

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---January 22, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$	666,743.27
TOTAL TRANSFERS BETWEEN FUNDS	\$	249,926.62
TOTAL NURSING HOME UPL EXPENSES	\$	342,029.75
TOTAL INTER-GOVERNMENT TRANSFERS	\$	155,114.90
GRAND TOTAL DISBURSEMENTS APPROVED January 22, 2025	\$	1,413,814.54

APPROVED

JAN 22 2025

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---January 22, 2025

PAYABLES AND PAYROLL

1/17/2025 Weekly Payables	627,578.70
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Prosperity Electronic Bank Payments

1/17/2025 90 Degree Benefits - employee insurance claims	36,790.75
1/17/2025 Sales Tax - December 2024	1,868.72
1/17/2025 Pay Plus-Patient Claims Processing Fee	219.28
1/17/2025 Credit Card Lease Fee	285.82

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 666,743.27
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TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

1/17/2025 MMC Operating to Ashford-Correction of insurance payment deposited into MMC Operating in error	2,244.00
1/17/2025 MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	122,092.85
1/17/2025 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	125,589.77

TOTAL TRANSFERS BETWEEN FUNDS	\$ 249,926.62
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NURSING HOME UPL EXPENSES

1/17/2025 Nursing Home UPL-Cantex Transfer	82,869.84
1/17/2025 Nursing Home UPL-Nexion Transfer	37,060.89
1/17/2025 Nursing Home UPL-Tuscany Transfer	195,871.72
1/17/2025 Nursing Home UPL-HSL Transfer	26,227.30

TOTAL NURSING HOME UPL EXPENSES	\$ 342,029.75
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INTER-GOVERNMENT TRANSFERS

1/17/2025 UC DY14 Advance Payment	155,114.90
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TOTAL INTER-GOVERNMENT TRANSFERS	\$ 155,114.90
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GRAND TOTAL DISBURSEMENTS APPROVED January 22, 2025	\$ 1,413,814.54
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JAN 16 2025

01/16/2025

12:17

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 01/30/2025

0

ap_open_invoice.template

Vendor# Vendor Name

11283 ✓ ACE HARDWARE 15521

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 123124		01/14/202	12/31/202	01/24/202			1,083.77	0.00	0.00	1,083.77 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11283	ACE HARDWARE 15521	1,083.77	0.00	0.00	1,083.77

Vendor# Vendor Name

A1680 ✓ AIRGAS USA, LLC - CENTRAL DIV

Class Pay Code

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9156943048		12/31/202	12/31/202	01/15/202			2,580.41	0.00	0.00	2,580.41 ✓

✓ 5513390362		12/31/202	12/31/202	01/15/202			286.11	0.00	0.00	286.11 ✓
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✓ 5513390281		12/31/202	12/31/202	01/20/202			1,051.38	0.00	0.00	1,051.38 ✓
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✓ 9157170104		01/14/202	01/09/202	02/03/202			69.85	0.00	0.00	69.85 ✓
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✓ 9157170088		01/14/202	01/09/202	02/03/202			329.59	0.00	0.00	329.59 ✓
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS USA, LLC - CENTRAL DIV	4,317.34	0.00	0.00	4,317.34

Vendor# Vendor Name

14028 ✓ AMAZON CAPITAL SERVICES

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1XQQ6KVJP3R3		01/08/202	01/02/202	01/24/202			1,116.18	0.00	0.00	1,116.18 ✓

✓ 1HJWVPLXGLVG		01/08/202	01/04/202	01/24/202			2,898.00	0.00	0.00	2,898.00 ✓
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✓ 17X7RF7WXL39		01/15/202	12/27/202	01/24/202			463.95	0.00	0.00	463.95 ✓
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
14028	AMAZON CAPITAL SERVICES	4,478.13	0.00	0.00	4,478.13

Vendor# Vendor Name

A2218 ✓ AQUA BEVERAGE COMPANY

Class Pay Code

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 184483		01/09/202	12/31/202	01/25/202			60.50	0.00	0.00	60.50 ✓

✓ 184484		01/09/202	12/31/202	01/25/202			-12.00	0.00	0.00	-12.00 ✓
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
A2218	AQUA BEVERAGE COMPANY	48.50	0.00	0.00	48.50

Vendor# Vendor Name

11816 ASHFORD GARDENS

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
011025		01/16/202	01/10/202	01/25/202			2,244.00	0.00	0.00	2,244.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11816	ASHFORD GARDENS	2,244.00	0.00	0.00	2,244.00

Vendor# Vendor Name

11247 ✓ AVENO NETWORKS

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
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removed - Nursing Home

✓ 15220 12/31/202 12/01/202 12/16/202 4,000.00 0.00 0.00 4,000.00 ✓

✓ 15278 01/01/202 01/01/202 01/16/202 4,000.00 0.00 0.00 4,000.00 ✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11247	AVENO NETWORKS	8,000.00	0.00	0.00	8,000.00

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
✓ 111777398		01/07/202	01/03/202	01/28/202			2,766.64	0.00	0.00	2,766.64 ✓

✓ 4560900		01/08/202	01/03/202	01/28/202			1,484.00	0.00	0.00	1,484.00 ✓
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✓ 5497181		01/15/202	12/21/202	01/15/202			1,935.15	0.00	0.00	1,935.15 ✓
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✓ 4559064		01/15/202	12/21/202	01/15/202			1,484.00	0.00	0.00	1,484.00 ✓
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Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC	7,669.79	0.00	0.00	7,669.79

Vendor#	Vendor Name	Class	Pay Code
15248	✓ BRIGHTLY SOFTWARE INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ INV244359		01/14/202	06/03/202	07/03/202			5,897.07	0.00	0.00	5,897.07 ✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	15248	BRIGHTLY SOFTWARE INC.	5,897.07	0.00	0.00	5,897.07

Vendor#	Vendor Name	Class	Pay Code
16028	✓ C KITCHEN		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 100854		01/16/202	12/05/202	12/31/202			4,095.10	0.00	0.00	4,095.10 ✓

Tax Incl \$312.10 removed

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	16028	C KITCHEN	4,095.10	0.00	0.00	4,095.10

8783.00

Vendor#	Vendor Name	Class	Pay Code
11224	✓ CABLES AND SENSORS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 190746		01/15/202	12/26/202	01/15/202			41.00	0.00	0.00	41.00 ✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11224	CABLES AND SENSORS	41.00	0.00	0.00	41.00

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
✓ 53259829		12/31/202	12/26/202	01/15/202			8.28	0.00	0.00	8.28 ✓

✓ 53256168		12/31/202	12/26/202	01/20/202			34,962.68	0.00	0.00	34,962.68 ✓
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*815 N. Virginia St.
Hospital St.*

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C1048	CALHOUN COUNTY	34,970.96	0.00	0.00	34,970.96

Vendor#	Vendor Name	Class	Pay Code
14064	✓ CAPITAL ONE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 121924		01/15/202	12/19/202	01/13/202			709.24	0.00	0.00	709.24 ✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14064	CAPITAL ONE	709.24	0.00	0.00	709.24

Vendor#	Vendor Name				Class	Pay Code					
13264	CERVEY, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	32843		12/31/202	01/05/202	01/30/202			1,650.00	0.00	0.00	1,650.00
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	13264	CERVEY, LLC						1,650.00	0.00	0.00	1,650.00
Vendor#	Vendor Name					Class	Pay Code				
C1600	CITIZENS MEDICAL CENTER					W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	202428		12/31/202	01/13/202	01/13/202			53,111.57	0.00	0.00	53,111.57
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C1600	CITIZENS MEDICAL CENTER						53,111.57	0.00	0.00	53,111.57
Vendor#	Vendor Name					Class	Pay Code				
C1166	COASTAL OFFICE SolutONS					W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	IN6624		01/10/202	01/09/202	01/20/202			28,774.13	0.00	0.00	28,774.13
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C1166	COASTAL OFFICE SolutONS						28,774.13	0.00	0.00	28,774.13
Vendor#	Vendor Name					Class	Pay Code				
C1970	CONMED CORPORATION					M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	10815827		01/15/202	01/06/202	01/08/202			120.00	0.00	0.00	120.00
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C1970	CONMED CORPORATION						120.00	0.00	0.00	120.00
Vendor#	Vendor Name					Class	Pay Code				
C2157	COOPER SURGICAL INC					M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	CINV55000605527		01/15/202	01/06/202	01/15/202			140.06	0.00	0.00	140.06
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C2157	COOPER SURGICAL INC						140.06	0.00	0.00	140.06
Vendor#	Vendor Name					Class	Pay Code				
14080	CORROHEALTH, INC.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2013738		01/14/202	12/31/202	01/20/202			1,480.90	0.00	0.00	1,480.90
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	14080	CORROHEALTH, INC.						1,480.90	0.00	0.00	1,480.90
Vendor#	Vendor Name					Class	Pay Code				
10043	CROSS COUNTRY STAFFING										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	7429695		01/10/202	11/19/202	12/29/202			1,160.00	0.00	0.00	1,160.00
	7440407		01/10/202	12/06/202	01/05/202			1,800.00	0.00	0.00	1,800.00
	7448314		01/10/202	12/13/202	01/12/202			3,020.00	0.00	0.00	3,020.00
	7457363		01/10/202	12/20/202	01/19/202			3,040.00	0.00	0.00	3,040.00
	7464734		01/10/202	12/27/202	01/15/202			2,980.00	0.00	0.00	2,980.00
	7473009		01/10/202	01/03/202	01/15/202			1,840.00	0.00	0.00	1,840.00

✓	7480006		01/10/202	01/10/202	01/15/202		3,040.00	0.00	0.00	3,040.00	✓
Vendor Totals: Number Name Gross Discount No-Pay Net											
	10043	CROSS COUNTRY STAFFING					16,880.00	0.00	0.00	16,880.00	
Vendor#	Vendor Name		Class		Pay Code						
14400	✓	CULINARY CONCESSIONS LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	INV00001739		01/14/202	12/31/202	01/24/202		35,370.83	0.00	0.00	35,370.83	✓
DECEMBER											
Vendor Totals: Number Name Gross Discount No-Pay Net											
	14400	CULINARY CONCESSIONS LLC					35,370.83	0.00	0.00	35,370.83	
Vendor#	Vendor Name		Class		Pay Code						
12044	✓	CULLIGAN ULTRAPURE INC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	123124		01/07/202	12/31/202	01/15/202		684.65	0.00	0.00	684.65	✓
Vendor Totals: Number Name Gross Discount No-Pay Net											
	12044	CULLIGAN ULTRAPURE INC.					684.65	0.00	0.00	684.65	
Vendor#	Vendor Name		Class		Pay Code						
11368	✓	CYRACOM LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	2025000459		12/31/202	12/31/202	01/15/202		428.97	0.00	0.00	428.97	✓
Vendor Totals: Number Name Gross Discount No-Pay Net											
	11368	CYRACOM LLC					428.97	0.00	0.00	428.97	
Vendor#	Vendor Name		Class		Pay Code						
10509	✓	DA&E									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	22500		01/14/202	12/31/202	01/14/202		3,400.00	0.00	0.00	3,400.00	✓
Vendor Totals: Number Name Gross Discount No-Pay Net											
	10509	DA&E					3,400.00	0.00	0.00	3,400.00	
Vendor#	Vendor Name		Class		Pay Code						
D1200	✓	DETAR HOSPITAL									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	DTR2412018		01/14/202	01/02/202	01/15/202		598.75	0.00	0.00	598.75	✓
Vendor Totals: Number Name Gross Discount No-Pay Net											
	D1200	DETAR HOSPITAL					598.75	0.00	0.00	598.75	
Vendor#	Vendor Name		Class		Pay Code						
10368	✓	DEWITT POTH & SON									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	7756630		01/01/202	11/22/202	01/15/202		101.72	0.00	0.00	101.72	✓
✓	7756640		01/01/202	11/22/202	01/15/202		67.04	0.00	0.00	67.04	✓
✓	7756620		01/01/202	11/22/202	01/15/202		2,730.00	0.00	0.00	2,730.00	✓
✓	7756760		01/01/202	11/22/202	01/15/202		1.90	0.00	0.00	1.90	✓
✓	7790870		01/08/202	01/02/202	01/27/202		573.11	0.00	0.00	573.11	✓
Vendor Totals: Number Name Gross Discount No-Pay Net											
	10368	DEWITT POTH & SON					3,473.77	0.00	0.00	3,473.77	
Vendor#	Vendor Name		Class		Pay Code						

11011 ✓ DIAMOND HEALTHCARE CORP

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ IN20056466		12/31/202	01/01/202	01/26/202			19,166.67	0.00	0.00	19,166.67 ✓
	DECEMBER 2024	CPR								
✓ IN20056465		12/31/202	01/01/202	01/26/202			31,379.52	0.00	0.00	31,379.52 ✓
	DEC 2024	Ben Health								
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
11011 DIAMOND HEALTHCARE CORP							50,546.19	0.00	0.00	50,546.19

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
✓ MMC123124		12/31/202	12/31/202	01/20/202			43,372.69	0.00	0.00	43,372.69 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
10789 DISCOVERY MEDICAL NETWORK INC							43,372.69	0.00	0.00	43,372.69

Vendor# Vendor Name Class Pay Code

11091 ✓ ECOLAB

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 6350000406		01/10/202	01/01/202	01/15/202			231.38	0.00	0.00	231.38 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
11091 ECOLAB							231.38	0.00	0.00	231.38

Vendor# Vendor Name Class Pay Code

14508 ✓ EITAN GROUP NORTH AMERICA, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ IN1063870		01/15/202	01/10/202	01/15/202			345.50	0.00	0.00	345.50 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
14508 EITAN GROUP NORTH AMERICA, INC							345.50	0.00	0.00	345.50

Vendor# Vendor Name Class Pay Code

11284 ✓ EMERGENCY STAFFING SOLUTIONS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 43875		01/14/202	01/15/202	01/24/202			40,062.50	0.00	0.00	40,062.50 ✓
	Services 1-15th									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
11284 EMERGENCY STAFFING SOLUTIONS							40,062.50	0.00	0.00	40,062.50

Vendor# Vendor Name Class Pay Code

11944 ✓ EQUIFAX WORKFORCE SOLUTIONS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2063742464A		01/16/202	12/31/202	01/15/202			10.99	0.00	0.00	10.99 ✓
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

F1100 ✓ FEDERAL EXPRESS CORP.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 870246709		01/09/202	12/05/202	01/15/202			137.55	0.00	0.00	137.55 ✓
✓ 870925544		01/09/202	12/12/202	01/15/202			267.30	0.00	0.00	267.30 ✓
✓ 871614759		01/09/202	12/19/202	01/15/202			42.64	0.00	0.00	42.64 ✓
✓ 872386690		01/09/202	12/26/202	01/15/202			75.63	0.00	0.00	75.63 ✓
✓ 873004954		01/09/202	01/02/202	01/15/202			78.70	0.00	0.00	78.70 ✓

Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		F1100	FEDERAL EXPRESS CORP.				601.82	0.00	0.00	601.82
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
	7898731		12/17/202	01/03/202	01/28/202		880.69	0.00	0.00	880.69
	7747288		01/15/202	12/20/202	01/14/202		138.78	0.00	0.00	138.78
	7824039		01/15/202	12/27/202	01/21/202		52.60	0.00	0.00	52.60
	7841633		01/15/202	12/30/202	01/24/202		181.76	0.00	0.00	181.76
	7859455		01/15/202	12/31/202	01/25/202		132.36	0.00	0.00	132.36
	7859456		01/15/202	12/31/202	01/25/202		730.62	0.00	0.00	730.62
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		F1400	FISHER HEALTHCARE				2,116.81	0.00	0.00	2,116.81
Vendor#	Vendor Name		Class	Pay Code						
10599	FORVIS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	2349377		01/01/202	12/31/202	01/15/202		18,112.50	0.00	0.00	18,112.50
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		10599	FORVIS				18,112.50	0.00	0.00	18,112.50
Vendor#	Vendor Name		Class	Pay Code						
11078	FUSION MEDICAL STAFFING, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	INV780941		01/07/202	12/28/202	01/22/202		2,656.00	0.00	0.00	2,656.00
	INV783425		01/09/202	01/04/202	01/29/202		2,656.00	0.00	0.00	2,656.00
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		11078	FUSION MEDICAL STAFFING, LLC				5,312.00	0.00	0.00	5,312.00
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
	6002822344		12/31/202	12/01/202	01/25/202		61.67	0.00	0.00	61.67
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		12404	GE PRECISION HEALTHCARE, LLC				61.67	0.00	0.00	61.67
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
	011025		01/16/202	01/10/202	01/25/202		82,768.54	0.00	0.00	82,768.54
	011025A		01/16/202	01/10/202	01/25/202		15,396.08	0.00	0.00	15,396.08
	011325		01/16/202	01/13/202	01/25/202		6,201.80	0.00	0.00	6,201.80
	011325B		01/16/202	01/13/202	01/25/202		2,001.00	0.00	0.00	2,001.00
	011325A		01/16/202	01/13/202	01/25/202		177.91	0.00	0.00	177.91
	011325C		01/16/202	01/13/202	01/25/202		2,134.40	0.00	0.00	2,134.40

FFY 2025 Preparation

Remove
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011425C	01/16/202 01/14/202 01/25/202	1,885.54	0.00	0.00	1,885.54
011425B	01/16/202 01/14/202 01/25/202	2,602.58	0.00	0.00	2,602.58
011425	01/16/202 01/14/202 01/25/202	5,925.00	0.00	0.00	5,925.00
011425A	01/16/202 01/14/202 01/25/202	3,000.00	0.00	0.00	3,000.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE	122,092.85	0.00	0.00	122,092.85

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
9354933880		01/08/202	12/24/202	01/18/202			503.88	0.00	0.00	503.88
9358228568		01/15/202	12/31/202	01/25/202			29.96	0.00	0.00	29.96
9359073518		01/15/202	01/02/202	01/27/202			686.50	0.00	0.00	686.50

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
W1300	GRAINGER	1,220.34	0.00	0.00	1,220.34

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
38207728		12/31/202	12/30/202	01/24/202			10,470.17	0.00	0.00	10,470.17

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12948	GREAT AMERICA FINANCIAL SVCS	10,470.17	0.00	0.00	10,470.17

Vendor#	Vendor Name	Class	Pay Code							
16024	GULF BEND CENTER									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7513		01/14/202	12/18/202	12/18/202			200.00	0.00	0.00	200.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
16024	GULF BEND CENTER	200.00	0.00	0.00	200.00

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
	2605386		01/15/202	12/24/202	01/23/202			1,127.35	0.00	0.00	1,127.35
	2606482		01/15/202	12/31/202	01/30/202			62.98	0.00	0.00	62.98
	2606488		01/15/202	12/31/202	01/30/202			46.29	0.00	0.00	46.29
	2606484		01/15/202	12/31/202	01/30/202			46.29	0.00	0.00	46.29

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
G1210	GULF COAST PAPER COMPANY	1,282.91	0.00	0.00	1,282.91

Vendor#	Vendor Name	Class	Pay Code							
H0031	HEB CREDIT RECEIVABLES DEPT308									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
122724		01/16/202	12/27/202	01/15/202			706.75	0.00	0.00	706.75

removed

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
H0031	HEB CREDIT RECEIVABLES DEPT308	706.75	0.00	0.00	706.75

Vendor#	Vendor Name	Class	Pay Code								
15208	HOSPITAL CARE CONSULTANTS INC.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	6740		01/10/202	01/15/202	01/24/202			23,663.00	0.00	0.00	23,663.00
	Jan. Services HIGH										
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	15208	HOSPITAL CARE CONSULTANTS INC.						23,663.00	0.00	0.00	23,663.00
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
	6318		12/31/202	01/01/202	01/20/202			14,837.38	0.00	0.00	14,837.38
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	10922	HUNTER PHARMACY SERVICES						14,837.38	0.00	0.00	14,837.38
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
	JZLL236		12/31/202	12/31/202	01/30/202			1,728.20	0.00	0.00	1,728.20
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	11200	IRON MOUNTAIN						1,728.20	0.00	0.00	1,728.20
Vendor#	Vendor Name	Class	Pay Code								
11108	ITERSOURCE CORPORATION										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	711850		01/01/202	01/01/202	01/24/202			1,200.00	0.00	0.00	1,200.00
	711848		01/01/202	01/01/202	01/25/202			250.00	0.00	0.00	250.00
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	11108	ITERSOURCE CORPORATION						1,450.00	0.00	0.00	1,450.00
Vendor#	Vendor Name	Class	Pay Code								
16016											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	ECHJOA0001		01/10/202	01/08/202	01/24/202			217.40	0.00	0.00	217.40
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16016							217.40	0.00	0.00	217.40
Vendor#	Vendor Name	Class	Pay Code								
10972	M G TRUST										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	122724		01/14/202	12/27/202	01/14/202			895.00	0.00	0.00	895.00
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	10972	M G TRUST						895.00	0.00	0.00	895.00
Vendor#	Vendor Name	Class	Pay Code								
M2178	MCKESSON MEDICAL SURGICAL INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	23122555		01/08/202	01/04/202	01/19/202			4,862.25	0.00	0.00	4,862.25
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC						4,862.25	0.00	0.00	4,862.25
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
	198876		12/31/202	01/01/202	01/15/202			98.25	0.00	0.00	98.25

Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
11141		MEDICAL DATA SYSTEMS, INC.					98.25	0.00	0.00	98.25
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
	2349255101		12/17/202	12/18/202	01/25/202		5,254.79	0.00	0.00	5,254.79
	2350102217		12/17/202	12/24/202	01/18/202		59.35	0.00	0.00	59.35
	2350248792		12/17/202	12/25/202	01/19/202		34.11	0.00	0.00	34.11
	2350248793		12/17/202	12/25/202	01/19/202		116.86	0.00	0.00	116.86
	2350248796		12/17/202	12/25/202	01/19/202		66.63	0.00	0.00	66.63
	2350248795		12/17/202	12/25/202	01/19/202		74.05	0.00	0.00	74.05
	2350409177		12/17/202	12/26/202	01/20/202		150.65	0.00	0.00	150.65
	2350248799		01/15/202	12/25/202	01/19/202		104.94	0.00	0.00	104.94
	2350248794		01/15/202	12/25/202	01/19/202		347.98	0.00	0.00	347.98
	2350248797		01/15/202	12/25/202	01/19/202		1,736.00	0.00	0.00	1,736.00
	2350584506		01/15/202	12/28/202	01/22/202		831.88	0.00	0.00	831.88
	2350584507		01/15/202	12/28/202	01/22/202		42.94	0.00	0.00	42.94
	2350898452		01/15/202	12/31/202	01/25/202		81.86	0.00	0.00	81.86
	2350898454		01/15/202	12/31/202	01/25/202		44.08	0.00	0.00	44.08
	2350898453		01/15/202	12/31/202	01/25/202		34.85	0.00	0.00	34.85
	2351023957		01/15/202	12/31/202	01/25/202		1,273.97	0.00	0.00	1,273.97
	2350898455		01/15/202	12/31/202	01/25/202		134.37	0.00	0.00	134.37
	2351155424		01/15/202	01/02/202	01/27/202		15.71	0.00	0.00	15.71
	2351155422		01/15/202	01/02/202	01/27/202		204.91	0.00	0.00	204.91
	2351155425		01/15/202	01/02/202	01/27/202		62.84	0.00	0.00	62.84
	2351155423		01/15/202	01/02/202	01/27/202		48.47	0.00	0.00	48.47
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
M2470		MEDLINE INDUSTRIES INC					10,721.24	0.00	0.00	10,721.24
Vendor#	Vendor Name			Class	Pay Code					
10963	MEMORIAL MEDICAL CLINIC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	122724		01/14/202	12/27/202	01/15/202		245.00	0.00	0.00	245.00
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
10963		MEMORIAL MEDICAL CLINIC					245.00	0.00	0.00	245.00

Vendor#	Vendor Name				Class	Pay Code					
M2621	MMC AUXILIARY GIFT SHOP				W						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	123124		01/09/202	12/31/202	01/24/202			416.76	0.00	0.00	416.76
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP						416.76	0.00	0.00	416.76
Vendor#	Vendor Name				Class	Pay Code					
11144	NAZARIO HERNANDEZ										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	121324		01/01/202	12/13/202	01/24/202			14.50	0.00	0.00	14.50
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	11144	NAZARIO HERNANDEZ						14.50	0.00	0.00	14.50
Vendor#	Vendor Name				Class	Pay Code					
16004	NITOR E LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	V45756		01/14/202	12/26/202	01/10/202			76,844.00	0.00	0.00	76,844.00
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	16004	NITOR E LLC						76,844.00	0.00	0.00	76,844.00
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
	1853871349		01/15/202	12/31/202	01/30/202			752.16	0.00	0.00	752.16
	1853871347		01/15/202	12/31/202	01/30/202			747.84	0.00	0.00	747.84
	1853871348		01/15/202	12/31/202	01/30/202			180.19	0.00	0.00	180.19
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	O1416	ORTHO CLINICAL DIAGNOSTICS						1,680.19	0.00	0.00	1,680.19
Vendor#	Vendor Name				Class	Pay Code					
P2100	PORT LAVACA WAVE				W						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	122524		01/14/202	12/25/202	01/19/202			300.00	0.00	0.00	300.00
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	P2100	PORT LAVACA WAVE						300.00	0.00	0.00	300.00
Vendor#	Vendor Name				Class	Pay Code					
14544	PRINT RITE INC.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	25008		01/15/202	01/27/202	01/15/202			287.58	0.00	0.00	287.58
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	14544	PRINT RITE INC.						287.58	0.00	0.00	287.58
Vendor#	Vendor Name				Class	Pay Code					
12480	PRO ENERGY PARTNERS LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	24120600		01/14/202	12/31/202	01/15/202			3,905.49	0.00	0.00	3,905.49
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	12480	PRO ENERGY PARTNERS LLC						3,905.49	0.00	0.00	3,905.49
Vendor#	Vendor Name				Class	Pay Code					
10554	REPUBLIC SERVICES #847										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

✓	0847001373801A		01/16/202	12/31/202	01/20/202		97.30	0.00	0.00	97.30	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	10554	REPUBLIC SERVICES #847					97.30	0.00	0.00	97.30	
Vendor#	Vendor Name		Class	Pay Code							
S0900	SAMS CLUB DIRECT		W								
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	122024		01/15/202	12/20/202	12/30/202		537.65	0.00	0.00	537.65	✓
✓	112024B		01/16/202	11/20/202	12/01/202		37.80	0.00	0.00	37.80	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	S0900	SAMS CLUB DIRECT					575.45	0.00	0.00	575.45	
Vendor#	Vendor Name		Class	Pay Code							
S1800	SHERWIN WILLIAMS		W								
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	123124		01/14/202	12/31/202	01/15/202		1,013.06	0.00	0.00	1,013.06	✓
	DECEMBER STATEMENT										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	S1800	SHERWIN WILLIAMS					1,013.06	0.00	0.00	1,013.06	
Vendor#	Vendor Name		Class	Pay Code							
14868	SINGLETON ASSOCIATES, P.A.										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	246123124001		12/31/202	01/09/202	01/25/202		12,840.65	0.00	0.00	12,840.65	✓
	December 2024										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	14868	SINGLETON ASSOCIATES, P.A.					12,840.65	0.00	0.00	12,840.65	
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	
✓	CM13961		12/31/202	12/31/202	01/25/202		-3,940.00	0.00	0.00	-3,940.00	✓
✓	107046456		01/07/202	12/31/202	01/25/202		13,068.00	0.00	0.00	13,068.00	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	11296	SOUTH TEXAS BLOOD & TISSUE CEN					9,128.00	0.00	0.00	9,128.00	
Vendor#	Vendor Name		Class	Pay Code							
15488	TEXAN FLOOR SERVICE										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	125601		01/15/202	12/30/202	01/15/202		8,852.40	0.00	0.00	8,852.40	✓
✓	125611		01/16/202	12/30/202	01/29/202		2,598.73	0.00	0.00	2,598.73	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	15488	TEXAN FLOOR SERVICE					11,451.13	0.00	0.00	11,451.13	
Vendor#	Vendor Name		Class	Pay Code							
15856	TEXAS A&M HEALTH SCIENCE CENTE										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	H184306		01/09/202	01/03/202	01/15/202		2,625.00	0.00	0.00	2,625.00	✓
	PPR JAN-MAR 2025										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	15856	TEXAS A&M HEALTH SCIENCE CENTE					2,625.00	0.00	0.00	2,625.00	
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	
✓	1006463365		12/31/202	12/31/202	01/27/202		9,640.50	0.00	0.00	9,640.50	✓

Vendor Totals: Number		Name	Gross		Discount	No-Pay	Net
T2204		TEXAS MUTUAL INSURANCE CO	9,640.50		0.00	0.00	9,640.50
Vendor#	Vendor Name	Class	Pay Code				
10758	TEXAS SELECT STAFFING, LLC						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Net
0024846		01/09/202	01/09/202	01/15/202			4,512.50
Vendor Totals: Number		Name	Gross		Discount	No-Pay	Net
10758		TEXAS SELECT STAFFING, LLC	4,512.50		0.00	0.00	4,512.50
Vendor#	Vendor Name	Class	Pay Code				
T3130	TRI-ANIM HEALTH SERVICES INC	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Net
600610775		01/15/202	01/06/202	01/15/202			421.93
Vendor Totals: Number		Name	Gross		Discount	No-Pay	Net
T3130		TRI-ANIM HEALTH SERVICES INC	421.93		0.00	0.00	421.93
Vendor#	Vendor Name	Class	Pay Code				
11067	TRIZETTO PROVIDER SOLUTIONS						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Net
35FK012500		01/14/202	01/01/202	01/15/202			1,587.97
Vendor Totals: Number		Name	Gross		Discount	No-Pay	Net
11067		TRIZETTO PROVIDER SOLUTIONS	1,587.97		0.00	0.00	1,587.97
Vendor#	Vendor Name	Class	Pay Code				
C2510	TRUBRIDGE	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Net
T2501091378		01/09/202	01/09/202	01/15/202			10,305.30
A2501071378A		01/15/202	01/07/202	01/15/202			20,613.00
Vendor Totals: Number		Name	Gross		Discount	No-Pay	Net
C2510		TRUBRIDGE	30,918.30		0.00	0.00	30,918.30
Vendor#	Vendor Name	Class	Pay Code				
13004	TUSCANY VILLAGE						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Net
010925A		01/16/202	01/09/202	01/25/202			38,922.92
010925		01/16/202	01/09/202	01/25/202			2,448.00
011025A		01/16/202	01/10/202	01/25/202			22,502.14
011025		01/16/202	01/10/202	01/25/202			35,149.21
011325		01/16/202	01/13/202	01/25/202			17,477.50
011425		01/16/202	01/14/202	01/25/202			9,090.00
Vendor Totals: Number		Name	Gross		Discount	No-Pay	Net
13004		TUSCANY VILLAGE	125,589.77		0.00	0.00	125,589.77
Vendor#	Vendor Name	Class	Pay Code				
U1064	UNIFIRST HOLDINGS INC						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Net
2921049999		12/27/202	12/26/202	01/20/202			1,569.97
2921050003		12/27/202	12/26/202	01/20/202			181.78

remove all
NH

Dec. 2024

✓ 2921050004	12/27/202 12/26/202 01/20/202	147.27	0.00	0.00	147.27 ✓
✓ 2921049997	12/27/202 12/26/202 01/20/202	91.01	0.00	0.00	91.01 ✓
✓ 2921050000	12/27/202 12/26/202 01/20/202	202.45	0.00	0.00	202.45 ✓
✓ 2921050001	12/27/202 12/26/202 01/20/202	375.30	0.00	0.00	375.30 ✓
✓ 2921049998	12/27/202 12/26/202 01/20/202	175.66	0.00	0.00	175.66 ✓
✓ 2921050502	01/06/202 01/02/202 01/27/202	162.14	0.00	0.00	162.14 ✓
✓ 2921050500	01/06/202 01/02/202 01/27/202	58.52	0.00	0.00	58.52 ✓
✓ 2921050501	01/06/202 01/02/202 01/27/202	375.30	0.00	0.00	375.30 ✓
✓ 2921050504	01/06/202 01/02/202 01/27/202	152.30	0.00	0.00	152.30 ✓
✓ 2921050497	01/06/202 01/02/202 01/27/202	85.98	0.00	0.00	85.98 ✓
✓ 2921050499	01/06/202 01/02/202 01/27/202	2,003.87	0.00	0.00	2,003.87 ✓
✓ 2921050503	01/06/202 01/02/202 01/27/202	181.78	0.00	0.00	181.78 ✓
✓ 2921050498	01/06/202 01/02/202 01/27/202	171.92	0.00	0.00	171.92 ✓
✓ 2921050183	01/07/202 12/30/202 01/24/202	126.28	0.00	0.00	126.28 ✓
✓ 2921050182	01/07/202 12/30/202 01/24/202	2,198.46	0.00	0.00	2,198.46 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
U1064	UNIFIRST HOLDINGS INC	8,259.99	0.00	0.00	8,259.99

Vendor#	Vendor Name	Class	Pay Code
I1110 ✓	WERFEN USA LLC		
Invoice#	Comment	Tran Dt	Inv Dt Due Dt Check Dt Pay
9111720937		01/08/202	01/02/202 01/27/202

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
I1110	WERFEN USA LLC	1,280.78	0.00	0.00	1,280.78

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	878,524.17	0.00	0.00	878,524.17

APPROVED ON

JAN 16 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 207247 -
207339

878,524.17 +
2,244.00 -
122,092.85 -
125,589.77 -
4,095.10 -
3,783.00 +
706.75 -
627,578.70 =

> NH removed

> pg2. Clitchen Tax removed

> pg7. HEB removed

0

RUN DATE:01/22/25
TIME:12:38

MEMORIAL MEDICAL CENTER
CHECK REGISTER
01/22/25 THRU 01/22/25

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P *	207106	01/22/25	10,070.87	CR FIRST INSURANCE FUNDING
A/P	207267	01/22/25	1,083.77	ACE HARDWARE 15521
A/P	207268	01/22/25	4,317.34	AIRGAS USA, LLC - CENTRAL DIV
A/P	207269	01/22/25	4,478.13	AMAZON CAPITAL SERVICES
A/P	207270	01/22/25	48.50	AQUA BEVERAGE COMPANY
A/P	207271	01/22/25	8,000.00	AVENO NETWORKS
A/P	207272	01/22/25	7,669.79	BECKMAN COULTER INC
A/P	207273	01/22/25	5,897.07	BRIGHTLY SOFTWARE INC.
A/P	207274	01/22/25	3,783.00	C KITCHEN
A/P	207275	01/22/25	41.00	CABLES AND SENSORS
A/P	207276	01/22/25	34,970.96	CALHOUN COUNTY
A/P	207277	01/22/25	709.24	CAPITAL ONE
A/P	207278	01/22/25	1,650.00	CERVEY, LLC
A/P	207279	01/22/25	53,111.57	CITIZENS MEDICAL CENTER
A/P	207280	01/22/25	28,774.13	COASTAL OFFICE SOLUTIONS
A/P	207281	01/22/25	120.00	CONMED CORPORATION
A/P	207282	01/22/25	140.06	COOPER SURGICAL INC
A/P	207283	01/22/25	1,480.90	CORROHEALTH, INC.
A/P	207284	01/22/25	16,880.00	CROSS COUNTRY STAFFING
A/P	207285	01/22/25	35,370.83	CULINARY CONCESSIONS LLC
A/P	207286	01/22/25	684.65	CULLIGAN ULTRAPURE INC.
A/P	207287	01/22/25	428.97	CYRACOM LLC
A/P	207288	01/22/25	3,400.00	DA&E
A/P	207289	01/22/25	598.75	DETAR HOSPITAL
A/P	207290	01/22/25	3,473.77	DEWITT POTH & SON
A/P	207291	01/22/25	50,546.19	DIAMOND HEALTHCARE CORP
A/P	207292	01/22/25	43,372.69	DISCOVERY MEDICAL NETWORK INC
A/P	207293	01/22/25	231.38	ECOLAB
A/P	207294	01/22/25	345.50	EITAN GROUP NORTH AMERICA, INC
A/P	207295	01/22/25	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	207296	01/22/25	10.99	EQUIFAX WORKFORCE SOLUTIONS
A/P	207297	01/22/25	601.82	FEDERAL EXPRESS CORP.
A/P	207298	01/22/25	2,116.81	FISHER HEALTHCARE
A/P	207299	01/22/25	18,112.50	FORVIS
A/P	207300	01/22/25	5,312.00	FUSION MEDICAL STAFFING, LLC
A/P	207301	01/22/25	61.67	GE PRECISION HEALTHCARE, LLC
A/P	207302	01/22/25	1,220.34	GRAINGER
A/P	207303	01/22/25	10,470.17	GREAT AMERICA FINANCIAL SVCS
A/P	207304	01/22/25	200.00	GULF BEND CENTER
A/P	207305	01/22/25	1,282.91	GULF COAST PAPER COMPANY
A/P	207306	01/22/25	23,663.00	HOSPITAL CARE CONSULTANTS INC.
A/P	207307	01/22/25	14,837.38	HUNTER PHARMACY SERVICES
A/P	207308	01/22/25	1,728.20	IRON MOUNTAIN
A/P	207309	01/22/25	1,450.00	ITERSOURCE CORPORATION
A/P	207310	01/22/25	217.40	[REDACTED]
A/P	207311	01/22/25	895.00	M G TRUST
A/P	207312	01/22/25	4,862.25	MCKESSON MEDICAL SURGICAL INC
A/P	207313	01/22/25	98.25	MEDICAL DATA SYSTEMS, INC.
A/P	207314	01/22/25	.00	VOIDED
A/P	207315	01/22/25	.00	VOIDED

RUN DATE:01/22/25
TIME:12:38

MEMORIAL MEDICAL CENTER
CHECK REGISTER
01/22/25 THRU 01/22/25

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	207316	01/22/25	10,721.24	MEDLINE INDUSTRIES INC
A/P	207317	01/22/25	245.00	MEMORIAL MEDICAL CLINIC
A/P	207318	01/22/25	416.76	MMC AUXILIARY GIFT SHOP
A/P	207319	01/22/25	14.50	NAZARIO HERNANDEZ
A/P	207320	01/22/25	76,844.00	NITOR E LLC
A/P	207321	01/22/25	1,680.19	ORTHO CLINICAL DIAGNOSTICS
A/P	207322	01/22/25	300.00	PORT LAVACA WAVE
A/P	207323	01/22/25	287.58	PRINT RITE INC.
A/P	207324	01/22/25	3,905.49	PRO ENERGY PARTNERS LLC
A/P	207325	01/22/25	97.30	REPUBLIC SERVICES #847
A/P	207326	01/22/25	575.45	SAMS CLUB DIRECT
A/P	207327	01/22/25	1,013.06	SHERWIN WILLIAMS
A/P	207328	01/22/25	12,840.65	SINGLETON ASSOCIATES, P.A.
A/P	207329	01/22/25	9,128.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	207330	01/22/25	11,451.13	TEXAN FLOOR SERVICE
A/P	207331	01/22/25	2,625.00	TEXAS A&M HEALTH SCIENCE CENTE
A/P	207332	01/22/25	9,640.50	TEXAS MUTUAL INSURANCE CO
A/P	207333	01/22/25	4,512.50	TEXAS SELECT STAFFING, LLC
A/P	207334	01/22/25	421.93	TRI-ANIM HEALTH SERVICES INC
A/P	207335	01/22/25	1,587.97	TRIZETTO PROVIDER SOLUTIONS
A/P	207336	01/22/25	30,918.30	TRUBRIDGE
A/P	207337	01/22/25	.00	VOIDED
A/P	207338	01/22/25	8,259.99	UNIFIRST HOLDINGS INC
A/P	207339	01/22/25	1,280.78	WERFEN USA LLC
A/P	207340	01/22/25	2,244.00	ASHFORD GARDENS
A/P	207341	01/22/25	122,092.85	GOLDENCREEK HEALTHCARE
A/P	207342	01/22/25	125,589.77	TUSCANY VILLAGE
TOTALS:			867,434.45	

APPROVED ON

JAN 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

627,578.70 + -Payables
2,244.00 +
122,092.85 + > NH xfers
125,589.77 +
877,505.32 $\diamond$
10,070.87 - + -Credit
867,434.45 $\diamond$

CHKNO	GRPNO	LOCNO	EMPNO	DEPNO	CLMPRE	CLMNO	CLMSUF	CHKDT	AMT	CLMTP	PAYEE	PAYTO	CVGCD	CVGTP	FIRSTNAME	LASTNAME	CODE	VOID	FROMDT	THRU DT	PRVNO
4014	76351	1	1	0	2025	7001129	0	1/13/2025	\$36,573.39	1	TRUESCRIPTS MANAGEMENT SERVICE LLC	P	517	0			PCS	F	12/16/2024	12/29/2024	464334244
4015	76360	3	37	1	2025	9000002	0	1/13/2025	\$217.36	1	CHILDRENS PHYSICIAN SERVICES OF SOUTH	P	177	0			OV	F	9/17/2024	9/17/2024	742620408
									\$36,790.75												



APPROVED ON

JAN 16 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- Jan 13, 2025 - Jan 16, 2025**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>	<u>CPSI "Handwritten Check" #</u>
1/16/2025	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	- CitiBank Corporate Card Payment	884.31 *	901529
1/16/2025	PAY PLUS ACHTrans 51802357 101000695446648 P	- 3rd Party Payor Fee	117.74	901530
1/15/2025	PAY PLUS ACHTrans 51642552 101000694045032 P	- 3rd Party Payor Fee	17.34	901531
1/15/2025	TEXAS COUNTY DRS RECEIVABLE 0419 21000023154	- Retirement Funding	181,134.18 ***	800565
1/15/2025	FDMS FDMS PYMT 052-2100911-000 4100012652143	- Credit Card Machine Lease Fee	45.04	901532
1/15/2025	FDMS FDMS PYMT 052-1743548-000 4100012651454	- Credit Card Machine Lease Fee	80.06	901533
1/15/2025	FDMS FDMS PYMT 052-1743547-000 4100012650463	- Credit Card Machine Lease Fee	40.03	901534
1/15/2025	FDMS FDMS PYMT 052-1737276-000 4100012650090	- Credit Card Machine Lease Fee	120.09	901535
1/14/2025	PAY PLUS ACHTrans 51486363 101000692559602 P	- 3rd Party Payor Fee	34.53	901536
1/14/2025	MCKESSON DRUG AUTO ACH ACH06348026 910000120	- 340B Drug Program Expense	1,449.41 *	550554
1/13/2025	PAY PLUS ACHTrans 51323529 101000691139331 P	- 3rd Party Payor Fee	49.67	901537
			183,973.00	


Steve Brock, CFO
Memorial Medical Center

January 17, 2025 * Approved on 01.15.25 CC
* * Approved on 12.30.25 CC

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

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>	<u>Amount</u>	
1/20/2025	WEBFILE TAX PYMT DD	- Sales Tax	1,868.72	
2/4/2025	STATE COMTRLR TEXNET	ACCRUED UC IGT	155,114.90	
			156,983.62	
			183,973.00 +	
			884.31 -	
			181,134.18 -	
			1,449.41 -	
			505.10 ◇	
			505.10 -	
			0.00 ◇	
			117.74 +	
			17.34 +	
			34.53 +	
			49.67 +	
			219.28 ◇	
			45.04 +	
			80.06 +	
			40.03 +	
			120.09 +	
			285.82 ◇	
			219.28 +	
			285.82 +	
			505.10 ◇	

pay plus

lease fee

**APPROVED ON
JAN 16 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

✓ Confirmation: You Have Filed Successfully

Sales and Use Tax Period Ending 12/31/2024 (2412)

Taxpayer ID: [REDACTED]	Taxpayer Name:	Entered By: Caitlin Clevenger
User ID: [REDACTED]	MEMORIAL MEDICAL CENTER	Email Address:
Reference Number: [REDACTED]	Taxpayer Address:	cclevenger@mmcpportlavaca.com
Date and Time of Filing:	815 N VIRGINIA ST PORT LAVACA , TX	Telephone Number: (361) 552-0272
01/16/2025, 04:07:30 PM	77979-3025	
	IP Address: [REDACTED]	

PAYMENT SUMMARY

Electronic Check	Payment Reference Number: [REDACTED]	Type of Bank Account: Checking
State Amount: \$1,415.70	Trace Number: 78012610	Accountholder Name:
Local Amount: \$453.02		Memorial Medical Center Operating
Amount to Pay: \$1,868.72		Bank Routing Number: [REDACTED]
Electronic Check: \$1,868.72		Bank Account Number: [REDACTED]
		Payment Effective Date: 01/20/2025

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	22,765	22,765	0.00	22,765	1,422.81	22,765	0.02	455.3
SubTotal	22,765	22,765	0	22,765	1,422.81	22,765		455.3

Total Tax for Locations **1,878.11**

Total Tax Due:	\$1,878.11
Timely Filing Discount:	- \$9.39
Balance Due:	\$1,868.72
Pending Payments:	- \$0.00
Total Amount Due and Payable:	\$1,868.72

(State amount due is \$1,415.70) (Local amount due is \$453.02)



Transaction Summary

Transaction Complete
Trace #.

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

Payment Total	\$155,114.90
Bank Routing and Account Number	
Settlement Date	2/4/2025
UC Hospital Amount	\$155,114.90
Entered By	Michelle Cumberland

A handwritten signature in black ink, appearing to be "DS" or similar, located below the "Entered By" field.

Master NPI 2025	Master TPL List	Submitted TPLs for 2025	Ownership Type	Rural Hospital Designation	Hospital Name	Hospital County	SDA by County	Request DY 14 UC	Is index match to submitted 2025	DY 13 Total Payment	Total DY 13 Costs (After OER and Adjustments)	Final DY 14 UC Advance Payment Amount	DY 14 UC Advance TOT Amount
1489630865	137909111	137909111	Public	Yes	Memorial Medical Center	Calhoun	Nueces	Yes	137909111	\$ 1,581,173.28	\$ 1,703,913.03	\$387,787.25	\$155,114.90

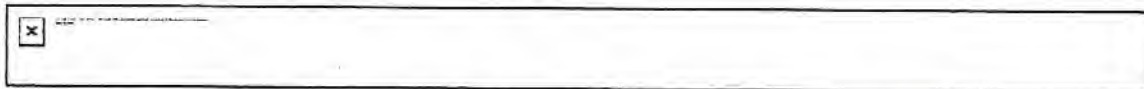
\$ 4,414,358.163 \$ 7,930,311.356 \$ 1,804,830.160 \$ 721,937.064

\$1,804,830.160	80.00%	40.00%
DY 14 UC Advance Payment Allocation (AS-Funds)	Federal Match Rate	State Match Rate

Michelle Cumberland

From: Texas Health and Human Services Commission <txhhs@public.govdelivery.com>
Sent: Tuesday, January 14, 2025 9:07 AM
To: Michelle Cumberland
Subject: UC Program DY14 IGT Notification – Advance Payment

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



UC Program DY14 IGT Notification – Advance Payment

HHSC is providing notification of the Intergovernmental Transfers (IGT) call for the Uncompensated Care (UC) Demonstration Year (DY) 14 Advance Payment.

DY14 UC Advance Calculation File for Hospitals and Physician Group has been updated as of Jan. 13, 2025 and can be found under the "UC Advance Calculation Files" heading on the [Provider Finance Department website](#).

State Hospitals (except UT Southwestern), must submit a journal entry for the **All Funds/Payment Amount** located in **Column O** of the "UC DY14 Advanced Calculation" tab. The journal entry should be submitted no later than **Feb. 10, 2025**.

IGT transfer amounts for all others (including UT Southwestern) can be found in **Column P** on the same "UC DY14 Advanced Calculation" tab of the DY14 UC Advance Calculation file.

The IGT must be entered into TexNet **no later than the close of business on Feb. 3, 2025**, with a settlement date of Feb. 4, 2025.

- This settlement date is non-negotiable.
- The funds need to be placed in the "UC" Bucket.

Funds should be transferred through TexNet using the [TexNet instructions](#). After transferring funds, please send an email with a

screenshot or PDF of the confirmation or trace sheet to the [Provider Finance Payments UC Team](#).

An IGT allocation form designating what Service Delivery Area (SDA) the IGT is being submitted for must also be submitted with the Trace Sheet. Submit the trace sheet and IGT allocation as two separate documents. The "UC SDA Allocation Form" can be found under the "Additional Information" heading on the [UC Payments website](#).

Email any questions regarding the calculation in general to the [Provider Finance Hospital Services Team](#).



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This email was sent to mcumberland@mmcportlavaca.com using govDelivery Communications Cloud on behalf of: Texas Health and Human Services Commission - 707 17th St, Suite 4000 - Denver, CO 80202



01/16/2025
11:11

RECEIVED BY THE
COUNTY AUDITOR ON

JAN 16 2025

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 01/25/2025

0
ap_open_invoice.template

Vendor# Vendor Name
11816 ASHFORD GARDENS

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
011025		01/16/202	01/10/202	01/25/202			2,244.00	0.00	0.00	2,244.00

ins. amt. dep. into mmc opt. in error

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11816	ASHFORD GARDENS	2,244.00	0.00	0.00	2,244.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,244.00	0.00	0.00	2,244.00

APPROVED ON

JAN 16 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 207340

JAN 16 2025

MEMORIAL MEDICAL CENTER

01/16/2025

11:18

AP Open Invoice List

0

CALHOUN COUNTY, TEXAS

Due Dates Through: 01/25/2025

ap_open_invoice.template

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
✓ 011025		01/16/202	01/10/202	01/25/202			82,768.54	0.00	0.00	82,768.54 ✓
✓ 011025A	ins. pmt. dep. into mmc opt in error	01/16/202	01/10/202	01/25/202			15,396.08	0.00	0.00	15,396.08 ✓
✓ 011325		01/16/202	01/13/202	01/25/202			6,201.80	0.00	0.00	6,201.80 ✓
✓ 011325B		01/16/202	01/13/202	01/25/202			2,001.00	0.00	0.00	2,001.00 ✓
✓ 011325A		01/16/202	01/13/202	01/25/202			177.91	0.00	0.00	177.91 ✓
✓ 011325C		01/16/202	01/13/202	01/25/202			2,134.40	0.00	0.00	2,134.40 ✓
✓ 011425C		01/16/202	01/14/202	01/25/202			1,885.54	0.00	0.00	1,885.54 ✓
✓ 011425B		01/16/202	01/14/202	01/25/202			2,602.58	0.00	0.00	2,602.58 ✓
✓ 011425		01/16/202	01/14/202	01/25/202			5,925.00	0.00	0.00	5,925.00 ✓
✓ 011425A		01/16/202	01/14/202	01/25/202			3,000.00	0.00	0.00	3,000.00 ✓

Vendor Totals: Number

Name

11836

GOLDENCREEK HEALTHCARE

Gross

Discount

No-Pay

Net

122,092.85

0.00

0.00

122,092.85

Report Summary

Grand Totals:

APPROVED ON

Gross

Discount

No-Pay

Net

122,092.85

0.00

0.00

122,092.85

JAN 16 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 207341

JAN 16 2025

01/16/2025

11:13

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 01/25/2025

0

ap_open_invoice.template

Vendor# Vendor Name

13004 TUSCANY VILLAGE

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
010925A		01/16/202	01/09/202	01/25/202			38,922.92	0.00	0.00	38,922.92
010925	ins pmt. dec. into mmc acct in error	01/16/202	01/09/202	01/25/202			2,448.00	0.00	0.00	2,448.00
011025A		01/16/202	01/10/202	01/25/202			22,502.14	0.00	0.00	22,502.14
011025		01/16/202	01/10/202	01/25/202			35,149.21	0.00	0.00	35,149.21
011325		01/16/202	01/13/202	01/25/202			17,477.50	0.00	0.00	17,477.50
011425		01/16/202	01/14/202	01/25/202			9,090.00	0.00	0.00	9,090.00

Vendor Totals: Number Name

13004 TUSCANY VILLAGE

Gross	Discount	No-Pay	Net
125,589.77	0.00	0.00	125,589.77

Report Summary

Grand Totals:

Gross
125,589.77

Discount
0.00

No-Pay
0.00

Net
125,589.77

APPROVED ON

JAN 16 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 207342

	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home							
Ashford Gardens		28,988.99	28,971.13	2,697.10		2,714.96	-

J:\NH Weekly Transfers\NH UPL Transfer Summary\2025\NH UPL Transfer Summary 1.17.25

Ashford Gardens

1/16/2025 MANAGEANDNET1718 MNS PMNT 0000000000093 41
 1/15/2025 Enhanced Analysis Ch
 1/15/2025 WIRE OUT ASHFORD HEALTH CARE CENTER LTD
 1/14/2025 1258
 1/14/2025 1259
 1/14/2025 HNB - ECHO HCCLAIMPMT 746003411 440000204356
 1/13/2025 HNB - ECHO HCCLAIMPMT 746003411 440000248792

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	1,305.00	-	-	-	-	-	1,305.00
82.14	-	-	-	-	-	-	-
15,983.80	-	-	-	-	-	-	-
12,288.36	-	-	-	-	-	-	-
616.83	-	-	-	-	-	-	-
-	147.92	-	-	-	-	-	147.92
-	1,244.18	-	-	-	-	-	1,244.18
-	-	-	-	-	-	-	-
28,971.13	2,697.10	-	-	-	-	-	2,697.10

Broadmoor

1/16/2025 Deposit
 1/15/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III
 1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000246411
 1/15/2025 HUMANA INS CO HCCLAIMPMT 66397032 8300005607
 1/14/2025 297
 1/14/2025 296
 1/14/2025 HNB - ECHO HCCLAIMPMT 746003411 440000204356
 1/13/2025 HNB - ECHO HCCLAIMPMT 746003411 440000248793
 1/13/2025 UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	2,472.51	-	-	-	-	-	2,472.51
18,842.02	-	-	-	-	-	-	-
-	372.97	-	-	-	-	-	372.97
-	7,905.00	-	-	-	-	-	7,905.00
5,087.24	-	-	-	-	-	-	-
624.09	-	-	-	-	-	-	-
-	1,274.13	-	-	-	-	-	1,274.13
-	866.41	-	-	-	-	-	866.41
-	106.72	-	-	-	-	-	106.72
24,553.35	12,997.74	-	-	-	-	-	12,997.74

Crescent

1/16/2025 Deposit
 1/15/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III
 1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000246535
 1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000246931
 1/14/2025 375
 1/14/2025 376
 1/14/2025 378
 1/14/2025 DEVOTED HEALTH P HCCLAIMPMT 21000023490019
 1/14/2025 DEVOTED HEALTH P HCCLAIMPMT 21000023490017
 1/14/2025 DEVOTED HEALTH P HCCLAIMPMT 21000023490015
 1/13/2025 AARP Supplementa HCCLAIMPMT 746003411 124384

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	6,624.00	-	-	-	-	-	6,624.00
39,620.34	-	-	-	-	-	-	-
-	4,263.10	-	-	-	-	-	4,263.10
-	2,017.05	-	-	-	-	-	2,017.05
4,084.75	-	-	-	-	-	-	-
875.39	-	-	-	-	-	-	-
4,650.00	-	-	-	-	-	-	-
-	23,588.95	-	-	-	-	-	23,588.95
-	10,597.00	-	-	-	-	-	10,597.00
-	21,150.00	-	-	-	-	-	21,150.00
-	1,632.00	-	-	-	-	-	1,632.00
49,230.48	69,872.10	-	-	-	-	-	69,872.10

Fort Bend

1/16/2025 Deposit
 1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000246535
 1/14/2025 264
 1/14/2025 265

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	69.42	-	-	-	-	-	69.42
-	417.46	-	-	-	-	-	417.46
4,967.39	-	-	-	-	-	-	-
208.88	-	-	-	-	-	-	-
5,176.27	486.88	-	-	-	-	-	486.88

Solera at West Houston

1/15/2025 Enhanced Analysis Ch
 1/15/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III
 1/15/2025 HUMANA INS CO HCCLAIMPMT 66361777 8300005606
 1/14/2025 1319
 1/14/2025 1320

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
79.68	-	-	-	-	-	-	-
20,373.72	-	-	-	-	-	-	-
-	2,790.00	-	-	-	-	-	2,790.00
4,818.68	-	-	-	-	-	-	-
583.15	-	-	-	-	-	-	-
25,855.23	2,790.00	-	-	-	-	-	2,790.00
TOTALS		88,843.82	-	-	-	-	88,843.82

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,582,113.94	\$1,237,231.80	\$1,582,113.94	\$1,565,563.24
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$2,714.96 ✓	\$2,714.96	\$2,714.96	\$1,409.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$13,097.74 ✓	\$13,097.74	\$13,097.74	\$10,625.23
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$116,320.99 ✓	\$116,320.99	\$116,320.99	\$109,696.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,810.32 ✓	\$2,810.32	\$2,810.32	\$2,810.32
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$2,686.88 ✓	\$2,686.88	\$2,686.88	\$2,617.46
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$37,160.89	\$42,110.89	\$37,160.89	\$25,086.16
*4551 CAL CO INDIGENT HEALTHCARE	\$5,493.98	\$5,493.98	\$5,493.98	\$5,493.98
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,401.55	\$2,623.32	\$2,401.55	\$2,401.55
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$110.63	\$110.63	\$110.63	\$110.63
*5506 MMC -NH BETHANY SENIOR LIVING	\$26,327.30	\$26,327.30	\$26,327.30	\$23,605.00
*3407 MMC -NH TUSCANY VILLAGE	\$195,971.72	\$409,797.06	\$195,971.72	\$116,758.06
*2998 MMC -MONEY MARKET FUND	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.70	\$39.70	\$39.70	\$39.70
Total Balance	\$4,045,539.55	\$3,919,654.52	\$4,045,539.55	\$3,924,507.23

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
1/17/2025

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		155,957.93	155,857.93	37,060.89		37,160.89	37,060.89
					Bank Balance Variance	37,160.89	
					Leave In Balance	100.00	

Routing Information for Golden Creek:
Nexion Health at Golden Creek
Wells Fargo Bank, N.A.

Oct Interest
Nov Interest
Dec Interest

Adjust Balance/Transfer Amt 37,060.89

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

Approved: 
Steve Brock, CFO

1/17/2025

APPROVED ON
JAN 16 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek

1/16/2025 Deposit
 1/15/2025 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
 1/15/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 1/15/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000246535
 1/15/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001753
 1/15/2025 AETNA AS01 HCCLAIMPMT 1588075964 51000014958
 1/14/2025 229
 1/14/2025 230
 1/14/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
 1/13/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 1/13/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	12,074.73					-	12,074.73
146,705.64	-					-	-
-	1,152.00					-	1,152.00
-	10,421.86					-	10,421.86
-	793.88					-	793.88
-	3,201.00					-	3,201.00
-	2,925.00					-	2,925.00
8,758.66	-					-	-
393.63	-					-	-
-	3,417.42					-	3,417.42
-	2,092.00					-	2,092.00
-	983.00					-	983.00
-	-					-	-
155,857.93	37,060.89	-	-	-	-	-	37,060.89

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,582,113.94	\$1,237,231.80	\$1,582,113.94	\$1,565,563.24
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$2,714.96	\$2,714.96	\$2,714.96	\$1,409.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$13,097.74	\$13,097.74	\$13,097.74	\$10,625.23
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$116,320.99	\$116,320.99	\$116,320.99	\$109,696.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,810.32	\$2,810.32	\$2,810.32	\$2,810.32
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$2,686.88	\$2,686.88	\$2,686.88	\$2,617.46
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$37,160.89 ✓	\$42,110.89	\$37,160.89	\$25,086.16
*4551 CAL CO INDIGENT HEALTHCARE	\$5,493.98	\$5,493.98	\$5,493.98	\$5,493.98
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,401.55	\$2,623.32	\$2,401.55	\$2,401.55
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$110.63	\$110.63	\$110.63	\$110.63
*5506 MMC -NH BETHANY SENIOR LIVING	\$26,327.30	\$26,327.30	\$26,327.30	\$23,605.00
*3407 MMC -NH TUSCANY VILLAGE	\$195,971.72	\$409,797.06	\$195,971.72	\$116,758.06
*2998 MMC -MONEY MARKET FUND	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.70	\$39.70	\$39.70	\$39.70
Total Balance	\$4,045,539.55	\$3,919,654.52	\$4,045,539.55	\$3,924,507.23

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
1/17/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza- Private Pay		1,764.86	-	636.69			2,401.55	no transfer
						Bank Balance	2,401.55	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	2,301.55	
Gulf Pointe Plaza-Medicare/Medicaid		110.63	-	-			110.63	
						Bank Balance	110.63	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	10.63	
TOTAL TRANSFERS							2,312.18	

Routing Information for Gulf Pointe Plaza:

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

Approved: 
Steve Brock, CFO

1/17/2025

APPROVED ON
JAN 16 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

1/13/2025 HNB - ECHO HCCLAIMPMT 746003411 440000248793

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
-	636.69	-	-	-	-	-	636.69
-	636.69	-	-	-	-	-	636.69

Gulf Pointe Plaza-Medicare/Medicaid

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI	
-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-
-	636.69	-	-	-	-	-	636.69

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,582,113.94	\$1,237,231.80	\$1,582,113.94	\$1,565,563.24
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$2,714.96	\$2,714.96	\$2,714.96	\$1,409.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$13,097.74	\$13,097.74	\$13,097.74	\$10,625.23
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$116,320.99	\$116,320.99	\$116,320.99	\$109,696.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,810.32	\$2,810.32	\$2,810.32	\$2,810.32
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$2,686.88	\$2,686.88	\$2,686.88	\$2,617.46
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$37,160.89	\$42,110.89	\$37,160.89	\$25,086.16
*4551 CAL CO INDIGENT HEALTHCARE	\$5,493.98	\$5,493.98	\$5,493.98	\$5,493.98
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,401.55 ✓	\$2,623.32	\$2,401.55	\$2,401.55
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$110.63 ✓	\$110.63	\$110.63	\$110.63
*5506 MMC -NH BETHANY SENIOR LIVING	\$26,327.30	\$26,327.30	\$26,327.30	\$23,605.00
*3407 MMC -NH TUSCANY VILLAGE	\$195,971.72	\$409,797.06	\$195,971.72	\$116,758.06
*2998 MMC -MONEY MARKET FUND	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.70	\$39.70	\$39.70	\$39.70
Total Balance	\$4,045,539.55	\$3,919,654.52	\$4,045,539.55	\$3,924,507.23

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 1/17/2025

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		153,948.76	153,848.76	195,871.72	-	-	195,971.72	195,871.72
						Bank Balance Variance	195,971.72	
						Leave in Balance	100.00	

Adjust Balance/Transfer Amt 195,871.72

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: 
 Steve Brock, CFO 1/17/2025

APPROVED ON
 JAN 16 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Tuscany Village

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp 1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	
1/16/2025 Deposit	-					-	36,426.00
1/16/2025 HNB - ECHO HCCLAIMPMT 746003411 440000287715	36,426.00					-	36,426.00
1/16/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000129	42,070.79					-	42,070.79
1/15/2025 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE	716.87					-	716.87
1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000246535	153,848.76 ✓					-	-
1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000247205	-					-	16,925.35
1/14/2025 Deposit	16,925.35					-	16,925.35
1/14/2025 HNB - ECHO HCCLAIMPMT 746003411 440000204130	968.34					-	968.34
1/14/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000195	34,293.72					-	34,293.72
1/13/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000132	28,106.63					-	28,106.63
	4,019.15					-	4,019.15
	32,344.87					-	32,344.87
	-					-	-
153,848.76 ✓	195,871.72 ✓	-	-	-	-	-	195,871.72

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,582,113.94	\$1,237,231.80	\$1,582,113.94	\$1,565,563.24
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$2,714.96	\$2,714.96	\$2,714.96	\$1,409.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$13,097.74	\$13,097.74	\$13,097.74	\$10,625.23
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$116,320.99	\$116,320.99	\$116,320.99	\$109,696.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,810.32	\$2,810.32	\$2,810.32	\$2,810.32
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$2,686.88	\$2,686.88	\$2,686.88	\$2,617.46
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$37,160.89	\$42,110.89	\$37,160.89	\$25,086.16
*4551 CAL CO INDIGENT HEALTHCARE	\$5,493.98	\$5,493.98	\$5,493.98	\$5,493.98
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,401.55	\$2,623.32	\$2,401.55	\$2,401.55
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$110.63	\$110.63	\$110.63	\$110.63
*5506 MMC -NH BETHANY SENIOR LIVING	\$26,327.30	\$26,327.30	\$26,327.30	\$23,605.00
*3407 MMC -NH TUSCANY VILLAGE	\$195,971.72	\$409,797.06	\$195,971.72	\$116,758.06
*2998 MMC -MONEY MARKET FUND	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.70	\$39.70	\$39.70	\$39.70
Total Balance	\$4,045,539.55	\$3,919,654.52	\$4,045,539.55	\$3,924,507.23

Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 1/17/2025

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
Lavaca Bay Nursing and Rehab		159,803.98	159,703.98	26,227.30			26,327.30	26,227.30
						Bank Balance	26,327.30	
						Variance	0.00	
						Leave in Balance	100.00	

Oct Interest
 Nov Interest
 Dec Interest

Adjust Balance/Transfer Amt 26,227.30

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: [Signature]
 Steve Brock, CFO 1/17/2025

APPROVED ON
 JAN 16 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Lavaca Bay Nursing and Rehab

1/16/2025 Deposit
 1/15/2025 WIRE OUT REG Leased OpCo LLC
 1/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000246535
 1/15/2025 HUMANA INS CO HCCLAIMPMT 663901111 8300005600
 1/14/2025 1057
 1/14/2025 NOVITAS SOLUTION HCCLAIMPMT 676481 420000195
 1/14/2025 HUMANA CHA DISB HCCLAIMPMT 66329985 42000014
 1/14/2025 BCBS TEXAS HCCLAIMPMT C25010E24015200 710001

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	2,722.30	-	-	-	-	-	2,722.30
159,465.86	-	-	-	-	-	-	-
-	272.63	-	-	-	-	-	272.63
-	19,560.49	-	-	-	-	-	19,560.49
238.12	-	-	-	-	-	-	-
-	2,862.59	-	-	-	-	-	2,862.59
-	482.57	-	-	-	-	-	482.57
-	326.72	-	-	-	-	-	326.72
159,703.98	26,227.30	-	-	-	-	-	26,227.30

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,582,113.94	\$1,237,231.80	\$1,582,113.94	\$1,565,563.24
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$2,714.96	\$2,714.96	\$2,714.96	\$1,409.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$13,097.74	\$13,097.74	\$13,097.74	\$10,625.23
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$116,320.99	\$116,320.99	\$116,320.99	\$109,696.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,810.32	\$2,810.32	\$2,810.32	\$2,810.32
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$2,686.88	\$2,686.88	\$2,686.88	\$2,617.46
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$37,160.89	\$42,110.89	\$37,160.89	\$25,086.16
*4551 CAL CO INDIGENT HEALTHCARE	\$5,493.98	\$5,493.98	\$5,493.98	\$5,493.98
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$2,401.55	\$2,623.32	\$2,401.55	\$2,401.55
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$110.63	\$110.63	\$110.63	\$110.63
*5506 MMC -NH BETHANY SENIOR LIVING	\$26,327.30	\$26,327.30	\$26,327.30	\$23,605.00
*3407 MMC -NH TUSCANY VILLAGE	\$195,971.72	\$409,797.06	\$195,971.72	\$116,758.06
*2998 MMC -MONEY MARKET FUND	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95	\$2,058,288.95
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.70	\$39.70	\$39.70	\$39.70
Total Balance	\$4,045,539.55	\$3,919,654.52	\$4,045,539.55	\$3,924,507.23