

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---January 17, 2024

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ 1,182,442.12

TOTAL TRANSFERS BETWEEN FUNDS \$ 48,321.89

TOTAL NURSING HOME UPL EXPENSES \$ 1,147,388.77

TOTAL INTER-GOVERNMENT TRANSFERS \$ -

GRAND TOTAL DISBURSEMENTS APPROVED January 17, 2024 \$ 2,378,152.78

APPROVED

JAN 17 2024

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---January 17, 2024

PAYABLES AND PAYROLL

1/11/2024 Weekly Payables	663,283.19
1/16/2024 McKesson-340B Prescription Expense	1,276.76
1/16/2024 Amerisource Bergen-340B Prescription Expense	1,005.90
1/16/2024 Payroll Liabilities -Payroll Taxes	125,655.54
1/16/2024 Payroll	384,391.79

Prosperity Electronic Bank Payments

1/10/2024 Credit Card & Lease Fees	4,282.05
1/19/2024 Sales Tax for December 2023	2,025.43
1/9/2024 Cleargage-Patient Financing Service	167.37
1/8-1/12/24 Pay Plus-Patient Claims Processing Fee	354.09

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ 1,182,442.12

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

1/11/2024 MMC Operating to Fort bend-correction of NH insurance payment deposited into MMC Operating	3,200.00
1/11/2024 MMC Operating to Crescent-correction of NH insurance payment deposited into MMC Operating in error	15,675.00
1/11/2024 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	5,581.48
1/11/2024 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating in error	23,144.20
1/11/2024 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	721.21

TOTAL TRANSFERS BETWEEN FUNDS \$ 48,321.89

NURSING HOME UPL EXPENSES

1/16/2024 Nursing Home UPL-Cantex Transfer	835,075.50
1/16/2024 Nursing Home UPL-Nexion Transfer	46,477.58
1/16/2024 Nursing Home UPL-HMG Transfer	83,643.92
1/16/2024 Nursing Home UPL-Tuscany Transfer	86,666.62
1/16/2024 Nursing Home UPL-HSL Transfer	47,388.87

NURSING HOME BANK FEES

1/12/2024 Ashford-Enhanced analysis fee	86.51
1/12/2024 Solera-Enhanced analysis fee	93.14

Nursing Home Electronic Bank Payments

1/10/2024 Bethany-returned check payment for resident	11,895.00
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QIPP CHECKS TO MMC

1/16/2024 Ashford	12,532.22
1/16/2024 Broadmoor	4,631.69
1/16/2024 Crescent	3,460.73
1/16/2024 Fort Bend	3,906.48
1/16/2024 Solera	3,747.07
1/16/2024 Tuscany	7,783.44

TOTAL NURSING HOME UPL EXPENSES \$ 1,147,388.77

TOTAL INTER-GOVERNMENT TRANSFERS \$ -

GRAND TOTAL DISBURSEMENTS APPROVED January 17, 2024 \$ 2,378,152.78

RECEIVED BY THE COUNTY AUDITOR ON 01/11/2024 13:12 JAN 11 2024

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 02/02/2024

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Vendor# Vendor Name Class Pay Code

14028	AMAZON CAPITAL SERVICES									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1J7F-HTFV-67QW		01/10/202	01/02/202	02/01/202			80.33	0.00	0.00	80.33

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
14028	AMAZON CAPITAL SERVICES	80.33	0.00	0.00	80.33

Vendor# Vendor Name Class Pay Code

15184	AMN HEALTHCARE PHYSICIAN									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
SINV182341		12/29/202	09/28/202	10/28/202			2,000.00	0.00	0.00	2,000.00

PROF OB FEE

SINV182678		12/29/202	10/26/202	11/26/202			2,000.00	0.00	0.00	2,000.00
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PROF OB FEE

SINV182952		12/29/202	11/28/202	12/28/202			16,000.00	0.00	0.00	16,000.00
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PLACEMENT FEE - Richard Francisco Mula - Enlace MD

SINV183010		12/29/202	11/28/202	12/28/202			2,000.00	0.00	0.00	2,000.00
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PROF OB FEE

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
15184	AMN HEALTHCARE PHYSICIAN	22,000.00	0.00	0.00	22,000.00

Vendor# Vendor Name Class Pay Code

11756	AYA HEALTHCARE INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
3549554		12/29/202	09/28/202	10/28/202			4,242.38	0.00	0.00	4,242.38

KARIANN DUNN 9/15-9/18/23 LVN

3830847		12/29/202	12/28/202	01/27/202			3,017.25	0.00	0.00	3,017.25
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K DUNN 12/19/-12/21/23 LVN

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11756	AYA HEALTHCARE INC	7,259.63	0.00	0.00	7,259.63

Vendor# Vendor Name Class Pay Code

B1150	BAXTER HEALTHCARE		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
81107691		12/26/202	11/20/202	12/15/202			518.55	0.00	0.00	518.55

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
B1150	BAXTER HEALTHCARE	518.55	0.00	0.00	518.55

Vendor# Vendor Name Class Pay Code

B1220	BECKMAN COULTER INC		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
111071148		01/10/202	01/02/202	01/27/202			2,721.12	0.00	0.00	2,721.12

SUPPLIES

111071449		01/10/202	01/02/202	01/27/202			106.73	0.00	0.00	106.73
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SUPPLIES

7353553		01/10/202	01/02/202	01/27/202			7,095.41	0.00	0.00	7,095.41
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SUPPLIES

1110702033		01/10/202	01/03/202	01/28/202			976.20	0.00	0.00	976.20
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SUPPLIES

111072762		01/10/202	01/03/202	01/28/202			3,301.58	0.00	0.00	3,301.58
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SUPPLIES

111075107		01/10/202	01/04/202	01/29/202			175.00	0.00	0.00	175.00
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SUPPLIES

111075986		01/10/202	01/04/202	01/29/202			982.35	0.00	0.00	982.35
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Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	SUPPLIES														
111078074						01/10/202	01/05/202	01/30/202			4,470.76	0.00	0.00	4,470.76	
	CONTRACT														
111082750						01/10/202	01/08/202	02/02/202			734.87	0.00	0.00	734.87	
	SUPPLIES														
Vendor Totals: Number Name											Gross	Discount	No-Pay	Net	
	B1220	BECKMAN COULTER INC									20,564.02	0.00	0.00	20,564.02	
Vendor#	Vendor Name	Class	Pay Code												
B1320	BEEKLEY CORPORATION	M													
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net					
MIN0055889		12/29/202	11/30/202	01/30/202			597.00	0.00	0.00	597.00					
	SUPPLIES														
Vendor Totals: Number Name											Gross	Discount	No-Pay	Net	
	B1320	BEEKLEY CORPORATION									597.00	0.00	0.00	597.00	
Vendor#	Vendor Name	Class	Pay Code												
11072	BIO-RAD LABORATORIES, INC														
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net					
906909728		12/29/202	12/21/202	01/10/202			1,521.21	0.00	0.00	1,521.21					
	SUPPLIES														
Vendor Totals: Number Name											Gross	Discount	No-Pay	Net	
	11072	BIO-RAD LABORATORIES, INC									1,521.21	0.00	0.00	1,521.21	
Vendor#	Vendor Name	Class	Pay Code												
C1048	CALHOUN COUNTY	W													
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net					
52811673		12/29/202	12/27/202	01/26/202			556.35	0.00	0.00	556.35					
52813163	ELECTRICITY	701 N Virginia St, Lulu 15-12/18/23						19.86	0.00	0.00	19.86				
52810500	ELECTRICITY	Hospital St OPL Lulu 15-12/18/23						32,552.70	0.00	0.00	32,552.70				
52811053	ELECTRICITY	Hospital St (Lulu 14-12/17/23)						1,324.65	0.00	0.00	1,324.65				
010924	ELECTRICITY	1016 N. Virginia St (Lulu 15-12/18/23)						150,000.00	0.00	0.00	150,000.00				
	LOAN PMT 7/18														
Vendor Totals: Number Name											Gross	Discount	No-Pay	Net	
	C1048	CALHOUN COUNTY									184,453.56	0.00	0.00	184,453.56	
Vendor#	Vendor Name	Class	Pay Code												
11295	CALHOUN COUNTY INDIGENT ACCOUN														
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net					
010824		01/09/202	01/08/202	01/09/202			10.00	0.00	0.00	10.00					
	INDIGENT COPAY														
Vendor Totals: Number Name											Gross	Discount	No-Pay	Net	
	11295	CALHOUN COUNTY INDIGENT ACCOUN									10.00	0.00	0.00	10.00	
Vendor#	Vendor Name	Class	Pay Code												
C1325	CARDINAL HEALTH 414, INC.	W													
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net					
8003390118		12/29/202	12/24/202	01/18/202			325.77	0.00	0.00	325.77					
	SUPPLIES														
Vendor Totals: Number Name											Gross	Discount	No-Pay	Net	
	C1325	CARDINAL HEALTH 414, INC.									325.77	0.00	0.00	325.77	
Vendor#	Vendor Name	Class	Pay Code												
C1992	CDW GOVERNMENT, INC.	M													
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net					
MV90420		12/01/202	11/02/202	12/02/202			63.53	0.00	0.00	63.53					
	SUPPLIES														
NP58549		12/26/202	12/14/202	01/13/202			2,975.16	0.00	0.00	2,975.16					

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
C1992	CDW GOVERNMENT, INC.	3,038.69	0.00	0.00	3,038.69

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
C1600	CITIZENS MEDICAL CENTER ✓		W	2013-16 ✓		12/29/202	12/31/202	01/31/202			51,348.56	0.00	0.00	51,348.56 ✓

CRNA COVERAGE DEC 23

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
C1600	CITIZENS MEDICAL CENTER	51,348.56	0.00	0.00	51,348.56

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10646	COVIDIEN ✓			5870688158 ✓		12/19/202	12/07/202	12/17/202			354.48	0.00	0.00	354.48 ✓

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10646	COVIDIEN	354.48	0.00	0.00	354.48

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
13932	COVIDIEN SALES LLC ✓			5870849378 ✓		01/10/202	01/01/202	01/10/202			491.50	0.00	0.00	491.50 ✓

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13932	COVIDIEN SALES LLC	491.50	0.00	0.00	491.50

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10006	CUSTOM MEDICAL SPECIALTIES ✓			312473 ✓		12/01/202	11/13/202	12/01/202			1,148.65	0.00	0.00	1,148.65 ✓

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10006	CUSTOM MEDICAL SPECIALTIES	1,148.65	0.00	0.00	1,148.65

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10060	DETAR HOSPITAL ✓		ICP	DTR2312021 ✓		01/10/202	01/02/202	01/15/202			695.12	0.00	0.00	695.12 ✓

LAB SERV

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10060	DETAR HOSPITAL	695.12	0.00	0.00	695.12

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10368	DEWITT POTH & SON ✓			713083-0 ✓		12/01/202	03/16/202	04/10/202			45.22	0.00	0.00	45.22 ✓

SUPPLIES

741264-0 ✓		01/10/202	01/02/202	01/27/202			404.34	0.00	0.00	0.00	404.34 ✓
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SUPPLIES

741263-0 ✓		01/10/202	01/02/202	01/27/202			588.14	0.00	0.00	0.00	588.14 ✓
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SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10368	DEWITT POTH & SON	1,037.70	0.00	0.00	1,037.70

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
11011	DIAMOND HEALTHCARE CORP			IN200056045 ✓		01/09/202	01/01/202	01/26/202			19,166.67	0.00	0.00	19,166.67 ✓

DEC 23 CPR

IN20056044 ✓		01/09/202	01/01/202	01/26/202			31,144.58	0.00	0.00	0.00	31,144.58 ✓
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DEC 23 BEHAV HEALTH

Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		11011	DIAMOND HEALTHCARE CORP		50,311.25	0.00	0.00	50,311.25		
Vendor#	Vendor Name		Class	Pay Code						
10789	DISCOVERY MEDICAL NETWORK INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
MMC123123 ✓		12/31/202	12/31/202	01/01/202			93,588.31	0.00	0.00	93,588.31 ✓
	PHYSICIAN SERV		(Dec 16 - 31/23)							
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		10789	DISCOVERY MEDICAL NETWORK INC		93,588.31	0.00	0.00	93,588.31		
Vendor#	Vendor Name		Class	Pay Code						
14708	EQUALIZE RCM SERVICES ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
534089 ✓		01/09/202	01/01/202	02/01/202			5,500.00	0.00	0.00	5,500.00 ✓
	KPI/REVENUE CYCLE JAN 24									
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		14708	EQUALIZE RCM SERVICES		5,500.00	0.00	0.00	5,500.00		
Vendor#	Vendor Name		Class	Pay Code						
11944	EQUIFAX WORKFORCE SOLUTIONS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2058609934 ✓		12/29/202	12/27/202	01/26/202			10.99	0.00	0.00	10.99 ✓
	CREDIT REPORTING									
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		11944	EQUIFAX WORKFORCE SOLUTIONS		10.99	0.00	0.00	10.99		
Vendor#	Vendor Name		Class	Pay Code						
C2510	EVIDENT ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1378 ✓		12/29/202	10/09/202	11/03/202			450.00	0.00	0.00	450.00 ✓
	AMA CPT CODES									
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		C2510	EVIDENT		450.00	0.00	0.00	450.00		
Vendor#	Vendor Name		Class	Pay Code						
S0501	EVOQUA WATER TECHNOLOGIES LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
906254630 ✓		01/10/202	01/01/202	01/26/202			3,087.96	0.00	0.00	3,087.96 ✓
	CONTRACT (111-6/30/24)									
906254631 ✓		01/10/202	01/01/202	01/26/202			2,956.19	0.00	0.00	2,956.19 ✓
	CONTRACT (111-6/30/24)									
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		S0501	EVOQUA WATER TECHNOLOGIES LLC		6,044.15	0.00	0.00	6,044.15		
Vendor#	Vendor Name		Class	Pay Code						
15052	FAVORITE HEALTHCARE STAFFING ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1467279 ✓		12/31/202	10/25/202	11/25/202			2,303.75	0.00	0.00	2,303.75 ✓
	L CORTNAS 10/14-10/15/23 RN									
1475421 ✓		12/31/202	01/03/202	02/01/202			3,871.25	0.00	0.00	3,871.25 ✓
	L CORTNAS 12/22-12/24/23 RN									
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		15052	FAVORITE HEALTHCARE STAFFING		6,175.00	0.00	0.00	6,175.00		
Vendor#	Vendor Name		Class	Pay Code						
13016	FIRST INSURANCE FUNDING ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
58893199 ✓		01/11/202	01/08/202	01/09/202			5,767.50	0.00	0.00	5,767.50 ✓
	DOWN PAYMENT									
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		13016	FIRST INSURANCE FUNDING		5,767.50	0.00	0.00	5,767.50		
Vendor#	Vendor Name		Class	Pay Code						

F1400 FISHER HEALTHCARE ✓										
M										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8571154 ✓		12/29/202	12/18/202	01/12/202			1,024.20	0.00	0.00	1,024.20 ✓
SUPPLIES										
85711555 ✓		12/29/202	12/18/202	01/12/202			67.63	0.00	0.00	67.63 ✓
SUPPLIES										
8605431 ✓		12/29/202	12/19/202	01/13/202			36.94	0.00	0.00	36.94 ✓
SUPPLIES										
8716328 ✓		12/29/202	12/26/202	01/20/202			61.58	0.00	0.00	61.58 ✓
SUPPLIES										
8716327 ✓		12/29/202	12/26/202	01/20/202			414.56	0.00	0.00	414.56 ✓
SUPPLIES										
8792526 ✓		01/10/202	01/02/202	01/27/202			402.52	0.00	0.00	402.52 ✓
SUPPLIES										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
F1400 FISHER HEALTHCARE							2,007.43	0.00	0.00	2,007.43
Vendor#	Vendor Name			Class	Pay Code					
10599	FORVIS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
BK01843373 ✓		07/31/202	07/30/202	01/31/202			21,000.00	0.00	0.00	21,000.00 ✓
PROFES SERV										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
10599 FORVIS							21,000.00	0.00	0.00	21,000.00
Vendor#	Vendor Name			Class	Pay Code					
10283	GE HEALTHCARE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6002549958 ✓		12/14/202	11/30/202	12/25/202			998.34	0.00	0.00	998.34 ✓
LOGIQ S7										
6002547692 ✓		12/29/202	11/30/202	12/25/202			66.56	0.00	0.00	66.56 ✓
LOGIQ S7										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
10283 GE HEALTHCARE							1,064.90	0.00	0.00	1,064.90
Vendor#	Vendor Name			Class	Pay Code					
12404	GE PRECISION HEALTHCARE, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6002572112 ✓		01/02/202	01/01/202	01/31/202			5,665.83	0.00	0.00	5,665.83 ✓
IMAGING CONTRACT										
6002572099 ✓		01/02/202	01/01/202	01/31/202			61.67	0.00	0.00	61.67 ✓
IMAGING CONTRACT										
6002572096 ✓		01/03/202	01/01/202	01/31/202			3,588.58	0.00	0.00	3,588.58 ✓
IMAGING CONTRACT										
6002572098 ✓		01/03/202	01/01/202	01/31/202			2,422.50	0.00	0.00	2,422.50 ✓
IMAGING CONTRACT										
6002572097 ✓		01/03/202	01/01/202	01/31/202			86.67	0.00	0.00	86.67 ✓
IMAGING CONTRACT										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
12404 GE PRECISION HEALTHCARE, LLC							11,825.25	0.00	0.00	11,825.25
Vendor#	Vendor Name			Class	Pay Code					
W1300	GRAINGER ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9942728255 ✓		12/29/202	12/21/202	01/15/202			177.18	0.00	0.00	177.18 ✓
SUPPLIES										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
W1300 GRAINGER							177.18	0.00	0.00	177.18
Vendor#	Vendor Name			Class	Pay Code					
12948	GREAT AMERICA FINANCIAL SVCS ✓									

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
35618728	✓	01/11/202	01/01/202	01/31/202			10,688.27	0.00	0.00	10,688.27
COPIERS										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		12948	GREAT AMERICA FINANCIAL SVCS				10,688.27	0.00	0.00	10,688.27
Vendor#	Vendor Name				Class	Pay Code				
11984	GUERBET, LLC	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
18728110	✓	12/27/202	12/13/202	01/10/202			350.00	0.00	0.00	350.00
SUPPLIES										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		11984	GUERBET, LLC				350.00	0.00	0.00	350.00
Vendor#	Vendor Name				Class	Pay Code				
G0401	GULF COAST DELIVERY	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
122923		12/29/202	12/29/202	01/28/202			50.00	0.00	0.00	50.00
REPORTS/SLIDES <i>12/18-12/20/23</i>										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		G0401	GULF COAST DELIVERY				50.00	0.00	0.00	50.00
Vendor#	Vendor Name				Class	Pay Code				
G1210	GULF COAST PAPER COMPANY	✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2485342	✓	01/10/202	01/02/202	02/01/202			674.48	0.00	0.00	674.48
SUPPLIES										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		G1210	GULF COAST PAPER COMPANY				674.48	0.00	0.00	674.48
Vendor#	Vendor Name				Class	Pay Code				
11552	HEALTHCARE FINANCIAL SERVICES	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100841623	✓	01/09/202	12/28/202	02/01/202			4,610.52	0.00	0.00	4,610.52
LEASE										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		11552	HEALTHCARE FINANCIAL SERVICES				4,610.52	0.00	0.00	4,610.52
Vendor#	Vendor Name				Class	Pay Code				
H1227	HEALTHSURE INSURANCE SERVICES	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4540	✓	01/11/202	01/04/202	01/31/202			200.00	0.00	0.00	200.00
CRECENT RENEWAL 2/1/24-2/1/21										
4541	✓	01/11/202	01/04/202	01/31/202			200.00	0.00	0.00	200.00
SOLERA RENEWAL 2/1/24-2/1/25										
4542	✓	01/11/202	01/04/202	01/31/202			200.00	0.00	0.00	200.00
BROADMOORRENEWAL 2/1/24-2/1/21										
4543	✓	01/11/202	01/04/202	01/31/202			250.00	0.00	0.00	250.00
FORTBEND RENEWAL 2/1/24-2/1/21										
4544	✓	01/11/202	01/04/202	01/31/202			1,000.00	0.00	0.00	1,000.00
ASHFORD RENEWAL 2/1/24-2/1/21										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		H1227	HEALTHSURE INSURANCE SERVICES				1,850.00	0.00	0.00	1,850.00
Vendor#	Vendor Name				Class	Pay Code				
H0416	HOLOGIC INC	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10773673	✓	12/27/202	12/27/202	12/27/202			472.50	0.00	0.00	472.50
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		H0416	HOLOGIC INC				472.50	0.00	0.00	472.50
Vendor#	Vendor Name				Class	Pay Code				

12868	HOLT CAT ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
WIEC0063753 ✓		12/29/202	08/31/202	09/15/202			1,817.50	0.00	0.00	1,817.50 ✓	
TROUBLE SHOOT											
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
	12868	HOLT CAT					1,817.50	0.00	0.00	1,817.50	
Vendor#	Vendor Name		Class	Pay Code							
10922	HUNTER PHARMACY SERVICES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
5805 ✓		12/31/202	12/31/202	01/20/202			14,246.63	0.00	0.00	14,246.63 ✓	
PHARMACIST SALARY											
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
	10922	HUNTER PHARMACY SERVICES					14,246.63	0.00	0.00	14,246.63	
Vendor#	Vendor Name		Class	Pay Code							
11200	IRON MOUNTAIN ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
JCDS813 ✓		12/31/202	12/31/202	01/30/202			2,722.26	0.00	0.00	2,722.26 ✓	
SHREDDING											
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
	11200	IRON MOUNTAIN					2,722.26	0.00	0.00	2,722.26	
Vendor#	Vendor Name		Class	Pay Code							
J1400	JOHNSON & JOHNSON ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
936874125 ✓		01/10/202	01/03/202	02/01/202			404.03	0.00	0.00	404.03 ✓	
SUPPLIES											
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
	J1400	JOHNSON & JOHNSON					404.03	0.00	0.00	404.03	
Vendor#	Vendor Name		Class	Pay Code							
L1288	LANGUAGE LINE SERVICES ✓		W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
11187117 ✓		12/31/202	12/31/202	01/25/202			224.46	0.00	0.00	224.46 ✓	
INTERPRETATION											
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
	L1288	LANGUAGE LINE SERVICES					224.46	0.00	0.00	224.46	
Vendor#	Vendor Name		Class	Pay Code							
L1640	LOWE'S BUSINESS ACCT/SYNCB ✓		W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
121923		12/29/202	12/19/202	01/28/202			11.18	0.00	0.00	11.18 ✓	
INTEREST CHARGE											
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
	L1640	LOWE'S BUSINESS ACCT/SYNCB					11.18	0.00	0.00	11.18	
Vendor#	Vendor Name		Class	Pay Code							
11141	MEDICAL DATA SYSTEMS, INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
188286 ✓		12/31/202	12/31/202	01/25/202			78.90	0.00	0.00	78.90 ✓	
COLLECTION SERV											
188480 ✓		12/31/202	12/31/202	01/25/202			12.64	0.00	0.00	12.64 ✓	
COLLECTION FEES											
188479 ✓		12/31/202	12/31/202	01/25/202			9,989.28	0.00	0.00	9,989.28 ✓	
COLLECTION FEES											
188478 ✓		12/31/202	12/31/202	01/25/202			1,097.74	0.00	0.00	1,097.74 ✓	
COLLECTION FEES											
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
	11141	MEDICAL DATA SYSTEMS, INC.					11,178.56	0.00	0.00	11,178.56	
Vendor#	Vendor Name		Class	Pay Code							
M2470	MEDLINE INDUSTRIES INC ✓		M								

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2297227008	SUPPLIES	12/12/202	12/06/202	12/31/202			173.41	0.00	0.00	173.41
2298362709	SUPPLIES	12/19/202	12/12/202	01/06/202			84.59	0.00	0.00	84.59
2298362718	SUPPLIES	12/19/202	12/13/202	01/07/202			20,937.75	0.00	0.00	20,937.75
2300023226	SUPPLIES	12/29/202	12/23/202	01/17/202			28.85	0.00	0.00	28.85
2300154611	SUPPLIES	12/29/202	12/25/202	01/19/202			46.17	0.00	0.00	46.17
2300154616	SUPPLIES	12/29/202	12/25/202	01/19/202			1,268.68	0.00	0.00	1,268.68
2300154612	SUPPLIES	12/29/202	12/25/202	01/19/202			101.16	0.00	0.00	101.16
2300154614	SUPPLIES	12/29/202	12/25/202	01/19/202			45.12	0.00	0.00	45.12
2300154615	SUPPLIES	12/29/202	12/25/202	01/19/202			3,584.76	0.00	0.00	3,584.76
2300154613	SUPPLIES	12/29/202	12/25/202	01/19/202			241.28	0.00	0.00	241.28
2300266934	SUPPLIES	12/29/202	12/26/202	01/20/202			203.01	0.00	0.00	203.01
2300330092	SUPPLIES	12/29/202	12/27/202	01/21/202			12.71	0.00	0.00	12.71
2300330094	SUPPLIES	12/29/202	12/27/202	01/21/202			92.75	0.00	0.00	92.75
2300330091	SUPPLIES	12/29/202	12/27/202	01/21/202			27.81	0.00	0.00	27.81
2300330089	SUPPLIES	12/29/202	12/27/202	01/21/202			638.94	0.00	0.00	638.94
2300330093	SUPPLIES	12/29/202	12/27/202	01/21/202			114.67	0.00	0.00	114.67
2301189797	SUPPLIES	01/10/202	01/03/202	01/28/202			55.80	0.00	0.00	55.80
2301189793	SUPPLIES	01/10/202	01/03/202	01/28/202			65.97	0.00	0.00	65.97
2301189792	SUPPLIES	01/10/202	01/03/202	01/28/202			569.90	0.00	0.00	569.90
2301189795	SUPPLIES	01/10/202	01/03/202	01/28/202			5.60	0.00	0.00	5.60
2301189794	SUPPLIES	01/10/202	01/03/202	01/28/202			37.50	0.00	0.00	37.50
2301189799	SUPPLIES	01/10/202	01/03/202	01/28/202			224.23	0.00	0.00	224.23
2301189798	SUPPLIES	01/10/202	01/03/202	01/28/202			329.14	0.00	0.00	329.14
2301189790	SUPPLIES	01/10/202	01/03/202	01/28/202			109.69	0.00	0.00	109.69
2301210635	SUPPLIES	01/10/202	01/03/202	01/28/202			149.13	0.00	0.00	149.13
2301191000	SUPPLIES	01/10/202	01/03/202	01/28/202			75.99	0.00	0.00	75.99
2301469401	SUPPLIES	01/10/202	01/04/202	01/29/202			660.44	0.00	0.00	660.44
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net

	M2470	MEDLINE INDUSTRIES INC					29,885.05	0.00	0.00	29,885.05
Vendor#	Vendor Name		Class	Pay Code						
M2550	MELSTAN, INC. ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
063815		12/29/202	12/07/202	12/17/202			25.90	0.00	0.00	25.90 ✓
	SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	M2550	MELSTAN, INC.					25.90	0.00	0.00	25.90
Vendor#	Vendor Name		Class	Pay Code						
10182	MERCEDES SCIENTIFIC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2791590 ✓		01/10/202	01/03/202	02/02/202			35.06	0.00	0.00	35.06 ✓
	SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10182	MERCEDES SCIENTIFIC					35.06	0.00	0.00	35.06
Vendor#	Vendor Name		Class	Pay Code						
10536	MORRIS & DICKSON CO, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1475927 ✓		01/09/202	01/03/202	01/13/202			128.85	0.00	0.00	128.85 ✓
	INVENTORY									
1475928 ✓		01/09/202	01/03/202	01/13/202			886.03	0.00	0.00	886.03 ✓
	INVENTORY									
1480661 ✓		01/09/202	01/04/202	01/14/202			1,258.97	0.00	0.00	1,258.97 ✓
	INVENTORY									
CM83648 ✓		01/09/202	01/04/202	01/14/202			-4,534.29	0.00	0.00	-4,534.29 ✓
	CREDIT									
1480660 ✓		01/09/202	01/04/202	01/14/202			22.27	0.00	0.00	22.27 ✓
	INVENTORY									
14806692 ✓		01/09/202	01/04/202	01/14/202			281.50	0.00	0.00	281.50 ✓
	INVENTORY									
CM84025 ✓		01/09/202	01/05/202	01/15/202			-54.02	0.00	0.00	-54.02 ✓
	CREDIT									
CM84026 ✓		01/09/202	01/05/202	01/15/202			-25.09	0.00	0.00	-25.09 ✓
	CREDIT									
1488966 ✓		01/09/202	01/07/202	01/17/202			134.30	0.00	0.00	134.30 ✓
	INVENTORY									
1488965 ✓		01/09/202	01/07/202	01/17/202			3,159.31	0.00	0.00	3,159.31 ✓
	INVENTORY									
1492113 ✓		01/09/202	01/08/202	01/18/202			25.65	0.00	0.00	25.65 ✓
	INVENTORY									
CM84541 ✓		01/09/202	01/08/202	01/18/202			-198.15	0.00	0.00	-198.15 ✓
	CREDIT									
1493032 ✓		01/09/202	01/08/202	01/18/202			506.09	0.00	0.00	506.09 ✓
	INVENTORY									
1493031 ✓		01/09/202	01/08/202	01/18/202			138.41	0.00	0.00	138.41 ✓
	INVENTORY									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC					1,729.83	0.00	0.00	1,729.83
Vendor#	Vendor Name		Class	Pay Code						
M2659	MXR IMAGING, INC ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8800862393 ✓		12/29/202	02/07/202	03/09/202			579.18	0.00	0.00	579.18 ✓
	SUPPLIES									
8800914476 ✓		12/29/202	06/20/202	07/20/202			1,176.60	0.00	0.00	1,176.60 ✓
	SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net

	M2659	MXR IMAGING, INC					1,755.78	0.00	0.00	1,755.78
Vendor#	Vendor Name		Class	Pay Code						
13548	NACOGDOCHES TRANSCRIPTION ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8228 ✓		12/27/202	12/27/202	01/06/202			250.46	0.00	0.00	250.46 ✓
	TRANSCRIPTION (1219-12122123)									
8241 ✓		01/09/202	01/08/202	01/18/202			116.34	0.00	0.00	116.34 ✓
	TRANSCRIPTION (1223-113124)									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	13548	NACOGDOCHES TRANSCRIPTION					366.80	0.00	0.00	366.80
Vendor#	Vendor Name		Class	Pay Code						
12388	NATIONAL FARM LIFE INSURANCE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4121938 ✓		01/09/202	01/01/202	02/01/202			3,569.57	0.00	0.00	3,569.57 ✓
	LIFE INSUR									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	12388	NATIONAL FARM LIFE INSURANCE					3,569.57	0.00	0.00	3,569.57
Vendor#	Vendor Name		Class	Pay Code						
10188	NATUS MEDICAL INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1041541614 ✓		12/29/202	12/14/202	01/08/202			479.37	0.00	0.00	479.37 ✓
	SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10188	NATUS MEDICAL INC					479.37	0.00	0.00	479.37
Vendor#	Vendor Name		Class	Pay Code						
13624	NEXION HEALTH AT NAVASOTA INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
TELMED20230702 ✓		01/09/202	01/05/202	02/01/202			1,000.00	0.00	0.00	1,000.00 ✓
	TELEMEDICINE DEC 23									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	13624	NEXION HEALTH AT NAVASOTA INC					1,000.00	0.00	0.00	1,000.00
Vendor#	Vendor Name		Class	Pay Code						
O1500	OLYMPUS AMERICA INC ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
355588033 ✓		01/10/202	01/03/202	01/28/202			497.16	0.00	0.00	497.16 ✓
	SUPPLIES									
35558802 ✓		01/10/202	01/03/202	01/28/202			281.80	0.00	0.00	281.80 ✓
	SUPPLIES									
35578474 ✓		01/10/202	01/07/202	02/01/202			1,125.00	0.00	0.00	1,125.00 ✓
	CONTRACT									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	O1500	OLYMPUS AMERICA INC					1,903.96	0.00	0.00	1,903.96
Vendor#	Vendor Name		Class	Pay Code						
O1416	ORTHO CLINICAL DIAGNOSTICS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1853330389 ✓		01/10/202	01/03/202	02/02/202			752.16	0.00	0.00	752.16 ✓
	SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	O1416	ORTHO CLINICAL DIAGNOSTICS					752.16	0.00	0.00	752.16
Vendor#	Vendor Name		Class	Pay Code						
11155	PARAREV ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
910615 ✓		01/09/202	01/01/202	01/31/202			3,084.00	0.00	0.00	3,084.00 ✓
	REVENUE INTEGRITY									
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								
10152	PARTSSOURCE, LLC ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	05065460 ✓		12/29/202	12/20/202	01/19/202			319.16	0.00	0.00	319.16 ✓
	SUPPLIES										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	10152	PARTSSOURCE, LLC						319.16	0.00	0.00	319.16
P1800	PITNEY BOWES INC ✓		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	1024512709 ✓		12/29/202	12/27/202	01/26/202			207.00	0.00	0.00	207.00 ✓
	POSTAGE										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	P1800	PITNEY BOWES INC						207.00	0.00	0.00	207.00
10372	PRECISION DYNAMICS CORP (PDC) ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	9354962621 ✓		01/10/202	12/15/202	01/14/202			167.60	0.00	0.00	167.60 ✓
	SUPPLIES										
	9354976541 ✓		01/10/202	12/18/202	01/17/202			204.36	0.00	0.00	204.36 ✓
	SUPPLIES										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	10372	PRECISION DYNAMICS CORP (PDC)						371.96	0.00	0.00	371.96
11932	PRESS GANEY ASSOCIATES, INC. ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	IN000627833 ✓		12/31/202	12/31/202	01/30/202			2,729.72	0.00	0.00	2,729.72 ✓
	CONTRACT FEES										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	11932	PRESS GANEY ASSOCIATES, INC.						2,729.72	0.00	0.00	2,729.72
12480	PRO ENERGY PARTNERS LLC ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2312-0600 ✓		12/31/202	12/31/202	01/15/202			3,438.17	0.00	0.00	3,438.17 ✓
	ENERGY										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	12480	PRO ENERGY PARTNERS LLC						3,438.17	0.00	0.00	3,438.17
11024	REED, CLAYMON, MEEKER & HARGET ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	30101 ✓		12/27/202	12/21/202	02/01/202			4,845.00	0.00	0.00	4,845.00 ✓
	LEGAL SERV										
	30188 ✓		01/11/202	01/10/202	01/20/202			95.00	0.00	0.00	95.00 ✓
	LEGAL SERV										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	11024	REED, CLAYMON, MEEKER & HARGET						4,940.00	0.00	0.00	4,940.00
14996	REMEDI8 LLC ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	24036 ✓		12/29/202	12/14/202	01/13/202			3,851.30	0.00	0.00	3,851.30 ✓
	DOOR REPAIR										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	14996	REMEDI8 LLC						3,851.30	0.00	0.00	3,851.30
11764	ROBERT RODRIQUEZ ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

010224		01/11/202	01/02/202	01/20/202		46.70	0.00	0.00	46.70	✓
	TRAVEL	SAMS 1/2/24								✓
010324		01/11/202	01/03/202	01/20/202		46.70	0.00	0.00	46.70	✓
	TRAVEL	SAMS 1/3/24								✓
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		11764	ROBERT RODRIQUEZ			93.40	0.00	0.00	93.40	
Vendor#	Vendor Name		Class	Pay Code						
10936	SIEMENS FINANCIAL SERVICES									✓
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
56382400017657	✓	12/29/202	12/25/202	01/14/202			4,038.24	0.00	0.00	4,038.24
	LEASE									✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		10936	SIEMENS FINANCIAL SERVICES				4,038.24	0.00	0.00	4,038.24
Vendor#	Vendor Name		Class	Pay Code						
11296	SOUTH TEXAS BLOOD & TISSUE CEN									✓
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
CM11265	✓	12/31/202	12/31/202	01/25/202			-2,640.00	0.00	0.00	-2,640.00
	CREDIT									✓
I07037110	✓	12/31/202	12/31/202	01/25/202			8,324.00	0.00	0.00	8,324.00
	BLOOD									✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		11296	SOUTH TEXAS BLOOD & TISSUE CEN				5,684.00	0.00	0.00	5,684.00
Vendor#	Vendor Name		Class	Pay Code						
C1010	SPARKLIGHT			W						✓
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010124		01/10/202	01/04/202	01/05/202			1,842.00	0.00	0.00	1,842.00
	INTERNET									✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		C1010	SPARKLIGHT				1,842.00	0.00	0.00	1,842.00
Vendor#	Vendor Name		Class	Pay Code						
10845	STAPLES									✓
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
3556032532	✓	12/29/202	12/31/202	01/30/202			37.48	0.00	0.00	37.48
	SUPPLIES									✓
3556032527	✓	12/31/202	12/31/202	01/30/202			-19.89	0.00	0.00	-19.89
	CREDIT									✓
3556032528	✓	12/31/202	12/31/202	01/30/202			-19.89	0.00	0.00	-19.89
	CREDIT									✓
3556032529	✓	12/31/202	12/31/202	01/30/202			-20.49	0.00	0.00	-20.49
	CREDIT									✓
3556032530	✓	12/31/202	12/31/202	01/30/202			87.38	0.00	0.00	87.38
	SUPPLIES									✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		10845	STAPLES				64.59	0.00	0.00	64.59
Vendor#	Vendor Name		Class	Pay Code						
T2539	T-SYSTEM, INC			W						✓
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
910237	✓	12/31/202	12/31/202	01/30/202			6,130.42	0.00	0.00	6,130.42
	PHYSICIAN TRACKING									✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		T2539	T-SYSTEM, INC				6,130.42	0.00	0.00	6,130.42
Vendor#	Vendor Name		Class	Pay Code						
10143	TEXAS EMS TRAUMA & ACUTE CARE									✓
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010924		01/10/202	01/09/202	01/15/202			7,000.00	0.00	0.00	7,000.00
	TRAUMA SURVEY LEVEL IV									✓

Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		10143	TEXAS EMS TRAUMA & ACUTE CARE				7,000.00	0.00	0.00	7,000.00
Vendor#	Vendor Name		Class	Pay Code						
T2204	TEXAS MUTUAL INSURANCE CO ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1005329134		01/09/202	01/07/202	01/27/202			8,591.85	0.00	0.00	8,591.85 ✓
PREMIUM /INSTALLMENT DOWN										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		T2204	TEXAS MUTUAL INSURANCE CO				8,591.85	0.00	0.00	8,591.85
Vendor#	Vendor Name		Class	Pay Code						
14372	TRIAGE, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV1796894909 ✓		12/29/202	12/29/202	01/28/202			3,420.00	0.00	0.00	3,420.00 ✓
STEVEN SHAW 12/17-12/23/23										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		14372	TRIAGE, LLC				3,420.00	0.00	0.00	3,420.00
Vendor#	Vendor Name		Class	Pay Code						
T3334	TRINITY PHYSICS CONSULTING LLC ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
03-5941 ✓		12/29/202	10/25/202	11/24/202			3,920.00	0.00	0.00	3,920.00 ✓
SUPPLIES										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		T3334	TRINITY PHYSICS CONSULTING LLC				3,920.00	0.00	0.00	3,920.00
Vendor#	Vendor Name		Class	Pay Code						
U1064	UNIFIRST HOLDINGS INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2921021874 ✓	LAUNDRY	01/09/202	01/01/202	01/26/202			91.80	0.00	0.00	91.80 ✓
2921021873 ✓	LAUNDRY	01/09/202	01/01/202	01/26/202			2,747.04	0.00	0.00	2,747.04 ✓
2921022190 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			147.26	0.00	0.00	147.26 ✓
2921022196 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			119.14	0.00	0.00	119.14 ✓
2921022189 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			118.30	0.00	0.00	118.30 ✓
2921022193 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			299.34	0.00	0.00	299.34 ✓
2921022192 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			29.95	0.00	0.00	29.95 ✓
2921022195 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			303.77	0.00	0.00	303.77 ✓
2921022191 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			2,789.00	0.00	0.00	2,789.00 ✓
2921022194 ✓	LAUNDRY	01/09/202	01/04/202	01/29/202			254.19	0.00	0.00	254.19 ✓
2921022387 ✓	LAUNDRY	01/09/202	01/08/202	02/02/202			2,254.94	0.00	0.00	2,254.94 ✓
2921022388 ✓	LAUNDRY	01/09/202	01/08/202	02/02/202			91.80	0.00	0.00	91.80 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		U1064	UNIFIRST HOLDINGS INC				9,246.53	0.00	0.00	9,246.53
Vendor#	Vendor Name		Class	Pay Code						
12400	UPDOX LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV00470717 ✓		12/31/202	12/31/202	01/31/202			1,212.00	0.00	0.00	1,212.00 ✓

FAX

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12400	UPDOX LLC	1,212.00	0.00	0.00	1,212.00

Vendor#	Vendor Name	Class	Pay Code
V1471	VICTORIA RADIOWORKS, LTD ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
23120175 ✓		12/31/202	12/31/202	01/15/202			40.00	0.00	0.00	40.00 ✓

ADVERTISING

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	V1471	VICTORIA RADIOWORKS, LTD	40.00	0.00	0.00	40.00

Vendor#	Vendor Name	Class	Pay Code
11018	WEBPT, INC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV-472343 ✓		01/09/202	01/04/202	01/05/202			1,000.76	0.00	0.00	1,000.76 ✓

HOME EXERCISE PROGRAM

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11018	WEBPT, INC	1,000.76	0.00	0.00	1,000.76

Vendor#	Vendor Name	Class	Pay Code
I1110	WERFEN USA LLC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9111413950 ✓		12/29/202	11/15/202	12/10/202			1,571.67	0.00	0.00	1,571.67 ✓

CONTRACT

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9111433348 ✓		12/29/202	12/26/202	01/20/202			315.82	0.00	0.00	315.82 ✓

SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	1,887.49	0.00	0.00	1,887.49

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	663,283.19	0.00	0.00	663,283.19

APPROVED ON

JAN 11 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CL# 202435-202515

MCKESSON

Invoice

MCKESSON CORPORATION DC#8115
3301 POLLOK DRIVE
CONROE TX 77303

Phone: 855/625-4677
DEA: RM0328408

BILL TO:
CVS PHCY 10356/MEM MC PHS
ATTN: MEMORIAL MEDICAL CENTER
PO BOX 25
PORT LAVACA TX 77979
Sold-To GLN: 1100005367715
Ship-To GLN: 0050428103562

SHIP TO:
CVS PHCY 10356/MEM MC PHS
409 VETERANS BLVD
DEL RIO TX 78840

DEA: FC4109167
PHCY: 28687

Billing No.:	7469673629		
Billing Date:	01/10/2024		
PO#:	2960185		
835430	327	010	1 of 3
Customer	Route	Stop	Page

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor.

DEPT	ITEM#	DEL DOC#	QTY	UM	ITEM DESCRIPTION	AWP OR RETAIL	UNIT PRICE	GP %	I D CODE	EXTENDED AMOUNT	H M
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Effective January 7, 2008 Mckesson Corporation is complying with the voluntary DEA request to distribute Methadone 40mg product only to those facilities authorized for detoxification and maintenance treatment, and hospitals. Please contact Mckesson Service First at 800-482-3784 with any questions.

Pfizer is recalling Bleomycin at the consumer level

*BLEOMYCIN VIALIU FAUL 10ML LOT# BL12206A NDC# 61703033218 ECONO# 2725307. BLEOMYCIN VIAL 15IU HW 10ML LOT# BL12206A NDC# 61703033218 ECONO# 1122506.

Additional information is available on

the McKesson Connect portal. *Reckitt is recalling Nutramigen at the consumer level. NUTRAMIGEN+ INF LGG PWD 12.6OZ LOT# ZL3FXJ, ZL3FQD, ZL3FPE, ZL3FMH ZL3FHG, ZL3FRW ECONO# 1194281. Additional information is available on the McKesson Connect Portal.

AD	203-1482	807351423	1	EA	VASCEPA CAP 1GM 120 CAPSULE	425.46	12.54	97.1	1KR	12.54	
CA	206-4285	807351423	0	* EA	DICLOFEN SOD GEL 1.0% CIP100GM		3.75		K		
		Above Item	2	EA	Manufacturer limiting supply - full omit GEL (GRAM)						
AA	368-6318	807351423	0	* EA	OSELTAM PHOS OS6MG/MLALVO60ML@		3.52		K		
		Above Item	1	EA	Manufacturer cannot supply SUSP RECON						

12.54 +

28.94 +

1,235.28 +

1,276.76 =

SUMMARY

CATEGORY	AWP/RETAIL	COST	G.P.
PHARMACY, RX ONLY - 1	\$425.46	\$12.54	97.1%

MCKESSON

Invoice

DC:
 MCKESSON CORPORATION DC#8115
 3301 POLLOK DRIVE
 CONROE TX 77303

Phone: 855/625-4677
 DEA: RM0328408

Billing No.:	7469673629		
Billing Date:	01/10/2024		
PO#:	2960185		
835430	327	010	2 of 3
Customer	Route	Stop	Page

BILL TO:
 CVS PHCY 10356/MEM MC PHS
 ATTN: MEMORIAL MEDICAL CENTER
 PO BOX 25
 PORT LAVACA TX 77979
 Sold-To GLN: 1100005367715
 Ship-To GLN: 0050428103562

SHIP TO:
 CVS PHCY 10356/MEM MC PHS
 409 VETERANS BLVD
 DEL RIO TX 78840

DEA: FC4109167
 PHCY: 28687

DEPT	ITEM#	DEL DOC#	QTY	UM	ITEM DESCRIPTION	AWP OR RETAIL	UNIT PRICE	GP I % D	CODE	EXTENDED AMOUNT	H M
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NET PAYABLE BY STATEMENT DATE 01/16/2024: \$12.54 ✓
 GROSS PAYABLE AFTER STATEMENT DATE 01/16/2024: \$12.80

AWP is a benchmark published by MediSpan or supplied by manufacturers when it is unavailable through MediSpan. It is not an average, and does not reflect actual prices in sales transactions between wholesalers and their customers. AWP can change at any time and the AWP provided herein may not be current.

APPROVED ON
 JAN 16 2024
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Lines	Cases	Pieces	This invoice is payable to
1	0	1	CARR: MCK INITIATED ACH DEBIT AMT DUE REMITTED VIA ACH DEBIT Statement for information only Claims must be made within 5 days and show date of invoice.

MCKESSON

Invoice

DC:
 MCKESSON CORPORATION DC#8115
 3301 POLLOK DRIVE
 CONROE TX 77303

Phone: 855/625-4677
 DEA: RM0328408

BILL TO:
 CVS PHCY 10356/MEM MC PHS
 ATTN: MEMORIAL MEDICAL CENTER
 PO BOX 25
 PORT LAVACA TX 77979
 Sold-To GLN: 1100005367715
 Ship-To GLN: 0050428103562

SHIP TO:
 CVS PHCY 10356/MEM MC PHS
 409 VETERANS BLVD
 DEL RIO TX 78840

DEA: FC4109167
 PHCY: 28687

Billing No.:	7469673629		
Billing Date:	01/10/2024		
PO#:	2960185		
835430	327	010	3 of 3
Customer	Route	Stop	Page

***** SUBSTITUTION SUMMARY PAGE *****

OMITTED ITEMS

3686318 (N47781038426 - OSELTAM PHOS OS6MG/MLALVO60ML@) Manufacturer cannot supply
 2064285 (N69097052444 - DICLOFEN SOD GEL 1.0% CIP100GM) Manufacturer limiting supply - full omit

Lines	Cases	Pieces
1	0	1

This invoice is payable to **CARR: MCK INITIATED ACH DEBIT AMT DUE REMITTED VIA ACH DEBIT**
Statement for information only
 Claims must be made within 5 days and show date of invoice.

MCKESSON

Invoice

MCKESSON CORPORATION DC#8115
3301 POLLOK DRIVE
CONROE TX 77303

Phone: 855/625-4677
DEA: RM0328408

BILL TO:
CVS PHCY 7475/MEM MC PHS
ATTN: MEMORIAL MEDICAL CENTER
PO BOX 25
PORT LAVACA TX 77979
Sold-To GLN: 1100005367715
Ship-To GLN: 0050428074756

SHIP TO:
CVS PHCY 7475/MEM MC PHS
1350 KINGWOOD DR
KINGWOOD TX 77339

DEA: BC5354763
PHCY: 24671

Billing No.: 7469865445			
Billing Date: 01/10/2024			
PO#: 2960830			
835438	M22	025	1 of 3
Customer	Route	Stop	Page

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DEPT	ITEM#	DEL DOC#	QTY	UM	ITEM DESCRIPTION	AWP OR RETAIL	UNIT PRICE	GP %	I D CODE	EXTENDED AMOUNT	H M
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Pfizer is recalling Bleomycin at the consumer level

*BLEOMYCIN VIALIU FAUL 10ML LOT# BL12206A NDC# 61703033218 ECONO# 2725307. BLEOMYCIN VIAL 15IU HW 10ML LOT# BL12206A NDC# 61703033218 ECONO# 1122506. Additional information is available on the McKesson Connect portal. *Reckitt is recalling Nutramigen at the consumer level. NUTRAMIGEN+ INF LGG PWD 12.6OZ LOT# ZL3FXJ, ZL3FQD, ZL3FPE, ZL3FMH ZL3FHG, ZL3FRW ECONO# 1194281. Additional information is available on the McKesson Connect Portal.

AD	190-5439	807354543	1	EA	LOSART HYDR TB100/25MG AURO90@ TABLET	306.70	3.86	98.7	1KR	3.86	
AD	203-1482	807354543	2	EA	VASCEPA CAP 1GM 120 CAPSULE	425.46	12.54	97.1	1KR	25.08	
AC	186-3919	807354543 Above Item	0 *	EA	AMOXICIL OS 400/5ML WEST100ML@ SUSP RECON		7.13				
AA	368-6318	807354543 Above Item	0 *	EA	OSELTAM PHOS OS6MG/MLALVO60ML@ SUSP RECON		3.52		K		

SUMMARY

CATEGORY	AWP/RETAIL	COST	G.P.
PHARMACY, RX ONLY - 1	\$1,157.62	\$28.94	97.5%

MCKESSON

Invoice

DC:
MCKESSON CORPORATION DC#8115
3301 POLLOK DRIVE
CONROE TX 77303

Phone: 855/625-4677
DEA: RM0328408

BILL TO:
CVS PHCY 7475/MEM MC PHS
ATTN: MEMORIAL MEDICAL CENTER
PO BOX 25
PORT LAVACA TX 77979
Sold-To GLN: 1100005367715
Ship-To GLN: 0050428074756

SHIP TO:
CVS PHCY 7475/MEM MC PHS
1350 KINGWOOD DR
KINGWOOD TX 77339
DEA: BC5354763
PHCY: 24671

Billing No.:		7469865445	
Billing Date:		01/10/2024	
PO#:		2960830	
835438	M22	025	2 of 3
Customer	Route	Stop	Page

DEPT	ITEM#	DEL DOC#	QTY	UM	ITEM DESCRIPTION	AWP OR RETAIL	UNIT PRICE	GP I % D	CODE	EXTENDED AMOUNT	H M
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NET PAYABLE BY STATEMENT DATE 01/16/2024: \$28.94 ✓

GROSS PAYABLE AFTER STATEMENT DATE 01/16/2024: \$29.53

AWP is a benchmark published by MediSpan or supplied by manufacturers when it is unavailable through MediSpan. It is not an average, and does not reflect actual prices in sales transactions between wholesalers and their customers. AWP can change at any time and the AWP provided herein may not be current.

APPROVED ON
JAN 16 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Lines	Cases	Pieces
2	0	3

This invoice is payable to **CARR: MCK INITIATED ACH DEBIT AMT DUE REMITTED VIA ACH DEBIT**
Statement for information only
Claims must be made within 5 days and show date of invoice.

MCKESSON

Invoice

DC:
 MCKESSON CORPORATION DC#8115
 3301 POLLOK DRIVE
 CONROE TX 77303

Phone: 855/625-4677
 DEA: RM0328408

BILL TO:
 CVS PHCY 7475/MEM MC PHS
 ATTN: MEMORIAL MEDICAL CENTER
 PO BOX 25
 PORT LAVACA TX 77979
 Sold-To GLN: 1100005367715
 Ship-To GLN: 0050428074756

SHIP TO:
 CVS PHCY 7475/MEM MC PHS
 1350 KINGWOOD DR
 KINGWOOD TX 77339

DEA: BC5354763
 PHCY: 24671

Billing No.:	7469865445		
Billing Date:	01/10/2024		
PO#:	2960830		
835438	M22	025	3 of 3
Customer	Route	Stop	Page

***** SUBSTITUTION SUMMARY PAGE *****

OMITTED ITEMS

1863919 (N00143988701 - AMOXICIL OS 400/5ML WEST100ML@) Manufacturer limiting supply - full omit
 3686318 (N47781038426 - OSELTAM PHOS OS6MG/MLALVO60ML@) Manufacturer cannot supply

Lines	Cases	Pieces
2	0	3

This invoice is payable to **CARR: MCK INITIATED ACH DEBIT AMT DUE REMITTED VIA ACH DEBIT**
Statement for information only
 Claims must be made within 5 days and show date of invoice.

MCKESSON

STATEMENT

As of: 01/12/2024

Page: 001

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

Company: 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

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 256342
Date: 01/13/2024

As of: 01/12/2024 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 01/13/2024 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
01/08/2024	01/16/2024	7468993795	101725923	115Invoice	1.00	50.24		49.24 ✓		7468993795	
01/08/2024	01/16/2024	7469186906	101772083	195Invoice	0.04	2.03		1.99 ✓		7469186906	
01/08/2024	01/16/2024	7469186907	101691201	195Invoice	2.29	114.32		112.03 ✓		7469186907	
01/08/2024	01/16/2024	7469186908	101848326	195Invoice	0.01	0.32		0.31 ✓		7469186908	
01/08/2024	01/16/2024	7469186909	101696601	115Invoice	0.06	2.85		2.79 ✓		7469186909	
01/09/2024	01/16/2024	7469366154	102038667	115Invoice	18.43	921.26		902.83 ✓		7469366154	
01/10/2024	01/16/2024	7469664870	102184354	115Invoice	1.34	66.99		65.65 ✓		7469664870	
01/10/2024	01/16/2024	7469671628	102200108	115Invoice	2.01	100.49		98.48 ✓		7469671628	
01/10/2024	01/16/2024	7469830762	102121526	195Invoice	0.04	1.90		1.86 ✓		7469830762	
01/12/2024	01/16/2024	7470266914	102451220	115Invoice		0.10		0.10 ✓		7470266914	

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

TOTAL:

Subtotals: 1,260.50 USD

Future Due: 0.00

If Paid By 01/16/2024,
Pay This Amount:

1,235.28 USD

Due If Paid On Time:

USD

1,235.28 ✓

Past Due: 0.00

Disc lost if paid late:

25.22

Last Payment 01/08/2024 897.80

If Paid After 01/16/2024,
Pay this Amount:

1,260.50 USD

Due If Paid Late:

USD

1,260.50

Walmart Only

Andrew Lopez Santos
1/15/24

APPROVED ON

JAN 16 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

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

DEA: RA0289276
866-451-9655

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

Remit To: AMERISOURCEBERGEN
PO Box 905223
CHARLOTTE NC 28290-5223

Customer Number	
100135284 / 037028186	
Terms	
Sat - Fri Due in 7 days	
Summary	
Not Yet Due:	0.00
Current:	1,005.90
Past Due:	0.00
Total Due:	1,005.90
Account Balance:	1,005.90

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
01-08-2024	01-19-2024	3160190465	7005283780	Invoice	34.77		0.00	34.77 ✓
01-08-2024	01-19-2024	3160190466	7005293806	Invoice	13.68		0.00	13.68 ✓
01-08-2024	01-19-2024	3160190467	7005295370	Invoice	96.87		0.00	96.87 ✓
01-08-2024	01-19-2024	3160301422	7005305449	Invoice	231.92		0.00	231.92 ✓
01-08-2024	01-19-2024	3160301423	7005309510	Invoice	24.68		0.00	24.68 ✓
01-08-2024	01-19-2024	3160301424	7005305641	Invoice	4.64		0.00	4.64 ✓
01-09-2024	01-19-2024	3160485170	7005313788	Invoice	96.87		0.00	96.87 ✓
01-09-2024	01-19-2024	3160485171	7005314159	Invoice	5.57		0.00	5.57 ✓
01-10-2024	01-19-2024	3160654725	7005326662	Invoice	3.50		0.00	3.50 ✓
01-11-2024	01-19-2024	3160779094	7005334261	Invoice	280.99		0.00	280.99 ✓
01-12-2024	01-19-2024	3160970324	7005345358	Invoice	212.41		0.00	212.41 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,005.90	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
01-12-2024	(554.23)

APPROVED ON
JAN 16 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders	
Due Date	Amount
01-19-2024	1,005.90
Total Due: 1,005.90 ✓	

Andrew D. Santos
1/15/24

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="checkbox"/> "ENTER YOUR 4-DIGIT PIN"	[]
<input type="checkbox"/> "MAKE A PAYMENT, PRESS 1"	[1]
<input type="checkbox"/> "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★ [941] #
<input type="checkbox"/> "IF FEDERAL TAX DEPOSIT ENTER 1"	[1]
<input type="checkbox"/> "ENTER 2-DIGIT TAX FILING YEAR"	★ [23]
<input type="checkbox"/> "ENTER 2-DIGIT TAX FILING ENDING MONTH" 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	★ [03]
<input type="checkbox"/> "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN" "1 TO CONFIRM"	★ [\$ 125,655.54] #
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0 [1]
"ENTER W/CENTS AMOUNT OF MEDICARE"	[\$ 64,258.62] #
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"	[\$ 15,028.18] #
<input type="checkbox"/> "6-DIGIT SETTLEMENT DATE" "1 TO CONFIRM"	★ [\$ 46,368.74] #
<input type="checkbox"/> "6-DIGIT SETTLEMENT DATE" "1 TO CONFIRM"	★ []
<input type="checkbox"/> "6-DIGIT SETTLEMENT DATE" "1 TO CONFIRM"	[1]
<input type="checkbox"/> ACKNOWLEDGEMENT NUMBER	[]

CALLED IN BY: []
CALLED IN DATE: []
CALLED IN TIME: []

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

ENTER VOID CKS AS NEGATIVE NUMBERS

PAY PERIOD: BEGIN	12/29/2023	VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: END	1/11/2024					
PAY DATE:	1/19/2024					
GROSS PAY:	\$ 561,937.99			\$ -		\$ 561,937.99
DEDUCTIONS:						
A/R	\$ 267.91					\$ 267.91
ADVANC						\$ -
BOOTS						\$ -
MUTUAL CRITICAL ILLNESS	\$ 1,146.40					\$ 1,146.40
MUTUAL ACCIDENT	\$ 779.27					\$ 779.27
IRS TAX						\$ -
MUTUAL SHORT TERM DIS	\$ 2,089.98					\$ 2,089.98
MUTUAL VISION	\$ 901.60					\$ 901.60
CAFÉ-D	\$ 1,264.88					\$ 1,264.88
CAFÉ-H	\$ 31,310.01					\$ 31,310.01
	\$ -					\$ -
	\$ -					\$ -
CAFÉ-P						\$ -
CANCER						\$ -
CHILD	\$ 570.69					\$ 570.69
CLINIC	\$ 435.00					\$ 435.00
COMBIN	\$ 262.28					\$ 262.28
CREDUN	\$ -					\$ -
DENTAL	\$ -					\$ -
DEP-LF						\$ -
MUTUAL TERM LIFE	\$ 1,419.72					\$ 1,419.72
MUTUAL HOSP INDEM	\$ 657.50					\$ 657.50
FED TAX	\$ 46,368.74					\$ 46,368.74
FICA-M	\$ 7,514.09					\$ 7,514.09
FICA-O	\$ 32,129.31					\$ 32,129.31
FICA-M ADDITIONAL						\$ -
FIRST C						\$ -
FLEX S	\$ 5,216.32					\$ 5,216.32
FLX-FE	\$ -					\$ -
GIFT S	\$ 360.37					\$ 360.37
GRP-IN						\$ -
GTL						\$ -
HOSP-I						\$ -
LEGAL	\$ 1,179.36					\$ 1,179.36
OTHER	\$ 2,279.89					\$ 2,279.89
NATIONAL FARM LIFE	\$ 1,286.49					\$ 1,286.49
MED SURCHARGE	\$ 315.00					\$ 315.00
PR FIN	\$ -					\$ -
RELAY						\$ -
REPAY						\$ -
STONEDF	\$ 1,015.86					\$ 1,015.86
STONE						\$ -
STONE 2						\$ -
STUDEN						\$ -
TSA-R	\$ 38,775.53					\$ 38,775.53
UW/HOS	\$ -					\$ -
TOTAL DEDUCTIONS:	\$ 177,546.20	\$ -	\$ -	\$ -	\$ -	\$ 177,546.20
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	
NET PAY:	\$ 384,391.79	\$ -	\$ -	\$ -	\$ -	\$ 384,391.79
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	

TOTAL CAFÉ 125 PLAN:	\$ 43,724.32	Less Exempt:
TAXABLE PAY:	\$ 518,213.67	\$ 518,213.67

Exempt Amt:

	CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45% \$ 7,514.10		
FICA - MED (EE)	1.45% \$ 7,514.10	\$ 7,514.09	\$ 0.01
FICA - SOC SEC (ER)	6.20% \$ 32,129.25		
FICA - SOC SEC (EE)	6.20% \$ 32,129.25	\$ 32,129.31	\$ (0.06)
FED WITHHOLDING	\$ 46,368.74	\$ 46,368.74	

Employees over FICA-SS Cap:
Roshanda Thomas
Michael Gaines

Paycode S - Employee Reimb.:

TOTAL: \$ -

TAX DEPOSIT:	\$ 125,655.44	\$ 125,655.44
FICA - MEDICARE	2.90% \$ 15,028.20	\$ 15,028.18
FICA - SOCIAL SECURITY	12.40% \$ 64,258.50	\$ 64,258.62
FED WITHHOLDING	\$ 46,368.74	\$ 46,368.74
TOTAL TAX:	\$ 125,655.44	\$ 125,655.54

PREPARED BY: Andrie Flores

PREPARED DATE: 1/15/2024

Run Date: 01/15/24
Time: 09:56

MEMORIAL MEDICAL CENTER
Payroll Register (Bi-Weekly)
Pay Period 12/29/23 - 01/11/24 Run# 1

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Final Summary

*-- Pay Code Summary						*-- Deductions Summary								
PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross	Code	Amount				
1	REGULAR PAY-S1	9193.75	N		N	N		217947.52	A/R	267.91	A/R2	A/R3		
1	REGULAR PAY-S1	1735.00	N		N	N	N	84963.82	ADVANC	AWARDS	BCBSVI			
1	REGULAR PAY-S1	260.25	Y		N	N		8113.09	BOOTS	CAPE H	CAPE-1			
2	REGULAR PAY-S2	2470.25	N		N	N		67594.69	CAPE-2	CAPE-3	CAPE-4			
2	REGULAR PAY-S2	123.00	Y		N	N		4543.91	CAPE-5	CAPE-C	CAPE-D	1264.88 ✓		
3	REGULAR PAY-S3	1456.25	N		N	N		50699.69	CAPE-F	CAPE-H	31310.01	CAPE-I		
3	REGULAR PAY-S3	51.25	Y		N	N		2397.78	CAPE-L	CAPE-P		CANCER		
4	CALL BACK PAY	29.00	N	1	N	N	Y	1249.38	CHILD	570.69	CLINIC	435.00	COMBIN	262.28 ✓
4	CALL BACK PAY	33.00	N	2	N	N	Y	1452.51	CREDUN		DD ADV		DENTAL	
4	CALL BACK PAY	4.00	N	3	N	N	Y	178.79	DEP-LF		DIS-LF		EAT	
4	CALL BACK PAY	1.00	Y	2	N	N	Y	61.90	EATCSH		FEDTAX	46368.74	FICA-M	7514.09 ✓
C	CALL PAY	2406.25	N	1	N	N		4812.50	FICA-O	32129.31	FIRSTC		FLEX S	4636.74 ✓
D	DOUBLE TIME	2.50	N	1	N	N		197.10	FLX FE		FORT D		FUTA	
D	DOUBLE TIME	8.75	N	2	N	N		791.55	GIFT S	360.37	GRANT		GRP-IN	
D	DOUBLE TIME	16.25	N	3	N	N		1510.06	GTL		HOSP-I		HSA	579.58 ✓
D	DOUBLE TIME	8.75	Y	2	N	N		1087.28	ID TFT		IRSTAX		LEAF	
E	EXTRA WAGES		N		N	N	N	30904.97	LEGAL	273.86	MASA	905.50	MEALS	2279.89 ✓
E	EXTRA WAGES		N	1	N	N	N	1913.50	METVIS		MISC		MISC/	
F	FUNERAL LEAVE	80.00	N	1	N	N		1372.48	MMCSHR		MOOACC	779.27	MOOILL	1146.40 ✓
I	INSERVICE	8.00	N	1	N	N		116.23	MOOIND	657.50	MOOLIF	1419.72	MOOSTD	2089.98 ✓
J	JURY LEAVE	12.00	N	1	N	N		520.20	MOOVIS	901.60	NATFML	1286.49	OTHER	
K	EXTENDED-ILLNESS-BANK	78.00	N		N	N	N	2682.42	PHI		PHI***		PR PIN	
K	EXTENDED-ILLNESS-BANK	562.00	N	1	N	N		15091.71	RELAY		REPAY		SAMS	
P	PAID-TIME-OFF	269.88	N		N	N	N	12680.57	SCRUBS		SIGNON		ST-TX	
P	PAID-TIME-OFF	1699.00	N	1	N	N		46185.74	STONDF	1015.86	STONE		STONE2	
X	CALL PAY 2	160.00	N	1	N	N		320.00	STUDEN		SUNACC		SUNILL	
Y	YMCA/CURVES		N		N	N	N	45.00	SUNIND		SUNLIF		SUNSTD	
Z	CALL PAY 3	96.00	N	1	N	N		288.00	SUNVIS		SURCHG	315.00	TSA-1	
p	PAID TIME OFF - PROBATION	80.00	N	1	N	N		2215.60	TSA-2		TSA-C		TSA-P	
									TSA-R	38775.53	TUTION		UNIFOR	
									UW/HOS					

*----- Grand Totals: 20844.13 ----- (Gross: 561937.99 ✓ Deductions: 177546.20 ✓ Net: 384391.79 ✓ Pay Date: 1/14/24
| Checks Count:- FT 214 PT 11 Other 38 Female 236 Male 26 Credit OverAmt 13 ZeroNet Term Total: 262 |

Andrew DeFos-Santos
11/15/24

Run Date: 01/15/24
Time: 10:49

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 12/29/23--01/11/24 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 1
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
02612	MEGHAN ODELL	713.01	00063374	01/19/24
02784	STEPHANIE RODRIGUEZ	41.56	00063375	01/19/24
02416	JANELLE SCOTT	1622.38	00063376	01/19/24
02435	SAMANTHA TANTON	455.86	00063377	01/19/24
25022	AMBER L LOYA	236.88	00063378	01/19/24
01178	PATRICIA LAUREN HERMES	153.26	00063379	01/19/24
55234	ELOIZA SOTO	285.43	00063380	01/19/24
76076	ALEXANDRIA Y KNISLEY	187.00	00063381	01/19/24
00041	CARL LEE KING	878.57	DD	01/19/24
00083	SYLVIA A VARGAS	1019.08	DD	01/19/24
00113	JACLYN CARREON	1250.05	DD	01/19/24
00132	SANDRA A BRAUN	984.53	DD	01/19/24
00192	BRENDA D PENA	1386.07	DD	01/19/24
00344	SANDRA LEE RUDDICK	11071.86	DD	01/19/24
00387	BILLIE F DUCKWORTH	2289.93	DD	01/19/24
00392	MONICA T CARR	1267.07	DD	01/19/24
00399	LINDA J TIJERINA	1840.81	DD	01/19/24
00401	VELMA J PINA	1342.63	DD	01/19/24
00417	SHERRY L KING	2361.09	DD	01/19/24
00423	DONN V STRINGO	1959.52	DD	01/19/24
00482	PAM FIKAC	1543.18	DD	01/19/24
00581	CYNTHIA L RUSHING	1658.43	DD	01/19/24
00681	RILLA RENEE WOOD	1959.45	DD	01/19/24
00692	DEBORAH E WITTNEBERT	327.74	DD	01/19/24
00697	MARIA C FARIAS	1127.01	DD	01/19/24
00707	KIMBERLY RESENDEZ	1793.75	DD	01/19/24
00895	EMILIE DIANE WILKEY	693.76	DD	01/19/24
01015	SUSAN B SMALLEY	397.87	DD	01/19/24
01191	SHARON M SPARKS	20.48	DD	01/19/24
01234	JENISE N SVETLIK	2337.11	DD	01/19/24
01241	MANDY MACE	1820.61	DD	01/19/24
01367	MARILYN A SANDERS	1072.04	DD	01/19/24
01791	RAUSHANAH J MONDAY	1654.08	DD	01/19/24
02011	ERIN R CLEVINGER	4048.33	DD	01/19/24
02014	AGAPITA C CANTU	331.69	DD	01/19/24
02021	ERIKA OSORNIA-SANCHEZ	1731.37	DD	01/19/24
02022	AMANDA J GRIGGS, CTR	2549.64	DD	01/19/24
02064	ANNA LAURA GARCIA	1645.38	DD	01/19/24
02099	TRACI M SHEFCIK	8466.94	DD	01/19/24
02112	LESLIE THOMAS	3014.31	DD	01/19/24
02132	JASMINE RUIZ	1688.66	DD	01/19/24
02135	NORMA ALLISON	1444.88	DD	01/19/24
02136	TAMMY ESQUIVEL	299.79	DD	01/19/24
02154	JUSTINE STREL CZYK	1390.45	DD	01/19/24
02162	MIRIAM PALUKA	2019.92	DD	01/19/24
02168	JENSICA KNIGHT	2490.21	DD	01/19/24
02193	TIKI VENGLAR	1635.28	DD	01/19/24
02201	CORRINE VILLEGAS	154.51	DD	01/19/24
02202	SENON I SANCHEZ	532.12	DD	01/19/24
02271	DAWN J BUBENIK	2258.19	DD	01/19/24
02301	NICOLAS TIJERINA	1724.21	DD	01/19/24
02302	CATHERINE MARIE DECILLOS	444.54	DD	01/19/24
02303	CONNIE M PADIERNA	2306.58	DD	01/19/24

Run Date: 01/15/24
Time: 10:49

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 12/29/23--01/11/24 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 2
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
02315	NINA M GREEN	2327.12	DD	01/19/24
02346	JEANETTE L FALCON	263.40	DD	01/19/24
02511	MAGDALENA SEPULVEDA	378.24	DD	01/19/24
02552	VERONICA RAGUSIN	1839.30	DD	01/19/24
02620	IVONNE AVILES	283.28	DD	01/19/24
02622	JESUSA MARIE BENAVIDES	1121.65	DD	01/19/24
02678	MELISSA NESLONEY	1389.58	DD	01/19/24
02701	RONDA GOHLKE	2266.11	DD	01/19/24
02719	DAWN M MCCLELLAND	1827.45	DD	01/19/24
02720	ELDA M LUERA	1959.89	DD	01/19/24
02733	ROBIN N PLEDGER	2424.73	DD	01/19/24
02735	ZANDRA A GARCIA	373.52	DD	01/19/24
02794	HEATHER L MUTCHLER	2341.04	DD	01/19/24
02812	BRITTANY N RUDDICK	2233.89	DD	01/19/24
02907	MARIA F LONGORIA	1225.77	DD	01/19/24
02927	MICHAEL L GAINES	12763.97	DD	01/19/24
02963	DOROTHY J RENDON	710.09	DD	01/19/24
02970	DIANNE G ATKINSON	2192.93	DD	01/19/24
03864	JACQUELINE R HERRERA	1411.84	DD	01/19/24
05003	COURTINE D THURLKILL	3331.32	DD	01/19/24
05006	REGINA A MARTINEZ	1971.47	DD	01/19/24
05122	MARISSA RANGEL	410.48	DD	01/19/24
05345	ERICA NGUYEN	1758.39	DD	01/19/24
05641	AMANDA R KEY	1999.87	DD	01/19/24
05757	SHARON T HOLDER	170.85	DD	01/19/24
07123	CYNTHIA GUERRA	1501.35	DD	01/19/24
07147	CHAD A VORCE	2367.99	DD	01/19/24
07878	DIANA C SAUCEDA	1173.85	DD	01/19/24
11197	CATHERINE A SAENZ	2655.77	DD	01/19/24
11412	COURTNEY L MORKOVSKY	1253.35	DD	01/19/24
12011	KIMBERLY J REYNA	997.91	DD	01/19/24
12115	LISA J HINOJOSA	940.23	DD	01/19/24
12129	MICHAEL HERMES	1755.89	DD	01/19/24
12609	RAELIN R LUNA	617.78	DD	01/19/24
15097	KYLE L DANIEL	2939.79	DD	01/19/24
15131	SAVANNAH HARLEY	1457.39	DD	01/19/24
15139	KRISTEN NICOLE BALLARD	1703.97	DD	01/19/24
15163	KELSEY HEINOLD	3032.51	DD	01/19/24
15171	JESSICA BARRON	1214.74	DD	01/19/24
15236	YESSSENIA L GRANADOS	472.26	DD	01/19/24
15286	DAWN M MAREK	1932.92	DD	01/19/24
15909	JULIE NGUYEN	2335.23	DD	01/19/24
15915	BRIANNE J KEY	3114.88	DD	01/19/24
20012	ALEXIS LOREDO	373.55	DD	01/19/24
20112	YULMA PATRICA RODRIGUEZ	729.57	DD	01/19/24
20144	SOPHIE M PECENA	566.03	DD	01/19/24
20156	ERIN ASHLEY WISDOM	1662.73	DD	01/19/24
20168	JOSHUA PEPPERS	735.03	DD	01/19/24
20178	AMY GARCIA	1289.88	DD	01/19/24
20184	MELISSA ZAMORANO	605.27	DD	01/19/24
20206	KELLI B GOFF	1706.25	DD	01/19/24
20207	SHAWNA G HARTL, MLT	2944.82	DD	01/19/24
20243	MELANIE CORTEZ	1596.80	DD	01/19/24
20272	ANGELA YEAGER	2081.24	DD	01/19/24

Run Date: 01/15/24
Time: 10:49

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
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Num.	Name	Amount	CHECK NUM	DATE
20294	JESSICA D WALTHER	826.66	DD	01/19/24
20324	PATRICIA STRIBLEY	2521.74	DD	01/19/24
20343	SAVANNAH N SOCARRAS	1116.97	DD	01/19/24
20456	SAYDI A ST CLAIR	137.97	DD	01/19/24
20484	BRIANNA S PASSMORE	558.70	DD	01/19/24
20759	JAMIE SADLER	1526.65	DD	01/19/24
20788	JAYLIN RAMIREZ	244.96	DD	01/19/24
20797	BETHANN M DIGGS	2371.51	DD	01/19/24
20977	CHERYL L TBSCH	1627.73	DD	01/19/24
20980	SAVANA LENTO	946.87	DD	01/19/24
21450	DIANA E LEAL	1229.57	DD	01/19/24
21629	JACOBY R CRAWFORD	1648.53	DD	01/19/24
22493	BRITTANY E NAVARRO	1021.24	DD	01/19/24
28120	JESSICA V SELVERA	874.23	DD	01/19/24
29199	KELLY A SCHOTT	1924.22	DD	01/19/24
31035	STACIE L EPLEY	1410.79	DD	01/19/24
31054	LORA L LAMBDEN	936.35	DD	01/19/24
31099	ARACELY Z GARCIA	1104.52	DD	01/19/24
31219	LAUREN PHILLIPS	1580.29	DD	01/19/24
31241	MONICA SALAZAR	410.12	DD	01/19/24
31251	CYNTHIA L BIAS	1729.77	DD	01/19/24
31313	KATHERINE LYNN JIMENEZ	1894.70	DD	01/19/24
31319	STACY L FARMER	1780.53	DD	01/19/24
31463	EDWARD E MATULA	2511.06	DD	01/19/24
31506	RACHEL A HEFFNER	1911.75	DD	01/19/24
31821	KAYLA M ALVAREZ	1941.54	DD	01/19/24
38118	KRYSTELLA F KISIAH	945.16	DD	01/19/24
38188	MADELINE ANDERSON	1025.13	DD	01/19/24
38428	JULIAN HEYSQUIERDO	926.92	DD	01/19/24
41112	ANASTASIA L PEREZ	672.03	DD	01/19/24
41171	TOMMIE M TREVINO	690.93	DD	01/19/24
41219	GUADALUPE OLANDEZ	875.00	DD	01/19/24
41225	LESLIE A CRAIGEN	961.74	DD	01/19/24
41236	PAMELA K VANNOY	1531.98	DD	01/19/24
41251	SARA YBARBO	655.68	DD	01/19/24
41261	BERNICE AGUILAR	792.82	DD	01/19/24
41269	BERENICE LUGO	689.73	DD	01/19/24
41274	KAREN GANN	1024.72	DD	01/19/24
41279	PAMELA R HARMON	766.06	DD	01/19/24
41347	ADRIANNA D STRAKOS	571.45	DD	01/19/24
41418	ANGEL M CASSEL	884.48	DD	01/19/24
41426	TASHA NORMAN	7073.17	DD	01/19/24
41506	JOSEFAT LUGO TORRES	808.55	DD	01/19/24
41612	SONJA A GUAJARDO	1080.90	DD	01/19/24
41617	JACQUELINE M MARTINEZ	993.00	DD	01/19/24
41705	KELSEY R TAYLOR	1489.19	DD	01/19/24
41896	RENAE MICHELLE EMERY	624.99	DD	01/19/24
41897	ROXANNA MUNOZ	571.68	DD	01/19/24
41901	JUANITA R MILLER	1089.76	DD	01/19/24
41953	KAYLENN TREVINO	923.70	DD	01/19/24
42106	CHRISTY SILVAS	909.97	DD	01/19/24
42112	SOCORRO C GONZALES	908.37	DD	01/19/24
42122	LEI ANA CHAVANA	1739.12	DD	01/19/24
42125	MARIA LUCY CALZADA	872.92	DD	01/19/24

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MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 12/29/23--01/11/24 Run: 1
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Num.	Name	Amount	CHECK NUM	DATE
42304	MIMI T NGUYEN	2158.82	DD	01/19/24
42536	MARIAH A SOCARRAS	697.11	DD	01/19/24
42820	MARIA D CHAVEZ	788.92	DD	01/19/24
42842	SHANNA S O DONNELL	3255.43	DD	01/19/24
48680	JESSICA BUSH	49.94	DD	01/19/24
50018	MICHELLE M MORALES	1357.05	DD	01/19/24
50148	PENNY GOULDEN	3455.74	DD	01/19/24
50250	SUMMER E NICHOLSON	747.78	DD	01/19/24
50282	JACOB W HAMILTON, PT, DPT	2503.44	DD	01/19/24
50310	JASMINE GRIGSBY	731.57	DD	01/19/24
50546	MELANIE K SAMAYOA	2176.68	DD	01/19/24
50573	DEANA R DAVIS	1583.75	DD	01/19/24
50596	BETTY S DAVIS	1980.68	DD	01/19/24
50719	DEBRA K MUSTERED	2251.59	DD	01/19/24
50928	ADINA GERDES	689.79	DD	01/19/24
53541	JACLYN B HARTL	1531.61	DD	01/19/24
54024	MONICA A ESCALANTE	1170.53	DD	01/19/24
55025	LEA C RESENDEZ	1342.91	DD	01/19/24
55026	IRENE B PEREZ	787.85	DD	01/19/24
55127	APRIL N KUBALA	2273.24	DD	01/19/24
55371	BLANCA HERNANDEZ	401.90	DD	01/19/24
55382	SHANNON JACILDO	388.13	DD	01/19/24
55658	LAJUAN WILKE	826.81	DD	01/19/24
58115	BECKY MARIE SEE	837.26	DD	01/19/24
58510	RITA L POLENSKY	670.67	DD	01/19/24
60112	ROBERT A RODRIQUEZ	2029.58	DD	01/19/24
60131	NORA OVALLE	574.20	DD	01/19/24
60156	DANIELLE M KALISEK	1227.28	DD	01/19/24
60165	TERESA A BENITEZ	1325.26	DD	01/19/24
60262	IRA R SHARP	728.44	DD	01/19/24
60589	JASON J LOYA	949.21	DD	01/19/24
60616	DOROTHY A LONGORIA	1071.69	DD	01/19/24
62322	ALAN KNIGHT	1497.64	DD	01/19/24
63193	MICHAEL SOCARRAS	923.07	DD	01/19/24
63458	VIRGINIA C BERNARDINO	881.37	DD	01/19/24
65100	FELICITA BONUZ	744.61	DD	01/19/24
65125	MARTHA CUMPEAN	962.02	DD	01/19/24
65127	VERONICA ORTIZ	524.63	DD	01/19/24
65136	TINA KORANEK	1062.29	DD	01/19/24
65148	MARTA INIGUEZ	992.52	DD	01/19/24
65151	ELIA OLACHIA	1039.93	DD	01/19/24
65189	ELVIRA SANCHEZ	891.74	DD	01/19/24
65205	JUANA SANTILLAN	778.40	DD	01/19/24
65213	LEE SIMERLY	1312.61	DD	01/19/24
65247	DIANA CASTILLO	825.04	DD	01/19/24
65269	NATALIE BAREFIELD	966.59	DD	01/19/24
65315	ELVA RODRIGUEZ	819.36	DD	01/19/24
65393	RAMONA A PEREZ	1432.66	DD	01/19/24
65453	AMALIA L FLORES	1273.77	DD	01/19/24
65463	MARIA I VELOZ	725.39	DD	01/19/24
65486	ROSA RODRIGUEZ	725.30	DD	01/19/24
65513	MARIA MORALES	993.97	DD	01/19/24
65705	DOMITILA HERRERA	813.73	DD	01/19/24
65715	MARIA R GOMEZ	963.80	DD	01/19/24

Run Date: 01/15/24
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MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
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Num.	Name	Amount	CHECK NUM	DATE
65865	MARIA F LEDEZMA	803.31	DD	01/19/24
68368	DOMITILA GARCIA	369.98	DD	01/19/24
68568	CHRISTOPHER RUTHERFORD	976.19	DD	01/19/24
68792	NAZARIO DIAZ HERNANDEZ	1868.28	DD	01/19/24
70119	SARA N BLEDSOE	2515.04	DD	01/19/24
72727	CHRISANDRA LYNN KOVAREK	68.28	DD	01/19/24
73749	GLORIA N REID	2600.14	DD	01/19/24
74159	CAROL VILLARREAL	1302.05	DD	01/19/24
75190	RIKA MILLER	1865.26	DD	01/19/24
76003	IRMA DELEON	703.00	DD	01/19/24
76115	JENNIFER R CARLOCK	689.59	DD	01/19/24
76120	RACHEL CANALES	1248.00	DD	01/19/24
76138	KAREN D GARCIA	726.72	DD	01/19/24
76210	ZOE VILLARREAL	769.31	DD	01/19/24
76300	AIDA JIMENEZ	737.48	DD	01/19/24
76313	PAMELA L BARTON	803.79	DD	01/19/24
76403	KATRINA A POKLUDA	1246.93	DD	01/19/24
76647	CHERYL A SEE	966.98	DD	01/19/24
76706	GREGORY E MORALES	732.23	DD	01/19/24
76854	MARY PATTERSON	783.45	DD	01/19/24
76985	VANESSA TRISTAN	489.70	DD	01/19/24
77646	FAREN A GONZALES	1025.09	DD	01/19/24
78020	MISTY R PASSMORE	1571.30	DD	01/19/24
78058	KYAMN J POWER	241.25	DD	01/19/24
78072	DONNA M RAWLINGS	1556.86	DD	01/19/24
78128	ALEXA QUINTANILLA	828.98	DD	01/19/24
78287	MARISSA D ALMANZAR	2200.42	DD	01/19/24
78336	JESSICA L GLOVER	1689.64	DD	01/19/24
78566	MELISSA K GEE	497.31	DD	01/19/24
78764	ASHLEY D HADLEY	2109.92	DD	01/19/24
78781	KRISTEN R MACHICEK	2168.07	DD	01/19/24
78787	FARAH I JANAK	2666.57	DD	01/19/24
78897	DAYLE J ROBINSON	534.33	DD	01/19/24
80008	ADAM D BESIO	2466.62	DD	01/19/24
80141	JEANNIE ORTA	1653.12	DD	01/19/24
80928	BRYAN HOBGOOD	1739.37	DD	01/19/24
82227	CAITLIN A CLEVINGER	852.00	DD	01/19/24
86482	MEGAN M HARPER	828.17	DD	01/19/24
86576	ELSA HERRERA	816.58	DD	01/19/24
88125	LISA M TREVINO	1144.81	DD	01/19/24
88148	MICHELLE CUMBERLAND	1856.65	DD	01/19/24
88321	ANDREW DE LOS SANTOS	2643.18	DD	01/19/24
88435	JOE GARCIA	1779.95	DD	01/19/24
90320	ROSHANDA S THOMAS	5502.62	DD	01/19/24
90929	STEVE BROCK	4809.87	DD	01/19/24
93231	ANDRIE M FLORES	1833.81	DD	01/19/24
93241	SARIAH N RUBIO	1311.06	DD	01/19/24
98756	ADRIANNA M GALVAN	1530.81	DD	01/19/24

384391.79

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- Jan 8, 2024 - Jan 14, 2024**

Date	Bank Description	MMC Notes	Amount	CPSI
1/12/2024	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	554.23	192.56 +
1/12/2024	PAY PLUS ACHTrans 000000012001956 1010006997	- 3rd Party Payor Fee	192.56	78.94 +
1/11/2024	PAY PLUS ACHTrans 000000011842825 1010006985	- 3rd Party Payor Fee	78.94	8.95 +
1/11/2024	WIRE OUT HEALTHEQUITY	-Wageworks	8504.09	2.02 +
1/10/2024	TSYS/TRANSFIRST MERCH FEES 41399801391837 61	- Credit Card Processing Fee	.43	71.62 +
1/10/2024	TSYS/TRANSFIRST MERCH FEES 41399801368397 61	- Credit Card Processing Fee	270.06	354.09 *
1/10/2024	TSYS/TRANSFIRST MERCH FEES 41399801332401 61	- Credit Card Processing Fee	1044.57	CC Fees
1/10/2024	TSYS/TRANSFIRST MERCH FEES 41399801332419 61	- Credit Card Processing Fee	449.18	43.00 +
1/10/2024	TSYS/TRANSFIRST MERCH FEES 41399801332385 61	- Credit Card Processing Fee	185.71	270.06 +
1/10/2024	TSYS/TRANSFIRST MERCH FEES 41399801332393 61	- Credit Card Processing Fee	990.73	1,044.57 +
1/10/2024	TSYS/TRANSFIRST MERCH FEES 39300982541616 61	- Credit Card Processing Fee	1169.8	449.18 +
1/10/2024	TSYS/TRANSFIRST MERCH FEES 39300982589946 61	- Credit Card Processing Fee	129	185.71 +
1/10/2024	PAY PLUS ACHTrans 000000011723199 1010006973	- 3rd Party Payor Fee	8.95	990.73 +
1/9/2024	CLEARGAGE LLC CLEARGAGE, A37OHL0AYZHGPKO 242	- Patient Financing Service	167.37	1,169.80 +
1/9/2024	MCKESSON DRUG AUTO ACH ACH05813689 910000132	- 340B Drug Program Expense	897.8	1,129.00 +
1/9/2024	PAY PLUS ACHTrans 000000011646547 1010006962	- 3rd Party Payor Fee	2.02	4,282.05 *
1/8/2024	IRS USATAXPYMT 270440800592009 6103601001342	- Payroll Taxes	117983.36	Cleargag
1/8/2024	PAY PLUS ACHTrans 000000011487491 1010006948	- 3rd Party Payor Fee	71.62	167.37 +
			132,742.99	167.37 *

Andrew De Los Santos

ANDREW DE LOS SANTOS
Memorial Medical Center

January 15, 2024

* Approved 01-10-24 CC
X * Approved 01-03-24 CC

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

Date	Description	MMC Notes	Amount
1/15/2024 ✓	TEXAS COUNTY DRS RECEIVABLE 0419-21000024329	-Retirement Funding	\$ 187,165.48
1/19/2024 ✓	WEBFILE TAX PYMT DD	- Sales Tax	\$ 2,025.43
			189,190.91

Andrew De Los Santos

ANDREW DE LOS SANTOS
Memorial Medical Center

January 15, 2024

APPROVED ON

JAN 16 2024

**BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS**

PAY PLUS
192.56 +
78.94 +
8.95 +
2.02 +
71.62 +
354.09 *
CC Fees
43.00 +
270.06 +
1,044.57 +
449.18 +
185.71 +
990.73 +
1,169.80 +
1,129.00 +
4,282.05 *
Cleargag
167.37 +
167.37 *
354.09 +
4,282.05 *
167.37 +
4,803.51 *
132,742.99 +
554.23 -
8,504.09 -
897.80 -
117,983.36 -
4,803.51 *
4,803.51 +
4,803.51 -
0.00 *

☑ Confirmation: You Have Filed Successfully

Sales and Use Tax Period Ending 12/31/2023 (2312)

Taxpayer ID:	Taxpayer Name:	Entered By:
User ID:	MEMORIAL MEDICAL CENTER	Email Address:
Reference Number: 924072083	Taxpayer Address:	Telephone Number: (361) 552-0342
Date and Time of Filing:	815 N VIRGINIA ST PORT LAVACA , TX	
01/09/2024, 09:23:04 AM	77979-3025	
	IP Address:	

PAYMENT SUMMARY

Electronic Check	Payment Reference Number:	Type of Bank Account: Checking
State Amount: \$1,534.42	Trace Number:	Accountholder Name:
Local Amount: \$491.01		Memorial Medical Center Operating
Amount to Pay: \$2,025.43		Bank Routing Number: *
Electronic Check: \$2,025.43		Bank Account Number:
		Payment Effective Date: 01/19/2024

CREDIT SUMMARY

Credits Taken

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

Licensed Customs Broker Exported Sales

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

LOCATION SUMMARY

Loc #	Total Texas Sales	Taxable Sales	Taxable Purchases	Subject to State Tax (Rate .0625)	State Tax Due	Subject to Local Tax	Local Tax Rate	Local Tax Due
00004	24674	24674	0	24674	1542.13	24674	0.02	493.48
SubTotal	24674	24674	0	24674	1542.13	24674		493.48
Total Tax for Locations								\$2,035.61

Total Tax Due:	\$2,035.61
Timely Filing Discount:	- \$10.18
Balance Due:	\$2,025.43
Pending Payments:	- \$0.00
Total Amount Due and Payable:	\$2,025.43

(State amount due is \$1,534.42) (Local amount due is \$491.01)

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COUNTY AUDITOR ON

01/11/2024

JAN 11 2024

11:16

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

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Dates Through:

Vendor # 11820 CALHOUN COUNTY, TEXAS

Class Pay Code

11820 FORTBEND HEALTHCARE CENTER ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010224		01/09/202	01/02/202	02/03/202			3,200.00	0.00	0.00	3,200.00 ✓

TRANSFER NH insurance pymt deposited into mmcc operating

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11820	FORTBEND HEALTHCARE CENTER	3,200.00	0.00	0.00	3,200.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	3,200.00	0.00	0.00	3,200.00

APPROVED ON

JAN 11 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CKH 202517

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01/11/2024
11:12 JAN 11 2024

MEMORIAL MEDICAL CENTER

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Dates Through:

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Vendor# Vendor Name
11824 THE CRESCENT ✓
CALHOUN COUNTY, TEXAS

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010524		01/10/202	01/05/202	02/05/202			15,675.00	0.00	0.00	15,675.00 ✓

TRANSFER *NH insurance pymt deposited into mmc operating*

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11824	THE CRESCENT	15,675.00	0.00	0.00	15,675.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	15,675.00	0.00	0.00	15,675.00

APPROVED ON

JAN 11 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CKH 202 519

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01/11/2024
11:15
JAN 11 2024
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

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Dates Through:

Vendor# Vendor Name

Class Pay Code

11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010224B		01/02/202	01/02/202	02/03/202			2,200.00	0.00	0.00	2,200.00 ✓
	TRANSFER									
010224		01/02/202	01/02/202	02/03/202			3,000.00	0.00	0.00	3,000.00 ✓
	TRANSFER									
010524	Transfer SUPPLIES	01/10/202	01/05/202	02/05/202			381.48	0.00	0.00	381.48 ✓

NH insurance pmt deposited into mml operating
"
"
"

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE	5,581.48	0.00	0.00	5,581.48

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	5,581.48	0.00	0.00	5,581.48

APPROVED ON

JAN 11 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 202518

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01/11/2024
11:15 JAN 11 2024

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010224		01/02/202	01/02/202	02/03/202			1,456.00	0.00	0.00	1,456.00 ✓
	TRANSFER	<i>With insurance pymt deposited into memo operating</i>								
010524	<i>Transfer</i> SUPPLIES	01/10/202	01/05/202	02/05/202			21,688.20	0.00	0.00	21,688.20 ✓
Vendor Totals: Number Name										
	13004 TUSCANY VILLAGE						Gross 23,144.20	Discount 0.00	No-Pay 0.00	Net 23,144.20

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	23,144.20	0.00	0.00	23,144.20

APPROVED ON

JAN 11 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL# 202520

RECEIVED BY THE COUNTY AUDITOR ON
JAN 11 2024
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

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Vendor# Vendor Name

Class Pay Code

12792 BETHANY SENIOR LIVING ✓
CALHOUN COUNTY, TEXAS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010324A		01/09/202	01/03/202	02/03/202			600.00	0.00	0.00	600.00 ✓
	TRANSFER	<i>MT insurance pymt deposited into MMC operating</i>								
010324		01/09/202	01/03/202	02/03/202			121.21	0.00	0.00	121.21 ✓
	TRANSFER	<i>"</i>								

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR LIVING	721.21	0.00	0.00	721.21

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	721.21	0.00	0.00	721.21

APPROVED ON

JAN 11 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#202516

8

RUN DATE:01/16/24
 TIME:15:09

MEMORIAL MEDICAL CENTER
 CHECK REGISTER
 01/17/24 THRU 01/17/24

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	202435	01/17/24	80.33	AMAZON CAPITAL SERVICES
A/P	202436	01/17/24	22,000.00	AMN HEALTHCARE PHYSICIAN
A/P	202437	01/17/24	7,259.63	AYA HEALTHCARE INC
A/P	202438	01/17/24	518.55	BAXTER HEALTHCARE
A/P	202439	01/17/24	20,564.02	BECKMAN COULTER INC
A/P	202440	01/17/24	597.00	BEEKLEY CORPORATION
A/P	202441	01/17/24	1,521.21	BIO-RAD LABORATORIES, INC
A/P	202442	01/17/24	184,453.56	CALHOUN COUNTY
A/P	202443	01/17/24	10.00	CALHOUN COUNTY INDIGENT ACCOUN
A/P	202444	01/17/24	325.77	CARDINAL HEALTH 414, INC.
A/P	202445	01/17/24	3,038.69	CDW GOVERNMENT, INC.
A/P	202446	01/17/24	51,348.56	CITIZENS MEDICAL CENTER
A/P	202447	01/17/24	354.48	COVIDIEN
A/P	202448	01/17/24	491.50	COVIDIEN SALES LLC
A/P	202449	01/17/24	1,148.65	CUSTOM MEDICAL SPECIALTIES
A/P	202450	01/17/24	695.12	DETAR HOSPITAL
A/P	202451	01/17/24	1,037.70	DEWITT POTH & SON
A/P	202452	01/17/24	50,311.25	DIAMOND HEALTHCARE CORP
A/P	202453	01/17/24	93,588.31	DISCOVERY MEDICAL NETWORK INC
A/P	202454	01/17/24	5,500.00	EQUALIZE RCM SERVICES
A/P	202455	01/17/24	10.99	EQUIFAX WORKFORCE SOLUTIONS
A/P	202456	01/17/24	450.00	EVIDENT
A/P	202457	01/17/24	6,044.15	EVOQUA WATER TECHNOLOGIES LLC
A/P	202458	01/17/24	6,175.00	FAVORITE HEALTHCARE STAFFING
A/P	202459	01/17/24	5,767.50	FIRST INSURANCE FUNDING
A/P	202460	01/17/24	2,007.43	FISHER HEALTHCARE
A/P	202461	01/17/24	21,000.00	FORVIS
A/P	202462	01/17/24	1,064.90	GE HEALTHCARE
A/P	202463	01/17/24	11,825.25	GE PRECISION HEALTHCARE, LLC
A/P	202464	01/17/24	177.18	GRAINGER
A/P	202465	01/17/24	10,688.27	GREAT AMERICA FINANCIAL SVCS
A/P	202466	01/17/24	350.00	GUERBET, LLC
A/P	202467	01/17/24	50.00	GULF COAST DELIVERY
A/P	202468	01/17/24	674.48	GULF COAST PAPER COMPANY
A/P	202469	01/17/24	4,610.52	HEALTHCARE FINANCIAL SERVICES
A/P	202470	01/17/24	1,850.00	HEALTHSURE INSURANCE SERVICES
A/P	202471	01/17/24	472.50	HOLOGIC INC
A/P	202472	01/17/24	1,817.50	HOLT CAT
A/P	202473	01/17/24	14,246.63	HUNTER PHARMACY SERVICES
A/P	202474	01/17/24	2,722.26	IRON MOUNTAIN
A/P	202475	01/17/24	404.03	JOHNSON & JOHNSON
A/P	202476	01/17/24	224.46	LANGUAGE LINE SERVICES
A/P	202477	01/17/24	11.18	LOWE'S BUSINESS ACCT/SYNCE
A/P	202478	01/17/24	11,178.56	MEDICAL DATA SYSTEMS, INC.
A/P	202479	01/17/24	.00	VOIDED
A/P	202480	01/17/24	.00	VOIDED
A/P	202481	01/17/24	.00	VOIDED
A/P	202482	01/17/24	29,885.05	MEDLINE INDUSTRIES INC
A/P	202483	01/17/24	25.90	MELSTAN, INC.
A/P	202484	01/17/24	35.06	MERCEDES SCIENTIFIC

RUN DATE:01/16/24
TIME:15:09

MEMORIAL MEDICAL CENTER
CHECK REGISTER
01/17/24 THRU 01/17/24

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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	202485	01/17/24	1,729.83	MORRIS & DICKSON CO, LLC
A/P	202486	01/17/24	1,755.78	MXR IMAGING, INC
A/P	202487	01/17/24	366.80	NACOGDOCHES TRANSCRIPTION
A/P	202488	01/17/24	3,569.57	NATIONAL FARM LIFE INSURANCE
A/P	202489	01/17/24	479.37	NATUS MEDICAL INC
A/P	202490	01/17/24	1,000.00	NEXION HEALTH AT NAVASOTA INC
A/P	202491	01/17/24	1,903.96	OLYMPUS AMERICA INC
A/P	202492	01/17/24	752.16	ORTHO CLINICAL DIAGNOSTICS
A/P	202493	01/17/24	3,084.00	PARAREV
A/P	202494	01/17/24	319.16	PARTSSOURCE, LLC
A/P	202495	01/17/24	207.00	PITNEY BOWES INC
A/P	202496	01/17/24	371.96	PRECISION DYNAMICS CORP (PDC)
A/P	202497	01/17/24	2,729.72	PRESS GANEY ASSOCIATES, INC.
A/P	202498	01/17/24	3,438.17	PRO ENERGY PARTNERS LLC
A/P	202499	01/17/24	4,940.00	REED, CLAYMON, MEEKER & HARGET
A/P	202500	01/17/24	3,851.30	REMEDIS LLC
A/P	202501	01/17/24	93.40	ROBERT RODRIQUEZ
A/P	202502	01/17/24	4,038.24	SIEMENS FINANCIAL SERVICES
A/P	202503	01/17/24	5,684.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	202504	01/17/24	1,842.00	SPARKLIGHT
A/P	202505	01/17/24	64.59	STAPLES
A/P	202506	01/17/24	6,130.42	T-SYSTEM, INC
A/P	202507	01/17/24	7,000.00	TEXAS EMS TRAUMA & ACUTE CARE
A/P	202508	01/17/24	8,591.85	TEXAS MUTUAL INSURANCE CO
A/P	202509	01/17/24	3,420.00	TRIAGE, LLC
A/P	202510	01/17/24	3,920.00	TRINITY PHYSICS CONSULTING LLC
A/P	202511	01/17/24	9,246.53	UNIFIRST HOLDINGS INC
A/P	202512	01/17/24	1,212.00	UPDOX LLC
A/P	202513	01/17/24	40.00	VICTORIA RADIOWORKS, LTD
A/P	202514	01/17/24	1,000.76	WEBPT, INC
A/P	202515	01/17/24	1,887.49	WERPEN USA LLC
A/P	202516	01/17/24	721.21	BETHANY SENIOR LIVING
A/P	202517	01/17/24	3,200.00	FORTBEND HEALTHCARE CENTER
A/P	202518	01/17/24	5,581.48	GOLDENCREEK HEALTHCARE
A/P	202519	01/17/24	15,675.00	THE CRESCENT
A/P	202520	01/17/24	23,144.20	TUSCANY VILLAGE
TOTALS:			711,605.08	

O.C

Payables 663,283.19 +
NH Transfers 48,321.89 +
711,605.08 *

APPROVED ON

JAN 17 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 1/15/2024

Nursing Home	Account	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens ✓		158,084.92	22,618.45 ✓	221,794.85 ✓		307,261.32 ✓	209,176.12 ✓
						Bank Balance Variance	
						Leave in Balance	100.00
						QIPP YR 6 First IGT Refund	85,452.98 ✓
						Molina QIPP November	12,532.22 ✓
						Adjust Balance/Transfer Amt	209,176.12 ✓
Broadmoor ✓		59,571.40 ✓	27,858.59 ✓	165,365.48 ✓		197,078.29 ✓	160,733.79 ✓
						Bank Balance Variance	
						Leave in Balance	100.00
						QIPP YR 6 First IGT Refund	31,612.81 ✓
						Molina QIPP November	4,631.69 ✓
						Adjust Balance/Transfer Amt	160,733.79 ✓
Crescent ✓		143,279.20 ✓	119,598.70 ✓	276,362.54 ✓		300,043.04 ✓	272,901.81 ✓
						Bank Balance Variance	
						Leave in Balance	100.00
						QIPP YR 6 First IGT Refund	23,580.50 ✓
						Molina QIPP November	3,460.73 ✓
						Adjust Balance/Transfer Amt	272,901.81 ✓
Fort Bend ✓		32,294.27 ✓	5,517.98 ✓	83,963.10 ✓		110,739.39 ✓	80,056.62 ✓
						Bank Balance Variance	
						Leave in Balance	100.00
						QIPP YR 6 First IGT Refund	26,676.29 ✓
						Molina QIPP November	3,906.45 ✓
						Adjust Balance/Transfer Amt	80,056.62 ✓
Solera et W Houston ✓		104,755.53 ✓	79,165.66 ✓	116,047.37 ✓		141,637.04 ✓	112,207.16 ✓
						Bank Balance Variance	
						Leave in Balance	100.00
						QIPP YR 6 First IGT Refund	25,582.81 ✓
						Molina QIPP November	3,747.07 ✓
						Adjust Balance/Transfer Amt	112,207.16 ✓
TOTAL TRANSFERS						835,075.50	

209,176.12 +
 160,733.79 +
 272,901.81 + *Broadmoor*
 80,056.62 +
 112,207.16 +
 835,075.50 *

APPROVED ON
 JAN 16 2024
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Approved: *Andrew De Los Santos*
 ANDREW DE LOS SANTOS
 1/15/2024

Ashford Gardner

1/12/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/12/2024 WELLPOINT CO AP E-PAYMENT EE52729930 1110000
1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213633
1/12/2024 Enhanced Analysis Ch
1/11/2024 NOVITAS SOLUTION HCCLAIMPMT 675423 420000147
1/11/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/11/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/11/2024 WIRE OUT ASHFORD HEALTH CARE CENTER LTD
1/11/2024 Check
1/10/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/10/2024 HNB - ECHO HCCLAIMPMT 746003411 440000236533
1/10/2024 MOLINA HEALTHCAR MOLINAACH 01248668 42000017
1/9/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2
1/9/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/9/2024 HNB - ECHO HCCLAIMPMT 746003411 440000299028
1/8/2024 MANAGEANDNET1718 MNS PMNT 000000000000093 41
1/8/2024 Deposit

Table with columns: Transfer-Out, Transfer-In, QIPP/Comp1, QIPP/Comp 2, QIPP/Comp3, QIPP/Comp4&Lapse, QIPP TI, NH PORTION. Includes handwritten annotations like '86.51' and '72,008.62'.

Broadmoor

1/12/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2
1/12/2024 HUMANA CHA DISB HCCLAIMPMT 39190850 42000017
1/12/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/12/2024 WELLPOINT CO AP E-PAYMENT EE52729933 1110000
1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213633
1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213971
1/11/2024 HUMANA INS CO HCCLAIMPMT 39059903 8300005786
1/11/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/11/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/11/2024 MANAGEANDNET1718 MNS PMNT 000000000004293 41
1/11/2024 WIRE OUT CANTEX HEALTH CARE CENTERS III
1/11/2024 Check
1/10/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2
1/10/2024 HUMANA CHA DISB HCCLAIMPMT 39190850 42000017
1/10/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/10/2024 MOLINA HEALTHCAR MOLINAACH 01249161 42000017
1/9/2024 HUMANA CHA DISB HCCLAIMPMT 38923002 42000011
1/9/2024 HUMANA CHA DISB HCCLAIMPMT 38923001 42000011
1/9/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384
1/9/2024 Check
1/8/2024 AARP Supplementa HCCLAIMPMT 746003411 124384
1/8/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384
1/8/2024 HNB - ECHO HCCLAIMPMT 746003411 440000244814
1/8/2024 MANAGEANDNET1718 MNS PMNT 000000000004293 41
1/8/2024 Deposit

Table with columns: Transfer-Out, Transfer-In, QIPP/Comp1, QIPP/Comp 2, QIPP/Comp3, QIPP/Comp4&Lapse, QIPP TI, NH PORTION. Includes handwritten annotations like '27,290.03' and '462.85'.

Crescent

1/12/2024 AARP Supplementa HCCLAIMPMT 746003411 124384
1/12/2024 CIGNA HCCLAIMPMT 1669860425 91000013129025
1/12/2024 DEVOTED HEALTH P HCCLAIMPMT 21000027700326
1/12/2024 DEVOTED HEALTH P HCCLAIMPMT 21000027700328
1/12/2024 DEVOTED HEALTH P HCCLAIMPMT 21000027700330
1/12/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2
1/12/2024 WELLPOINT CO AP E-PAYMENT EE52729932 1110000
1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213633
1/11/2024 DEVOTED HEALTH P HCCLAIMPMT 21000028637280
1/11/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/11/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/11/2024 HNB - ECHO HCCLAIMPMT 746003411 440000273622
1/11/2024 WIRE OUT CANTEX HEALTH CARE CENTERS III
1/11/2024 Check
1/10/2024 DEVOTED HEALTH P HCCLAIMPMT 21000023965559
1/10/2024 DEVOTED HEALTH P HCCLAIMPMT 21000023965561
1/10/2024 DEVOTED HEALTH P HCCLAIMPMT 21000023965563
1/10/2024 DEVOTED HEALTH P HCCLAIMPMT 21000023965565
1/10/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/10/2024 MOLINA HEALTHCAR MOLINAACH 01249117 42000017
1/9/2024 DEVOTED HEALTH P HCCLAIMPMT 21000021446119
1/9/2024 DEVOTED HEALTH P HCCLAIMPMT 21000021446121
1/9/2024 DEVOTED HEALTH P HCCLAIMPMT 21000021446123
1/9/2024 HUMANA CHA DISB HCCLAIMPMT 38927137 42000011
1/9/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/9/2024 HNB - ECHO HCCLAIMPMT 746003411 440000297111
1/8/2024 DEVOTED HEALTH P HCCLAIMPMT 21000026077297
1/8/2024 DEVOTED HEALTH P HCCLAIMPMT 21000026077303
1/8/2024 DEVOTED HEALTH P HCCLAIMPMT 21000026077299
1/8/2024 DEVOTED HEALTH P HCCLAIMPMT 21000026077301
1/8/2024 MANAGEANDNET1718 MNS PMNT 000000000001368 41
1/8/2024 Deposit

Table with columns: Transfer-Out, Transfer-In, QIPP/Comp1, QIPP/Comp 2, QIPP/Comp3, QIPP/Comp4&Lapse, QIPP TI, NH PORTION. Includes handwritten annotations like '118,799.08' and '799.62'.

Fort Bend

1/12/2024 WELLPOINT CO AP E-PAYMENT EE52729929 1110000
1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213633
1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213971
1/11/2024 HNB - ECHO HCCLAIMPMT 746003411 440000273712
1/11/2024 WIRE OUT CANTEX HEALTH CARE CENTERS III
1/11/2024 Check
1/10/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/10/2024 MOLINA HEALTHCAR MOLINAACH 01248765 42000017
1/9/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
1/8/2024 Deposit

Table with columns: Transfer-Out, Transfer-In, QIPP/Comp1, QIPP/Comp 2, QIPP/Comp3, QIPP/Comp4&Lapse, QIPP TI, NH PORTION. Includes handwritten annotations like '5,254.26' and '263.72'.

Solara at West Houston

Table with columns: Transfer-Out, Transfer-In, QIPP/Comp1, QIPP/Comp 2, QIPP/Comp3, QIPP/Comp4&Lapse, QIPP TI, NH PORTION.

1/12/2024	HUMANA INS CO HCCLAIMPMT 39148068 8300005236	10,765.00	-	-	-	10,765.00
1/12/2024	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	4,367.26	-	-	-	4,367.26
1/12/2024	WELLPOINT CO AP E-PAYMENT EES2729931 1110000	8,587.33	-	-	-	8,587.33
1/12/2024	Enhanced Analysis Ch	93.14	-	-	-	-
1/11/2024	HNB - ECHO HCCLAIMPMT 746003411 440000273622	8,379.85	-	-	-	8,379.85
1/11/2024	WIRE OUT CANTEX HEALTH CARE CENTERS III	78,448.96	-	-	-	-
1/11/2024	Check	623.56	-	-	-	-
1/10/2024	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	28,045.61	-	-	-	28,045.61
1/10/2024	MOLINA HEALTHCAR MOLINAACH 01249074 42000017	4,388.70	3,463.68	944.64	3,747.07	641.63
1/9/2024	HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	2,755.46	-	-	-	2,755.46
1/9/2024	HUMANA INS CO HCCLAIMPMT 38830239 8300005989	11,249.00	-	-	-	11,249.00
1/9/2024	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	30,738.89	-	-	-	30,738.89
1/9/2024	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	4,451.87	-	-	-	4,451.87
1/8/2024	Deposit	2,318.40	-	-	-	2,318.40
		79,165.66	116,047.37	3,463.68	944.64	-
		-	-	-	-	3,747.07
		-	-	-	-	112,300.30
TOTALS		304,759.38	863,533.34	26,135.04	7,143.84	-
						28,278.19
						835,255.15

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$2,644,067.90	\$2,515,748.67	\$2,644,067.90	\$2,353,172.45
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$541.17	\$541.17	\$541.17	\$541.17
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$435.66	\$435.66	\$435.66	\$435.66
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD ✓	\$307,261.32 ✓	\$307,261.32 ✓	\$307,261.32	\$243,280.01
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR ✓	\$197,078.29 ✓	\$203,623.25 ✓	\$197,078.29	\$151,589.62
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT ✓	\$300,043.04 ✓	\$334,254.43 ✓	\$300,043.04	\$224,424.21
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON ✓	\$141,637.04 ✓	\$141,637.04 ✓	\$141,637.04	\$118,010.59
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND ✓	\$110,739.39 ✓	\$110,739.39 ✓	\$110,739.39	\$70,247.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$110,052.69	\$119,552.69	\$110,052.69	\$109,998.37
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$14,826.13	\$14,826.13	\$14,826.13	\$14,826.13
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$69,017.79	\$69,017.79	\$69,017.79	\$65,956.78
*5506 MMC -NH BETHANY SENIOR LIVING	\$67,727.40	\$67,727.40	\$67,727.40	\$59,840.06
*3407 MMC -NH TUSCANY VILLAGE	\$94,550.06	\$96,687.24	\$94,550.06	\$58,595.08
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$604,779.54	\$604,779.54	\$604,779.54	\$604,779.54
Total Balance	\$4,662,857.42	\$4,586,931.72	\$4,662,857.42	\$4,075,797.37

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 1/15/2024

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek	I	208,771.57	145,196.46	46,477.58		110,052.69	46,477.58
						Bank Balance	110,052.69
						Variance	-
						Leave In Balance	100.00
						QJPP YR 6 First IGT Refund	49,518.18
						QJPP Superior	13,956.93

Adjust Balance/Transfer Amt 46,477.58

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

1/15/2024

APPROVED ON

JAN 16 2024

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Golden Creek ✓

1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213971
 1/11/2024 TSYS/TRANSFIRST CR CD DEP 543684555876917 91
 1/11/2024 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
 1/11/2024 Check
 1/10/2024 HNB - ECHO HCCLAIMPMT 746003411 440000236533
 1/9/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
 1/9/2024 GOLDENCREEKHEALT MERC DEP 1220356 9100001524
 1/9/2024 GOLDENCREEKHEALT MERC DEP 1220356 9100001524
 1/9/2024 HNB - ECHO HCCLAIMPMT 746003411 440000299028
 1/8/2024 TSYS/TRANSFIRST CR CD DEP 543684555876917 91
 1/8/2024 TSYS/TRANSFIRST CR CD DEP 543684555876917 91

		MMC PORTION					
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
	54.32						54.32
	1,646.52						1,646.52
144,738.27 ✓							-
458.19 ✓							-
	2,291.96						2,291.96
	10,169.27						10,169.27
	6,831.80						6,831.80
	4,658.22						4,658.22
	15,560.49						15,560.49
	150.00						150.00
	5,115.00						5,115.00
145,196.46 ✓	46,477.58 ✓	-	-	-	-	-	46,477.58 ✓

Balances Overview

Account Name

*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$2,644,067.90	\$2,515,748.67	\$2,644,067.90	\$2,353,172.45
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$541.17	\$541.17	\$541.17	\$541.17
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$435.66	\$435.66	\$435.66	\$435.66
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$307,261.32	\$307,261.32	\$307,261.32	\$243,280.01
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$197,078.29	\$203,623.25	\$197,078.29	\$151,589.62
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$300,043.04	\$334,254.43	\$300,043.04	\$224,424.21
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$141,637.04	\$141,637.04	\$141,637.04	\$118,010.59
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$110,739.39	\$110,739.39	\$110,739.39	\$70,247.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE ✓	\$110,052.69 ✓	\$119,552.69	\$110,052.69	\$109,998.37
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$14,826.13	\$14,826.13	\$14,826.13	\$14,826.13
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$69,017.79	\$69,017.79	\$69,017.79	\$65,956.78
*5506 MMC -NH BETHANY SENIOR LIVING	\$67,727.40	\$67,727.40	\$67,727.40	\$59,840.06
*3407 MMC -NH TUSCANY VILLAGE	\$94,550.06	\$96,687.24	\$94,550.06	\$58,595.08
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$604,779.54	\$604,779.54	\$604,779.54	\$604,779.54
Total Balance	\$4,662,857.42	\$4,586,931.72	\$4,662,857.42	\$4,075,797.37

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 1/15/2024

Nursing Home	Account #	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	15423	3,345.44	-	11,480.69			14,826.13	14,726.13
						Bank Balance Variance	14,826.13	
						Leave in Balance	100.00	

Adjust Balance/Transfer Amt 14,726.13

Nursing Home	Account #	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	1715441	6,323.99	6,223.99	68,917.79			69,017.79	68,917.79
						Bank Balance Variance	69,017.79	
						Leave in Balance	100.00	

Adjust Balance/Transfer Amt 68,917.79

TOTAL TRANSFERS 83,643.92

Routine 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 1/15/2024

APPROVED ON
JAN 16 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay ✓

1/9/2024 HNB - ECHO HCCLAIMPMT 746003411 440000296715
 1/9/2024 NDC SWEEP FAC H261 21000025967709 SWEEP FR

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
	23.52					-	23.52
	11,457.17					-	11,457.17
-	11,480.69	-	-	-	-	-	11,480.69

Gulf Pointe Plaza-Medicare/Medicaid ✓

1/12/2024 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 1/11/2024 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 1/11/2024 WIRE OUT HMG Rockport SNF, LP - Commerical
 1/10/2024 MERCHANT BANKCD DEPOSIT 496478518889 9100001
 1/8/2024 MERCHANT BANKCD DEPOSIT 496478518889 9100001

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
	3,061.01					-	3,061.01
	2,132.18					-	2,132.18
6,223.99						-	-
	1,000.00					-	1,000.00
	62,724.60					-	62,724.60
6,223.99	68,917.79	-	-	-	-	-	68,917.79
6,223.99	80,398.48	-	-	-	-	-	80,398.48

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$2,644,067.90	\$2,515,748.67	\$2,644,067.90	\$2,353,172.45
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$541.17	\$541.17	\$541.17	\$541.17
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$435.66	\$435.66	\$435.66	\$435.66
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$307,261.32	\$307,261.32	\$307,261.32	\$243,280.01
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$197,078.29	\$203,623.25	\$197,078.29	\$151,589.62
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$300,043.04	\$334,254.43	\$300,043.04	\$224,424.21
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$141,637.04	\$141,637.04	\$141,637.04	\$118,010.59
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$110,739.39	\$110,739.39	\$110,739.39	\$70,247.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$110,052.69	\$119,552.69	\$110,052.69	\$109,998.37
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY ✓	\$14,826.13 ✓	\$14,826.13 ✓	\$14,826.13	\$14,826.13
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID ✓	\$69,017.79 ✓	\$69,017.79 ✓	\$69,017.79	\$65,956.78
*5506 MMC -NH BETHANY SENIOR LIVING	\$67,727.40	\$67,727.40	\$67,727.40	\$59,840.06
*3407 MMC -NH TUSCANY VILLAGE	\$94,550.06	\$96,687.24	\$94,550.06	\$58,595.08
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$604,779.54	\$604,779.54	\$604,779.54	\$604,779.54
Total Balance	\$4,662,857.42	\$4,586,931.72	\$4,662,857.42	\$4,075,797.37

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 1/15/2024

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		225,573.71	225,473.71	94,450.06			94,550.06	86,666.62
						Bank Balance Variance	94,550.06	
						Leave in Balance	100.00	
						Molina QIPP November	7,783.44	
						Adjust Balance/Transfer Amt	86,666.62	

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 1/15/2024

APPROVED ON
 JAN 16 2024
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Tuscany Village ✓

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

	Transfer-Out	Transfer-In	QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	NH PORTION
1/12/2024 WELLPOINT CO AP E-PAYMENT EE52729934 1110000		17,018.83					-	17,018.83
1/12/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213971		6,376.53					-	6,376.53
1/12/2024 NOVITAS SOLUTION HCCLAIMPMT 676201 420000183		12,559.62					-	12,559.62
1/11/2024 HNB - ECHO HCCLAIMPMT 746003411 440000273629		2,420.85					-	2,420.85
1/11/2024 WIRE OUT LINBAR ENTERPRISES, LLC	225,473.71 ✓						-	-
1/10/2024 HNB - ECHO HCCLAIMPMT 746003411 440000236533		4,454.55					-	4,454.55
1/10/2024 MOLINA HEALTHCAR MOLINAACH 01249155 42000017		8,698.62	6,848.64	1,869.60			7,783.44	915.18
1/9/2024 HNB - ECHO HCCLAIMPMT 746003411 440000299028		1,372.14					-	1,372.14
1/8/2024 NOVITAS SOLUTION HCCLAIMPMT 676201 420000165		32,639.81					-	32,639.81
1/8/2024 HNB - ECHO HCCLAIMPMT 746003411 440000245100		8,909.11					-	8,909.11
	225,473.71 ✓	94,450.06 ✓	6,848.64	1,869.60	-	-	7,783.44 ✓	86,666.62 ✓

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$2,644,067.90	\$2,515,748.67	\$2,644,067.90	\$2,353,172.45
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$541.17	\$541.17	\$541.17	\$541.17
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$435.66	\$435.66	\$435.66	\$435.66
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$307,261.32	\$307,261.32	\$307,261.32	\$243,280.01
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$197,078.29	\$203,623.25	\$197,078.29	\$151,589.62
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$300,043.04	\$334,254.43	\$300,043.04	\$224,424.21
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$141,637.04	\$141,637.04	\$141,637.04	\$118,010.59
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$110,739.39	\$110,739.39	\$110,739.39	\$70,247.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$110,052.69	\$119,552.69	\$110,052.69	\$109,998.37
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$14,826.13	\$14,826.13	\$14,826.13	\$14,826.13
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$69,017.79	\$69,017.79	\$69,017.79	\$65,956.78
*5506 MMC -NH BETHANY SENIOR LIVING	\$67,727.40	\$67,727.40	\$67,727.40	\$59,840.06
*3407 MMC -NH TUSCANY VILLAGE ✓	\$94,550.06 ✓	\$96,687.24	\$94,550.06	\$58,595.08
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$604,779.54	\$604,779.54	\$604,779.54	\$604,779.54
Total Balance	\$4,662,857.42	\$4,586,931.72	\$4,662,857.42	\$4,075,797.37

Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 1/15/2024

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		180,994.97	172,551.44	59,283.87			67,727.40	47,388.87
						Bank Balance	67,727.40	
						Variance		
						Leave in Balance	100.00	
						QIPP Superior	20,238.53	
						Adjust Balance/Transfer Amt	47,388.87	

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 1/15/2024

APPROVED ON

JAN 16 2024

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Bethany Senior Living ✓

MMC PORTION

	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
1/12/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2		185.32					-	185.32
1/12/2024 Deposit		4,726.30					-	4,726.30
1/12/2024 HOSPICE OF SOUTH Payments NF 113122650061608		2,283.70					-	2,283.70
1/12/2024 NOVITAS SOLUTION HCCLAIMPMT 676481 420000183		692.02					-	692.02
1/11/2024 NDC SWEEP FAC K236 31316964129380 SWEEP FR		11,537.94					-	11,537.94
1/11/2024 WIRE OUT PORT LAVACA NH, LLC	160,034.95 ✓						-	-
1/11/2024 Check	621.49 ✓						-	-
1/10/2024 HNB - ECHO HCCLAIMPMT 746003411 440000236533		968.72					-	968.72
1/10/2024 Deposit		15,190.00					-	15,190.00
1/10/2024 Deposit		21,319.17					-	21,319.17
1/10/2024 CK 1002 - RETURNED CHECK	11,895.00 ✓						-	-
1/9/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2		1,995.92					-	1,995.92
1/9/2024 HNB - ECHO HCCLAIMPMT 746003411 440000297111		384.78					-	384.78
	172,551.44 ✓	59,283.87 ✓	-	-	-	-	-	59,283.87 ✓

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$2,644,067.90	\$2,515,748.67	\$2,644,067.90	\$2,353,172.45
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$541.17	\$541.17	\$541.17	\$541.17
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$435.66	\$435.66	\$435.66	\$435.66
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$307,261.32	\$307,261.32	\$307,261.32	\$243,280.01
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$197,078.29	\$203,623.25	\$197,078.29	\$151,589.62
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$300,043.04	\$334,254.43	\$300,043.04	\$224,424.21
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$141,637.04	\$141,637.04	\$141,637.04	\$118,010.59
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$110,739.39	\$110,739.39	\$110,739.39	\$70,247.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$110,052.69	\$119,552.69	\$110,052.69	\$109,998.37
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$14,826.13	\$14,826.13	\$14,826.13	\$14,826.13
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$69,017.79	\$69,017.79	\$69,017.79	\$65,956.78
*5506 MMC -NH BETHANY SENIOR LIVING ✓	\$67,727.40 ✓✓	\$67,727.40	\$67,727.40	\$59,840.06
*3407 MMC -NH TUSCANY VILLAGE	\$94,550.06	\$96,687.24	\$94,550.06	\$58,595.08
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$604,779.54	\$604,779.54	\$604,779.54	\$604,779.54
Total Balance	\$4,662,857.42	\$4,586,931.72	\$4,662,857.42	\$4,075,797.37

Ashford ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P MMC
A _____
Y _____
E _____
E _____

Date Requested: 1/14/2024

FOR ACCT USE ONLY

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

APPROVED ON
JAN 16 2024
BY COUNTY AUDITOR
GALHOUN COUNTY, TEXAS
CK# 001228

AMOUNT: \$ 12,532.22 ✓

G/L NUMBER: 10255040

EXPLANATION: Molina November QIPP

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrew Delacruz

1115/24

Broadmoor ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E

MMC _____

Date Requested: _____ 1/14/2024

FOR ACCT USE ONLY

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

APPROVED ON
JAN 16 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK # 000264

AMOUNT: \$ _____ 4,631.69 ✓ G/L NUMBER: _____ 10255040

EXPLANATION: _____ Molina November QIPP

REQUESTED BY: _____ Michelle Cumberland

AUTHORIZED BY: _____ *Andrew Dolor Santos*

1115/24

Crescent ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P MMC
A _____
Y _____
E _____
E _____

Date Requested: 1/14/2024

FOR ACCT USE ONLY

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

APPROVED ON
JAN 16 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK# W0322

AMOUNT: \$ 3,460.73 G/L NUMBER: 10255040

EXPLANATION: Molina November QIPP

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrew Debo Santos

1/15/24

Fort Bend ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E

Date Requested: 1/14/2024

FOR ACCT USE ONLY

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

APPROVED ON
JAN 16 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CL # 000234

AMOUNT: \$ 3,906.48 ✓

G/L NUMBER: 10255040

EXPLANATION: Molina November QIPP

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrew DelaJuntas

1115/24

Solera ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P MMC
A _____
Y _____
E _____
E _____

Date Requested: 1/14/2024

FOR ACCT USE ONLY

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

APPROVED ON
JAN 16 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
C.K. IF 001289

AMOUNT: \$ 3,747.07 ✓ G/L NUMBER: 10255040

EXPLANATION: Molina November QIPP

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrew D. [Signature]

1115/24

Tuscany ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E

MMC

Date Requested: 1/14/2024

FOR ACCT USE ONLY

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

APPROVED ON

JAN 16 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CK # 1145

AMOUNT: \$ 7,783.44 ✓

G/L NUMBER: 10255040

EXPLANATION: Molina November QIPP

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrew DeLor Sinter

115/24

MEMORIAL MEDICAL CENTER

NH ASHFORD
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001228

Date 1-24-24 88-2265/1131

PAY
TO THE
ORDER OF

MMC Operating

\$ 12,532.22

Twelve thousand, five hundred thirty-two dollars & $\frac{22}{100}$ DOLLARS



County auditor

FOR Wellpoint November



MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000264

Date 1-24-24 88-2265/1131

PAY
TO THE
ORDER OF

MMC Operating

\$ 4631.69

Four thousand, six hundred thirty-one dollars & $\frac{69}{100}$ DOLLARS



County auditor

FOR Wellpoint November



MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000322

Date 1-24-24 88-2265/1131

PAY
TO THE
ORDER OF

MMC Operating

\$ 3460.73

Three thousand, four hundred sixty dollars & $\frac{73}{100}$ DOLLARS



County auditor

FOR Molina November



MEMORIAL MEDICAL CENTER

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

000236

Date 1-24-24

88-2265/1131

PAY

TO THE ORDER OF

MMC Operating

\$ 3906.40/100

Three thousand, nine hundred six dollars

3 40/100

DOLLARS



county auditor

FOR Molina November



MEMORIAL MEDICAL CENTER

NH SOLERA
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001289

Date 1-24-24

88-2265/1131

PAY

TO THE ORDER OF

MMC Operating

\$ 3747.07/100

Three thousand, seven hundred forty-seven dollars

3 07/100

DOLLARS



county auditor

FOR Molina November



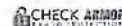
MEMORIAL MEDICAL CENTER 022020
NH TUSCANY VILLAGE

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

1145

88-2265/1131-87

DATE 1/24/24



PAY TO THE ORDER OF

mmc Operating

\$ 7783.44

Seven thousand seven hundred eighty-three

44/100

DOLLARS



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



county auditor

FOR

county treasurer

0

RUN DATE:01/24/24
TIME:09:50

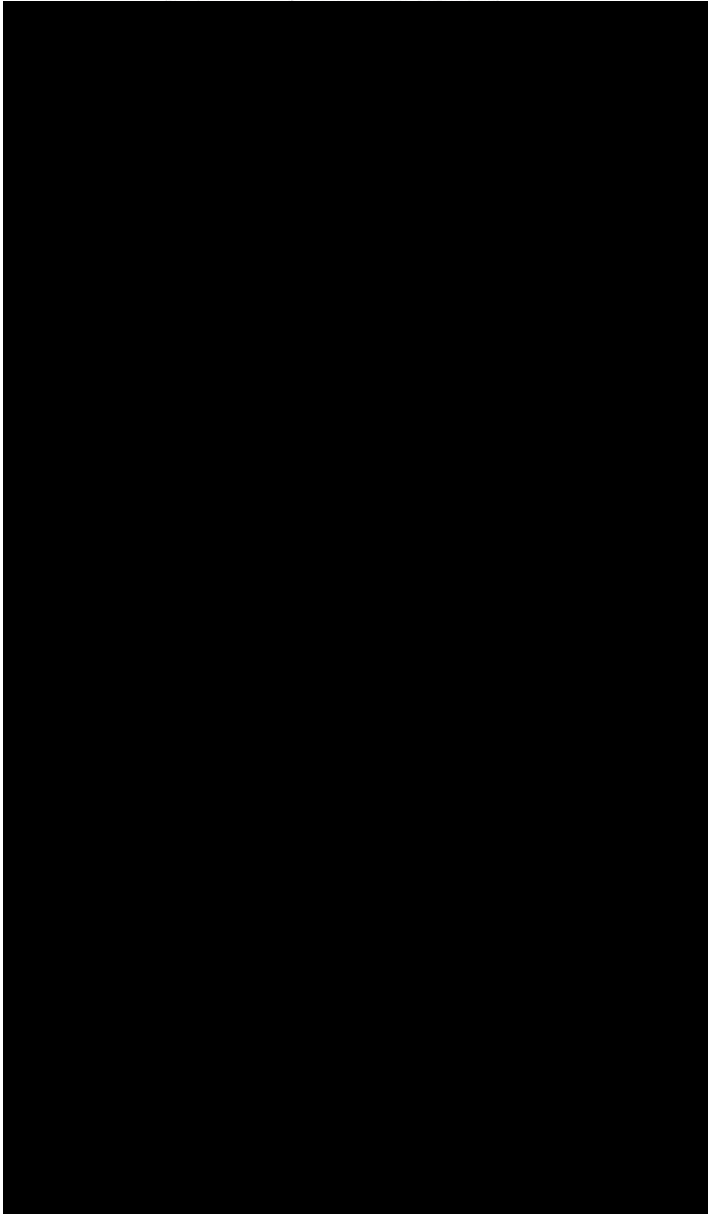
MEMORIAL MEDICAL CENTER
CHECK REGISTER
01/24/24 THRU 01/24/24

PAGE 1
GLCKREG

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

[REDACTED]
NHF * 000236 01/24/24 3,906.48 MMC OPERATING
NHB * 000264 01/24/24 4,631.69 MMC OPERATING
NHC * 000322 01/24/24 3,460.73 MMC OPERATING

[REDACTED]
TUS * 001145 01/24/24 7,783.44 MMC OPERATING
NHA * 001228 01/24/24 12,532.22 MMC OPERATING
NHS * 001289 01/24/24 3,747.07 MMC OPERATING



QIPP Payment to MMC from Nursing Facilities

Commissioner's Court

1/17/2024

NH Name	From Bank Acct #	Ck #	Payee	GL #	Molina November				TOTAL	Date
Ashford ✓	10000018 - Prosperity		MMC -Prosperity Operating #10000001	10255040	12,532.22				12,532.22	1/15/2024
Broadmoor ✓	10000019 - Prosperity		MMC -Prosperity Operating #10000001	10255040	4,631.69				4,631.69	1/15/2024
Crescent ✓	10000020 - Prosperity		MMC -Prosperity Operating #10000001	10255040	3,460.73				3,460.73	1/15/2024
Fort Bend ✓	10000021 - Prosperity		MMC -Prosperity Operating #10000001	10255040	3,906.48				3,906.48	1/15/2024
Solera ✓	10000022 - Prosperity		MMC -Prosperity Operating #10000001	10255040	3,747.07				3,747.07	1/15/2024
Golden Creek	10000023 - Prosperity		MMC -Prosperity Operating #10000001	10255040					-	1/15/2024
Bethany			MMC -Prosperity Operating #10000001	10255040					-	1/15/2024
Tuscany ✓			MMC -Prosperity Operating #10000001	10255040	7,783.44				7,783.44	1/15/2024
				Total:	36,061.63				36,061.63	1/15/2024

Note:

Andrew De Los Santos

Approved:

ANDREW DE LOS SANTOS

1/15/2024