

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---Febraury 11, 2026

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 1,000,312.16
TOTAL TRANSFERS BETWEEN FUNDS	\$ 84,276.02
TOTAL NURSING HOME UPL EXPENSES	\$ 2,033,090.01
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED February 11, 2026	\$ 3,117,678.19

APPROVED

FEB 11 2026

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---February 11, 2026

PAYABLES AND PAYROLL

2/6/2026 Weekly Payables	360,669.76
2/9/2026 McKesson-340B Prescription Expense	15,020.30
2/9/2026 Cencora-340B Prescription Expense	218.06
2/9/2026 Cencora-340B Prescription Expense	159.53
2/9/2026 Payroll Liabilities-Payroll Taxes	116,867.16
2/9/2026 Payroll	380,039.80

Prosperity Electronic Bank Payments

2/9/2026 90 Degree Benefits - employee insurance claims	39,969.42
2/9/2026 HPHG - February health insurance premium payment	81,757.64
2/9/2026 Sales Tax - January 2026	2,083.38
2/9/2026 Pay Plus-Patient Claims Processing Fee	779.67
2/9/2026 Credit Card Lease Fee	949.76
2/9/2026 Credit Card Processing Fee	695.46
2/9/2026 Authnet Gateway	26.40
1/26/2026 Health Equity -HSA Contributions	1,075.82

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **1,000,312.16**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

2/5/2026 MMC Operating to Bethany/Lavaca Bay-Correction of insurance payment deposited into MMC Operating in error	192.90
2/5/2026 MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	40,542.63
2/5/2026 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	43,540.49

TOTAL TRANSFERS BETWEEN FUNDS \$ **84,276.02**

NURSING HOME UPL EXPENSES

2/9/2026 Nursing Home UPL-Nexion Transfer	192,287.20
2/9/2026 Nursing Home UPL- Nexion Transfers Estimated Transfer for 2/18/2026	600,000.00
2/9/2026 Nursing Home UPL-Tuscany Transfer	260,367.96
2/9/2026 Nursing Home UPL- Tuscany Transfers Estimated Transfer for 2/18/2026	600,000.00
2/9/2026 Nursing Home UPL-HSL Transfer	54,071.46
2/9/2026 Nursing Home UPL- HSL Transfers Estimated Transfer for 2/18/2026	250,000.00
2/9/2026 Nursing Home UPL- Cantex Transfers Estimated Transfer for 2/18/2026	50,000.00
2/9/2026 Nursing Home UPL- HMG Transfers Estimated Transfer for 2/18/2026	15,000.00

TRANSFER BETWEEN FUNDS FROM NURSING HOMES TO MMC

2/9/2026 Gulf Pointe to MMC - Insurance payment deposited into Gulf Pointe in error	519.77
2/9/2026 Lavaca Bay to MMC - Humana Recoup on MMC for Lavaca Bay patients	10,843.62

TOTAL NURSING HOME UPL EXPENSES \$ **2,033,090.01**

INTER-GOVERNMENT TRANSFERS

TOTAL INTER-GOVERNMENT TRANSFERS \$ **-**

GRAND TOTAL DISBURSEMENTS APPROVED Febraury 11, 2026 \$ **3,117,678.19**

RECEIVED

FEB 05 2026

02/05/2026
12:07

California County Auditor

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 02/26/2026

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Vendor#	Vendor Name	Class	Pay Code								
11283	ACE HARDWARE 15521										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	013126		01/31/202	01/31/202	02/25/202			698.37	0.00	0.00	698.37
		SUPPLIES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11283	ACE HARDWARE 15521					698.37	0.00	0.00	698.37
10950	ACUTE CARE INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV2667		02/04/202	02/20/202	02/20/202			1,400.00	0.00	0.00	1,400.00
		RFID FEE									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10950	ACUTE CARE INC					1,400.00	0.00	0.00	1,400.00
A1680	AIRGAS USA, LLC - CENTRAL DIV										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	9168768062		01/31/202	01/29/202	02/23/202			3,883.54	0.00	0.00	3,883.54
		OXYGEN									
	9168862156		02/04/202	01/31/202	02/25/202			2,683.63	0.00	0.00	2,683.63
		OXYGEN									
	5522419819		02/04/202	01/31/202	02/25/202			227.19	0.00	0.00	227.19
		OXYGEN/ NITROUS OXYGEN									
	5522419656		02/04/202	01/31/202	02/25/202			1,147.75	0.00	0.00	1,147.75
		OXYGEN									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		A1680	AIRGAS USA, LLC - CENTRAL DIV					7,942.11	0.00	0.00	7,942.11
14028	AMAZON CAPITAL SERVICES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	1HVJ7J6VPWVM		01/27/202	01/14/202	02/13/202			69.28	0.00	0.00	69.28
		SUPPLIES									
	1R7LKNRNP4		01/27/202	01/15/202	02/14/202			11.39	0.00	0.00	11.39
		SUPPLIES									
	1MML7TYXH6		01/27/202	01/15/202	02/14/202			148.00	0.00	0.00	148.00
		SUPPLIES									
	1LFQP9PKFW14		01/27/202	01/16/202	02/15/202			261.34	0.00	0.00	261.34
		SUPPLIES									
	17JCT7NMNLWG		01/27/202	01/19/202	02/18/202			1,471.50	0.00	0.00	1,471.50
		SUPPLIES									
	1HNPRKDDTDMM		01/27/202	01/20/202	02/19/202			18.97	0.00	0.00	18.97
		SUPPLIES									
	1R7GNHT4PRH7		01/27/202	01/20/202	02/19/202			111.84	0.00	0.00	111.84
		SUPPLIES									
	1Q1114M7D6K4		01/27/202	01/20/202	02/19/202			10.99	0.00	0.00	10.99
		SUPPLIES									
	1XD6KX6LDMCY		01/27/202	01/20/202	02/19/202			86.16	0.00	0.00	86.16
		SUPPLIES									
	1J3L1QG66VJF		01/28/202	01/22/202	02/21/202			313.57	0.00	0.00	313.57
		SUPPLIES									
	1J6JXMR341MH		01/28/202	01/22/202	02/21/202			27.91	0.00	0.00	27.91
		SUPPLIES									

Office equipment

	14NWPNCNDTFM		01/28/202	01/25/202	02/24/202		63.94	0.00	0.00	63.94	
	SUPPLIES										
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net	
	14028	AMAZON CAPITAL SERVICES					2,594.89	0.00	0.00	2,594.89	
Vendor#	Vendor Name		Class	Pay Code							
15456	AMERITEX ELEVATOR TEXAS LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV21956S4D7		02/04/202	02/01/202	02/25/202			750.00	0.00	0.00	750.00
	ELEVATOR MAINTENANCE/ FEB I										
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net	
	15456	AMERITEX ELEVATOR TEXAS LLC					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
	926357668		02/03/202	01/22/202	02/03/202			1,995.00	0.00	0.00	1,995.00
	SUPPLIES										
	926387642		02/03/202	01/26/202	02/03/202			1,270.00	0.00	0.00	1,270.00
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net	
	A2271	ARTHREX, INC					3,265.00	0.00	0.00	3,265.00	
Vendor#	Vendor Name		Class	Pay Code							
11247	AVENO NETWORKS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	16523		02/03/202	02/01/202	02/11/202			850.00	0.00	0.00	850.00
	SERVER MAINT										
	16539		02/03/202	02/01/202	02/11/202			4,500.00	0.00	0.00	4,500.00
	SERVER MAINT										
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net	
	11247	AVENO NETWORKS					5,350.00	0.00	0.00	5,350.00	
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
	84954415		02/03/202	01/03/202	01/28/202			3,071.40	0.00	0.00	3,071.40
	LEASE										
	84954370		02/03/202	01/03/202	01/28/202			631.20	0.00	0.00	631.20
	SERVICE CONTRACT										
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net	
	B1150	BAXTER HEALTHCARE					3,702.60	0.00	0.00	3,702.60	
Vendor#	Vendor Name		Class	Pay Code							
M2485	BAYER HEALTHCARE		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	6012378635		01/21/202	01/07/202	01/07/202			585.16	0.00	0.00	585.16
	SUPPLIES										
	6012398252		02/02/202	01/22/202	02/02/202			877.74	0.00	0.00	877.74
	SUPPLIES										
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net	
	M2485	BAYER HEALTHCARE					1,462.90	0.00	0.00	1,462.90	
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
	112442536		01/20/202	01/08/202	02/02/202			709.20	0.00	0.00	709.20
	SUPPLIES										
	4605449		02/03/202	01/21/202	02/15/202			1,484.00	0.00	0.00	1,484.00
	SUPPLIES										
	5511400		02/03/202	01/21/202	02/15/202			1,935.15	0.00	0.00	1,935.15
	SUPPLIES										

Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		C1048	CALHOUN COUNTY				34,722.47	0.00	0.00	34,722.47
Vendor#	Vendor Name			Class	Pay Code					
10541	CARESFIELD									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 200032284		01/27/202	01/16/202	02/15/202			573.24	0.00	0.00	573.24 ✓
	SUPPLIES									
✓ 200032308		02/03/202	01/22/202	02/21/202			139.20	0.00	0.00	139.20 ✓
	SUPPLIES									
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		10541	CARESFIELD				712.44	0.00	0.00	712.44
Vendor#	Vendor Name			Class	Pay Code					
C1992	CDW GOVERNMENT, INC.			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ AH7E37D		02/02/202	01/21/202	02/20/202			573.37	0.00	0.00	573.37 ✓
	SUPPLIES									
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		C1992	CDW GOVERNMENT, INC.				573.37	0.00	0.00	573.37
Vendor#	Vendor Name			Class	Pay Code					
C1390	CENTRAL DRUG			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1227		02/03/202	01/23/202	02/22/202			24.25	0.00	0.00	24.25 ✓
	PREOP DIL									
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		C1390	CENTRAL DRUG				24.25	0.00	0.00	24.25
Vendor#	Vendor Name			Class	Pay Code					
13000	CLEARFLY									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ INV784753		02/03/202	02/01/202	02/01/202			1,238.13	0.00	0.00	1,238.13 ✓
	TELEPHONE									
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		13000	CLEARFLY				1,238.13	0.00	0.00	1,238.13
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
✓ OEQT350361		01/31/202	01/30/202	02/09/202			3,833.28	0.00	0.00	3,833.28 ✓
	SUPPLIES									
✓ OEQT332402		01/31/202	02/02/202	02/02/202			696.96	0.00	0.00	696.96 ✓
	SUPPLIES									
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		C1166	COASTAL OFFICE SOLUTONS				4,530.24	0.00	0.00	4,530.24
Vendor#	Vendor Name			Class	Pay Code					
15116	COMPUGROUP MEDICAL - EMDS INC.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9090153864		02/03/202	01/23/202	01/23/202			6,040.12	0.00	0.00	6,040.12 ✓
	EMD'S									
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		15116	COMPUGROUP MEDICAL - EMDS INC.				6,040.12	0.00	0.00	6,040.12
Vendor#	Vendor Name			Class	Pay Code					
C1970	CONMED LINVATEC			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 4902826		02/04/202	01/28/202	02/04/202			154.40	0.00	0.00	154.40 ✓
	SUPPLIES									
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		C1970	CONMED LINVATEC				154.40	0.00	0.00	154.40
Vendor#	Vendor Name			Class	Pay Code					

chairs
chairs

computer service

10368	DEWITT POTH & SON										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	8238191		02/02/202	01/28/202	02/22/202			2.82	0.00	0.00	2.82
		SUPPLIES									
	8238170		02/03/202	01/26/202	01/26/202			35.45	0.00	0.00	35.45
		SUPPLIES									
	8238190		02/03/202	01/26/202	02/20/202			59.24	0.00	0.00	59.24
		SUPPLIES									
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON						97.51	0.00	0.00	97.51
Vendor#	Vendor Name										
11011	DIAMOND HEALTHCARE CORP										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	IN20056832		01/01/202	02/01/202	02/26/202			31,512.58	0.00	0.00	31,512.58
		JANUARY BEV HEALTH INVOICE									
	IN20056833		01/01/202	02/01/202	02/26/202			19,166.67	0.00	0.00	19,166.67
		CPR JANUARY INVOICE									
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11011	DIAMOND HEALTHCARE CORP						50,679.25	0.00	0.00	50,679.25
Vendor#	Vendor Name										
11291	DOWELL PEST CONTROL										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	66773		01/31/202	01/26/202	02/20/202			505.00	0.00	0.00	505.00
		PEST CONTROL									
	66814		01/31/202	01/26/202	02/20/202			105.00	0.00	0.00	105.00
		PEST CONTROL/ MMC CLINIC									
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11291	DOWELL PEST CONTROL						610.00	0.00	0.00	610.00
Vendor#	Vendor Name										
15860	DSI										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	OP01535202		02/03/202	12/23/202	12/23/202			1,185.00	0.00	0.00	1,185.00
		EQUIPMENT/LABOR									
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	15860	DSI						1,185.00	0.00	0.00	1,185.00
Vendor#	Vendor Name										
12484	EL CAMPO REFRIGERATION										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	110356		01/31/202	02/01/202	02/01/202			825.00	0.00	0.00	825.00
		WATER DISPENSER LEASE INV									
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	12484	EL CAMPO REFRIGERATION						825.00	0.00	0.00	825.00
Vendor#	Vendor Name										
15832	EVERON										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	160289727		01/31/202	01/04/202	02/03/202			63.69	0.00	0.00	63.69
		FIRE MONITORING 010126-01312									
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	15832	EVERON						63.69	0.00	0.00	63.69
Vendor#	Vendor Name										
18292	EVOLOGICS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	EV72016		02/02/202	01/28/202	02/02/202			2,305.29	0.00	0.00	2,305.29
		SUPPLIES									
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	18292	EVOLOGICS						2,305.29	0.00	0.00	2,305.29

Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net
		11078	FUSION MEDICAL STAFFING, LLC				5,299.75	0.00	0.00	5,299.75
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
✓ 766964011843		01/01/202	11/20/202	11/20/202			5,357.70	0.00	0.00	5,357.70 ✓
Vendor Totals:		11149	GBS ADMINISTRATORS, INC				5,357.70	0.00	0.00	5,357.70
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
✓ 41151074		02/03/202	01/30/202	02/20/202			11,255.32	0.00	0.00	11,255.32 ✓
		<i>copy & printer charge</i>								
Vendor Totals:		12948	GREAT AMERICA FINANCIAL SVCS				11,255.32	0.00	0.00	11,255.32
Vendor#	Vendor Name			Class	Pay Code					
G1210	GULF COAST PAPER COMPANY			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2720418		01/27/202	01/20/202	02/19/202			268.48	0.00	0.00	268.48 ✓
✓ 2722188	SUPPLIES	02/02/202	01/27/202	02/26/202			71.60	0.00	0.00	71.60 ✓
✓ 2722223	SUPPLIES	02/02/202	01/27/202	02/26/202			264.08	0.00	0.00	264.08 ✓
		<i>map supplies</i>								
Vendor Totals:		G1210	GULF COAST PAPER COMPANY				604.16	0.00	0.00	604.16
Vendor#	Vendor Name			Class	Pay Code					
12380	HEALTH SOLUTIONS DIETETICS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 010126		01/01/202	01/01/202	01/01/202			4,250.00	0.00	0.00	4,250.00 ✓
		<i>JANUARY DIETICIAN BILL 1/2, 1/9, 1/10, 1/23, 1/30</i>								
Vendor Totals:		12380	HEALTH SOLUTIONS DIETETICS				4,250.00	0.00	0.00	4,250.00
Vendor#	Vendor Name			Class	Pay Code					
H1226	HEALTHMARK INDUSTRIES CO INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ INV2304170		01/27/202	01/26/202	01/27/202			487.10	0.00	0.00	487.10 ✓
		<i>SUPPLIES</i>								
Vendor Totals:		H1226	HEALTHMARK INDUSTRIES CO INC				487.10	0.00	0.00	487.10
Vendor#	Vendor Name			Class	Pay Code					
H1399	HILL-ROM COMPANY, INC			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 37665528		02/03/202	12/31/202	01/30/202			625.44	0.00	0.00	625.44 ✓
		<i>SUPPLIES</i>								
		<i>air rental</i>								
Vendor Totals:		H1399	HILL-ROM COMPANY, INC				625.44	0.00	0.00	625.44
Vendor#	Vendor Name			Class	Pay Code					
12148	HOBART SERVICES									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
35986868		05/15/202	04/08/202	05/15/202			729.05	0.00	0.00	729.05
		<i>WAREWASHER</i>								
Vendor Totals:		12148	HOBART SERVICES				729.05	0.00	0.00	729.05
		<i>Removed per mmc</i>								
Vendor#	Vendor Name			Class	Pay Code					

15208	HOSPITAL CARE CONSULTANTS INC.										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	7051		02/03/202	12/31/202	01/10/202			553.00	0.00	0.00	553.00 ✓
	QTRLY 2025										
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		15208	HOSPITAL CARE CONSULTANTS INC.					553.00	0.00	0.00	553.00
Vendor#	Vendor Name			Class	Pay Code						
17872	JAEGER MEDICAL AMERICA INC										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	92501371		02/03/202	12/19/202	01/18/202			171.37	0.00	0.00	171.37 ✓
	SUPPLIES										
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		17872	JAEGER MEDICAL AMERICA INC					171.37	0.00	0.00	171.37
Vendor#	Vendor Name			Class	Pay Code						
K0530	KCI USA										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	33880699		01/20/202	01/03/202	01/20/202			1,976.25	0.00	0.00	1,976.25 ✓
	SUPPLIES										
✓	33911118		02/02/202	01/18/202	02/01/202			395.25	0.00	0.00	395.25 ✓
	SUPPLIES										
✓	33944976		02/02/202	01/23/202	02/02/202			177.20	0.00	0.00	177.20 ✓
	SUPPLIES <i>restocking fee</i>										
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		K0530	KCI USA					2,548.70	0.00	0.00	2,548.70
Vendor#	Vendor Name			Class	Pay Code						
11600	LEGAL SHIELD										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	013126		01/01/202	01/31/202	01/31/202			352.00	0.00	0.00	352.00 ✓
	JAN BILL/ INSURANCE PREMIUM										
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11600	LEGAL SHIELD					352.00	0.00	0.00	352.00
Vendor#	Vendor Name			Class	Pay Code						
10371	LOFTIN EQUIPMENT COMPANY										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	00079030		02/02/202	01/29/202	02/02/202			2,685.00	0.00	0.00	2,685.00 ✓
	SUPPLIES										
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10371	LOFTIN EQUIPMENT COMPANY					2,685.00	0.00	0.00	2,685.00
Vendor#	Vendor Name			Class	Pay Code						
17968	MALONE SOLUTIONS										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2054455		02/04/202	08/27/202	10/26/202			7,093.14	0.00	0.00	7,093.14 ✓
	AGENCY STAFFING/ AUGUST BIL <i>Shereen Poxly corrected</i>										
✓	2055209		02/04/202	09/04/202	11/03/202			3,526.45	0.00	0.00	3,526.45
	AGENCY STAFFING/ AUGUST BIL <i>corrected</i>										
✓	2055890		02/04/202	09/12/202	11/11/202			3,460.67	0.00	0.00	3,460.67 ✓
	AGENCY STAFFING/ SEPT BILL <i>corrected</i>										
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		17968	MALONE SOLUTIONS					14,080.26	0.00	0.00	14,080.26
Vendor#	Vendor Name			Class	Pay Code						
M1511	MARKETLAB, INC										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV002662834		02/03/202	01/23/202	02/03/202			129.80	0.00	0.00	129.80 ✓
	SUPPLIES <i>glove box dispenser</i>										
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		M1511	MARKETLAB, INC					129.80	0.00	0.00	129.80

Vendor#	Vendor Name		Class	Pay Code							
M1950	MARTIN PRINTING CO			W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	80960		02/03/202	01/27/202	01/27/202			75.00	0.00	0.00	75.00
		PRESS PADS									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		M1950	MARTIN PRINTING CO					75.00	0.00	0.00	75.00
M2178	MCKESSON MEDICAL SURGICAL INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	24939441		01/28/202	01/22/202	02/06/202			59.24	0.00	0.00	59.24
		SUPPLIES									
	24933809		02/03/202	01/21/202	02/05/202			156.45	0.00	0.00	156.45
		SUPPLIES									
	24956634		02/03/202	01/26/202	02/10/202			46.25	0.00	0.00	46.25
		SUPPLIES									
	24961721		02/03/202	01/27/202	02/11/202			473.52	0.00	0.00	473.52
		SUPPLIES									
	24988336		02/04/202	02/02/202	02/17/202			34.41	0.00	0.00	34.41
		SUPPLIES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		M2178	MCKESSON MEDICAL SURGICAL INC					769.87	0.00	0.00	769.87
18092	MEDICAL SOLUTIONS LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	201199885		01/01/202	02/01/202	02/01/202			2,760.00	0.00	0.00	2,760.00
		AGENCY STAFFING									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		18092	MEDICAL SOLUTIONS LLC					2,760.00	0.00	0.00	2,760.00
12588	MEDICAL TECHNOLOGY ASSOCIATES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV287193		01/27/202	01/27/202	01/27/202			2,541.30	0.00	0.00	2,541.30
		SUPPLIES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12588	MEDICAL TECHNOLOGY ASSOCIATES					2,541.30	0.00	0.00	2,541.30
M2470	MEDLINE INDUSTRIES INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2405426678		01/20/202	01/02/202	01/27/202			1,170.48	0.00	0.00	1,170.48
		SUPPLIES									
	2406409404		01/21/202	01/08/202	02/02/202			224.11	0.00	0.00	224.11
		SUPPLIES									
	2408320378		01/27/202	01/20/202	02/14/202			38.54	0.00	0.00	38.54
		SUPPLIES									
	2408370514		01/27/202	01/21/202	02/15/202			48.45	0.00	0.00	48.45
		SUPPLIES									
	2408370515		01/27/202	01/21/202	02/15/202			125.82	0.00	0.00	125.82
		SUPPLIES									
	2408370517		01/27/202	01/21/202	02/15/202			668.11	0.00	0.00	668.11
		SUPPLIES									
	2408370530		01/27/202	01/21/202	02/15/202			611.19	0.00	0.00	611.19
		SUPPLIES									
	2408370519		01/27/202	01/21/202	02/15/202			165.75	0.00	0.00	165.75
		SUPPLIES									
	2408370512		01/27/202	01/21/202	02/15/202			61.77	0.00	0.00	61.77

✓ 2408370532	SUPPLIES	01/27/202	01/21/202	02/15/202			199.16	0.00	0.00	199.16	✓
✓ 2409215455	SUPPLIES	01/27/202	01/26/202	02/20/202			-114.15	0.00	0.00	-114.15	✓
✓ 2409663716	CREDIT	02/02/202	01/29/202	02/23/202			7.50	0.00	0.00	7.50	✓
✓ 2409663717	SUPPLIES	02/02/202	01/29/202	02/23/202			-707.79	0.00	0.00	-707.79	✓
✓ 2409817322	CREDIT	02/02/202	01/30/202	02/24/202			258.30	0.00	0.00	258.30	✓
✓ 2409817323	SUPPLIES	02/02/202	01/30/202	02/24/202			11.51	0.00	0.00	11.51	✓
✓ 2408580459	SUPPLIES	02/03/202	01/22/202	02/16/202			51.24	0.00	0.00	51.24	✓
✓ 2409358570	SUPPLIES	02/03/202	01/27/202	02/21/202			140.51	0.00	0.00	140.51	✓
✓ 2409470718	SUPPLIES	02/03/202	01/28/202	01/28/202			11.74	0.00	0.00	11.74	✓
✓ 2409470723	SUPPLIES	02/03/202	01/28/202	02/22/202			536.03	0.00	0.00	536.03	✓
✓ 2409470724	SUPPLIES	02/03/202	01/28/202	02/22/202			2,158.75	0.00	0.00	2,158.75	✓
✓ 2409470726	SUPPLIES	02/03/202	01/28/202	02/22/202			1,213.62	0.00	0.00	1,213.62	✓
✓ 2409470719	SUPPLIES	02/03/202	01/28/202	02/22/202			9.13	0.00	0.00	9.13	✓
✓ 2409470717	SUPPLIES	02/03/202	01/28/202	02/22/202			313.86	0.00	0.00	313.86	✓
✓ 2409470722	SUPPLIES	02/03/202	01/28/202	02/22/202			35.33	0.00	0.00	35.33	✓
✓ 2409470725	SUPPLIES	02/03/202	01/28/202	02/22/202			30.09	0.00	0.00	30.09	✓
✓ 2409470714	SUPPLIES	02/03/202	01/28/202	02/22/202			94.92	0.00	0.00	94.92	✓
✓ 1703624323	SUPPLIES	02/04/202	01/24/202	02/18/202			73.67	0.00	0.00	73.67	✓

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC	7,437.64	0.00	0.00	7,437.64

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
✓ 020326		02/03/202	02/03/202	02/03/202			425.41	0.00	0.00	425.41

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Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP	425.41	0.00	0.00	425.41

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
✓ 4361848		02/03/202	01/27/202	02/06/202			279.34	0.00	0.00	279.34
✓ 4364983	SUPPLIES	02/03/202	01/27/202	02/06/202			1,230.49	0.00	0.00	1,230.49
✓ 4366784	SUPPLIES	02/03/202	01/28/202	02/07/202			59.17	0.00	0.00	59.17
✓ 4361121	SUPPLIES	02/03/202	01/28/202	02/07/202			119.73	0.00	0.00	119.73

✓ 4369877		02/03/202 01/28/202 02/07/202	1,672.10	0.00	0.00	1,672.10 ✓
✓ 4369878	SUPPLIES	02/03/202 01/28/202 02/07/202	909.52	0.00	0.00	909.52 ✓
✓ 4368785	SUPPLIES	02/03/202 01/28/202 02/07/202	298.82	0.00	0.00	298.82 ✓
✓ 4369875	SUPPLIES	02/03/202 01/28/202 02/07/202	596.71	0.00	0.00	596.71 ✓
✓ 4357975	SUPPLIES	02/03/202 01/28/202 02/07/202	699.90	0.00	0.00	699.90 ✓
✓ 4369876	SUPPLIES	02/03/202 01/28/202 02/07/202	50.90	0.00	0.00	50.90 ✓
✓ 4361120	SUPPLIES	02/03/202 01/28/202 02/07/202	998.96	0.00	0.00	998.96 ✓
✓ 4364984	SUPPLIES	02/03/202 01/28/202 02/07/202	1,840.64	0.00	0.00	1,840.64 ✓
✓ 4311107A	SUPPLIES	02/04/202 01/13/202 01/23/202	7.43	0.00	0.00	7.43 ✓
✓ 4307867A	SUPPLIES	02/04/202 01/13/202 01/23/202	48.70	0.00	0.00	48.70 ✓
✓ 4311108A	SUPPLIES	02/04/202 01/13/202 01/23/202	117.96	0.00	0.00	117.96 ✓
✓ 413393A	SUPPLIES	02/04/202 01/14/202 01/24/202	56.11	0.00	0.00	56.11 ✓
✓ 4315184A	SUPPLIES	02/04/202 01/14/202 01/24/202	151.22	0.00	0.00	151.22 ✓
✓ 0186239A	SUPPLIES	02/04/202 01/14/202 01/24/202	2,230.64	0.00	0.00	2,230.64 ✓
✓ 4320253A	SUPPLIES	02/04/202 01/14/202 01/24/202	640.45	0.00	0.00	640.45 ✓
✓ 4316158A	SUPPLIES	02/04/202 01/14/202 01/24/202	132.05	0.00	0.00	132.05 ✓
✓ 4320252A	SUPPLIES	02/04/202 01/14/202 01/24/202	197.44	0.00	0.00	197.44 ✓
✓ 4314131A	SUPPLIES	02/04/202 01/14/202 01/24/202	72.52	0.00	0.00	✓ 72.52 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10536	MORRIS & DICKSON CO, LLC	12,410.80	0.00	0.00	12,410.80

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net			
15224	MUTUAL OF OMAHA									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 002026007759		01/01/202	01/15/202	02/01/202			24,505.03	0.00	0.00	24,505.03

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
15224	MUTUAL OF OMAHA	24,505.03	0.00	0.00	24,505.03

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net			
M2659	MXR IMAGING, INC	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 8801322361		02/02/202	01/21/202	02/20/202			58.31	0.00	0.00	58.31

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
M2659	MXR IMAGING, INC	58.31	0.00	0.00	58.31

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net			
10868	NOVA BIOMEDICAL									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

✓ 91615439		02/02/202	01/28/202	02/02/202			81.61	0.00	0.00	81.61	✓	
	SUPPLIES	<i>glu stat strip</i>										
✓ 91617983		02/04/202	02/02/202	02/02/202			1,974.38	0.00	0.00	1,974.38	✓	
	SUPPLIES	<i>test strips</i>										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net		
	10868	NOVA BIOMEDICAL					2,055.99	0.00	0.00	2,055.99		
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		
39285753		02/03/202	01/23/202	02/17/202			290.00	0.00	0.00	290.00	✓	
	SUPPLIES	<i>cleaning brush</i>										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net		
	O1500	OLYMPUS AMERICA INC					290.00	0.00	0.00	290.00		
Vendor#	Vendor Name	Class		Pay Code								
18112	OSTEOREMEDIES LLC											
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
10066341		02/04/202	02/04/202	02/04/202			1,000.00	0.00	0.00	1,000.00	✓	
	SUPPLIES											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net		
	18112	OSTEOREMEDIES LLC					1,000.00	0.00	0.00	1,000.00		
Vendor#	Vendor Name	Class		Pay Code								
10152	PARTSSOURCE, LLC											
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
06135689		01/27/202	01/15/202	02/14/202			270.29	0.00	0.00	270.29	✓	
	SUPPLIES											
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
06151174		02/02/202	01/26/202	02/25/202			211.39	0.00	0.00	211.39	✓	
	SUPPLIES	<i>echo pro</i>										
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
06148726		02/02/202	01/31/202	02/22/202			271.57	0.00	0.00	271.57	✓	
	SUPPLIES	<i>battery</i>										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net		
	10152	PARTSSOURCE, LLC					753.25	0.00	0.00	753.25		
Vendor#	Vendor Name	Class		Pay Code								
S0905	PERFORMANCE HEALTH SUPPLY LLC	M										
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
IN99604917		01/28/202	01/21/202	02/15/202			102.21	0.00	0.00	102.21	✓	
	SUPPLIES											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net		
	S0905	PERFORMANCE HEALTH SUPPLY LLC					102.21	0.00	0.00	102.21		
Vendor#	Vendor Name	Class		Pay Code								
10372	PRECISION DYNAMICS CORP (PDC)											
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
9360898921		01/27/202	01/19/202	02/18/202			33.30	0.00	0.00	33.30	✓	
	SUPPLIES											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net		
	10372	PRECISION DYNAMICS CORP (PDC)					33.30	0.00	0.00	33.30		
Vendor#	Vendor Name	Class		Pay Code								
15196	PROVATION											
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
INPVM69182		02/02/202	01/28/202	02/02/202			2,059.20	0.00	0.00	2,059.20	✓	
	SUPPLIES											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net		
	15196	PROVATION					2,059.20	0.00	0.00	2,059.20		
Vendor#	Vendor Name	Class		Pay Code								
10896	QIAGEN INC											
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net		
999951900		01/27/202	01/16/202	02/15/202			1,280.60	0.00	0.00	1,280.60	✓	

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10896	QIAGEN INC	1,280.60	0.00	0.00	1,280.60

Vendor#	Vendor Name	Class	Pay Code
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Q1416 QUIDELORTHO SALES COMPANY LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9100278728		02/02/202	02/01/202	02/01/202			831.48	0.00	0.00	831.48

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
Q1416	QUIDELORTHO SALES COMPANY LLC	831.48	0.00	0.00	831.48

Vendor#	Vendor Name	Class	Pay Code
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11251 RAPID PRINTING LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 8453763		02/04/202	02/03/202	02/18/202			8.42	0.00	0.00	8.42

PRINTING SERVICE

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11251	RAPID PRINTING LLC	8.42	0.00	0.00	8.42

Vendor#	Vendor Name	Class	Pay Code
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S1405 SERVICE SUPPLY OF VICTORIA INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 701291462		02/02/202	01/22/202	02/21/202			638.77	0.00	0.00	638.77

SUPPLIES

✓ 701292165		02/02/202	01/29/202	02/10/202			18.84	0.00	0.00	18.84
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SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
S1405	SERVICE SUPPLY OF VICTORIA INC	657.61	0.00	0.00	657.61

Vendor#	Vendor Name	Class	Pay Code
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S1850 SHIP SHUTTLE TAXI SERVICE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 5539		02/03/202	01/30/202	01/30/202			62.00	0.00	0.00	62.00

TAXI SERVICE

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
S1850	SHIP SHUTTLE TAXI SERVICE	62.00	0.00	0.00	62.00

Vendor#	Vendor Name	Class	Pay Code
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10936 SIEMENS FINANCIAL SERVICES

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 56382600025812		01/01/202	01/30/202	02/19/202			1,333.33	0.00	0.00	1,333.33

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10936	SIEMENS FINANCIAL SERVICES	1,333.33	0.00	0.00	1,333.33

Vendor#	Vendor Name	Class	Pay Code
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10699 SIGN AD, LTD.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 322557		02/04/202	02/01/202	02/11/202			950.00	0.00	0.00	950.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10699	SIGN AD, LTD.	950.00	0.00	0.00	950.00

Vendor#	Vendor Name	Class	Pay Code
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17852 SINGLETON ASSOCIATES PA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 5164		02/03/202	11/26/202	11/26/202			296.89	0.00	0.00	296.89

✓ 5166	OCT BILL	02/03/202	01/28/202	01/28/202			226.57	0.00	0.00	226.57
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
17852	SINGLETON ASSOCIATES PA	523.46	0.00	0.00	523.46

2/12/20, on 1/20/20

lease space advertising

contract billing

contract billing

Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net	
		10735	STRYKER SALES, LLC				249.19	0.00	0.00	249.19	
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
	9373		01/28/202	01/27/202	02/20/202			3,285.00	0.00	0.00	3,285.00
	SURGICAL SUPPLIES										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net	
		14212	SURGICAL DIRECT SOUTH				3,285.00	0.00	0.00	3,285.00	
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
	96308627		02/02/202	01/24/202	02/02/202			527.44	0.00	0.00	527.44
	SUPPLIES										
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						
T2204	TEXAS MUTUAL INSURANCE CO			W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	1007784945		01/01/202	01/24/202	02/13/202			7,580.00	0.00	0.00	7,580.00
	PAYROLL REPORT										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net	
		T2204	TEXAS MUTUAL INSURANCE CO				7,580.00	0.00	0.00	7,580.00	
Vendor#	Vendor Name			Class	Pay Code						
10758	TEXAS SELECT STAFFING, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	0026401		01/01/202	01/29/202	01/30/202			3,675.00	0.00	0.00	3,675.00
	AGENCY STAFFING										
	0026285A		02/05/202	12/25/202	12/25/202			2,738.75	0.00	0.00	2,738.75
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net	
		10758	TEXAS SELECT STAFFING, LLC				6,413.75	0.00	0.00	6,413.75	
Vendor#	Vendor Name			Class	Pay Code						
B1941	THE BACK OFFICE			W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	020126		01/31/202	02/01/202	02/01/202			1,673.75	0.00	0.00	1,673.75
	PAPER SHREDDING										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net	
		B1941	THE BACK OFFICE				1,673.75	0.00	0.00	1,673.75	
Vendor#	Vendor Name			Class	Pay Code						
10985	THE COMPLIANCE TEAM, INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	00052963		02/03/202	01/30/202	01/30/202			607.33	0.00	0.00	607.33
	TRAVEL EXP FOR SIGHT ADVISO										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net	
		10985	THE COMPLIANCE TEAM, INC				607.33	0.00	0.00	607.33	
Vendor#	Vendor Name			Class	Pay Code						
15396	THIRD COAST DISTRIBUTING LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	013126		01/31/202	01/31/202	01/31/202			83.28	0.00	0.00	83.28
	SUPPLIES										
Vendor Totals:		Number	Name				Gross	Discount	No-Pay	Net	
		15396	THIRD COAST DISTRIBUTING LLC				83.28	0.00	0.00	83.28	
Vendor#	Vendor Name			Class	Pay Code						
U0080	UAL										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

✓ 434636116A 01/31/202 01/24/202 01/27/202 49.58 0.00 0.00 49.58 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 U0080 UAL 49.58 0.00 0.00 49.58

Vendor# Vendor Name Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2921079121	LINENS	01/28/202	01/22/202	02/16/202			301.55	0.00	0.00	301.55 ✓
✓ 2921079089	LINENS	01/28/202	01/22/202	02/16/202			3,386.21	0.00	0.00	3,386.21 ✓
✓ 2921079102	LAUNDRY	01/28/202	01/22/202	02/16/202			54.89	0.00	0.00	54.89 ✓
✓ 2921079145	LINENS	01/28/202	01/22/202	02/16/202			4,193.96	0.00	0.00	4,193.96 ✓
✓ 2921079139	LINENS	01/28/202	01/22/202	02/16/202			395.06	0.00	0.00	395.06 ✓
✓ 2921079114	LINENS	01/28/202	01/22/202	02/16/202			290.05	0.00	0.00	290.05 ✓
✓ 2921079127	LINENS	01/28/202	01/22/202	02/16/202			146.68	0.00	0.00	146.68 ✓
✓ 2921079131	LAUNDRY	01/28/202	01/22/202	02/21/202			619.27	0.00	0.00	619.27 ✓
✓ 2921078745	LAUNDRY	01/31/202	01/19/202	02/13/202			183.20	0.00	0.00	183.20 ✓
✓ 2921079295	LAUNDRY	01/31/202	01/26/202	02/20/202			191.84	0.00	0.00	191.84 ✓
✓ 2921079615	LAUNDRY	01/31/202	01/29/202	02/23/202			301.55	0.00	0.00	301.55 ✓
✓ 2921079601	LAUNDRY	01/31/202	01/29/202	02/23/202			54.89	0.00	0.00	54.89 ✓
✓ 2921078728	LINENS	02/04/202	01/19/202	02/13/202			5,318.67	0.00	0.00	5,318.67 ✓
✓ 2921079283	SUPPLIES	02/04/202	01/26/202	02/20/202			3,816.04	0.00	0.00	3,816.04 ✓
✓ 2921079629	SUPPLIES	02/04/202	01/29/202	02/23/202			178.54	0.00	0.00	178.54 ✓
✓ 2921079596	LINENS	02/04/202	01/29/202	02/23/202			3,233.42	0.00	0.00	3,233.42 ✓
✓ 2921079609	LAUNDRY	02/04/202	01/29/202	02/23/202			290.05	0.00	0.00	290.05 ✓
✓ 2921079626	LAUNDRY	02/04/202	01/29/202	02/23/202			417.21	0.00	0.00	417.21 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 U1064 UNIFIRST HOLDINGS INC 23,373.08 0.00 0.00 23,373.08

Vendor# Vendor Name Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2025189	2025 PRO RATED MEMBERSHIP I	02/03/202	01/05/202	01/05/202			258.32	0.00	0.00	258.32 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 10768 VICTORIA MEDICAL FOUNDATION 258.32 0.00 0.00 258.32

Vendor# Vendor Name Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9112094671		01/27/202	01/19/202	02/13/202			1,393.13	0.00	0.00	1,393.13 ✓

✓ 9112096150 SUPPLIES 01/27/202 01/20/202 02/14/202 1,797.22 0.00 0.00 1,797.22 ✓

SUPPLIES
 Vendor Totals: Number Name Gross Discount No-Pay Net
 1110 WERFEN USA LLC 3,190.35 0.00 0.00 3,190.35

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
 ✓ INV138660 02/03/202 01/23/202 02/03/202 138.83 0.00 0.00 138.83 ✓

✓ INV138709 SUPPLIES 02/03/202 01/26/202 02/03/202 100.00 0.00 0.00 100.00 ✓

SUPPLIES
 Vendor Totals: Number Name Gross Discount No-Pay Net
 11400 WEST COAST MEDICAL RESOURCES 238.83 0.00 0.00 238.83

Report Summary

Grand Totals: Gross Discount No-Pay Net
 361,390.41 0.00 0.00 ~~361,390.41~~
 \$ 360,669.76

361,390.41
 729.05 - removed invoice
 14,080.28 - wrong invoice amount
 14,088.66 - correct invoice amount
 360,669.76 - new total

CHK# 211932-212028

02/06/2026

11:45

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 02/26/2026

0

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

17968 MALONE SOLUTIONS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2054455		02/04/202	08/27/202	10/26/202			7,093.14	0.00	0.00	7,093.14 ✓
	AGENCY STAFFING/ AUGUST BIL									
✓ 2055890		02/04/202	09/12/202	11/11/202			3,460.67	0.00	0.00	3,460.67 ✓
	AGENCY STAFFING/ SEPT BILL									
✓ 2055209A		02/06/202	09/04/202	11/03/202			3,534.85	0.00	0.00	3,534.85 ✓
	OB NURSE STAFFING									

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
17968	MALONE SOLUTIONS	14,088.66	0.00	0.00	14,088.66

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	14,088.66	0.00	0.00	14,088.66

* corrected invoice list

RUN DATE:02/10/26
TIME:12:40

MEMORIAL MEDICAL CENTER
CHECK REGISTER
02/11/26 THRU 02/11/26

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	211932	02/11/26	698.37	ACE HARDWARE 15521
A/P	211933	02/11/26	1,400.00	ACUTE CARE INC
A/P	211934	02/11/26	7,942.11	AIRGAS USA, LLC - CENTRAL DIV
A/P	211935	02/11/26	.00	VOIDED
A/P	211936	02/11/26	2,594.89	AMAZON CAPITAL SERVICES
A/P	211937	02/11/26	750.00	AMERITEX ELEVATOR TEXAS LLC
A/P	211938	02/11/26	3,265.00	ARTHREX, INC
A/P	211939	02/11/26	5,350.00	AVENO NETWORKS
A/P	211940	02/11/26	3,702.60	BAXTER HEALTHCARE
A/P	211941	02/11/26	1,462.90	BAYER HEALTHCARE
A/P	211942	02/11/26	4,128.35	BECKMAN COULTER INC
A/P	211943	02/11/26	497.50	BEEKLEY CORPORATION
A/P	211944	02/11/26	425.00	BILL HAMLYN
A/P	211945	02/11/26	1,842.31	BIO-RAD LABORATORIES, INC
A/P	211946	02/11/26	9,250.00	BONESUPPORT INC
A/P	211947	02/11/26	233.97	BOSTON SCIENTIFIC CORPORATION
A/P	211948	02/11/26	34,722.47	CALHOUN COUNTY
A/P	211949	02/11/26	712.44	CARESFIELD
A/P	211950	02/11/26	573.37	CDW GOVERNMENT, INC.
A/P	211951	02/11/26	24.25	CENTRAL DRUG
A/P	211952	02/11/26	1,238.13	CLEARFLY
A/P	211953	02/11/26	4,530.24	COASTAL OFFICE SOLUTONS
A/P	211954	02/11/26	6,040.12	COMPUGROUP MEDICAL - EMDS INC.
A/P	211955	02/11/26	154.40	CONMED LINVATEC
A/P	211956	02/11/26	97.51	DEWITT POTH & SON
A/P	211957	02/11/26	50,679.25	DIAMOND HEALTHCARE CORP
A/P	211958	02/11/26	610.00	DOWELL PEST CONTROL
A/P	211959	02/11/26	1,185.00	DSI
A/P	211960	02/11/26	825.00	EL CAMPO REFRIGERATION
A/P	211961	02/11/26	63.69	EVERON
A/P	211962	02/11/26	2,305.29	EVOLOGICS
A/P	211963	02/11/26	1,691.25	FEDLOGIC LLC
A/P	211964	02/11/26	7,804.20	FISHER HEALTHCARE
A/P	211965	02/11/26	15,750.00	FORVIS
A/P	211966	02/11/26	12.54	FRONTIER
A/P	211967	02/11/26	1,018.17	FUSION CONNECT
A/P	211968	02/11/26	5,299.75	FUSION MEDICAL STAFFING, LLC
A/P	211969	02/11/26	5,357.70	GBS ADMINISTRATORS, INC
A/P	211970	02/11/26	11,255.32	GREAT AMERICA FINANCIAL SVCS
A/P	211971	02/11/26	604.16	GULF COAST PAPER COMPANY
A/P	211972	02/11/26	4,250.00	HEALTH SOLUTIONS DIETETICS
A/P	211973	02/11/26	487.10	HEALTHMARK INDUSTRIES CO INC
A/P	211974	02/11/26	625.44	HILL-ROM COMPANY, INC
A/P	211975	02/11/26	553.00	HOSPITAL CARE CONSULTANTS INC.
A/P	211976	02/11/26	171.37	JAEGER MEDICAL AMERICA INC
A/P	211977	02/11/26	2,548.70	KCI USA
A/P	211978	02/11/26	352.00	LEGAL SHIELD
A/P	211979	02/11/26	2,685.00	LOFTIN EQUIPMENT COMPANY
A/P	211980	02/11/26	14,088.66	MALONE SOLUTIONS
A/P	211981	02/11/26	129.80	MARKETLAB, INC

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	211982	02/11/26	75.00	MARTIN PRINTING CO
A/P	211983	02/11/26	769.87	MCKESSON MEDICAL SURGICAL INC
A/P	211984	02/11/26	2,760.00	MEDICAL SOLUTIONS LLC
A/P	211985	02/11/26	2,541.30	MEDICAL TECHNOLOGY ASSOCIATES
A/P	211986	02/11/26	.00	VOIDED
A/P	211987	02/11/26	.00	VOIDED
A/P	211988	02/11/26	.00	VOIDED
A/P	211989	02/11/26	7,437.64	MEDLINE INDUSTRIES INC
A/P	211990	02/11/26	425.41	MMC AUXILIARY GIFT SHOP
A/P	211991	02/11/26	.00	VOIDED
A/P	211992	02/11/26	12,410.80	MORRIS & DICKSON CO, LLC
A/P	211993	02/11/26	24,505.03	MUTUAL OF OMAHA
A/P	211994	02/11/26	58.31	MXR IMAGING, INC
A/P	211995	02/11/26	2,055.99	NOVA BIOMEDICAL
A/P	211996	02/11/26	290.00	OLYMPUS AMERICA INC
A/P	211997	02/11/26	1,000.00	OSTEOREMEDIES LLC
A/P	211998	02/11/26	753.25	PARTSSOURCE, LLC
A/P	211999	02/11/26	102.21	PERFORMANCE HEALTH SUPPLY LLC
A/P	212000	02/11/26	33.30	PRECISION DYNAMICS CORP (PDC)
A/P	212001	02/11/26	2,059.20	PROVATION
A/P	212002	02/11/26	1,280.60	QIAGEN INC
A/P	212003	02/11/26	831.48	QUIDELORTHO SALES COMPANY LLC
A/P	212004	02/11/26	8.42	RAPID PRINTING LLC
A/P	212005	02/11/26	657.61	SERVICE SUPPLY OF VICTORIA INC
A/P	212006	02/11/26	62.00	SHIP SHUTTLE TAXI SERVICE
A/P	212007	02/11/26	1,333.33	SIEMENS FINANCIAL SERVICES
A/P	212008	02/11/26	950.00	SIGN AD, LTD.
A/P	212009	02/11/26	523.46	SINGLETON ASSOCIATES PA
A/P	212010	02/11/26	13,691.45	SMITH & NEPHEW, INC.
A/P	212011	02/11/26	10,230.40	SPBS CLINICAL EQUIPMENT SRVC
A/P	212012	02/11/26	662.81	STAPLES
A/P	212013	02/11/26	3,210.57	STERICYCLE, INC
A/P	212014	02/11/26	432.10	STERIS CORPORATION
A/P	212015	02/11/26	249.19	STRYKER SALES, LLC
A/P	212016	02/11/26	3,285.00	SURGICAL DIRECT SOUTH
A/P	212017	02/11/26	527.44	SYSMEX AMERICA, INC.
A/P	212018	02/11/26	7,580.00	TEXAS MUTUAL INSURANCE CO
A/P	212019	02/11/26	6,413.75	TEXAS SELECT STAFFING, LLC
A/P	212020	02/11/26	1,673.75	THE BACK OFFICE
A/P	212021	02/11/26	607.33	THE COMPLIANCE TEAM, INC
A/P	212022	02/11/26	83.28	THIRD COAST DISTRIBUTING LLC
A/P	212023	02/11/26	49.58	UAL
A/P	212024	02/11/26	.00	VOIDED
A/P	212025	02/11/26	23,373.08	UNIFIRST HOLDINGS INC
A/P	212026	02/11/26	258.32	VICTORIA MEDICAL FOUNDATION
A/P	212027	02/11/26	3,190.35	WERPEN USA LLC
A/P	212028	02/11/26	238.83	WEST COAST MEDICAL RESOURCES
A/P	212029	02/11/26	40,542.63	GOLDENCREEK HEALTHCARE
A/P	212030	02/11/26	192.90	LAVACA BAY NURSING AND REHAB
A/P	212031	02/11/26	43,540.49	TUSCANY VILLAGE
TOTALS:			444,945.78	

APPROVED ON

FEB 11 2026

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Payables

*NH
 Xfers*

360,669.76 ×
 192,900 ×
 40,542.63 ×
 43,540.49 ×
 444,945.78 ×

MCKESSON

STATEMENT

As of: 02/06/2026

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 SupplID:
Territory:

As of: 02/06/2026 Page: 002
Mail to: Comp: 8000

Customer: 632536
Date: 02/06/2026

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 02/06/2026 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: 15,326.84 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/07/2017 2,451.97

If Paid By 02/10/2026,
Pay This Amount: 15,020.30 USD

If Paid After 02/10/2026,
Pay this Amount: 15,326.84 USD

Due If Paid On Time:
USD 15,020.30
Disc lost if paid late: 306.54
Due If Paid Late:
USD 15,326.84

Handwritten signature and date: 2/9/26

5.49 +
15,011.87 +
2.94 +
15,020.30 -

APPROVED ON

FEB 09 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 02/06/2026

Page: 001

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

Company: 8000

HEB PHCY 0434/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

As of: 02/06/2026 Page: 001
Mail to: Comp: 8000

Customer: 190813
Date: 02/06/2026

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 02/06/2026 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 190813	HEB PHCY 0434/MEM MED PHS										
02/04/2026	02/10/2026	7616421039 ✓	4890896	115Invoice	0.11	5.60		5.49 ✓		7616421039	

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

TOTAL: Customer Number 190813 HEB PHCY 0434/MEM MED PHS

Subtotals: 5.60 USD

Future Due: 0.00

If Paid By 02/10/2026,

Due If Paid On Time:

USD 5.49

Past Due: 0.00

Pay This Amount:

5.49 USD

Disc lost if paid late:

0.11

Last Payment 2,631.77
02/02/2026

If Paid After 02/10/2026,

Pay this Amount:

5.60 USD

Due If Paid Late:

USD 5.60

APPROVED ON

FEB 09 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 02/06/2026

Page: 001

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

Company: 8000

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 256342
Date: 02/06/2026

As of: 02/06/2026 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 02/06/2026 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 256342 WALMART 1098/MEM MED PHS											
02/03/2026	02/10/2026	7616217201 ✓	268336936	115Invoice	28.53	1,426.58		1,398.05 ✓		7616217201	
02/05/2026	02/10/2026	7616740801 ✓	267781358	115Invoice	172.02	8,600.92		8,428.90 ✓		7616740801	
02/05/2026	02/10/2026	7616740802 ✓	265848570	115Invoice	86.01	4,300.41		4,214.40 ✓		7616740802	
02/05/2026	02/10/2026	7616744786 ✓	257190386	115Invoice	17.73	886.56		868.83 ✓		7616744786	
02/06/2026	02/10/2026	7616958921 ✓	268808089	115Invoice	2.08	103.77		101.69 ✓		7616958921	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 15,318.24 USD

Future Due: 0.00

If Paid By 02/10/2026,

Pay This Amount: 15,011.87 USD

Due If Paid On Time:

USD 15,011.87

Past Due: 0.00

Disc lost if paid late: 306.37

Last Payment 2,631.77
02/02/2026

If Paid After 02/10/2026,

Pay this Amount: 15,318.24 USD

Due If Paid Late:

USD 15,318.24

APPROVED ON

FEB 09 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

MCKESSON

STATEMENT

As of: 02/06/2026

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: 02/06/2026

As of: 02/06/2026 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 PLEASE CHECK ANY
Date: 02/06/2026 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										
02/06/2026	02/10/2026	7616766815	B2602-055-282788	115Invoice	0.06	3.00		2.94		7616766815	

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: 3.00 USD

Future Due: 0.00

If Paid By 02/10/2026,

Pay This Amount: 2.94 USD

Due If Paid On Time:

USD 2.94

Past Due: 0.00

Disc lost if paid late: 0.06

Last Payment 2,631.77
02/02/2026

If Paid After 02/10/2026,

Pay this Amount: 3.00 USD

Due If Paid Late:

USD 3.00

APPROVED ON
FEB 09 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Served By:	AMERISOURCEBERGEN DRUG CORP 12727 W. AIRPORT BLVD. SUGAR LAND TX 77478-6101	Customer:	WALGREENS #12494 340B MEMORIAL MEDICAL CENTER 1302 N VIRGINIA ST PORT LAVACA TX 77979-2509 ✓	Customer Number	100135284 / 037028186
	DEA: RA0289276 866-451-9655			Terms	Sat - Fri Due in 7 days
		Remit To:	AMERISOURCEBERGEN PO Box 905223 CHARLOTTE NC 28290-5223	Summary	
				Not Yet Due:	0.00
				Current:	218.06
				Past Due:	0.00
				Total Due:	218.06
				Account Balance:	218.06

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-02-2026	02-13-2026	3240844284 ✓	7011416660	Invoice	23.84		0.00	23.84 ✓
02-02-2026	02-13-2026	3240844285 ✓	7011421542	Invoice	115.56		0.00	115.56 ✓
02-03-2026	02-13-2026	3240998589 ✓	7011426351	Invoice	62.30		0.00	62.30 ✓
02-05-2026	02-13-2026	3241310353 ✓	7011436995	Invoice	16.36		0.00	16.36 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
218.06	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
02-06-2026	(2,524.96)

Reminders	
Due Date	Amount
02-13-2026	218.06
Total Due:	218.06

APPROVED ON
FEB 09 2026
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS


 2/9/26

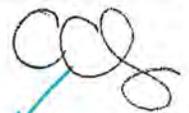
Serviced By: AMERISOURCEBERGEN DRUG CORP 501 PATRIOT PARKWAY ROANOKE TX 76262-6336 DEA: RA0316958 866-451-9655	Customer: WALGREENS CENTRAL FILL #21373 340B ✓ MEMORIAL MEDICAL CENTER 4100 DALE EARNHARDT WAY 200 NORTHLAKE TX 76262-2389	Customer Number 100566356 / 100566356 Terms Sat - Fri Due in 7 days Summary Not Yet Due: 0.00 Current: 159.53 Past Due: 0.00 Total Due: 159.53 Account Balance: 159.53
Remit To: AMERISOURCEBERGEN PO Box 978740 DALLAS TX 75397-8740		

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-02-2026	02-13-2026	3240830869 ✓	7011422399	Invoice	147.18		0.00	✓ 147.18
02-02-2026	02-13-2026	3240911838 ✓	7011426308	Invoice	2.70		0.00	✓ 2.70
02-04-2026	02-13-2026	3241210618 ✓	7011435977	Invoice	2.78		0.00	✓ 2.78
02-06-2026	02-13-2026	3241482474 ✓	7011446217	Invoice	6.87		0.00	✓ 6.87

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
159.53	0.00	0.00	0.00	0.00	0.00	0.00

Reminders	
Due Date	Amount
02-13-2026	159.53
Total Due:	159.53

APPROVED ON
FEB 09 2026
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS


 2/9/26

Wholesale distribution and other related pharmacy and pharmaceutical solution services sold by Cencora are performed through Cencora subsidiary companies and brands including AmerisourceBergen Drug Corporation, ASD Specialty Healthcare LLC, Besse Medical, Oncology Supply, SmartSource, and Good Neighbor Pharmacy.

TOLL FREE PHONE NUMBER: 1-800-555-3453

(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

<input type="checkbox"/>	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	####	ENTER:	
<input type="checkbox"/>	"ENTER YOUR 4-DIGIT PIN"	###		
<input type="checkbox"/>	"MAKE A PAYMENT, PRESS 1"			1
<input type="checkbox"/>	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★		941 #
<input type="checkbox"/>	"IF FEDERAL TAX DEPOSIT ENTER 1"			1
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING YEAR"	★		25
<input type="checkbox"/>	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★		03
	1ST QTR - 03 (MARCH) - Jan, Feb, Mar			
	2ND QTR - 06 (JUNE) - Apr, May, June			
	3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept			
	4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec			
<input type="checkbox"/>	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★		\$ 116,867.16 #
	"1 TO CONFIRM"			1
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0		\$ 62,923.20 #
	"ENTER W/CENTS AMOUNT OF MEDICARE"			\$ 14,716.02 #
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"			\$ 39,227.94 #
<input type="checkbox"/>	"6-DIGIT SETTLEMENT DATE"	★		
	"1 TO CONFIRM"			1
<input type="checkbox"/>	ACKNOWLEDGEMENT NUMBER			

CALLED IN BY:
CALLED IN DATE:
CALLED IN TIME:

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

"ENTER VOID CKS AS NEGATIVE NUMBERS"

PAY PERIOD: BEGIN	1/23/2026	VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: END	2/5/2026					
PAY DATE:	2/13/2026					
GROSS PAY:	\$ 545,158.36			\$ -		\$ 545,158.36
DEDUCTIONS:						
A/R	\$ 430.00					\$ 430.00
ADVANC						\$ -
BOOTS						\$ -
MUTUAL CRITICAL ILLNESS						\$ -
MUTUAL ACCIDENT						\$ -
IRS TAX						\$ -
MUTUAL SHORT-TERM-DIS						\$ -
MUTUAL VISION	\$ 819.57					\$ 819.57
CAFÉ-D	\$ 1,357.68					\$ 1,357.68
CAFÉ-H	\$ 30,408.41					\$ 30,408.41
	\$ -					\$ -
	\$ -					\$ -
CAFÉ-P						\$ -
CANCER						\$ -
CHILD	\$ -					\$ -
CLINIC						\$ -
COMBIN	\$ 228.60					\$ 228.60
UREDUN						\$ -
DENTAL						\$ -
DEP-LF						\$ -
MUTUAL TERM LIFE	\$ 990.21					\$ 990.21
MUTUAL HOSP INDEM	\$ 644.00					\$ 644.00
FED TAX	\$ 39,227.94					\$ 39,227.94
FICA-M	\$ 7,358.01					\$ 7,358.01
FICA-O	\$ 31,461.60					\$ 31,461.60
FICA-M ADDITIONAL						\$ -
FIRST C						\$ -
FLEX S	\$ 4,231.98					\$ 4,231.98
FLX-FE						\$ -
GIFT S	\$ 242.60					\$ 242.60
MUTUAL CRITICAL ILLNESS	\$ 988.28					\$ 988.28
MUTUAL ACCIDENT	\$ 637.57					\$ 637.57
MUTUAL SHORT TERM DIS	\$ 1,800.98					\$ 1,800.98
LEGAL	\$ 905.55					\$ 905.55
OTHER	\$ 4,167.14					\$ 4,167.14
NATIONAL FARM LIFE	\$ 1,575.19					\$ 1,575.19
MED SURCHARGE						\$ -
Blank						\$ -
RELAY						\$ -
REPAY						\$ -
STONEDF	\$ 895.00					\$ 895.00
STONE						\$ -
STONE 2						\$ -
STUDEN						\$ -
TSA-R	\$ 36,738.35					\$ 36,738.35
UW/HOS						\$ -
TOTAL DEDUCTIONS:	\$ 165,118.56	\$ -	\$ -	\$ -	\$ -	\$ 165,118.56
NET PAY:	\$ 380,039.80	\$ -	\$ -	\$ -	\$ -	\$ 380,039.80

TOTAL CAFÉ 125 PLAN:	\$ 37,712.64	Less Exempt:				
TAXABLE PAY:	\$ 507,445.72	\$ 507,445.72				Exempt Amt:

	"CALCULATED"	From MMC Report	Difference
FICA - MED (ER)	1.45% \$ 7,357.96		
FICA - MED (EE)	1.45% \$ 7,357.96	\$ 7,358.01	\$ (0.05)
FICA - SOC SEC (ER)	6.20% \$ 31,461.63		
FICA - SOC SEC (EE)	6.20% \$ 31,461.63	\$ 31,461.60	\$ 0.03
FED WITHHOLDING	\$ 39,227.94	\$ 39,227.94	

Employees over FICA-SS Cap:
Paycode S - Employee Reimb.:
TOTAL:

TAX DEPOSIT:	\$ 116,867.12	\$ 116,867.16	
FICA - MEDICARE	2.90% \$ 14,715.92	\$ 14,716.02	
FICA - SOCIAL SECURITY	12.40% \$ 62,923.26	\$ 62,923.20	
FED WITHHOLDING	\$ 39,227.94	\$ 39,227.94	
TOTAL TAX:	\$ 116,867.12	\$ 116,867.16	\$ (0.04)

PREPARED BY: Sariah Rubio
PREPARED DATE: 2/9/2026

Run Date: 02/06/26
Time: 17:18

MEMORIAL MEDICAL CENTER
Payroll Register (Bi-Weekly)
Pay Period 01/23/26 - 02/05/26 Run# 1

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P2REG

Final Summary

Pay Code Summary							Deductions Summary				
PayCd	Description	Hrs	OT	SH	WE	HO	CE	Gross	Code	Amount	
1	REGULAR PAY-S1	9522.25	N	N	N			229200.84	A/R	270.00	A/R2 160.00
1	REGULAR PAY-S1	1946.75	N	N	N	N		100300.28	ADVANC	AWARDS	BADGE
1	REGULAR PAY-S1	238.50	Y	N	N			8710.82	BCBSVI	BOOTS	CAPE H
2	REGULAR PAY-S2	2459.00	N	N	N			71302.45	CAPE-1	CAPE-2	CAPE-3
2	REGULAR PAY-S2	3.00	N	N	N	N		42.03	CAPE-4	CAPE-5	CAPE-C
2	REGULAR PAY-S2	66.75	Y	N	N			2277.26	CAPE-D	CAPE-F	CAPE-H 30408.41 ✓
3	REGULAR PAY-S3	1652.00	N	N	N			57444.91	CAPE-I	CAPE-L	CAPE-P
3	REGULAR PAY-S3	100.00	Y	N	N			4701.90	CANCER	CHILD	CLINIC
4	CALL BACK PAY	21.00	N	1	N	K	Y	837.90	COMBIN	CREDUN	DD ADV
4	CALL BACK PAY	2.00	N	2	N	N	Y	98.00	DENTAL	DEP-LF	DIS-LF
4	CALL BACK PAY	4.00	N	3	N	N	Y	228.50	EAT	EATCSH	FEDTAX 39227.94 ✓
C	CALL PAY	2333.00	N	1	N	N		4666.00	FICA-M	FICA-O	FIRSTC 31461.60
D	DOUBLE TIME	5.50	N	N	N	N		464.75	FLEX S	FLX PE	FORT D
D	DOUBLE TIME	16.75	N	1	N	N		1297.45	FUTA	GIFT S	GRANT 242.50
D	DOUBLE TIME	31.00	N	2	N	N		2544.19	GRP-IN	GTL	HOSP-I
D	DOUBLE TIME	25.00	N	3	N	N		2204.24	HSA	ID TPT	IRSTAX
D	DOUBLE TIME	16.00	Y	3	N	N		1814.16	LEAP	LEGAL	MASA 176.05 729.50 ✓
E	EXTRA WAGES		N	N	N	N		7998.83	MEALS	METVIS	MISC
E	EXTRA WAGES		N	1	N	N		1572.50	MISC/	MMCSHR	MODACC 637.57 ✓
F	FUNERAL LEAVE	8.00	N	1	N	N		307.44	MOOILL	MOOIND	MOOLIF 644.00 990.21 ✓
I	INSERVICE	4.50	N	1	N	N		186.39	MOOSTD	MOOVIS	NATFML 819.57 1575.19 ✓
K	EXTENDED-ILLNESS-BANK	320.00	N	1	N	N		13102.65	OTHER	PHI	PHI***
P	PAID-TIME-OFF	154.48	N	N	N	N		2366.18	PR PIN	RELAY	REPAY
P	PAID-TIME-OFF	1089.00	N	1	N	N		29099.69	SAMS	SCRUBS	SIGNON
X	CALL PAY 2	158.00	N	1	N	N		316.00	ST-TX	STONDF	STONE 895.00
Y	YMCA/CURVES		N	N	N	N		30.00	STONE2	STUDEN	SUNACC
Z	CALL PAY 3	96.00	N	1	N	N		288.00	SUNILL	SUNIND	SUNLIF
t	PHONE & DATA		N	N	N	N		1755.00	SUNSTD	SUNVIS	SURCHG
									TSA-1	TSA-2	TSA-C
									TSA-P	TSA-R	TUTION 35738.35
									UNIFOR	120.00	UN/HOS

Grand Totals: 20272.48 | Gross: 545158.36 ✓ | Deductions: 165118.56 ✓ | Net: 380039.80 ✓
 Checks Count:- FT 201 PT 12 Other 43 Female 213 Male 22 Credit OverAmt 15 ZeroNet Term Total: 255 |

CCJ
2/9/26

7338	76351	1	1	0	2026	30001308	0	2/2/2026	\$24,629.37	1	TRUESCRIPTS MANAGEMENT SERVICE LLC	P	517	0		PCS	F	1/12/2026	1/25/2026	464334244
7344	76351	2	38	0	2026	6000268	0	2/2/2026	\$109.47	1	US ANES PARTNERS OF TX PA	P	405	0		AOQ	F	11/21/2025	11/21/2025	760482007
7345	76351	2	38	0	2026	7000187	0	2/2/2026	\$109.47	1	US ANES PARTNERS OF TX PA	P	405	0		AOQ	F	11/21/2025	11/21/2025	760482007
7361	76351	3	10	0	2025	361002231	0	2/2/2026	\$34.10	1	SINGLETON ASSOCIATES PA	P	181	0		XRAY	F	12/16/2025	12/16/2025	741680498
7364	76351	3	10	0	2025	364001140	0	2/2/2026	\$40.33	1	SINGLETON ASSOCIATES PA	P	181	0		XRAY	F	12/16/2025	12/16/2025	741680498
7385	76351	3	44	1	2026	6000883	0	2/2/2026	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	0		ERD	F	12/26/2025	12/26/2025	815248556
7386	76351	3	45	3	2026	6000814	0	2/2/2026	\$150.39	1	SINGLETON ASSOCIATES PA	P	181	0		XRAY	F	12/18/2025	12/18/2025	741680498
7397	76351	3	9	1	2025	363001244	0	2/2/2026	\$216.48	1	OLEANDER EMERGENCY MEDICINE ASSOCIATES	P	169	0		ERD	F	10/16/2025	10/16/2025	452488136
7398	76351	3	78	0	2025	363002120	0	2/2/2026	\$216.48	1	ESS OF PORT LAVACA LLC	P	169	0		ERD	F	11/19/2025	11/19/2025	815248556
7403	76351	3	10	0	2026	6000848	0	2/2/2026	\$241.28	1	SINGLETON ASSOCIATES PA	P	921	0		MRIO	F	12/22/2025	12/22/2025	741680498
7404	76351	3	4	0	2025	363002206	0	2/2/2026	\$241.29	1	SINGLETON ASSOCIATES PA	P	172	0		AB	F	12/17/2025	12/17/2025	741680498
7405	76351	3	23	0	2026	20000081	0	2/2/2026	\$256.36	1	CITIZENS MEDICAL PROFESSIONALS	P	172	0		AB	F	7/15/2025	7/15/2025	471158090
7408	76351	3	57	0	2025	363001782	0	2/2/2026	\$263.19	1	ESS OF PORT LAVACA LLC	P	189	0		ERD	F	12/5/2025	12/5/2025	815248556
7409	76351	3	79	0	2026	28000002	0	2/2/2026	\$273.07	1	VICTORIA EP PLLC	P	189	0		ERD	F	8/25/2025	8/25/2025	474741110
7413	76351	3	51	0	2025	365000456	0	2/2/2026	\$296.42	1	CHILDRENS PHYSICIAN SERVICES SOUTH TEXAS	P	172	0		AB	F	12/18/2025	12/18/2025	742620408
7420	76351	3	79	0	2026	28000001	0	2/2/2026	\$464.28	1	THE PHIA GROUP, LLC	P	846	0		INVC	F	12/29/2025	12/29/2025	435041115
7428	76351	3	72	0	2026	29001078	0	2/2/2026	\$736.25	1	VIP CARE SERVICES LLC ATTN: HPCMS	P	604	0		CASE	F	8/8/2025	8/29/2025	271837628
7429	76351	3	79	0	2026	28000004	0	2/2/2026	\$783.42	1	THE PHIA GROUP, LLC	P	846	0		INVC	F	1/7/2026	1/7/2026	435041115
7439	76351	3	79	0	2026	28000009	0	2/2/2026	\$3,132.44	1	THE PHIA GROUP, LLC	P	846	0		INVC	F	1/7/2026	1/7/2026	435041115
7441	76360	2	56	2	2025	365001034	0	2/2/2026	\$34.10	1	SINGLETON ASSOCIATES PA	P	181	0		XRAY	F	12/15/2025	12/15/2025	741680498
7446	76360	2	72	0	2026	28001026	0	2/2/2026	\$115.00	1	CAPCOST/CAPROCK HEALTH PLANS	P	933	0		DISP	F	3/10/2025	3/10/2025	261569907
7447	76360	2	35	0	2026	280000006	0	2/2/2026	\$136.54	1	THE PHIA GROUP, LLC	P	846	0		INVC	F	5/6/2025	5/6/2025	435041115
7448	76360	2	56	2	2025	365001044	0	2/2/2026	\$241.28	1	SINGLETON ASSOCIATES PA	P	921	0		MRIO	F	12/16/2025	12/16/2025	741680498
7451	76360	2	72	0	2026	28000021	0	2/2/2026	\$718.24	1	THE PHIA GROUP, LLC	P	846	0		INVC	F	1/14/2026	1/14/2026	435041115
7452	76360	2	72	0	2026	28000005	0	2/2/2026	\$718.24	1	THE PHIA GROUP, LLC	P	846	0		INVC	F	1/14/2026	1/14/2026	435041115
7453	76360	2	35	0	2026	28000005	0	2/2/2026	\$1,849.23	1	USAP-TEXAS	P	175	0		AI	F	5/6/2025	5/6/2025	760482007
7458	76360	3	127	0	2026	14000163	0	2/2/2026	\$13.41	1	STATCARE MIRROR EMERGENCY CLINIC	P	487	0		URG	F	12/15/2025	12/15/2025	460575924
7461	76360	3	26	0	2025	363001773	0	2/2/2026	\$39.09	1	SINGLETON ASSOCIATES PA	P	161	0		XRAY	F	12/12/2025	12/12/2025	741680498
7462	76360	3	60	1	2026	9000283	0	2/2/2026	\$40.33	1	SINGLETON ASSOCIATES PA	P	189	0		ERD	F	12/24/2025	12/24/2025	741680498
7471	76360	3	63	0	2025	365001070	0	2/2/2026	\$45.54	1	SINGLETON ASSOCIATES PA	P	161	0		XRAY	F	12/15/2025	12/15/2025	741680498
7472	76360	3	94	0	2026	6000806	0	2/2/2026	\$49.94	1	ADU SPORTS MEDICINE CLINIC	P	457	0		OVS	F	12/31/2025	12/31/2025	273335355
7474	76360	3	119	0	2026	7000782	0	2/2/2026	\$55.89	1	MOE R. OLVERA, MD, PA	P	457	0		OVS	F	12/2/2025	12/2/2025	262712038
7475	76360	3	119	0	2026	7000798	0	2/2/2026	\$55.89	1	MOE R. OLVERA, MD, PA	P	457	0		OVS	F	10/13/2025	10/13/2025	262712038
7501	76360	3	30	1	2026	2000838	0	2/2/2026	\$85.35	1	ORTHOLONESTAR PLLC	P	457	0		OVS	F	12/18/2025	12/18/2025	842136648
7518	76360	3	2	0	2026	6000764	0	2/2/2026	\$103.60	1	SINGLETON ASSOCIATES PA	P	603	0		US	F	12/16/2025	12/16/2025	741680498
7525	76360	3	134	0	2026	9000290	0	2/2/2026	\$116.67	1	VICTORIA WOMENS CLINIC	P	180	0		KRDR	F	12/29/2025	12/29/2025	741831291
7530	76360	3	66	0	2025	363002087	0	2/2/2026	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	0		ERD	F	11/11/2025	11/11/2025	815248556
7531	76360	3	111	1	2025	365000350	0	2/2/2026	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	0		ERD	F	11/16/2025	11/16/2025	815248556
7532	76360	3	60	1	2026	9000279	0	2/2/2026	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	0		ERD	F	12/24/2025	12/24/2025	815248556
7541	76360	3	124	0	2025	365001093	0	2/2/2026	\$192.23	1	SINGLETON ASSOCIATES PA	P	324	0		CAT	F	12/15/2025	12/15/2025	741680498
7544	76360	3	2	0	2026	2000165	0	2/2/2026	\$216.48	1	LONE STAR EMERGENCY ASSOCIATES LLC	P	189	0		ERD	F	12/6/2025	12/6/2025	271112877
7547	76360	3	26	0	2025	365001095	0	2/2/2026	\$220.88	1	SINGLETON ASSOCIATES PA	P	324	0		CAT	F	12/19/2025	12/19/2025	741680498
7554	76360	3	63	0	2026	6000832	0	2/2/2026	\$241.29	1	SINGLETON ASSOCIATES PA	P	172	0		AB	F	12/23/2025	12/23/2025	741680498
7569	76360	3	2	0	2025	363001521	0	2/2/2026	\$336.45	1	ESS OF PORT LAVACA LLC	P	189	0		ERD	F	11/12/2025	11/12/2025	815248556
7574	76360	3	111	1	2026	14000109	0	2/2/2026	\$448.73	1	TCPSO	P	457	0		OVS	F	12/12/2025	12/12/2025	260834681
7575	76360	3	2	0	2026	2000163	0	2/2/2026	\$458.34	1	HCC OF CORPUS CHRISTI LLC	P	188	0		HV	F	11/12/2025	11/14/2025	271283341
7576	76360	3	26	0	2025	363002241	0	2/2/2026	\$458.44	1	SINGLETON ASSOCIATES PA	P	324	0		CAT	F	12/18/2025	12/18/2025	741680498
7594	76370	3	44	0	2026	7000551	0	2/2/2026	\$65.28	1	OAKBEND MEDICAL CENTER	P	186	0		HLAB	F	12/15/2025	12/15/2025	760339462
7596	76370	3	44	0	2026	2000814	0	2/2/2026	\$141.83	1	AMIRALI S POPATIA MD	P	457	0		OVS	F	12/15/2025	12/15/2025	760599320

\$36,098.42

APPROVED ON

FEB 09 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

HPHG, LLC dba 90 Degree Benefits

Monthly Billing for 2/1/2026
MEMORIAL MEDICAL CENTER (Mst Grp: 76350)
815 N VIRGINIA STREET
PORT LAVACA, TX 77979

Master Group Totals

						Total Due
SPEC AGG	171	\$69,428.56	Adjustments	1	285.68	\$69,714.24
ADMIN FEES	171	\$7,609.50	Adjustments	1	44.5	\$7,654.00
PPO UR	171	\$3,667.95	Adjustments	1	21.45	\$3,689.40
CHIC FEE		\$700.00				\$700.00

Balance Forward:		\$79,443.67
Payments:	-	\$0.00
Adjustments:	+	\$0.00
Beginning Balance:		\$79,443.67
Current Amount Due:	+	\$81,406.01
Current Adjustments:	+	\$351.63
Total Amount Due:		\$161,201.31

January Due
February Due

Description	Medical
EE	102
ES	17
EF	14
EC	38
Mst Total	171

\$79,443.67 Pd.
\$81,757.64
CC ✓

Make Check Payable To Attn: Revenue Department
90 Degree Benefits
PO Box 13246
Birmingham, AL 35202

APPROVED ON
FEB 09 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

 Confirmation: You Have Filed Successfully

Sales and Use Tax Period Ending 01/31/2026 (2601)

Taxpayer ID:	Taxpayer Name:	Entered By: Caitlin Clevenger
User ID:	MEMORIAL MEDICAL CENTER	Email Address:
Reference Number:	Taxpayer Address:	cclevenger@mmcpportlavaca.com
Date and Time of Filing:	815 N VIRGINIA ST PORT LAVACA, TX	Telephone Number: (361) 552-0272
02/10/2026, 09:40:55 AM	77979-3025	
	IP Address:	

PAYMENT SUMMARY

Electronic Check	Payment Reference Number:	Type of Bank Account: Checking
State Amount: \$1,578.32	Trace Number:	Accountholder Name:
Local Amount: \$505.06		Memorial Medical Center Operating
Amount to Pay: \$2,083.38		Bank Routing Number:
Electronic Check: \$2,083.38		Bank Account Number:
		Payment Effective Date: 02/19/2026

CREDIT SUMMARY

Credits Taken

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

Are you taking credit to reduce taxable sales on this return for the purchase of Texas farm-raised oysters? No

Amount of credit being taken on this return for the purchase of Texas farm-raised oysters \$0.00

Are you taking credit to reduce taxable sales on this return for participation in a qualified oyster shell recycling program? No

Amount of credit being taken on this return for participation in a qualified oyster shell recycling program \$0.00

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	25,380	25,380	0.00	25,380	1,586.25	25,380	0.02	507.6
SubTotal	25,380	25,380	0	25,380	1,586.25	25,380		507.6

Total Tax for Locations **2,093.85**

Total Tax Due:	\$2,093.85
Timely Filing Discount:	- \$10.47
Balance Due:	\$2,083.38

Pending Payments:

- \$0.00

Total Amount Due and Payable:

\$2,083.38

(State amount due is \$1,578.32) (Local amount due is \$505.06)

Plan	Start Date	EE Per Pay Cost	ER Per Pay Cost
2026 Heath Equity Health Savings Account	1/1/2026	\$40.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$25.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$0.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$30.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$8.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$0.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$5.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$137.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$3.33	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$25.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$0.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$25.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$4.16	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$100.00	\$25.00
2026 Heath Equity Health Savings Account	2/1/2026	\$0.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$5.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$0.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$158.33	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$0.00	\$25.00
2026 Heath Equity Health Savings Account	1/1/2026	\$10.00	\$25.00
		\$575.82	\$500.00
Total		\$1,075.82	

RECEIVED

FEB 05 2026

02/05/2026
11:30

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 02/27/2026

0
ap_open_invoice.template

Calhoun County Auditor

Vendor# Vendor Name
12792 LAVACA BAY NURSING AND REHAB

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
012926		01/31/2026	01/29/2026	02/27/2026			192.90	0.00	0.00	192.90

ms. pay. dep. into mme opt. error

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12792	LAVACA BAY NURSING AND REHAB	192.90	0.00	0.00	192.90

Grand Totals:	Gross	Discount	No-Pay	Net
	192.90	0.00	0.00	192.90

APPROVED ON

FEB 05 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 212030

RECEIVED

FEB 05 2026

Calhoun County

02/05/2026
11:29

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 02/27/2026
Class Pay Code

0
ap_open_invoice.template

Vendor#	Vendor Name	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE	012826A		01/31/202	01/28/202	02/27/202			4,812.78	0.00	0.00	4,812.78
		012826	ins. pay dep. into mmc opt. error	01/31/202	01/28/202	02/27/202			3,410.49	0.00	0.00	3,410.49
		012826B		01/31/202	01/28/202	02/27/202			31,560.45	0.00	0.00	31,560.45
		020326A		01/31/202	02/03/202	02/27/202			523.72	0.00	0.00	523.72
		020326		01/31/202	02/03/202	02/27/202			235.19	0.00	0.00	235.19
Vendor Totals:		Number	Name					Gross	Discount	No-Pay	Net	
		11836	GOLDENCREEK HEALTHCARE					40,542.63	0.00	0.00	40,542.63	

Grand Totals: Gross Discount No-Pay Net
 40,542.63 0.00 0.00 40,542.63

APPROVED ON

FEB 05 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 212029

RECEIVED

FEB 05 2026

Calhoun County Auditor

02/05/2026
11:30

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 02/27/2026
Class Pay Code

0
ap_open_invoice.template

Vendor# Vendor Name

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 012826		01/31/202	01/28/202	02/27/202			17,704.73	0.00	0.00	17,704.73 ✓
✓ 012926A	ins pay dep. into mmc opt. error	01/31/202	01/29/202	02/27/202			22,902.76	0.00	0.00	22,902.76 ✓
✓ 012926		01/31/202	01/29/202	02/27/202			2,933.00	0.00	0.00	2,933.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE	43,540.49	0.00	0.00	43,540.49

Grand Totals:	Gross	Discount	No-Pay	Net
	43,540.49	0.00	0.00	43,540.49

APPROVED ON

FEB 05 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK# 212031

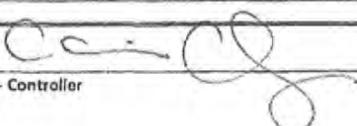
Memorial Medical Center
 Nursing Home UPL
 Weekly Cantex Transfer
 Prosperity Accounts
 2/9/2026

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		9,347.05	9,247.05	-		100.00	0
						Bank Balance	100.00
						Variance	-
						Leave in Balance	100.00
<i>Routing Information for Ashford Gardens:</i>							
Ashford Health Care Center Ltd Co JP Morgan Chase Bank ABA 111000614 Account # 448234257							
Broadmoor		101.46	-			Adjust Balance/Transfer Amt	-
						Bank Balance	101.46
						Variance	-
						Leave in Balance	100.00
Crescent		5,928.37	5,828.37	-		Adjust Balance/Transfer Amt	1.46
						Bank Balance	100.00
						Variance	100.00
						Leave in Balance	100.00
Fort Bend		104.47	-			Adjust Balance/Transfer Amt	-
						Bank Balance	104.47
						Variance	-
						Leave in Balance	100.00
Solera at W Houston		109.64	-			Adjust Balance/Transfer Amt	4.47
						Bank Balance	109.64
						Variance	-
						Leave in Balance	100.00
<i>Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:</i>							
Cantex Health Core Centers III LLC JP Morgan Chase Bank ABA 111000614 Account # 937662922							
						Adjust Balance/Transfer Amt	9.64

APPROVED ON
 FEB 09 2026

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

TOTAL TRANSFERS

Approved: 
 Caitlin Clevenger - Controller

2/9/2026

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 MIMC deposited to open account.

Ashford Gardens

2/4/2026 WIRE OUT ASHFORD HEALTH CARE CENTER LTD

<u>Transfer-Out</u>	<u>Transfer-In</u>	<u>MMC PORTION</u>	<u>NH PORTION</u>
9,247.05	-	-	-
<hr/>			
9,247.05	-	-	-
<hr/>			

Broadmoor

No Activity

<u>Transfer-Out</u>	<u>Transfer-In</u>	<u>MMC PORTION</u>	<u>NH PORTION</u>
-	-	-	-
<hr/>			
-	-	-	-
<hr/>			

Crescent

2/4/2026 WIRE OUT CANTEX HEALTH CARE CENTERS III

<u>Transfer-Out</u>	<u>Transfer-In</u>	<u>MMC PORTION</u>	<u>NH PORTION</u>
5,828.37	-	-	-
<hr/>			
5,828.37	-	-	-
<hr/>			

Fort Bend

No Activity

<u>Transfer-Out</u>	<u>Transfer-In</u>	<u>MMC PORTION</u>	<u>NH PORTION</u>
-	-	-	9,213.66
<hr/>			
-	-	-	9,213.66
<hr/>			

Solera at West Houston

No Activity

<u>Transfer-Out</u>	<u>Transfer-In</u>	<u>MMC PORTION</u>	<u>NH PORTION</u>
-	-	-	-
<hr/>			
-	-	-	-
<hr/>			

TOTALS

15,075.42	-	-	9,213.66
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Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$640,950.54	\$763,363.17	\$640,950.54	\$798,927.72
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$100.00	\$100.00	\$100.00	\$100.00
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$101.46 ✓	\$101.46	\$101.46	\$101.46
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00 ✓	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$109.64 ✓	\$109.64	\$109.64	\$109.64
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$104.47 ✓	\$104.47	\$104.47	\$104.47
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$192,642.27	\$202,831.17	\$192,642.27	\$16,719.40
*4551 CAL CO INDIGENT HEALTHCARE	\$4,817.67	\$4,817.67	\$4,817.67	\$4,817.67
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$42,523.87	\$42,523.87	\$42,523.87	\$42,523.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.84	\$101.84	\$101.84	\$101.84
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$71,963.07	\$71,963.07	\$71,963.07	\$31,961.11
*3407 MMC -NH TUSCANY VILLAGE	\$260,467.96	\$260,467.96	\$260,467.96	\$134,249.17
*2998 MMC -MONEY MARKET FUND	\$74,752.66	\$74,752.66	\$74,752.66	\$74,752.66
*7168 MEMORIAL MEDICAL LOCK BOX	\$2,310.59	\$2,310.59	\$2,310.59	\$2,310.59
Total Balance	\$1,291,046.04	\$1,423,647.57	\$1,291,046.04	\$1,106,879.60

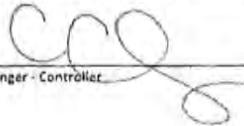
Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 2/9/2026

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	1	145,123.27	444,768.20	192,287.20		192,642.27	192,287.20
						Bank Balance	192,642.27
						Variance	-
						Leave in Balance	100.00
						Jan Interest	255.07

Routing Information for Golden Creek:
 Nexion Health at Golden Creek
 Wells Fargo Bank, N.A.
 ABA 121000248
 Account # 4439840323

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 192,287.20

Approved: 
 Caitlin Clavenger - Controller 2/9/2026

APPROVED ON
 FEB 09 2026
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Golden Creek

2/6/2026 Deposit
 2/6/2026 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/6/2026 GOLDENCREEKHEALT MERC DEP 1220356 9100001944
 2/6/2026 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
 2/5/2026 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/5/2026 GOLDENCREEKHEALT MERC DEP 1220356 9100001523
 2/4/2026 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
 2/4/2026 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/3/2026 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/3/2026 HNB - ECHO HCCLAIMPMT 746003411 440000238998
 2/3/2026 GOLDENCREEKHEALT MERC DEP 1220356 9100001749
 2/3/2026 GOLDENCREEKHEALT MERC DEP 1220356 9100001749
 2/3/2026 AETNA AS01 HCCLAIMPMT 1588075964 51000019453
 2/2/2026 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/2/2026 TSYS/TRANSFIRST CR CD DEP 543684555876917 43

	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
	-	162,033.71		
	-	481.80		481.80
	-	11,463.30		11,463.30
	-	1,944.06		1,944.06
	-	1,682.00		1,682.00
	-	3,141.49		3,141.49
	444,768.20	-		-
	-	1,000.00		1,000.00
	-	734.90		734.90
	-	2,666.14		2,666.14
	-	795.00		795.00
	-	1,717.90		1,717.90
	-	975.00		975.00
	-	163.90		163.90
	-	3,488.00		3,488.00
				-
				-
	444,768.20	192,287.20	-	30,253.49

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$640,950.54	\$763,363.17	\$640,950.54	\$798,927.72
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$100.00	\$100.00	\$100.00	\$100.00
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$101.46	\$101.46	\$101.46	\$101.46
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$109.64	\$109.64	\$109.64	\$109.64
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$104.47	\$104.47	\$104.47	\$104.47
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$192,642.27 ✓	\$202,831.17	\$192,642.27	\$16,719.40
*4551 CAL CO INDIGENT HEALTHCARE	\$4,817.67	\$4,817.67	\$4,817.67	\$4,817.67
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$42,523.87	\$42,523.87	\$42,523.87	\$42,523.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.84	\$101.84	\$101.84	\$101.84
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$71,963.07	\$71,963.07	\$71,963.07	\$31,961.11
*3407 MMC -NH TUSCANY VILLAGE	\$260,467.96	\$260,467.96	\$260,467.96	\$134,249.17
*2998 MMC -MONEY MARKET FUND	\$74,752.66	\$74,752.66	\$74,752.66	\$74,752.66
*7168 MEMORIAL MEDICAL LOCK BOX	\$2,310.59	\$2,310.59	\$2,310.59	\$2,310.59
Total Balance	\$1,291,046.04	\$1,423,647.57	\$1,291,046.04	\$1,106,879.60

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 2/9/2026

Nursing Home
 Gulf Pointe Plaza - Private Pay

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cls. Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
	1,509.92	129,505.82	519.77			42,523.87	No
					Bank Balance Variance	42,523.87	Transfer (Holding due to pending claims requests)
					Leave in Balance	100.00	
					Claims owed to MMC	3,441.27	
					Claims owed to MMC	513.77	
					Adjust Balance/Transfer Amt	<u>36,462.83</u>	

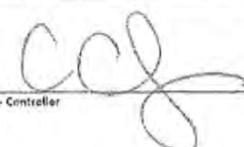
Nursing Home
 Gulf Pointe Plaza-Medicare/Medicaid

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cls. Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
	101.84					101.84	NO TRANSFER
					Bank Balance Variance	101.84	
					Leave in Balance	100.00	
					Adjust Balance/Transfer Amt	<u>1.84</u>	

Routing information for Gulf Pointe Plaza:

TOTAL TRANSFERS

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

Approved: 
 Caitlin Cleveland - Controller 2/9/2026

APPROVED ON
 FEB 09 2026
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

2/3/2026 1160
2/3/2026 HNB - ECHO HCCLAIMPMT 746003411 440000238998

<u>Transfer-Out</u>	<u>Transfer-In</u>	MMC <u>PORTION</u>	<u>NH PORTION</u>
129,505.82	-	-	-
-	519.77	-	519.77
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
<u>129,505.82</u>	<u>519.77</u>	<u>-</u>	<u>519.77</u>

Gulf Pointe Plaza-Medicare/Medicaid

No Activity

<u>Transfer-Out</u>	<u>Transfer-In</u>	MMC <u>PORTION</u>	<u>NH PORTION</u>
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
<u>129,505.82</u>	<u>519.77</u>	<u>-</u>	<u>519.77</u>

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$640,950.54	\$763,363.17	\$640,950.54	\$798,927.72
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$100.00	\$100.00	\$100.00	\$100.00
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$101.46	\$101.46	\$101.46	\$101.46
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$109.64	\$109.64	\$109.64	\$109.64
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$104.47	\$104.47	\$104.47	\$104.47
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$192,642.27	\$202,831.17	\$192,642.27	\$16,719.40
*4551 CAL CO INDIGENT HEALTHCARE	\$4,817.67	\$4,817.67	\$4,817.67	\$4,817.67
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$42,523.87 ✓	\$42,523.87	\$42,523.87	\$42,523.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.84 ✓	\$101.84	\$101.84	\$101.84
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$71,963.07	\$71,963.07	\$71,963.07	\$31,961.11
*3407 MMC -NH TUSCANY VILLAGE	\$260,467.96	\$260,467.96	\$260,467.96	\$134,249.17
*2998 MMC -MONEY MARKET FUND	\$74,752.66	\$74,752.66	\$74,752.66	\$74,752.66
*7168 MEMORIAL MEDICAL LOCK BOX	\$2,310.59	\$2,310.59	\$2,310.59	\$2,310.59
Total Balance	\$1,291,046.04	\$1,423,647.57	\$1,291,046.04	\$1,106,879.60

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 2/9/2026

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cls Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Tuscany Village		461,157.84	461,157.84	260,367.96			260,467.96	260,367.96
						Bank Balance Variance	260,467.96	
						Leave in Balance	100.00	

Adjust Balance/Transfer Amt 260,367.96

Approved: 
 Caitlin Clevenger - Controller 2/9/2026

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
 FEB 09 2026
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Tuscany Village

2/6/2026 Deposit
2/5/2026 NOVITAS SOLUTION HCCLAIMPMT 676201 420000124
2/4/2026 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE
2/4/2026 HNB - ECHO HCCLAIMPMT 746003411 440000289453
2/2/2026 Deposit

 Transfer-Out	 Transfer-In	MMC PORTION	NH PORTION
-	126,218.79		126,218.79
-	43,332.04		43,332.04
461,157.84	-		-
-	14,445.69		14,445.69
-	76,371.44		76,371.44
			-
			-
			-
461,157.84	260,367.96	-	260,367.96

Balances Overview

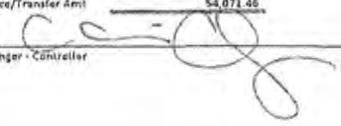
Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$640,950.54	\$763,363.17	\$640,950.54	\$798,927.72
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$100.00	\$100.00	\$100.00	\$100.00
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$101.46	\$101.46	\$101.46	\$101.46
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$109.64	\$109.64	\$109.64	\$109.64
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$104.47	\$104.47	\$104.47	\$104.47
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$192,642.27	\$202,831.17	\$192,642.27	\$16,719.40
*4551 CAL CO INDIGENT HEALTHCARE	\$4,817.67	\$4,817.67	\$4,817.67	\$4,817.67
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$42,523.87	\$42,523.87	\$42,523.87	\$42,523.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.84	\$101.84	\$101.84	\$101.84
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$71,963.07	\$71,963.07	\$71,963.07	\$31,961.11
*3407 MMC -NH TUSCANY VILLAGE	\$260,467.96 ✓	\$260,467.96	\$260,467.96	\$134,249.17
*2998 MMC -MONEY MARKET FUND	\$74,752.66	\$74,752.66	\$74,752.66	\$74,752.66
*7168 MEMORIAL MEDICAL LOCK BOX	\$2,310.59	\$2,310.59	\$2,310.59	\$2,310.59
Total Balance	\$1,291,046.04	\$1,423,647.57	\$1,291,046.04	\$1,106,879.60

Memorial Medical Center
 Nursing Home UPL
 Weekly HSL Transfer
 Prosperity Accounts
 2/9/2026

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Chg. Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Service Bay (Nursing Unit) Room		196,776.22	199,790.23	64,915.06			71,963.07	54,071.46
						Bank Balance	71,963.07	
						Variance	-	
						Leave in Balance	100.00	
						Claims owed to MMC	10,843.62	
						Claims owed to MMC	6,796.05	
						Jan Interest	151.94	
						<u>Adjust Balance/Transfer Amt</u>	<u>54,071.46</u>	

Note 1: 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
 FEB 09 2026
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Approved: 
 Caitlin Clevenger - Controller 2/9/2026

Lavaca Bay Nursing and Rehab

2/6/2026 Deposit
2/6/2026 Deposit
2/6/2026 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2
2/5/2026 CENTENE CORP HCCLAIMPMT 53101124538573
2/5/2026 NOVITAS SOLUTION HCCLAIMPMT 676481 420000124
2/4/2026 WIRE OUT REG Leased OpCo LLC
2/4/2026 NDC SWEEP FAC 02330 56009680020221 SWEEP FR
2/3/2026 CENTENE CORP HCCLAIMPMT 53101128021756
2/2/2026 HNB - ECHO HCCLAIMPMT 746003411 440000255666
2/2/2026 NOVITAS SOLUTION HCCLAIMPMT 676481 420000194
2/2/2026 CENTENE CORP HCCLAIMPMT 53101126778271

✓
Transfer-Out

✓
Transfer-In

MMC

PORTION

NH PORTION

-	5,583.16		5,583.16
-	28,568.73		28,568.73
-	5,850.07		5,850.07
-	430.74		430.74
-	159.06		159.06
189,730.23	-		-
-	22,326.77		22,326.77
-	2.13		2.13
-	692.29		692.29
-	146.34		146.34
-	1,155.79		1,155.79
-	-		-
-	-		-
<u>189,730.23</u>	<u>64,915.08</u>	<u>-</u>	<u>64,915.08</u>

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$640,950.54	\$763,363.17	\$640,950.54	\$798,927.72
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$100.00	\$100.00	\$100.00	\$100.00
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$101.46	\$101.46	\$101.46	\$101.46
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.00	\$100.00	\$100.00	\$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$109.64	\$109.64	\$109.64	\$109.64
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$104.47	\$104.47	\$104.47	\$104.47
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$192,642.27	\$202,831.17	\$192,642.27	\$16,719.40
*4551 CAL CO INDIGENT HEALTHCARE	\$4,817.67	\$4,817.67	\$4,817.67	\$4,817.67
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$42,523.87	\$42,523.87	\$42,523.87	\$42,523.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.84	\$101.84	\$101.84	\$101.84
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$71,963.07 ✓	\$71,963.07	\$71,963.07	\$31,961.11
*3407 MMC -NH TUSCANY VILLAGE	\$260,467.96	\$260,467.96	\$260,467.96	\$134,249.17
*2998 MMC -MONEY MARKET FUND	\$74,752.66	\$74,752.66	\$74,752.66	\$74,752.66
*7168 MEMORIAL MEDICAL LOCK BOX	\$2,310.59	\$2,310.59	\$2,310.59	\$2,310.59
Total Balance	\$1,291,046.04	\$1,423,647.57	\$1,291,046.04	\$1,106,879.60

Brooklynn Harvey

From: cclevenger@mmcportlavaca.com (Caitlin Clevenger)
<cclevenger@mmcportlavaca.com>
Sent: Monday, February 9, 2026 1:57 PM
To: Brooklynn Harvey; Autumn Gibson; gracie.archer@calhouncotx.org;
Lucy.Dio@calhouncotx.org
Cc: Melissa McKissack; rhonda kokena
Subject: RE: Wires Estimate

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

Hi Brooklynn,

I am fine with those estimates. Thank you for taking the time to look back and come up with the numbers!

Thanks,

Caitlin Clevenger

Controller
Memorial Medical Center
815 N Virginia St
Port Lavaca, TX 77979
Ph: 361.552.0272

The information contained in this transmission may contain privileged and confidential information, including patient information protected by federal and state privacy laws. It is intended only for the use of the person(s) named above. If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution, or duplication of this communication is strictly prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message and any attachments.

From: Brooklynn Harvey [mailto:Brooklynn.Harvey@calhouncotx.org]
Sent: Monday, February 09, 2026 1:52 PM
To: Caitlin Clevenger <cclevenger@mmcportlavaca.com>; Autumn Gibson <agibson@mmcportlavaca.com>;
gracie.archer@calhouncotx.org; Lucy.Dio@calhouncotx.org
Cc: Melissa McKissack <Melissa.McKissack@calhouncotx.org>; rhonda kokena <rhonda.kokena@calhouncotx.org>
Subject: Wires Estimate

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

Good afternoon,

I went back through the last **five** Commissioners' Court Approvals. As a suggestion, the following estimates are based on those nursing home wires for those weeks:

For **Cantex**, it was stated in the original email that the estimate for each nursing home was \$50,000. Making the total for **Cantex** \$250,000.00 for next week. Based on the last five weeks, 1/7/2026-2/4/2026, **Cantex** averages between \$25,778.87-\$719.55. With that being said, maybe the estimate should be no more than **\$35,000**.

Nexion's estimate was listed at \$600,000, which was based on the last five weeks of its range, ranging from \$487,140.16-23,651.33. With that being said, I believe **\$600,000** is reasonable.

With **Tuscany** ranging as high as \$539,219.82, I believe it is reasonable to keep the estimate of **\$600,000**.

HSL averages for as low as 47,514.57 to as high as \$162,817.65. I would estimate around **\$250,000**.

HMG, with it continuously being labeled with no transfer, I would estimate it as low as **\$15,000**.

As mentioned, this is just a suggestion.

Thank you!

Brooklynn Harvey

Calhoun County
Assistant Auditor
202 S. Ann Suite B
Port Lavaca, TX 77979
Phone: 361-553-4615

Calhoun County Texas

Gulf pointe

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Memorial Medical Center Date Requested: 02/03/2026

A 815 N. Virginia St. ✓ *CHK # 0011163*

V Port Lavaca, TX 77979

E _____

E _____

CHK # 0011163
APPROVED ON
FEB 09 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY	
<input type="checkbox"/>	Imprest Cash
<input type="checkbox"/>	A/P Check
<input type="checkbox"/>	Mail Check to Vendor
<input type="checkbox"/>	Return Check to Dept

AMOUNT \$519.77 ✓ G/L NUMBER: 20654000

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: *Melissa Delgado*

AUTHORIZED BY: *CCJ* ✓

Lavaca Bay ✓

MEMORIAL MEDICAL CENTER
CHECK REQUEST

Mmc ✓

Date Requested: 2-5-26

P
A
Y
E
E

CHK# 001175

FOR ACCT. USE ONLY	
<input type="checkbox"/>	Imprest Cash
<input type="checkbox"/>	A/P Check
<input type="checkbox"/>	Voucher Check

APPROVED ON

FEB 09 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

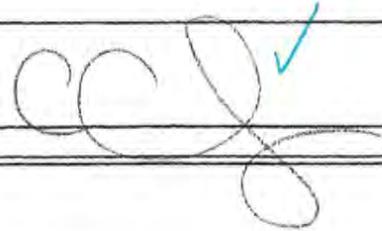
AMOUNT \$10,843.62 ✓

G/L NUMBER: 20656000

EXPLANATION: Humana recoup - Lavaca Bay (2-29-25)

Remit ID# 202508305016320

REQUESTED BY: K. Pokluda

AUTHORIZED BY:  ✓

MEMORIAL MEDICAL CENTER
LAVACA BAY NURSING & REHAB
815 N VIRGINIA ST
PORT LAVACA, TX 77979

001175

Date 2-11-26 88-2265/1131

PAY
TO THE
ORDER OF

MMC Operating

\$ 10,843.62

Ten thousand Eight hundred forty-three dollars ⁶²/₁₀₀ DOLLARS



FOR

Security features are included. Details on back.



MEMORIAL MEDICAL CENTER
NH GULF POINTE - PRIVATE PAY
815 N. VIRGINIA ST.
PORT LAVACA, TX 77979

001163

Date 2-11-26 88-2265/1131

PAY
TO THE
ORDER OF

MMC Operating

\$ 519.77

Five hundred nineteen dollars ⁷⁷/₁₀₀ DOLLARS



FOR

Security features are included. Details on back.



RUN DATE:02/11/26
TIME:15:44

MEMORIAL MEDICAL CENTER
CHECK REGISTER
02/11/26 THRU 02/11/26

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

GPP * 001163 02/11/26 519.77 MMC OPERATING
BSL * 001175 02/11/26 10,843.62 MMC OPERATING

