MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---August 6, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	230,588.79
TOTAL TRANSFERS BETWEEN FUNDS	$	158,946.44
TOTAL NURSING HOME UPL EXPENSES	$	356,198.40
TOTAL INTER-GOVERNMENT TRANSFERS	$	-
GRAND TOTAL DISBURSEMENTS APPROVED August 6, 2025	$	745,733.63

APPROVED

AUG 06 2025

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---August 6, 2025

PAYABLES AND PAYROLL			
7/31/2025	Weekly Payables	221,940.79	
8/4/2025	McKesson-340B Prescription Expense	111.70	
8/4/2025	Amerisource Bergen-340B Prescription Expense	1,954.48	
8/4/2025	Amerisource Bergen-340B Prescription Expense	2,251.21	
	Prosperity Electronic Bank Payments		
8/4/2025	90 Degree Benefits - employee insurance claims	3,336.00	
8/4/2025	Pay Plus-Patient Claims Processing Fee	994.61	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 230,588.79**
TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES			
7/31/2025	MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	38,728.87	
7/31/2025	MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	110,093.07	
7/31/2025	MMC Operating to Bethany/Lavaca Bay-Correction of insurance payment deposited into MMC Operating in error	10,124.50	
TOTAL TRANSFERS BETWEEN FUNDS			**$ 158,946.44**
NURSING HOME UPL EXPENSES			
8/4/2025	Nursing Home UPL-Cantex Transfer	15,610.52	
8/4/2025	Nursing Home UPL-Nexion Transfer	23,198.69	
8/4/2025	Nursing Home UPL-HMG Transfer	1,623.83	
8/4/2025	Nursing Home UPL-Tuscany Transfer	180,870.83	
8/4/2025	Nursing Home UPL-HSL Transfer	134,894.53	
TOTAL INTER-GOVERNMENT TRANSFERS			**$ -**
GRAND TOTAL DISBURSEMENTS APPROVED August 6, 2025			**$ 745,733.63**

RECEIVED BY THE
COUNTY AUDITOR ON
JUL 31 2025
CALHOUN COUNTY, TEXAS

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
16H3K1JDWWMW		07/09/202	07/14/202	08/13/202			1,562.89	0.00	0.00	1,562.89
1WHMTP4XFTTC		07/21/202	07/17/202	08/16/202			109.67	0.00	0.00	109.67
1P66GPTNLCNN		07/21/202	07/18/202	08/17/202			172.00	0.00	0.00	172.00
1P6JGPQCN3NW		07/22/202	07/22/202	08/21/202			972.22	0.00	0.00	972.22
1DNTQ7TQNCL1		07/23/202	07/22/202	08/21/202			1,254.43	0.00	0.00	1,254.43
139FRHW37LC3		07/28/202	07/02/202	08/01/202			344.19	0.00	0.00	344.19

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14028	AMAZON CAPITAL SERVICES	4,415.40	0.00	0.00	4,415.40

Vendor#	Vendor Name	Class	Pay Code
15456	AMERITEX ELEVATOR SERVICES INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
20260450		07/29/202	08/01/202	08/01/202			750.00	0.00	0.00	750.00

elevator maintenance

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	15456	AMERITEX ELEVATOR SERVICES INC	750.00	0.00	0.00	750.00

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
924632446		07/22/202	07/24/202	07/30/202			627.95	0.00	0.00	627.95

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	A2271	ARTHREX, INC	627.95	0.00	0.00	627.95

Vendor#	Vendor Name	Class	Pay Code
16000	BANESTER SERVICES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
124542		07/21/202	07/02/202	07/30/202			1,200.00	0.00	0.00	1,200.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	16000	BANESTER SERVICES	1,200.00	0.00	0.00	1,200.00

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
83981587		07/08/202	05/08/202	06/02/202			108.96	0.00	0.00	108.96

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	B1150	BAXTER HEALTHCARE	108.96	0.00	0.00	108.96

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
5504947		07/22/202	07/21/202	08/15/202			1,935.15	0.00	0.00	1,935.15
4585548		07/22/202	07/21/202	08/15/202			1,484.00	0.00	0.00	1,484.00

112129093	07/30/202	07/14/202	08/08/202	5,016.58	0.00	0.00	5,016.58	✓
7387608	07/30/202	07/23/202	08/17/202	36.34	0.00	0.00	36.34	✓
5505127	07/30/202	07/25/202	08/19/202	1,337.05	0.00	0.00	1,337.05	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC	9,809.12	0.00	0.00	9,809.12

Vendor# B2825 — Vendor Name: BEN E KEITH FOODS — Class: W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
98760155		07/29/202	07/18/202	07/18/202			712.73	0.00	0.00	712.73

remove per mmc

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	B2825	BEN E KEITH FOODS	712.73	0.00	0.00	712.73

Vendor# 11072 — Vendor Name: BIO-RAD LABORATORIES, INC — Class: Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
908438859		07/30/202	07/25/202	07/30/202			1,030.39	0.00	0.00	1,030.39

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11072	BIO-RAD LABORATORIES, INC	1,030.39	0.00	0.00	1,030.39

Vendor# 14753 — Vendor Name: BIOMERIEUX, INC — Class: Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1219094415		07/16/202	10/14/202	07/31/202			-478.95	0.00	0.00	-478.95
1213541094		07/29/202	07/26/202	07/29/202			10,523.50	0.00	0.00	10,523.50

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14753	BIOMERIEUX, INC	10,044.55	0.00	0.00	10,044.55

Vendor# C1048 — Vendor Name: CALHOUN COUNTY — Class: W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070125		07/29/202	07/01/202	07/01/202			90.53	0.00	0.00	90.53

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C1048	CALHOUN COUNTY	90.53	0.00	0.00	90.53

Vendor# 14064 — Vendor Name: CAPITAL ONE — Class: Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071925		07/31/202	07/19/202	07/19/202			377.25	0.00	0.00	377.25

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14064	CAPITAL ONE	377.25	0.00	0.00	377.25

Vendor# C1325 — Vendor Name: CARDINAL HEALTH 414, INC. — Class: W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8003899195		07/29/202	07/01/202	08/01/202			206.00	0.00	0.00	206.00
8003909344		07/29/202	07/13/202	08/07/202			415.18	0.00	0.00	415.18

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C1325	CARDINAL HEALTH 414, INC.	621.18	0.00	0.00	621.18

Vendor# C1166 — Vendor Name: COASTAL OFFICE SOLUTONS — Class: W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
OEQT321211		07/22/202	07/10/202	07/20/202			895.00	0.00	0.00	895.00
WO773181		07/29/202	07/18/202	07/28/202			296.10	0.00	0.00	296.10
WO774481		07/30/202	07/25/202	08/04/202			296.10	0.00	0.00	296.10

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C1166	COASTAL OFFICE SOLUTONS	1,487.20	0.00	0.00	1,487.20

Vendor# 10368 — Vendor Name: DEWITT POTH & SON — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7790330		07/01/202	01/01/202	01/26/202			1,048.94	0.00	0.00	1,048.94
7993790		07/15/202	07/02/202	07/27/202			548.32	0.00	0.00	548.32
8010311		07/21/202	07/21/202	08/15/202			98.14	0.00	0.00	98.14

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON	1,695.40	0.00	0.00	1,695.40

Vendor# 11291 — Vendor Name: DOWELL PEST CONTROL — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
55543		07/29/202	07/23/202	08/17/202			85.00	0.00	0.00	85.00
55841		07/30/202	07/28/202	07/28/202			105.00	0.00	0.00	105.00
55796		07/30/202	07/28/202	08/01/202			505.00	0.00	0.00	505.00
55785		07/30/202	07/28/202	08/01/202			260.00	0.00	0.00	260.00
55834		07/30/202	07/28/202	08/01/202			160.00	0.00	0.00	160.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11291	DOWELL PEST CONTROL	1,115.00	0.00	0.00	1,115.00

Vendor# 11284 — Vendor Name: EMERGENCY STAFFING SOLUTIONS — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
44482		07/30/202	07/30/202	08/09/202			40,062.50	0.00	0.00	40,062.50

Emergency Dept. Physician Services 16th - 20th

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11284	EMERGENCY STAFFING SOLUTIONS	40,062.50	0.00	0.00	40,062.50

Vendor# F1400 — Vendor Name: FISHER HEALTHCARE — Class: M — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2412674		07/28/202	07/21/202	08/15/202			182.48	0.00	0.00	182.48
2444467		07/28/202	07/22/202	08/16/202			503.68	0.00	0.00	503.68
2382074		07/30/202	07/18/202	08/12/202			243.75	0.00	0.00	243.75

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	F1400	FISHER HEALTHCARE	929.91	0.00	0.00	929.91

Vendor# 11183 — Vendor Name: FRONTIER — Class: — Pay Code:

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

072325		07/31/202	07/23/202	07/23/202		26.03	0.00	0.00	26.03
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
	11183	FRONTIER				26.03	0.00	0.00	26.03
Vendor#	Vendor Name				Class	Pay Code			
14156	FUJI FILM								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
91671927		07/29/202	07/25/202	07/25/202			7,908.33	0.00	0.00	7,908.33
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	14156	FUJI FILM					7,908.33	0.00	0.00	7,908.33
Vendor#	Vendor Name				Class	Pay Code			
12636	FUSION CONNECT								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1029417345		07/31/202	07/16/202	08/15/202			887.56	0.00	0.00	887.56
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	12636	FUSION CONNECT					887.56	0.00	0.00	887.56
Vendor#	Vendor Name				Class	Pay Code			
11149	GBS ADMINISTRATORS, INC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
727158171547		07/29/202	07/19/202	08/01/202			4,394.90	0.00	0.00	4,394.90
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	11149	GBS ADMINISTRATORS, INC					4,394.90	0.00	0.00	4,394.90
Vendor#	Vendor Name				Class	Pay Code			
12404	GE PRECISION HEALTHCARE, LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6002997319		07/22/202	07/18/202	08/17/202			1,852.17	0.00	0.00	1,852.17
6002997320		07/22/202	07/18/202	08/17/202			44.73	0.00	0.00	44.73
6002997321		07/22/202	07/18/202	08/17/202			1,250.32	0.00	0.00	1,250.32
6002997322		07/22/202	07/18/202	08/17/202			31.83	0.00	0.00	31.83
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	12404	GE PRECISION HEALTHCARE, LLC					3,179.05	0.00	0.00	3,179.05
Vendor#	Vendor Name				Class	Pay Code			
G1001	GETINGE USA								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6992949238		07/30/202	07/15/202	07/30/202			211.50	0.00	0.00	211.50
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	G1001	GETINGE USA					211.50	0.00	0.00	211.50
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
9567131587		07/30/202	07/09/202	08/03/202			401.20	0.00	0.00	401.20
9570057472		07/30/202	07/11/202	08/05/202			275.56	0.00	0.00	275.56
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	W1300	GRAINGER					676.76	0.00	0.00	676.76
Vendor#	Vendor Name				Class	Pay Code			
12948	GREAT AMERICA FINANCIAL SVCS								

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
39110812		07/31/202	04/29/202	05/24/202			66.53	0.00	0.00	66.53
39334806A		07/31/202	05/30/202	06/24/202			92.53	0.00	0.00	92.53

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12948	GREAT AMERICA FINANCIAL SVCS	159.06	0.00	0.00	159.06

Vendor# 11984 Vendor Name: GUERBET, LLC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0092591534		07/30/202	07/24/202	07/30/202			483.50	0.00	0.00	483.50

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11984	GUERBET, LLC	483.50	0.00	0.00	483.50

Vendor# 11095 Vendor Name: GULF COAST SCIENTIFIC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
78007		07/01/202	12/31/202	08/15/202			317.67	0.00	0.00	317.67

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11095	GULF COAST SCIENTIFIC	317.67	0.00	0.00	317.67

Vendor# 15620 Vendor Name: HHSC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
073025	Final Roof Inspection	07/30/202	07/30/202	07/30/202			500.00	0.00	0.00	500.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	15620	HHSC	500.00	0.00	0.00	500.00

Vendor# 15208 Vendor Name: HOSPITAL CARE CONSULTANTS INC. — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6880	Physician Services 16th - EOM	07/29/202	07/31/202	08/10/202			23,663.00	0.00	0.00	23,663.00

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# 16012 Vendor Name: JAMES TELECO — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
40508	Techs. Spliced Fiber & tested	07/29/202	07/17/202	07/17/202			1,050.00	0.00	0.00	1,050.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	16012	JAMES TELECO	1,050.00	0.00	0.00	1,050.00

Vendor# 10972 Vendor Name: M G TRUST — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072825		07/29/202	07/28/202	07/28/202			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# M2178 Vendor Name: MCKESSON MEDICAL SURGICAL INC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
24016506		07/15/202	07/09/202	08/15/202			175.90	0.00	0.00	175.90
24096761		07/30/202	07/24/202	08/08/202			2,216.22	0.00	0.00	2,216.22

	24086209		07/30/202	07/24/202	08/08/202		31.28	0.00	0.00	31.28
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		M2178	MCKESSON MEDICAL SURGICAL INC				2,423.40	0.00	0.00	2,423.40
Vendor#	Vendor Name				Class	Pay Code				
11612	MEDICAL AIR SERVICES ASSOC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	2149341		07/29/202	08/01/202	08/01/202		1,514.00	0.00	0.00	1,514.00
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		11612	MEDICAL AIR SERVICES ASSOC.				1,514.00	0.00	0.00	1,514.00
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
	2380611438		07/22/202	07/22/202	08/16/202		410.66	0.00	0.00	410.66
	2380611436		07/22/202	07/22/202	08/16/202		105.60	0.00	0.00	105.60
	2380611439		07/22/202	07/22/202	08/16/202		28.70	0.00	0.00	28.70
	1703514844		07/29/202	07/26/202	08/20/202		106.06	0.00	0.00	106.06
	2380838545		07/30/202	07/23/202	08/17/202		71.37	0.00	0.00	71.37
	2380838543		07/30/202	07/23/202	08/17/202		102.88	0.00	0.00	102.88
	2380838547		07/30/202	07/23/202	08/17/202		198.85	0.00	0.00	198.85
	2380838546		07/30/202	07/23/202	08/17/202		2,377.24	0.00	0.00	2,377.24
	2380838555		07/30/202	07/23/202	08/17/202		296.88	0.00	0.00	296.88
	2380838548		07/30/202	07/23/202	08/17/202		283.95	0.00	0.00	283.95
	2380952678		07/30/202	07/23/202	08/17/202		-283.95	0.00	0.00	-283.95
	2380838561		07/30/202	07/23/202	08/17/202		386.91	0.00	0.00	386.91
	2380838551		07/30/202	07/23/202	08/17/202		209.22	0.00	0.00	209.22
	2380838539		07/30/202	07/23/202	08/17/202		52.68	0.00	0.00	52.68
	2380838560		07/30/202	07/23/202	08/17/202		48.22	0.00	0.00	48.22
	2380838550		07/30/202	07/23/202	08/17/202		69.74	0.00	0.00	69.74
	2380838549		07/30/202	07/23/202	08/17/202		139.48	0.00	0.00	139.48
	2381312123		07/30/202	07/25/202	08/19/202		38.54	0.00	0.00	38.54
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		M2470	MEDLINE INDUSTRIES INC				4,643.03	0.00	0.00	4,643.03
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
	072925		07/29/202	07/29/202	07/29/202		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
679248787		07/30/202	07/11/202	07/30/202			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
M2621	MMC AUXILIARY GIFT SHOP	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072425		07/29/202	07/24/202	07/24/202			329.49	0.00	0.00	329.49

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP	329.49	0.00	0.00	329.49

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
3655351		07/29/202	07/23/202	08/02/202			109.63	0.00	0.00	109.63
3653350		07/29/202	07/23/202	08/02/202			43.29	0.00	0.00	43.29
3651979		07/29/202	07/23/202	08/02/202			6,523.41	0.00	0.00	6,523.41
3655074		07/29/202	07/23/202	08/02/202			1,007.36	0.00	0.00	1,007.36
3655073		07/29/202	07/23/202	08/02/202			5,577.67	0.00	0.00	5,577.67
3653351		07/29/202	07/23/202	08/02/202			186.50	0.00	0.00	186.50
3658936		07/29/202	07/24/202	08/03/202			83.97	0.00	0.00	83.97
3657375		07/29/202	07/24/202	08/03/202			58.54	0.00	0.00	58.54
3657374		07/29/202	07/24/202	08/03/202			17.72	0.00	0.00	17.72
3658934		07/29/202	07/24/202	08/03/202			459.15	0.00	0.00	459.15
0058746		07/30/202	07/21/202	07/31/202			1,670.69	0.00	0.00	1,670.69
3656842		07/30/202	07/24/202	08/03/202			4,889.60	0.00	0.00	4,889.60
3661753		07/30/202	07/25/202	08/04/202			5,697.98	0.00	0.00	5,697.98
3666045		07/30/202	07/27/202	08/06/202			287.20	0.00	0.00	287.20
3666044		07/30/202	07/27/202	08/06/202			232.56	0.00	0.00	232.56
3664711		07/30/202	07/27/202	08/06/202			17.72	0.00	0.00	17.72
CM34010		07/30/202	07/28/202	08/07/202			-35.65	0.00	0.00	-35.65
CM34009		07/30/202	07/28/202	08/07/202			-220.44	0.00	0.00	-220.44

3668506	07/30/202	07/28/202	08/07/202	17.72	0.00	0.00	17.72	✓
3671494	07/30/202	07/28/202	08/07/202	94.42	0.00	0.00	94.42	✓
3671495	07/30/202	07/28/202	08/07/202	72.77	0.00	0.00	72.77	✓
3675918	07/30/202	07/29/202	08/08/202	30.29	0.00	0.00	30.29	✓
3673768	07/30/202	07/29/202	08/08/202	2.25	0.00	0.00	2.25	✓
3675919	07/30/202	07/29/202	08/08/202	710.44	0.00	0.00	710.44	✓
3673767	07/30/202	07/29/202	08/08/202	11.81	0.00	0.00	11.81	✓
3675373	07/30/202	07/29/202	08/08/202	1,945.59	0.00	0.00	1,945.59	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	29,492.19	0.00	0.00	29,492.19

Vendor# 15224 — Vendor Name: MUTUAL OF OMAHA — Class — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
001925469936		07/29/202	07/01/202	08/01/202			23,113.36	0.00	0.00	23,113.36	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	15224	MUTUAL OF OMAHA	23,113.36	0.00	0.00	23,113.36

Vendor# 12316 — Vendor Name: NCS PEARSON, INC. — Class — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
28714230		07/01/202	05/27/202	01/01/202			29.00	0.00	0.00	29.00	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12316	NCS PEARSON, INC.	29.00	0.00	0.00	29.00

Vendor# O1500 — Vendor Name: OLYMPUS AMERICA INC — Class: M — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
38385182		07/30/202	07/23/202	08/17/202			822.57	0.00	0.00	822.57	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	O1500	OLYMPUS AMERICA INC	822.57	0.00	0.00	822.57

Vendor# 10554 — Vendor Name: REPUBLIC SERVICES #847 — Class — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
0847001406273		07/30/202	07/26/202	07/30/202			2,540.80	0.00	0.00	2,540.80	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10554	REPUBLIC SERVICES #847	2,540.80	0.00	0.00	2,540.80

Vendor# 11764 — Vendor Name: ROBERT RODRIQUEZ — Class — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
072325		07/29/202	07/23/202	07/23/202			11.64	0.00	0.00	11.64	✓

HEB Card was inactive

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11764	ROBERT RODRIQUEZ	11.64	0.00	0.00	11.64

Vendor# S0900 — Vendor Name: SAMS CLUB DIRECT — Class: W — Pay Code

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

072025		07/31/202	07/20/202	07/20/202		357.63	0.00	0.00	357.63
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
	S0900	SAMS CLUB DIRECT				357.63	0.00	0.00	357.63
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
116758919		07/29/202	07/17/202	08/11/202			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				
C1010	SPARKLIGHT				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
080125		07/29/202	08/01/202	08/02/202			3,596.00	0.00	0.00	3,596.00
		8/1 - 8/31/25								
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	C1010	SPARKLIGHT					3,596.00	0.00	0.00	3,596.00
Vendor#	Vendor Name				Class	Pay Code				
S3960	STERICYCLE, INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8011461945		07/22/202	07/18/202	08/17/202			3,209.47	0.00	0.00	3,209.47
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	S3960	STERICYCLE, INC					3,209.47	0.00	0.00	3,209.47
Vendor#	Vendor Name				Class	Pay Code				
10735	STRYKER SALES, LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9209418935		07/01/202	06/02/202	07/02/202			358.69	0.00	0.00	358.69
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10735	STRYKER SALES, LLC					358.69	0.00	0.00	358.69
Vendor#	Vendor Name				Class	Pay Code				
14212	SURGICAL DIRECT SOUTH									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9361		07/23/202	07/22/202	08/21/202			4,200.00	0.00	0.00	4,200.00
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	14212	SURGICAL DIRECT SOUTH					4,200.00	0.00	0.00	4,200.00
Vendor#	Vendor Name				Class	Pay Code				
14524	SYSMEX AMERICA, INC.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
96023487		07/30/202	07/24/202	07/30/202			527.44	0.00	0.00	527.44
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	14524	SYSMEX AMERICA, INC.					527.44	0.00	0.00	527.44
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
0025663		07/30/202	07/17/202	07/18/202			3,675.00	0.00	0.00	3,675.00
0025688		07/30/202	07/17/202	07/18/202			3,600.00	0.00	0.00	3,600.00
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10758	TEXAS SELECT STAFFING, LLC					7,275.00	0.00	0.00	7,275.00
Vendor#	Vendor Name				Class	Pay Code				

10732 THERACOM, LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
226196105301		07/31/202	07/24/202	07/24/202			2,653.10	0.00	0.00	2,653.10

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10732	THERACOM, LLC	2,653.10	0.00	0.00	2,653.10

Vendor# 11067 Vendor Name: TRIZETTO PROVIDER SOLUTIONS — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
35FK072500		07/31/202	07/01/202	07/26/202			1,715.02	0.00	0.00	1,715.02

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11067	TRIZETTO PROVIDER SOLUTIONS	1,715.02	0.00	0.00	1,715.02

Vendor# U1064 Vendor Name: UNIFIRST HOLDINGS INC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2921065081		07/22/202	07/21/202	08/15/202			185.35	0.00	0.00	185.35
2921065074		07/22/202	07/21/202	08/15/202			3,462.64	0.00	0.00	3,462.64
2921065445		07/29/202	07/24/202	08/18/202			70.81	0.00	0.00	70.81
2921065460		07/29/202	07/24/202	08/18/202			182.11	0.00	0.00	182.11
2921065438		07/29/202	07/24/202	08/18/202			2,945.19	0.00	0.00	2,945.19

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	6,846.10	0.00	0.00	6,846.10

Vendor# 10968 Vendor Name: UNITED RENTALS (NORTH AMERICA) — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
250341146001		07/29/202	07/11/202	07/29/202			15.00	0.00	0.00	15.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10968	UNITED RENTALS (NORTH AMERICA)	15.00	0.00	0.00	15.00

Vendor# 17832 Vendor Name: VOCA LLC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
40205		07/22/202	07/18/202	08/17/202			3,230.00	0.00	0.00	3,230.00

Dave Barnes 7/5, 7/16, 7/10/25

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	17832	VOCA LLC	3,230.00	0.00	0.00	3,230.00

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
9111921009		07/30/202	07/24/202	08/18/202			1,537.15	0.00	0.00	1,537.15

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	1,537.15	0.00	0.00	1,537.15

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	222,653.52	0.00	0.00	222,653.52

APPROVED ON

JUL 31 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

222,653.52 +
712.73 - Pg 2. removed per mmc
221,940.79 =

CHK#210714-210877

BANK--CHECK-- CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	209764	08/06/25	4,415.40	AMAZON CAPITAL SERVICES
A/P	209765	08/06/25	750.00	AMERITEX ELEVATOR SERVICES INC
A/P	209766	08/06/25	627.95	ARTHREX, INC
A/P	209767	08/06/25	1,200.00	BANESTER SERVICES
A/P	209768	08/06/25	108.96	BAXTER HEALTHCARE
A/P	209769	08/06/25	9,809.12	BECKMAN COULTER INC
A/P	209770	08/06/25	1,030.39	BIO-RAD LABORATORIES, INC
A/P	209771	08/06/25	10,044.55	BIOMERIEUX, INC
A/P	209772	08/06/25	90.53	CALHOUN COUNTY
A/P	209773	08/06/25	377.25	CAPITAL ONE
A/P	209774	08/06/25	621.18	CARDINAL HEALTH 414, INC.
A/P	209775	08/06/25	1,487.20	COASTAL OFFICE SOLUTONS
A/P	209776	08/06/25	1,695.40	DEWITT POTH & SON
A/P	209777	08/06/25	1,115.00	DOWELL PEST CONTROL
A/P	209778	08/06/25	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	209779	08/06/25	929.91	FISHER HEALTHCARE
A/P	209780	08/06/25	26.03	FRONTIER
A/P	209781	08/06/25	7,908.33	FUJI FILM
A/P	209782	08/06/25	887.56	FUSION CONNECT
A/P	209783	08/06/25	4,394.90	GBS ADMINISTRATORS, INC
A/P	209784	08/06/25	3,179.05	GE PRECISION HEALTHCARE, LLC
A/P	209785	08/06/25	211.50	GETINGE USA
A/P	209786	08/06/25	676.76	GRAINGER
A/P	209787	08/06/25	159.06	GREAT AMERICA FINANCIAL SVCS
A/P	209788	08/06/25	483.50	GUERBET, LLC
A/P	209789	08/06/25	317.67	GULF COAST SCIENTIFIC
A/P	209790	08/06/25	500.00	HHSC
A/P	209791	08/06/25	23,663.00	HOSPITAL CARE CONSULTANTS INC.
A/P	209792	08/06/25	1,050.00	JAMES TELECO
A/P	209793	08/06/25	895.00	M G TRUST
A/P	209794	08/06/25	2,423.40	MCKESSON MEDICAL SURGICAL INC
A/P	209795	08/06/25	1,514.00	MEDICAL AIR SERVICES ASSOC.
A/P	209796	08/06/25	.00	VOIDED
A/P	209797	08/06/25	.00	VOIDED
A/P	209798	08/06/25	4,643.03	MEDLINE INDUSTRIES INC
A/P	209799	08/06/25	25.00	MEMORIAL MEDICAL CLINIC
A/P	209800	08/06/25	140.60	METTLER-TOLEDO RAININ, LLC
A/P	209801	08/06/25	329.49	MMC AUXILIARY GIFT SHOP
A/P	209802	08/06/25	.00	VOIDED
A/P	209803	08/06/25	29,492.19	MORRIS & DICKSON CO, LLC
A/P	209804	08/06/25	23,113.36	MUTUAL OF OMAHA
A/P	209805	08/06/25	29.00	NCS PEARSON, INC.
A/P	209806	08/06/25	822.57	OLYMPUS AMERICA INC
A/P	209807	08/06/25	2,540.80	REPUBLIC SERVICES #847
A/P	209808	08/06/25	11.64	ROBERT RODRIQUEZ
A/P	209809	08/06/25	357.63	SAMS CLUB DIRECT
A/P	209810	08/06/25	2,617.41	SIEMENS MEDICAL SOLUTIONS INC
A/P	209811	08/06/25	3,596.00	SPARKLIGHT
A/P	209812	08/06/25	3,209.47	STERICYCLE, INC
A/P	209813	08/06/25	358.69	STRYKER SALES, LLC

BANK--CHECK----------

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	209814	08/06/25	4,200.00	SURGICAL DIRECT SOUTH
A/P	209815	08/06/25	527.44	SYSMEX AMERICA, INC.
A/P	209816	08/06/25	7,275.00	TEXAS SELECT STAFFING, LLC
A/P	209817	08/06/25	2,653.10	THERACOM, LLC
A/P	209818	08/06/25	1,715.02	TRIZETTO PROVIDER SOLUTIONS
A/P	209819	08/06/25	6,846.10	UNIFIRST HOLDINGS INC
A/P	209820	08/06/25	15.00	UNITED RENTALS (NORTH AMERICA)
A/P	209821	08/06/25	3,230.00	VOCA LLC
A/P	209822	08/06/25	1,537.15	WERFEN USA LLC
A/P	209823	08/06/25	38,728.87	GOLDENCREEK HEALTHCARE
A/P	209824	08/06/25	10,124.50	LAVACA BAY NURSING AND REHAB
A/P	209825	08/06/25	110,093.07	TUSCANY VILLAGE
TOTALS:			380,887.23	

APPROVED ON

AUG 06 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Payables 221,940.79 +
NH 38,728.87 +
Xfers 110,093.07 +
10,124.50 +
380,887.23 ◇

McKESSON

Company: 8000

STATEMENT

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 08/01/2025 Page: 002

DC: 8115
Customer INV SuppID:
Territory:

Customer: 632536
Date: 08/02/2025

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

As of: 08/01/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 **PLEASE CHECK ANY**
Date: 08/02/2025 **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: 113.98 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 08/05/2025,
Pay This Amount: 111.70 USD

If Paid After 08/05/2025,
Pay this Amount: 113.98 USD

Due If Paid On Time:
USD 111.70

Disc lost if paid late: 2.28

Due If Paid Late:
USD 113.98

96.36 +
15.34 +
111.70 ◇

APPROVED ON
AUG 04 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

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

As of: 08/01/2025 Page: 001

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 820405
Date: 08/02/2025

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

As of: 08/01/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 **PLEASE CHECK ANY**
Date: 08/02/2025 **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											
07/28/2025	08/05/2025	7581499971	B2507-055-214691	115Invoice	1.97	98.33		96.36	✓	7581499971	

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: 98.33 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 122.03
07/21/2025

If Paid By 08/05/2025, Pay This Amount: 96.36 USD

If Paid After 08/05/2025, Pay this Amount: 98.33 USD

Due If Paid On Time: USD 96.36

Disc lost if paid late: 1.97

Due If Paid Late: USD 98.33

APPROVED ON

AUG 04 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

Company 8000

STATEMENT

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 08/01/2025 Page: 001

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 835434
Date: 08/02/2025

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

As of: 08/01/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835434 **PLEASE CHECK ANY**
Date: 08/02/2025 **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 835434 CVS PHCY 8923/MEM MC PHS											
07/30/2025	08/05/2025	7582152720	4286939	115Invoice	0.31	15.65		15.34	✓	7582152720	

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

TOTAL: Customer Number 835434 CVS PHCY 8923/MEM MC PHS

Subtotals: 15.65 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 88.94
06/09/2025

If Paid By 08/05/2025, Pay This Amount: 15.34 USD

If Paid After 08/05/2025, Pay this Amount: 15.65 USD

Due If Paid On Time: USD 15.34

Disc lost if paid late: 0.31

Due If Paid Late: USD 15.65

APPROVED ON

AUG 04 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

AmerisourceBergen

STATEMENT

Statement Number: 70266302
Date: 08-01-2025

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:	1,954.48
Past Due:	0.00
Total Due:	1,954.48
Account Balance:	1,954.48

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
07-28-2025	08-08-2025	3222032895	7010219260	Invoice	1,005.88		0.00	1,005.88
07-28-2025	08-08-2025	3222032896	7010219745	Invoice	195.99		0.00	195.99
07-28-2025	08-08-2025	3222032898	7010227629	Invoice	83.25		0.00	83.25
07-29-2025	08-08-2025	3222235507	7010239934	Invoice	2.58		0.00	2.58
07-30-2025	08-08-2025	3222367189	7010248718	Invoice	272.93		0.00	272.93
07-31-2025	08-08-2025	3222496534	7010256857	Invoice	385.39		0.00	385.39
08-01-2025	08-08-2025	3222626196	7010264245	Invoice	8.46		0.00	8.46

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,954.48	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON
AUG 04 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders

Due Date	Amount
08-08-2025	1,954.48
Total Due:	1,954.48

Processing Number: [illegible] Document Type: Customer Statement [illegible]

AmerisourceBergen

STATEMENT

Statement Number: 70249832
Date: 08-01-2025

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:	2,251.21
Past Due:	0.00
Total Due:	2,251.21
Account Balance:	2,251.21

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
07-28-2025	08-08-2025	3222048909	7010208822	Invoice	287.36		0.00	287.36
07-28-2025	08-08-2025	3222049440	7010218736	Invoice	9.32		0.00	9.32
07-28-2025	08-08-2025	3222049441	7010226772	Invoice	69.87		0.00	69.87
07-30-2025	08-08-2025	3222325172	7010241936	Invoice	17.13		0.00	17.13
07-31-2025	08-08-2025	3222454757	7010248190	Invoice	485.29		0.00	485.29
08-01-2025	08-08-2025	3222593087	7010256438	Invoice	1,382.24		0.00	1,382.24

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
2,251.21	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON
AUG 04 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders

Due Date	Amount
08-08-2025	2,251.21
Total Due:	2,251.21

Processing Number: 000000795862712 Document Type: Customer Statement 70256820051720

CHKNO	GRPNO	LOCNO	EMPNO	DEPNO	CLMPRE	CLMNO	CLMSUF	CHKDT	AMT	CLMTP	PAYEE	PAYTO	CVGCD	CVGTP	FIRSTNAME	LASTNAME	CODE	VOID	FROMDT	THRUDT	PRVNO
5628	76351	3	72	2	2025	177000043	0	7/28/2025	$1.90	1	SINGLETON ASSOCIATES PA	P	189	0	[redacted]		ERD	F	4/27/2025	4/27/2025	741680498
5629	76351	3	8	0	2025	171001679	0	7/28/2025	$10.75	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	5/23/2025	5/23/2025	741680498
5630	76351	3	74	0	2025	171001682	0	7/28/2025	$27.02	1	SINGLETON ASSOCIATES PA	P	189	0	[redacted]		ERD	F	5/15/2025	5/15/2025	741680498
5631	76351	3	25	0	2025	150000811	0	7/28/2025	$82.74	1	SINGLETON ASSOCIATES PA	P	321	0	[redacted]		MRIO	F	5/16/2025	5/16/2025	741680498
5632	76360	1	5	0	2025	150000814	0	7/28/2025	$139.20	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	5/16/2025	5/16/2025	741680498
5633	76360	2	35	0	2025	149000824	0	7/28/2025	$190.51	1	USAP-TEXAS	P	175	0	[redacted]		AI	F	5/6/2025	5/6/2025	760482007
5634	76360	3	82	0	2025	149000872	0	7/28/2025	$10.31	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	5/13/2025	5/13/2025	741680498
5635	76360	3	52	0	2025	171001680	0	7/28/2025	$14.21	1	SINGLETON ASSOCIATES PA	P	189	0	[redacted]		ERD	F	5/21/2025	5/21/2025	741680498
5636	76360	3	65	0	2025	150000867	0	7/28/2025	$34.80	1	SINGLETON ASSOCIATES PA	P	603	0	[redacted]		US	F	5/14/2025	5/14/2025	741680498
5637	76360	3	53	0	2025	154000195	0	7/28/2025	$46.10	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	5/19/2025	5/19/2025	741680498
5638	76360	3	66	0	2025	156000100	0	7/28/2025	$83.52	1	SINGLETON ASSOCIATES PA	P	172	0	[redacted]		AB	F	5/19/2025	5/19/2025	741680498
5639	76360	3	71	1	2025	155000198	0	7/28/2025	$146.23	1	US ANES PARTNERS OF TX PA	P	405	0	[redacted]		AOQ	F	2/21/2025	2/21/2025	760482007
5640	76360	3	41	1	2025	157000136	0	7/28/2025	$223.31	1	ESS OF PORT LAVACA LLC	P	189	0	[redacted]		ERD	F	4/27/2025	4/27/2025	815248556
5641	76360	3	52	0	2025	150001185	0	7/28/2025	$376.01	1	ASCENSION SETON MEDICAL CENTER AUSTIN	P	406	0	[redacted]		ER	F	5/21/2025	5/21/2025	741109643
5642	76360	3	49	0	2025	202001306	0	7/28/2025	$804.15	1	VICTORIA ED LLC	P	406	0	[redacted]		ER	F	1/20/2025	1/20/2025	473152225
5643	76360	3	49	0	2025	202001322	0	7/28/2025	$1,145.24	1	THE PHIA GROUP, LLC	P	503	0	[redacted]		AUDT	F	7/8/2025	7/8/2025	43504115
									$3,336.00												

Michelle Cudland 8/4/25

APPROVED ON

AUG 04 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- July 28, 2025 - Aug 3, 2025

Date	Bank Description	MMC Notes	Amount	CPSI "Handwritten Check" #
8/1/2025	PAY PLUS ACHTrans 80496387 101000694982971 P	- 3rd Party Payor Fee	483.43	901775
8/1/2025	HEALTHEQUITY INC HealthEqui 1356888 91000019	- EmpDeduct/Employer Contribut	987.00 *	901776
8/1/2025	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	1,523.55 *	901777
8/1/2025	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	384,402.07 *	
7/31/2025	STATE COMPTRLR TEXNET 08814279/50730 2100002	-QIPP IGT	1,266,053.00 *	901778
7/31/2025	PAY PLUS ACHTrans 80272190 101000693568200 P	- 3rd Party Payor Fee	43.03	901779
7/30/2025	PAY PLUS ACHTrans 80091297 101000691930746 P	- 3rd Party Payor Fee	157.05	901780
7/29/2025	PAY PLUS ACHTrans 79865497 101000690553249 P	- 3rd Party Payor Fee	273.21	901781
7/29/2025	MCKESSON DRUG AUTO ACH ACH06628035 910000152	- 340B Drug Program Expense	252.96 *	901782
7/28/2025	PAY PLUS ACHTrans 79600701 101000699008183 P	- 3rd Party Payor Fee	37.89	901783
			1,654,213.19	

Michelle Cumberland August 4, 2025 * Approved on 7.30.25cc
Michelle Cumberland, CFO
Memorial Medical Center

PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

Date	Description	MMC Notes	Amount
			-

August 4, 2025
Michelle Cumberland, CFO
Memorial Medical Center

APPROVED ON
AUG 04 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

1,654,213.19 +
987.00 -
1,523.55 -
384,402.07 -
1,266,053.00 -
252.96 -
994.61 ◊
994.61 -
0.00 ◊

pay pvs
483.43 +
43.03 +
157.05 +
273.21 +
37.89 +
994.61 ◊

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 31 [illegible]

07/30/2025
18:01

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/22/2025

0
ap_open_invoice.template

CALHOUN COUNTY, TEXAS

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
072425		07/30/202	07/24/202	08/22/202			38,728.87	0.00	0.00	38,728.87

ins. pmt. dep. into mmc opt in error

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	38,728.87	0.00	0.00	38,728.87

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	38,728.87	0.00	0.00	38,728.87

APPROVED ON

JUL 31 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 209823

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 31 2025

07/30/2025
18:01

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/22/2025

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
072325	Ins. pmt. dep. into mmc opt in error	07/30/202	07/23/202	08/22/202			32,489.93	0.00	0.00	32,489.93
072325A		07/30/202	07/23/202	08/22/202			18,328.41	0.00	0.00	18,328.41
072325B		07/30/202	07/23/202	08/22/202			4,497.99	0.00	0.00	4,497.99
072425		07/30/202	07/24/202	08/22/202			1,560.00	0.00	0.00	1,560.00
072525		07/30/202	07/25/202	08/22/202			9,342.46	0.00	0.00	9,342.46
072825		07/30/202	07/28/202	08/22/202			6,541.72	0.00	0.00	6,541.72
072825A		07/30/202	07/28/202	08/22/202			5,200.00	0.00	0.00	5,200.00
072825B		07/30/202	07/28/202	08/22/202			149.50	0.00	0.00	149.50
072925		07/30/202	07/29/202	08/22/202			5,796.43	0.00	0.00	5,796.43
072925A		07/30/202	07/29/202	08/22/202			21,840.00	0.00	0.00	21,840.00
072925B		07/30/202	07/29/202	08/22/202			4,346.63	0.00	0.00	4,346.63

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	13004	TUSCANY VILLAGE	110,093.07	0.00	0.00	110,093.07

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	110,093.07	0.00	0.00	110,093.07

APPROVED ON

JUL 31 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 209825

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 31 2025

CALHOUN COUNTY, TEXAS

07/30/2025
17:59

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/22/2025

0
ap_open_invoice.template

Vendor# Vendor Name Class Pay Code

12792 LAVACA BAY NURSING AND REHAB

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072425		07/30/202	07/24/202	08/22/202			1,744.50	0.00	0.00	1,744.50
072925	ins. pmt. dep. into mmc opt in error	07/30/202	07/29/202	08/22/202			8,380.00	0.00	0.00	8,380.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12792	LAVACA BAY NURSING AND REHAB	10,124.50	0.00	0.00	10,124.50

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	10,124.50	0.00	0.00	10,124.50

APPROVED ON

JUL 31 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 209824

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
8/4/2025

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		47.01	-	41.24			88.25	0
						Bank Balance	88.25	
						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	(11.75)	
Broadmoor		100.00	-	26.14		-	126.14	0
						Bank Balance	126.14	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	26.14	
Crescent		100.00	-	20.21			120.21	0
						Bank Balance	120.21	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	20.21	
Fort Bend		73,214.39	73,114.39	2,321.41			2,421.41	**2,321.41**
						Bank Balance	2,421.41	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	2,321.41	
Solera at W Houston		278,572.04	278,472.04	13,289.11			13,389.11	**13,289.11**
						Bank Balance	13,389.11	
						Variance	-	
						Leave in Balance	100.00	

2,321.41 +
13,289.11 +
15,610.52 ◇

West Houston / Fort Bend / Broadmoor:

	Adjust Balance/Transfer Amt	13,289.11
TOTAL TRANSFERS		**15,610.52**

Approved: MSC
Michelle Cumberland, CFO **8/4/2025**

APPROVED ON
AUG 04 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/31/2025 Added to Account	-	41.24					-	41.24
							-	-
							-	-
							-	-
							-	-
	-	41.24	-	-	-	-	-	41.24

Broadmoor	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/31/2025 Added to Account	-	26.14					-	26.14
							-	-
							-	-
							-	-
							-	-
	-	26.14	-	-	-	-	-	26.14

Crescent	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2, 3 4 & Lapse	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/31/2025 Added to Account	-	20.21					-	20.21
							-	-
							-	-
							-	-
							-	-
							-	-
	-	20.21	-	-	-	-	-	20.21

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
8/1/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000112	-	357.69					-	357.69
7/31/2025 Added to Account	-	26.13					-	26.13
7/31/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000187	-	1,354.03					-	1,354.03
7/30/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III	64,821.08	-					-	-
7/29/2025 275	6,271.65	-					-	-
7/28/2025 274	2,021.66	-					-	-
7/28/2025 NOVITAS SOLUTION HCCLAIMPMT 675663 420000126	-	583.56					-	583.56
							-	-
							-	-
	73,114.39	2,321.41	-	-	-	-	-	2,321.41

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
8/1/2025 NOVITAS SOLUTION HCCLAIMPMT 676310 420000112	-	8,807.24					-	8,807.24
7/31/2025 Added to Account	-	101.61					-	101.61
7/31/2025 Deposit	-	4,198.08					-	4,198.08
7/30/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III	275,434.32	-					-	-
7/29/2025 NOVITAS SOLUTION HCCLAIMPMT 676310 420000172	-	182.18					-	182.18
7/28/2025 1325	3,037.72	-					-	-
							-	-
	278,472.04	13,289.11	-	-	-	-	-	13,289.11

TOTALS								
		15,698.11	-	-	-	-	-	15,698.11

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$1,994,691.06	$1,928,410.01	$1,994,691.06	$2,297,826.96
*4381 MEMORIAL MEDICAL / NH ASHFORD	$88.25	$88.25	$88.25	$88.25
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$126.14	$126.14	$126.14	$126.14
*4411 MEMORIAL MEDICAL / NH CRESCENT	$120.21	$120.21	$120.21	$120.21
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$13,389.11	$14,855.61	$13,389.11	$4,581.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$2,421.41	$3,322.74	$2,421.41	$2,063.72
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$23,566.70	$32,236.26	$23,566.70	$23,408.70
*4551 CAL CO INDIGENT HEALTHCARE	$4,869.05	$4,869.05	$4,869.05	$4,869.05
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$1,655.79	$1,655.79	$1,655.79	$1,655.79
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$168.04	$168.04	$168.04	$168.04
*5506 MMC -NH LAVACA BAY NURSING & REHAB	$135,244.51	$137,550.95	$135,244.51	$129,659.00
*3407 MMC -NH TUSCANY VILLAGE	$180,970.83	$194,865.81	$180,970.83	$180,658.80
*2998 MMC -MONEY MARKET FUND	$68,623.91	$68,623.91	$68,623.91	$68,623.91
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	$6,913.98	$6,913.98	$6,913.98	$6,719.99
Total Balance	**$2,432,848.99**	**$2,393,806.75**	**$2,432,848.99**	**$2,720,570.43**

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
8/4/2025

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		178,040.32	177,902.10	23,428.48		-	23,566.70	23,198.69
						Bank Balance	23,566.70	
						Variance	-	
						Leave in Balance	100.00	
						Claim Owed to MMC	38.22	
						July Interest	229.79	
						Aug Interest		
						Sept Interest		
						Adjust Balance/Transfer Amt	23,198.69	

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: MSC
Michelle Cumberland, CFO 8/4/2025

APPROVED ON
AUG 04 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek		Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
8/1/2025	TSYS/TRANSFIRST CR CD DEP 543684555876917 43	-	158.00					-	158.00
7/31/2025	Added to Account	-	229.79					-	229.79
7/31/2025	TSYS/TRANSFIRST CR CD DEP 543684555876917 43	-	1,595.99					-	1,595.99
7/30/2025	WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC	177,902.10	-					-	-
7/30/2025	Deposit	-	16,594.20					-	16,594.20
7/30/2025	TSYS/TRANSFIRST CR CD DEP 543684555876917 43	-	600.00					-	600.00
7/30/2025	GOLDENCREEKHEALT MERC DEP 1220356 9100001152	-	4,250.50					-	4,250.50
								-	-
		177,902.10	23,428.48	-	-	-	-	-	23,428.48

Balances Overview

Account Name				
***4357 MEMORIAL MEDICAL - OPERATING**	$1,994,691.06	$1,928,410.01	$1,994,691.06	$2,297,826.96
***4381 MEMORIAL MEDICAL / NH ASHFORD**	$88.25	$88.25	$88.25	$88.25
***4403 MEMORIAL MEDICAL / NH BROADMOOR**	$126.14	$126.14	$126.14	$126.14
***4411 MEMORIAL MEDICAL / NH CRESCENT**	$120.21	$120.21	$120.21	$120.21
***4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON**	$13,389.11	$14.855.61	$13,389.11	$4,581.87
***4446 MEMORIAL MEDICAL / NH FORT BEND**	$2,421.41	$3,322.74	$2,421.41	$2,063.72
***4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE**	$23,566.70	$32,236.26	$23,566.70	$23,408.70
***4551 CAL CO INDIGENT HEALTHCARE**	$4,869.05	$4,869.05	$4,869.05	$4,869.05
***5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY**	$1,655.79	$1,655.79	$1,655.79	$1,655.79
***5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID**	$168.04	$168.04	$168.04	$168.04
***5506 MMC -NH LAVACA BAY NURSING & REHAB**	$135,244.51	$137,550.95	$135,244.51	$129,659.00
***3407 MMC -NH TUSCANY VILLAGE**	$180,970.83	$194,865.81	$180,970.83	$180,658.80
***2998 MMC -MONEY MARKET FUND**	$68,623.91	$68,623.91	$68,623.91	$68,623.91
***7168 MEMORIAL MEDICAL CENTER MONEY MKT 2**	$6,913.98	$6,913.98	$6,913.98	$6,719.99
Total Balance	**$2,432,848.99**	**$2,393,806.75**	**$2,432,848.99**	**$2,720,570.43**

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
8/4/2025

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		116.00	-	1,539.79			-	1,655.79	1,555.79
							Bank Balance	1,655.79	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	1,555.79	

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		100.00	-	68.04		-	-	168.04	68.04
							Bank Balance	168.04	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	68.04	

Routing Information for Gulf Pointe Plaza:

TOTAL TRANSFERS -

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: MCR
Michelle Cumberland, CFO 8/4/2025

APPROVED ON
AUG 04 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
7/31/2025 Added to Account	-	2.19					-	2.19
7/31/2025 HNB - ECHO HCCLAIMPMT 746003411 440000208314	-	288.77					-	288.77
7/31/2025 HNB - ECHO HCCLAIMPMT 746003411 440000208313	-	68.03					-	68.03
7/29/2025 HNB - ECHO HCCLAIMPMT 746003411 440000220420	-	1,180.80					-	1,180.80
							-	-
							-	-
							-	-
							-	-
	-	1,539.79	-	-	-	-	-	1,539.79

Gulf Pointe Plaza-Medicare/Medicaid	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
7/31/2025 Added to Account	-	0.13					-	0.13
7/30/2025 Deposit	-	67.91					-	67.91
	-	68.04	-	-	-	-	-	68.04
	-	1,607.83	-	-	-	-	-	1,607.83

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$1,994,691.06	$1,928,410.01	$1,994,691.06	$2,297,826.96
*4381 MEMORIAL MEDICAL / NH ASHFORD	$88.25	$88.25	$88.25	$88.25
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$126.14	$126.14	$126.14	$126.14
*4411 MEMORIAL MEDICAL / NH CRESCENT	$120.21	$120.21	$120.21	$120.21
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$13,389.11	$14,855.61	$13,389.11	$4,581.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$2,421.41	$3,322.74	$2,421.41	$2,063.72
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$23,566.70	$32,236.26	$23,566.70	$23,408.70
*4551 CAL CO INDIGENT HEALTHCARE	$4,869.05	$4,869.05	$4,869.05	$4,869.05
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$1,655.79	$1,655.79	$1,655.79	$1,655.79
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$168.04	$168.04	$168.04	$168.04
*5506 MMC -NH LAVACA BAY NURSING & REHAB	$135,244.51	$137,550.95	$135,244.51	$129,659.00
*3407 MMC -NH TUSCANY VILLAGE	$180,970.83	$194,865.81	$180,970.83	$180,658.80
*2998 MMC -MONEY MARKET FUND	$68,623.91	$68,623.91	$68,623.91	$68,623.91
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	$6,913.98	$6,913.98	$6,913.98	$6,719.99
Total Balance	**$2,432,848.99**	**$2,393,806.75**	**$2,432,848.99**	**$2,720,570.43**

Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
8/4/2025

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		266,006.97	265,906.97	180,870.83	-	-		-	180,970.83	180,870.83
							Bank Balance		180,970.83	
							Variance		-	
							Leave in Balance		100.00	

Adjust Balance/Transfer Amt	180,870.83

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, CFO 8/4/2025

APPROVED ON
AUG 04 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
8/1/2025	TUSCANY VILLAGE BILL_PAY TUSCANY VILLAGE 210	-	76.83					-	76.83
8/1/2025	TUSCANY VILLAGE BILL_PAY TUSCANY VILLAGE 210	-	235.20					-	235.20
7/31/2025	Added to Account	-	297.43					-	297.43
7/31/2025	HNB - ECHO HCCLAIMPMT 746003411 440000208314	-	12,234.70					-	12,234.70
7/30/2025	WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE	265,906.97	-					-	-
7/30/2025	Deposit	-	121,897.30					-	121,897.30
7/30/2025	HNB - ECHO HCCLAIMPMT 746003411 440000264991	-	5,264.06					-	5,264.06
7/29/2025	Merchant Capture Dep	-	1,047.50					-	1,047.50
7/29/2025	HNB - ECHO HCCLAIMPMT 746003411 440000220444	-	20,705.35					-	20,705.35
7/29/2025	NOVITAS SOLUTION HCCLAIMPMT 676201 420000172	-	5,886.74					-	5,886.74
7/28/2025	Merchant Capture Dep	-	10,188.00					-	10,188.00
7/28/2025	Deposit	-	3,037.72					-	3,037.72
								-	-
								-	-
		265,906.97	180,870.83	-	-	-	-	-	180,870.83

Balances Overview

Account Name				
***4357 MEMORIAL MEDICAL - OPERATING**	$1,994,691.06	$1,928,410.01	$1,994,691.06	$2,297,826.96
***4381 MEMORIAL MEDICAL / NH ASHFORD**	$88.25	$88.25	$88.25	$88.25
***4403 MEMORIAL MEDICAL / NH BROADMOOR**	$126.14	$126.14	$126.14	$126.14
***4411 MEMORIAL MEDICAL / NH CRESCENT**	$120.21	$120.21	$120.21	$120.21
***4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON**	$13,389.11	$14,855.61	$13,389.11	$4,581.87
***4446 MEMORIAL MEDICAL / NH FORT BEND**	$2,421.41	$3,322.74	$2,421.41	$2,063.72
***4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE**	$23,566.70	$32,236.26	$23,566.70	$23,408.70
***4551 CAL CO INDIGENT HEALTHCARE**	$4,869.05	$4,869.05	$4,869.05	$4,869.05
***5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY**	$1,655.79	$1,655.79	$1,655.79	$1,655.79
***5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID**	$168.04	$168.04	$168.04	$168.04
***5506 MMC -NH LAVACA BAY NURSING & REHAB**	$135,244.51	$137,550.95	$135,244.51	$129,659.00
***3407 MMC -NH TUSCANY VILLAGE**	$180,970.83	$194,865.81	$180,970.83	$180,658.80
***2998 MMC -MONEY MARKET FUND**	$68,623.91	$68,623.91	$68,623.91	$68,623.91
***7168 MEMORIAL MEDICAL CENTER MONEY MKT 2**	$6,913.98	$6,913.98	$6,913.98	$6,719.99
Total Balance	**$2,432,848.99**	**$2,393,806.75**	**$2,432,848.99**	**$2,720,570.43**

Memorial Medical Center
Nursing Home UPL
Weekly HSLTransfer
Prosperity Accounts
8/4/2025

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		235,606.33	235,506.33	135,144.51			-	135,244.51	134,894.53
							Bank Balance	135,244.51	
							Variance	-	
							Leave in Balance	100.00	
							July Interest	249.98	

Adjust Balance/Transfer Amt 134,894.53

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: MLS
Michelle Cumberland, CFO 8/4/2025

APPROVED ON
AUG 04 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	
8/1/2025	NOVITAS SOLUTION HCCLAIMPMT 676481 420000112	-	2,896.60					-	2,896.60
8/1/2025	HOSPICE OF SOUTH Payments NF 113122650028398	-	1,391.21					-	1,391.21
8/1/2025	CENTENE CORP HCCLAIMPMT 53101128307179	-	1,297.70					-	1,297.70
7/31/2025	Added to Account	-	249.98					-	249.98
7/30/2025	WIRE OUT REG Leased OpCo LLC	235,506.33	-					-	-
7/30/2025	Deposit	-	15,388.74					-	15,388.74
7/30/2025	NOVITAS SOLUTION HCCLAIMPMT 676481 420000122	-	39,632.46					-	39,632.46
7/29/2025	Deposit	-	6,949.60					-	6,949.60
7/29/2025	NOVITAS SOLUTION HCCLAIMPMT 676481 420000172	-	3,268.65					-	3,268.65
7/29/2025	HUMANA INS CO HCCLAIMPMT 80440874 8300005410	-	963.55					-	963.55
7/29/2025	CENTENE CORP HCCLAIMPMT 53101124463868	-	2,919.59					-	2,919.59
7/28/2025	Deposit	-	2,021.66					-	2,021.66
7/28/2025	NOVITAS SOLUTION HCCLAIMPMT 676481 420000126	-	58,164.77					-	58,164.77
								-	-
								-	-
								-	-
		235,506.33	135,144.51	-	-	-	-	-	135,144.51

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$1,994,691.06	$1,928,410.01	$1,994,691.06	$2,297,826.96
*4381 MEMORIAL MEDICAL / NH ASHFORD	$88.25	$88.25	$88.25	$88.25
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$126.14	$126.14	$126.14	$126.14
*4411 MEMORIAL MEDICAL / NH CRESCENT	$120.21	$120.21	$120.21	$120.21
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$13,389.11	$14,855.61	$13,389.11	$4,581.87
*4446 MEMORIAL MEDICAL / NH FORT BEND	$2,421.41	$3,322.74	$2,421.41	$2,063.72
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$23,566.70	$32,236.26	$23,566.70	$23,408.70
*4551 CAL CO INDIGENT HEALTHCARE	$4,869.05	$4,869.05	$4,869.05	$4,869.05
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$1,655.79	$1,655.79	$1,655.79	$1,655.79
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$168.04	$168.04	$168.04	$168.04
*5506 MMC -NH LAVACA BAY NURSING & REHAB	$135,244.51 √	$137,550.95	$135,244.51	$129,659.00
*3407 MMC -NH TUSCANY VILLAGE	$180,970.83	$194,865.81	$180,970.83	$180,658.80
*2998 MMC -MONEY MARKET FUND	$68,623.91	$68,623.91	$68,623.91	$68,623.91
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	$6,913.98	$6,913.98	$6,913.98	$6,719.99
Total Balance	**$2,432,848.99**	**$2,393,806.75**	**$2,432,848.99**	**$2,720,570.43**