

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---July 23, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$	720,580.55
TOTAL TRANSFERS BETWEEN FUNDS	\$	146,780.06
TOTAL NURSING HOME UPL EXPENSES	\$	831,175.14
TOTAL INTER-GOVERNMENT TRANSFERS	\$	-
GRAND TOTAL DISBURSEMENTS APPROVED July 23, 2025	\$	1,698,535.75

APPROVED

JUL 23 2025

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---July 23, 2025

PAYABLES AND PAYROLL

7/17/2025 Weekly Payables	445,240.55
7/21/2025 Critical - Epimed International INC	271.18
7/21/2025 McKesson-340B Prescription Expense	122.03
7/21/2025 Amerisource Bergen-340B Prescription Expense	263.71
Prosperity Electronic Bank Payments	
7/21/2025 90 Degree Benefits - employee insurance claims	85,948.32
7/21/2025 Sales Tax - June 2025	2,174.25
7/21/2025 TCDRS June Retirement	184,796.11
7/21/2025 Pay Plus-Patient Claims Processing Fee	1,326.08
7/21/2025 Credit Card Leasing Fee	285.82
7/21/2025 Enhanced Analysis - Lockbox Fee	152.50

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 720,580.55
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TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

7/17/2025 MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	45,617.70
7/17/2025 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	101,162.36

TOTAL TRANSFERS BETWEEN FUNDS	\$ 146,780.06
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NURSING HOME UPL EXPENSES

7/21/2025 Nursing Home UPL-Cantex Transfer	2,193.02
7/21/2025 Nursing Home UPL-Nexion Transfer	186,315.21
7/21/2025 Nursing Home UPL-Tuscany Transfer	489,983.31
7/21/2025 Nursing Home UPL-HSL Transfer	152,683.60

TOTAL NURSING HOME UPL EXPENSES	\$ 831,175.14
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TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
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GRAND TOTAL DISBURSEMENTS APPROVED July 23, 2025	\$ 1,698,535.75
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JUL 17 2025

07/17/2025

12:14

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 08/07/2025

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ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

Class	Pay Code
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11237 ✓ 3WON, LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4953		06/30/202	07/01/202	08/01/202			199.00	0.00	0.00	199.00

Practitioner Credentialing

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11237	3WON, LLC	199.00	0.00	0.00	199.00

Vendor#	Vendor Name
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Class	Pay Code
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13180 ✓ ADVANCED STERILIZATION PRODUCT

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8020901879		07/09/202	07/08/202	07/09/202			879.90	0.00	0.00	879.90

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13180	ADVANCED STERILIZATION PRODUCT	879.90	0.00	0.00	879.90

Vendor# , Vendor Name

Class	Pay Code
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A1680 ✓ AIRGAS USA, LLC - CENTRAL DIV

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
5517612759		07/16/202	06/30/202	07/25/202			1,326.40	0.00	0.00	1,326.40

Rental Period 06/11 - 06/30/25

9162531600	07/16/202 06/30/202 07/25/202	2,683.63	0.00	0.00	2,683.63
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5517612961	07/16/202 06/30/202 07/25/202	288.77	0.00	0.00	288.77
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Rental period 4/1 - 4/30/25

5517612542	07/16/202 06/30/202 07/25/202	625.47	0.00	0.00	625.47
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Rental Period 01/10/25 - 01/30/25

9162837449	07/16/202 07/10/202 08/04/202	401.35	0.00	0.00	401.35
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS USA, LLC - CENTRAL DIV	5,325.62	0.00	0.00	5,325.62

Vendor# , Vendor Name

Class	Pay Code
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A1705 ✓ ALIMED INC.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
RPSV004463373		07/09/202	07/07/202	07/22/202			130.67	0.00	0.00	130.67

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	A1705	ALIMED INC.	130.67	0.00	0.00	130.67

Vendor#	Vendor Name
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Class	Pay Code
1000	1000
1001	1001
1002	1002
1003	1003
1004	1004
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1007	1007
1008	1008
1009	1009
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1080	1080
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14028 / AMAZON CAPITAL SERVICES

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1PP1D9CK4L3G		07/09/202	07/02/202	08/01/202			2,354.28	0.00	0.00	2,354.28

1T7YGH3FPWGF	07/09/202	07/08/202	08/07/202	577.57	0.00	0.00	577.57
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1FRK7P4NL4XR	07/15/202	07/07/202	08/06/202	329.00	0.00	0.00	329.00
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
14028	AMAZON CAPITAL SERVICES	3,260.85	0.00	0.00	3,260.85

Vendor# Vendor Name

Class	Pay Code
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15456 ✓ AMERITEX ELEVATOR SERVICES INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
20252272		07/15/202	06/27/202	07/15/202			10,129.31	0.00	0.00	10,129.31

Service Date 6/24/25 - replaced 3 boards due to water damage

Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		15456	AMERITEX ELEVATOR SERVICES INC				10,129.31	0.00	0.00	10,129.31
Vendor#	Vendor Name		Class		Pay Code					
A2218	✓ AQUA BEVERAGE COMPANY		M							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	✓ 063025		07/16/202	06/30/202	07/25/202		62.50	0.00	0.00	62.50 ✓
	✓ 123063		07/16/202	07/10/202	08/04/202		31.00	0.00	0.00	31.00 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		A2218	AQUA BEVERAGE COMPANY				93.50	0.00	0.00	93.50
Vendor#	Vendor Name		Class		Pay Code					
A2271	✓ ARTHREX, INC		W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	✓ 923618784		04/15/202	04/03/202	07/30/202		-250.00	0.00	0.00	-250.00 ✓
	✓ 924501087		07/16/202	07/09/202	07/16/202		660.00	0.00	0.00	660.00 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		A2271	ARTHREX, INC				410.00	0.00	0.00	410.00
Vendor#	Vendor Name		Class		Pay Code					
B1220	✓ BECKMAN COULTER INC		M							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	✓ 112112835		07/09/202	07/06/202	07/31/202		130.70	0.00	0.00	130.70 ✓
	✓ 112117091		07/09/202	07/07/202	08/01/202		96.00	0.00	0.00	96.00 ✓
	✓ 112115858		07/09/202	07/07/202	08/01/202		7,622.82	0.00	0.00	7,622.82 ✓
	✓ 112116006		07/09/202	07/07/202	08/01/202		1,502.03	0.00	0.00	1,502.03 ✓
	✓ 112115877		07/09/202	07/07/202	08/01/202		269.58	0.00	0.00	269.58 ✓
	✓ 112120277		07/09/202	07/08/202	08/02/202		193.44	0.00	0.00	193.44 ✓
	✓ 112107687		07/16/202	07/01/202	07/26/202		254.49	0.00	0.00	254.49 ✓
	✓ 112109507		07/16/202	07/02/202	07/27/202		1,499.41	0.00	0.00	1,499.41 ✓
	✓ 112109602		07/16/202	07/02/202	07/27/202		357.84	0.00	0.00	357.84 ✓
	✓ 112120898		07/16/202	07/06/202	07/31/202		193.44	0.00	0.00	193.44 ✓
	✓ 112116323		07/16/202	07/07/202	08/01/202		90.13	0.00	0.00	90.13 ✓
	✓ 112115870		07/16/202	07/07/202	08/01/202		5,759.11	0.00	0.00	5,759.11 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC				17,968.99	0.00	0.00	17,968.99
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
	✓ MIN0228652		07/16/202	07/11/202	07/16/202		535.00	0.00	0.00	535.00 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		B1320	BEEKLEY CORPORATION				535.00	0.00	0.00	535.00

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
✓	908401172		07/16/202	07/10/202	07/16/202			2,190.94	0.00	0.00	2,190.94 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	11072	BIO-RAD LABORATORIES, INC						2,190.94	0.00	0.00	2,190.94
Vendor#	Vendor Name	Class	Pay Code								
11295	CALHOUN COUNTY INDIGENT ACCOUN										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	071025		06/30/202	07/10/202	07/11/202			10.00	0.00	0.00	10.00 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	11295	CALHOUN COUNTY INDIGENT ACCOUN						10.00	0.00	0.00	10.00
Vendor#	Vendor Name	Class	Pay Code								
10541	CARESFIELD										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	200030536		07/09/202	07/08/202	08/07/202			424.78	0.00	0.00	424.78
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	10541	CARESFIELD						424.78	0.00	0.00	424.78
Vendor#	Vendor Name	Class	Pay Code								
16020	CIHQ										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	10981		07/16/202	07/16/202	07/26/202			3,370.65	0.00	0.00	3,370.65 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	16020	CIHQ						3,370.65	0.00	0.00	3,370.65
Vendor#	Vendor Name	Class	Pay Code								
C1600	CITIZENS MEDICAL CENTER	W									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	202534		06/30/202	07/15/202	07/16/202			72,001.55	0.00	0.00	72,001.55 ✓
JUNE INVOICE											
✓	202533		07/01/202	06/09/202	07/16/202			71,938.54	0.00	0.00	71,938.54 ✓
MAY INVOICE											
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	C1600	CITIZENS MEDICAL CENTER						143,940.09	0.00	0.00	143,940.09
Vendor#	Vendor Name	Class	Pay Code								
10212	CLINICAL PATHOLOGY LABS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	17656063025		07/16/202	06/30/202	07/16/202			20,051.88	0.00	0.00	20,051.88 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	10212	CLINICAL PATHOLOGY LABS						20,051.88	0.00	0.00	20,051.88
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
✓	CPWO7722111		07/15/202	07/10/202	07/20/202			-296.10	0.00	0.00	-296.10 ✓
✓	WO771551		07/15/202	07/10/202	07/20/202			296.10	0.00	0.00	296.10 ✓
✓	WO772211		07/15/202	07/10/202	07/20/202			296.10	0.00	0.00	296.10 ✓
✓	OEQT317903		07/15/202	07/11/202	07/21/202			88.89	0.00	0.00	88.89 ✓
✓	OEQT321021		07/16/202	07/03/202	07/13/202			253.85	0.00	0.00	253.85 ✓

Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		C1166	COASTAL OFFICE SOLUTONS				638.84	0.00	0.00	638.84
Vendor#	Vendor Name		Class		Pay Code					
13336	✓ COCA COLA SOUTHWEST BEVERAGES									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓	47747859009		07/16/202	07/03/202	08/02/202		708.39	0.00	0.00	708.39 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		13336	COCA COLA SOUTHWEST BEVERAGES				708.39	0.00	0.00	708.39
Vendor#	Vendor Name		Class		Pay Code					
14080	✓ CORROHEALTH, INC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓	2021532A		06/30/202	06/30/202	07/30/202		2,262.65	0.00	0.00	2,262.65 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		14080	CORROHEALTH, INC.				2,262.65	0.00	0.00	2,262.65
Vendor#	Vendor Name		Class		Pay Code					
14400	✓ CULINARY CONCESSIONS LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓	INV310457		07/16/202	06/30/202	07/30/202		38,384.72	0.00	0.00	38,384.72 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		14400	CULINARY CONCESSIONS LLC				38,384.72	0.00	0.00	38,384.72
Vendor#	Vendor Name		Class		Pay Code					
10368	✓ DEWITT POTH & SON									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓	7981771		07/16/202	06/23/202	07/18/202		97.34	0.00	0.00	97.34 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		10368	DEWITT POTH & SON				97.34	0.00	0.00	97.34
Vendor#	Vendor Name		Class		Pay Code					
11011	✓ DIAMOND HEALTHCARE CORP									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓	IN200056635A		06/30/202	07/01/202	07/26/202		31,376.58	0.00	0.00	31,376.58 ✓
✓	IN20056636A		06/30/202	07/01/202	07/26/202		19,166.67	0.00	0.00	19,166.67 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		11011	DIAMOND HEALTHCARE CORP				50,543.25	0.00	0.00	50,543.25
Vendor#	Vendor Name		Class		Pay Code					
11139	✓ DIANNE ATKINSON									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓	071625		06/30/202	07/16/202	07/16/202		230.00	0.00	0.00	230.00 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		11139	DIANNE ATKINSON				230.00	0.00	0.00	230.00
Vendor#	Vendor Name		Class		Pay Code					
14800	✓ DIRECTV ENTERTAINMENT HOLDINGS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓	250712A		07/17/202	07/12/202	07/12/202		500.80	0.00	0.00	500.80 ✓
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		14800	DIRECTV ENTERTAINMENT HOLDINGS				500.80	0.00	0.00	500.80
Vendor#	Vendor Name		Class		Pay Code					
11196	✓ DON BROWN ELEVATOR INSPECTIONS									

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 25507		07/16/202	06/30/202	07/16/202			975.00	0.00	0.00	975.00 ✓
<i>Annual Safety Inspection (3)</i>										
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
11196		DON BROWN ELEVATOR INSPECTIONS					975.00	0.00	0.00	975.00
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
✓ 54305		07/16/202	07/02/202	07/27/202			75.00	0.00	0.00	75.00 ✓
✓ 54515		07/16/202	07/07/202	08/01/202			75.00	0.00	0.00	75.00 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
11291		DOWELL PEST CONTROL					150.00	0.00	0.00	150.00
Vendor#	Vendor Name			Class	Pay Code					
10175 ✓	DSHS CENTRAL LAB MC2004									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 070125		07/16/202	07/01/202	07/26/202			3,431.50	0.00	0.00	3,431.50 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
10175		DSHS CENTRAL LAB MC2004					3,431.50	0.00	0.00	3,431.50
Vendor#	Vendor Name			Class	Pay Code					
15240 ✓	ECLINICAL WORKS LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 0003266937A		06/30/202	07/01/202	07/17/202			452.15	0.00	0.00	452.15 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
15240		ECLINICAL WORKS LLC					452.15	0.00	0.00	452.15
Vendor#	Vendor Name			Class	Pay Code					
11091 ✓	ECOLAB									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 6353424085A		07/17/202	07/01/202	07/17/202			235.78	0.00	0.00	235.78 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
11091		ECOLAB					235.78	0.00	0.00	235.78
Vendor#	Vendor Name			Class	Pay Code					
11944 ✓	EQUIFAX WORKFORCE SOLUTIONS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2066458509		06/30/202	06/30/202	07/30/202			10.99	0.00	0.00	10.99 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
11944		EQUIFAX WORKFORCE SOLUTIONS					10.99	0.00	0.00	10.99
Vendor#	Vendor Name			Class	Pay Code					
S0501 ✓	EVOQUA WATER TECHNOLOGIES LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
307101059A		07/01/202	07/01/202	07/26/202			3,521.00	0.00	0.00	3,521.00
✓ 907101058AB		07/17/202	07/01/202	07/26/202			3,371.00	0.00	0.00	3,371.00 ✓
✓ 907101059A		07/17/202	07/01/202	07/26/202			3,521.00	0.00	0.00	3,521.00 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
S0501		EVOQUA WATER TECHNOLOGIES LLC					10,413.00	0.00	0.00	10,413.00
Vendor#	Vendor Name			Class	Pay Code					
10689 ✓	FASTHEALTH CORPORATION									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

✓	06A25MMCA		06/30/202	07/12/202	07/27/202		545.00	0.00	0.00	545.00	✓
✓	07O25MMC		07/09/202	07/01/202	08/05/202		595.00	0.00	0.00	595.00	✓
✓	07A25MMC		07/09/202	07/01/202	08/05/202		545.00	0.00	0.00	545.00	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	10689	FASTHEALTH CORPORATION					1,685.00	0.00	0.00	1,685.00	
Vendor#	Vendor Name		Class	Pay Code							
13016	✓	FIRST INSURANCE FUNDING									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	071625		07/16/202	07/16/202	07/16/202		3,891.02	0.00	0.00	3,891.02	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	13016	FIRST INSURANCE FUNDING					3,891.02	0.00	0.00	3,891.02	
Vendor#	Vendor Name		Class	Pay Code							
17276	✓	FIRST UNITED METHODIST CHURCH									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	090125		07/16/202	07/12/202	07/16/202		1,450.00	0.00	0.00	1,450.00	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	17276	FIRST UNITED METHODIST CHURCH					1,450.00	0.00	0.00	1,450.00	
Vendor#	Vendor Name		Class	Pay Code							
F1400	✓	FISHER HEALTHCARE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	2130995		07/09/202	07/08/202	08/02/202		6,493.28	0.00	0.00	6,493.28	✓
✓	2130994		07/09/202	07/08/202	08/02/202		734.22	0.00	0.00	734.22	✓
✓	2164737		07/16/202	07/09/202	08/03/202		215.75	0.00	0.00	215.75	✓
✓	2164738		07/16/202	07/09/202	08/03/202		558.56	0.00	0.00	558.56	✓
✓	2196626		07/16/202	07/10/202	08/04/202		188.60	0.00	0.00	188.60	✓
✓	2196625		07/16/202	07/10/202	08/04/202		23.85	0.00	0.00	23.85	✓
✓	2225087		07/16/202	07/11/202	08/05/202		185.00	0.00	0.00	185.00	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	F1400	FISHER HEALTHCARE					8,399.26	0.00	0.00	8,399.26	
Vendor#	Vendor Name		Class	Pay Code							
11984	✓	GUERBET, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	92583603		07/01/202	06/27/202	06/30/202		525.00	0.00	0.00	525.00	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	11984	GUERBET, LLC					525.00	0.00	0.00	525.00	
Vendor#	Vendor Name		Class	Pay Code							
H0032	✓	H + H SYSTEM, INC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	047332		07/15/202	07/02/202	07/15/202		46.50	0.00	0.00	46.50	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	H0032	H + H SYSTEM, INC.					46.50	0.00	0.00	46.50	
Vendor#	Vendor Name		Class	Pay Code							

Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
15200		MANAGED CARE PARTNERS INC.					515.00	0.00	0.00	515.00	
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
✓	240102870		07/16/202	07/09/202	07/24/202			22.61	0.00	0.00	22.61 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
M2178		MCKESSON MEDICAL SURGICAL INC					22.61	0.00	0.00	22.61	
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
✓	2377471296		07/02/202	07/02/202	07/27/202			1,461.27	0.00	0.00	1,461.27 ✓
✓	2378088571		07/09/202	07/07/202	08/01/202			397.58	0.00	0.00	397.58 ✓
✓	2378088573		07/09/202	07/07/202	08/01/202			129.25	0.00	0.00	129.25 ✓
✓	2378191822		07/09/202	07/08/202	08/02/202			75.46	0.00	0.00	75.46 ✓
✓	2378390154		07/09/202	07/09/202	08/03/202			34.34	0.00	0.00	34.34 ✓
✓	2378390149		07/09/202	07/09/202	08/03/202			693.73	0.00	0.00	693.73 ✓
✓	2378350882		07/09/202	07/09/202	08/03/202			196.33	0.00	0.00	196.33 ✓
✓	2378390152		07/09/202	07/09/202	08/03/202			34.34	0.00	0.00	34.34 ✓
✓	2378390158		07/09/202	07/09/202	08/03/202			47.36	0.00	0.00	47.36 ✓
✓	2378390150		07/16/202	07/09/202	08/03/202			34.34	0.00	0.00	34.34 ✓
✓	2378390151		07/16/202	07/09/202	08/03/202			34.34	0.00	0.00	34.34 ✓
✓	2378390157		07/16/202	07/09/202	08/03/202			244.45	0.00	0.00	244.45 ✓
✓	2378390153		07/16/202	07/09/202	08/03/202			34.34	0.00	0.00	34.34 ✓
✓	2378617920		07/16/202	07/10/202	08/04/202			11.62	0.00	0.00	11.62 ✓
✓	2378617919		07/16/202	07/10/202	08/04/202			333.92	0.00	0.00	333.92 ✓
✓	2378908544		07/16/202	07/11/202	08/05/202			-535.35	0.00	0.00	-535.35 ✓
✓	2378908543		07/16/202	07/11/202	08/05/202			38.54	0.00	0.00	38.54 ✓
✓	2379138278		07/16/202	07/12/202	08/06/202			38.54	0.00	0.00	38.54 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
M2470		MEDLINE INDUSTRIES INC					3,304.40	0.00	0.00	3,304.40	
Vendor#	Vendor Name			Class	Pay Code						
10963	✓ MEMORIAL MEDICAL CLINIC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	071625		07/16/202	07/16/202	07/16/202			25.00	0.00	0.00	25.00 ✓

Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
10963		MEMORIAL MEDICAL CLINIC					25.00	0.00	0.00	25.00
Vendor#	Vendor Name	Class		Pay Code						
14704	METTLER-TOLEDO RAININ, LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 679245664		07/15/202	07/01/202	07/15/202			140.60	0.00	0.00	140.60 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
14704		METTLER-TOLEDO RAININ, LLC					140.60	0.00	0.00	140.60
Vendor#	Vendor Name	Class		Pay Code						
M262	MMC AUXILIARY GIFT SHOP	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071025		07/16/202	07/10/202	07/10/202			399.12	0.00	0.00	399.12
removed - Amount is off										
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
M2621		MMC AUXILIARY GIFT SHOP					399.12	0.00	0.00	399.12
Vendor#	Vendor Name	Class		Pay Code						
10536	MORRIS & DICKSON CO, LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 0042057		04/16/202	03/13/202	08/01/202			736.84	0.00	0.00	736.84 ✓
✓ 1423964		07/09/202	12/19/202	08/05/202			311.32	0.00	0.00	311.32 ✓
✓ 1498564		07/09/202	01/09/202	08/05/202			951.01	0.00	0.00	951.01 ✓
✓ 1568492		07/09/202	01/28/202	08/05/202			1,329.91	0.00	0.00	1,329.91 ✓
✓ 1774385		07/09/202	03/19/202	08/05/202			126.02	0.00	0.00	126.02 ✓
✓ SC5087		07/09/202	04/25/202	08/05/202			152.22	0.00	0.00	152.22 ✓
✓ 1960488		07/09/202	05/07/202	08/05/202			2,285.79	0.00	0.00	2,285.79 ✓
✓ 1963270		07/09/202	05/07/202	08/05/202			225.05	0.00	0.00	225.05 ✓
✓ 2147139A		07/09/202	06/25/202	08/05/202			421.17	0.00	0.00	421.17 ✓
✓ 2302693		07/09/202	06/25/202	08/05/202			1,751.06	0.00	0.00	1,751.06 ✓
✓ 2322094		07/09/202	08/13/202	08/05/202			4,642.13	0.00	0.00	4,642.13 ✓
✓ CM61565		07/09/202	10/18/202	08/05/202			-1.21	0.00	0.00	-1.21 ✓
✓ 7312		07/09/202	12/12/202	08/05/202			-12.53	0.00	0.00	-12.53 ✓
✓ 2820123		07/09/202	12/18/202	08/02/202			3,271.68	0.00	0.00	3,271.68 ✓
✓ CM81603		07/09/202	01/17/202	08/05/202			-22.21	0.00	0.00	-22.21 ✓
✓ CM81602		07/09/202	01/17/202	08/05/202			-6.23	0.00	0.00	-6.23 ✓
✓ 1548008		07/09/202	01/22/202	08/05/202			198.59	0.00	0.00	198.59 ✓
✓ 2978346		07/09/202	01/29/202	08/02/202			0.20	0.00	0.00	0.20 ✓
✓ 1638721		07/09/202	02/14/202	08/05/202			3,865.48	0.00	0.00	3,865.48 ✓

✓ 1652878	07/09/202 02/14/202 08/05/202	206.94	0.00	0.00	206.94 ✓
✓ 3275626	07/09/202 04/14/202 08/02/202	35.69	0.00	0.00	35.69 ✓
✓ 4757	07/09/202 04/14/202 08/05/202	0.01	0.00	0.00	0.01 ✓
✓ 3280375	07/09/202 04/15/202 08/02/202	6,009.92	0.00	0.00	6,009.92 ✓
✓ 3446694	07/09/202 04/15/202 08/02/202	1,676.93	0.00	0.00	1,676.93 ✓
✓ 3312320	07/09/202 04/15/202 08/02/202	4,976.15	0.00	0.00	4,976.15 ✓
✓ 0046818	07/09/202 04/15/202 08/02/202	3,562.54	0.00	0.00	3,562.54 ✓
✓ 3320279	07/09/202 04/15/202 08/02/202	127.37	0.00	0.00	127.37 ✓
✓ 3312331	07/09/202 04/15/202 08/05/202	4,303.32	0.00	0.00	4,303.32 ✓
✓ 3408372	07/09/202 05/18/202 08/05/202	40.94	0.00	0.00	40.94 ✓
✓ 3410294	07/09/202 05/19/202 08/02/202	9,101.65	0.00	0.00	9,101.65 ✓
✓ 3601203	07/16/202 07/09/202 07/19/202	50.41	0.00	0.00	50.41 ✓
✓ 3601204	07/16/202 07/09/202 07/19/202	1,675.17	0.00	0.00	1,675.17 ✓
✓ 3605591	07/16/202 07/10/202 07/20/202	30.56	0.00	0.00	30.56 ✓
✓ 3606033	07/16/202 07/10/202 07/20/202	22.10	0.00	0.00	22.10 ✓
✓ 3606034	07/16/202 07/10/202 07/20/202	69.58	0.00	0.00	69.58 ✓
✓ 3605590	07/16/202 07/10/202 07/20/202	818.96	0.00	0.00	818.96 ✓
✓ 3606035	07/16/202 07/10/202 07/20/202	51.20	0.00	0.00	51.20 ✓
✓ 3613163	07/16/202 07/13/202 07/23/202	80.47	0.00	0.00	80.47 ✓
✓ 3611735	07/16/202 07/13/202 07/23/202	150.25	0.00	0.00	150.25 ✓
✓ 3613164	07/16/202 07/13/202 07/23/202	355.00	0.00	0.00	355.00 ✓
✓ 3611736	07/16/202 07/13/202 07/23/202	75.13	0.00	0.00	75.13 ✓
✓ 3611734	07/16/202 07/13/202 07/23/202	899.61	0.00	0.00	899.61 ✓
✓ 3611738	07/16/202 07/13/202 07/23/202	38.50	0.00	0.00	38.50 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10536	MORRIS & DICKSON CO, LLC	54,584.69	0.00	0.00	54,584.69

Vendor#	Vendor Name	Class	Pay Code			
M2659	✓ MXR IMAGING, INC	M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
✓ 8801253703		06/16/202	05/06/202	08/01/202		

Gross	Discount	No-Pay	Net
-202.37	0.00	0.00	-202.37 ✓

✓	8801270523		07/15/202	07/03/202	08/02/202		482.30	0.00	0.00	482.30	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	M2659	MXR IMAGING, INC					279.93	0.00	0.00	279.93	
Vendor#	Vendor Name		Class		Pay Code						
12096	✓ NEOGENOMICS LABORATORIES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	9070021		07/16/202	06/30/202	07/16/202		750.00	0.00	0.00	750.00	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	12096	NEOGENOMICS LABORATORIES					750.00	0.00	0.00	750.00	
Vendor#	Vendor Name		Class		Pay Code						
O1500	✓ OLYMPUS AMERICA INC		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	38289821		07/09/202	07/02/202	08/01/202		204.60	0.00	0.00	204.60	✓
✓	38302493		07/09/202	07/07/202	08/01/202		1,125.00	0.00	0.00	1,125.00	✓
✓	38171504		07/16/202	06/07/202	07/07/202		1,125.00	0.00	0.00	1,125.00	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	O1500	OLYMPUS AMERICA INC					2,454.60	0.00	0.00	2,454.60	
Vendor#	Vendor Name		Class		Pay Code						
OM425	✓ OWENS & MINOR										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	2108557332		07/15/202	07/08/202	08/07/202		314.76	0.00	0.00	314.76	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	OM425	OWENS & MINOR					314.76	0.00	0.00	314.76	
Vendor#	Vendor Name		Class		Pay Code						
12480	✓ PRO ENERGY PARTNERS LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	25060600		07/16/202	06/30/202	07/15/202		2,836.55	0.00	0.00	2,836.55	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	12480	PRO ENERGY PARTNERS LLC					2,836.55	0.00	0.00	2,836.55	
Vendor#	Vendor Name		Class		Pay Code						
S1800	✓ SHERWIN WILLIAMS		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	063025		07/16/202	06/30/202	07/15/202		1,573.28	0.00	0.00	1,573.28	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	S1800	SHERWIN WILLIAMS					1,573.28	0.00	0.00	1,573.28	
Vendor#	Vendor Name		Class		Pay Code						
S2345	✓ SOUTHEAST TEXAS HEALTH SYS		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	27033		06/30/202	07/01/202	07/31/202		6,250.00	0.00	0.00	6,250.00	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	S2345	SOUTHEAST TEXAS HEALTH SYS					6,250.00	0.00	0.00	6,250.00	
Vendor#	Vendor Name		Class		Pay Code						
10845	✓ STAPLES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	6035881597		07/16/202	06/30/202	07/16/202		37.99	0.00	0.00	37.99	✓
✓	7005905955		07/16/202	06/30/202	07/16/202		124.04	0.00	0.00	124.04	✓

2025 3rd DTR

Vendor Totals: Number Name
10845 STAPLES

Gross Discount No-Pay Net
162.03 0.00 0.00 162.03

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	
✓ 0025560		07/16/202	06/18/202	06/19/202			6,623.00	0.00	0.00	6,623.00	✓
✓ 0025643		07/16/202	07/10/202	07/11/202			3,600.00	0.00	0.00	3,600.00	✓

Vendor Totals: Number Name
10758 TEXAS SELECT STAFFING, LLC

Gross Discount No-Pay Net
10,223.00 0.00 0.00 10,223.00

Vendor# Vendor Name Class Pay Code
C2510 ✓ TRUBRIDGE M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓ 1029872		07/17/202	04/30/202	05/25/202			4,860.00	0.00	0.00	4,860.00	✓

Vendor Totals: Number Name
C2510 TRUBRIDGE

Gross Discount No-Pay Net
4,860.00 0.00 0.00 4,860.00

Vendor# Vendor Name Class Pay Code
U1064 ✓ UNIFIRST HOLDINGS INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓ 2921064359		06/30/202	07/10/202	08/04/202			2,868.84	0.00	0.00	2,868.84	✓
✓ 2921063379		07/16/202	06/26/202	07/21/202			275.37	0.00	0.00	275.37	✓
✓ 2921063525		07/16/202	06/30/202	07/25/202			5,776.34	0.00	0.00	5,776.34	✓
✓ 2921063869		07/16/202	07/03/202	07/28/202			182.11	0.00	0.00	182.11	✓
✓ 2921063890		07/16/202	07/03/202	07/28/202			152.73	0.00	0.00	152.73	✓
✓ 2921063850		07/16/202	07/03/202	07/28/202			104.94	0.00	0.00	104.94	✓
✓ 2921063876		07/16/202	07/03/202	07/28/202			190.85	0.00	0.00	190.85	✓
✓ 2921063880		07/16/202	07/03/202	07/28/202			163.01	0.00	0.00	163.01	✓
✓ 2921063884		07/16/202	07/03/202	07/28/202			209.45	0.00	0.00	209.45	✓
✓ 2921064028		07/16/202	07/07/202	08/01/202			3,379.65	0.00	0.00	3,379.65	✓
✓ 2921064038		07/16/202	07/07/202	08/01/202			185.35	0.00	0.00	185.35	✓
✓ 2921064405		07/16/202	07/10/202	08/04/202			137.66	0.00	0.00	137.66	✓
✓ 2921064388		07/16/202	07/10/202	08/04/202			182.11	0.00	0.00	182.11	✓
✓ 2921064379		07/16/202	07/10/202	08/04/202			255.37	0.00	0.00	255.37	✓
✓ 2921064398		07/16/202	07/10/202	08/04/202			167.12	0.00	0.00	167.12	✓
✓ 2921064400		07/16/202	07/10/202	08/04/202			293.53	0.00	0.00	293.53	✓
✓ 2921064392		07/16/202	07/10/202	08/04/202			190.85	0.00	0.00	190.85	✓

✓	2921064369	07/16/202 07/10/202 08/04/202	69.02	0.00	0.00	69.02	✓
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
U1064	UNIFIRST HOLDINGS INC	14,784.30	0.00	0.00	14,784.30

Vendor#	Vendor Name	Class	Pay Code
17832	✓ VOCA LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 39971		07/16/202	07/03/202	08/02/202			3,235.00	0.00	0.00	3,235.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
17832	VOCA LLC	3,235.00	0.00	0.00	3,235.00

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9111904630		07/09/202	07/08/202	08/02/202			255.80	0.00	0.00	255.80

✓ 9111904629		07/09/202	07/08/202	08/02/202			374.86	0.00	0.00	374.86
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✓ 9310061100		07/16/202	07/02/202	07/27/202			1,210.80	0.00	0.00	1,210.80
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
I1110	WERFEN USA LLC	1,841.46	0.00	0.00	1,841.46

Vendor#	Vendor Name	Class	Pay Code
11400	✓ WEST COAST MEDICAL RESOURCES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ INV128957		07/01/202	06/24/202	07/01/202			870.00	0.00	0.00	870.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11400	WEST COAST MEDICAL RESOURCES	870.00	0.00	0.00	870.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
APPROVED ON	449,585.45	0.00	0.00	449,585.45

JUL 17 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

CHK# 209574-
209643

449,585.45 +
424.78 - Pg 3. removed per mmc
3,521.00 - Pg 5. Duplicate - removed
399.12 - Pg 9. removed - wrong amount
445,240.55

JUL 21 2025

07/21/2025
08:50

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 08/07/2025

0
ap_open_invoice.template

Vendor# Vendor Name

E1295 ✓ EPIMED INTERNATIONAL INC

Class Pay Code

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
89645A		07/18/202	04/07/202	04/07/202			271.18	0.00	0.00	271.18

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
E1295	EPIMED INTERNATIONAL INC	271.18	0.00	0.00	271.18

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	271.18	0.00	0.00	271.18

APPROVED ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 2091003 *SUBMIT AS CRITICAL*

RUN DATE:07/21/25
TIME:15:30

MEMORIAL MEDICAL CENTER
CHECK REGISTER
07/23/25 THRU 07/23/25

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	209574	07/23/25	199.00	3WON, LLC
A/P	209575	07/23/25	879.90	ADVANCED STERILIZATION PRODUCT
A/P	209576	07/23/25	5,325.62	AIRGAS USA, LLC - CENTRAL DIV
A/P	209577	07/23/25	130.67	ALIMED INC.
A/P	209578	07/23/25	3,260.85	AMAZON CAPITAL SERVICES
A/P	209579	07/23/25	10,129.31	AMERITEX ELEVATOR SERVICES INC
A/P	209580	07/23/25	93.50	AQUA BEVERAGE COMPANY
A/P	209581	07/23/25	410.00	ARTHREX, INC
A/P	209582	07/23/25	.00	VOIDED
A/P	209583	07/23/25	17,968.99	BECKMAN COULTER INC
A/P	209584	07/23/25	535.00	BEEKLEY CORPORATION
A/P	209585	07/23/25	2,190.94	BIO-RAD LABORATORIES, INC
A/P	209586	07/23/25	10.00	CALHOUN COUNTY INDIGENT ACCOUN
A/P	209587	07/23/25	3,370.65	CIHQ
A/P	209588	07/23/25	143,940.09	CITIZENS MEDICAL CENTER
A/P	209589	07/23/25	20,051.88	CLINICAL PATHOLOGY LABS
A/P	209590	07/23/25	638.84	COASTAL OFFICE SOLUTOMS
A/P	209591	07/23/25	708.39	COCA COLA SOUTHWEST BEVERAGES
A/P	209592	07/23/25	2,262.65	CORROHEALTH, INC.
A/P	209593	07/23/25	38,384.72	CULINARY CONCESSIONS LLC
A/P	209594	07/23/25	97.34	DEWITT POTH & SON
A/P	209595	07/23/25	50,543.25	DIAMOND HEALTHCARE CORP
A/P	209596	07/23/25	230.00	DIAMNE ATKINSON
A/P	209597	07/23/25	500.80	DIRECTV ENTERTAINMENT HOLDINGS
A/P	209598	07/23/25	975.00	DON BROWN ELEVATOR INSPECTIONS
A/P	209599	07/23/25	150.00	DOWELL PEST CONTROL
A/P	209600	07/23/25	3,431.50	DSHS CENTRAL LAB MC2004
A/P	209601	07/23/25	452.15	ECLINICAL WORKS LLC
A/P	209602	07/23/25	235.78	ECOLAB
A/P	209603	07/23/25	271.18	EPIMED INTERNATIONAL INC
A/P	209604	07/23/25	10.99	EQUIFAX WORKFORCE SOLUTIONS
A/P	209605	07/23/25	6,892.00	EVOQUA WATER TECHNOLOGIES LLC
A/P	209606	07/23/25	1,685.00	FASTHEALTH CORPORATION
A/P	209607	07/23/25	3,891.02	FIRST INSURANCE FUNDING
A/P	209608	07/23/25	1,450.00	FIRST UNITED METHODIST CHURCH
A/P	209609	07/23/25	8,399.26	FISHER HEALTHCARE
A/P	209610	07/23/25	525.00	GUERBET, LLC
A/P	209611	07/23/25	46.50	H + H SYSTEM, INC.
A/P	209612	07/23/25	360.00	HALF LEAGUE STORAGE
A/P	209613	07/23/25	3,079.62	HEALTHSTREAM, INC.
A/P	209614	07/23/25	573.53	HENLETT-PACKARD
A/P	209615	07/23/25	450.00	INQUISEEK, LLC
A/P	209616	07/23/25	325.00	LABCORP OF AMERICA HOLDINGS
A/P	209617	07/23/25	523.60	LEGAL SHIELD
A/P	209618	07/23/25	895.00	M G TRUST
A/P	209619	07/23/25	515.00	MANAGED CARE PARTNERS INC.
A/P	209620	07/23/25	22.61	MCKESSON MEDICAL SURGICAL INC
A/P	209621	07/23/25	.00	VOIDED
A/P	209622	07/23/25	.00	VOIDED
A/P	209623	07/23/25	3,304.40	MEDLINE INDUSTRIES INC

RUN DATE:07/21/25
TIME:15:30

MEMORIAL MEDICAL CENTER
CHECK REGISTER
07/23/25 THRU 07/23/25

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	209624	07/23/25	25.00	MEMORIAL MEDICAL CLINIC
A/P	209625	07/23/25	140.60	METTLER-TOLEDO RAININ, LLC
A/P	209626	07/23/25	.00	VOIDED
A/P	209627	07/23/25	.00	VOIDED
A/P	209628	07/23/25	54,584.69	MORRIS & DICKSON CO, LLC
A/P	209629	07/23/25	279.93	MXR IMAGING, INC
A/P	209630	07/23/25	750.00	NEOGENOMICS LABORATORIES
A/P	209631	07/23/25	2,454.60	OLYMPUS AMERICA INC
A/P	209632	07/23/25	314.76	OWENS & MINOR
A/P	209633	07/23/25	2,836.55	PRO ENERGY PARTNERS LLC
A/P	209634	07/23/25	1,573.28	SHERWIN WILLIAMS
A/P	209635	07/23/25	6,250.00	SOUTHEAST TEXAS HEALTH SYS
A/P	209636	07/23/25	162.03	STAPLES
A/P	209637	07/23/25	10,223.00	TEXAS SELECT STAFFING, LLC
A/P	209638	07/23/25	4,860.00	TRUBRIDGE
A/P	209639	07/23/25	.00	VOIDED
A/P	209640	07/23/25	14,784.30	UNIFIRST HOLDINGS INC
A/P	209641	07/23/25	3,235.00	VOCA LLC
A/P	209642	07/23/25	1,841.46	WERFEN USA LLC
A/P	209643	07/23/25	870.00	WEST COAST MEDICAL RESOURCES
A/P	209644	07/23/25	45,617.70	GOLDENCREEK HEALTHCARE
A/P	209645	07/23/25	101,162.36	TUSCANY VILLAGE
TOTALS:			592,291.79	

APPROVED ON

JUL 23 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Payables
445,240.55 +
Critical — 271.18 +
NH 45,617.70 +
Kers 101,162.36 +
592,291.79 +

McKESSON

STATEMENT

As of: 07/18/2025

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only



DC: 8115
Customer INV SupplD:
Territory:

Customer: 632536
Date: 07/18/2025

As of: 07/18/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 07/18/2025 ITEMS NOT PAID (✓)

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 124.52 USD

Future Due: 0.00

If Paid By 07/22/2025,
Pay This Amount:

122.03 USD

Due If Paid On Time:
USD

122.03

Past Due: 0.00

Disc lost if paid late:

2.49

Last Payment
08/07/2017 2,451.97

If Paid After 07/22/2025,
Pay this Amount:

124.52 USD

Due If Paid Late:
USD

124.52

APPROVED ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

105 * 12 +

13 * 87 +

3 * 04 +

122 * 03 =

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

McKESSON**STATEMENT**

As of: 07/18/2025

Page: 001

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

Company: 8000

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

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 820405
Date: 07/18/2025

As of: 07/18/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 PLEASE CHECK ANY
Date: 07/18/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 820405 HEB PHCY WHSE/MEM MED PHS											
07/17/2025	07/22/2025	7579804384	B2507-055-212403	115Invoice	2.15	107.27		105.12	✓	7579804384	
07/18/2025	07/22/2025	7580022537	B2507-055-212769	115Invoice	0.28	14.15		13.87	✓	7580022537	

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: 121.42 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 406.44
07/14/2025

If Paid By 07/22/2025,
Pay This Amount:

118.99 USD

If Paid After 07/22/2025,
Pay this Amount:

121.42 USD

Due If Paid On Time:
USD

118.99

Disc lost if paid late:

2.43

Due If Paid Late:
USD

121.42

APPROVED ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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McKESSON**STATEMENT**

As of: 07/18/2025

Page: 001

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

Company: 8000

CVS PHCY 7416/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyDC: 8115
Customer INV SupplD:
Territory: 7001Customer: 835437
Date: 07/18/2025As of: 07/18/2025 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 835437 PLEASE CHECK ANY
Date: 07/18/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835437 CVS PHCY 7416/MEM MC PHS											
07/16/2025	07/22/2025	7579698989	4249641	115Invoice	0.06	3.10		3.04	✓	7579698989	

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: 3.10 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 406.44
07/14/2025If Paid By 07/22/2025,
Pay This Amount:

3.04 USD

If Paid After 07/22/2025,
Pay this Amount:

3.10 USD

Due If Paid On Time:

USD 3.04

Disc lost if paid late:

0.06

Due If Paid Late:

USD 3.10

APPROVED ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS<>
For AR Inquiries please contact 800-867-0333



STATEMENT

Statement Number: 70151343
Date: 07-18-2025

1 of 2

Served By:

AMERISOURCEBERGEN DRUG CORP
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101DEA: 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:	263.71
Past Due:	254.49
Total Due:	518.20
Account Balance:	518.20

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
07-07-2025	07-18-2025	3219857761	7010042122	Invoice	40.10		0.00	40.10 ✓
07-07-2025	07-18-2025	3219857762	7010050517	Invoice	8.76		0.00	8.76 ✓
07-07-2025	07-18-2025	3219857763	7010043696	Invoice	4.51		0.00	4.51 ✓
07-07-2025	07-18-2025	3219857764	7010051656	Invoice	3.08		0.00	3.08 ✓
07-07-2025	07-18-2025	3219983441	7010056250	Invoice	8.45		0.00	8.45 ✓
07-07-2025	07-18-2025	3219983442	7010064701	Invoice	9.00		0.00	9.00 ✓
07-09-2025	07-18-2025	3220262918	7010079003	Invoice	44.27		0.00	44.27 ✓
07-09-2025	07-18-2025	3220262919	7010079608	Invoice	52.02		0.00	52.02 ✓
07-09-2025	07-18-2025	3220263260	7010078305	Invoice	7.64		0.00	7.64 ✓
07-10-2025	07-18-2025	3220400441	7010087270	Invoice	36.25		0.00	36.23 ✓
07-10-2025	07-18-2025	3220400442	7010087251	Invoice	27.72		0.00	27.72 ✓
07-11-2025	07-18-2025	3220530415	7010096441	Invoice	12.71		0.00	12.71 ✓
07-14-2025	07-25-2025	3220674526	7010107955	Invoice	55.45		0.00	✓ 55.45
07-14-2025	07-25-2025	3220674527	7010116616	Invoice	17.84		0.00	✓ 17.84
07-16-2025	07-25-2025	3220948983	7010128532	Invoice	29.66		0.00	✓ 29.66
07-17-2025	07-25-2025	3221080089	7010137518	Invoice	40.83		0.00	✓ 40.83
07-17-2025	07-25-2025	3221081910	7010138759	Invoice	12.32		0.00	✓ 12.32
07-18-2025	07-25-2025	3221213641	7010147076	Invoice	1.98		0.00	✓ 1.98
07-18-2025	07-25-2025	3221213642	7010147246	Invoice	44.27		0.00	✓ 44.27
07-18-2025	07-25-2025	3221213643	7010147292	Invoice	61.36		0.00	✓ 61.36

263.71



STATEMENT

Number: 70151343

Date: 07-18-2025

2 of 2

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
263.71	254.49	0.00	0.00	0.00	0.00	0.00

Reminders	
Due Date	Amount
07-18-2025	254.49
07-25-2025	263.71
Total Due:	518.20

APPROVED ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ITEMNO	SERIAL	LOCNO	EMPNO	DEPTNO	CLASMP	CLASNO	CLASUP	CHKDT	AMT	CLASIP	PAYEE	PAYTC	CHGDT	CYSTD	FIRSTNAME	LASTNAME	CODE	VOID	FROMDT	THRU DT	PRVNO
5156	76351	1	1	0	2025	155001275	0	6/9/2025	\$14,065.57	1	TRUESCRIPTS MANAGEMENT SERVICE LLC	P		517	0		PCS	F	5/19/2025	6/1/2025	464334244
5157	76351	2	33	0	2025	132000630	0	6/9/2025	\$18.21	1	CLINICAL PATHOLOGY LABS, INC	P		185	0		LAB	F	12/9/2024	12/9/2024	742554159
5158	76351	2	31	0	2025	134001107	0	6/9/2025	\$134.82	1	BCM PHYSICIANS	P		457	0		OVS	F	4/28/2025	300791563	
5159	76351	2	71	0	2025	136001092	0	6/9/2025	\$221.66	1	RICHARD ARROYO DIAZ	P		178	0		SO	F	4/21/2025	4/21/2025	583137003
5163	76351	3	16	0	2025	135001792	0	6/9/2025	\$7,518.16	1	DETAR HEALTHCARE SYSTEM	P		702	0		ABS	F	5/8/2025	5/8/2025	621754940
5164	76351	3	69	1	2025	134001051	0	6/9/2025	\$19.10	1	NOE R. OLIVERA, MD, PA	P		457	0		OVS	F	5/12/2025	5/12/2025	262712038
5165	76351	3	69	1	2025	134001053	0	6/9/2025	\$19.10	1	NOE R. OLIVERA, MD, PA	P		457	0		OVS	F	2/25/2025	2/25/2025	262712038
5166	76351	3	64	0	2025	129000876	0	6/9/2025	\$20.37	1	CLINICAL PATHOLOGY LABS, INC	P		172	0		AB	F	3/21/2025	3/21/2025	742554159
5167	76351	3	22	0	2025	141000855	0	6/9/2025	\$20.37	1	CLINICAL PATHOLOGY LABS, INC	P		172	0		AB	F	5/8/2025	5/8/2025	742554159
5168	76351	3	21	0	2025	143000605	0	6/9/2025	\$29.10	1	PORT LAVACA CLINIC ASSOCIATES	P		177	0		OV	F	5/20/2025	5/20/2025	742605670
5169	76351	3	36	1	2025	141000966	0	6/9/2025	\$32.25	1	PORT LAVACA CLINIC ASSOCIATES	P		177	0		OV	F	5/17/2025	5/17/2025	742605670
5170	76351	3	9	2	2025	135000397	0	6/9/2025	\$45.00	1	DRISCOLL CHIP	P		177	0		OV	F	2/10/2025	2/10/2025	742838488
5171	76351	3	38	0	2025	136001134	0	6/9/2025	\$64.55	1	UT PHYSICIANS	P		457	0		OVS	F	5/12/2025	5/12/2025	760459500
5172	76351	3	18	2	2025	128001838	0	6/9/2025	\$65.28	1	PORT LAVACA CLINIC	P		177	0		OV	F	2/14/2025	2/14/2025	742605670
5173	76351	3	57	0	2025	140001197	0	6/9/2025	\$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P		360	0		POV	F	5/15/2025	5/15/2025	742605670
5174	76351	3	8	0	2025	141000949	0	6/9/2025	\$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P		177	0		OV	F	5/16/2025	5/16/2025	742605670
5175	76351	3	15	0	2025	142000866	0	6/9/2025	\$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P		177	0		OV	F	5/19/2025	5/19/2025	742605670
5176	76351	3	9	2	2025	132000683	0	6/9/2025	\$70.71	1	VICTORIA ORTHOPEDIC CENTER, PLLC	P		457	0		OVS	F	5/7/2025	5/7/2025	260151734
5177	76351	3	72	2	2025	132000578	0	6/9/2025	\$74.22	1	VICTORIA ORTHOPEDIC CENTER, PLLC	P		457	0		OVS	F	5/1/2025	5/1/2025	260151734
5178	76351	3	58	2	2025	148000423	0	6/9/2025	\$74.40	1	PALCIOS MEDICAL CLINIC	P		177	0		OV	F	12/12/2024	12/12/2024	452750258
5179	76351	3	4	0	2025	133000546	0	6/9/2025	\$78.06	1	AMH PODIATRY PLLC	P		457	0		OVS	F	5/1/2025	5/1/2025	800810325
5180	76351	3	42	1	2025	100001389	0	6/9/2025	\$82.74	1	SINGLETON ASSOCIATES PA	P		321	0		MRIQ	F	3/25/2025	3/25/2025	741680498
5181	76351	3	9	2	2025	135000422	0	6/9/2025	\$84.40	1	DRISCOLL CHIP	P		172	0		AB	F	1/24/2025	1/24/2025	742838488
5182	76351	3	75	0	2025	148000416	0	6/9/2025	\$109.42	1	PORT LAVACA CLINIC ASSOCIATES	P		177	0		OV	F	5/22/2025	5/22/2025	742605670
5183	76351	3	16	1	2025	136001109	0	6/9/2025	\$112.13	1	AMH PODIATRY PLLC	P		457	0		OVS	F	5/9/2025	5/9/2025	800810325
5184	76351	3	22	0	2025	139000815	0	6/9/2025	\$124.66	1	VICTORIA WOMENS CLINIC ASSOCIATES	P		172	0		AB	F	5/8/2025	5/8/2025	741831291
5185	76351	3	69	1	2025	136001073	0	6/9/2025	\$127.35	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		457	0		OVS	F	5/6/2025	5/6/2025	300520570
5186	76351	3	10	0	2025	128001883	0	6/9/2025	\$129.81	1	VICTORIA EYE CENTER	P		457	0		OVS	F	4/30/2025	4/30/2025	742708337
5188	76351	3	72	0	2025	100001420	0	6/9/2025	\$153.60	1	ESS OF PORT LAVACA LLC	P		189	0		ERD	F	3/5/2025	3/5/2025	815248556
5189	76351	3	29	0	2025	132000674	0	6/9/2025	\$186.50	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		457	0		OVS	F	5/8/2025	5/8/2025	300520570
5190	76351	3	16	0	2025	133001875	0	6/9/2025	\$217.16	1	REGIONAL EMPLOYEE ASSISTANCE PROGRAM	P		172	0		AB	F	5/8/2025	5/8/2025	760423386
5202	76360	2	35	0	2025	129001285	0	6/9/2025	\$18,478.20	1	THE METHODIST HOSPITAL	P		434	0		OHS	F	5/1/2025	5/1/2025	741180155
5203	76360	2	35	0	2025	128001813	0	6/9/2025	\$14.09	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		482	0		DX	F	5/4/2025	5/4/2025	300520570
5204	76360	2	29	2	2025	136001127	0	6/9/2025	\$61.34	1	MHK FAMILY PRACTICE PLLC	P		177	0		OV	F	5/5/2025	5/5/2025	994807850
5205	76360	2	35	0	2025	134001117	0	6/9/2025	\$62.42	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		482	0		DX	F	5/6/2025	5/6/2025	300520570
5206	76360	2	35	0	2025	132000663	0	6/9/2025	\$63.10	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/7/2025	5/7/2025	300520570
5207	76360	2	35	0	2025	143000149	0	6/9/2025	\$63.10	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/10/2025	5/10/2025	300520570
5208	76360	2	35	0	2025	143000150	0	6/9/2025	\$73.53	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/9/2025	5/9/2025	300520570
5209	76360	2	35	0	2025	143001241	0	6/9/2025	\$73.53	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/10/2025	5/10/2025	300520570
5210	76360	2	35	0	2025	143001242	0	6/9/2025	\$73.53	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/11/2025	5/11/2025	300520570
5211	76360	2	35	0	2025	148000085	0	6/9/2025	\$73.53	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/12/2025	5/12/2025	300520570
5212	76360	2	35	0	2025	148000111	0	6/9/2025	\$73.53	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/13/2025	5/13/2025	300520570
5213	76360	2	35	0	2025	141000908	0	6/9/2025	\$73.67	1	SUSAN J BURGERT MD	P		188	0		HV	F	5/10/2025	5/10/2025	272420316
5214	76360	2	35	0	2025	148000473	0	6/9/2025	\$93.08	1	HOUSTON HOSPICARE PLLC	P		188	0		HV	F	5/13/2025	5/13/2025	462167720
5215	76360	2	35	0	2025	148000505	0	6/9/2025	\$93.08	1	HOUSTON HOSPICARE PLLC	P		188	0		HV	F	5/12/2025	5/12/2025	462167720
5216	76360	2	72	0	2025	142000491	0	6/9/2025	\$107.02	1	PAM SPECIALTY HOSPITAL OF VICTORIA NORTH	P		462	0		HPT	F	4/2/2025	4/30/2025	383743547
5217	76360	2	35	0	2025	132000592	0	6/9/2025	\$107.25	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		482	0		DX	F	5/6/2025	5/6/2025	300520570
5218	76360	2	35	0	2025	143000540	0	6/9/2025	\$108.75	1	INPATIENT HOSPITALISTS TEXAS MEDICAL	P		188	0		HV	F	5/9/2025	5/9/2025	830594617
5219	76360	2	35	0	2025	143000564	0	6/9/2025	\$108.75	1	INPATIENT HOSPITALISTS TEXAS MEDICAL	P		188	0		HV	F	5/7/2025	5/7/2025	830594617
5220	76360	2	35	0	2025	143000591	0	6/9/2025	\$108.75	1	INPATIENT HOSPITALISTS TEXAS MEDICAL	P		188	0		HV	F	5/6/2025	5/6/2025	830594617
5221	76360	2	35	0	2025	143000603	0	6/9/2025	\$108.75	1	INPATIENT HOSPITALISTS TEXAS MEDICAL	P		188	0		HV	F	5/8/2025	5/8/2025	830594617
5222	76360	2	35	0	2025	134000469	0	6/9/2025	\$115.55	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/7/2025	5/7/2025	300520570
5223	76360	2	35	0	2025	134001100	0	6/9/2025	\$115.55	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/9/2025	5/9/2025	300520570
5224	76360	2	35	0	2025	134001133	0	6/9/2025	\$115.55	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/9/2025	5/9/2025	300520570
5225	76360	2	35	0	2025	136001027	0	6/9/2025	\$115.55	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/13/2025	5/13/2025	300520570
5226	76360	2	35	0	2025	139000747	0	6/9/2025	\$115.55	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/14/2025	5/14/2025	300520570
5227	76360	2	35	0	2025	142000868	0	6/9/2025	\$115.55	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/12/2025	5/12/2025	300520570
5228	76360	2	35	0	2025	148000484	0	6/9/2025	\$134.14	1	HOUSTON HOSPICARE PLLC	P		188	0		HV	F	5/11/2025	5/11/2025	462167720
5229	76360	2	35	0	2025	148000523	0	6/9/2025	\$134.14	1	HOUSTON HOSPICARE PLLC	P		188	0		HV	F	5/10/2025	5/10/2025	462167720
5230	76360	2	35	0	2025	148000491	0	6/9/2025	\$137.81	1	HOUSTON HOSPICARE PLLC	P		188	0		HV	F	5/14/2025	5/14/2025	462167720
5231	76360	2	35	0	2025	141000923	0	6/9/2025	\$147.34	1	INPATIENT INFECTIOUS DISEASE CONSULTANTS	P		188	0		HV	F	5/12/2025	5/12/2025	272420316
5232	76360	2	35	0	2025	132000621	0	6/9/2025	\$162.59	1	TMH PHYSICIAN ASSOCIATES, PLLC	P		188	0		HV	F	5/6/2025	5/6/2025	300520570
5233	76360	2	35	0	2025	142000187	0	6/9/2025	\$162.59	1	TMH PHYSICIAN ASSOCIATES, PLLC</										

5242	76360	2	35	0	2025	128001815	0	6/9/2025	\$220.08	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	188	0		HV	F	5/6/2025	5/6/2025	300520570
5243	76360	2	35	0	2025	143000556	0	6/9/2025	\$227.79	1	INPATIENT HOSPITALISTS TEXAS MEDICAL	P	188	0		HV	F	5/5/2025	5/5/2025	830594617
5244	76360	2	35	0	2025	142000924	0	6/9/2025	\$244.09	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	179	0		SI	F	5/6/2025	5/6/2025	300520570
5245	76360	2	35	0	2025	133000547	0	6/9/2025	\$323.25	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	188	0		HV	F	5/5/2025	5/5/2025	300520570
5246	76360	2	35	0	2025	142000907	0	6/9/2025	\$323.25	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	188	0		HV	F	5/12/2025	5/12/2025	300520570
5247	76360	2	35	0	2025	133000551	0	6/9/2025	\$402.84	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	188	0		HV	F	5/4/2025	5/4/2025	300520570
5248	76360	2	35	0	2025	141000937	0	6/9/2025	\$416.27	1	WILLIAM POST GOINS II	P	188	0		HV	F	5/6/2025	5/9/2025	272420316
5249	76360	2	35	0	2025	141000104	0	6/9/2025	\$437.14	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	183	0		RAD	F	5/8/2025	5/8/2025	300520570
5250	76360	2	35	0	2025	128001876	0	6/9/2025	\$456.62	1	PULMONARY CRITICAL AND SLEEP	P	178	0		SO	F	5/1/2025	5/1/2025	201000287
5252	76360	2	35	0	2025	133000993	0	6/9/2025	\$532.40	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	188	0		HV	F	5/5/2025	5/7/2025	300520570
5253	76360	2	114	0	2025	129000866	0	6/9/2025	\$2,739.00	1	VICTORIA EYE CENTER	P	431	0		SFS	F	5/1/2025	5/1/2025	742208337
5254	76360	3	71	1	2025	128002181	0	6/9/2025	\$18,997.58	1	HOUSTON METHODIST SUGAR LAND HOSPITAL	P	434	0		QHS	F	2/21/2025	2/21/2025	760545192
5255	76360	3	27	0	2025	143000581	0	6/9/2025	\$9.57	1	VICTORIA WOMENS CLINIC ASSOCIATES	P	177	0		OV	F	5/12/2025	5/12/2025	741831291
5256	76360	3	30	1	2025	100001356	0	6/9/2025	\$13.37	1	SINGLETON ASSOCIATES PA	P	181	0		XRAY	F	3/27/2025	3/27/2025	741680498
5257	76360	3	125	0	2025	148000507	0	6/9/2025	\$19.10	1	NOE R. OLIVERA, MD, PA	P	457	0		OVS	F	3/26/2025	3/26/2025	262712038
5258	76360	3	65	0	2025	134001142	0	6/9/2025	\$20.37	1	CLINICAL PATHOLOGY LABS, INC	P	172	0		AB	F	5/1/2025	5/1/2025	742554159
5259	76360	3	82	0	2025	148000535	0	6/9/2025	\$22.58	1	VICTORIA ORTHOPEDIC CENTER, PLLC	P	457	0		OVS	F	5/15/2025	5/15/2025	260351734
5260	76360	3	9	0	2025	141000934	0	6/9/2025	\$29.10	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0		OV	F	5/17/2025	5/17/2025	742605670
5261	76360	3	2	0	2025	148000514	0	6/9/2025	\$33.52	1	COASTAL SKIN CARE & WELLNESS CENTER	P	457	0		OVS	F	5/14/2025	5/14/2025	742068244
5262	76360	3	94	0	2025	135000621	0	6/9/2025	\$49.94	1	AYO ADU, MD PLLC	P	457	0		OVS	F	5/12/2025	5/12/2025	273335355
5263	76360	3	45	0	2025	128001864	0	6/9/2025	\$52.62	1	VICTORIA EYE CENTER	P	484	0		ODXS	F	4/13/2025	4/13/2025	742208337
5264	76360	3	37	1	2025	136001141	0	6/9/2025	\$60.00	1	GLORY TO GLORY COUNSELING, PLLC	P	360	0		POV	F	5/14/2025	5/14/2025	452491292
5265	76360	3	37	1	2025	140001151	0	6/9/2025	\$62.00	1	GLORY TO GLORY COUNSELING, PLLC	P	360	0		POV	F	5/16/2025	5/16/2025	452491292
5266	76360	3	37	1	2025	147000995	0	6/9/2025	\$62.00	1	GLORY TO GLORY COUNSELING, PLLC	P	360	0		POV	F	5/19/2025	5/19/2025	452491292
5267	76360	3	107	0	2025	132000693	0	6/9/2025	\$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0		OV	F	5/7/2025	5/7/2025	742605670
5268	76360	3	120	3	2025	143000529	0	6/9/2025	\$78.47	1	ACADIANA WOMENS HEALTH GROUP APMC	P	177	0		OV	F	5/16/2025	5/16/2025	721268830
5269	76360	3	23	1	2025	147001043	0	6/9/2025	\$94.58	1	SUGAR LAND ENDOCRINE & THYROID, PLLC	P	457	0		OVS	F	12/4/2024	12/4/2024	472183230
5270	76360	3	124	0	2025	142000942	0	6/9/2025	\$102.94	1	SCOTT P. STEIN, D.O., P.A.	P	457	0		OVS	F	5/19/2025	5/19/2025	742861393
5271	76360	3	43	1	2025	143000519	0	6/9/2025	\$109.23	1	KHIEM VU DO PA	P	177	0		OV	F	5/7/2025	5/7/2025	451261253
5272	76360	3	51	1	2025	133000554	0	6/9/2025	\$109.86	1	BILLY T CATTAN RECOVERY OUTREACH INC	P	374	0		SOV	F	4/14/2025	4/24/2025	742961798
5273	76360	3	59	1	2025	133001824	0	6/9/2025	\$115.38	1	FAMILY CARE CENTER	P	360	0		POV	F	5/5/2025	5/5/2025	810970561
5274	76360	3	59	1	2025	148000482	0	6/9/2025	\$115.38	1	FAMILY CARE CENTER	P	360	0		POV	F	5/19/2025	5/19/2025	810970561
5275	76360	3	65	0	2025	133001772	0	6/9/2025	\$124.66	1	VICTORIA WOMENS CLINIC ASSOCIATES	P	172	0		AB	F	5/1/2025	5/1/2025	741831291
5276	76360	3	49	2	2025	135000633	0	6/9/2025	\$134.19	1	AMERICAN REGIONAL HEALTH CENTER	P	177	0		OV	F	5/9/2025	5/9/2025	742640162
5277	76360	3	120	1	2025	127000944	0	6/9/2025	\$169.55	1	RADIOLOGY ASSOCIATES	P	189	0		ERD	F	4/12/2025	4/12/2025	720891412
5278	76360	3	21	1	2025	136001083	0	6/9/2025	\$177.68	1	PODIATRY ASSOCIATES OF VICTORIA	P	457	0		OVS	F	5/12/2025	5/12/2025	200719703
5279	76360	3	124	0	2025	147001022	0	6/9/2025	\$205.55	1	PHYSICIANS REFERRAL SERVICE	P	177	0		OV	F	5/16/2025	5/16/2025	760273984
5280	76360	3	59	1	2025	140001138	0	6/9/2025	\$233.83	1	FAMILY CARE CENTER	P	360	0		POV	F	5/12/2025	5/12/2025	810970561
5281	76360	3	37	1	2025	136000471	0	6/9/2025	\$248.00	1	GLORY TO GLORY COUNSELING, PLLC	P	360	0		POV	F	5/1/2025	5/12/2025	452491292
5282	76360	3	2	0	2025	139000802	0	6/9/2025	\$256.20	1	SEAN K OSULLIVAN MD DABR	P	172	0		AB	F	5/14/2025	5/14/2025	742765481
5284	76360	3	21	1	2025	127000953	0	6/9/2025	\$303.85	1	LLC VICTORIA NEPHROLOGY ASSO	P	466	0		DI	F	4/22/2025	4/22/2025	453050693
5287	76360	3	28	0	2025	154000857	0	6/9/2025	\$550.00	9	CAPCOST/CAPROCK HEALTHPLANS	P	9	1		EX09	F	12/12/2024	12/12/2024	261569907
5290	76360	3	37	1	2025	142000952	0	6/9/2025	\$599.14	1	VICTORIA PEDIATRICS AND ADOLES	P	172	0		AB	F	5/15/2025	5/15/2025	742171901
5296	76370	3	44	0	2025	129000907	0	6/9/2025	\$7,766.76	1	AMIRALI S POPATIA MD	P	458	0		CT	F	4/21/2025	4/21/2025	760599320
5297	76370	3	21	0	2025	140001131	0	6/9/2025	\$20.37	1	CLINICAL PATHOLOGY LABS, INC	P	172	0		AB	F	5/5/2025	5/5/2025	742554159
5298	76370	3	21	0	2025	141000940	0	6/9/2025	\$107.26	1	JACKSON MEDICAL CLINIC EDNA	P	172	0		AB	F	5/5/2025	5/5/2025	741738475
5299	76370	3	31	0	2025	132000678	0	6/9/2025	\$111.84	1	VICTORIA EYE CENTER	P	457	0		OVS	F	2/26/2025	2/26/2025	742208337
5300	76370	3	31	0	2025	139000793	0	6/9/2025	\$135.34	1	NOE R. OLIVERA, MD, PA	P	457	0		OVS	F	2/11/2025	2/11/2025	262712038
5301	76370	3	42	1	2025	127000960	0	6/9/2025	\$187.13	1	CRESCENT VIEW MEDICAL CLINICS PA	P	172	0		AB	F	4/30/2025	4/30/2025	452547088
5302	76370	3	44	0	2025	127000499	0	6/9/2025	\$962.40	1	OAKBEND MEDICAL CENTER	P	481	0		OPDX	F	3/10/2025	3/10/2025	760339462

\$85,948.32

M8L

APPROVED ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- July 14, 2025 - July 20, 2025**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>
7/18/2025	PAY PLUS ACHTrans 78141880 101000691269982 P	- 3rd Party Payor Fee
7/18/2025	HEALTHQUITY INC HealthEqui 1356888 91000017	- EmpDeduct/Employer Contribut
7/18/2025	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll
7/17/2025	PAY PLUS ACHTrans 77829446 101000690034790 P	- 3rd Party Payor Fee
7/16/2025	Transfer to DDA 2998 - PER CC & MC appvd co	- Transfer to Prosperity Money Market
7/16/2025	TEXAS COUNTY DRS RECEIVABLE 0419 21000024568	- Retirement Funding
7/16/2025	PAY PLUS ACHTrans 77628826 101000698342812 P	- 3rd Party Payor Fee
7/15/2025	Enhanced Analysis Ch	- Bank Fees
7/15/2025	PAY PLUS ACHTrans 77431261 101000696885614 P	- 3rd Party Payor Fee
7/15/2025	MCKESSON DRUG AUTO ACH ACH06607651 910000160	- 340B Drug Program Expense
7/15/2025	HPHG LLC MEM. MED MemMedCtr PtLav 1131226500	- Health Insurance Claim Payments
7/15/2025	HPHG LLC MEM MED MemMedCtr PtLav 11312265006	- Health Insurance Claim Payments
7/15/2025	FDMS FDMS PYMT 052-1737276-000 4100012080779	- Credit Card Machine Lease Fee
7/15/2025	FDMS FDMS PYMT 052-1743548-000 4100012081079	- Credit Card Machine Lease Fee
7/15/2025	FDMS FDMS PYMT 052-1743547-000 4100012080870	- Credit Card Machine Lease Fee
7/15/2025	FDMS FDMS PYMT 052-2100911-000 4100012081614	- Credit Card Machine Lease Fee
7/14/2025	PAY PLUS ACHTrans 77134829 101000695301664 P	- 3rd Party Payor Fee

<u>Amount</u>	<u>CPSI "Handwritten Check" #</u>
542.86	901744
1,062.00 *	901745
407,149.04 *	901746
68.59	901747
1,500,000.00 *	901748
184,796.11	901749
316.92	901750
152.50	901751
155.02	901752
406.44 *	901753
80,219.93 *	901754
12,188.33 *	901755
120.09	901756
80.06	
40.03	
45.64	
242.69	
2,187,586.25	

542.86 +
68.59 +
316.92 +
155.02 +
242.69 +
1,326.08

Enhanced
Fee 152.50 +
152.50

Lease
Fee 120.09 +
80.06 +
40.03 +
45.64 +
285.82 +
1,326.08 +
152.50 +
285.82 +
1,764.40

* Approved on 7.16.25 cc

✓ Michelle Cumberland
Michelle Cumberland, CFO
Memorial Medical Center
July 21, 2025

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

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>
7/21/2025	WEBFILE TAX PYMT DD	- Sales Tax

<u>Amount</u>
2,174.25

2,187.586.25 +
1,062.00 -
407,149.04 -
1,500,000.00 -
184,796.11 -
406.44 -
80,219.93 -
12,188.33 -
1,764.40 +
1,764.40 -
0.00

✓ Michelle Cumberland
Michelle Cumberland, CFO
Memorial Medical Center
July 21, 2025

APPROVED ON
JUL 21 2025
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

✓ Confirmation: You Have Filed Successfully

Sales and Use Tax Period Ending 06/30/2025 (2506)

Taxpayer ID: [REDACTED]	Taxpayer Name:	Entered By: Caitlin Clevenger
User ID: [REDACTED]	MEMORIAL MEDICAL CENTER	Email Address:
Reference Number: [REDACTED]	Taxpayer Address:	cclevenger@mmcportlavaca.com
Date and Time of Filing:	815 N VIRGINIA ST PORT LAVACA , TX	Telephone Number: (361) 552-0272
07/19/2025, 11:11:55 AM	77979-3025	
	IP Address: [REDACTED]	

PAYMENT SUMMARY

Electronic Check	Payment Reference Number: [REDACTED]	Type of Bank Account: Checking
State Amount: \$1,647.16	Trace Number: [REDACTED]	Accountholder Name:
Local Amount: \$527.09		Memorial Medical Center Operating
Amount to Pay: \$2,174.25		Bank Routing Number: [REDACTED]
Electronic Check: \$2,174.25		Bank Account Number: [REDACTED]
		Payment Effective Date: 07/19/2025

CREDIT SUMMARY

Credits Taken

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

Licensed Customs Broker Exported Sales

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

LOCATION SUMMARY

Loc #	Total Texas Sales	Taxable Sales	Taxable Purchases	Subject to State Tax (Rate .0625)	State Tax Due	Subject to Local Tax	Local Tax Rate	Local Tax Due
00004	26,487	26,487	0.00	26,487	1,655.44	26,487	0.02	529.74
SubTotal	26,487	26,487	0	26,487	1,655.44	26,487		529.74

Total Tax for Locations **2,185.18**

Total Tax Due:	\$2,185.18
Timely Filing Discount:	- \$10.93
Balance Due:	\$2,174.25
Pending Payments:	- \$0.00

Total Amount Due and Payable: **\$2,174.25**

(State amount due is \$1,647.16) (Local amount due is \$527.09)

Date/Time 07-15-2025 / 08:40 AM
Submitted By cclevenger256

Pay Date 06-30-2025

Employee Deposits	\$75,647.62
Employer Contributions	\$109,148.49
Group Term Life Premiums	\$0.00
Total	\$184,796.11

Comments

Payroll File June 2025.xlsx

[CLOSE](#)

[PRINT](#)

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 17 2025

MEMORIAL MEDICAL CENTER

07/17/2025

12:21

AP Open Invoice List

0

ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Due Dates Through: 08/08/2025

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	
✓ 071525A		07/16/202	07/15/202	08/08/202			38.22	0.00	0.00	38.22	✓
✓ 071525	ins. pmt. dep. into mmc opt in error	07/16/202	07/15/202	08/08/202			131.88	0.00	0.00	131.88	✓
✓ 071025	"	07/16/202	07/15/202	08/08/202			45,277.91	0.00	0.00	45,277.91	✓
✓ 071525B	"	07/16/202	07/15/202	08/08/202			169.69	0.00	0.00	169.69	✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE	45,617.70	0.00	0.00	45,617.70

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	45,617.70	0.00	0.00	45,617.70

APPROVED ON

JUL 17 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Chk# 209644

COUNTY AUDITOR ON

JUL 17 2025

07/17/2025

12:21

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 08/08/2025

0

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 070925		07/16/202	07/09/202	08/08/202			13,945.00	0.00	0.00	13,945.00 ✓
✓ 071025	ins. pmt. dep. into mmc opt. in error	07/16/202	07/10/202	08/08/202			13,725.67	0.00	0.00	13,725.67 ✓
✓ 071025B		07/16/202	07/10/202	08/08/202			16,787.19	0.00	0.00	16,787.19 ✓
✓ 071025A		07/16/202	07/10/202	08/08/202			31,962.70	0.00	0.00	31,962.70 ✓
✓ 071125		07/16/202	07/11/202	08/08/202			9,771.07	0.00	0.00	9,771.07 ✓
✓ 071425A		07/16/202	07/14/202	08/08/202			2,723.50	0.00	0.00	2,723.50 ✓
✓ 071425		07/16/202	07/14/202	08/08/202			707.00	0.00	0.00	707.00 ✓
✓ 071525		07/16/202	07/15/202	08/08/202			11,540.23	0.00	0.00	11,540.23 ✓

Vendor Totals: Number Name

13004 TUSCANY VILLAGE

Gross	Discount	No-Pay	Net
101,162.36	0.00	0.00	101,162.36

Report Summary

Grand Totals:

APPROVED ON

Gross
101,162.36

Discount
0.00

No-Pay
0.00

Net
101,162.36

JUL 17 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 209045

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
7/21/2025

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		100.00	52.99	-		47.01	-
						Bank Balance 47.01	
						Variance -	
						Leave In Balance 100.00	

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank

					Adjust Balance/Transfer Amt	(52.99)	
Broadmoor		100.00	-	2,193.02		2,293.02	2,193.02
						Bank Balance 2,293.02	
						Variance -	
						Leave In Balance 100.00	

					Adjust Balance/Transfer Amt	2,193.02	
Crescent		2,752.00	2,652.00	-		100.00	
						Bank Balance 100.00	
						Variance -	
						Leave In Balance 100.00	

					Adjust Balance/Transfer Amt	-	
Fort Bend		110.22	-	21.30		131.52	
						Bank Balance 131.52	
						Variance -	
						Leave In Balance 100.00	

					Claim Payment owed to MMC	6,271.65	
					Claim Payment Owed to Lavaca Bay	2,021.66	
					Adjust Balance/Transfer Amt	(8,261.79)	
Solera at W Houston		100.00	48.60	-		51.40	
						Bank Balance 51.40	
						Variance -	
						Leave In Balance 100.00	

APPROVED ON

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:

Cantex Health Care Centers III LLC

JP Morgan Chase Bank

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Claim Payment owed to Tuscan Village 3,037.72

Adjust Balance/Transfer Amt (3,086.32)

TOTAL TRANSFERS 2,193.02

Approved: Michelle Cumberland
Michelle Cumberland, CFO 7/21/2025

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.

Ashford Gardens

7/15/2025 Enhanced Analysis Ch

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
52.99							
52.99							

Broadmoor7/17/2025 HNB - ECHO HCCLAIMPMT 746003411 440000275929
7/15/2025 AARP Supplementa HCCLAIMPMT 746003411 124384

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
	936.02						936.02
	1,257.00						1,257.00
	2,193.02						2,193.02

Crescent

7/16/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
2,652.00							
2,652.00							

Fort Bend

7/14/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000119

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
	21.30						21.30
	21.30						21.30

Solera at West Houston

7/15/2025 Enhanced Analysis Ch

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
48.60							
48.60							
2,214.32							2,214.32

TOTALS

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,194,890.46	\$1,191,893.60	\$1,194,890.46	\$1,579,595.49
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$47.01 ✓ ✓	\$47.01	\$47.01	\$47.01
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$2,293.02 ✓ ✓	\$2,293.02	\$2,293.02	\$2,293.02
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00 ✓ ✓	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$51.40 ✓ ✓	\$51.40	\$51.40	\$51.40
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$131.52 ✓ ✓	\$131.52	\$131.52	\$131.52
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$186,415.21 ✓	\$186,415.21	\$186,415.21	\$184,042.71
*4551 CAL CO INDIGENT HEALTHCARE	\$4,849.83	\$4,849.83	\$4,849.83	\$9,696.82
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00 ✓	\$116.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.00 ✓	\$100.00	\$100.00	\$100.00
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$152,783.60 ✓	\$160,407.95	\$152,783.60	\$139,529.96
*3407 MMC -NH TUSCANY VILLAGE	\$490,083.31 ✓	\$490,083.31	\$490,083.31	\$490,083.31
*2998 MMC -MONEY MARKET FUND	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$3,723.41	\$3,723.41	\$3,723.41	\$3,328.74
Total Balance	\$3,602,015.89	\$3,606,659.38	\$3,602,015.89	\$3,975,547.10

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
7/21/2025

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		60,585.14	61,074.39	186,904.46		-	186,315.21
						186,415.21	
						186,415.21	
						-	
						100.00	

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 ON
JUL 21 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Adjust Balance/Transfer Amt 186,315.21

Approved: 
Michelle Cumberland, CFO 7/21/2025

Golden Creek

[illegible]

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,194,890.46	\$1,191,893.60	\$1,194,890.46	\$1,579,595.49
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$47.01	\$47.01	\$47.01	\$47.01
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$2,293.02	\$2,293.02	\$2,293.02	\$2,293.02
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$51.40	\$51.40	\$51.40	\$51.40
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$131.52	\$131.52	\$131.52	\$131.52
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$186,415.21 ✓	\$186,415.21	\$186,415.21	\$184,042.71
*4551 CAL CO INDIGENT HEALTHCARE	\$4,849.83	\$4,849.83	\$4,849.83	\$9,696.82
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00	\$116.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.00	\$100.00	\$100.00	\$100.00
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$152,783.60	\$160,407.95	\$152,783.60	\$139,529.96
*3407 MMC -NH TUSCANY VILLAGE	\$490,083.31	\$490,083.31	\$490,083.31	\$490,083.31
*2998 MMC -MONEY MARKET FUND	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$3,723.41	\$3,723.41	\$3,723.41	\$3,328.74
Total Balance	\$3,602,015.89	\$3,606,659.38	\$3,602,015.89	\$3,975,547.10

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
7/21/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza- Private Pay		1,428.00	1,328.00				100.00	No Transfer
						Bank Balance	100.00	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	-	
Gulf Pointe Plaza-Medicare/Medicaid		100.00					100.00	
						Bank Balance	100.00	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	-	
TOTAL TRANSFERS							-	

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 ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Approved:
Michelle Cumberland, CFO

Michelle Cumberland

7/21/2025

Gulf Pointe Plaza-Private Pay

7/16/2025 WIRE OUT HMG Rockport SNF, LP -Commerical

Transfer-Out
1,328.00

✓ Transfer-In

MMC PORTION						NH PORTION
QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI		
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
1,328.00	-	-	-	-	-	-

Gulf Pointe Plaza-Medicare/Medicaid

No Activity

Transfer-Out

✓ Transfer-In

MMC PORTION						NH PORTION
QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP TI		
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	-	-
1,328.00	-	-	-	-	-	-

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,194,890.46	\$1,191,893.60	\$1,194,890.46	\$1,579,595.49
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$47.01	\$47.01	\$47.01	\$47.01
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$2,293.02	\$2,293.02	\$2,293.02	\$2,293.02
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$51.40	\$51.40	\$51.40	\$51.40
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$131.52	\$131.52	\$131.52	\$131.52
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$186,415.21	\$186,415.21	\$186,415.21	\$184,042.71
*4551 CAL CO INDIGENT HEALTHCARE	\$4,849.83	\$4,849.83	\$4,849.83	\$9,696.82
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00 ✓	\$116.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.00 ✓	\$100.00	\$100.00	\$100.00
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$152,783.60	\$160,407.95	\$152,783.60	\$139,529.96
*3407 MMC -NH TUSCANY VILLAGE	\$490,083.31	\$490,083.31	\$490,083.31	\$490,083.31
*2998 MMC -MONEY MARKET FUND	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$3,723.41	\$3,723.41	\$3,723.41	\$3,328.74
Total Balance	\$3,602,015.89	\$3,606,659.38	\$3,602,015.89	\$3,975,547.10

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 7/21/2025

	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home								
Tuscany Village		47,180.49	47,080.49	489,983.31			490,083.31	489,983.31
						Bank Balance Variance	490,083.31	
						Leave in Balance	100.00	

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.

Adjust Balance/Transfer Amt 489,983.31

✓ Approved: Michelle Cumberland
 Michelle Cumberland, CFO 7/21/2025

APPROVED ON
 JUL 21 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Tuscany Village

		MMC PORTION					
Transfer-Out	Transfer-In	QIPP/Comp 1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	NH PORTION
-	10,000.00					-	10,000.00
47,080.49 ✓	-					-	-
-	3,142.50					-	3,142.50
-	164,946.33					-	164,946.33
-	4,318.32					-	4,318.32
-	216,571.46					-	216,571.46
-	1,257.00					-	1,257.00
-	1,847.98					-	1,847.98
-	7,541.87					-	7,541.87
-	18,786.00					-	18,786.00
- ✓	61,571.85					-	61,571.85
47,080.49	489,983.31 ✓	-	-	-	-	-	489,983.31

Balances Overview

Account Name

*4357 MEMORIAL MEDICAL - OPERATING	\$1,194,890.46	\$1,191,893.60	\$1,194,890.46	\$1,579,595.49
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$47.01	\$47.01	\$47.01	\$47.01
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$2,293.02	\$2,293.02	\$2,293.02	\$2,293.02
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$51.40	\$51.40	\$51.40	\$51.40
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$131.52	\$131.52	\$131.52	\$131.52
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$186,415.21	\$186,415.21	\$186,415.21	\$184,042.71
*4551 CAL CO INDIGENT HEALTHCARE	\$4,849.83	\$4,849.83	\$4,849.83	\$9,696.82
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00	\$116.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.00	\$100.00	\$100.00	\$100.00
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$152,783.60	\$160,407.95	\$152,783.60	\$139,529.96
*3407 MMC -NH TUSCANY VILLAGE	\$490,083.31 ✓	\$490,083.31	\$490,083.31	\$490,083.31
*2998 MMC -MONEY MARKET FUND	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12	\$1,566,447.12
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$3,723.41	\$3,723.41	\$3,723.41	\$3,328.74
Total Balance	\$3,602,015.89	\$3,606,659.38	\$3,602,015.89	\$3,975,547.10

Memorial Medical Center
Nursing Home UPL
Weekly HSL Transfer
Prosperity Accounts
7/21/2025

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		34,786.92	34,686.92	152,683.60			152,783.60	152,683.60
						Bank Balance	152,783.60	
						Variance	-	
						Leave in Balance	100.00	

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

APPROVED ON

JUL 21 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Adjust Balance/Transfer Amt 152,683.60

Approved: Michelle Cumberland, CFO

7/21/2025

Lavaca Bay Nursing and Rehab

7/18/2025 NOVITAS SOLUTION HCCLAIMPMT 676481 420000183
 7/18/2025 HOSPICE OF SOUTH Payments NF 113122650020147
 7/17/2025 1154
 7/16/2025 WIRE OUT REG Leased OpCo LLC
 7/16/2025 Deposit
 7/16/2025 CENTENE CORP HCCLAIMPMT 53101125980351
 7/15/2025 Deposit
 7/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000291571
 7/15/2025 HUMANA INS CO HCCLAIMPMT 79444233 8300005006
 7/15/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2
 7/15/2025 CENTENE CORP HCCLAIMPMT 53101121493807
 7/14/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	12,016.33	-	-	-	-	-	12,036.33
-	1,217.31	-	-	-	-	-	1,217.31
1,427.94	-	-	-	-	-	-	-
33,258.98	-	-	-	-	-	-	-
-	22,596.25	-	-	-	-	-	22,596.25
-	2,081.39	-	-	-	-	-	2,081.39
-	21,425.29	-	-	-	-	-	21,425.29
-	1,862.35	-	-	-	-	-	1,862.35
-	294.28	-	-	-	-	-	294.28
-	8,357.71	-	-	-	-	-	8,357.71
-	78,819.33	-	-	-	-	-	78,819.33
-	3,993.36	-	-	-	-	-	3,993.36
-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-
34,686.92	152,683.60	-	-	-	-	-	152,683.60

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,194,890.46	\$1,191,893.60	\$1,194,890.46	\$1,579,595.49
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$47.01	\$47.01	\$47.01	\$47.01
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$2,293.02	\$2,293.02	\$2,293.02	\$2,293.02
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$51.40	\$51.40	\$51.40	\$51.40
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$131.52	\$131.52	\$131.52	\$131.52
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$186,415.21	\$186,415.21	\$186,415.21	\$184,042.71
*4551 CAL CO INDIGENT HEALTHCARE	\$4,849.83	\$4,849.83	\$4,849.83	\$9,696.82
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00	\$116.00	\$100.00	\$100.00
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