MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---March 5, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	557,119.67
TOTAL TRANSFERS BETWEEN FUNDS	$	720,100.96
TOTAL NURSING HOME UPL EXPENSES	$	1,356,651.33
TOTAL INTER-GOVERNMENT TRANSFERS	$	10,624.73
GRAND TOTAL DISBURSEMENTS APPROVED March 5, 2025	$	2,644,496.69

APPROVED

MAR 0 5 2025

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---March 5, 2025

PAYABLES AND PAYROLL			
2/27/2025	Weekly Payables	441,506.57	
2/27/2025	Patient Refunds	7,450.00	
3/3/2025	McKesson-340B Prescription Expense	132.06	
3/3/2025	Amerisource Bergen-340B Prescription Expense	147.18	
3/3/2025	Amerisource Bergen-340B Prescription Expense	1,107.91	
	Prosperity Electronic Bank Payments		
3/3/2025	90 Degree Benefits - employee insurance claims	35,442.54	
3/3/2025	HPHG - healh insurance premium payment	69,619.87	
3/3/2025	Pay Plus-Patient Claims Processing Fee	1,713.51	
3/3/2025	Credit Card Processing Fee	0.03	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 557,119.67**
TRANSFERS BETWEEN FUNDS-MMC			
3/3/2025	Transfer from Prosperity Operating Account to Prosperity Money Market	500,000.00	
TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES			
2/27/2025	MMC Operating to Ashford-Correction of insurance payment deposited into MMC Operating in error	17,385.33	
2/27/2025	MMC Operating to Solera-Correction of insurance payment deposited into MMC Operating in error	9,451.29	
2/27/2025	MMC Operating to Fort bend-Correction of insurance payment deposited into MMC Operating in error	5,472.68	
2/27/2025	MMC Operating to Broadmoor-Correction of insurance payment deposited into MMC Operating in error	8,015.30	
2/27/2025	MMC Operating to The Crescent-Correction of insurance payment deposited into MMC Operating in error	4,923.60	
2/27/2025	MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	81,578.70	
2/27/2025	MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	67,062.89	
2/27/2025	MMC Operating to Bethany-Correction of insurance payment deposited into MMC Operating in error	26,211.17	
TOTAL TRANSFERS BETWEEN FUNDS			**$ 720,100.96**
NURSING HOME UPL EXPENSES			
3/3/2025	Nursing Home UPL-Cantex Transfer	686,409.06	
3/3/2025	Nursing Home UPL-Nexion Transfer	177,472.62	
3/3/2025	Nursing Home UPL-HMG Transfer	674.88	
3/3/2025	Nursing Home UPL-Tuscany Transfer	356,097.93	
3/3/2025	Nursing Home UPL-HSL Transfer	115,279.32	
QIPP CHECKS TO MMC			
3/3/2025	Ashford - Wellpoint QIPP Y7 Comp 1 Interim Allocation	7,305.92	
3/3/2025	Broadmoor -Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,475.29	
3/3/2025	Crescent - Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,043.06	
3/3/2025	Fort Bend - Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,291.01	
3/3/2025	Solera - Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,268.43	
3/3/2025	Tuscany - Wellpoint QIPP Y7 Comp 1 Interim Allocation	4,333.81	
TOTAL NURSING HOME UPL EXPENSES			**$ 1,356,651.33**
INTER-GOVERNMENT TRANSFERS			
3/3/2025	Accrued IGT DSH	10,624.73	
TOTAL INTER-GOVERNMENT TRANSFERS			**$ 10,624.73**
GRAND TOTAL DISBURSEMENTS APPROVED March 5, 2025			**$ 2,644,496.69**

Vendor#	Vendor Name	Class	Pay Code
11237	3WON, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
3764		02/25/202	03/01/202	04/01/202			597.00	0.00	0.00	597.00
3779		02/25/202	03/01/202	04/01/202			300.00	0.00	0.00	300.00
3937		02/25/202	05/01/202	06/01/202			199.00	0.00	0.00	199.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11237	3WON, LLC	1,096.00	0.00	0.00	1,096.00

Vendor#	Vendor Name	Class	Pay Code
A1680	AIRGAS USA, LLC - CENTRAL DIV	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
5514102894		02/10/202	03/02/202	03/15/202			286.11	0.00	0.00	286.11

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS USA, LLC - CENTRAL DIV	286.11	0.00	0.00	286.11

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
1XCTNRPGY93R		02/18/202	02/10/202	03/12/202			1,682.31	0.00	0.00	1,682.31
1WJ4QGQ4XF79		02/18/202	02/10/202	03/12/202			850.40	0.00	0.00	850.40
1GL1GVCX7M6F		02/18/202	02/11/202	03/13/202			321.96	0.00	0.00	321.96
1K7R11DMN6XY		02/18/202	02/14/202	03/16/202			925.26	0.00	0.00	925.26
1XGHRM7JTRKM		02/18/202	02/15/202	03/17/202			171.47	0.00	0.00	171.47
1XKWPXGV9GWQ		02/26/202	02/17/202	03/19/202			130.50	0.00	0.00	130.50
1LVKQCGJC7HV		02/26/202	02/17/202	03/19/202			36.59	0.00	0.00	36.59
1WTKXRQ4KC3J		02/26/202	02/18/202	03/20/202			208.14	0.00	0.00	208.14

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14028	AMAZON CAPITAL SERVICES	4,326.63	0.00	0.00	4,326.63

Vendor#	Vendor Name	Class	Pay Code
12800	AUTHORITYRX, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7000081231		02/18/202	02/06/202	03/08/202			3,386.02	0.00	0.00	3,386.02

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12800	AUTHORITYRX, LLC	3,386.02	0.00	0.00	3,386.02

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
83514227		02/19/202	01/31/202	02/25/202			323.56	0.00	0.00	323.56

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net

	B1150	BAXTER HEALTHCARE					323.56	0.00	0.00	323.56
Vendor#	Vendor Name				Class	Pay Code				
M2485	BAYER HEALTHCARE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	6011792881		02/17/202	01/28/202	03/20/202		1,334.77	0.00	0.00	1,334.77
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		M2485	BAYER HEALTHCARE				1,334.77	0.00	0.00	1,334.77
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
	111839605		02/17/202	02/04/202	03/01/202		1,536.55	0.00	0.00	1,536.55
	111859068		02/18/202	02/13/202	03/10/202		5,016.58	0.00	0.00	5,016.58
	7378571		02/19/202	02/14/202	03/11/202		8,471.88	0.00	0.00	8,471.88
	111871423		02/26/202	02/20/202	03/17/202		1,187.24	0.00	0.00	1,187.24
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC				16,212.25	0.00	0.00	16,212.25
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
	MIN0183583		02/18/202	01/14/202	02/18/202		199.00	0.00	0.00	199.00
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		B1320	BEEKLEY CORPORATION				199.00	0.00	0.00	199.00
Vendor#	Vendor Name				Class	Pay Code				
11072	BIO-RAD LABORATORIES, INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	907972261		02/17/202	01/31/202	01/29/202		618.02	0.00	0.00	618.02
	907972260		02/17/202	01/31/202	01/31/202		2,189.78	0.00	0.00	2,189.78
	908000005		02/26/202	02/11/202	02/26/202		431.55	0.00	0.00	431.55
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		11072	BIO-RAD LABORATORIES, INC				3,239.35	0.00	0.00	3,239.35
Vendor#	Vendor Name				Class	Pay Code				
B1655	BOSTON SCIENTIFIC CORPORATION				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	704610457		02/18/202	02/04/202	02/18/202		1,005.24	0.00	0.00	1,005.24
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		B1655	BOSTON SCIENTIFIC CORPORATION				1,005.24	0.00	0.00	1,005.24
Vendor#	Vendor Name				Class	Pay Code				
11832	BROADMOOR AT CREEKSIDE PARK									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	022125		02/25/202	02/21/202	02/25/202		5,313.46	0.00	0.00	5,313.46

Remove - Nursing Home

	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		11832	BROADMOOR AT CREEKSIDE PARK				5,313.46	0.00	0.00	5,313.46
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

	196882		02/26/202	02/20/202	02/26/202		109.00	0.00	0.00	109.00
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		11224	CABLES AND SENSORS				109.00	0.00	0.00	109.00
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
	010125		02/25/202	02/25/202	02/25/202		519.00	0.00	0.00	519.00
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		C1048	CALHOUN COUNTY				519.00	0.00	0.00	519.00
Vendor#	Vendor Name				Class	Pay Code				
14260	CAREFUSION SOLUTIONS, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	70001689286		02/26/202	01/31/202	03/05/202		125.69	0.00	0.00	125.69
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		14260	CAREFUSION SOLUTIONS, LLC				125.69	0.00	0.00	125.69
Vendor#	Vendor Name				Class	Pay Code				
10541	CARESFIELD									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	2000291951		02/17/202	02/07/202	03/09/202		212.36	0.00	0.00	212.36
	2000291952		02/17/202	02/07/202	03/09/202		348.00	0.00	0.00	348.00
	200029230		02/18/202	02/12/202	03/14/202		154.14	0.00	0.00	154.14
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		10541	CARESFIELD				714.50	0.00	0.00	714.50
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
	AC6AJ6K		02/17/202	02/01/202	03/03/202		8,256.00	0.00	0.00	8,256.00
	AC69I3J		02/26/202	02/08/202	03/10/202		249.41	0.00	0.00	249.41
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		C1992	CDW GOVERNMENT, INC.				8,505.41	0.00	0.00	8,505.41
Vendor#	Vendor Name				Class	Pay Code				
C1730	CITY OF PORT LAVACA				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	021325		02/26/202	02/13/202	02/25/202		100.87	0.00	0.00	100.87
	021325A		02/26/202	02/13/202	02/25/202		68.92	0.00	0.00	68.92
	021325B		02/26/202	02/13/202	02/25/202		2,357.74	0.00	0.00	2,357.74
	021325C		02/26/202	02/13/202	02/25/202		108.33	0.00	0.00	108.33
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		C1730	CITY OF PORT LAVACA				2,635.86	0.00	0.00	2,635.86
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
	INQT30372		02/18/202	02/11/202	02/21/202		294.06	0.00	0.00	294.06

701 N. Virginia St.

815 N. Virginia St.

815 N. Virginia St.

101 E N. Virginia St.

OEQT301691		02/18/202	02/25/202	03/07/202		294.06	0.00	0.00	294.06

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C1166	COASTAL OFFICE SOLUTONS	588.12	0.00	0.00	588.12

Vendor#	Vendor Name	Class	Pay Code
C2150	COOK MEDICAL INCORPORATED	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
V27004556		02/04/202	01/28/202	02/04/202			81.30	0.00	0.00	81.30

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C2150	COOK MEDICAL INCORPORATED	81.30	0.00	0.00	81.30

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
7515372		02/18/202	02/07/202	03/09/202			3,040.00	0.00	0.00	3,040.00
7525127		02/25/202	02/14/202	03/16/202			3,040.00	0.00	0.00	3,040.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10043	CROSS COUNTRY STAFFING	6,080.00	0.00	0.00	6,080.00

Vendor#	Vendor Name	Class	Pay Code
10006	CUSTOM ASSEMBLIES, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV14770		02/18/202	02/11/202	03/13/202			400.73	0.00	0.00	400.73

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10006	CUSTOM ASSEMBLIES, INC	400.73	0.00	0.00	400.73

Vendor#	Vendor Name	Class	Pay Code
10842	DH PACE COMPANY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
SMINV393950		02/03/202	01/22/202	02/21/202			385.00	0.00	0.00	385.00

ER Door Service

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10842	DH PACE COMPANY	385.00	0.00	0.00	385.00

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
MMC021525		02/26/202	02/15/202	02/16/202			73,211.58	0.00	0.00	73,211.58

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10789	DISCOVERY MEDICAL NETWORK INC	73,211.58	0.00	0.00	73,211.58

Vendor#	Vendor Name	Class	Pay Code
11291	DOWELL PEST CONTROL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
45784		02/25/202	02/24/202	02/24/202			105.00	0.00	0.00	105.00
45746		02/25/202	02/24/202	02/24/202			505.00	0.00	0.00	505.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11291	DOWELL PEST CONTROL	610.00	0.00	0.00	610.00

Vendor#	Vendor Name	Class	Pay Code
11091	ECOLAB		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6350806019		02/25/202	02/10/202	03/12/202			300.00	0.00	0.00	300.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net

	11091	ECOLAB					300.00	0.00	0.00	300.00
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
	44008		02/19/202	02/28/202	03/10/202			40,062.50	0.00	0.00	40,062.50
		Physician Services ER 14th - EOM Feb.									
	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				
10042	ERBE USA INC SURGICAL SYSTEMS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	37142559		02/26/202	12/11/202	02/26/202			169.50	0.00	0.00	169.50
	37155483		02/26/202	02/04/202	02/26/202			169.50	0.00	0.00	169.50
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10042	ERBE USA INC SURGICAL SYSTEMS					339.00	0.00	0.00	339.00
Vendor#	Vendor Name				Class	Pay Code				
15832	EVERON									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	157965503		02/25/202	02/04/202	03/06/202			58.43	0.00	0.00	58.43
		FEB SERVICE PERIOD 2/1 - 2/28/25									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		15832	EVERON					58.43	0.00	0.00	58.43
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
	6906932		01/23/202	11/14/202	03/01/202			387.16	0.00	0.00	387.16
	8779148		02/18/202	02/10/202	03/07/202			438.38	0.00	0.00	438.38
	8814434		02/18/202	02/11/202	03/08/202			1,260.36	0.00	0.00	1,260.36
	8814435		02/18/202	02/11/202	03/08/202			15,241.88	0.00	0.00	15,241.88
	8848679		02/18/202	02/12/202	03/09/202			185.55	0.00	0.00	185.55
	8883090		02/18/202	02/13/202	03/10/202			577.47	0.00	0.00	577.47
	8883091		02/18/202	02/13/202	03/10/202			5,840.40	0.00	0.00	5,840.40
	8883089		02/18/202	02/18/202	03/15/202			181.76	0.00	0.00	181.76
	8914646		02/18/202	02/18/202	03/15/202			129.45	0.00	0.00	129.45
	8745894		02/19/202	02/07/202	03/01/202			-1,001.52	0.00	0.00	-1,001.52
	8944513		02/26/202	02/17/202	03/14/202			548.84	0.00	0.00	548.84
	8975486		02/26/202	02/18/202	03/15/202			673.37	0.00	0.00	673.37
	8975487		02/26/202	02/18/202	03/15/202			129.45	0.00	0.00	129.45
	9039975		02/26/202	02/20/202	03/17/202			4,780.14	0.00	0.00	4,780.14
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net

	F1400	FISHER HEALTHCARE					29,372.69	0.00	0.00	29,372.69
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
	INV802602		02/25/202	02/15/202	03/12/202			3,320.00	0.00	0.00	3,320.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11078	FUSION MEDICAL STAFFING, LLC					3,320.00	0.00	0.00	3,320.00
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
	022125A		02/25/202	02/21/202	03/20/202			7,751.53	0.00	0.00	7,751.53

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	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11836	GOLDENCREEK HEALTHCARE					7,751.53	0.00	0.00	7,751.53
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
	9396464670		02/26/202	02/05/202	03/02/202			256.80	0.00	0.00	256.80
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		W1300	GRAINGER					256.80	0.00	0.00	256.80
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
	2616952		02/17/202	02/04/202	03/06/202			180.08	0.00	0.00	180.08
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		G1210	GULF COAST PAPER COMPANY					180.08	0.00	0.00	180.08
Vendor#	Vendor Name				Class	Pay Code				
10334	HEALTH CARE LOGISTICS INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	309820842		02/26/202	02/18/202	03/15/202			102.00	0.00	0.00	102.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10334	HEALTH CARE LOGISTICS INC					102.00	0.00	0.00	102.00
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
	6765		02/19/202	02/28/202	03/10/202			23,663.00	0.00	0.00	23,663.00

Hospitalist Physician Services 16th. EOM Feb.

	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				
11108	ITERSOURCE CORPORATION									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	711861		02/26/202	02/25/202	02/26/202			3,164.44	0.00	0.00	3,164.44
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11108	ITERSOURCE CORPORATION					3,164.44	0.00	0.00	3,164.44
Vendor#	Vendor Name				Class	Pay Code				
14432	LGC CLINICAL DIAGNOSTICS, INC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	90297445		02/17/202	01/29/202	02/17/202			829.00	0.00	0.00	829.00
	90298380		02/26/202	02/05/202	02/18/202			394.00	0.00	0.00	394.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14432	LGC CLINICAL DIAGNOSTICS, INC.	1,223.00	0.00	0.00	1,223.00

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
020725		02/25/202	02/07/202	02/25/202			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
23248125		02/17/202	01/29/202	02/13/202			124.87	0.00	0.00	124.87
23359005		02/26/202	02/21/202	03/08/202			61.84	0.00	0.00	61.84
23361853		02/26/202	02/26/202	03/13/202			502.46	0.00	0.00	502.46

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC	689.17	0.00	0.00	689.17

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
2355186847		01/27/202	01/29/202	03/01/202			10.28	0.00	0.00	10.28
2355186852		01/27/202	01/29/202	03/01/202			40.03	0.00	0.00	40.03
2355186829		01/27/202	01/29/202	03/01/202			12.20	0.00	0.00	12.20
2355186837		01/27/202	01/29/202	03/01/202			82.16	0.00	0.00	82.16
2355186851		01/27/202	01/29/202	03/01/202			20.01	0.00	0.00	20.01
2355186842		01/27/202	01/29/202	03/01/202			2,494.95	0.00	0.00	2,494.95
2355186834		01/27/202	01/29/202	03/10/202			519.43	0.00	0.00	519.43
2354970864		02/04/202	01/28/202	03/01/202			24.32	0.00	0.00	24.32
2354970865		02/04/202	01/28/202	03/01/202			12.39	0.00	0.00	12.39
2355186849		02/17/202	01/29/202	03/01/202			6,162.46	0.00	0.00	6,162.46
2355953384		02/17/202	02/04/202	03/01/202			71.95	0.00	0.00	71.95
2356816276		02/17/202	02/08/202	03/09/202			30.65	0.00	0.00	30.65
2354214624		02/18/202	01/22/202	03/09/202			10,844.47	0.00	0.00	10,844.47
2355186831		02/18/202	01/29/202	03/09/202			603.78	0.00	0.00	603.78
2356061515		02/18/202	02/04/202	03/09/202			260.86	0.00	0.00	260.86
2356098404		02/18/202	02/05/202	03/02/202			1,902.32	0.00	0.00	1,902.32

2357005854	02/18/202	02/10/202	03/07/202	24.55	0.00	0.00	24.55
2357109456	02/18/202	02/11/202	03/08/202	93.30	0.00	0.00	93.30
2357143933	02/18/202	02/12/202	03/09/202	49.03	0.00	0.00	49.03
2357143931	02/18/202	02/12/202	03/09/202	24.74	0.00	0.00	24.74
2357143938	02/18/202	02/12/202	03/09/202	5,664.42	0.00	0.00	5,664.42
2357143936	02/18/202	02/12/202	03/09/202	633.12	0.00	0.00	633.12
2357143932	02/18/202	02/12/202	03/09/202	662.16	0.00	0.00	662.16
2357143925	02/18/202	02/12/202	03/09/202	929.21	0.00	0.00	929.21
2357143935	02/18/202	02/12/202	03/09/202	842.12	0.00	0.00	842.12
2357143930	02/18/202	02/12/202	03/09/202	279.08	0.00	0.00	279.08
2357143929	02/18/202	02/18/202	03/15/202	2,125.31	0.00	0.00	2,125.31
2357143934	02/18/202	02/18/202	03/15/202	24.09	0.00	0.00	24.09
2355186846	02/20/202	01/29/202	03/01/202	814.80	0.00	0.00	814.80
2358014206	02/26/202	02/18/202	03/15/202	116.47	0.00	0.00	116.47
2358014207	02/26/202	02/18/202	03/15/202	45.09	0.00	0.00	45.09
2358265297	02/26/202	02/19/202	03/16/202	106.78	0.00	0.00	106.78
2355186850	02/27/202	01/29/202	02/23/202	228.33	0.00	0.00	228.33
1703420830	02/27/202	02/22/202	02/22/202	734.68	0.00	0.00	734.68

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC	36,489.54	0.00	0.00	36,489.54

Vendor# 10963 Vendor Name: MEMORIAL MEDICAL CLINIC — Class: — Pay Code: —

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
020725		02/25/202	02/07/202	02/25/202			295.00	0.00	0.00	295.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10963	MEMORIAL MEDICAL CLINIC	295.00	0.00	0.00	295.00

Vendor# 11060 Vendor Name: MEMORIES UNLIMITED, INC. — Class: — Pay Code: —

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
183783		02/17/202	01/24/202	02/17/202			412.94	0.00	0.00	412.94

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11060	MEMORIES UNLIMITED, INC.	412.94	0.00	0.00	412.94

Vendor# 10536 Vendor Name: MORRIS & DICKSON CO, LLC — Class: — Pay Code: —

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2988406		02/25/202	01/31/202	02/10/202			9,682.22	0.00	0.00	9,682.22

2993911	02/25/202 02/02/202 02/12/202	56.07	0.00	0.00	56.07
2992636	02/25/202 02/02/202 02/12/202	33.51	0.00	0.00	33.51
2993912	02/25/202 02/02/202 02/12/202	1,120.78	0.00	0.00	1,120.78
2996808	02/25/202 02/03/202 02/13/202	1,467.02	0.00	0.00	1,467.02
2996810	02/25/202 02/03/202 02/13/202	30.03	0.00	0.00	30.03
2998801	02/25/202 02/03/202 02/13/202	151.85	0.00	0.00	151.85
2998799	02/25/202 02/03/202 02/13/202	11.24	0.00	0.00	11.24
2998800	02/25/202 02/03/202 02/13/202	424.79	0.00	0.00	424.79
2996809	02/25/202 02/03/202 02/13/202	90.86	0.00	0.00	90.86
3001106	02/25/202 02/04/202 02/14/202	25.84	0.00	0.00	25.84
3001105	02/25/202 02/04/202 02/14/202	56.15	0.00	0.00	56.15
3004582	02/25/202 02/04/202 02/14/202	812.01	0.00	0.00	812.01
3002672	02/25/202 02/04/202 02/14/202	282.39	0.00	0.00	282.39
3001107	02/25/202 02/04/202 02/14/202	90.86	0.00	0.00	90.86
3004581	02/25/202 02/04/202 02/14/202	77.33	0.00	0.00	77.33
3006833	02/25/202 02/05/202 02/15/202	56.15	0.00	0.00	56.15
3007733	02/25/202 02/05/202 02/15/202	220.02	0.00	0.00	220.02
3010494	02/25/202 02/05/202 02/15/202	31.43	0.00	0.00	31.43
3006832	02/25/202 02/05/202 02/15/202	5.20	0.00	0.00	5.20
3006838	02/25/202 02/05/202 02/15/202	2,544.19	0.00	0.00	2,544.19
3006834	02/25/202 02/05/202 02/15/202	180.47	0.00	0.00	180.47
3010111	02/25/202 02/05/202 02/15/202	22.66	0.00	0.00	22.66
3006836	02/25/202 02/05/202 02/15/202	70.03	0.00	0.00	70.03
3010112	02/25/202 02/05/202 02/15/202	172.48	0.00	0.00	172.48
3012285	02/25/202 02/06/202 02/16/202	56.15	0.00	0.00	56.15
3015253	02/25/202 02/06/202 02/16/202	156.78	0.00	0.00	156.78
3015252	02/25/202 02/06/202 02/16/202	976.02	0.00	0.00	976.02
3014043	02/25/202 02/06/202 02/16/202	22.25	0.00	0.00	22.25

CM86430	02/25/202	02/07/202	02/17/202	-472.37	0.00	0.00	-472.37
3022820	02/25/202	02/09/202	02/19/202	32.75	0.00	0.00	32.75
3022821	02/25/202	02/09/202	02/19/202	872.90	0.00	0.00	872.90
3021527	02/25/202	02/09/202	02/19/202	23.54	0.00	0.00	23.54
3021528	02/25/202	02/09/202	02/19/202	29.18	0.00	0.00	29.18
3024444	02/25/202	02/10/202	02/20/202	43.18	0.00	0.00	43.18
CM86796	02/25/202	02/10/202	02/20/202	-546.78	0.00	0.00	-546.78
3027005	02/25/202	02/10/202	02/20/202	378.63	0.00	0.00	378.63
3027004	02/25/202	02/10/202	02/20/202	13.71	0.00	0.00	13.71
3026782	02/25/202	02/10/202	02/20/202	822.91	0.00	0.00	822.91
3024443	02/25/202	02/10/202	02/20/202	56.15	0.00	0.00	56.15
3024442	02/25/202	02/10/202	02/20/202	84.85	0.00	0.00	84.85
3032784	02/25/202	02/11/202	02/21/202	1,427.33	0.00	0.00	1,427.33
3032783	02/25/202	02/11/202	02/21/202	60.54	0.00	0.00	60.54
3038068	02/25/202	02/12/202	02/22/202	75.43	0.00	0.00	75.43
3036839	02/25/202	02/12/202	02/22/202	33.78	0.00	0.00	33.78
3035592	02/25/202	02/12/202	02/22/202	56.15	0.00	0.00	56.15
3038069	02/25/202	02/12/202	02/22/202	4,215.58	0.00	0.00	4,215.58
3035247	02/25/202	02/12/202	02/22/202	6,767.05	0.00	0.00	6,767.05
3036838	02/25/202	02/12/202	02/22/202	31.23	0.00	0.00	31.23
3044010	02/25/202	02/13/202	02/23/202	507.74	0.00	0.00	507.74
3040997	02/25/202	02/13/202	02/23/202	56.15	0.00	0.00	56.15
3044011	02/25/202	02/13/202	02/23/202	40.75	0.00	0.00	40.75
3044012	02/25/202	02/13/202	02/23/202	458.35	0.00	0.00	458.35
3050081	02/25/202	02/16/202	02/26/202	296.84	0.00	0.00	296.84
3050083	02/25/202	02/16/202	02/26/202	19.94	0.00	0.00	19.94
3048851	02/25/202	02/16/202	02/26/202	91.35	0.00	0.00	91.35
3048852	02/25/202	02/16/202	02/26/202	51.53	0.00	0.00	51.53

3050084	02/25/202	02/16/202	02/26/202	1,344.49	0.00	0.00	1,344.49
3055460	02/25/202	02/17/202	02/27/202	135.47	0.00	0.00	135.47
3055459	02/25/202	02/17/202	02/27/202	55.56	0.00	0.00	55.56
3052779	02/25/202	02/17/202	02/27/202	144.78	0.00	0.00	144.78
3052778	02/25/202	02/17/202	02/27/202	56.15	0.00	0.00	56.15
3058131	02/25/202	02/18/202	02/28/202	56.15	0.00	0.00	56.15
3059263	02/25/202	02/18/202	02/28/202	540.31	0.00	0.00	540.31
3059264	02/25/202	02/18/202	02/28/202	17.75	0.00	0.00	17.75
3060849	02/25/202	02/18/202	02/28/202	59.49	0.00	0.00	59.49
3059763	02/25/202	02/18/202	02/28/202	247.35	0.00	0.00	247.35
3058130	02/25/202	02/18/202	02/28/202	4,701.19	0.00	0.00	4,701.19
3063697	02/25/202	02/19/202	03/01/202	56.15	0.00	0.00	56.15
3065341	02/25/202	02/19/202	03/01/202	47.04	0.00	0.00	47.04
3064729	02/25/202	02/19/202	03/01/202	138.20	0.00	0.00	138.20
3066391	02/25/202	02/19/202	03/01/202	297.01	0.00	0.00	297.01
3064728	02/25/202	02/19/202	03/01/202	38.53	0.00	0.00	38.53
3066392	02/25/202	02/19/202	03/01/202	804.33	0.00	0.00	804.33
3066591	02/25/202	02/19/202	03/01/202	1.73	0.00	0.00	1.73
CM88647	02/25/202	02/19/202	03/01/202	-3.18	0.00	0.00	-3.18
3066390	02/25/202	02/19/202	03/01/202	45.39	0.00	0.00	45.39

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	43,239.06	0.00	0.00	43,239.06

Vendor#	Vendor Name	Class	Pay Code
17232	MSE ENVIRONMENTAL DALLAS LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
101225		02/25/202	02/21/202	02/25/202			685.00	0.00	0.00	685.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	17232	MSE ENVIRONMENTAL DALLAS LLC	685.00	0.00	0.00	685.00

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
4415705A		02/27/202	02/17/202	03/01/202			2,660.54	0.00	0.00	2,660.54

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net

	12388	NATIONAL FARM LIFE INSURANCE					2,660.54	0.00	0.00	2,660.54
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
	V46481		02/17/202	02/14/202	02/26/202			76,844.00	0.00	0.00	76,844.00
	V46482		02/21/202	02/21/202	03/08/202			6,196.89	0.00	0.00	6,196.89
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		16004	NITOR E LLC					83,040.89	0.00	0.00	83,040.89
Vendor#	Vendor Name				Class	Pay Code				
11472	OCCUPRO LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	38708		02/11/202	02/07/202	03/09/202			486.68	0.00	0.00	486.68
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11472	OCCUPRO LLC					486.68	0.00	0.00	486.68
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
	37630791		02/26/202	02/20/202	03/17/202			204.60	0.00	0.00	204.60
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		O1500	OLYMPUS AMERICA INC					204.60	0.00	0.00	204.60
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
	1853926068		02/18/202	02/11/202	03/13/202			230.25	0.00	0.00	230.25
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		O1416	ORTHO CLINICAL DIAGNOSTICS					230.25	0.00	0.00	230.25
Vendor#	Vendor Name				Class	Pay Code				
O1201	OZARK BIOMEDICAL, LLC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	360956		02/26/202	02/05/202	02/26/202			654.00	0.00	0.00	654.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		O1201	OZARK BIOMEDICAL, LLC					654.00	0.00	0.00	654.00
Vendor#	Vendor Name				Class	Pay Code				
12708	POC ELECTRIC, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	4286		02/26/202	02/23/202	03/01/202			196.00	0.00	0.00	196.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12708	POC ELECTRIC, LLC					196.00	0.00	0.00	196.00
Vendor#	Vendor Name				Class	Pay Code				
10372	PRECISION DYNAMICS CORP (PDC)									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	9357997348		02/26/202	01/07/202	02/06/202			204.36	0.00	0.00	204.36
	9358249413		02/26/202	02/07/202	03/09/202			204.36	0.00	0.00	204.36
	9358271495		02/26/202	02/11/202	03/13/202			73.38	0.00	0.00	73.38
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10372	PRECISION DYNAMICS CORP (PDC)					482.10	0.00	0.00	482.10

Vendor#	Vendor Name	Class	Pay Code
16040	PRESTIGE PATIENT TRANSPORT LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1316		02/25/202	03/31/202	02/25/202			1,382.69	0.00	0.00	1,382.69

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	16040	PRESTIGE PATIENT TRANSPORT LLC	1,382.69	0.00	0.00	1,382.69

Vendor#	Vendor Name	Class	Pay Code
11080	RADSOURCE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
PSI004840		02/18/202	02/12/202	03/09/202			1,791.67	0.00	0.00	1,791.67
PSI004884		02/18/202	02/16/202	03/13/202			1,708.33	0.00	0.00	1,708.33

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11080	RADSOURCE	3,500.00	0.00	0.00	3,500.00

Vendor#	Vendor Name	Class	Pay Code
11251	RAPID PRINTING LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
27760		02/25/202	02/20/202	03/07/202			65.00	0.00	0.00	65.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11251	RAPID PRINTING LLC	65.00	0.00	0.00	65.00

Vendor#	Vendor Name	Class	Pay Code
14920	REPUBLIC SERVICES, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0847001379716A		02/27/202	02/15/202	02/15/202			113.83	0.00	0.00	113.83

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14920	REPUBLIC SERVICES, INC.	113.83	0.00	0.00	113.83

Vendor#	Vendor Name	Class	Pay Code
S2001	SIEMENS MEDICAL SOLUTIONS INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
116682678		02/26/202	02/17/202	03/14/202			2,617.41	0.00	0.00	2,617.41

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	S2001	SIEMENS MEDICAL SOLUTIONS INC	2,617.41	0.00	0.00	2,617.41

Vendor#	Vendor Name	Class	Pay Code
S2362	SMITH & NEPHEW, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
983864019		02/26/202	02/20/202	02/26/202			374.48	0.00	0.00	374.48

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	S2362	SMITH & NEPHEW, INC.	374.48	0.00	0.00	374.48

Vendor#	Vendor Name	Class	Pay Code
12472	SOMETHING MORE MEDIA, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2237		02/25/202	02/18/202	03/05/202			2,525.00	0.00	0.00	2,525.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12472	SOMETHING MORE MEDIA, INC.	2,525.00	0.00	0.00	2,525.00

Vendor#	Vendor Name	Class	Pay Code
11296	SOUTH TEXAS BLOOD & TISSUE CEN		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
CM14309		02/25/202	02/15/202	03/12/202			-1,100.00	0.00	0.00	-1,100.00

I07047749		02/25/202	02/15/202	03/17/202		6,400.00	0.00	0.00	6,400.00
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
	11296	SOUTH TEXAS BLOOD & TISSUE CEN				5,300.00	0.00	0.00	5,300.00
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
021625		02/26/202	02/17/202	02/18/202			155.41	0.00	0.00	155.41
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	C1010	SPARKLIGHT					155.41	0.00	0.00	155.41
Vendor#	Vendor Name				Class	Pay Code			
T1915	TEXAS GLASS & TINTING				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
124022		02/17/202	02/08/202	03/10/202			1,600.00	0.00	0.00	1,600.00
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	T1915	TEXAS GLASS & TINTING					1,600.00	0.00	0.00	1,600.00
Vendor#	Vendor Name				Class	Pay Code			
10758	TEXAS SELECT STAFFING, LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0025024		02/26/202	02/15/202	02/16/202			3,667.00	0.00	0.00	3,667.00
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10758	TEXAS SELECT STAFFING, LLC					3,667.00	0.00	0.00	3,667.00
Vendor#	Vendor Name				Class	Pay Code			
11908	TMS SOUTH								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV149008		02/17/202	02/05/202	03/07/202			280.60	0.00	0.00	280.60
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	11908	TMS SOUTH					280.60	0.00	0.00	280.60
Vendor#	Vendor Name				Class	Pay Code			
10841	TRUBRIDGE, LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
T2502101378		02/26/202	02/10/202	02/26/202			382.90	0.00	0.00	382.90
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10841	TRUBRIDGE, LLC					382.90	0.00	0.00	382.90
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
2921053297		02/18/202	02/10/202	03/07/202			171.04	0.00	0.00	171.04
2921053632		02/18/202	02/13/202	03/10/202			2,278.19	0.00	0.00	2,278.19
2921053647		02/18/202	02/13/202	03/10/202			181.87	0.00	0.00	181.87
2921053637		02/18/202	02/13/202	03/10/202			70.07	0.00	0.00	70.07
2921053622		02/18/202	02/13/202	03/10/202			119.46	0.00	0.00	119.46
2921053696		02/18/202	02/13/202	03/10/202			531.03	0.00	0.00	531.03
2921053653		02/18/202	02/13/202	03/10/202			162.46	0.00	0.00	162.46

2921053627	02/18/202	02/13/202	03/10/202	182.61	0.00	0.00	182.61
2921053650	02/18/202	02/13/202	03/10/202	190.73	0.00	0.00	190.73
2921053287	02/19/202	02/10/202	03/07/202	2,823.32	0.00	0.00	2,823.32
2921053780	02/25/202	02/17/202	03/14/202	165.44	0.00	0.00	165.44
2921053777	02/25/202	02/17/202	03/14/202	2,323.44	0.00	0.00	2,323.44

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	9,199.66	0.00	0.00	9,199.66

Vendor# I1110 Vendor Name WERFEN USA LLC Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9111764084		02/18/202	02/14/202	03/14/202			1,571.67	0.00	0.00	1,571.67
9111770157		02/26/202	02/20/202	03/17/202			453.09	0.00	0.00	453.09
9111770480		02/26/202	02/21/202	03/18/202			10,240.00	0.00	0.00	10,240.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	12,264.76	0.00	0.00	12,264.76

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	454,571.56	0.00	0.00	454,571.56

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 207164-
207838

454,571.56 +
5,313.46 - Pg. 2 NH xfer removed
7,751.53 - Pg. 4 NH xfer removed
441,506.57 ◊

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 27 2025

CALHOUN COUNTY, TEXAS

RUN DATE: 02/27/25
TIME: 11:59

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PATIENT NUMBER	PAYEE NAME		DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
1445816 0	[redacted]		021925	100.00	3		REFUND FOR	[redacted]
		TX 77979						
1457153 0			021925	25.00	3		REFUND FOR	
		TX 77982						
1506102 0			022725	15.00	2		REFUND FOR	
		TX 77901						
1526107 0			022725	318.06	2		REFUND FOR	
		TX 77979						
1533319 0			022725	72.02	2		REFUND FOR	
		TX 77979						
1533995 0			021925	144.00	2		REFUND FOR	
		TX 77979						
1536125 0			022725	18.53	2		REFUND FOR	
		TX 77950						
1536567 0			022725	95.15	2		REFUND FOR	
		TX 77957						
1548725 0			021925	45.00	2		REFUND FOR	
		TX 77979						
1551716 0			021925	50.00	3		REFUND FOR	
		TX 77978						
1553434 0			022725	100.00	3		REFUND FOR	
		TX 77979						
1557097 0			021925	33.85	2		REFUND FOR	
		TX 77979						
1565315 0			021925	58.25	2		REFUND FOR	
		TX 78148						
1566534 0			022725	21.00	2		REFUND FOR	
		TX 77979						
1570496 0			021925	397.73	3		REFUND FOR	
		TX 77979						

PATIENT NUMBER	PAYEE NAME			DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
1592403	[redacted]			021925	25.00	3		REFUND FOR [redacted]	
1592553		TX	77983	022725	63.74	2		REFUND FOR	
1593595		TX	77979	022725	550.00	2		REFUND FOR	
1596446		TX	77901	021925	65.60	2		REFUND FOR	
1598387		TX	77465	022725	33.61	2		REFUND FOR	
1599648		TX	77979	022725	115.23	2		REFUND FOR	
1599659		TX	77901	021925	100.00	2		REFUND FOR	
1602896		TX	77979	022725	12.15	5		REFUND FOR	
1604371		TX	77979	021925	30.60	2		REFUND FOR	
1605551		TX	77979	022725	29.30	2		REFUND FOR	
1605726		TX	77979	022725	57.28	2		REFUND FOR	
1606448		TX	77979	022725	47.00	5		REFUND FOR	
1607069		TX	77979	021925	30.18	3		REFUND FOR	
1608626		TX	77979	022725	164.82	2		REFUND FOR	
1608991		TX	77983	021925	10.00	2		REFUND FOR	
1609808		TX	77979	021925	950.03	3		REFUND FOR	
		TX	77978						

PATIENT NUMBER	PAYEE NAME			DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
1570996	[redacted]			022725	164.62	2		REFUND FO	[redacted]
1571495		TX	77901	021925	60.00	3		REFUND FO	
1571887		TX	77957	022725	17.50	3		REFUND FO	
1573029		TX	79007	021925	23.43	2		REFUND FO	
1576684		TX	77465	022725	62.10	3		REFUND FO	
1581281		TX	77979	022725	327.95	2		REFUND FO	
1581959		TX	77979	022725	20.00	5		REFUND FO	
1583881		TX	77979	021925	33.21	3		REFUND FO	
1584364		FL	32656	022725	100.00	2		REFUND FO	
1587229		TX	77979	021925	202.50	4		REFUND FO	
1588186		TX	77465	022725	25.00	3		REFUND FO	
1588393		TX	77971	022725	100.00	3		REFUND FO	
1588525		TX	77979	021925	93.07	3		REFUND FO	
1588584		UT	84032	021925	40.00	2		REFUND FO	
1591661		TX	77465	021925	110.88	2		REFUND FO	
		TX	77979						

PATIENT NUMBER	PAYEE NAME		DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
1610644	01 [redacted]		021925	94.79	2		REFUND FOR [redacted]	
1611237	01 [redacted]	TX 77978	022725	136.04	3		REFUND FOR [redacted]	
1612047	01 [redacted]	TX 779910223	022725	100.00	3		REFUND FOR [redacted]	
1612673	01 [redacted]	TX 77872	021925	100.00	2		REFUND FOR [redacted]	
1612719	01 [redacted]	TX 77979	021925	32.01	2		REFUND FOR [redacted]	
1613408	01 [redacted]	TX 77979	021925	40.00	2		REFUND FOR [redacted]	
1614138	01 [redacted]	TX 77979	022725	183.31	2		REFUND FOR [redacted]	
1614483	01 [redacted]	TX 77979	021925	100.00	3		REFUND FOR [redacted]	
1615019	01 [redacted]	TX 77979	021925	50.00	2		REFUND FOR [redacted]	
1615389	01 [redacted]	TX 77983	021925	50.10	3		REFUND FOR [redacted]	
1616753	01 [redacted]	TX 77979	022725	58.94	2		REFUND FOR [redacted]	
1619260	01 [redacted]	TX 77979	021925	45.00	2		REFUND FOR [redacted]	
1619595	01 [redacted]	TX 77979	021925	561.80	2		REFUND FOR [redacted]	
1619974	01 [redacted]	TX 77979	022725	152.85	5		REFUND FOR [redacted]	
1621437	01 [redacted]	TX 77979	021925	75.00	3		REFUND FOR [redacted]	
1622032	01 [redacted]	TX 77379	022725	60.00	2		REFUND FOR [redacted]	
	[redacted]	TX 77983						

PATIENT NUMBER	PAYEE NAME		DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
1624038 01	[redacted]		021925	25.12	2		REFUND FOR [redacted]	
		TX 77983						
1624292 01			021925	70.98	2		REFUND FOR	
		TX 77979						
1624618 01			021925	141.01	2		REFUND FOR	
		TX 77979						
1624969 01			021925	84.16	2		REFUND FOR	
		TX 77982						
1626384 01			021925	130.50	2		REFUND FOR	
		TX 77979						
	ARID=0001 TOTAL			7450.00				
TOTAL				7450.00				

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 207847 - 207913

BANK	CODE	NUMBER	DATE	AMOUNT	PAYEE
	A/P	207764	03/05/25	1,096.00	3WON, LLC
	A/P	207765	03/05/25	286.11	AIRGAS USA, LLC - CENTRAL DIV
	A/P	207766	03/05/25	4,326.63	AMAZON CAPITAL SERVICES
	A/P	207767	03/05/25	3,386.02	AUTHORITYRX, LLC
	A/P	207768	03/05/25	323.56	BAXTER HEALTHCARE
	A/P	207769	03/05/25	1,334.77	BAYER HEALTHCARE
	A/P	207770	03/05/25	16,212.25	BECKMAN COULTER INC
	A/P	207771	03/05/25	199.00	BEEKLEY CORPORATION
	A/P	207772	03/05/25	3,239.35	BIO-RAD LABORATORIES, INC
	A/P	207773	03/05/25	1,005.24	BOSTON SCIENTIFIC CORPORATION
	A/P	207774	03/05/25	109.00	CABLES AND SENSORS
	A/P	207775	03/05/25	519.00	CALHOUN COUNTY
	A/P	207776	03/05/25	125.69	CAREFUSION SOLUTIONS, LLC
	A/P	207777	03/05/25	714.50	CARESFIELD
	A/P	207778	03/05/25	8,505.41	CDW GOVERNMENT, INC.
	A/P	207779	03/05/25	2,635.86	CITY OF PORT LAVACA
	A/P	207780	03/05/25	588.12	COASTAL OFFICE SOLUTONS
	A/P	207781	03/05/25	81.30	COOK MEDICAL INCORPORATED
	A/P	207782	03/05/25	6,080.00	CROSS COUNTRY STAFFING
	A/P	207783	03/05/25	400.73	CUSTOM ASSEMBLIES, INC
	A/P	207784	03/05/25	385.00	DH PACE COMPANY
	A/P	207785	03/05/25	73,211.58	DISCOVERY MEDICAL NETWORK INC
	A/P	207786	03/05/25	610.00	DOWELL PEST CONTROL
	A/P	207787	03/05/25	300.00	ECOLAB
	A/P	207788	03/05/25	40,062.50	EMERGENCY STAFFING SOLUTIONS
	A/P	207789	03/05/25	339.00	ERBE USA INC SURGICAL SYSTEMS
	A/P	207790	03/05/25	58.43	EVERON
	A/P	207791	03/05/25	.00	VOIDED
	A/P	207792	03/05/25	29,372.69	FISHER HEALTHCARE
	A/P	207793	03/05/25	3,320.00	FUSION MEDICAL STAFFING, LLC
	A/P	207794	03/05/25	256.80	GRAINGER
	A/P	207795	03/05/25	180.08	GULF COAST PAPER COMPANY
	A/P	207796	03/05/25	102.00	HEALTH CARE LOGISTICS INC
	A/P	207797	03/05/25	23,663.00	HOSPITAL CARE CONSULTANTS INC.
	A/P	207798	03/05/25	3,164.44	ITERSOURCE CORPORATION
	A/P	207799	03/05/25	1,223.00	LGC CLINICAL DIAGNOSTICS, INC.
	A/P	207800	03/05/25	895.00	M G TRUST
	A/P	207801	03/05/25	689.17	MCKESSON MEDICAL SURGICAL INC
	A/P	207802	03/05/25	.00	VOIDED
	A/P	207803	03/05/25	.00	VOIDED
	A/P	207804	03/05/25	.00	VOIDED
	A/P	207805	03/05/25	.00	VOIDED
	A/P	207806	03/05/25	36,489.54	MEDLINE INDUSTRIES INC
	A/P	207807	03/05/25	295.00	MEMORIAL MEDICAL CLINIC
	A/P	207808	03/05/25	412.94	MEMORIES UNLIMITED, INC.
	A/P	207809	03/05/25	.00	VOIDED
	A/P	207810	03/05/25	.00	VOIDED
	A/P	207811	03/05/25	.00	VOIDED
	A/P	207812	03/05/25	.00	VOIDED
	A/P	207813	03/05/25	.00	VOIDED

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	207814	03/05/25	43,239.06	MORRIS & DICKSON CO, LLC
A/P	207815	03/05/25	685.00	MSE ENVIRONMENTAL DALLAS LLC
A/P	207816	03/05/25	2,660.54	NATIONAL FARM LIFE INSURANCE
A/P	207817	03/05/25	83,040.89	NITOR E LLC
A/P	207818	03/05/25	486.68	OCCUPRO LLC
A/P	207819	03/05/25	204.60	OLYMPUS AMERICA INC
A/P	207820	03/05/25	230.25	ORTHO CLINICAL DIAGNOSTICS
A/P	207821	03/05/25	654.00	OZARK BIOMEDICAL, LLC
A/P	207822	03/05/25	196.00	POC ELECTRIC, LLC
A/P	207823	03/05/25	482.10	PRECISION DYNAMICS CORP (PDC)
A/P	207824	03/05/25	1,382.69	PRESTIGE PATIENT TRANSPORT LLC
A/P	207825	03/05/25	3,500.00	RADSOURCE
A/P	207826	03/05/25	65.00	RAPID PRINTING LLC
A/P	207827	03/05/25	113.83	REPUBLIC SERVICES, INC.
A/P	207828	03/05/25	2,617.41	SIEMENS MEDICAL SOLUTIONS INC
A/P	207829	03/05/25	374.48	SMITH & NEPHEW, INC.
A/P	207830	03/05/25	2,525.00	SOMETHING MORE MEDIA, INC.
A/P	207831	03/05/25	5,300.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	207832	03/05/25	155.41	SPARKLIGHT
A/P	207833	03/05/25	1,600.00	TEXAS GLASS & TINTING
A/P	207834	03/05/25	3,667.00	TEXAS SELECT STAFFING, LLC
A/P	207835	03/05/25	280.60	TMS SOUTH
A/P	207836	03/05/25	382.90	TRUBRIDGE, LLC
A/P	207837	03/05/25	9,199.66	UNIFIRST HOLDINGS INC
A/P	207838	03/05/25	12,264.76	WERFEN USA LLC
A/P	207839	03/05/25	17,385.33	ASHFORD GARDENS
A/P	207840	03/05/25	26,211.17	BETHANY SENIOR LIVING
A/P	207841	03/05/25	8,015.30	BROADMOOR AT CREEKSIDE PARK
A/P	207842	03/05/25	5,472.68	FORTBEND HEALTHCARE CENTER
A/P	207843	03/05/25	81,578.70	GOLDENCREEK HEALTHCARE
A/P	207844	03/05/25	9,451.29	SOLERA WEST HOUSTON
A/P	207845	03/05/25	4,923.60	THE CRESCENT
A/P	207846	03/05/25	67,062.89	TUSCANY VILLAGE
A/P	207847	03/05/25	50.00	[redacted]
A/P	207848	03/05/25	65.60	
A/P	207849	03/05/25	100.00	
A/P	207850	03/05/25	950.03	
A/P	207851	03/05/25	94.79	
A/P	207852	03/05/25	141.01	
A/P	207853	03/05/25	100.00	
A/P	207854	03/05/25	100.00	
A/P	207855	03/05/25	100.00	
A/P	207856	03/05/25	144.00	
A/P	207857	03/05/25	130.50	
A/P	207858	03/05/25	318.06	
A/P	207859	03/05/25	60.00	
A/P	207860	03/05/25	100.00	
A/P	207861	03/05/25	58.94	
A/P	207862	03/05/25	70.98	
A/P	207863	03/05/25	20.00	
A/P	207864	03/05/25	47.00	

BANK--CHECK CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	207865	03/05/25	84.16	[redacted]
A/P	207866	03/05/25	100.00	
A/P	207867	03/05/25	110.88	
A/P	207868	03/05/25	397.73	
A/P	207869	03/05/25	58.25	
A/P	207870	03/05/25	32.01	
A/P	207871	03/05/25	75.00	
A/P	207872	03/05/25	30.60	
A/P	207873	03/05/25	33.21	
A/P	207874	03/05/25	33.85	
A/P	207875	03/05/25	25.00	
A/P	207876	03/05/25	60.00	
A/P	207877	03/05/25	23.43	
A/P	207878	03/05/25	40.00	
A/P	207879	03/05/25	45.00	
A/P	207880	03/05/25	561.80	
A/P	207881	03/05/25	25.00	
A/P	207882	03/05/25	40.00	
A/P	207883	03/05/25	21.00	
A/P	207884	03/05/25	33.61	
A/P	207885	03/05/25	50.00	
A/P	207886	03/05/25	164.62	
A/P	207887	03/05/25	45.00	
A/P	207888	03/05/25	25.00	
A/P	207889	03/05/25	93.07	
A/P	207890	03/05/25	152.85	
A/P	207891	03/05/25	62.10	
A/P	207892	03/05/25	12.15	
A/P	207893	03/05/25	183.31	
A/P	207894	03/05/25	100.00	
A/P	207895	03/05/25	25.12	
A/P	207896	03/05/25	100.00	
A/P	207897	03/05/25	95.15	
A/P	207898	03/05/25	57.28	
A/P	207899	03/05/25	18.53	
A/P	207900	03/05/25	327.95	
A/P	207901	03/05/25	136.04	
A/P	207902	03/05/25	115.23	
A/P	207903	03/05/25	72.02	
A/P	207904	03/05/25	30.18	
A/P	207905	03/05/25	50.10	
A/P	207906	03/05/25	202.50	
A/P	207907	03/05/25	17.50	
A/P	207908	03/05/25	15.00	
A/P	207909	03/05/25	164.82	
A/P	207910	03/05/25	29.30	
A/P	207911	03/05/25	550.00	
A/P	207912	03/05/25	63.74	
A/P	207913	03/05/25	10.00	
A/P	207914	03/05/25	3,783.00	C KITCHEN
TOTALS:			672,840.53	

APPROVED ON
MAR 05 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

– approved in a previous CC meeting

441,506.57 + Payables
7,450.00 + Pat. refunds
220,100.96 + NH xfers
669,057.53 ◊

McKESSON

Company: 8000

STATEMENT

As of: 02/28/2025 Page: 002

DC: 8115
Customer INV SupplD:
Territory:

Customer: 632536
Date: 03/01/2025

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

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

As of: 02/28/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 **PLEASE CHECK ANY**
Date: 03/01/2025 **ITEMS NOT PAID (✓)**

National Account 632536

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 134.75 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 03/04/2025, Pay This Amount: 132.06 USD

If Paid After 03/04/2025, Pay this Amount: 134.75 USD

Due If Paid On Time: USD 132.06

Disc lost if paid late: 2.69

Due If Paid Late: USD 134.75

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

3/3/25

5.95 +
126.11 +
132.06 ◊

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

Company: 8000

As of: 02/28/2025 Page: 001

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 820405
Date: 03/01/2025

HEB PHCY WHSE/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

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

As of: 02/28/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 **PLEASE CHECK ANY**
Date: 03/01/2025 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 820405 HEB PHCY WHSE/MEM MED PHS											
02/27/2025	03/04/2025	7553704164	B2502-055-191891	115Invoice	0.12	6.07		5.95	✓	7553704164	

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

TOTAL: Customer Number 820405 HEB PHCY WHSE/MEM MED PHS

Subtotals: 6.07 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 1,528.02
02/24/2025

If Paid By 03/04/2025, Pay This Amount: 5.95 USD

If Paid After 03/04/2025, Pay this Amount: 6.07 USD

Due If Paid On Time: USD 5.95

Disc lost if paid late: 0.12

Due If Paid Late: USD 6.07

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

Company: 8000

CVS PHCY 7416/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 02/28/2025 Page: 001

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 835437
Date: 03/01/2025

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

As of: 02/28/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835437 **PLEASE CHECK ANY**
Date: 03/01/2025 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835437 CVS PHCY 7416/MEM MC PHS											
02/26/2025	03/04/2025	7553664316	3907503	115Invoice	2.57	128.68		126.11	✓	7553664316	

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

TOTAL: Customer Number 835437 CVS PHCY 7416/MEM MC PHS

Subtotals: 128.68 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 1,528.02
02/24/2025

If Paid By 03/04/2025,
Pay This Amount: 126.11 USD

If Paid After 03/04/2025,
Pay this Amount: 128.68 USD

Due If Paid On Time:
USD 126.11

Disc lost if paid late:
2.57

Due If Paid Late:
USD 128.68

APPROVED ON

MAR 03 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

AmerisourceBergen

STATEMENT

Statement Number: 69285629
Date: 02-28-2025

Serviced 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:	147.18
Past Due:	0.00
Total Due:	147.18
Account Balance:	147.18

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-24-2025	03-07-2025	3206945267	7009015972	Invoice	53.68		0.00	53.68
02-24-2025	03-07-2025	3206945268	7009021938	Invoice	6.68		0.00	6.68
02-24-2025	03-07-2025	3206945269	7009028346	Invoice	14.92		0.00	14.92
02-25-2025	03-07-2025	3207101121	7009036075	Invoice	26.26		0.00	26.26
02-26-2025	03-07-2025	3207233977	7009044908	Invoice	6.17		0.00	6.17
02-27-2025	03-07-2025	3207375008	7009052097	Invoice	39.47		0.00	39.47

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
147.18	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
02-28-2025	(2,280.39)

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders

Due Date	Amount
03-07-2025	147.18
Total Due:	147.18

MSC

AmerisourceBergen

STATEMENT

Statement Number: 69303249
Date: 02-28-2025

Serviced By:
AMERISOURCEBERGEN DRUG CORP
501 PATRIOT PARKWAY
ROANOKE TX 76262-6336

DEA: RA0316958
866-451-9655

Customer:
WALGREENS CENTRAL FILL #21373 340B
MEMORIAL MEDICAL CENTER
4100 DALE EARNHARDT WAY 200
NORTHLAKE TX 76262-2389

Remit To:
AMERISOURCEBERGEN
PO Box 978740
DALLAS TX 75397-8740

Customer Number
100566356 / 100566356

Terms
Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	1,107.91
Past Due:	0.00
Total Due:	1,107.91
Account Balance:	1,107.91

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-24-2025	03-07-2025	3206931435	7009013852	Invoice	9.58		0.00	9.58
02-24-2025	03-07-2025	3206931437	7009022301	Invoice	0.90		0.00	0.90
02-24-2025	03-07-2025	3206931439	7009031538	Invoice	72.72		0.00	72.72
02-28-2025	03-07-2025	3207548356	7009062270	Invoice	1,024.71		0.00	1,024.71

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,107.91	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Reminders

Due Date	Amount
03-07-2025	1,107.91
Total Due:	1,107.91

MSC

CHKNO	GRPNO	LOCNO	EMPNO	DEPNO	CLMPRE	CLMNO	CLMSUF	CHKDT	AMT	CLMTP	PAYEE	PAYTO	CVGCD	CVGTP	FIRSTNAME	LASTNAME	CODE	VOID	FROMDT	THRUDT	PRVNO
4324	76351	1	1	0	2025	48001296	0	2/24/2025	$30,962.68	1	TRUESCRIPTS MANAGEMENT SERVICE LLC	P	517	0	[redacted]		PCS	F	1/27/2025	2/9/2025	464334244
4325	76351	2	58	1	2025	34000914	0	2/24/2025	$89.83	1	MID COAST MEDICAL CLINIC	P	184	0			LBDR	F	1/22/2025	1/22/2025	452750258
4329	76351	3	35	1	2025	37000771	0	2/24/2025	$10.10	1	VICTORIA ORTHOPEDIC CENTER, PLLC	P	450	0			XRDS	F	2/3/2025	2/3/2025	260151734
4330	76351	3	8	0	2025	35000883	0	2/24/2025	$29.10	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0			OV	F	1/30/2025	1/30/2025	742605670
4331	76351	3	65	1	2025	35000892	0	2/24/2025	$49.16	1	SINGLETON ASSOCIATES PA	P	603	0			US	F	12/30/2024	12/30/2024	741680498
4332	76351	3	47	0	2025	31001010	0	2/24/2025	$59.14	1	MSIWA	P	468	0			ORH	F	11/6/2024	11/6/2024	202536458
4333	76351	3	74	0	2025	31000992	0	2/24/2025	$59.94	1	MEHRAN A NEZHAD MD	P	177	0			OV	F	1/28/2025	1/28/2025	742929415
4334	76351	3	47	0	2025	31001034	0	2/24/2025	$60.79	1	MSIWA	P	474	0			MMS	F	11/7/2024	11/10/2024	202536458
4335	76351	3	21	1	2025	34000890	0	2/24/2025	$65.89	1	PORT LAVACA CLINIC	P	360	0			POV	F	1/29/2025	1/29/2025	742605670
4336	76351	3	51	0	2025	37000811	0	2/24/2025	$80.34	1	ASHRAF ABUSARA MD	P	457	0			OVS	F	1/30/2025	1/30/2025	471158090
4339	76351	3	42	0	2025	34000943	0	2/24/2025	$119.22	1	PORT LAVACA CLINIC ASSOCIATES	P	172	0			AB	F	1/29/2025	1/29/2025	742605670
4343	76351	3	72	0	2025	36001200	0	2/24/2025	$650.29	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	178	0			SO	F	1/31/2025	1/31/2025	300520570
4348	76360	3	19	2	2025	34000899	0	2/24/2025	$13.37	1	SINGLETON ASSOCIATES PA	P	189	0			ERD	F	12/30/2024	12/30/2024	741680498
4349	76360	3	2	0	2025	36001145	0	2/24/2025	$33.52	1	GARY F COX MD PA	P	457	0			OVS	F	1/30/2025	1/30/2025	742068224
4350	76360	3	112	0	2025	35000972	0	2/24/2025	$38.68	1	MELISSA A. KAINER ERWIN, MD PA	P	457	0			OVS	F	1/30/2025	1/30/2025	200802489
4353	76360	3	37	1	2025	35001010	0	2/24/2025	$55.58	1	MELISSA MILLER RN RNPC	P	728	0			TELM	F	1/21/2025	1/21/2025	742620408
4356	76360	3	74	0	2025	37000780	0	2/24/2025	$59.94	1	AYO ADU, MD PLLC	P	177	0			OV	F	2/4/2025	2/4/2025	273335355
4357	76360	3	94	0	2025	37000777	0	2/24/2025	$65.87	1	ANN M. ALEMAN-WEINMANN MD, PA	P	457	0			OVS	F	1/31/2025	1/31/2025	134257684
4359	76360	3	32	1	2025	34000423	0	2/24/2025	$80.84	1	JACKSON COUNTY MEDICAL CLINIC OF EDNA	P	532	0			WLAB	F	1/25/2025	1/25/2025	741738475
4363	76360	3	32	1	2025	31001041	0	2/24/2025	$100.85	1	JACKSON MEDICAL CLINIC EDNA	P	172	0			AB	F	1/23/2025	1/23/2025	741738475
4365	76360	3	59	1	2025	35001005	0	2/24/2025	$123.64	1	OBGYN AFFILIATES	P	457	0			OVS	F	11/25/2024	11/25/2024	841520625
4368	76360	3	49	0	2025	31000999	0	2/24/2025	$153.60	1	VICTORIA EP PLLC	P	189	0			ERD	F	1/20/2025	1/20/2025	474741110
4370	76360	3	45	0	2025	35001021	0	2/24/2025	$263.05	1	VICTORIA EYE CENTER	P	457	0			OVS	F	1/20/2025	1/20/2025	742208337
4372	76360	3	33	0	2025	29001500	0	2/24/2025	$318.47	1	US ANES PARTNERS OF TX PA	P	405	0			AOQ	F	12/31/2024	12/31/2024	760482007
4373	76360	3	33	0	2025	29001488	0	2/24/2025	$320.64	1	US ANES PARTNERS OF TX PA	P	405	0			AOQ	F	12/31/2024	12/31/2024	760482007
4374	76360	3	83	0	2025	35000919	0	2/24/2025	$326.70	1	NORTHSTAR ANESTHESIA, PA	P	176	0			AO	F	11/12/2024	11/12/2024	201218565
4375	76360	3	83	0	2025	35000966	0	2/24/2025	$326.70	1	NORTHSTAR ANESTHESIA, PA	P	176	0			AO	F	11/12/2024	11/12/2024	201218565
4377	76360	3	49	0	2025	31000645	0	2/24/2025	$427.50	1	VICTORIA ED LLC	P	406	0			ER	F	1/20/2025	1/20/2025	473152225
4387	76370	3	22	0	2025	35000995	0	2/24/2025	$178.65	1	OLEANDER EMERGENCY MEDICINE ASSOCIATES	P	189	0			ERD	F	12/11/2024	12/11/2024	454288136
4388	76370	3	42	1	2025	35000873	0	2/24/2025	$318.46	1	CRESCENT VIEW MEDICAL CLINICS PA	P	172	0			AB	F	1/27/2025	1/27/2025	452547088
									$35,442.54												

Mandie Cubland 3/3/25

APPROVED ON

MAR 03 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

HPHG, LLC dba 90 Degree Benefits

Monthly Billing for 3/1/2025

MEMORIAL MEDICAL CENTER (Mst Grp: 76350)
815 N VIRGINIA STREET
PORT LAVACA, TX 77979

Master Group Totals

						Total Due
SPEC AGG	175	$57,912.20	Adjustments	6	$351.92	$58,264.12
ADMIN FEES	175	$7,262.50				$7,262.50
PPO UR	175	$3,393.25				$3,393.25
CHIC MGMT FEE		$700.00				$700.00

Balance Forward:		$59,961.33
Payments:	-	$59,961.33
Adjustments:	+	$0.00
Beginning Balance:		$0.00
Current Amount Due:	+	$69,267.95
Current Adjustments:	+	$351.92
Total Amount Due:		**$69,619.87**

Description	Medical
EE	105
ES	17
EF	11
EC	42
Mst Total	175

I Michelle Crubbad
3/3/25

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Make Check Payable To:

Attn: Revenue Department
90 Degree Benefits
PO Box 13246
Birmingham, AL 35202

Please pay premium as billed. Changes received after billing has processed will be reflected on the next months bill.
Premium payment is due by the 10th of the month.

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- Feb 24, 2025 - March 2, 2025

Date	Bank Description	MMC Notes	Amount	CPSI "Handwritten Check" #
2/28/2025	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	- CitiBank Corporate Card Payment	2,651.98 *	901567
2/28/2025	PAY PLUS ACHTrans 57312760 101000695869433 P	- 3rd Party Payor Fee	349.81	901568
2/28/2025	HEALTHEQUITY INC HealthEqui 1356888 91000019	- EmpDeduct/Employer Contribut	1,112.00 *	800579
2/28/2025	EXPERTPAY EXPERTPAY 746003411 91000019792503	-Child Support Payment	570.69 *	800580
2/28/2025	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	2,280.39 *	550564
2/28/2025	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	361,540.99 *	
2/27/2025	PAY PLUS ACHTrans 57092938 101000694480236 P	- 3rd Party Payor Fee	148.07	901569
2/27/2025	MERCHANT BANKCD FEE 971160913887 91000012020	- Credit Card Processing Fee	0.03	901570
2/26/2025	PAY PLUS ACHTrans 56957487 101000692843108 P	- 3rd Party Payor Fee	853.82	901571
2/26/2025	HPHG LLC MEMOR PREM MemMedCtr PtLav 11312265	- Health Insurance Premium Payment	59,961.33 **	800581
2/25/2025	PAY PLUS ACHTrans 56714680 101000691594320 P	- 3rd Party Payor Fee	304.61	901572
2/25/2025	MCKESSON DRUG AUTO ACH ACH06407477 910000129	- 340B Drug Program Expense	1,528.02 *	500565
2/24/2025	PAY PLUS ACHTrans 56582497 101000690240015 P	- 3rd Party Payor Fee	57.20	901573
			431,358.94	

Michelle Cumberland
Michelle Cumberland, Controller
Memorial Medical Center
March 3, 2025

* Approved on 2.26.25 CC
** Approved on 2.05.25 CC

PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

Date	Description	MMC Notes	Amount
3/11/2025	- STATE COMTRLR TEXNET	ACCRUED IGT DSH	10,624.73
			10,624.73

Michelle Cumberland
Michelle Cumberland, Controller
Memorial Medical Center
March 3, 2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

431,358.94 +
2,651.98 –
1,112.00 –
570.69 –
2,280.39 –
361,540.99 –
59,961.33 –
1,528.02 –
1,713.54 ◇
1,713.54 –
0.00 ◇

pay plus
349.81 +
148.07 +
853.82 +
304.61 +
57.20 +
1,713.51 ◇

bank fee pro.
0.03 +
0.03 ◇
1,713.51 +
0.03 +
1,713.54 ◇

TEXNET Electronic Payment Network — Texas Comptroller of Public Accounts

Transaction Summary

Transaction Complete
Trace #

Texas Health and Human Services Commission
Memorial Medical Center Operating County
[redacted]

Payment Total	$10,624.73
Bank Routing and Account Number	
Settlement Date	3/11/2025
DSH Amount	$10,624.73
Entered By	Michelle Cumberland

Memorial Medical Center
Transfer Request

Amount: $ 500,000.00 Date: 3/3/2025

From Account: Prosperity Operating Account [redacted]

To Account: Prosperity Money Market [redacted]

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Explanation:

Transfer from Prosperity Operating Account to Prosperity Money Market Account

Requested by: Michelle Cumberland **Date:** 3/3/2025

Authorized by: [signature] **Date:** 3/3/2025

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 27 2025

CALHOUN COUNTY, TEXAS

02/27/2025 MEMORIAL MEDICAL CENTER 0
11:21 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 03/21/2025

Vendor#	Vendor Name	Class	Pay Code
11816	ASHFORD GARDENS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
022125		02/25/202	02/21/202	03/21/202			17,385.33	0.00	0.00	17,385.33

QIPP 47 ADJ 1

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11816	ASHFORD GARDENS	17,385.33	0.00	0.00	17,385.33

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	17,385.33	0.00	0.00	17,385.33

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Check 207839

RECEIVED BY THE COUNTY AUDITOR ON

FEB 27 2025

02/27/2025
11:11

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 03/21/2025

0
ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Vendor#	Vendor Name	Class	Pay Code
11828	SOLERA WEST HOUSTON		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
022025		02/25/202	02/20/202	03/21/202			3,876.00	0.00	0.00	3,876.00
022125		02/25/202	02/21/202	03/21/202			5,575.29	0.00	0.00	5,575.29

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

QIPP 47 ADJ1

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11828	SOLERA WEST HOUSTON	9,451.29	0.00	0.00	9,451.29

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	9,451.29	0.00	0.00	9,451.29

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Check 207844

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 27 2025

CALHOUN COUNTY, TEXAS

02/27/2025
11:13

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 03/21/2025

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
11820	FORTBEND HEALTHCARE CENTER		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
022125		02/25/202	02/21/202	03/21/202			5,472.68	0.00	0.00	5,472.68

QIPP 47 ADJ 1

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11820	FORTBEND HEALTHCARE CENTER	5,472.68	0.00	0.00	5,472.68

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	5,472.68	0.00	0.00	5,472.68

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Check 207842

RECEIVED BY THE COUNTY AUDITOR ON

FEB 27 2025

CALHOUN COUNTY, TEXAS

02/27/2025 MEMORIAL MEDICAL CENTER 0

09:51 AP Open Invoice List ap_open_invoice.template

Due Dates Through: 03/21/2025

Vendor# Vendor Name Class Pay Code

11832 BROADMOOR AT CREEKSIDE PARK

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
022025		02/25/202	02/20/202	03/21/202			422.84	0.00	0.00	422.84
022025A		02/25/202	02/20/202	03/21/202			508.20	0.00	0.00	508.20
022125		02/25/202	02/21/202	02/25/202			5,313.46	0.00	0.00	5,313.46
022425		02/25/202	02/24/202	03/21/202			175.00	0.00	0.00	175.00
022425A		02/25/202	02/24/202	03/21/202			1,395.80	0.00	0.00	1,395.80
022525		02/27/202	02/25/202	03/21/202			200.00	0.00	0.00	200.00

ins. pmt dep. into mmcopt in error

QIPP 47 ADJ 1

ins. pmt. dep. into mrkopt in error

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11832	BROADMOOR AT CREEKSIDE PARK	8,015.30	0.00	0.00	8,015.30

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	8,015.30	0.00	0.00	8,015.30

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 207841

RECEIVED BY THE COUNTY AUDITOR ON

FEB 27 2025

02/27/2025 MEMORIAL MEDICAL CENTER 0

11:20 AP Open Invoice List ap_open_invoice.template

Due Dates Through: 03/21/2025

CALHOUN COUNTY, TEXAS

Vendor#	Vendor Name	Class	Pay Code
11824	THE CRESCENT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
022125		02/25/202	02/21/202	03/21/202			4,923.60	0.00	0.00	4,923.60

QIPP 47 ADJ 1

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11824	THE CRESCENT	4,923.60	0.00	0.00	4,923.60

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,923.60	0.00	0.00	4,923.60

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Check 207845

RECEIVED BY THE COUNTY AUDITOR ON

FEB 27 2025

CALHOUN COUNTY, TEXAS

02/27/2025
11:05

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 03/21/2025

0
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
022025		02/25/202	02/20/202	03/21/202			372.18	0.00	0.00	372.18
022125A		02/25/202	02/21/202	03/20/202			7,751.53	0.00	0.00	7,751.53
022425		02/25/202	02/24/202	03/21/202			14,298.77	0.00	0.00	14,298.77
022525A		02/27/202	02/25/202	03/21/202			7,338.05	0.00	0.00	7,338.05
022525B		02/27/202	02/25/202	03/21/202			16.48	0.00	0.00	16.48
022525		02/27/202	02/25/202	03/21/202			48,711.69	0.00	0.00	48,711.69
022525C		02/27/202	02/25/202	03/21/202			3,090.00	0.00	0.00	3,090.00

ins. pmt. clep. into mmc opt in error

QIPP 47 ADJ. 1

ins. pmt. clep. into mmc opt in error

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	81,578.70	0.00	0.00	81,578.70

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	81,578.70	0.00	0.00	81,578.70

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Check 207843

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 27 2025

CALHOUN COUNTY, TEXAS

02/27/2025 MEMORIAL MEDICAL CENTER 0
10:43 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 03/21/2025
Class Pay Code

Vendor# Vendor Name
13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
022025A		02/25/202	02/20/202	03/21/202			11,033.48	0.00	0.00	11,033.48
022025C	ins. pmt. dep. into mmc opt in error	02/25/202	02/20/202	03/21/202			15,120.00	0.00	0.00	15,120.00
022025B	"	02/25/202	02/20/202	03/21/202			6,922.95	0.00	0.00	6,922.95
022025	"	02/25/202	02/20/202	03/21/202			697.83	0.00	0.00	697.83
022125		02/25/202	02/21/202	02/25/202			4,534.01	0.00	0.00	4,534.01
022125A	QIPP 47 ADJ 1	02/25/202	02/21/202	03/21/202			10,599.62	0.00	0.00	10,599.62
022425B	ins. pmt dep. into mmc opt. in error	02/25/202	02/24/202	03/21/202			7,680.00	0.00	0.00	7,680.00
022425	"	02/25/202	02/24/202	03/21/202			6,494.50	0.00	0.00	6,494.50
022425A	"	02/25/202	02/24/202	03/21/202			3,980.50	0.00	0.00	3,980.50

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	13004	TUSCANY VILLAGE	67,062.89	0.00	0.00	67,062.89

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	67,062.89	0.00	0.00	67,062.89

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 207846

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 27 2025

CALHOUN COUNTY, TEXAS

02/27/2025 MEMORIAL MEDICAL CENTER 0
11:15 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 03/21/2025

Vendor#	Vendor Name	Class	Pay Code
12792	BETHANY SENIOR LIVING		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
022125		02/25/202	02/21/202	03/21/202			4,059.79	0.00	0.00	4,059.79
022025		02/26/202	02/20/202	03/21/202			341.06	0.00	0.00	341.06
022425B		02/26/202	02/24/202	03/21/202			674.19	0.00	0.00	674.19
022425		02/26/202	02/24/202	03/21/202			257.00	0.00	0.00	257.00
022425A		02/26/202	02/24/202	03/21/202			8,436.31	0.00	0.00	8,436.31
022525		02/27/202	02/25/202	03/21/202			12,442.82	0.00	0.00	12,442.82

QIPP 47 ADJ 1

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12792	BETHANY SENIOR LIVING	26,211.17	0.00	0.00	26,211.17

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	26,211.17	0.00	0.00	26,211.17

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 207840

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
3/3/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens		44,392.96	44,292.96	36,088.59			36,188.59	**28,782.67**
						Bank Balance	36,188.59	
						Variance	-	
						Leave in Balance	100.00	
						Y7 Comp 1 recon	7,305.92	
						Adjust Balance/Transfer Amt	**28,782.67**	
Broadmoor		16,102.56	16,002.56	57,024.16			57,124.16	**54,548.87**
						Bank Balance	57,124.16	
						Variance	-	
						Leave in Balance	100.00	
						Y7 Comp 1 recon	2,475.29	
						Adjust Balance/Transfer Amt	**54,548.87**	
Crescent		234,070.38	233,970.38	339,034.08			339,134.08	**336,991.02**
						Bank Balance	339,134.08	
						Variance	-	
						Leave in Balance	100.00	
						Y7 Comp 1 recon	2,043.06	
						Adjust Balance/Transfer Amt	**336,991.02**	
Fort Bend		15,878.59	15,778.59	61,370.07			61,470.07	**59,079.06**
						Bank Balance	61,470.07	
						Variance	-	
						Leave in Balance	100.00	
						Y7 Comp 1 recon	2,291.01	
						Adjust Balance/Transfer Amt	**59,079.06**	
Solera at W Houston		78,171.69	78,071.69	209,275.87			209,375.87	**207,007.44**
						Bank Balance	209,375.87	
						Variance	-	
						Leave in Balance	100.00	
						Y7 Comp 1 recon	2,268.43	
						Adjust Balance/Transfer Amt	**207,007.44**	
						TOTAL TRANSFERS	-	**686,409.06**

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank

28,782.67 +
54,548.87 +
336,991.02 +
59,079.06 +
207,007.44 +
686,409.06 ◊

ouston / Fort Bend / Broadmoor:

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Approved: Michelle Cumberland
Michelle Cumberland, Controller 3/3/2025

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.

J:\NH Weekly Transfers\NH UPL Transfer Summary\2025\NH UPL Transfer Summary 3.3.25

Ashford Gardens	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account	-	33.13					-	33.13
2/27/2025 NOVITAS SOLUTION HCCLAIMPMT 675423 420000125	-	15,482.37					-	15,482.37
2/26/2025 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	44,292.96	-					-	-
2/26/2025 HNB - ECHO HCCLAIMPMT 746003411 440000267917	-	787.61					-	787.61
2/26/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	176.57					-	176.57
2/25/2025 WELLPOINT CO AP E-PAYMENT EE52946180 1110000	-	15,725.05	3,697.72	1,088.36	1,644.62	9,294.35	7,305.92	8,419.13
2/25/2025 NOVITAS SOLUTION HCCLAIMPMT 675423 420000115	-	995.16					-	995.16
2/24/2025 HNB - ECHO HCCLAIMPMT 746003411 440000271589	-	2,888.70					-	2,888.70
							-	-
	44,292.96	36,088.59	3,697.72	1,088.36	1,644.62	9,294.35	7,305.92	28,782.67

Broadmoor	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account	-	49.28					-	49.28
2/28/2025 MANAGEANDNET1718 MNS PMNT 000000000004293 41	-	7,306.00					-	7,306.00
2/28/2025 NOVITAS SOLUTION HCCLAIMPMT 676357 420000149	-	255.31					-	255.31
2/26/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III	16,002.56	-					-	-
2/25/2025 WELLPOINT CO AP E-PAYMENT EE52946183 1110000	-	5,056.86	1,368.90	402.22	605.02	2,680.72	2,475.29	2,581.57
2/25/2025 NOVITAS SOLUTION HCCLAIMPMT 676357 420000114	-	39,013.05					-	39,013.05
2/24/2025 NOVITAS SOLUTION HCCLAIMPMT 676357 420000139	-	5,343.66					-	5,343.66
							-	-
	16,002.56	57,024.16	1,368.90	402.22	605.02	2,680.72	2,475.29	54,548.87

Crescent	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account	-	252.86					-	252.86
2/28/2025 387	186,752.44	-					-	-
2/28/2025 NOVITAS SOLUTION HCCLAIMPMT 676323 420000149	-	2,873.38					-	2,873.38
2/27/2025 NOVITAS SOLUTION HCCLAIMPMT 676323 420000125	-	28,065.77					-	28,065.77
2/27/2025 AARP Supplementa HCCLAIMPMT 746003411 124384	-	4,080.00					-	4,080.00
2/26/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III	47,217.94	-					-	-
2/26/2025 Deposit	-	5,508.00					-	5,508.00
2/26/2025 NOVITAS SOLUTION HCCLAIMPMT 676323 420000154	-	6,029.78					-	6,029.78
2/26/2025 GEHA UMR HCCLAIMPMT 746003411 12438487971214	-	1,020.00					-	1,020.00
2/25/2025 PNC-ECHO HCCLAIMPMT 746003411 41000129480755	-	2,908.65					-	2,908.65
2/25/2025 WELLPOINT CO AP E-PAYMENT EE52946182 1110000	-	4,428.43	1,020.76	300.82	449.54	2,657.31	2,043.06	2,385.37
2/25/2025 NOVITAS SOLUTION HCCLAIMPMT 676323 420000114	-	211,541.88					-	211,541.88
2/25/2025 AARP Supplementa HCCLAIMPMT 746003411 124384	-	1,836.00					-	1,836.00
2/24/2025 HNB - ECHO HCCLAIMPMT 746003411 440000271581	-	35,957.91					-	35,957.91
2/24/2025 HNB - ECHO HCCLAIMPMT 746003411 440000270292	-	3,293.14					-	3,293.14
2/24/2025 DEVOTED HEALTH P HCCLAIMPMT 21000020677321	-	4,500.00					-	4,500.00
2/24/2025 NOVITAS SOLUTION HCCLAIMPMT 676323 420000139	-	26,738.28					-	26,738.28
							-	-
	233,970.38	339,034.08	1,020.76	300.82	449.54	2,657.31	2,043.06	336,991.02

Fort Bend	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account	-	28.34					-	28.34
2/28/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000149	-	2,330.13					-	2,330.13
2/27/2025 HNB - ECHO HCCLAIMPMT 746003411 440000214108	-	4,863.51					-	4,863.51
2/26/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III	15,778.59	-					-	-
2/26/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000154	-	15,873.56					-	15,873.56
2/25/2025 WELLPOINT CO AP E-PAYMENT EE52946179 1110000	-	4,939.47	1,155.96	341.38	510.38	2,931.75	2,291.01	2,648.46
2/25/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000114	-	17,929.16					-	17,929.16
2/24/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000139	-	15,405.90					-	15,405.90
							-	-
	15,778.59	61,370.07	1,155.96	341.38	510.38	2,931.75	2,291.01	59,079.06

Solera at West Houston	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account	-	132.24					-	132.24
2/28/2025 NOVITAS SOLUTION HCCLAIMPMT 676310 420000149	-	12,140.88					-	12,140.88
2/27/2025 AARP Supplementa HCCLAIMPMT 746003411 124384	-	3,060.00					-	3,060.00
2/26/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III	78,071.69	-					-	-
2/26/2025 NOVITAS SOLUTION HCCLAIMPMT 676310 420000154	-	33,410.80					-	33,410.80
2/25/2025 WELLPOINT CO AP E-PAYMENT EE52946181 1110000	-	4,974.59	1,108.64	324.48	486.48	3,054.99	2,268.43	2,706.17
2/25/2025 NOVITAS SOLUTION HCCLAIMPMT 676310 420000114	-	55,578.21					-	55,578.21
2/24/2025 NOVITAS SOLUTION HCCLAIMPMT 676310 420000139	-	99,979.15					-	99,979.15
							-	-
							-	-
	78,071.69	209,275.87	1,108.64	324.48	486.48	3,054.99	2,268.43	207,007.45

TOTALS								
		702,792.77	8,351.98	2,457.26	3,696.04	20,619.12	16,383.71	686,409.06

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,634,763.34	$2,735,962.65	$2,634,763.34	$2,634,763.34
*4381 MEMORIAL MEDICAL / NH ASHFORD	$36,188.59	$36,188.59	$36,188.59	$36,188.59
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$57,124.16	$61,952.56	$57,124.16	$57,124.16
*4411 MEMORIAL MEDICAL / NH CRESCENT	$339,134.08	$351,562.59	$339,134.08	$339,134.08
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$209,375.87	$209,375.87	$209,375.87	$209,375.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$61,470.07	$61,470.07	$61,470.07	$61,470.07
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$184,432.48	$194,272.85	$184,432.48	$184,432.48
*4551 CAL CO INDIGENT HEALTHCARE	$5,502.40	$5,502.40	$5,502.40	$5,502.40
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$774.88	$774.88	$774.88	$774.88
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$101.30	$101.30	$101.30	$101.30
*5506 MMC -NH BETHANY SENIOR LIVING	$120,415.57	$120,415.57	$120,415.57	$120,415.57
*3407 MMC -NH TUSCANY VILLAGE	$360,531.74	$404,139.87	$360,531.74	$360,531.74
*2998 MMC -MONEY MARKET FUND	$264,700.30	$264,700.30	$264,700.30	$264,700.30
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	$39.76	$39.76	$39.76	$39.76
Total Balance	**$4,274,554.54**	**$4,446,459.26**	**$4,274,554.54**	**$4,274,554.54**

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
3/3/2025

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		156,543.19	149,688.54	177,577.83		-	184,432.48	177,472.62
						Bank Balance	184,432.48	
						Variance	-	
						Leave in Balance	100.00	
						QIPP Y7 Adj 1	6,595.68	
						January Interest	158.97	
						February Interest	105.21	
						Adjust Balance/Transfer Amt	177,472.62	

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

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 Michelle Cumberland
Michelle Cumberland, Controller 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek		Transfer-Out	Transfer-in	MMC PORTION					NH PORTION
				QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
2/28/2025	Added to Account	-	105.21					-	105.21
2/26/2025	WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC	149,688.54	-					-	-
2/26/2025	Deposit	-	156,924.13					-	156,924.13
2/26/2025	TSYS/TRANSFIRST CR CD DEP 543684555876917 43	-	16,101.29					-	16,101.29
2/26/2025	NOVITAS SOLUTION HCCLAIMPMT 676097 420000154	-	2,894.20					-	2,894.20
2/24/2025	TSYS/TRANSFIRST CR CD DEP 543684555876917 43	-	1,553.00					-	1,553.00
								-	-
		149,688.54	177,577.83	-	-	-	-	-	177,577.83

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,634,763.34	$2,735,962.65	$2,634,763.34	$2,634,763.34
*4381 MEMORIAL MEDICAL / NH ASHFORD	$36,188.59	$36,188.59	$36,188.59	$36,188.59
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$57,124.16	$61,952.56	$57,124.16	$57,124.16
*4411 MEMORIAL MEDICAL / NH CRESCENT	$339,134.08	$351,562.59	$339,134.08	$339,134.08
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$209,375.87	$209,375.87	$209,375.87	$209,375.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$61,470.07	$61,470.07	$61,470.07	$61,470.07
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$184,432.48	$194,272.85	$184,432.48	$184,432.48
*4551 CAL CO INDIGENT HEALTHCARE	$5,502.40	$5,502.40	$5,502.40	$5,502.40
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$774.88	$774.88	$774.88	$774.88
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$101.30	$101.30	$101.30	$101.30
*5506 MMC -NH BETHANY SENIOR LIVING	$120,415.57	$120,415.57	$120,415.57	$120,415.57
*3407 MMC -NH TUSCANY VILLAGE	$360,531.74	$404,139.87	$360,531.74	$360,531.74
*2998 MMC -MONEY MARKET FUND	$264,700.30	$264,700.30	$264,700.30	$264,700.30
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	$39.76	$39.76	$39.76	$39.76
Total Balance	**$4,274,554.54**	**$4,446,459.26**	**$4,274,554.54**	**$4,274,554.54**

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
3/3/2025

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		100.00	-	674.88			-	774.88	674.88
							Bank Balance	774.88	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	674.88	

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza-Medicare/Medicaid		2,310.77	2,210.77	1.30		-	-	101.30	-
							Bank Balance	101.30	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	1.30	
						TOTAL TRANSFERS		676.18	

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: Michelle Cumberland
Michelle Cumberland, Controller 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

			MMC PORTION					
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account	-	0.21					-	0.21
2/27/2025 HNB - ECHO HCCLAIMPMT 746003411 440000214108	-	361.07					-	361.07
2/26/2025 HNB - ECHO HCCLAIMPMT 746003411 440000267887	-	155.44					-	155.44
2/26/2025 HNB - ECHO HCCLAIMPMT 746003411 440000267539	-	158.16					-	158.16
	-	674.88	-	-	-	-	-	674.88

Gulf Pointe Plaza-Medicare/Medicaid

			MMC PORTION					
	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account	-	1.30					-	1.30
2/26/2025 WIRE OUT HMG Rockport SNF, LP - Commerical	2,210.77	-					-	-
	2,210.77	1.30	-	-	-	-	-	1.30
	2,210.77	676.18	-	-	-	-	-	676.18

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,634,763.34	$2,735,962.65	$2,634,763.34	$2,634,763.34
*4381 MEMORIAL MEDICAL / NH ASHFORD	$36,188.59	$36,188.59	$36,188.59	$36,188.59
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$57,124.16	$61,952.56	$57,124.16	$57,124.16
*4411 MEMORIAL MEDICAL / NH CRESCENT	$339,134.08	$351,562.59	$339,134.08	$339,134.08
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$209,375.87	$209,375.87	$209,375.87	$209,375.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$61,470.07	$61,470.07	$61,470.07	$61,470.07
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$184,432.48	$194,272.85	$184,432.48	$184,432.48
*4551 CAL CO INDIGENT HEALTHCARE	$5,502.40	$5,502.40	$5,502.40	$5,502.40
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$774.88	$774.88	$774.88	$774.88
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$101.30	$101.30	$101.30	$101.30
*5506 MMC -NH BETHANY SENIOR LIVING	$120,415.57	$120,415.57	$120,415.57	$120,415.57
*3407 MMC -NH TUSCANY VILLAGE	$360,531.74	$404,139.87	$360,531.74	$360,531.74
*2998 MMC -MONEY MARKET FUND	$264,700.30	$264,700.30	$264,700.30	$264,700.30
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	$39.76	$39.76	$39.76	$39.76
Total Balance	**$4,274,554.54**	**$4,446,459.26**	**$4,274,554.54**	**$4,274,554.54**

Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
3/3/2025

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		592,044.04	591,944.04	360,431.74	-	-		-	360,531.74	356,097.93
							Bank Balance		360,531.74	
							Variance		-	
								Leave in Balance	100.00	
								Y7 Comp 1 recon	4,333.81	
								Adjust Balance/Transfer Amt	356,097.93	

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: Michelle Cumberland
Michelle Cumberland, Controller 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Tuscany Village		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp 1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	NH PORTION
2/28/2025	Added to Account	-	271.08					-	271.08
2/28/2025	Deposit	-	186,752.44					-	186,752.44
2/27/2025	HNB - ECHO HCCLAIMPMT 746003411 440000214355	-	32,950.96					-	32,950.96
2/27/2025	NOVITAS SOLUTION HCCLAIMPMT 676201 420000125	-	1,724.51					-	1,724.51
2/26/2025	WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE	591,944.04	-					-	-
2/26/2025	Deposit	-	26,762.08					-	26,762.08
2/26/2025	Deposit	-	41,914.84					-	41,914.84
2/25/2025	Deposit	-	2,095.00					-	2,095.00
2/25/2025	HNB - ECHO HCCLAIMPMT 746003411 440000227533	-	494.95					-	494.95
2/25/2025	WELLPOINT CO AP E-PAYMENT EE52946184 1110000	-	6,487.52	2,180.10	642.20	-	3,665.22	4,333.81	2,153.71
2/25/2025	NOVITAS SOLUTION HCCLAIMPMT 676201 420000114	-	40,093.71					-	40,093.71
2/24/2025	HNB - ECHO HCCLAIMPMT 746003411 440000271578	-	19,696.09					-	19,696.09
2/24/2025	NOVITAS SOLUTION HCCLAIMPMT 676201 420000139	-	1,188.56					-	1,188.56
								-	-
		591,944.04	360,431.74	2,180.10	642.20	-	3,665.22	4,333.81	356,097.93

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,634,763.34	$2,735,962.65	$2,634,763.34	$2,634,763.34
*4381 MEMORIAL MEDICAL / NH ASHFORD	$36,188.59	$36,188.59	$36,188.59	$36,188.59
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$57,124.16	$61,952.56	$57,124.16	$57,124.16
*4411 MEMORIAL MEDICAL / NH CRESCENT	$339,134.08	$351,562.59	$339,134.08	$339,134.08
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$209,375.87	$209,375.87	$209,375.87	$209,375.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$61,470.07	$61,470.07	$61,470.07	$61,470.07
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$184,432.48	$194,272.85	$184,432.48	$184,432.48
*4551 CAL CO INDIGENT HEALTHCARE	$5,502.40	$5,502.40	$5,502.40	$5,502.40
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$774.88	$774.88	$774.88	$774.88
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$101.30	$101.30	$101.30	$101.30
*5506 MMC -NH BETHANY SENIOR LIVING	$120,415.57	$120,415.57	$120,415.57	$120,415.57
*3407 MMC -NH TUSCANY VILLAGE	$360,531.74 √	$404,139.87	$360,531.74	$360,531.74
*2998 MMC -MONEY MARKET FUND	$264,700.30	$264,700.30	$264,700.30	$264,700.30
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	$39.76	$39.76	$39.76	$39.76
Total Balance	**$4,274,554.54**	**$4,446,459.26**	**$4,274,554.54**	**$4,274,554.54**

Memorial Medical Center
Nursing Home UPL
Weekly HSLTransfer
Prosperity Accounts
3/3/2025

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		179,987.38	175,004.02	115,432.21			-	120,415.57	115,279.32
							Bank Balance	120,415.57	
							Variance	-	
							Leave in Balance	100.00	
							QJPP Y7 ADJ 1	4,714.56	
							January Interest	168.80	
							February Interest	152.89	
							Adjust Balance/Transfer Amt	115,279.32	

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: Michelle Cumberland
Michelle Cumberland, Controller 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Lavaca Bay Nursing and Rehab		Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
				QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
2/28/2025	Added to Account	-	152.89					-	152.89
2/28/2025	CENTENE CORP HCCLAIMPMT 53101125320684	-	772.46					-	772.46
2/26/2025	WIRE OUT REG Leased OpCo LLC	175,004.02	-					-	-
2/26/2025	Deposit	-	26,282.56					-	26,282.56
2/26/2025	NDC SWEEP FAC 02330 560096800008801 SWEEP FR	-	10,904.85					-	10,904.85
2/25/2025	Deposit	-	29,589.19				29,589.19	10,356.22	19,232.97
2/25/2025	CENTENE CORP HCCLAIMPMT 53101122577855	-	47,352.23					-	47,352.23
2/24/2025	HUMANA CHA DISB HCCLAIMPMT 69141548 42000011	-	378.03					-	378.03
								-	-
		175,004.02	115,432.21	-	-	-	29,589.19	10,356.22	105,075.99

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,634,763.34	$2,735,962.65	$2,634,763.34	$2,634,763.34
*4381 MEMORIAL MEDICAL / NH ASHFORD	$36,188.59	$36,188.59	$36,188.59	$36,188.59
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$57,124.16	$61,952.56	$57,124.16	$57,124.16
*4411 MEMORIAL MEDICAL / NH CRESCENT	$339,134.08	$351,562.59	$339,134.08	$339,134.08
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$209,375.87	$209,375.87	$209,375.87	$209,375.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$61,470.07	$61,470.07	$61,470.07	$61,470.07
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$184,432.48	$194,272.85	$184,432.48	$184,432.48
*4551 CAL CO INDIGENT HEALTHCARE	$5,502.40	$5,502.40	$5,502.40	$5,502.40
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$774.88	$774.88	$774.88	$774.88
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$101.30	$101.30	$101.30	$101.30
*5506 MMC -NH BETHANY SENIOR LIVING	$120,415.57	$120,415.57	$120,415.57	$120,415.57
*3407 MMC -NH TUSCANY VILLAGE	$360,531.74	$404,139.87	$360,531.74	$360,531.74
*2998 MMC -MONEY MARKET FUND	$264,700.30	$264,700.30	$264,700.30	$264,700.30
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	$39.76	$39.76	$39.76	$39.76
Total Balance	**$4,274,554.54**	**$4,446,459.26**	**$4,274,554.54**	**$4,274,554.54**

Pinford

MEMORIAL MEDICAL CENTER

CHECK REQUEST

PAYEE: Memorial Medical Center

Date Requested: 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CHK# 001260

FOR ACCT USE ONLY

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

AMOUNT: $ 7,305.92 ✓

G/L NUMBER: 10255040

EXPLANATION: Wellpoint QIPP Y7 Comp 1 Interim Allocation

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: MSL

Broadmoor

MEMORIAL MEDICAL CENTER

CHECK REQUEST

PAY TO: Memorial Medical Center

Date Requested: 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
Chk#000299

FOR ACCT USE ONLY

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

AMOUNT: $ 2,475.29 ✓

G/L NUMBER: 10255040

EXPLANATION: Wellpoint QIPP Y7 Comp 1 Interim Allocation

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: ✓ MCL

Crescent

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: Memorial Medical Center

Date Requested: 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk#000388

FOR ACCT USE ONLY

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

AMOUNT: $ 2,043.06

G/L NUMBER: 10255040

EXPLANATION: Wellpoint QIPP Y7 Comp 1 Interim Allocation

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: MSL

Fort Bend

MEMORIAL MEDICAL CENTER

CHECK REQUEST

PAY TO: Memorial Medical Center

Date Requested: 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
CHK#000267

FOR ACCT USE ONLY

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

AMOUNT: $ 2,291.01

G/L NUMBER: 10255040

EXPLANATION: Wellpoint QIPP Y7 Comp 1 Interim Allocation

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: MSC

Solera

MEMORIAL MEDICAL CENTER

CHECK REQUEST

PAY TO THE ORDER OF: Memorial Medical Center

Date Requested: 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 001323

FOR ACCT USE ONLY

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

AMOUNT: $ 2,268.43 ✓

G/L NUMBER: 10255040

EXPLANATION: Wellpoint QIPP Y7 Comp 1 Interim Allocation

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: ✓ MSC

Tuscany

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: Memorial Medical Center

Date Requested: 3/3/2025

APPROVED ON
MAR 03 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
Chk#001182

FOR ACCT USE ONLY

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

AMOUNT: $ 4,333.81

G/L NUMBER: 10255040

EXPLANATION: Wellpoint QIPP Y7 Comp 1 Interim Allocation

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: MSR

QIPP Payment to MMC from Nursing Facilities **Commissioner's Court** **3/6/2025**

NH Name	From Bank Acct #	Ck #	Payee	GL #	WELLPOINT Y7 COMP 1 RECON			TOTAL	Date
Ashford	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	7,305.92			7,305.92	3/6/2025
Broadmoor	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	2,475.29			2,475.29	3/6/2025
Crescent	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	2,043.06			2,043.06	3/6/2025
Fort Bend	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	2,291.01			2,291.01	3/6/2025
Solera	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	2,268.43			2,268.43	3/6/2025
Golden Creek	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040				-	3/6/2025
Bethany	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040				-	3/6/2025
Tuscany	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	4,333.81			4,333.81	3/6/2025
				Total:	**20,717.52**	-	-	**20,717.52**	

Note:

Approved: Michelle Cumberland

Michelle Cumberland 3/3/2025

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

MEMORIAL MEDICAL CENTER
NH ASHFORD
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001260

Date 3-5-25 88-2265/1131

PAY TO THE ORDER OF MMC Operating $ 7,305. 92/100

Seven thousand, three hundred five dollars ; 92/100 DOLLARS

PROSPERITY BANK®

County auditor

County treasurer

Security features are included. Details on back.

FOR Wellpoint UT comp! recon

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

MEMORIAL MEDICAL CENTER
NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000299

88-2265/1131

Date 3-5-25

PAY TO THE ORDER OF MMC Operating $ 2475. 29/100

Two thousand, four hundred seventy-five dollars ; 29/100 DOLLARS

PROSPERITY BANK®

County auditor

County treasurer

Security features are included. Details on back.

FOR Wellpoint UT comp! recon

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MEMORIAL MEDICAL CENTER
NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000388

Date 3-5-25 88-2265/1131

PAY TO THE ORDER OF MMC Operating $ 2,043. 06/100

Two thousand, forty-three dollars ; 06/100 DOLLARS

PROSPERITY BANK®

County auditor

County treasurer

Security features are included. Details on back.

FOR Wellpoint UT comp! recon

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

MP
000267
88-2265/1131

Date 3-5-25

PAY
TO THE ORDER OF MMC Operating $ 2,291.01/100

Two thousand, two hundred ninety-one dollars and 01/100 DOLLARS

PROSPERITY BANK®

county auditor

MP
county treasurer

FOR Wellpoint UT compl recon

Security features are included. Details on back.

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

MEMORIAL MEDICAL CENTER
NH SOLERA
815 N VIRGINIA ST
PORT LAVACA, TX 77979

MP
001323
88-2265/1131

Date 3-5-25

PAY
TO THE ORDER OF MMC Operating $ 2,268.43/100

Two thousand, two hundred sixty-eight dollars and 43/100 DOLLARS

PROSPERITY BANK®

county auditor

MP
county treasurer

FOR Wellpoint UT compl recon

Security features are included. Details on back.

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MEMORIAL MEDICAL CENTER
TUSCANY VILLAGE
815 N VIRGINIA ST
PORT LAVACA, TX 77979

MP
001182
88-2265/1131

Date 3-5-25

PAY
TO THE ORDER OF MMC Operating $ 4,333.01/100

Four thousand, three hundred thirty-three dollars and 01/100 DOLLARS

PROSPERITY BANK®

county auditor

MP
county treasurer

FOR Wellpoint UT compl recon

Security features are included. Details on back.

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RUN DATE:03/05/25 MEMORIAL MEDICAL CENTER PAGE 1
TIME:09:12 CHECK REGISTER GLCKREG
03/05/25 THRU 03/05/25

BANK--CHECK				
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHF *	000267	03/05/25	2,291.01	MMC OPERATING
NHB *	000299	03/05/25	2,475.29	MMC OPERATING
NHC *	000388	03/05/25	2,043.06	MMC OPERATING
TUS *	001182	03/05/25	4,333.81	MMC OPERATING
NHA *	001260	03/05/25	7,305.92	MMC OPERATING
NHS *	001323	03/05/25	2,268.43	MMC OPERATING