

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	18,242.14	0.00	0.00	18,242.14

APPROVED ON

NOV 02 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CLF 2/15/23

8

RUN DATE:11/07/23
 TIME:15:09

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 11/08/23 THRU 11/08/23

PAGE 1
 GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	201442	11/08/23	1,488.01	AMAZON CAPITAL SERVICES
A/P	201443	11/08/23	87.00	AMBU INC
A/P	201444	11/08/23	17,414.00	AMERICAN PROFICIENCY INSTITUTE
A/P	201445	11/08/23	60.50	AQUA BEVERAGE COMPANY
A/P	201446	11/08/23	397.52	ASPEN SURGICAL PRODUCTS INC
A/P	201447	11/08/23	594.00	AZALEA HEALTH
A/P	201448	11/08/23	552.04	BAYER HEALTHCARE
A/P	201449	11/08/23	9,382.88	BECKMAN COULTER INC
A/P	201450	11/08/23	1,460.50	BEYER MECHANICAL LTD
A/P	201451	11/08/23	34,977.26	BIOMERIEUX, INC
A/P	201452	11/08/23	222,566.17	BLUE CROSS BLUE SHIELD
A/P	201453	11/08/23	39.25	BOSART LOCK & KEY INC
A/P	201454	11/08/23	164.05	CALHOUN COUNTY
A/P	201455	11/08/23	5,280.00	CALHOUN COUNTY EMS
A/P	201456	11/08/23	.00	VOIDED
A/P	201457	11/08/23	4,793.64	CARDINAL HEALTH 414, INC.
A/P	201458	11/08/23	76,814.36	CDW GOVERNMENT, INC.
A/P	201459	11/08/23	29.10	CENTRAL DRUG
A/P	201460	11/08/23	75.00	CHRIS KOVAREK
A/P	201461	11/08/23	1,776.54	DEWITT POTH & SON
A/P	201462	11/08/23	650.00	DOWELL PEST CONTROL
A/P	201463	11/08/23	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	201464	11/08/23	.00	VOIDED
A/P	201465	11/08/23	17,365.44	FISHER HEALTHCARE
A/P	201466	11/08/23	25.82	FRONTIER
A/P	201467	11/08/23	3,550.95	GLOBAL EQUIPMENT CO. INC.
A/P	201468	11/08/23	490.80	GRAINGER
A/P	201469	11/08/23	1,647.01	GULF COAST PAPER COMPANY
A/P	201470	11/08/23	451.05	HILL-ROM COMPANY, INC
A/P	201471	11/08/23	103.00	MARIEL MORENO
A/P	201472	11/08/23	427.00	MARTIN PRINTING CO
A/P	201473	11/08/23	.00	VOIDED
A/P	201474	11/08/23	.00	VOIDED
A/P	201475	11/08/23	.00	VOIDED
A/P	201476	11/08/23	.00	VOIDED
A/P	201477	11/08/23	.00	VOIDED
A/P	201478	11/08/23	.00	VOIDED
A/P	201479	11/08/23	.00	VOIDED
A/P	201480	11/08/23	53,147.53	MEDLINE INDUSTRIES INC
A/P	201481	11/08/23	220.97	MMC AUXILIARY GIFT SHOP
A/P	201482	11/08/23	.00	VOIDED
A/P	201483	11/08/23	17,712.18	MORRIS & DICKSON CO, LLC
A/P	201484	11/08/23	565.23	MXR IMAGING, INC
A/P	201485	11/08/23	85.27	NATUS MEDICAL INC
A/P	201486	11/08/23	388.90	OLYMPUS AMERICA INC
A/P	201487	11/08/23	164.91	ORTHO CLINICAL DIAGNOSTICS
A/P	201488	11/08/23	3,084.00	PARAREV
A/P	201489	11/08/23	1,335.00	POC ELECTRIC, LLC
A/P	201490	11/08/23	1,526.77	REPUBLIC SERVICES, INC.
A/P	201491	11/08/23	43,136.00	ROMERO BROTHERS CONSTRUCTION

RUN DATE:11/07/23
TIME:15:09

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/08/23 THRU 11/08/23

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GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	201492	11/08/23	11,337.64	SANOPI PASTEUR INC
A/P	201493	11/08/23	1,333.33	SIEMENS FINANCIAL SERVICES
A/P	201494	11/08/23	332.48	SMITHS MEDICAL ASD INC
A/P	201495	11/08/23	2,525.00	SOMETHING MORE MEDIA, INC.
A/P	201496	11/08/23	323.86	STERIS CORPORATION
A/P	201497	11/08/23	4,000.00	STEVE BROCK
A/P	201498	11/08/23	11,596.00	SUN LIFE FINANCIAL
A/P	201499	11/08/23	3,300.00	SURGICAL DIRECT SOUTH
A/P	201500	11/08/23	119.50	TELEFLEX MEDICAL
A/P	201501	11/08/23	500.00	TEXAS HHSC
A/P	201502	11/08/23	609.35	TMS SOUTH
A/P	201503	11/08/23	31.78	TRI WHOLESale CO.
A/P	201504	11/08/23	305.68	TRI-ANIM HEALTH SERVICES INC
A/P	201505	11/08/23	312.03	TRIOSE, INC
A/P	201506	11/08/23	6,416.84	UNIFIRST HOLDINGS INC
A/P	201507	11/08/23	7,710.00	WERFEN USA LLC
A/P	201508	11/08/23	22,369.75	BETHANY SENIOR LIVING
A/P	201509	11/08/23	1,000.00	BROADMOOR AT CREEKSIDE PARK
A/P	201510	11/08/23	14,071.80	GOLDENCREEK HEALTHCARE
A/P	201511	11/08/23	388.98	GULF POINTE PLAZA
A/P	201512	11/08/23	4,200.00	THE CRESCENT
A/P	201513	11/08/23	18,242.14	TUSCANY VILLAGE
A/P	201514	11/08/23	100.00	
A/P	201515	11/08/23	286.40	
A/P	201516	11/08/23	95.32	
A/P	201517	11/08/23	25.23	
A/P	201518	11/08/23	20.00	
A/P	201519	11/08/23	136.00	
A/P	201520	11/08/23	725.70	
TOTALS:			676,506.96	

Payables 380,683.47 +
Patient refunds 1,388.65 +
criticals < 222,566.17 +
NH Transfers 11,596.00 +
60,272.67 +
676,506.96 *

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CALHOUN COUNTY, TEXAS

Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 11/6/2023

Nursing Home	Account Number	Previous			ACH Transfer-in	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
		Beginning Balance	Transfer-Out	Transfer-in				
Ashford Gardens		65,260.72	65,160.72	94,202.56		94,302.56	94,020.19	
						Bank Balance		
						Variance		
						Leave in Balance	100.00	

Routing Information for Ashford Gardens:

October
November Interest 182.37

Broadmoor	3	82,605.63	82,505.63	50,462.86		50,562.86	35,031.68
						Bank Balance	
						Variance	
						Leave in Balance	100.00

- Molina Y5 ADJ 1 owed to MMC 11,299.47
- Molina Y5 ADJ 1 owed to Crescent 378.90
- Molina Y5 ADJ 1 owed to Solera 589.39
- Molina Y5 ADJ 1 owed to Tuscan 977.42
- Molina Y5 ADJ 1 owed to Ashford 1,411.10
- Molina Y5 ADJ 1 owed to Fort Bend 618.26

October
November Interest 156.64

Crescent		137,244.79	137,144.79	163,284.77		163,384.77	162,993.99
						Bank Balance	
						Variance	
						Leave in Balance	100.00

October
November Interest 290.78

Fort Bend		13,454.21	13,354.21	35,680.76		35,780.76	35,596.28
						Bank Balance	
						Variance	
						Leave in Balance	100.00

October
November Interest 84.48

Solera at W Houston		58,021.54	57,921.54	61,241.02		61,341.02	61,012.90
						Bank Balance	
						Variance	
						Leave in Balance	100.00

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

October
November Interest 228.12

Adjust Balance/Transfer Amt 61,012.90

94,020.19 +
 35,031.68 +
 162,993.99 +
 35,596.28 +
 61,012.90 +
 388,655.04

TOTAL TRANSFERS 388,655.04

Approved: Andrew De Los Santos
 ANDREW DE LOS SANTOS 11/6/2023

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
Ashford Gardens							
11/3/2023 MANAGEANDNET1718 MNS PMNT 0000000000093 41	5,040.00						5,040.00
11/3/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	43.47						43.47
11/2/2023 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	65,160.72						
11/1/2023 Deposit	14,162.89						14,162.89
11/1/2023 Deposit	7,923.66						7,923.66
11/1/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	36,526.84						36,526.84
11/1/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	2,392.50						2,392.50
10/31/2023 Added to Account	182.37						182.37
10/31/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	21,446.10						21,446.10
10/30/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242612	1,969.02						1,969.02
10/30/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	4,515.71						4,515.71
65,160.72	94,202.96						94,202.96
Broadmoor							
11/3/2023 HNB - ECHO HCCLAIMPMT 746003411 440000231393	22.75						22.75
11/3/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2	3,262.07						3,262.07
11/2/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III	82,505.63						
11/2/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384	10,000.00						10,000.00
11/1/2023 Deposit	2,652.16						2,652.16
11/1/2023 MANAGEANDNET1718 MNS PMNT 00000000004293 41	864.00						864.00
11/1/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242114	63.71						63.71
11/1/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	16,810.71						16,810.71
11/1/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	6,000.45						6,000.45
10/31/2023 Added to Account	156.64						156.64
10/31/2023 HNB - ECHO HCCLAIMPMT 746003411 440000202369	590.58						590.58
10/31/2023 UnitedHealthcare HCCLAIMPMT 746003411 910000	13.00						13.00
10/31/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	2,935.35						2,935.35
10/31/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	7,091.44						7,091.44
82,505.63	50,462.86						50,462.86
Crestant							
11/3/2023 HUMANA INS CO HCCLAIMPMT 33863077 8300005992	6,045.00						6,045.00
11/3/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2	12,291.31						12,291.31
11/3/2023 DEVOTED HEALTH P HCCLAIMPMT 21000027411307	9,450.00						9,450.00
11/3/2023 DEVOTED HEALTH P HCCLAIMPMT 21000027411305	722.00						722.00
11/3/2023 DEVOTED HEALTH P HCCLAIMPMT 21000027411303	4,950.00						4,950.00
11/2/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III	78,102.79						
11/2/2023 HNB - ECHO HCCLAIMPMT 746003411 440000282652	6,664.68						6,664.68
11/2/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384	4,100.00						4,100.00
11/2/2023 DEVOTED HEALTH P HCCLAIMPMT 21000029427637	6,300.00						6,300.00
11/2/2023 DEVOTED HEALTH P HCCLAIMPMT 21000029427639	22,950.00						22,950.00
11/1/2023 Deposit	11,098.75						11,098.75
11/1/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384	3,690.00						3,690.00
11/1/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	16,456.61						16,456.61
11/1/2023 NOVITAS SOLUTION HCCLAIMPMT 676323 420000161	6,826.23						6,826.23
11/1/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026485813	5,400.00						5,400.00
11/1/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026485815	5,850.00						5,850.00
10/31/2023 Added to Account	290.78						290.78
10/31/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384	6,970.00						6,970.00
10/31/2023 UnitedHealthcare HCCLAIMPMT 746003411 910000	117.00						117.00
10/31/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	3,273.90						3,273.90
10/31/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	3,892.65						3,892.65
10/31/2023 NOVITAS SOLUTION HCCLAIMPMT 676323 420000114	745.15						745.15
10/31/2023 HUMANA INS CO HCCLAIMPMT 33482983 8300005503	4,650.00						4,650.00
10/31/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026982572	8,097.86						8,097.86
10/30/2023	307 59,042.00						
10/30/2023 NOVITAS SOLUTION HCCLAIMPMT 676323 420000145	6,152.85						6,152.85
10/30/2023 DEVOTED HEALTH P HCCLAIMPMT 21000023376069	6,300.00						6,300.00
137,144.79	163,284.77						163,284.77
Fort Bend							
11/2/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III	13,354.21						
11/1/2023 Deposit	2,198.04						2,198.04
11/1/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	22,915.38						22,915.38
10/31/2023 Added to Account	84.48						84.48
10/31/2023 HNB - ECHO HCCLAIMPMT 746003411 440000203724	4,580.93						4,580.93
10/31/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	2,604.90						2,604.90
10/30/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242612	3,297.03						3,297.03
13,354.21	35,680.76						35,680.76
Solers at West Houston							
11/3/2023 HNB - ECHO HCCLAIMPMT 746003411 440000231393	4,410.45						4,410.45
11/3/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	1,767.30						1,767.30
11/3/2023 NOVITAS SOLUTION HCCLAIMPMT 676310 420000195	6,599.14						6,599.14
11/3/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	75.15						75.15
11/2/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III	57,921.54						
11/2/2023 HNB - ECHO HCCLAIMPMT 746003411 440000282654	2,646.27						2,646.27
11/1/2023 Deposit	2,064.69						2,064.69
11/1/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242114	9,909.79						9,909.79
11/1/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384	1,350.00						1,350.00
11/1/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	15,528.88						15,528.88
10/31/2023 Added to Account	228.12						228.12
10/31/2023 Deposit	7,211.40						7,211.40
10/31/2023 HNB - ECHO HCCLAIMPMT 746003411 440000202369	637.71						637.71
10/31/2023 HNB - ECHO HCCLAIMPMT 746003411 440000203747	882.09						882.09
10/31/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	6,391.63						6,391.63
10/31/2023 NOVITAS SOLUTION HCCLAIMPMT 676310 420000114	638.40						638.40
10/30/2023 UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384	900.00						900.00
57,921.54	61,241.02						61,241.02
TOTALS	356,086.89						404,871.97

Accounts

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DDA (15)

Prior Day Balance	Collected Balance	Available Balance	Current Balance
\$5,510,036.94	\$5,610,856.46	\$5,739,653.46	\$5,610,856.46

	Collected Balance	Available Balance	Collected Balance	Prior Day Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357	\$2,896,561.17	\$2,978,486.52	\$2,896,561.17	\$2,883,299.72
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365	\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373	\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381 ✓	\$94,302.56 ✓	\$94,302.56	\$94,302.56	\$89,219.04
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403 ✓	\$50,562.86 ✓	\$52,070.07	\$50,562.86	\$47,278.04
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411 ✓	\$163,384.77 ✓	\$166,390.29	\$163,384.77	\$129,926.46
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438 ✓	\$61,341.02 ✓	\$61,416.39	\$61,341.02	\$48,488.98
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446 ✓	\$35,780.76 ✓	\$35,780.76	\$35,780.76	\$35,780.76
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454	\$27,802.83	\$55,013.71	\$27,802.83	\$23,970.86
MMC -NH GULF POINTE PLAZA - PRIVATE PAY *5433	\$737.95	\$1,073.14	\$737.95	\$737.95
MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441	\$55,523.61	\$56,211.07	\$55,523.61	\$50,573.61
MMC -NH BETHANY SENIOR LIVING *5506	\$36,177.01	\$36,778.47	\$36,177.01	\$23,092.93
MMC -NH TUSCANY VILLAGE *3407	\$93,309.19	\$106,157.05	\$93,309.19	\$82,295.81
MMC -BETHANY SR LIVING - DACA *3660	\$100.00	\$100.00	\$100.00	\$100.00
MMC -MONEY MARKET FUND *2998	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 10/23/2023

Nursing Home	Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek		95,711.73	95,611.73	27,702.83		27,802.83	27,519.33
						Bank Balance	27,802.83
						Variance	-
						Leave in Balance	100.00
						October November Interest	183.50
						Adjust Balance/Transfer Amt	27,519.33

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

Approved: Andrew De los Santos
 ANDREW DE LOS SANTOS 11/6/2023

APPROVED ON
 NOV 07 2023
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Golden Creek

11/3/2023 TSYS/TRANSFIRST CR CD DEP 543684555876917 91
11/3/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
11/2/2023 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
11/2/2023 TSYS/TRANSFIRST CR CD DEP 543684555876917 91
11/1/2023 Deposit
10/31/2023 Added to Account
10/31/2023 GOLDEN CREEK HEALTH MERC DEP 1220356 9100001120
10/30/2023 GOLDEN CREEK HEALTH MERC DEP 1220356 9100001302

		MMC PORTION					
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
-	3,703.38	-	-	-	-	-	3,703.38
-	128.59	-	-	-	-	-	128.59
95,611.73	-	-	-	-	-	-	-
-	4,320.00	-	-	-	-	-	4,320.00
-	11,756.36	-	-	-	-	-	11,756.36
-	183.50	-	-	-	-	-	183.50
-	891.00	-	-	-	-	-	891.00
-	6,720.00	-	-	-	-	-	6,720.00
95,611.73	27,702.83	-	-	-	-	-	27,702.83

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Account Number

Account Nickname

All Accounts By Type

All Types

Collapse All

Sort: Display Name

DDA (15)

Prior Day Balance	Collected Balance	Available Balance	Current Balance
\$5,510,036.94	\$5,610,856.46	\$5,739,653.46	\$5,610,856.46

	Current Balance	Possible Balance	Overhead Balance	Prior Day Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357	\$2,896,561.17	\$2,978,436.62	\$2,896,561.17	\$2,883,299.72
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365	\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373	\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381	\$94,302.56	\$94,302.56	\$94,302.56	\$69,219.09
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403	\$50,562.86	\$52,670.07	\$50,562.86	\$47,278.04
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411	\$163,384.77	\$166,390.29	\$163,384.77	\$129,926.46
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438	\$61,341.02	\$61,416.39	\$61,341.02	\$48,488.98
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446	\$35,780.76	\$35,780.76	\$35,780.76	\$35,780.76
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454 ✓	\$27,802.83 ✓	\$55,013.71 ✓	\$27,802.83	\$23,970.86
MMC -NH GULF POINTE PLAZA - PRIVATE PAY *5433	\$737.95	\$1,073.14	\$737.95	\$737.95
MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441	\$55,523.61	\$56,211.67	\$55,523.61	\$50,573.61
MMC -NH BETHANY SENIOR LIVING *5506	\$36,177.01	\$36,778.47	\$36,177.01	\$23,032.93
MMC -NH TUSCANY VILLAGE *3407	\$93,309.19	\$106,157.05	\$93,309.19	\$82,295.81
MMC -BETHANY SR LIVING - DACA *3660	\$100.00	\$100.00	\$100.00	\$100.00
MMC -MONEY MARKET FUND *2998	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 11/6/2023

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		395.54	-	342.41			737.95	no transfer
						Bank Balance	737.95	
						Variance	-	
						Leave in Balance	100.00	

Adjust Balance/Transfer Amt 637.95

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		75,637.67	75,537.67	55,423.61			55,523.61	55,423.61
						Bank Balance	55,523.61	
						Variance	-	
						Leave in Balance	100.00	

Adjust Balance/Transfer Amt 55,423.61

TOTAL TRANSFERS 56,061.56

Routing Information for Gulf Pointe Plaza:

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

Approved: Andrew De Los Santos
 ANDREW DE LOS SANTOS 11/6/2023

APPROVED ON
 NOV 07 2023
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

11/1/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242114
 10/31/2023 Added to Account
 10/30/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242612

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
-	117.52	-	-	-	-	-	117.52
-	20.11	-	-	-	-	-	20.11
-	204.78	-	-	-	-	-	204.78
-	342.41	-	-	-	-	-	342.41

Gulf Pointe Plaza-Medicare/Medicaid

11/3/2023 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 11/2/2023 WIRE OUT HMG Rockport SNF, LP - Commerical
 11/1/2023 Deposit
 11/1/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242114
 10/31/2023 Added to Account
 10/31/2023 HNB - ECHO HCCLAIMPMT 746003411 440000203747
 10/30/2023 MERCHANT BANKCD DEPOSIT 496478518889 9100001

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
-	4,950.00	-	-	-	-	-	4,950.00
75,537.67	-	-	-	-	-	-	-
-	4,164.63	-	-	-	-	-	4,164.63
-	9,692.47	-	-	-	-	-	9,692.47
-	116.45	-	-	-	-	-	116.45
-	36,300.06	-	-	-	-	-	36,300.06
-	200.00	-	-	-	-	-	200.00
75,537.67	55,423.61	-	-	-	-	-	55,423.61
75,537.67	55,766.02	-	-	-	-	-	55,766.02

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All Types

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Collapse All

Sort: Display Name

DDA (15)

Prior Day Balance **\$5,510,036.94** Collected Balance **\$5,610,856.46** Available Balance **\$5,739,653.46** Current Balance **\$5,610,856.46**

	Current Balance	Available Balance	Prior Day Balance	Prior Day Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357	\$2,896,561.17	\$2,978,486.62	\$2,896,561.17	\$2,883,299.72
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365	\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373	\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381	\$94,302.56	\$94,302.56	\$94,302.56	\$89,219.09
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403	\$50,562.86	\$52,670.07	\$50,562.86	\$47,278.04
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411	\$163,384.77	\$166,390.29	\$163,384.77	\$129,926.46
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438	\$61,341.02	\$61,416.30	\$61,341.02	\$48,488.08
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446	\$35,780.76	\$35,780.76	\$35,780.76	\$35,780.76
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454	\$27,802.83	\$55,013.71	\$27,802.83	\$23,976.66
MMC -NH GULF POINTE PLAZA - PRIVATE PAY *5433 ✓	\$737.95 ✓	\$1,073.14 ✓	\$737.95	\$737.95
MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441 ✓	\$55,523.61 ✓	\$56,211.67 ✓	\$55,523.61	\$50,573.61
MMC -NH BETHANY SENIOR LIVING *5506	\$36,177.01	\$36,778.47	\$36,177.01	\$23,092.93
MMC -NH TUSCANY VILLAGE *3407	\$93,309.19	\$106,157.05	\$93,309.19	\$82,295.81
MMC -BETHANY SR LIVING - DACA *3660	\$100.00	\$100.00	\$100.00	\$100.00
MMC -MONEY MARKET FUND *2998	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35

Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 11/6/2023

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		213,109.86	213,009.86	36,077.01			36,177.01	35,844.76
						Bank Balance	36,177.01	
						Variance	36,177.01	
						Leave in Balance	100.00	
						October November Interest	232.25	
						Adjust Balance/Transfer Amt	35,844.76	

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 11/6/2023

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Bethany Senior Living

11/3/2023 Deposit
 11/3/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2
 11/2/2023 WIRE OUT PORT LAVACA NH, LLC
 11/1/2023 Deposit
 11/1/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242114
 10/31/2023 Added to Account
 10/31/2023 Deposit
 10/31/2023 HNB - ECHO HCCLAIMPMT 746003411 440000203748
 10/31/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	12,983.88	-	-	-	-	-	12,983.88
-	100.20	-	-	-	-	-	100.20
213,009.86	-	-	-	-	-	-	-
-	2,939.47	-	-	-	-	-	2,939.47
-	1,736.03	-	-	-	-	-	1,736.03
-	232.25	-	-	-	-	-	232.25
-	7,887.86	-	-	-	-	-	7,887.86
-	1,783.61	-	-	-	-	-	1,783.61
-	8,413.71	-	-	-	-	-	8,413.71
213,009.86	36,077.01	-	-	-	-	-	36,077.01

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Select View: All Accounts By Type | Select Type: All Types | Account Number: | Account Nickname: |

Collapse All

Sort: Display Name

DDA (15)

Prior Day Balance	Collected Balance	Available Balance	Current Balance
\$5,510,036.94	\$5,610,856.46	\$5,739,653.46	\$5,610,856.46

	Current Balance	Available Balance	Collected Balance	Prior Day Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357	\$2,896,561.17	\$2,978,486.62	\$2,896,561.17	\$2,883,299.72
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365	\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373	\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381	\$94,302.56	\$94,302.56	\$94,302.56	\$89,210.09
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403	\$50,562.86	\$52,670.07	\$50,562.86	\$47,278.04
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411	\$163,384.77	\$166,390.29	\$163,384.77	\$129,926.46
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438	\$61,341.02	\$61,416.33	\$61,341.02	\$48,488.98
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446	\$35,780.76	\$35,780.76	\$35,780.76	\$35,780.76
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454	\$27,802.83	\$55,013.71	\$27,802.83	\$23,970.66
MMC -NH GULF POINTE PLAZA - PRIVATE PAY *5433	\$737.95	\$1,073.14	\$737.95	\$737.95
MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441	\$55,523.61	\$56,211.67	\$55,523.61	\$50,573.61
MMC -NH BETHANY SENIOR LIVING *5506	\$36,177.01	\$36,778.47	\$36,177.01	\$23,092.93
MMC -NH TUSCANY VILLAGE *3407	\$93,309.19	\$106,157.05	\$93,309.19	\$82,295.61
MMC -BETHANY SR LIVING - DACA *3660	\$100.00	\$100.00	\$100.00	\$100.00
MMC -MONEY MARKET FUND *2998	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 11/6/2023

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
Tuscany Village		270,280.63	270,180.63	93,209.19	-	-	93,309.19	92,926.17
						Bank Balance Variance	93,309.19	
						Leave in Balance	100.00	
						October November Interest	283.02	
						Adjust Balance/Transfer Amt	92,926.17	

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 11/6/2023

APPROVED ON
 NOV 07 2023
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Tuscanv Village ✓

MMC PORTION

	Transfer-Out	Transfer-In	QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	NH PORTION
11/3/2023 HNB - ECHO HCCLAIMPMT 746003411 440000231393	-	11,013.38	-	-	-	-	-	11,013.38
11/2/2023 WIRE OUT LINBAR ENTERPRISES, LLC	270,180.63 ✓	-	-	-	-	-	-	-
11/2/2023 HNB - ECHO HCCLAIMPMT 746003411 440000282658	-	4,949.50	-	-	-	-	-	4,949.50
11/1/2023 Deposit	-	3,935.87	-	-	-	-	-	3,935.87
11/1/2023 HNB - ECHO HCCLAIMPMT 746003411 440000242114	-	1,256.49	-	-	-	-	-	1,256.49
10/31/2023 Added to Account	-	283.02	-	-	-	-	-	283.02
10/30/2023 Deposit	-	59,042.00	-	-	-	-	-	59,042.00
10/30/2023 NOVITAS SOLUTION HCCLAIMPMT 676201 420000145	-	12,728.93	-	-	-	-	-	12,728.93
	270,180.63 ✓	93,209.19 ✓	-	-	-	-	-	93,209.19 ✓

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Collapse All

Sort: Display Name

DDA (15)

Prior Day Balance	Collected Balance	Available Balance	Current Balance
\$5,510,036.94	\$5,610,856.46	\$5,739,653.46	\$5,610,856.46

	Current Balance	Available Balance	Collected Balance	Prior Day Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357	\$2,896,561.17	\$2,978,486.62	\$2,896,561.17	\$2,883,299.72
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365	\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373	\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381	\$94,302.56	\$94,302.56	\$94,302.56	\$89,219.09
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403	\$50,562.86	\$52,670.07	\$50,562.86	\$47,278.04
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411	\$163,384.77	\$166,390.29	\$163,384.77	\$129,926.46
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438	\$61,341.02	\$61,416.30	\$61,341.02	\$48,488.98
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446	\$35,780.76	\$35,780.76	\$35,780.76	\$35,780.76
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454	\$27,802.83	\$55,013.71	\$27,802.83	\$23,970.86
MMC -NH GULF POINTE PLAZA - PRIVATE PAY *5433	\$737.95	\$1,073.14	\$737.95	\$737.95
MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441	\$55,523.61	\$56,211.67	\$55,523.61	\$50,573.61
MMC -NH BETHANY SENIOR LIVING *5506	\$36,177.01	\$36,728.47	\$36,177.01	\$23,092.93
MMC -NH TUSCANY VILLAGE *3407 ✓	\$93,309.19	\$106,157.05	\$93,309.19	\$82,295.81
MMC -BETHANY SR LIVING - DACA *3660	\$100.00	\$100.00	\$100.00	\$100.00
MMC -MONEY MARKET FUND *2998	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35

Broadmoor

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Tuscany ✓

Date Requested: 11/6/2023

A _____

Y _____

E _____

E _____

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

\$ CK#000254 ✓ 977.42 ✓

FOR ACCT USE ONLY

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

AMOUNT: _____ G/L NUMBER: 10255040

EXPLANATION: Nursing home's portion of Molina Y5 Adjustment payment deposited to Broadmoor on ✓

4/21/2023

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: Andrew D. [Signature]

11/6/23

	Year 5 Adj 1	Molina Year 5 Adj 1- Comp 1	Molina Year 5 Adj 1- Comp 2	Molina Year 5 Adj 1- Comp 3	Molina Year 5 Adj 1- Comp	Molina Year 5 Adj 1- Comp 2 Non- Dispersed	NH Check requests
FORT BEND	\$ 2,132.56	\$ 896.04	\$ 242.82	\$ 273.17	\$ 51.50	\$ 669.03	\$ 618.26
ASHFORD	\$ 5,036.65	\$ 2,214.45	\$ 600.21	\$ 642.94	\$ 127.25	\$ 1,451.80	\$ 1,411.10
TUSCANY ✓	\$ 3,254.43	\$ 1,299.60	\$ 352.26	\$ 296.64	\$ 485.74	\$ 820.19	\$ 977.42 ✓
SOLERA	\$ 2,047.46	\$ 868.68	\$ 235.98	\$ 345.17	\$ 33.83	\$ 563.80	\$ 589.39
CRESCENT	\$ 1,494.80	\$ 737.01	\$ 200.07	\$ 89.69	\$ 28.73	\$ 439.30	\$ 378.90
BROADMOOR	\$ 1,700.69	\$ 916.56	\$ 116.48	\$ 213.64	\$ 35.87	\$ 418.14	\$ 392.07
GULF POINTE							
GOLDEN CREEK							
MMC							

deposited to MMC 5/19/23

WITHHOLD MMC CHECK REQ FOR
 \$ 15,666.59 \$ 11,299.47

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000254

88-2265/1131

Date 11-9-23

PAY

TO THE
ORDER OF

Tuscany

\$

977. ⁴²/₁₀₀

Nine hundred Seventy-seven dollars & ⁴²/₁₀₀

DOLLARS



**PROSPERITY
BANK**

County Auditor

FOR Molina 45 adjustment



County Treasurer
Security features included. Details on back.

Broadmoor

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
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E
Solera ✓

Date Requested: 11/6/2023

FOR ACCT USE ONLY

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

APPROVED ON

NOV 07 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT: \$ 589.39 ✓

G/L NUMBER: 10255040

CK#000253

EXPLANATION: Nursing home's portion of Molina Y5 Adjustment payment deposited to Broadmoor on

4/21/2023

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: Andrew DeBor

11/6/23

	Year 5 Adj 1	Molina Year 5 Adj 1- Comp 1	Molina Year 5 Adj 1- Comp 2	Molina Year 5 Adj 1- Comp 3	Molina Year 5 Adj 1- Comp	Molina Year 5 Adj 1- Comp 2 Non- Dispersed	NH Check requests
FORT BEND	\$ 2,132.56	\$ 896.04	\$ 242.82	\$ 273.17	\$ 51.50	\$ 669.03	\$ 618.26
ASHFORD	\$ 5,036.65	\$ 2,214.45	\$ 600.21	\$ 642.94	\$ 127.25	\$ 1,451.80	\$ 1,411.10
TUSCANY	\$ 3,254.43	\$ 1,299.60	\$ 352.26	\$ 296.64	\$ 485.74	\$ 820.19	\$ 977.42
SOLERA ✓	\$ 2,047.46	\$ 868.68	\$ 235.98	\$ 345.17	\$ 33.83	\$ 563.80	\$ 589.39 ✓
CRESCENT	\$ 1,494.80	\$ 737.01	\$ 200.07	\$ 89.69	\$ 28.73	\$ 439.30	\$ 378.90
BROADMOOR	\$ 1,700.69	\$ 916.56	\$ 116.48	\$ 213.64	\$ 35.87	\$ 418.14	\$ 392.07
GULF POINTE							
GOLDEN CREEK							
MMC							

deposited to MMC 5/19/23

WITHHOLD MMC CHECK REQ FOR
 \$ 15,666.59 \$ 11,299.47

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000253

88-2265/1131

Date 11-8-23

PAY
TO THE
ORDER OF

Solera

\$ 589. $\frac{39}{100}$

Five hundred eighty nine dollars & $\frac{39}{100}$

DOLLARS



PROSPERITY
BANK

country and/or

MP

FOR molina 45 adj

County Treasurer
Security features
included. Details on back.

Broadmoor

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Crescent ✓
A _____
Y _____
E _____
E _____

Date Requested: 11/6/2023

FOR ACCT USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept

APPROVED ON
NOV 07 2023

AMOUNT: \$ 378.90 ✓
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS ✓
CK#000252

G/L NUMBER: 10255040

EXPLANATION: Nursing home's portion of Molina Y5 Adjustment payment deposited to Broadmoor on

4/21/2023

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: Andrew Datas

11/6/23

	Year 5 Adj 1	Molina Year 5 Adj 1- Comp 1	Molina Year 5 Adj 1- Comp 2	Molina Year 5 Adj 1- Comp 3	Molina Year 5 Adj 1- Comp	Molina Year 5 Adj 1- Comp 2 Non- Dispersed	NH Check requests
FORT BEND	\$ 2,132.56	\$ 896.04	\$ 242.82	\$ 273.17	\$ 51.50	\$ 669.03	\$ 618.26
ASHFORD	\$ 5,036.65	\$ 2,214.45	\$ 600.21	\$ 642.94	\$ 127.25	\$ 1,451.80	\$ 1,411.10
TUSCANY	\$ 3,254.43	\$ 1,299.60	\$ 352.26	\$ 296.64	\$ 485.74	\$ 820.19	\$ 977.42
SOLERA	\$ 2,047.46	\$ 868.68	\$ 235.98	\$ 345.17	\$ 33.83	\$ 563.80	\$ 589.39
CRESCENT	\$ 1,494.80	\$ 737.01	\$ 200.07	\$ 89.69	\$ 28.73	\$ 439.30	\$ 378.90
BROADMOOR	\$ 1,700.69	\$ 916.56	\$ 116.48	\$ 213.64	\$ 35.87	\$ 418.14	\$ 392.07
GULF POINTE							
GOLDEN CREEK							
MMC							

deposited to MMC 5/19/23

WITHHOLD MMC CHECK REQ FOR
 \$ 15,666.59 \$ 11,299.47

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000252

88-2265/1131

Date 11-8-23

PAY
TO THE
ORDER OF

The Crescent

\$ 378. ⁹⁰/₁₀₀

Three hundred seventy-eight dollars $\frac{90}{100}$

DOLLARS



county auditor

FOR mailing us adj

county treasurer
Security features included. Details on back.

Broadmoor

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Ashford ✓
A _____
Y _____
E _____
E _____

Date Requested: 11/6/2023

FOR ACCT USE ONLY

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

APPROVED ON

NOV 07 2023

AMOUNT:

BY COUNTY AUDITOR ✓
CALHOUN COUNTY, TEXAS ✓
1,411.10 ✓
ck#000251

G/L NUMBER: 10255040

EXPLANATION:

Nursing home's portion of Molina Y5 Adjustment payment deposited to Broadmoor on ✓

4/21/2023

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew Santos

11/6/23

	Year 5 Adj 1	Molina Year 5 Adj 1- Comp 1	Molina Year 5 Adj 1- Comp 2	Molina Year 5 Adj 1- Comp 3	Molina Year 5 Adj 1- Comp	Molina Year 5 Adj 1- Comp 2 Non- Dispersed	NH Check requests
FORT BEND	\$ 2,132.56	\$ 896.04	\$ 242.82	\$ 273.17	\$ 51.50	\$ 669.03	\$ 618.26
ASHFORD	\$ 5,036.65	\$ 2,214.45	\$ 600.21	\$ 642.94	\$ 127.25	\$ 1,451.80	\$ 1,411.10
TUSCANY	\$ 3,254.43	\$ 1,299.60	\$ 352.26	\$ 296.64	\$ 485.74	\$ 820.19	\$ 977.42
SOLERA	\$ 2,047.46	\$ 868.68	\$ 235.98	\$ 345.17	\$ 33.83	\$ 563.80	\$ 589.39
CRESCENT	\$ 1,494.80	\$ 737.01	\$ 200.07	\$ 89.69	\$ 28.73	\$ 439.30	\$ 378.90
BROADMOOR	\$ 1,700.69	\$ 916.56	\$ 116.48	\$ 213.64	\$ 35.87	\$ 418.14	\$ 392.07
GULF POINTE							
GOLDEN CREEK							
MMC							

deposited to MMC 5/19/23

WITHHOLD MMC CHECK REQ FOR
 \$ 15,666.59 \$ 11,299.47

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000251

88-2265/1131

Date 11-8-23

PAY
TO THE
ORDER OF

Ashford

\$ 1,411. ¹⁰/₁₀₀

One thousand, four hundred eleven dollars & ¹⁰/₁₀₀

DOLLARS



PROSPERITY
BANK

county auditor

FOR Molina US adjustment



county treasurer
Security features are
included. Details on back.

Broadmoor

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E
Fort Bend ✓

Date Requested: 11/6/2023

FOR ACCT USE ONLY

Imprest Cash

A/P Check

Mail Check to Vendor

Return Check to Dept

APPROVED ON
NOV 07 2023

AMOUNT: 618.26 ✓
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK# 000755

G/L NUMBER: 10255040

EXPLANATION: Nursing home's portion of Molina Y5 Adjustment payment deposited to Broadmoor on ✓

4/21/2023

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: Andrew Debor Santos

11/6/23

	Year 5 Adj 1	Molina Year 5 Adj 1- Comp 1	Molina Year 5 Adj 1- Comp 2	Molina Year 5 Adj 1- Comp 3	Molina Year 5 Adj 1- Comp	Molina Year 5 Adj 1- Comp 2 Non- Dispersed	NH Check requests
FORT BEND ✓	\$ 2,132.56	\$ 896.04	\$ 242.82	\$ 273.17	\$ 51.50	\$ 669.03	\$ 618.26 ✓
ASHFORD	\$ 5,036.65	\$ 2,214.45	\$ 600.21	\$ 642.94	\$ 127.25	\$ 1,451.80	\$ 1,411.10
TUSCANY	\$ 3,254.43	\$ 1,299.60	\$ 352.26	\$ 296.64	\$ 485.74	\$ 820.19	\$ 977.42
SOLERA	\$ 2,047.46	\$ 868.68	\$ 235.98	\$ 345.17	\$ 33.83	\$ 563.80	\$ 589.39
CRESCENT	\$ 1,494.80	\$ 737.01	\$ 200.07	\$ 89.69	\$ 28.73	\$ 439.30	\$ 378.90
BROADMOOR	\$ 1,700.69	\$ 916.56	\$ 116.48	\$ 213.64	\$ 35.87	\$ 418.14	\$ 392.07
GULF POINTE							
GOLDEN CREEK							
MMC							

deposited to MMC 5/19/23

WITHHOLD MMC CHECK REQ FOR
 \$ 15,666.59 \$ 11,299.47

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000255

88-2265/1131

Date 11-8-23

PAY
TO THE
ORDER OF

Fort Bend

\$ 618. ²⁶/₁₀₀

Six hundred eighteen dollars & ²⁶/₁₀₀

DOLLARS



PROSPERITY
BANK

county auditor

FOR

Molina US adj

MP
County Treasurer
Security features are
included. Details on back

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000250

88-2265/1131

Date 11-8-23

PAY

**TO THE
ORDER OF**

MMC Operating

\$ 11,299. $\frac{47}{100}$

Eleven thousand, two hundred ninety-nine dollars & $\frac{47}{100}$

DOLLARS



**PROSPERITY
BANK**

county auditor

FOR

45 adjustment - Molina



County Treasurer
Security features are
included. Details on back.

Broadmoor

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E

Memorial Medical Center ✓

Date Requested: 11/6/2023

FOR ACCT USE ONLY

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

APPROVED ON

NOV 07 2023

AMOUNT:

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

✓
11,299.47 ✓

G/L NUMBER:

10255040

EXPLANATION:

MMCs portion of Molina Y5 Adjustment payment deposited to Broadmoor on 4/21/23 ✓

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew DeFos

11/6/23

	Year 5 Adj 1	Molina Year 5 Adj 1- Comp 1	Molina Year 5 Adj 1- Comp 2	Molina Year 5 Adj 1- Comp 3	Molina Year 5 Adj 1- Comp	Molina Year 5 Adj 1- Comp 2 Non- Dispersed	NH Check requests
FORT BEND	\$ 2,132.56	\$ 896.04	\$ 242.82	\$ 273.17	\$ 51.50	\$ 669.03	\$ 618.26
ASHFORD	\$ 5,036.65	\$ 2,214.45	\$ 600.21	\$ 642.94	\$ 127.25	\$ 1,451.80	\$ 1,411.10
TUSCANY	\$ 3,254.43	\$ 1,299.60	\$ 352.26	\$ 296.64	\$ 485.74	\$ 820.19	\$ 977.42
SOLERA	\$ 2,047.46	\$ 868.68	\$ 235.98	\$ 345.17	\$ 33.83	\$ 563.80	\$ 589.39
CRESCENT	\$ 1,494.80	\$ 737.01	\$ 200.07	\$ 89.69	\$ 28.73	\$ 439.30	\$ 378.90
BROADMOOR	\$ 1,700.69	\$ 916.56	\$ 116.48	\$ 213.64	\$ 35.87	\$ 418.14	\$ 392.07
GULF POINTE							
GOLDEN CREEK							
MMC							

deposited to MMC 5/19/23

WITHHOLD MMC CHECK REQ FOR
 \$ 15,666.59 \$ 11,299.47 ✓

0

RUN DATE:11/08/23
TIME:09:31

MEMORIAL MEDICAL CENTER
CHECK REGISTER
11/08/23 THRU 11/08/23

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHB 000250 11/08/23 11,299.47 ✓ MMC OPERATING
NHB 000251 11/08/23 1,411.10 ✓ ASHFORD
NHB 000252 11/08/23 378.90 ✓ CRESCENT
NHB 000253 11/08/23 589.39 ✓ SOLERA
NHB 000254 11/08/23 977.42 ✓ TUSCANY
NHB 000255 11/08/23 618.26 ✓ FORT BEND
TOTALS: 15,274.54

APPROVED ON

NOV 08 2023

BY COUNTY AUDITOR
GALHOUN COUNTY, TEXAS

U1064 UNIFIRST HOLDINGS INC
 PO BOX 650481 DALLAS, TX 75265-0481
 MEMORIAL MEDICAL CENTER - PORT LAVACA, TEXAS 77979

201441

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
2921007468	06/29/23	97.19			97.19
2921007472	06/29/23	213.06			213.06
2921007471	06/29/23	223.43			223.43
2921007469	06/29/23	1,973.27			1,973.27
2921007475	06/29/23	160.66			160.66
2921007473	06/29/23	196.35			196.35
2921007474	06/29/23	78.69			78.69
CHECK NO. 201441 11/06/23		TOTALS		TOTALS	2,942.65

MEMORIAL MEDICAL CENTER - PORT LAVACA, TEXAS 77979

201441

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
2921007468	06/29/23	97.19			97.19
2921007472	06/29/23	213.06			213.06
2921007471	06/29/23	223.43			223.43
2921007469	06/29/23	1,973.27			1,973.27
2921007475	06/29/23	160.66			160.66
2921007473	06/29/23	196.35			196.35
2921007474	06/29/23	78.69			78.69
CHECK NO. 201441		TOTALS		TOTALS	2,942.65

MEMORIAL
 MEDICAL  CENTER

Operating
 815 N. Virginia St.
 Port Lavaca, TX 77979

PROSPERITY BANK

88-2265
 1131

201441

U1064 201441
 DATE AMOUNT
 11/06/23 \$2,942.65

Two Thousand Nine Hundred Forty-Two Dollars and Sixty-Five Cents

PAY
 TO THE
 ORDER
 OF
 UNIFIRST HOLDINGS INC
 PO BOX 650481
 DALLAS, TX 75265-0481

CALHOUN COUNTY AUDITOR

CALHOUN COUNTY TREASURER



Dashboard

Request Stop Pay... X

Stop Payment Acti...

Request Stop Pay...

Request Stop Payment

Alerts (2)

Your stop payment request transaction number is STP-02385810



Reque

Company Name

COUNTY OF CALHOUN TEXAS

Contact Name

MELISSA MCKISSACK

Phone Number

(361)553-4620

Stop Request

Check	Date Written	Written to	Reason	Action
199931	07/12/2023	Unifirst Holdings Inc	Lost	Stop

Showing 1 check

T0383 ERIN CLEVINGER

MEMORIAL MEDICAL CENTER - PORT LAVACA, TEXAS 77979

201440

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
111722	11/17/22	34.38			34.38
CHECK NO. 201440 11/06/23		TOTALS		TOTALS	34.38
		34.38			34.38

MEMORIAL MEDICAL CENTER - PORT LAVACA, TEXAS 77979

201440

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
111722	11/17/22	34.38			34.38
CHECK NO. 201440		TOTALS		TOTALS	34.38
		34.38			34.38

MEMORIAL
MEDICAL CENTER

Operating
815 N. Virginia St.
Port Lavaca, TX 77979

PROSPERITY BANK

88-2265
1131

201440

T0383

201440

DATE

AMOUNT

11/06/23

\$34.38

Thirty-Four Dollars and Thirty-Eight Cents

PAY
TO THE
ORDER
OF
ERIN CLEVINGER

CALHOUN COUNTY AUDITOR

CALHOUN COUNTY TREASURER

Check
 Vendor#: T0383
 Check/DDeposit: 197299
 Date: 113022
 Amount: 34.38
 Bank: A/P
 Routing Number:
 Account Number:
 CS#: 0135
 Batch/Sequence: 0379 0016
 Trans Date: 113022
 Pay to the Order of: ERIN CLEVINGER
 Discount:
 St 1099 WH:
 Fed 1099 WH:

Invoices
 Amount: 34.38
 Discounts:
 Count: 1
 St 1099 WH:
 Fed 1099 WH:

Inv Number	Trans Dt	Batch-Seq	Inv Dt	Bank	Due Dt	Code	Amount	Discount
111722	221123	1350373-303	111722	A/P	113022		34.38	.00

Misplaced check.
 void & reissue

✓ reissued
 11/6