MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---July 8, 2026

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	$	392,569.19
TOTAL INTER-GOVERNMENT TRANSFERS	$	-
GRAND TOTAL DISBURSEMENTS APPROVED July 8, 2026	$	392,569.19
TOTAL TRANSFERS BETWEEN FUNDS-HELD BY MMC	$	414,350.23
TOTAL MMC TRANSFERS OF NURSING HOME REVENUE	$	165,687.26
GRAND TOTAL TRANSFERS BETWEEN FUNDS APPROVED July 8, 2026	$	580,037.49
GRAND TOTAL FOR APPROVAL ON July 8, 2026	$	972,606.68

APPROVED

JUL 08 2026

CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---July 8, 2026

PAYABLES AND PAYROLL			
7/2/2026	Weekly Payables	292,392.51	
7/6/2026	Morris & Dickson - MMC Rx	12,594.71	
7/6/2026	McKesson - 340B Prescription Expense	7,497.29	
7/6/2026	Cencora - 340B Prescription Expense	49.61	
7/6/2026	Cencora - 340B Prescription Expense	268.10	
7/6/2026	Cencora-340B Prescription Expense	13.06	
Prosperity Electronic Bank Payments			
7/6/2026	90 Degree Benefits - employee insurance claims	36,075.46	
7/6/2026	90 Degree Benefits - employee insurance claims	19,911.71	
7/6/2026	90 Degree Benefits - employee insurance claims	20,927.12	
7/6/2026	Pay Plus - Patient Claims Processing Fee	1,373.62	
7/6/2026	Credit Card Processing Fee	1,441.00	
7/6/2026	Authnet Gateway	25.00	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS			**$ 392,569.19**
GRAND TOTAL DISBURSEMENTS APPROVED July 8, 2026			**$ 392,569.19**
TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES			
7/2/2026	MMC Operating to Bethany/Lavaca Bay - Correction of insurance payment deposited into MMC Operating in error	12,763.41	
7/2/2026	MMC Operating to Golden Creek Healthcare - Correction of insurance payment deposited into MMC Operating in error	214,275.56	
7/2/2026	MMC Operating to Tuscany Village - Correction of insurance payment deposited into MMC operating in error	70,439.95	
7/2/2026	MMC Operating to Tuscany Village - QIPP Y9 Q2 IGT Portion	405.75	
7/2/2026	MMC Operating to Solera West Houston - Correction of insurance payment deposited into MMC Operating in error	116,465.56	
TOTAL TRANSFERS BETWEEN FUNDS			**$ 414,350.23**
NURSING HOME UPL TRANSFERS OF PREVIOUS WEEK'S RECEIPTS			
7/6/2026	Nursing Home UPL - Cantex Transfer	5,648.29	
7/6/2026	Nursing Home UPL - Nexion Transfer	33,870.82	
7/6/2026	Nursing Home UPL - Tuscany Transfer	48,551.41	
7/6/2026	Nursing Home UPL - HSL Transfer	77,584.74	
TRANSFER OF FUNDS BETWEEN NURSING HOMES			
7/6/2026	Golden Creek to Lavaca Bay - Claims owed to Lavaca Bay	32.00	
TOTAL NURSING HOME UPL EXPENSES			**$ 165,687.26**
GRAND TOTAL TRANSFERS BETWEEN FUNDS APPROVED July 8, 2026			**$ 580,037.49**

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9172932836		06/24/202	06/16/202	07/11/202			4,005.42	0.00	0.00	4,005.42
	OXYGEN									
9173031621		06/24/202	06/18/202	07/13/202			570.46	0.00	0.00	570.46
	OXYGEN									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS USA, LLC - CENTRAL DIV	4,575.88	0.00	0.00	4,575.88

Vendor#	Vendor Name	Class	Pay Code
14028	AMAZON CAPITAL SERVICES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
14YRVYMDTNRC		06/11/202	06/10/202	07/10/202			89.11	0.00	0.00	89.11
	~~SUPPLIES~~ envelopes, earplugs, 3 address labels									
1MHJ16TNRH4N		06/22/202	06/10/202	07/10/202			83.40	0.00	0.00	83.40
	~~SUPPLIES~~ DVD's x4									
1WR6FVTJT137		06/23/202	06/16/202	07/16/202			131.82	0.00	0.00	131.82
	~~SUPPLIES~~ Ceiling lights x6									
1P1YRHTVCJX6		06/30/202	06/27/202	06/27/202			-19.58	0.00	0.00	-19.58
	~~SUPPLIES~~ Computer Chair Covers									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14028	AMAZON CAPITAL SERVICES	284.75	0.00	0.00	284.75

Vendor#	Vendor Name	Class	Pay Code
10095	APEX PRACTICE SOLUTIONS INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7901		07/01/202	07/01/202	07/01/202			3,200.00	0.00	0.00	3,200.00
	DR. AD CREDENTIALING SERVIC									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10095	APEX PRACTICE SOLUTIONS INC	3,200.00	0.00	0.00	3,200.00

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
16968		06/01/202	07/01/202	07/01/202			4,500.00	0.00	0.00	4,500.00
	CLOUD BACKUP/ SERVER MAINT									
16952		06/01/202	07/01/202	07/01/202			850.00	0.00	0.00	850.00
	SERVER MAINTENANCE									

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
85628523		07/01/202	06/29/202	06/29/202			318.41	0.00	0.00	318.41
	Sterile water for irrigation, Vented Soln. & anesthesia set									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	B1150	BAXTER HEALTHCARE	318.41	0.00	0.00	318.41

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
112714454		06/23/202	06/15/202	07/10/202			5,016.58	0.00	0.00	5,016.58
	HEMATOLOGY BILLING									
112723190		06/23/202	06/18/202	07/13/202			100.38	0.00	0.00	100.38
	~~SUPPLIES~~ Ferric Chloride x3									

4621703	06/30/202	06/21/202	07/16/202		1,484.00	0.00	0.00	1,484.00
MAINT CONTRACT								
5516531	06/30/202	06/21/202	07/16/202		1,935.15	0.00	0.00	1,935.15
LEASE AND RENTAL FOR LAB								

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
B1220	BECKMAN COULTER INC	8,536.11	0.00	0.00	8,536.11

Vendor# 11072 Vendor Name: BIO-RAD LABORATORIES, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
909334340		06/30/202	06/23/202	06/30/202			939.00	0.00	0.00	939.00
	SUPPLIES									
909345171		06/30/202	06/25/202	06/30/202			495.51	0.00	0.00	495.51
	SUPPLIES									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
11072	BIO-RAD LABORATORIES, INC	1,434.51	0.00	0.00	1,434.51

Vendor# 14753 Vendor Name: BIOMERIEUX, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1213782801		06/11/202	06/05/202	06/11/202			4,743.65	0.00	0.00	4,743.65
	~~SUPPLIES~~ Biofire RP2.1 Panel									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
14753	BIOMERIEUX, INC	4,743.65	0.00	0.00	4,743.65

Vendor# 15248 Vendor Name: BRIGHTLY SOFTWARE INC.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV304962		07/01/202	06/30/202	07/01/202			6,377.68	0.00	0.00	6,377.68
	PLANT OPS WORK ORDER SOFT									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
15248	BRIGHTLY SOFTWARE INC.	6,377.68	0.00	0.00	6,377.68

Vendor# C1048 Vendor Name: CALHOUN COUNTY Class: W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062426		07/01/202	06/24/202	06/24/202			167.63	0.00	0.00	167.63
	FUEL / voyager									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
C1048	CALHOUN COUNTY	167.63	0.00	0.00	167.63

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8004223826		06/24/202	06/18/202	07/13/202			288.39	0.00	0.00	288.39
	NUC MED SUPPLIES									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
C1325	CARDINAL HEALTH 414, INC.	288.39	0.00	0.00	288.39

Vendor# 10541 Vendor Name: CARESFIELD

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
200033577		06/22/202	06/10/202	07/10/202			469.13	0.00	0.00	469.13
	~~SUPPLIES~~ lab supplies									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
10541	CARESFIELD	469.13	0.00	0.00	469.13

Vendor# 16020 Vendor Name: CIHQ

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
12104		07/01/202	06/29/202	06/29/202			5,950.00	0.00	0.00	5,950.00
	ANNUAL ACCREDITATION FEE -0									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net

	16020	CIHQ					5,950.00	0.00	0.00	5,950.00
Vendor#	Vendor Name				Class	Pay Code				
13000	CLEARFLY									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	INV829227		07/01/202	07/01/202	07/01/202		1,240.83	0.00	0.00	1,240.83
		ALLWORX PHONES								
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		13000	CLEARFLY				1,240.83	0.00	0.00	1,240.83
Vendor#	Vendor Name				Class	Pay Code				
10368	DEWITT POTH & SON									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	8402980		06/23/202	06/15/202	07/10/202		350.24	0.00	0.00	350.24
		~~SUPPLIES~~ paper, thermal pouch, rubberbands								
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		10368	DEWITT POTH & SON				350.24	0.00	0.00	350.24
Vendor#	Vendor Name				Class	Pay Code				
11011	DIAMOND HEALTHCARE CORP									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	IN20056975		06/01/202	07/01/202	07/01/202		19,166.67	0.00	0.00	19,166.67
		JUNE 2026 CPR								
	IN20056974		06/01/202	07/01/202	07/01/202		32,524.10	0.00	0.00	32,524.10
		JUNE 2026 BEV HEALTH VAN EXI								
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		11011	DIAMOND HEALTHCARE CORP				51,690.77	0.00	0.00	51,690.77
Vendor#	Vendor Name				Class	Pay Code				
10789	DISCOVERY MEDICAL NETWORK INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	MMC061526		06/01/202	06/15/202	06/16/202		102,223.05	0.00	0.00	102,223.05
		PHYS SALARY 060126-061526								
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		10789	DISCOVERY MEDICAL NETWORK INC				102,223.05	0.00	0.00	102,223.05
Vendor#	Vendor Name				Class	Pay Code				
11291	DOWELL PEST CONTROL									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	77561		07/01/202	06/29/202	06/29/202		75.00	0.00	0.00	75.00
		PEST CONTROL								
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		11291	DOWELL PEST CONTROL				75.00	0.00	0.00	75.00
Vendor#	Vendor Name				Class	Pay Code				
12484	EL CAMPO REFRIGERATION									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	112356		07/01/202	07/01/202	07/01/202		825.00	0.00	0.00	825.00
		ICE WATER DISPENSER LEASE								
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		12484	EL CAMPO REFRIGERATION				825.00	0.00	0.00	825.00
Vendor#	Vendor Name				Class	Pay Code				
F1100	FEDERAL EXPRESS CORP.				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	934451217		06/23/202	06/18/202	07/13/202		82.96	0.00	0.00	82.96
		FREIGHT								
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
		F1100	FEDERAL EXPRESS CORP.				82.96	0.00	0.00	82.96
Vendor#	Vendor Name				Class	Pay Code				
F1400	FISHER HEALTHCARE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	9130987		06/23/202	06/02/202	06/27/202		787.40	0.00	0.00	787.40
		diluent, transport tube, & buffered saline								

~~SUPPLIES~~

9477613	06/23/202	06/17/202	07/12/202	800.26	0.00	0.00	800.26

~~SUPPLIES~~ ID Now RSV CTL SWB 20/pk

9477612	06/23/202	06/17/202	07/12/202	16.32	0.00	0.00	16.32

~~SUPPLIES~~ XLD Agar 10/pk x3

9536575	06/30/202	06/19/202	07/14/202	404.22	0.00	0.00	404.22

~~SUPPLIES~~ Diazo-chek 100/kit x5

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
F1400	FISHER HEALTHCARE	2,008.20	0.00	0.00	2,008.20

Vendor# 14156 Vendor Name: FUJI FILM — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
91814607		06/30/202	06/25/202	06/25/202			7,916.67	0.00	0.00	7,916.67

~~SUPPLIES~~ SYS/MR/OASIS Open + Vertex II

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
14156	FUJI FILM	7,916.67	0.00	0.00	7,916.67

Vendor# 12636 Vendor Name: FUSION CONNECT — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1029547791		07/01/202	06/16/202	07/09/202			588.13	0.00	0.00	588.13

TELEPHONE

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
12636	FUSION CONNECT	588.13	0.00	0.00	588.13

Vendor# 11078 Vendor Name: FUSION MEDICAL STAFFING, LLC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV1007268		06/30/202	06/20/202	06/20/202			2,421.25	0.00	0.00	2,421.25

PT TRAVEL TECH / Sarah Wilmore 6/12, 6/15, 6/16, 6/17, 6/18

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
11078	FUSION MEDICAL STAFFING, LLC	2,421.25	0.00	0.00	2,421.25

Vendor# 12404 Vendor Name: GE PRECISION HEALTHCARE, LLC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6003227460		06/12/202	06/01/202	07/01/202			1,083.94	0.00	0.00	1,083.94

SUPPLIES

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
12404	GE PRECISION HEALTHCARE, LLC	1,083.94	0.00	0.00	1,083.94

Vendor# 12948 Vendor Name: GREAT AMERICA FINANCIAL SVCS — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
42362408		07/01/202	06/29/202	06/29/202			10,469.95	0.00	0.00	10,469.95

PRINTER LEASE

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
12948	GREAT AMERICA FINANCIAL SVCS	10,469.95	0.00	0.00	10,469.95

Vendor# 10334 Vendor Name: HEALTH CARE LOGISTICS INC — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
310473574		06/23/202	06/17/202	07/12/202			22.09	0.00	0.00	22.09

~~SUPPLIES~~ Dividers

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
10334	HEALTH CARE LOGISTICS INC	22.09	0.00	0.00	22.09

Vendor# 18388 Vendor Name: IMPERIAL DADE — Class: — Pay Code:

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
42188171		06/30/202	06/24/202	06/30/202			63.87	0.00	0.00	63.87

~~SUPPLIES~~ Pad high pro 4" 20in Maroon eco chemical free

42188172		06/30/202	06/24/202	06/30/202		500.63	0.00	0.00	500.63
SUPPLIES	can liners, disinfectant, window squeegee								
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
	18388	IMPERIAL DADE				564.50	0.00	0.00	564.50

Vendor#	Vendor Name	Class	Pay Code
I1260	INTOXIMETERS INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
817833		06/23/202	06/17/202	07/12/202			110.50	0.00	0.00	110.50
SUPPLIES	power charger harness, power battery									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	I1260	INTOXIMETERS INC					110.50	0.00	0.00	110.50

Vendor#	Vendor Name	Class	Pay Code
W1369	JACK WU	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062526		07/01/202	06/25/202	06/25/202			1,264.08	0.00	0.00	1,264.08
	THT GOVERNANCE CONFERENC 6/3 - 6/6									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	W1369	JACK WU					1,264.08	0.00	0.00	1,264.08

Vendor#	Vendor Name	Class	Pay Code
10972	M G TRUST		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062926		07/01/202	06/29/202	06/29/202			895.00	0.00	0.00	895.00
	M G Trust - Stonewater 6/12 - 6/25									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10972	M G TRUST					895.00	0.00	0.00	895.00

Vendor#	Vendor Name	Class	Pay Code
17972	MALEK INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
W20423		07/01/202	06/29/202	06/29/202			2,312.80	0.00	0.00	2,312.80
	PLMB LABOR + travel									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	17972	MALEK INC					2,312.80	0.00	0.00	2,312.80

Vendor#	Vendor Name	Class	Pay Code
M2178	MCKESSON MEDICAL SURGICAL INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
25792261		06/30/202	06/23/202	07/08/202			1,037.89	0.00	0.00	1,037.89
SUPPLIES	tube, stapler & fuel surcharge									
25805103		06/30/202	06/25/202	07/10/202			83.16	0.00	0.00	83.16
SUPPLIES	swabstick & fuel surcharge									
25806495		06/30/202	06/25/202	07/10/202			101.41	0.00	0.00	101.41
SUPPLIES	Kova Centrifuge econ sty tube									
25823970		07/01/202	06/29/202	06/29/202			1,483.87	0.00	0.00	1,483.87
SUPPLIES	reagent kit									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC					2,706.33	0.00	0.00	2,706.33

Vendor#	Vendor Name	Class	Pay Code
M2470	MEDLINE INDUSTRIES INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2428736330		06/15/202	06/03/202	06/28/202			57.87	0.00	0.00	57.87
SUPPLIES	tongue blade & Cleansing dry wipe									
2430853874		06/23/202	06/17/202	07/12/202			5,073.48	0.00	0.00	5,073.48
SUPPLIES										
2430853872		06/23/202	06/17/202	07/12/202			360.96	0.00	0.00	360.96
SUPPLIES	lumbar puncture tray									
2430984378		06/23/202	06/17/202	07/12/202			68.70	0.00	0.00	68.70
SUPPLIES	carrot broth 20/pk									

2430853873		06/23/202	06/17/202	07/12/202	315.38	0.00	0.00	315.38
	SUPPLIES	vacutract device removal						
2430853869		06/23/202	06/17/202	07/12/202	338.25	0.00	0.00	338.25
	SUPPLIES	microclave connector x3						
2430853870		06/23/202	06/17/202	07/12/202	29.83	0.00	0.00	29.83
	SUPPLIES	Coban						
2430853871		06/23/202	06/17/202	07/12/202	166.81	0.00	0.00	166.81
	SUPPLIES	extension set						
1703716564		06/30/202	06/27/202	06/27/202	189.44	0.00	0.00	189.44

interest

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC	6,600.72	0.00	0.00	6,600.72

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
070126		07/01/202	07/01/202	07/01/202			550.32	0.00	0.00	550.32
	EMPLYEE GIFT SHOP DED									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP	550.32	0.00	0.00	550.32

Vendor#	Vendor Name	Class	Pay Code
12388	NATIONAL FARM LIFE INSURANCE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4785124		06/30/202	06/15/202	06/15/202			2,830.78	0.00	0.00	2,830.78
	LIFE INSURANCE PREMIUM									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12388	NATIONAL FARM LIFE INSURANCE	2,830.78	0.00	0.00	2,830.78

Vendor#	Vendor Name	Class	Pay Code
11256	NOVITAS SOLUTIONS - PART A		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070126		07/01/202	07/01/202	07/01/202			2,549.00	0.00	0.00	2,549.00
	2026 MEDICARE INTERIM REIMB									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11256	NOVITAS SOLUTIONS - PART A	2,549.00	0.00	0.00	2,549.00

Vendor#	Vendor Name	Class	Pay Code
P1800	PITNEY BOWES INC	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1029657386		07/01/202	06/22/202	06/22/202			198.00	0.00	0.00	198.00
	POSTAGE									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	P1800	PITNEY BOWES INC	198.00	0.00	0.00	198.00

Vendor#	Vendor Name	Class	Pay Code
12708	POC ELECTRIC, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4621		06/30/202	06/25/202	06/25/202			7,638.41	0.00	0.00	~~7,638.41~~
	LABOR & MATERIAL									

*removed

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12708	POC ELECTRIC, LLC	7,638.41	0.00	0.00	~~7,638.41~~

Vendor#	Vendor Name	Class	Pay Code
P2100	PORT LAVACA WAVE	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV0196		06/30/202	06/25/202	06/25/202			355.00	0.00	0.00	355.00
	HURRICANE GUIDE 2026									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	P2100	PORT LAVACA WAVE	355.00	0.00	0.00	355.00

Vendor#	Vendor Name	Class	Pay Code
O1416	QUIDELORTHO SALES COMPANY LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9100468471		06/23/202	06/13/202	07/13/202			837.09	0.00	0.00	837.09
	SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	O1416	QUIDELORTHO SALES COMPANY LLC					837.09	0.00	0.00	837.09

Vendor# S1405 SERVICE SUPPLY OF VICTORIA INC — Class: W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
701306514		06/15/202	06/19/202	07/10/202			118.04	0.00	0.00	118.04
	~~SUPPLIES~~ Sloan x2									
701306531		06/15/202	06/19/202	07/10/202			628.14	0.00	0.00	628.14
	~~SUPPLIES~~ Sloan x 11									
701306168		06/23/202	06/16/202	07/16/202			213.60	0.00	0.00	213.60
	SUPPLIES									
701306369		06/23/202	06/18/202	07/10/202			794.66	0.00	0.00	794.66
	SUPPLIES									
701306383		06/23/202	06/18/202	07/10/202			59.02	0.00	0.00	59.02
	SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	S1405	SERVICE SUPPLY OF VICTORIA INC					1,813.46	0.00	0.00	1,813.46

Vendor# S2362 SMITH & NEPHEW, INC.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
985370766		06/23/202	06/02/202	06/23/202			588.90	0.00	0.00	588.90
	~~SUPPLIES~~ RR555 Replaced									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	S2362	SMITH & NEPHEW, INC.					588.90	0.00	0.00	588.90

Vendor# 11296 SOUTH TEXAS BLOOD & TISSUE CEN

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
107061364		06/23/202	06/15/202	07/10/202			6,123.56	0.00	0.00	6,123.56
	BLOOD BANK JUNE INV									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	11296	SOUTH TEXAS BLOOD & TISSUE CEN					6,123.56	0.00	0.00	6,123.56

Vendor# 12288 SPBS CLINICAL EQUIPMENT SRVC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV050000726		07/01/202	07/01/202	07/02/202			10,230.40	0.00	0.00	10,230.40
	Full Service Contract									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	12288	SPBS CLINICAL EQUIPMENT SRVC					10,230.40	0.00	0.00	10,230.40

Vendor# S3960 STERICYCLE, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8014614489		06/24/202	06/18/202	07/10/202			3,360.49	0.00	0.00	3,360.49
	BIOHAZARD WASTE DISPOSAL									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	S3960	STERICYCLE, INC					3,360.49	0.00	0.00	3,360.49

Vendor# 14212 SURGICAL DIRECT SOUTH

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9386		06/30/202	06/23/202	06/23/202			3,600.00	0.00	0.00	3,600.00
	SURGICAL SUPPLIES									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	14212	SURGICAL DIRECT SOUTH					3,600.00	0.00	0.00	3,600.00

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
96555979		06/30/202	06/24/202	06/30/202			527.44	0.00	0.00	527.44
	~~SUPPLIES~~ Beyond Care Remote									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14524	SYSMEX AMERICA, INC.	527.44	0.00	0.00	527.44

Vendor# T1825 TEXAS DEPARTMENT OF HEALTH — Class: W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2026001842		06/30/202	06/25/202	06/25/202			57.00	0.00	0.00	57.00
	ASBESTOS DEMOLITION									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	T1825	TEXAS DEPARTMENT OF HEALTH	57.00	0.00	0.00	57.00

Vendor# T3130 TRI-ANIM HEALTH SERVICES INC — Class: M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
601310155		06/30/202	06/18/202	07/13/202			293.97	0.00	0.00	293.97
	~~SUPPLIES~~ Blow man Hyperinf									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	T3130	TRI-ANIM HEALTH SERVICES INC	293.97	0.00	0.00	293.97

Vendor# 14372 TRIAGE, LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV1797321437		06/30/202	06/19/202	06/19/202			1,604.25	0.00	0.00	1,604.25
	TRAVEL TECH FOR LAB / Farida Harraid 6/5, 6/8, 6/9									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14372	TRIAGE, LLC	1,604.25	0.00	0.00	1,604.25

Vendor# 13616 TRIOSE, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
TRI159969		07/01/202	08/10/202	08/25/202			144.16	0.00	0.00	144.16
	freight management									
TRI199099		07/01/202	10/01/202	10/16/202			126.69	0.00	0.00	126.69
	freight management - inbound & outbound									
TRI218040		07/01/202	04/15/202	04/30/202			155.74	0.00	0.00	155.74
	freight management - inbound									
TRI300857		07/01/202	06/24/202	07/09/202			98.30	0.00	0.00	98.30
	FREIGHT									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	13616	TRIOSE, INC	524.89	0.00	0.00	524.89

Vendor# U1064 UNIFIRST HOLDINGS INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2921090344		06/23/202	06/15/202	07/10/202			4,983.87	0.00	0.00	4,983.87
	SUPPLIES/LINENS									
2921090704		06/23/202	06/18/202	07/13/202			181.21	0.00	0.00	181.21
	SUPPIES/LINENS									
2921090705		06/23/202	06/18/202	07/13/202			606.92	0.00	0.00	606.92
	UNIFORMS									
2921090717		06/23/202	06/18/202	07/13/202			7,342.64	0.00	0.00	7,342.64
	SUPPLIES/LINENS									
2921090707		06/23/202	06/18/202	07/13/202			179.24	0.00	0.00	179.24
	SUPPLIES/LINENS									
2921090718		06/23/202	06/18/202	07/13/202			447.05	0.00	0.00	447.05
	"		"							
2921090345		06/24/202	06/15/202	07/10/202			184.78	0.00	0.00	184.78
	"		"							

	UNIFORMS							
2921090701		06/24/202	06/18/202	07/13/202	54.89	0.00	0.00	54.89
	UNIFORMS							
2921090703		06/24/202	06/18/202	07/13/202	348.35	0.00	0.00	348.35
	SUPPLIES/LINENS							
2921090702		06/30/202	06/18/202	07/13/202	333.15	0.00	0.00	333.15
	UNIFORMS							

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	14,662.10	0.00	0.00	14,662.10

Vendor# I1110 Vendor Name: WERFEN USA LLC — Class — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9112237289		06/23/202	06/15/202	07/10/202			1,816.04	0.00	0.00	1,816.04
	~~SUPPLIES~~ 5K BG/ISE/GL/COOX 150 PAK 31d									
9112236351		06/23/202	06/15/202	07/10/202			1,571.67	0.00	0.00	1,571.67
	~~SUPPLIES~~ Contract Billing									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	3,387.71	0.00	0.00	3,387.71

Vendor# 11400 Vendor Name: WEST COAST MEDICAL RESOURCES — Class — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV144247		06/30/202	06/25/202	06/30/202			150.00	0.00	0.00	150.00
	~~SUPPLIES~~ Ethicon Surgiflo Endoscopic applicator									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11400	WEST COAST MEDICAL RESOURCES	150.00	0.00	0.00	150.00

Vendor# 17880 Vendor Name: YOUR PHONE GUYS LLC — Class — Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
22932		06/01/202	07/01/202	07/01/202			1,000.00	0.00	0.00	1,000.00
	ALLWRX MNTHLY SERVICE AGRI									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	17880	YOUR PHONE GUYS LLC	1,000.00	0.00	0.00	1,000.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	300,030.92	0.00	0.00	~~300,030.92~~

300,030.92 +
7,638.41 — removed invoice
292,392.51 = — new total

APPROVED ON

JUL 06 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk# 213495 - 213550

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	213495	07/08/26	4,575.88	AIRGAS USA, LLC - CENTRAL DIV
A/P	213496	07/08/26	284.75	AMAZON CAPITAL SERVICES
A/P	213497	07/08/26	3,200.00	APEX PRACTICE SOLUTIONS INC
A/P	213498	07/08/26	5,350.00	AVENO NETWORKS
A/P	213499	07/08/26	318.41	BAXTER HEALTHCARE
A/P	213500	07/08/26	8,536.11	BECKMAN COULTER INC
A/P	213501	07/08/26	1,434.51	BIO-RAD LABORATORIES, INC
A/P	213502	07/08/26	4,743.65	BIOMERIEUX, INC
A/P	213503	07/08/26	6,377.68	BRIGHTLY SOFTWARE INC.
A/P	213504	07/08/26	167.63	CALHOUN COUNTY
A/P	213505	07/08/26	288.39	CARDINAL HEALTH 414, INC.
A/P	213506	07/08/26	469.13	CARESFIELD
A/P	213507	07/08/26	5,950.00	CIHQ
A/P	213508	07/08/26	1,240.83	CLEARFLY
A/P	213509	07/08/26	350.24	DEWITT POTH & SON
A/P	213510	07/08/26	51,690.77	DIAMOND HEALTHCARE CORP
A/P	213511	07/08/26	102,223.05	DISCOVERY MEDICAL NETWORK INC
A/P	213512	07/08/26	75.00	DOWELL PEST CONTROL
A/P	213513	07/08/26	825.00	EL CAMPO REFRIGERATION
A/P	213514	07/08/26	82.96	FEDERAL EXPRESS CORP.
A/P	213515	07/08/26	2,008.20	FISHER HEALTHCARE
A/P	213516	07/08/26	7,916.67	FUJI FILM
A/P	213517	07/08/26	588.13	FUSION CONNECT
A/P	213518	07/08/26	2,421.25	FUSION MEDICAL STAFFING, LLC
A/P	213519	07/08/26	1,083.94	GE PRECISION HEALTHCARE, LLC
A/P	213520	07/08/26	10,469.95	GREAT AMERICA FINANCIAL SVCS
A/P	213521	07/08/26	22.09	HEALTH CARE LOGISTICS INC
A/P	213522	07/08/26	564.50	IMPERIAL DADE
A/P	213523	07/08/26	110.50	INTOXIMETERS INC
A/P	213524	07/08/26	1,264.08	JACK WU
A/P	213525	07/08/26	895.00	M G TRUST
A/P	213526	07/08/26	2,312.80	MALEK INC
A/P	213527	07/08/26	2,706.33	MCKESSON MEDICAL SURGICAL INC
A/P	213528	07/08/26	.00	VOIDED
A/P	213529	07/08/26	6,600.72	MEDLINE INDUSTRIES INC
A/P	213530	07/08/26	550.32	MMC AUXILIARY GIFT SHOP
A/P	213531	07/08/26	2,830.78	NATIONAL FARM LIFE INSURANCE
A/P	213532	07/08/26	2,549.00	NOVITAS SOLUTIONS - PART A
A/P	213533	07/08/26	198.00	PITNEY BOWES INC
A/P	213534	07/08/26	355.00	PORT LAVACA WAVE
A/P	213535	07/08/26	837.09	QUIDELORTHO SALES COMPANY LLC
A/P	213536	07/08/26	1,813.46	SERVICE SUPPLY OF VICTORIA INC
A/P	213537	07/08/26	588.90	SMITH & NEPHEW, INC.
A/P	213538	07/08/26	6,123.56	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	213539	07/08/26	10,230.40	SPBS CLINICAL EQUIPMENT SRVC
A/P	213540	07/08/26	3,360.49	STERICYCLE, INC
A/P	213541	07/08/26	3,600.00	SURGICAL DIRECT SOUTH
A/P	213542	07/08/26	527.44	SYSMEX AMERICA, INC.
A/P	213543	07/08/26	57.00	TEXAS DEPARTMENT OF HEALTH
A/P	213544	07/08/26	293.97	TRI-ANIM HEALTH SERVICES INC

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	213545	07/08/26	1,604.25	TRIAGE, LLC
A/P	213546	07/08/26	524.89	TRIOSE, INC
A/P	213547	07/08/26	14,662.10	UNIFIRST HOLDINGS INC
A/P	213548	07/08/26	3,387.71	WERFEN USA LLC
A/P	213549	07/08/26	150.00	WEST COAST MEDICAL RESOURCES
A/P	213550	07/08/26	1,000.00	YOUR PHONE GUYS LLC
A/P	213551	07/08/26	214,275.56	GOLDENCREEK HEALTHCARE
A/P	213552	07/08/26	12,763.41	LAVACA BAY NURSING AND REHAB
A/P	213553	07/08/26	116,465.56	SOLERA WEST HOUSTON
A/P	213554	07/08/26	70,845.70	TUSCANY VILLAGE
TOTALS:			706,742.74	

12,763.41 ← lavaca bay
214,275.56 ← golden creek
70,845.70 ← tuscany
116,465.56 ← solera
292,392.51 ← payables
706,742.74 ✓

Morris & Dickson Invoices

Invoice Date	Due Date	Invoice Number	Amount
6/26/2026	7/10/2026	4978639	2,277.23
6/28/2026	7/10/2026	4983014	94.81
6/28/2026	7/10/2026	4983015	1,834.94
6/29/2026	7/10/2026	4987996	21.43
6/29/2026	7/10/2026	4987997	379.35
6/30/2026	7/10/2026	4994479	4,273.26
6/30/2026	7/10/2026	4994480	1,557.94
7/1/2026	7/25/2026	4998459	47.36
7/1/2026	7/25/2026	4998460	120.49
7/1/2026	7/25/2026	4999147	15.17
7/1/2026	7/25/2026	4999148	425.79
7/2/2026	7/25/2026	5005339	98.43
7/2/2026	7/25/2026	5005340	90.85
7/2/2026	7/25/2026	5005341	1,234.91
7/2/2026	7/25/2026	5005807	122.75
			12,594.71

APPROVED ON

JUL 06 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Caitlin Clevenger - Controller

McKESSON

Company: 8000

STATEMENT

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 07/03/2026 Page: 002

DC: 8115
Customer INV SuppID:
Territory:

Customer: 632536
Date: 07/03/2026

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

As of: 07/03/2026 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 **PLEASE CHECK ANY**
Date: 07/03/2026 **ITEMS NOT PAID (✓)**

National Account 632536

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 7,650.28 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 07/07/2026,
Pay This Amount: 7,497.29 USD

If Paid After 07/07/2026,
Pay this Amount: 7,650.28 USD

Due If Paid On Time:
USD 7,497.29

Disc lost if paid late:
152.99

Due if Paid Late:
USD 7,650.28

7,475.66 +
21.63 +
7,497.29 *

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

Company: 8000

STATEMENT

As of: 07/03/2026 Page: 001

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 256342
Date: 07/03/2026

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

As of: 07/03/2026 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

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

Cust: 256342
Date: 07/03/2026

PLEASE CHECK ANY ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342	WALMART 1098/MEM MED PHS										
06/27/2026	07/07/2026	7643093967	286282358	115Invoice	3.40	169.93		166.53		7643093967	
06/27/2026	07/07/2026	7643093968	279097854	115Invoice	0.01	0.32		0.31		7643093968	
06/27/2026	07/07/2026	7643093969	280590435	115Invoice	0.01	0.63		0.62		7643093969	
06/27/2026	07/07/2026	7643093970	278023847	115Invoice	0.01	0.63		0.62		7643093970	
06/27/2026	07/07/2026	7643093971	279765515	115Invoice	0.01	0.63		0.62		7643093971	
06/27/2026	07/07/2026	7643093972	279843948	115Invoice	0.01	0.63		0.62		7643093972	
06/27/2026	07/07/2026	7643093973	277775692	115Invoice	0.01	0.63		0.62		7643093973	
06/27/2026	07/07/2026	7643093974	286681278	115Invoice	5.11	255.65		250.54		7643093974	
06/29/2026	07/07/2026	7643326890	286040182	115Invoice	10.88	544.04		533.16		7643326890	
06/29/2026	07/07/2026	7643326891	286198099	115Invoice	5.44	272.02		266.58		7643326891	
06/29/2026	07/07/2026	7643326892	286699512	115Invoice	2.16	107.84		105.68		7643326892	
06/29/2026	07/07/2026	7643326893	278023847	115Invoice	0.01	0.32		0.31		7643326893	
06/29/2026	07/07/2026	7643326894	277871374	115Invoice	9.12	455.86		446.74		7643326894	
06/29/2026	07/07/2026	7643326895	283634434	115Invoice	2.36	118.22		115.86		7643326895	
06/30/2026	07/07/2026	7643603629	286282358	115Invoice	1.53	76.28		74.75		7643603629	
06/30/2026	07/07/2026	7643603630	286772068	115Invoice	0.01	0.63		0.62		7643603630	
07/01/2026	07/07/2026	7643833536	287554013	115Invoice	5.11	255.65		250.54		7643833536	
07/01/2026	07/07/2026	7643833537	278023847	115Invoice	0.01	0.63		0.62		7643833537	
07/01/2026	07/07/2026	7643833538	286282358	115Invoice	2.37	118.34		115.97		7643833538	
07/01/2026	07/07/2026	7643833539	286282358	115Invoice	5.44	272.02		266.58		7643833539	
07/01/2026	07/07/2026	7643833540	287485211	115Invoice	16.70	835.20		818.50		7643833540	
07/02/2026	07/07/2026	7644081968	286612746	115Invoice	60.65	3,032 36		2,971.71		7644081968	
07/02/2026	07/07/2026	7644081969	277871374	115Invoice	9.12	455.86		446.74		7644081969	
07/03/2026	07/07/2026	7644290361	287394729	115Invoice	5.44	272.02		266.58		7644290361	
07/03/2026	07/07/2026	7644290362	281632092	115Invoice	2.18	109.22		107.04		7644290362	
07/03/2026	07/07/2026	7644290363	286313556	115Invoice	5.44	272.02		266.58		7644290363	
07/03/2026	07/07/2026	7644290364	287788074	115Invoice	0.01	0.63		0.62		7644290364	

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

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

As of: 07/03/2026 Page: 002

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 256342
Date: 07/03/2026

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

As of: 07/03/2026 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 **PLEASE CHECK ANY**
Date: 07/03/2026 **ITEMS NOT PAID (✓)**

National Account 632536

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

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 7,628.21 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 54,665.24
06/29/2026

If Paid By 07/07/2026,
Pay This Amount: 7,475.66 USD

If Paid After 07/07/2026,
Pay this Amount: 7,628.21 USD

Due If Paid On Time:
USD 7,475.66

Disc lost if paid late:
152.55

Due If Paid Late:
USD 7,628.21

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

Company: 8000

HEB PHCY WHSE/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 07/03/2026 Page: 001

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 820405
Date: 07/03/2026

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

As of: 07/03/2026 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 **PLEASE CHECK ANY**
Date: 07/03/2026 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 820405 HEB PHCY WHSE/MEM MED PHS											
07/03/2026	07/07/2026	7644141515	B2607-055-407496	115Invoice	0.44	22.07		21.63		7644141515	

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: 22.07 USD

Future Due:	0.00			**Due If Paid On Time:** USD	21.63
		If Paid By 07/07/2026,			
Past Due:	0.00	**Pay This Amount:**	21.63 USD	**Disc lost if paid late:**	0.44
Last Payment	2,898.13	**If Paid After 07/07/2026,**		**Due If Paid Late:**	
06/22/2026		**Pay this Amount:**	22.07 USD	USD	22.07

For AR Inquiries please contact 800-867-0333

cencora

STATEMENT

Statement Number: 72411966
Date: 07-03-2026

Serviced By:
AMERISOURCEBERGEN DRUG CORP
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101

DEA: RA0289276
866-451-9655

Customer:
WALGREENS #12494 340B
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2509

Remit To:
AMERISOURCEBERGEN
PO Box 905223
CHARLOTTE NC 28290-5223

Customer Number
100135284 / 037028186

Terms
Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	49.61
Past Due:	0.00
Total Due:	49.61
Account Balance:	49.61

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
06-29-2026	07-10-2026	3255651331	7012191864	Invoice	15.22		0.00	15.22
06-30-2026	07-10-2026	3255800443	7012198789	Invoice	17.82		0.00	17.82
07-01-2026	07-10-2026	3255937964	7012206446	Invoice	16.57		0.00	16.57

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
49.61	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
07-03-2026	(1,231.09)

Reminders

Due Date	Amount
07-10-2026	49.61
Total Due:	49.61

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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.

cencora

STATEMENT

Statement Number: 72420237
Date: 07-03-2026

Serviced By:
AMERISOURCEBERGEN DRUG CORP
12577 STATELINE ROAD
OLIVE BRANCH MS 38654

DEA: RA0504743
866-451-9655

Customer:
ACCREDO MEMPHIS 340B
MEMORIAL MEDICAL CENTER
1620 CENTURY CENTER PKWY #109
MEMPHIS TN 38134-8849

Remit To:
AMERISOURCEBERGEN
POST OFFICE
PO Box 29808
NEW YORK NY 10087-9808

Customer Number
100302028 / 100302028

Terms
Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	268.10
Past Due:	0.00
Total Due:	268.10
Account Balance:	268.10

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
06-30-2026	07-10-2026	3255784722	B0629017104519	Invoice	268.10		0.00	268.10

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
268.10	0.00	0.00	0.00	0.00	0.00	0.00

Reminders

Due Date	Amount
07-10-2026	268.10
Total Due:	268.10

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

cencora

STATEMENT

Statement Number: 72426078
Date: 07-03-2026

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

DEA: RA0316958
866-451-9655

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

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

Customer Number
100566356 / 100566356

Terms
Sat - Fri Due in 7 days

Summary	
Not Yet Due:	0.00
Current:	13.06
Past Due:	0.00
Total Due:	13.06
Account Balance:	13.06

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
06-29-2026	07-10-2026	3255697779	7012198915	Invoice	7.10		0.00	7.10
07-01-2026	07-10-2026	3255980225	7012211172	Invoice	5.96		0.00	5.96

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
13.06	0.00	0.00	0.00	0.00	0.00	0.00

Reminders

Due Date	Amount
07-10-2026	13.06
Total Due:	13.06

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHKNO	GRPNO	LOCNO	EMPNO	DEPNO	CLMPRE	CLMNO	CLMSUF	CHKDT	AMT	CLMTP	PAYEE	PAYTO	CVGCD	CVGTP	FIRSTNAME	LASTNAME	CODE	VOID	FROMDT	THRUDT	PRVNO
8878	76351	1	1	0	2026	169003652	0	6/26/2026	$21,459.77	1	TRUESCRIPTS MANAGEMENT SERVICE LLC	P	517	0	[redacted]		PCS	F	6/1/2026	6/14/2026	464334244
8879	76351	1	1	0	2026	176001515	0	6/26/2026	$487.87	1	CIGNA HEALTH AND LIFE INSURANCE COMPANY	P	846	0	[redacted]		INVC	F	7/1/2025	7/31/2025	591031071
8880	76351	2	38	0	2026	163000732	0	6/26/2026	$20.37	1	CLINICAL PATHOLOGY LABORATORIES INC	P	172	0	[redacted]		AB	F	6/3/2026	6/3/2026	742554159
8881	76351	2	38	0	2026	167001190	0	6/26/2026	$71.00	1	VICTORIA WOMENS CLINIC ASSOCIATES	P	172	0	[redacted]		AB	F	6/3/2026	6/3/2026	741831291
8885	76351	2	86	0	2026	166001718	0	6/26/2026	$110.12	1	CBLPATH	P	185	0	[redacted]		LAB	F	6/2/2026	6/2/2026	320098824
8886	76351	2	58	1	2026	168000123	0	6/26/2026	$148.25	1	VALLEY FAMILY HEALTH CARE	P	177	0	[redacted]		OV	F	5/27/2026	5/27/2026	820371383
8888	76351	2	38	0	2026	175001384	0	6/26/2026	$910.00	1	CAPCOST/CAPROCK HEALTHPLANS	P	933	0	[redacted]		DISP	F	11/21/2025	11/21/2025	261569907
8889	76351	3	83	0	2026	166001664	0	6/26/2026	$13.37	1	DIAGNOSTIC IMAGING ASSOCIATES, PA	P	189	0	[redacted]		ERD	F	5/12/2026	5/12/2026	760686474
8890	76351	3	93	0	2026	168000638	0	6/26/2026	$13.37	1	DIAGNOSTIC IMAGING ASSOCIATES, PA	P	189	0	[redacted]		ERD	F	5/2/2026	5/2/2026	760686474
8891	76351	3	69	1	2026	166001693	0	6/26/2026	$29.10	1	PORT LAVACA CLINIC	P	177	0	[redacted]		OV	F	6/10/2026	6/10/2026	742605670
8892	76351	3	79	0	2026	163000711	0	6/26/2026	$43.21	1	MHK FAMILY PRACTICE PLLC	P	360	0	[redacted]		POV	F	5/22/2026	5/22/2026	994807850
8895	76351	3	8	0	2026	168000666	0	6/26/2026	$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0	[redacted]		OV	F	6/12/2026	6/12/2026	742605670
8897	76351	3	8	0	2026	166000622	0	6/26/2026	$96.83	1	HEALTH AND WELLNESS SOLUTIONS PA	P	457	0	[redacted]		OVS	F	6/9/2026	6/9/2026	260406833
8898	76351	3	10	0	2026	169001128	0	6/26/2026	$118.59	1	VICTORIA EYE CENTER	P	457	0	[redacted]		OVS	F	6/10/2026	6/10/2026	742208337
8899	76351	3	83	0	2026	167001191	0	6/26/2026	$168.08	1	CITIZENS MEDICAL PROFESSIONALS	P	188	0	[redacted]		HV	F	5/13/2026	5/14/2026	471158090
8900	76351	3	22	0	2026	167000246	0	6/26/2026	$186.50	1	HOUSTON METHODIST SPECIALTY PHYSICIANS	P	684	0	[redacted]		RPTO	F	6/10/2026	6/10/2026	332241086
8902	76351	3	50	0	2026	167001164	0	6/26/2026	$247.81	1	SINGLETON ASSOCIATES PA	P	172	0	[redacted]		AB	F	6/5/2026	6/5/2026	741680498
8906	76351	3	72	0	2026	135000737	0	6/26/2026	$862.36	1	TMH PHYSICIANS AND SURGEONS PLLC	P	178	0	[redacted]		SO	F	12/22/2025	12/22/2025	455185756
8907	76360	2	11	0	2026	163000764	0	6/26/2026	$20.51	1	MELISSA A KAINER ERWIN MD PA	P	177	0	[redacted]		OV	F	6/10/2026	6/10/2026	200802489
8908	76360	3	21	1	2026	169004030	0	6/26/2026	$38.75	1	HPCMS LLC	P	604	0	[redacted]		CASE	F	5/1/2026	5/1/2026	271837628
8909	76360	3	30	1	2026	169004074	0	6/26/2026	$38.75	1	HPCMS LLC	P	604	0	[redacted]		CASE	F	5/1/2026	5/1/2026	271837628
8910	76360	3	128	0	2026	168000612	0	6/26/2026	$40.15	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	6/4/2026	6/4/2026	741680498
8911	76360	3	128	1	2026	168000707	0	6/26/2026	$41.42	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	6/1/2026	6/1/2026	741680498
8912	76360	3	30	0	2026	167001234	0	6/26/2026	$51.15	1	SINGLETON ASSOCIATES PA	P	189	0	[redacted]		ERD	F	5/31/2026	5/31/2026	741680498
8914	76360	3	149	0	2026	167001187	0	6/26/2026	$59.68	1	CLINICAL PATHOLOGY LABORATORIES INC	P	172	0	[redacted]		AB	F	4/24/2026	4/24/2026	742554159
8915	76360	3	30	0	2026	163000742	0	6/26/2026	$87.47	1	ESS OF PORT LAVACA LLC	P	189	0	[redacted]		ERD	F	5/31/2026	5/31/2026	815248556
8917	76360	3	157	0	2026	167000241	0	6/26/2026	$104.48	1	CRESCENT VIEW MEDICAL CLINICS	P	184	0	[redacted]		LBDR	F	6/8/2026	6/8/2026	452547088
8919	76360	3	134	1	2026	169001778	0	6/26/2026	$107.13	1	TCPSO	P	177	0	[redacted]		OV	F	9/3/2025	9/3/2025	260834681
8920	76360	3	134	1	2026	169001788	0	6/26/2026	$112.55	1	TCPSO	P	188	0	[redacted]		HV	F	2/16/2026	2/16/2026	260834681
8921	76360	3	2	0	2026	167001230	0	6/26/2026	$121.11	1	LIVER SPECIALISTS OF TEXAS PA	P	752	0	[redacted]		TELS	F	6/10/2026	6/10/2026	760678757
8922	76360	3	138	2	2026	168000713	0	6/26/2026	$122.00	1	COUNSELING4LIFE LLC	P	360	0	[redacted]		POV	F	6/11/2026	6/11/2026	455131564
8923	76360	3	83	0	2026	167001189	0	6/26/2026	$125.57	1	SINGLETON ASSOCIATES PA	P	603	0	[redacted]		US	F	6/1/2026	6/1/2026	741680498
8925	76360	3	134	1	2026	169001786	0	6/26/2026	$135.03	1	TCPSO	P	188	0	[redacted]		HV	F	2/12/2026	2/12/2026	260834681
8926	76360	3	59	1	2026	167001144	0	6/26/2026	$153.43	1	FAMILY CARE CENTER	P	360	0	[redacted]		POV	F	6/8/2026	6/8/2026	810970561
8928	76360	3	134	1	2026	169001800	0	6/26/2026	$216.05	1	TCPSO	P	188	0	[redacted]		HV	F	2/24/2026	2/24/2026	260834681
8929	76360	3	134	1	2026	169001802	0	6/26/2026	$221.00	1	TCH PEDIATRIC PATHOLOGY CONSULTANTS	P	185	0	[redacted]		LAB	F	1/30/2026	1/30/2026	470861099
8930	76360	3	134	1	2026	169001799	0	6/26/2026	$225.10	1	TCPSO	P	188	0	[redacted]		HV	F	2/21/2026	2/22/2026	260834681
8931	76360	3	134	1	2026	169001781	0	6/26/2026	$229.29	1	TCPSO	P	457	0	[redacted]		OVS	F	9/2/2025	9/2/2025	260834681
8932	76360	3	30	0	2026	168000701	0	6/26/2026	$247.80	1	SINGLETON ASSOCIATES PA	P	321	0	[redacted]		MRIO	F	6/1/2026	6/1/2026	741680498
8933	76360	3	26	0	2026	168000719	0	6/26/2026	$247.81	1	SINGLETON ASSOCIATES PA	P	172	0	[redacted]		AB	F	6/2/2026	6/2/2026	741680498
8935	76360	3	2	0	2026	166001631	0	6/26/2026	$256.20	1	SEAN K OSULLIVAN MD DABR	P	172	0	[redacted]		AB	F	6/10/2026	6/10/2026	742765481
8936	76360	3	68	1	2026	167001152	0	6/26/2026	$270.06	1	SINGLETON ASSOCIATES PA	P	321	0	[redacted]		MRIO	F	6/4/2026	6/4/2026	741680498
8937	76360	3	46	0	2026	169002064	0	6/26/2026	$270.06	1	SINGLETON ASSOCIATES PA	P	321	0	[redacted]		MRIO	F	6/2/2026	6/2/2026	741680498
8938	76360	3	134	1	2026	169001798	0	6/26/2026	$274.80	1	TCPSO	P	188	0	[redacted]		HV	F	2/20/2026	2/23/2026	260834681
8940	76360	3	134	1	2026	169001793	0	6/26/2026	$324.50	1	TCPSO	P	188	0	[redacted]		HV	F	2/18/2026	2/19/2026	260834681
8941	76360	3	128	1	2026	168000716	0	6/26/2026	$335.34	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	6/1/2026	6/1/2026	741680498
8942	76360	3	134	2	2026	169000013	0	6/26/2026	$444.70	1	TCPSO	P	183	0	[redacted]		RAD	F	1/9/2026	1/9/2026	260834681
8944	76360	3	134	1	2026	169001790	0	6/26/2026	$1,890.00	1	TCPSO	P	175	0	[redacted]		AI	F	2/10/2026	2/10/2026	260834681
8945	76360	3	138	3	2026	166001114	0	6/26/2026	$4,172.33	1	MHHS HERMANN HOSPITAL	P	434	0	[redacted]		OHS	F	5/28/2026	5/29/2026	741152597
8946	76370	3	44	0	2026	169004053	0	6/26/2026	$38.75	1	HPCMS LLC	P	604	0	[redacted]		CASE	F	5/18/2026	5/18/2026	271837628
									$36,075.46 ✓												

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BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHKNO	GRPNO	LOGNO	EMPNO	DEPNO	CMPDT	CLMNO	CLMSEQ	CHKDT	AMT	CLMTP	PAYEE	PAYTO	CVGCD	SVCTP	FIRSTNAME	LASTNAME	CODE	VOID	PRGMDT	TRNDT	BRKNO
8578	76351	2	86	0	2026	153001165	0	6/5/2026	$19.06	1	QUEST DIAGNOSTICS ATLANTA	P	185	0			LAB	F	5/22/2026	5/22/2026	382084239
8581	76351	2	86	0	2026	132001190	0	6/5/2026	$79.88	1	SINGLETON ASSOCIATES PA	P	603	0			US	F	4/28/2026	4/28/2026	741680498
8583	76351	2	86	0	2026	153001231	0	6/5/2026	$125.79	1	QUEST DIAGNOSTICS ATLANTA	P	185	0			LAB	F	5/22/2026	5/22/2026	382084239
8584	76351	2	86	0	2026	132001215	0	6/5/2026	$169.39	1	HOUSTON NEUROLOGY ASSOCIATES	P	457	0			OVS	F	5/5/2026	5/5/2026	742107965
8585	76351	2	33	0	2026	134000479	0	6/5/2026	$184.67	1	BAYLOR COLLEGE OF MEDICINE	P	457	0			OVS	F	4/27/2026	4/27/2026	300791563
8586	76351	2	86	0	2026	134000940	0	6/5/2026	$184.94	1	QUEST DIAGNOSTICS ATLANTA	P	185	0			LAB	F	4/17/2026	4/17/2026	382084239
8587	76351	2	5	0	2026	132001193	0	6/5/2026	$214.20	1	PHYSICIANS REFERRAL SERVICE	P	188	0			HV	F	5/8/2026	5/8/2026	760273984
8588	76351	2	5	0	2026	133000894	0	6/5/2026	$214.20	1	PHYSICIANS REFERRAL SERVICE	P	188	0			HV	F	5/10/2026	5/10/2026	760273984
8589	76351	2	5	0	2026	133000931	0	6/5/2026	$214.20	1	PHYSICIANS REFERRAL SERVICE	P	188	0			HV	F	5/9/2026	5/9/2026	760273984
8590	76351	2	5	0	2026	134000931	0	6/5/2026	$214.20	1	PHYSICIANS REFERRAL SERVICE	P	188	0			HV	F	5/11/2026	5/11/2026	760273984
8591	76351	2	5	0	2026	127000742	0	6/5/2026	$270.30	1	PHYSICIANS REFERRAL SERVICE	P	188	0			HV	F	4/21/2026	4/21/2026	760273984
8592	76351	2	5	0	2026	132001255	0	6/5/2026	$527.85	1	PHYSICIANS REFERRAL SERVICE	P	177	0			OV	F	5/7/2026	5/7/2026	760273984
8593	76351	2	5	0	2026	132001273	0	6/5/2026	$613.70	1	PHYSICIANS REFERRAL SERVICE	P	315	0			PET	F	5/6/2026	5/6/2026	760273984
8594	76351	3	62	0	2026	132000995	0	6/5/2026	$9,440.14	1	CITIZENS MEDICAL CENTER	P	423	0			IMC	F	1/16/2026	1/26/2026	741698143
8595	76351	3	92	0	2026	153000019	0	6/5/2026	$21.21	1	CIGNA HEALTH AND LIFE INSURANCE COMPANY	P	846	0			INVC	F	5/14/2026	5/14/2026	591031071
8596	76351	3	83	0	2026	138000389	0	6/5/2026	$31.63	1	SINGLETON ASSOCIATES PA	P	189	0			ERD	F	4/27/2026	4/27/2026	741680498
8597	76351	3	42	0	2026	133001000	0	6/5/2026	$40.33	1	SINGLETON ASSOCIATES PA	P	181	0			XRAY	F	5/4/2026	5/4/2026	741680498
8600	76351	3	90	3	2026	127000746	0	6/5/2026	$62.76	1	TEXAS PEDIATRIC AND ADOLESCENT GYNECOLOG	P	728	0			TELM	F	5/4/2026	5/4/2026	870900480
8601	76351	3	39	0	2026	131000842	0	6/5/2026	$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0			OV	F	5/6/2026	5/6/2026	742605670
8602	76351	3	29	0	2026	133000897	0	6/5/2026	$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	360	0			POV	F	5/8/2026	5/8/2026	742605670
8603	76351	3	8	0	2026	134000935	0	6/5/2026	$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0			OV	F	5/11/2026	5/11/2026	742605670
8604	76351	3	50	0	2026	132000700	0	6/5/2026	$71.83	1	VICTORIA EYE CENTER	P	457	0			OVS	F	4/30/2026	4/30/2026	742208337
8608	76351	3	79	0	2026	131000821	0	6/5/2026	$129.48	1	SPECIALTY ASSOCIATES OF WEST HOUSTON	P	457	0			OVS	F	4/30/2026	4/30/2026	452298151
8611	76351	3	83	0	2026	133000923	0	6/5/2026	$186.32	1	RICHARD H LEGGETT DO	P	684	0			RPTO	F	5/6/2026	5/6/2026	742800212
8613	76351	3	23	0	2026	133000988	0	6/5/2026	$241.28	1	SINGLETON ASSOCIATES PA	P	321	0			MRIO	F	4/27/2026	4/27/2026	741680498
8614	76351	3	14	0	2026	133000906	0	6/5/2026	$241.29	1	SINGLETON ASSOCIATES PA	P	172	0			AB	F	5/4/2026	5/4/2026	741680498
8615	76351	3	42	0	2026	133001012	0	6/5/2026	$264.19	1	SINGLETON ASSOCIATES PA	P	321	0			MRIO	F	5/4/2026	5/4/2026	741680498
8616	76351	3	24	0	2026	128000772	0	6/5/2026	$267.84	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0			OV	F	5/5/2026	5/5/2026	742605670
8619	76351	3	81	0	2026	128000754	0	6/5/2026	$683.59	1	OLEANDER EMERGENCY MEDICINE ASSOCIATES	P	189	0			ERD	F	12/9/2025	12/9/2025	454288136
8624	76360	2	11	0	2026	134000432	0	6/5/2026	$38.41	1	COMMUNITY PATHOLOGY ASSOCIATES	P	185	0			LAB	F	9/18/2025	9/18/2025	760421006
8625	76360	2	72	0	2026	127000737	0	6/5/2026	$75.67	1	FAYE N TUPA OD PC	P	457	0			OVS	F	11/24/2025	11/24/2025	261566984
8626	76360	2	11	0	2026	133001006	0	6/5/2026	$112.44	1	REGIONAL EMPLOYEE ASSISTANCE PROGRAM INC	P	177	0			OV	F	4/28/2026	4/28/2026	760423386
8628	76360	2	62	0	2026	133001019	0	6/5/2026	$241.29	1	SINGLETON ASSOCIATES PA	P	172	0			AB	F	5/4/2026	5/4/2026	741680498
8630	76360	2	29	0	2026	135000231	0	6/5/2026	$763.56	1	COMMUNITY PATHOLOGY ASSOCIATES	P	185	0			LAB	F	6/30/2025	6/30/2025	760421006
8632	76360	3	105	0	2026	138000532	0	6/5/2026	$31.63	1	SINGLETON ASSOCIATES PA	P	189	0			ERD	F	5/2/2026	5/2/2026	741680498
8633	76360	3	107	0	2026	127000762	0	6/5/2026	$41.34	1	AARON M MCGUIRE OD	P	457	0			OVS	F	4/29/2026	4/29/2026	742208337
8637	76360	3	112	0	2026	128000739	0	6/5/2026	$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	360	0			POV	F	5/5/2026	5/5/2026	742605670
8640	76360	3	2	0	2026	132001216	0	6/5/2026	$96.83	1	HEALTH AND WELLNESS SOLUTIONS PA	P	752	0			TELS	F	5/7/2026	5/7/2026	260406833
8641	76360	3	59	1	2026	133000947	0	6/5/2026	$127.79	1	FAMILY CARE CENTER	P	360	0			POV	F	5/4/2026	5/4/2026	810970561
8643	76360	3	151	0	2026	127000798	0	6/5/2026	$241.28	1	SINGLETON ASSOCIATES PA	P	321	0			MRIO	F	4/21/2026	4/21/2026	741680498
8644	76360	3	60	0	2026	133000942	0	6/5/2026	$241.29	1	SINGLETON ASSOCIATES PA	P	172	0			AB	F	5/4/2026	5/4/2026	741680498
8648	76360	3	132	0	2026	132000695	0	6/5/2026	$338.62	1	VICTORIA WOMENS CLINIC	P	177	0			OV	F	5/4/2026	5/4/2026	741831291
8650	76360	3	146	0	2026	131000815	0	6/5/2026	$963.05	1	CITIZENS MEDICAL PROFESSIONALS	P	176	0			AO	F	2/25/2026	2/25/2026	471158090
8653	76370	3	24	0	2026	132001234	0	6/5/2026	$709.77	1	SEAN K OSULLIVAN MD DABR	P	431	0			SFS	F	5/7/2026	5/7/2026	742765481
8654	76370	3	24	0	2026	135001116	0	6/5/2026	$910.91	1	DETAR HEALTHCARE SYSTEM	P	186	0			HLAB	F	5/7/2026	5/7/2026	621754940
									$19,911.71												

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CALHOUN COUNTY, TEXAS

CLMNO	GRPNO	LOCNO	EMPNO	DEPNO	CLMBRE	CLMNO	CLMSUF	CLMDT	AMT	CLMTP	PAYEE	PAYTO	CVGID	CVGID	PATIENT_FIRSTNAME	PATIENT_LASTNAME	CODE	VOID	ENDMDT
8556	76351	1	1	0	2026	142001712	0	2026-06-01	$14,841.79	1	TRUESCRIPTS MANAGEMENT SERVICE LLC	P	517	0	[redacted]		PCS	F	2026-05-04
8557	76351	1	1	0	2026	146002858	0	2026-06-01	$1,506.14	1	CIGNA HEALTH AND LIFE INSURANCE COMPANY	P	846	0			INVC	F	2025-04-01
8559	76351	2	86	0	2026	126000528	0	2026-06-01	$297.68	1	MEMORIAL HERMANN HEALTH SYSTEM	P	603	0			US	F	2026-04-28
8560	76351	3	79	1	2026	126000836	0	2026-06-01	$41.47	1	MHK FAMILY PRACTICE PLLC	P	177	0			OV	F	2026-04-24
8561	76351	3	79	0	2026	126000743	0	2026-06-01	$43.21	1	MHK FAMILY PRACTICE PLLC	P	177	0			OV	F	2026-04-21
8562	76351	3	9	2	2026	138000044	0	2026-06-01	$61.96	1	DRISCOLL CHP	P	324	0			CAT	F	2025-07-16
8563	76351	3	62	0	2026	141000239	0	2026-06-01	$124.31	1	UT PHYSICIANS	P	484	0			ODXS	F	2026-02-03
8564	76351	3	43	0	2026	126000822	0	2026-06-01	$159.84	1	CARDIOVASCULAR CARE PROVIDERS INC	P	457	0			OVS	F	2026-04-30
8565	76351	3	76	0	2026	127000400	0	2026-06-01	$188.89	1	HOUSTON METHODIST SPECIALTY PHYSICIANS	P	696	0			BOT	F	2026-04-30
8566	76351	3	12	0	2026	131000364	0	2026-06-01	$205.70	1	CITIZENS MEDICAL PROFESSIONAL	P	176	0			AO	F	2026-04-02
8567	76351	3	79	1	2026	126000833	0	2026-06-01	$210.84	1	CITIZENS MEDICAL PROFESSIONALS	P	484	0			ODXS	F	2026-03-04
8568	76351	3	43	0	2026	126000817	0	2026-06-01	$220.42	1	CARDIOVASCULAR CARE PROVIDERS INC	P	484	0			ODXS	F	2026-04-30
8569	76351	3	12	0	2026	141000586	0	2026-06-01	$243.94	1	HWCA PLLC	P	172	0			AB	F	2026-04-22
8570	76351	3	76	0	2026	126000010	0	2026-06-01	$1,124.93	1	ACCREDO HEALTH GROUP	P	431	0			SFS	F	2025-09-15
8572	76360	3	41	2	2026	126000751	0	2026-06-01	$25.38	1	SINGLETON ASSOCIATES PA	P	189	0			ERD	F	2026-04-22
8573	76360	3	143	0	2026	126000811	0	2026-06-01	$30.36	1	SINGLETON ASSOCIATES PA	P	181	0			XRAY	F	2026-04-20
8574	76360	3	63	0	2026	126000786	0	2026-06-01	$31.61	1	SINGLETON ASSOCIATES PA	P	181	0			XRAY	F	2026-04-21
8575	76360	3	138	2	2026	126000769	0	2026-06-01	$87.00	1	COUNSELING4LIFE LLC	P	360	0			POV	F	2026-05-04
8577	76360	3	134	2	2026	128000669	0	2026-06-01	$1,481.65	1	TCPSO	P	188	0			HV	F	2026-01-12
									$20,927.12										

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BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT — June 29, 2026 - July 6, 2026

Date	Bank Description	MMC Notes	Amount	CPSI "Handwritten Check" #	GL number
6/29/2026	PAY PLUS PPSACCOUNT - ACHTrans FeeTransfer R EF#150245875 150015966	- 3rd Party Payor Fee	650.80	902521	40440076
6/29/2026	TSYS/TRANSFIRST - CR CD DEP 41399801332393 MEMORIAL MEDICAL CENTER CR CD DEP 062926 41399801332393	- Credit Card Processing Fee	733.21	902522	40440076
6/30/2026	MCKESSON DRUG - AUTO ACH ACH07119177	- 340B Drug Program Expense	54,665.24	902523	60310000
6/30/2026	PAY PLUS PPSACCOUNT - ACHTrans FeeTransfer R EF#150611124 150433524	- 3rd Party Payor Fee	254.45	902524	40440076
7/1/2026	PAY PLUS PPSACCOUNT - ACHTrans FeeTransfer R EF#151008522 150888853	- 3rd Party Payor Fee	158.24	902525	40440076
7/1/2026	Domestic Wire Withdrawal WIRE OUT MORRIS + DI CKSON LLC	- Pharmacy Inventory Invoices	12,196.24	902526	10450000
7/2/2026	MEMORIAL MEDICAL - PAYROLL		385,141.65		
7/2/2026	AUTHNET GATEWAY - BILLING 148881455	- 3rd Party Payor Fee	25.00	902527	40440076
7/2/2026	HEALTHEQUITY INC - HealthEqui	- EmpDeduct/Employer Contribut	1,127.82	902528	PAYROLL- 20280000
7/2/2026	LOYALE LLC TRUBRIDGE9828 - RIDGE9828I 8704	- Credit Card Processing Fee online pymts	111.09	902529	40440076
7/2/2026	PAY PLUS PPSACCOUNT - ACHTrans FeeTransfer R EF#151421932 151212895	- 3rd Party Payor Fee	310.13	902530	40440076
7/3/2026	AMERISOURCE BERG - PAYMENTS 100007768	- 340B Drug Program Expense	1,231.09	902531	60310000
7/3/2026	MERCHANT BANKCD - INTERCHNG 971160913887	- Credit Card Processing Fee	154.82	902532	40440060
7/3/2026	MERCHANT BANKCD - FEE 971160913887	- Credit Card Processing Fee	149.73	902533	40440060
7/3/2026	MERCHANT BANKCD - DISCOUNT 971160913887	- Credit Card Processing Fee	292.15	902534	40440060
			457,201.66		

Caitlin Clevenger - Controller
Memorial Medical Center

July 6, 2026

*approved 7.1.26 cc

650.80 +
457,201.66 + 254.45 +
54,665.24 - 158.24 +
12,196.24 - 310.13 + payplus
385,141.65 - 1,373.62
1,127.82 -
1,231.09 - 733.21 +
1,373.62 111.09 + processing fee
1,441.00 154.82 +
25.00 149.73 +
0.00 292.15 +
1,441.00

25.00 + authnet gateway
25.00

PROSPERITY BANK

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

Date	Description	MMC Notes

Caitlin Clevenger - Controller
Memorial Medical Center

July 6, 2026

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CALHOUN COUNTY, TEXAS

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Calhoun County Auditor

07/01/2026 MEMORIAL MEDICAL CENTER 0

17:47 AP Open Invoice List ap_open_invoice.template

Due Dates Through: 07/17/2026

Vendor# Vendor Name Class Pay Code

12792 LAVACA BAY NURSING AND REHAB

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062426	ins. pay. dep. into mmc opt. correction	06/24/202	06/24/202	07/17/202			3,345.44	0.00	0.00	3,345.44
062926	"	06/24/202	06/29/202	07/17/202			4,082.36	0.00	0.00	4,082.36
062926A	"	06/24/202	06/29/202	07/17/202			232.42	0.00	0.00	232.42
062926B	"	06/24/202	06/29/202	07/17/202			257.56	0.00	0.00	257.56
062926C	"	06/29/202	06/29/202	07/17/202			4,845.63	0.00	0.00	4,845.63

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12792	LAVACA BAY NURSING AND REHAB	12,763.41	0.00	0.00	12,763.41

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	12,763.41	0.00	0.00	12,763.41

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CALHOUN COUNTY, TEXAS

Chk#213552

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07/01/2026 MEMORIAL MEDICAL CENTER 0

17:46 AP Open Invoice List ap_open_invoice.template

Due Dates Through: 07/17/2026

Vendor# Vendor Name Class Pay Code

11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062426C		06/24/202	06/24/202	07/17/202			11,727.08	0.00	0.00	11,727.08
062426A	ins. pay. dep. into nume opt. correction	06/24/202	06/24/202	07/17/202			51,403.17	0.00	0.00	51,403.17
062426B	"	06/24/202	06/24/202	07/17/202			65,273.02	0.00	0.00	65,273.02
062526	"	06/24/202	06/25/202	07/17/202			9,900.00	0.00	0.00	9,900.00
062626	"	06/24/202	06/26/202	07/17/202			700.79	0.00	0.00	700.79
062926	"	06/24/202	06/29/202	07/17/202			61,981.50	0.00	0.00	61,981.50
060426A	"	07/01/202	06/04/202	07/17/202			13,290.00	0.00	0.00	13,290.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	214,275.56	0.00	0.00	214,275.56

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	214,275.56	0.00	0.00	214,275.56

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CALHOUN COUNTY, TEXAS

CHK#213551

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JUL 02 2026

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07/02/2026 MEMORIAL MEDICAL CENTER 0

11:54 AP Open Invoice List ap_open_invoice.template

Due Dates Through: 07/17/2026

Vendor#	Vendor Name	Class	Pay Code
13004	TUSCANY VILLAGE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062426A		06/24/202	06/24/202	07/17/202			15,453.73	0.00	0.00	15,453.73
	ins. pay. dep. into nmc opt. correction									
062426	"	06/24/202	06/24/202	07/17/202			16,189.80	0.00	" 0.00	16,189.80
062526	"	06/24/202	06/25/202	07/17/202			2,821.00	0.00	" 0.00	2,821.00
062526B	"	06/24/202	06/25/202	07/17/202			16,002.15	0.00	" 0.00	16,002.15
062526A	"	06/24/202	06/25/202	07/17/202			520.00	0.00	" 0.00	520.00
062626	"	06/24/202	06/26/202	07/17/202			4,517.27	0.00	" 0.00	4,517.27
062626A	"	06/24/202	06/26/202	07/17/202			180.00	0.00	" 0.00	180.00
062926	"	06/24/202	06/29/202	07/17/202			10,199.00	0.00	" 0.00	10,199.00
062926A	"	06/24/202	06/29/202	07/17/202			4,557.00	0.00	" 0.00	4,557.00
062526C		07/01/202	06/05/202	07/17/202			405.75	0.00	0.00	405.75
	4Q2 QIPPayment NH Portion									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	13004	TUSCANY VILLAGE	70,845.70	0.00	0.00	70,845.70

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	70,845.70	0.00	0.00	70,845.70

APPROVED ON

JUL 02 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK #213554

Vendor#	Vendor Name	Class	Pay Code
11828	SOLERA WEST HOUSTON		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
062426	ins. pay. dep. into mmc opt. correction	06/24/202	06/24/202	07/17/202			8,273.75	0.00	0.00	8,273.75
062426A	"	06/24/202	06/24/202	07/17/202			108,191.81	0.00	" 0.00	108,191.81

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11828	SOLERA WEST HOUSTON	116,465.56	0.00	0.00	116,465.56

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	116,465.56	0.00	0.00	116,465.56

Chk#213553

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
7/6/2026

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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		85.19	-	0.12			85.31	0
						Bank Balance	85.31	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	(14.69)	
Broadmoor		100.56	-	0.12			100.68	0
						-	100.68	
						Bank Balance	100.68	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	0.68	
Crescent		100.00	-	5,648.29			5,748.29	5,648.29
						Bank Balance	5,748.29	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	5,648.29	
Fort Bend		100.41	-	0.12			100.53	
						Bank Balance	100.53	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	0.53	
Solera at W Houston		1,961.73	1,861.73	3.04			103.04	0
						Bank Balance	103.04	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	3.04	
						TOTAL TRANSFERS		5,648.29

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 111000614
Account #:

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

Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 111000614
Account:

Approved:
Caitlin Clevenger - Controller 7/6/2026

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.

Ashford Gardens	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
6/30/2026 Credit Interest	-	0.12		0.12
				-
				-
				-
	-	0.12	-	0.12

Broadmoor	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
6/30/2026 Credit Interest	-	0.12		0.12
				-
				-
				-
	-	0.12	-	0.12

Crescent	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
6/30/2026 Credit Interest	-	0.78		0.78
6/30/2026 PNC-ECHO - HCCLAIMPMT TRN*1*1251955371*1341 858379\ 746003411	-	5,647.51		5,647.51
				-
				-
	-	5,648.29	-	5,648.29

Fort Bend	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
6/30/2026 Credit Interest	-	0.12		0.12
				-
				-
				-
	-	0.12	-	0.12

Solera at West Houston	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
7/1/2026 Domestic Wire Withdrawal WIRE OUT CANTEX HEAL TH CARE CENTERS III	1,861.73	-		-
6/30/2026 Credit Interest	-	3.04		3.04
				-
				-
	1,861.73	3.04	-	3.04

TOTALS	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
	1,861.73	5,651.69	-	5,651.69

Balances Overview

PROSPERITY BANK

COUNTY OF CALHOUN TEXAS
AGIBSON
as of Jul 6, 2026 8:44:49 AM CDT

Account Activity

DDA(14)

	Current Balance	Available Balance
	$2,824,371.78	$2,824,371.78
Account Name		
*4357 MEMORIAL MEDICAL - OPERATING	$2,422,627.26	$2,422,627.26
*4381 MEMORIAL MEDICAL / NH ASHFORD	$85.31	$85.31
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$100.68	$100.68
*4411 MEMORIAL MEDICAL / NH CRESCENT	$5,748.29	$5,748.29
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$103.04	$103.04
*4446 MEMORIAL MEDICAL / NH FORT BEND	$100.53	$100.53
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$42,029.12	$42,029.12
*4551 CAL CO INDIGENT HEALTHCARE	$5,127.46	$5,127.46
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$140.22	$140.22
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$102.48	$102.48
*5506 MMC -NH LAVACA BAY NURSING & REHAB	$94,483.41	$94,483.41
*3407 MMC -NH TUSCANY VILLAGE	$123,254.81	$123,254.81
*2998 MMC -MONEY MARKET FUND	$75,255.07	$75,255.07
*7168 MEMORIAL MEDICAL LOCK BOX	$55,214.10	$55,214.10
Total Balance	**$2,824,371.78**	**$2,824,371.78**

APPROVED ON

JUL 06 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
7/6/2026

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		729,927.51	729,827.51	33,902.82		-	34,002.82	33,870.82
						Bank Balance	34,002.82	
						Variance	-	
						Leave in Balance	100.00	

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

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.

Claims owed to Lavaca Bay 32.00

Adjust Balance/Transfer Amt 33,870.82

Approved:
Caitlin Clevenger - Controller 7/6/2026

Golden Creek		Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
7/3/2026	GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	-	10,070.96		10,070.96
7/2/2026	GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	-	5,115.00		5,115.00
7/2/2026	TSYS/TRANSFIRST - CR CD DEP 543684555876917 9GOLDEN CREEK HEALTHCARE CR CD DEP 070226 543684555876917	-	1,815.00		1,815.00
7/2/2026	TSYS/TRANSFIRST - CR CD DEP 543684555876917 9GOLDEN CREEK HEALTHCARE CR CD DEP 070226 543684555876917	-	8,501.00		8,501.00
7/1/2026	Domestic Wire Withdrawal WIRE OUT NEXION HEAL TH d/b/a GOLDEN CREEK HC	729,827.51	-		-
7/1/2026	GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	-	2,412.00		2,412.00
6/30/2026	Credit Interest	-	499.01		499.01
6/29/2026	TSYS/TRANSFIRST - CR CD DEP 543684555876917 9GOLDEN CREEK HEALTHCARE CR CD DEP 062926 543684555876917	-	1,946.85		1,946.85
6/29/2026	GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	-	3,543.00		3,543.00
		729,827.51	**33,902.82**	**-**	**33,902.82**

Transaction Report

PROSPERITY BANK®

Transaction Report for account *4454

Reported on Mon Jul 06 14:57:00 GMT 2026

Current Balance $42,029.12
Interest Accrued $5.52
Available Balance $42,029.12

Date	Description	Credit	Debit	Running Balance
[redacted]	[redacted]	[redacted]		[redacted]
07/03/2026	External Deposit GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	10070.96		34002.82
07/02/2026	External Deposit GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	5115.00		23931.86
07/02/2026	External Deposit TSYS/TRANSFIRST - CR CD DEP 543684555876917 9GOLDEN CREEK HEALTHCARE CR CD DEP 070226 543684555876917	1815.00		18816.86
07/02/2026	External Deposit TSYS/TRANSFIRST - CR CD DEP 543684555876917 9GOLDEN CREEK HEALTHCARE CR CD DEP 070226 543684555876917	8501.00		17001.86
07/01/2026	Domestic Wire Withdrawal Domestic Wire Withdrawal WIRE OUT NEXION HEAL TH d/b/a GOLDEN CREEK HC		729827.51	8500.86
07/01/2026	External Deposit GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	2412.00		738328.37
06/30/2026	Credit Interest Credit Interest	499.01		735916.37
06/29/2026	External Deposit TSYS/TRANSFIRST - CR CD DEP 543684555876917 9GOLDEN CREEK HEALTHCARE CR CD DEP 062926 543684555876917	1946.85		735417.36
06/29/2026	External Deposit GOLDENCREEKHEALT MERCHANT DEPOSIT - MERC DEP 1220356	3543.00		733470.51
06/26/2026	External Deposit TSYS/TRANSFIRST - CR CD DEP 543684555876917 9GOLDEN CREEK HEALTHCARE CR CD DEP 062626 543684555876917	2140.00		729927.51

APPROVED ON

JUL 06 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
7/6/2026

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza- Private Pay		140.05	-	0.17	-		-	140.22	No Transfer(Holding due to pending claims requests)
							Bank Balance	140.22	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	40.22	

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza-Medicare/Medicaid		102.35	-	0.13		-		102.48	NO TRANSFER
							Bank Balance	102.48	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	2.48	

Routing Information for Gulf Pointe Plaza:

TOTAL TRANSFERS	-

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

Approved:
Caitlin Clevenger - Controller 7/6/2026

Gulf Pointe Plaza-Private Pay	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
6/30/2026 Credit Interest	-	0.17		0.17
				-
				-
				-
	-	**0.17**	-	**0.17**

Gulf Pointe Plaza-Medicare/Medicaid	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
6/30/2026 Credit Interest	-	0.13		0.13
				-
				-
				-
	-	**0.13**	-	**0.13**
	-	**0.30**	-	**0.30**

Balances Overview

PROSPERITY BANK®

COUNTY OF CALHOUN TEXAS
AGIBSON
as of Jul 6, 2026 8:44:49 AM CDT

Account Activity

DDA(14)

	Current Balance	Available Balance
	$2,824,371.78	$2,824,371.78
Account Name		
*4357 MEMORIAL MEDICAL - OPERATING	$2,422,627.26	$2,422,627.26
*4381 MEMORIAL MEDICAL / NH ASHFORD	$85.31	$85.31
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$100.68	$100.68
*4411 MEMORIAL MEDICAL / NH CRESCENT	$5,748.29	$5,748.29
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$103.04	$103.04
*4446 MEMORIAL MEDICAL / NH FORT BEND	$100.53	$100.53
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$42,029.12	$42,029.12
*4551 CAL CO INDIGENT HEALTHCARE	$5,127.46	$5,127.46
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	✓ $140.22 ✓	$140.22
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	✓ $102.48 ✓	$102.48
*5506 MMC -NH LAVACA BAY NURSING & REHAB	$94,483.41	$94,483.41
*3407 MMC -NH TUSCANY VILLAGE	$123,254.81	$123,254.81
*2998 MMC -MONEY MARKET FUND	$75,255.07	$75,255.07
*7168 MEMORIAL MEDICAL LOCK BOX	$55,214.10	$55,214.10
Total Balance	**$2,824,371.78**	**$2,824,371.78**

Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
7/6/2026

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Tuscany Village		417,322.39	342,948.73	48,551.41	-	-	-	122,925.07	48,551.41
							Bank Balance	122,925.07	
							Variance	-	
							Leave in Balance	100.00	
							Claims owed to Golden Creek	72,925.29	
							Humana Recoup	1,348.37	
							Adjust Balance/Transfer Amt		48,551.41

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:
Caitlin Clevenger - Controller 7/6/2026

Tuscany Village	Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
7/2/2026 NOVITAS SOLUTION 04011 - HCCLAIMPMT TRN*1*EF T7860881*1205296137*000004011~ 676201	-	16,156.57		16,156.57
7/1/2026 Domestic Wire Withdrawal WIRE OUT VILLAGE POS T ACUTE HEALTH SERVICE	342,948.73	-		-
7/1/2026 HNB - ECHO - HCCLAIMPMT TRN*1*1252114562*13 41858379\ 746003411	-	7,295.91		7,295.91
7/1/2026 HNB - ECHO - HCCLAIMPMT TRN*1*1252195276*13 41858379\ 746003411	-	2,284.83		2,284.83
7/1/2026 NOVITAS SOLUTION 04011 - HCCLAIMPMT TRN*1*EF T7859487*1205296137*000004011~ 676201	-	16,685.29		16,685.29
6/30/2026 Credit Interest	-	419.72		419.72
6/29/2026 HNB - ECHO - HCCLAIMPMT TRN*1*1251993467*13 41858379\ 746003411	-	3,190.23		3,190.23
6/29/2026 HNB - ECHO - HCCLAIMPMT TRN*1*1252114563*13 41858379\ 746003411	-	2,518.86		2,518.86
	342,948.73	**48,551.41**	**-**	**48,551.41**

Transaction Report

PROSPERITY BANK

Transaction Report for account *3407

Reported on Mon Jul 06 14:33:00 GMT 2026

Current Balance $123,254.81
Interest Accrued $24.59
Available Balance $123,254.81

Date		Description	Credit	Debit	Running Balance
[redacted]		[redacted]	[redacted]		[redacted]
07/02/2026		External Deposit NOVITAS SOLUTION 04011 - HCCLAIMPMT TRN*1*EF T7860881*1205296137*000004011~ 676201	16156.57		122925.07
07/01/2026		Domestic Wire Withdrawal Domestic Wire Withdrawal WIRE OUT VILLAGE POS T ACUTE HEALTH SERVICE		342948.73	106768.50
07/01/2026		External Deposit HNB - ECHO - HCCLAIMPMT TRN*1*1252114562*13 41858379\ 746003411	7295.91		449717.23
07/01/2026		External Deposit HNB - ECHO - HCCLAIMPMT TRN*1*1252195276*13 41858379\ 746003411	2284.83		442421.32
07/01/2026		External Deposit NOVITAS SOLUTION 04011 - HCCLAIMPMT TRN*1*EF T7859487*1205296137*000004011~ 676201	16685.29		440136.49
06/30/2026		Credit Interest Credit Interest	419.72		423451.20
06/29/2026		External Deposit HNB - ECHO - HCCLAIMPMT TRN*1*1251993467*13 41858379\ 746003411	3190.23		423031.48
06/29/2026		External Deposit HNB - ECHO - HCCLAIMPMT TRN*1*1252114563*13 41858379\ 746003411	2518.86		419841.25
06/25/2026	9074304057	Descriptive Deposit Merchant Capture Deposit	35071.65		417322.39
06/25/2026	178661762646780	Deposit Deposit	177271.31		382250.74

APPROVED ON

JUL 06 2026

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly HSLTransfer
Prosperity Accounts
7/6/2026

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Medicare Repayment		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Lavaca Bay Nursing and Rehab		299,338.41	299,238.41	77,584.74			-	77,684.74	77,584.74
							Bank Balance	77,684.74	
							Variance	-	
							Leave In Balance	100.00	

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

Adjust Balance/Transfer Amt 77,584.74

Approved:
Caitlin Clevenger - Controller 7/6/2026

Lavaca Bay Nursing and Rehab		Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
7/3/2026	NDC SWEEP SWEEP FR 00974300029 - FAC 02330	-	30,053.00		30,053.00
7/2/2026	Deposit	-	19,760.62		19,760.62
7/2/2026	CURO HEALTH SERV DYNAMICS EFT DEPOSIT - PAYAB LES MEMORI034	-	4,107.50		4,107.50
7/2/2026	HOSPICE OF SOUTH - Payments Lavaca Bay Nurs ing NF	-	1,228.79		1,228.79
7/1/2026	Domestic Wire Withdrawal WIRE OUT REG Leased OpCo LLC	299,238.41	-		-
6/30/2026	Credit Interest	-	449.40		449.40
6/30/2026	Deposit	-	21,985.43		21,985.43
		299,238.41	**77,584.74**	-	**77,584.74**

Transaction Report

PROSPERITY BANK

Transaction Report for account *5506

Reported on Mon Jul 06 14:23:00 GMT 2026

Current Balance $94,483.41
Interest Accrued $12.46
Available Balance $94,483.41

Date		Description	Credit	Debit	Running Balance
[redacted]		[redacted]	[redacted]		[redacted]
07/03/2026		External Deposit NDC SWEEP SWEEP FR 00974300029 - FAC 02330	30053.00		77684.74
07/02/2026	178661832644629	Deposit Deposit	19760.62		47631.74
07/02/2026		External Deposit CURO HEALTH SERV DYNAMICS EFT DEPOSIT - PAYAB LES MEMORI034	4107.50		27871.12
07/02/2026		External Deposit HOSPICE OF SOUTH - Payments Lavaca Bay Nurs ing NF	1228.79		23763.62
07/01/2026		Domestic Wire Withdrawal Domestic Wire Withdrawal WIRE OUT REG Leased OpCo LLC		299238.41	22534.83
06/30/2026		Credit Interest Credit Interest	449.40		321773.24
06/30/2026	178661812629193	Deposit Deposit	21985.43		321323.84
06/26/2026		External Deposit HOSPICE OF SOUTH - Payments Lavaca Bay Nurs ing NF	5701.48		299338.41
06/26/2026		External Deposit HEALTH HUMAN SVC 5291746000156 - HCCLAIMPMT TRN*1*0S000159153871983 6*1746000156~ 17460034113016	2784.22		293636.93
06/26/2026		External Deposit NOVITAS SOLUTION 04011 - HCCLAIMPMT TRN*1*EF T7854814*1205296137*000004011~ 676481	1.13		290852.71

Golden Creek

MEMORIAL MEDICAL CENTER

CHECK REQUEST

PAY TO THE ORDER OF: Lavaca Bay

Date Requested: 6/30/2026

APPROVED ON
JUL 06 2026
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Chk#000262

FOR ACCT USE ONLY

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

AMOUNT: $32.00

G/L NUMBER: 20656000

EXPLANATION: Claims owed to Lavaca Bay from Golden Creek

REQUESTED BY: Autumn Wilson

AUTHORIZED BY:

MEMORIAL MEDICAL CENTER

CHECK REQUEST

INV# 1060526

PAYEE: Golden Creek Healthcare
2100 Dove Crossing Lane
Navasota, Tx 77868

Date Requested: 6-5-26

APPROVED ON JUN 19 2026
BRAZOS COUNTY, TEXAS

FOR ACCT. USE ONLY
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Voucher Check

AMOUNT $32.00 G/L NUMBER: 20653000

EXPLANATION: Payment was addressed to Golden Creek

REQUESTED BY: Katrina Pedraza AUTHORIZED BY:

CAT # 10303 / FM 1600

POSTED

Check Summary

Transaction Date: June 02, 2026

HUMANA INC. P.O. BOX 14601 LEXINGTON, KY 405124601 ASSETS.HUMANA.COM/IS/CONTENT/HUMANA /INFORMATION%20FOR%20NON%20PARTICIPATING%20PROVIDERSPDF	**Payee Tax ID:** [redacted] **Payee ID:** **Check/EFT Trace Number:** **Payment Amount:** $837.71 **Check/EFT Date:** 06/02/2026 **Production End Cycle Date:** 06/02/2026	**Payee Name:** GOLDEN CREEK HEALTHCARE AND RE **Payee Address:** 815 N VIRGINIA ST PORT LAVACA, TX 779793025

Patient Name: [redacted] **Claim Number:** [redacted] **Claim Date:** 05/19/2026 - 05/19/2026 **Claim Status Code:** 1

Patient ID: [redacted]		**Group / Policy:** [redacted]		**Facility Type:**	85	**Claim Charge:**	$168.06
Patient Ctrl Nmbr:		**Contract Hdr:**	ADVANTAGE	**Claim Frequency:**	1	**Claim Payment:**	$46.12
Rendering Prvd:	MEMORIAL MEDICAL CENTER,	**Rendering Prv ID:**	[redacted]	**Claim Received Date:**	05/28/2026	**Patient Resp:**	$0.00
Original Ref Nmbr:							

Line Details **Results:** 3

Line Ctrl Nmbr	Dates of Service	Rend Prov ID	Rev	Sub Proc / Modifier / Units	Adjud Proc / Modifier / Units	Remark / Payer Code	Supp Info (AMT)	Charge	Adj (Qty)	Adj Amount	Payment
[redacted]	05/19/2026 - 05/19/2026		0636	HC:J3301 / JZ /	N4:70121104 905 / / 2			$26.00	CO-45	$26.00	$0.00
	05/19/2026 - 05/19/2026		0521		HC:96372 / CG / 1		$22.06 (B6)	$22.06	CO-253	$0.44	$21.62
	05/19/2026 - 05/19/2026		0521		HC:99214 / 25 / 1		$25.00 (B6)	$120.00	CO-253 CO-45	$0.50 $95.00	$24.50

Golden Creek

Patient Name: [redacted] **Claim Number:** [redacted] **Claim Date:** 10/03/2025 - 10/08/2025 **Claim Status Code:** 1

Patient ID: [redacted]		**Group / Policy:** [redacted]		**Facility Type:**	11	**Claim Charge:**	$2,411.35
Patient Ctrl Nmbr:		**Contract Hdr:**	MEDICARE ADVANTAGE PPO	**Claim Frequency:**	3	**Claim Payment:**	$32.00
Rendering Prvd:	GOLDEN CREEK HEALTHCARE AND RE,	**Rendering Prv ID:**	[redacted]	**Claim Received Date:**	11/03/2025	**Patient Resp:**	$0.00
Original Ref Nmbr:							

Line Details **Results:** 3

Line Ctrl Nmbr	Dates of Service	Rend Prov ID	Rev	Sub Proc / Modifier / Units	Adjud Proc / Modifier / Units	Remark / Payer Code	Supp Info (AMT)	Charge	Adj (Qty)	Adj Amount	Payment
	10/03/2025 - 10/03/2025		0420		HC:97530 / GP / 3			$1,438.53	CO-B13	$1,438.53	$0.00
	10/03/2025 - 10/03/2025		0420		HC:97530 / GP / 3	N381		$913.48	CO-45	$913.48	$0.00

Payer: HUMANA INC.	Check/EFT Trace Number: [redacted]	Check/EFT Date: 06/02/2026	Total Paid: $837.71

	10/08/2025 - 10/08/2025		0420		HC:97542 / GP / 2		$32.00 (B6)	$59.34	CO-45	$27.34	$32.00

Patient Name: [redacted] **Claim Number:** [redacted] **Claim Date:** 05/20/2026 - 05/20/2026 **Claim Status Code:** 1

Patient ID: [redacted]		**Group / Policy:** [redacted]		**Facility Type:**	85	**Claim Charge:**	$884.00
Patient Ctrl Nmbr: [redacted]		**Contract Hdr:** [redacted] ADVANTAGE PPO		**Claim Frequency:**	1	**Claim Payment:**	$224.46
Rendering Prvd:	MEMORIAL MEDICAL CENTER,	**Rendering Prv ID:** [redacted]		**Claim Received Date:**	05/28/2026	**Patient Resp:**	$0.00
Original Ref Nmbr:							

Line Details **Results:** 7

Line Ctrl Nmbr	Dates of Service	Rend Prov ID	Rev	Sub Proc / Modifier / Units	Adjud Proc / Modifier / Units	Remark / Payer Code	Supp Info (AMT)	Charge	Adj (Qty)	Adj Amount	Payment
[redacted]	05/20/2026 - 05/20/2026		0301		HC:80053 / / 1		$229.04 (B6)	$268.00	CO-253 CO-45	$4.58 $38.96	$224.46
	05/20/2026 - 05/20/2026		0301		HC:80061 / / 1			$97.00	CO-45	$97.00	$0.00
	05/20/2026 - 05/20/2026		0301		HC:84153 / / 1			$161.00	CO-45	$161.00	$0.00
	05/20/2026 - 05/20/2026		0301		HC:84443 / / 1			$173.00	CO-45	$173.00	$0.00
	05/20/2026 - 05/20/2026		0305		HC:85025 / / 1			$98.00	CO-45	$98.00	$0.00
	05/20/2026 - 05/20/2026		0305		HC:85652 / / 1	M76		$66.00	CO-16	$66.00	$0.00
	05/20/2026 - 05/20/2026		0309		HC:36415 / / 1			$21.00	CO-45	$21.00	$0.00

Patient Name: [redacted] **Claim Number:** [redacted] **Claim Date:** 05/20/2026 - 05/20/2026 **Claim Status Code:** 1

Patient ID: [redacted]		**Group / Policy:** [redacted]		**Facility Type:**	85	**Claim Charge:**	$1,999.00
Patient Ctrl Nmbr: [redacted]		**Contract Hdr:** [redacted] ADVANTAGE PPO		**Claim Frequency:**	1	**Claim Payment:**	$254.53
Rendering Prvd:	MEMORIAL MEDICAL CENTER,	**Rendering Prv ID:** [redacted]		**Claim Received Date:**	05/28/2026	**Patient Resp:**	$300.00
Original Ref Nmbr:							

Line Details **Results:** 1

Line Ctrl Nmbr	Dates of Service	Rend Prov ID	Rev	Sub Proc / Modifier / Units	Adjud Proc / Modifier / Units	Remark / Payer Code	Supp Info (AMT)	Charge	Adj (Qty)	Adj Amount	Payment
[redacted]	05/20/2026 - 05/20/2026		0351		HC:70450 / / 1		$559.72 (B6)	$1,999.00	PR-3 CO-253 CO-45	$300.00 $5.19 $1,439.28	$254.53

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MEMORIAL MEDICAL CENTER
NH GOLDEN CREEK HEALTHCARE & REHAB
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000262

88-2265/1131

Date 7-8-26

PAY
TO THE
ORDER OF Lavaca Bay $ 32.00

Thirty two & 00/100 DOLLARS

PROSPERITY BANK®

FOR Claims

Security features are included. Details on back.

[redacted]

Balances Overview

PROSPERITY BANK®

COUNTY OF CALHOUN TEXAS
AGIBSON
as of Jul 8, 2026 12:29:56 PM CDT

Account Activity

DDA(14)

	Current Balance	Available Balance
	$2,093,563.69	$2,093,563.69
Account Name		
*4357 MEMORIAL MEDICAL - OPERATING	$1,376,721.18	$1,376,721.18
*4381 MEMORIAL MEDICAL / NH ASHFORD	$85.31	$85.31
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$100.68	$100.68
*4411 MEMORIAL MEDICAL / NH CRESCENT	$100.00	$100.00
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$95,945.82	$95,945.82
*4446 MEMORIAL MEDICAL / NH FORT BEND	$100.53	$100.53
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$153,823.43	$153,823.43
*4551 CAL CO INDIGENT HEALTHCARE	$5,127.46	$5,127.46
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$140.22	$140.22
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$102.48	$102.48
*5506 MMC -NH LAVACA BAY NURSING & REHAB	$58,530.83	$58,530.83
*3407 MMC -NH TUSCANY VILLAGE	$271,177.42	$271,177.42
*2998 MMC -MONEY MARKET FUND	$75,255.07	$75,255.07
*7168 MEMORIAL MEDICAL LOCK BOX	$56,353.26	$56,353.26
Total Balance	**$2,093,563.69**	**$2,093,563.69**

BANK--CHECK--			
CODE	NUMBER	DATE	AMOUNT	PAYEE
NHG *	000262	07/08/26	32.00	LAVACA BAY

[redacted]