MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ----- October 22, 2015

PAYABLES AND PAYROLL				
9/2/2015	Payroll Taxes	$ 93,590.64		
9/3/2015	Weekly Payables	728,326.48		
9/3/2015	Patient Refunds	3,833.49		
9/9/2015	Returned Check	25.00		
9/9/2015	Weekly Payables	137,532.67		
9/9/2015	Patient Refunds	6,892.05		
9/10/2015	Payroll	258,528.74		
9/11/2015	McKesson Drugs	2,826.72		
9/14/2015	McKesson Drugs	2,292.38		
9/15/2015	TCDRS	110,538.72		
9/16/2015	TCDRS	1,000.14		
9/16/2015	Payroll Taxes	93,543.01		
9/16/2015	Weekly Payables	340,507.19		
9/21/2015	McKesson Drugs	2,883.14		
9/23/2015	Weely Payables	69,535.82		
9/23/2015	Credit Card Invoice	1,582.28		
9/23/2015	Credit Card Invoice	3,286.52		
9/24/2015	Med Reimbursement for Patient	11.99		
9/24/2015	Payroll	260,115.43		
9/25/2015	Returned Check	50.00		
9/28/2015	McKesson Drugs	2,776.64		
9/30/2015	Weekly Payables	338,962.57		
9/30/2015	Payroll Taxes	93,019.84		
	Monthly Electronic Transfers for Payroll Expenses(not incl above)	721.62		
	Monthly Electronic Transfers for Operating Expenses	4,138.45		
	Total Payables and Payroll		**$**	**2,556,521.53**
INTER-GOVERNMENT TRANSFERS				
	Inter-Government Transfer for September 8, 2015	21,587.00		
	Inter-Government Transfer for September 14, 2015	7,770.20		
	Total Inter-Government Transfers		**$**	**29,357.20**
INTRA-ACCOUNT TRANSFERS				
	From Operating to Private Waiver Clearing Fund	-		
	From Private Waiver Clearing Fund to Operating	-		
	Total Intra-Account Transfers		**$**	**-**
SUBTOTAL MEMORIAL MEDICAL CENTER DISBURSEMENTS			**$**	**2,585,878.73**
NURSING HOME UPL EXPENSES			**$**	**5,255,485.47**
NURSING HOME INTER-GOVERNMENT TRANSFER FOR September 2015			**$**	**-**
INDIGENT HEALTHCARE FUND EXPENSES			**$**	**47,009.87**
GRAND TOTAL DISBURSEMENTS APPROVED CC October 22, 2015			**$**	**7,888,374.07**

APPROVED
OCT 22 2015
CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ----October 22, 2015

INDIGENT HEALTHCARE FUND:

INDIGENT EXPENSES

Adu Sports Medicine Clinic	118.66
Michelle M. Cummins MD	1,942.58
HEB Pharmacy (MedImpact Healthcare Systems, Inc)	1,742.85
Memorial Medical Center (Phys Fees $519.85, IP $11765.88/ OP $11923.05/ ER $10730.06)	34,938.84
Port Lavaca Anesthesia Group	702.82
Port Lavaca Clinic Assoc	1,253.12
Radiology Unlimited PA	1,102.41
Regional Employee Assistance	46.73
Victoria Professional Medical	139.25
SUBTOTAL	**41,987.26**
Memorial Medical Center (Indigent Healthcare Payroll and Expenses)	5,472.61
SUBTOTAL	47,459.87
Less: Co-Pays collected in September 2015	(450.00)
TOTAL APPROVED INDIGENT HEALTHCARE FUND EXPENSES	**47,009.87**

800 10222015 01	CALHOUN COUNTY, TEXAS

DATE: 10/22/2015

VENDOR # 852

CC Indigent Health Care

ACCOUNT NUMBER	DESCRIPTION OF GOODS OR SERVICES		QUANTITY	UNIT PRICE	TOTAL PRICE
1000-800-98722-999	Transfer to pay bills for Indigent Health Care				$47,009.87
	approved by Commissioners Court on 10/22/15				
	Total Indigent Expenses	$47,459.87			
	Applied Co-pays	($450.00)			
1000-001-46010	September Interest	$0.00			
					$47,009.87

COUNTY AUDITOR APPROVAL ONLY

APPROVED ON

OCT 21 2015

COUNTY AUDITOR CALHOUN COUNTY, TEXAS

THE ITEMS OR SERVICES SHOWN ABOVE ARE NEEDED IN THE DISCHARGE OF MY OFFICIAL DUTIES AND I CERTIFY THAT FUNDS ARE AVAILABLE TO PAY THIS OBLIGATION.

I CERTIFY THAT THE ABOVE ITEMS OR SERVICES WERE RECEIVED BY ME IN GOOD CONDITION AND REQUEST THE COUNTY TREASURER TO PAY THE ABOVE OBLIGATION.

BY: _____ 10/22/15

DEPARTMENT HEAD DATE

Issued 10/21/15

Source Totals Report

Calhoun Indigent Health Care

9-1-15 through 9-30-15

For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	15,335.08	3,879.24
01-2	Physician Services- Anesthesia	6,825.00	702.82
02	Prescription Drugs	1,742.85	1,742.85
08	Rural Health Clinics	1,976.00	1,243.36
13	Mmc - Inpatient Hospital	20,286.00	11,765.88
14	Mmc - Hospital Outpatient	34,774.00	11,923.05
15	Mmc - Er Bills	31,629.00	10,730.06
	Expenditures	113,223.72	42,643.05
	Reimb/Adjustments	-655.79	-655.79
	Grand Total	**112,567.93**	**41,987.26**

Fiscal Year	276,120.66
Applied Co-Pay's	(450.00)
Payroll/Expenses	5,472.61
Monthly Total	47,009.87

APPROVED ON

OCT 21 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Monica Escalante

Calhoun County Indigent Care Coordinator

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAY TO: Calhoun County Indigent Account

Date Requested: 10/9/2015

FOR ACCT. USE ONLY
- [ ] Imprest Cash
- [ ] A/P Check
- [ ] Mail Check to Vendor
- [ ] Return Check to Dept

AMOUNT $450.00

G/L NUMBER: 50240000

EXPLANATION: To transfer indigent co-pays from the operating account to the indigent bank account.

September 2015

REQUESTED BY: Adam Machicek

AUTHORIZED BY:

Calhoun County Indigent Program
Co-Pays - Account 50240000
10/9/2015

September	450.00
Total	450.00

Per discussion with Monica Escalante, IHCP Coordinator, all indigent co-pays are to be deposited into the Indigent Program bank account. The County will reduce funding of indigent program by the co-pay amount.

G/L NUMBER	DATE	RECEIPT NUMBER	PAY TYPE	PAYER	CASH AMOUNT	RECEIPT AMOUNT	NUMBER	NAME	DISC DATE	COLL INIT	GL CODE	CASH ACCOUNT
50240.000	09/01/15	412135	CA		10.00	10.00				PLB		2
50240.000	09/01/15	412200	CA		10.00	10.00				PLB		2
50240.000	09/01/15	412230	MC		10.00	10.00				PLB		2
50240.000	09/02/15	412291	CA		10.00	10.00				PLB		2
50240.000	09/02/15	412337	CA		10.00	10.00				PLB		2
50240.000	09/03/15	412434	MC		10.00	10.00				PLB		2
50240.000	09/03/15	412441	CA		10.00	10.00				PLB		2
50240.000	09/04/15	412478	CA		10.00	10.00				PLB		2
50240.000	09/04/15	412501	CA		10.00	10.00				PLB		2
50240.000	09/04/15	412518	CA		10.00	10.00				PLB		2
50240.000	09/04/15	412520	CA		10.00	10.00				PLB		2
50240.000	09/04/15	412531	CA		10.00	10.00				PLB		2
50240.000	09/08/15	412640	CA		10.00	10.00				PLB		2
50240.000	09/08/15	412641	CA		10.00	10.00				PLB		2
50240.000	09/08/15	412671	CA		10.00	10.00				PLB		2
50240.000	09/09/15	412684	CA		10.00	10.00				PLB		2
50240.000	09/10/15	412833	CA		10.00	10.00				PLB		2
50240.000	09/10/15	412857	CA		10.00	10.00				PLB		2
50240.000	09/11/15	413001	CA		10.00	10.00				PLB		2
50240.000	09/14/15	413040	CA		10.00	10.00				LMV		2
50240.000	09/14/15	413129	CA		10.00	10.00				PLB		2
50240.000	09/14/15	413131	CA		10.00	10.00				PLB		2
50240.000	09/15/15	413237	VI		10.00	10.00				MRP		2
50240.000	09/17/15	413465	CA		10.00	10.00				PLB		2
50240.000	09/17/15	413469	CA		10.00	10.00				PLB		2
50240.000	09/17/15	413470	CA		10.00	10.00				PLB		2
50240.000	09/18/15	413508	CA		10.00	10.00				PLB		2
50240.000	09/18/15	413549	CA		10.00	10.00				LMV		2
50240.000	09/18/15	413552	CA		10.00	10.00				MRP		2
50240.000	09/18/15	413565	CA		10.00	10.00				MRP		2
50240.000	09/18/15	413566	CA		10.00-	10.00-				MRP		2
50240.000	09/21/15	413621	CA		10.00	10.00				LMV		2
50240.000	09/21/15	413694	CA		10.00	10.00				PLB		2
50240.000	09/22/15	413718	CA		10.00	10.00				PLB		2
50240.000	09/22/15	413789	VI		10.00	10.00				MRP		2
50240.000	09/22/15	413806	MC		10.00	10.00				MRP		2
50240.000	09/23/15	413866	CA		10.00	10.00				PLB		2
50240.000	09/25/15	414031	CA		10.00	10.00				PLB		2

MEMORIAL MEDICAL CENTER
PORT LAVACA, TX
MANUAL JOURNAL ENTRIES
MONTH OF
SEPTEMBER 2015

Recorded ARM 10/9/15
Reviewed

Acct #	JE #	Description	Check #	Debit Amount	Credit Amount	
10255000		Indigent Healthcare		5,472.61		
40450074		Reimbursement - Calhoun Cty			3,837.30	✓
40015074		Benefits - FICA			258.49	✓
40025074		Benefits - FUTA			-	
40040074		Benefits - Retirement			307.74	✓
60320000		Benefits - Insurance			690.71	✓
40220074		Supplies - General			5.57	✓
40225074		Supplies - Office			-	
40230074		Forms			-	
40610074		Continuing Education			-	
40510074		Outside Services			-	
40215074		Freight			-	
40600074		Miscellaneous			372.80	✓
			TOTALS	5,472.61	5,472.61	✓

EXPLANATION FOR ENTRY - To reclassify indigent care expenses to misc receivable

REVERSING: YES _____ NO _____ JE # 091530

APPROVED
ON

OCT 14 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Indigent Healthcare Program
Incurred by MMC
SEPTEMBER 2015

Indigent H'care Coordinator Salary	# 40000074	3-Sep	$ 1,001.16	
	# 40000074	17-Sep	760.14	
	# 40000074			
	# 40050074			
	# 40050074			
	(# 40010074)		2,076.00	
				3,837.30
Benefits:	#40040074			**307.74**
FICA	# 40015074	3-Sep	136.57	
	# 40015074	17-Sep	121.92	
	# 40015074			
				258.49
FUTA	# 40025074	3-Sep	-	
	# 40025074	17-Sep	-	
	# 40025075			
				-
Other Benefits (18 %)	# 63200000			**690.71**
General Supplies	# 40220074			**5.57**
Office Supplies	# 40225074			**-**
Forms	#40230074			**-**
Continuing Education	#40610074			**-**
Outside Services	#40510074			**-**
Freight	#40215074			**-**
Travel	#40600074			**372.80**

ACCT NUMBER & DESC	DATE	MEMO	REFERENCE	JOURNAL	CS#/BAT/SEQ	ACTIVITY	BALANCE
40000074 SALARIES REG PROD -CALHOUN C							
40000074 SALARIES REG PROD -CALHO		BEGINNING BALANCE AS OF: 09/01/15					28,766.42
	09/01/15	REVERSE ACCRUAL		PR	19 4425 410	-1,188.33	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4460 44	605.64	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4467 3	197.76	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4467 16	197.76	
	09/17/15	PAY-P.09/04/15 09/17/15		PR	19 4489 46	760.14	
	09/30/15	Accrual--Days= 13		PR	19 4489 401	705.90	
		09/30 ACTIVITY/END BALANCE				1,278.87	30,045.29
40005074 SALARIES OVERTIM		BEGINNING AND ENDING BALANCE:					49.96
40010074 SALARIES PTO/EIB -CALHO		BEGINNING BALANCE AS OF: 09/01/15					4,677.74
	09/01/15	REVERSE ACCRUAL		PR	19 4425 510	-725.78	
	09/03/15	Auto PR Bene Accrual Re		PR	19 4424 91	-649.82	
	09/03/15	Auto PR Bene Accrual		PR	19 4459 89	748.64	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4460 91	1,013.28	
	09/17/15	Auto PR Bene Accrual Re		PR	19 4459 91	-748.64	
	09/17/15	Auto PR Bene Accrual		PR	19 4488 89	798.01	
	09/17/15	PAY-P.09/04/15 09/17/15		PR	19 4489 92	1,062.72	
	09/30/15	Accrual--Days= 13		PR	19 4489 493	986.83	
		09/30 ACTIVITY/END BALANCE				2,485.24	7,162.98
40015074 FICA -CALHO		BEGINNING BALANCE AS OF: 09/01/15					46.87
	09/01/15	REVERSE ACCRUAL		PR	19 4425 692	-76.89	
	09/01/15	REVERSE ACCRUAL		PR	19 4425 754	-18.04	
	09/01/15	PAY-P.08/21/15 09/03/15		PR	19 4460 369	46.15	
	09/01/15	PAY-P.08/21/15 09/03/15		PR	19 4460 400	11.44	
	09/01/15	PAY-P.08/21/15 09/03/15		PR	19 4467 7	2.47	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4467 9	12.34	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4467 20	2.97	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4467 22	13.20	
	09/17/15	PAY-P.09/04/15 09/17/15		PR	19 4489 534	23.11	
	09/17/15	PAY-P.09/04/15 09/17/15		PR	19 4489 565	58.61	
	09/30/15	Accrual--Days= 13		PR	19 4489 679	91.78	
	09/30/15	Accrual--Days= 13		PR	19 4489 741	21.45	
		09/30 ACTIVITY/END BALANCE				276.79	323.66
40025074 FUT		BEGINNING AND ENDING BALANCE:					-2.10
40040074 RETIREMENT -CALHO		BEGINNING BALANCE AS OF: 09/01/15					55.70
	09/01/15	REVERSE ACCRUAL		PR	19 4425 876	-113.96	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4460 462	129.83	
	09/03/15	AUTO ER CONTR - TSA-R		PR	19 4466 1	15.86	
	09/03/15	PAY-P.08/21/15 09/03/15		PR	19 4467 13	15.86	

ACCT NUMBER & DESC	DATE	MEMO	REFERENCE	JOURNAL	CS#/BAT/SEQ	ACTIVITY	BALANCE
40040074 RETIREMENT		-CALHOUN C					
	09/03/15	PAY-P 08/21/15 09/03/15		PR	19 4467 26	15.86	
	09/17/15	PAY-P 09/04/15 09/17/15		PR	19 4489 627	146.19	
	09/30/15	Accrual--Days= 13		PR	19 4489 863	135.72	
		09/30 ACTIVITY/END BALANCE				345.36	401.06
40220074 SUPPLIES GENERAL		-CALHO BEGINNING BALANCE AS OF: 09/01/15					.00
	09/30/15	AUTO-TRAN/EXP REPORT	000000	MM	25 569 24	5.57	
		09/30 ACTIVITY/END BALANCE				5.57	5.57
40450074 REIMBURSEMENT		BEGINNING AND ENDING BALANCE:					-32,500.05
40600074 TRAVEL		-CALHO BEGINNING BALANCE AS OF: 09/01/15					.00
	09/30/15	HOLIDAY INN EXPRESS MON	091567	JE	19 4538 55	372.80	
		09/30 ACTIVITY/END BALANCE				372.80	372.80
		COST CENTER TOTAL:				4,764.63	

ENDING BALANCE GRAND TOTAL: 5,859.17

GRAND TOTAL ACTIVITY: 4,764.63

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
8/31/2015

Nursing Home	IBC Account Number	Base Balance	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	100.00	184,171.65	314,241.15	-	184,171.65	-	-	314,341.15	314,241.15

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
0614
4257

Nursing Home	IBC Account Number	Base Balance	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	100.00	862,971.91	47,614.23	-	862,971.91	-	-	47,714.23	47,614.23
Crescent	4588	100.00	48,620.80	16,620.37	-	48,620.80	-	-	16,720.37	16,620.37
Broadmoor	4596	100.00	75,528.84	631,700.48	-	75,528.84	-	-	631,800.48	631,700.48
Fort Bend	4618	100.00	61,428.32	91,972.88	-	61,428.32	-	-	92,072.88	91,972.88
										787,907.96

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
0614
AC 2922

Approved:

Note: Only balances of over $5,000 will be transferred to the nursing home.

Michael J. Pfeifer
Calhoun County Judge
Date: 9-8-15

APPROVED
SEP - 1 2015
COUNTY AUDITOR

IBC Bank Activity
8/25/15 through 8/30/15

Ashford Gardens					Transfer-Out	Transfer-In	
8/25/2015	5025	4553	301	COMMERCIAL DEPOSIT		723.75	
8/26/2015	5025	4553	495	OUTGOING MONEY TRANSFER	184,171.65		ASHFORD HEALTH CARE CENTER LTD
8/26/2015	5025	4553	195	INCOMING MONEY TRANSFER		309,147.16	
8/27/2015	5025	4553	142	ACH CREDIT RECEIVED		3,575.93	Molina HC of TX Molina HC
8/28/2015	5025	4553	301	COMMERCIAL DEPOSIT		794.31	
					184,171.65	**314,241.15**	

Solera at West Houston					Transfer-Out	Transfer-In	
8/25/2015	5025	4561	142	ACH CREDIT RECEIVED		516.99	AGING DISAB SVCS HCCLAIMPMT
8/25/2015	5025	4561	301	COMMERCIAL DEPOSIT		34,646.44	
8/26/2015	5025	4561	495	OUTGOING MONEY TRANSFER	862,971.91		CANTEX HEALTH CARE CENTERS LLC
8/27/2015	5025	4561	142	ACH CREDIT RECEIVED		497.47	Molina HC of TX Molina HC
8/28/2015	5025	4561	301	COMMERCIAL DEPOSIT		11,802.29	
8/28/2015	5025	4561	142	ACH CREDIT RECEIVED		151.04	Molina HC of TX Molina HC
					862,971.91	**47,614.23**	

Crescent					Transfer-Out	Transfer-In	
8/25/2015	5025	4588	301	COMMERCIAL DEPOSIT		7,042.50	
8/25/2015	5025	4588	142	ACH CREDIT RECEIVED		1,540.74	AGING DISAB SVCS HCCLAIMPMT
8/26/2015	5025	4588	495	OUTGOING MONEY TRANSFER	48,620.80		CANTEX HEALTH CARE CENTERS III
8/27/2015	5025	4588	142	ACH CREDIT RECEIVED		2,135.10	AGING DISAB SVCS HCCLAIMPMT
8/28/2015	5025	4588	301	COMMERCIAL DEPOSIT		5,902.03	
					48,620.80	**16,620.37**	

Broadmoor					Transfer-Out	Transfer-In	
8/25/2015	5025	4596	301	COMMERCIAL DEPOSIT		4,644.20	
8/26/2015	5025	4596	195	INCOMING MONEY TRANSFER		619,118.28	CANTEX HEALTH CARE CENTERS III
8/26/2015	5025	4596	495	OUTGOING MONEY TRANSFER	75,528.84		CANTEX HEALTH CARE CENTERS III
8/28/2015	5025	4596	301	COMMERCIAL DEPOSIT		7,938.00	
					75,528.84	**631,700.48**	

Fort Bend					Transfer-Out	Transfer-In	
8/25/2015	5025	4618	301	COMMERCIAL DEPOSIT		91,034.03	
8/26/2015	5025	4618	495	OUTGOING MONEY TRANSFER	61,428.32		CANTEX HEALTH CARE CENTERS III
8/27/2015	5025	4618	142	ACH CREDIT RECEIVED		888.23	Molina HC of TX Molina HC
8/28/2015	5025	4618	142	ACH CREDIT RECEIVED		50.62	Molina HC of TX Molina HC
					61,428.32	**91,972.88**	

Account Portfolio as of 08/31/2015 9:21:25 AM

Account Display
(•) Display By Account Type
( ) Display By Asset/Liability

Commercial Checking Accounts

Account Name	Account Number	Today's Beginning Balance	Available Balance
Memorial Medical Center	3387	$325,069.79	$325,069.79
Memorial Medical Center	4553	$314,341.15	$314,341.15
Memorial Medical Center	4561	$47,714.23	$47,714.23
Memorial Medical Center	4588	$16,720.37	$16,720.37
Memorial Medical Center	4596	$631,800.48	$631,800.48
Memorial Medical Center	4618	$92,072.88	$92,072.88
Memorial Medical Center Operat	0301	$2,069,907.09	$2,114,283.94
County of Calhoun Indigent	1101	$4,619.61	$4,619.61
Totals		**$3,502,245.60**	**$3,546,622.45**

APPROVED ON

SEP 03 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

09/01/2015 16:32

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 09/21/2015

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
10864	ACCLARENT, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
IN236312	SURGERY SUPPLIES	08/26/20	08/04/20	09/16/20		409.75	0.00	0.00	409.75
IN237416	SUPPLIES SURGERY	08/26/20	08/18/20	09/17/20		507.60	0.00	0.00	507.60
IN237652	SURGERY SUPPLIES	08/31/20	08/21/20	09/20/20		8,434.85	0.00	0.00	8,434.85

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10864	ACCLARENT, INC.	9,352.20	0.00	0.00	9,352.20

Vendor#	Vendor Name	Class	Pay Code
A1350	ACTION LUMBER	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
005334	SUPPLIES PLANT OPS	08/28/20	08/17/20	09/16/20		256.00	0.00	0.00	256.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1350	ACTION LUMBER	256.00	0.00	0.00	256.00

Vendor#	Vendor Name	Class	Pay Code
A1680	AIRGAS-SOUTHWEST	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9042433559	SUPPLIES PLANT OPS	08/28/20	08/14/20	09/13/20		239.02	0.00	0.00	239.02
9042570926	SUPPLIES PLANT OPS	08/28/20	08/18/20	09/17/20		1,108.46	0.00	0.00	1,108.46

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS-SOUTHWEST	1,347.48	0.00	0.00	1,347.48

Vendor#	Vendor Name	Class	Pay Code
A1690	ALCON LABORTORIES INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
19706038	SUPPLIES SURGERY	08/26/20	08/17/20	09/16/20		1,564.50	0.00	0.00	1,564.50
19629630	INTRA OCULAR LENSES	08/27/20	08/03/20	09/02/20		636.00	0.00	0.00	636.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1690	ALCON LABORTORIES INC	2,200.50	0.00	0.00	2,200.50

Vendor#	Vendor Name	Class	Pay Code
A1705	ALIMED INC.	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
RPSV01927697	SUPPLIES PT	08/27/20	08/05/20	09/04/20		196.20	0.00	0.00	196.20
RPSV01930837	SUPPLIES MED SURG	08/27/20	08/10/20	09/09/20		283.50	0.00	0.00	283.50
RSPV01932843	SUPPLIES PT	08/27/20	08/11/20	09/10/20		63.55	0.00	0.00	63.55
RPSV01942196	SUPPLIES SURGERY	08/31/20	08/21/20	09/20/20		180.46	0.00	0.00	180.46

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net

	A1705	ALIMED INC.					723.71	0.00	0.00	723.71
Vendor#	Vendor Name				Class	Pay Code				
A1746	ALPHA TEC SYSTEMS INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	INV-00034373		08/28/20	08/18/20	09/17/20		146.27	0.00	0.00	146.27
		SUPPLIES LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1746	ALPHA TEC SYSTEMS INC				146.27	0.00	0.00	146.27
Vendor#	Vendor Name				Class	Pay Code				
A1783	AMERICAN ASSOCIATION				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20301		08/31/20	08/27/20	08/27/20		85.94	0.00	0.00	85.94
		DUES & SUBCRIPTIONS - Notary								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1783	AMERICAN ASSOCIATION				85.94	0.00	0.00	85.94
Vendor#	Vendor Name				Class	Pay Code				
A1360	AMERISOURCEBERGEN DRUG CORP				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	63207640		08/28/20	08/25/20	09/10/20		272.72	0.00	0.00	272.72
		PHARMACY DRUGS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1360	AMERISOURCEBERGEN DRUG CORP				272.72	0.00	0.00	272.72
Vendor#	Vendor Name				Class	Pay Code				
B0436	BARD ACCESS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	44461541		08/26/20	08/12/20	09/16/20		534.00	0.00	0.00	534.00
		SUPPLIES ULTRA SOUND								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B0436	BARD ACCESS				534.00	0.00	0.00	534.00
Vendor#	Vendor Name				Class	Pay Code				
B0435	BARD PERIPHERAL VASCULAR				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	74615366		08/26/20	08/07/20	09/16/20		689.24	0.00	0.00	689.24
		SURGERY SUPPLIES								
	74622823		08/26/20	08/11/20	09/16/20		260.00	0.00	0.00	260.00
		SUPPLIES XRAY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B0435	BARD PERIPHERAL VASCULAR				949.24	0.00	0.00	949.24
Vendor#	Vendor Name				Class	Pay Code				
B1075	BAXTER HEALTHCARE CORP				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	48264881		08/26/20	08/10/20	09/16/20		365.25	0.00	0.00	365.25
		CS INVENTORY								
	48303071		08/26/20	08/13/20	09/16/20		504.52	0.00	0.00	504.52
		CS INVENTORY								
	48366734		08/26/20	08/20/20	09/19/20		345.23	0.00	0.00	345.23
		CS INVENTORY & RECOVERY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1075	BAXTER HEALTHCARE CORP				1,215.00	0.00	0.00	1,215.00
Vendor#	Vendor Name				Class	Pay Code				
M2485	BAYER HEALTHCARE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net

	6003056967		08/26/20	08/13/20	09/16/20		531.12	0.00	0.00	531.12
		SUPPLIES CT SCAN								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2485	BAYER HEALTHCARE				531.12	0.00	0.00	531.12
Vendor#	Vendor Name				Class	Pay Code				
B1220	BECKMAN COULTER INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	105063792		08/28/20	08/04/20	09/03/20		8,225.07	0.00	0.00	8,225.07
		LAB SUPPLIES								
	105068241		08/28/20	08/05/20	09/04/20		442.02	0.00	0.00	442.02
		LAB SUPPLIES								
	105079874		08/28/20	08/11/20	09/10/20		166.36	0.00	0.00	166.36
		LAB SUPPLIES								
	5337543		08/28/20	08/12/20	09/11/20		3,933.48	0.00	0.00	3,933.48
		LEASE & MAINT CONTR LAB								
	105083159		08/28/20	08/12/20	09/11/20		410.06	0.00	0.00	410.06
		LAB SUPPLIES								
	5337559		08/28/20	08/12/20	09/11/20		4,233.46	0.00	0.00	4,233.46
		LEASE & MAINT CONTR LAB								
	105085005		08/28/20	08/13/20	09/12/20		359.38	0.00	0.00	359.38
		LAB SUPPLIES								
	105085135		08/28/20	08/13/20	09/12/20		1,004.25	0.00	0.00	1,004.25
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC				18,774.08	0.00	0.00	18,774.08
Vendor#	Vendor Name				Class	Pay Code				
10024	BECTON, DICKINSON & CO (BD)									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	9101398521		08/28/20	05/15/20	06/14/20		95.00	0.00	0.00	95.00
		SUPPLIES LAB								
	9101420629		08/28/20	05/27/20	06/26/20		2,147.64	0.00	0.00	2,147.64
		SUPPLIES LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10024	BECTON, DICKINSON & CO (BD)				2,242.64	0.00	0.00	2,242.64
Vendor#	Vendor Name				Class	Pay Code				
10599	BKD, LLP									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	BK00489789		07/31/20	07/31/20	08/30/20		49,546.67	0.00	0.00	49,546.67
		AUDITING FEES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10599	BKD, LLP				49,546.67	0.00	0.00	49,546.67
Vendor#	Vendor Name				Class	Pay Code				
B1680	BOUND TREE MEDICAL, LLC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	81883532		08/27/20	08/18/20	09/17/20		151.69	0.00	0.00	151.69
		CS INVENTORY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1680	BOUND TREE MEDICAL, LLC				151.69	0.00	0.00	151.69
Vendor#	Vendor Name				Class	Pay Code				
B1800	BRIGGS HEALTHCARE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

8064685 RI	08/28/20	08/13/20	09/12/20	220.25	0.00	0.00	220.25	✓
SUPPLIES REGIST & OUT PAT								
Vendor Totals Number Name				Gross	Discount	No-Pay	Net	
B1800 BRIGGS HEALTHCARE ✓				220.25	0.00	0.00	220.25	
Vendor# Vendor Name			Class	Pay Code				
D1040 C R BARD, INC								
Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
23251788	08/26/20	08/05/20	09/16/20	126.00	0.00	0.00	126.00	✓
SURGERY SUPPLIES								
23260306	08/26/20	08/17/20	09/17/20	126.00	0.00	0.00	126.00	✓
SURGERY SUPPLIES								
Vendor Totals Number Name				Gross	Discount	No-Pay	Net	
D1040 C R BARD, INC ✓				252.00	0.00	0.00	252.00	
Vendor# Vendor Name			Class	Pay Code				
C1030 CAL COM FEDERAL CREDIT UNION			W					
Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
20263	08/28/20	08/20/20	08/20/20	25.00	0.00	0.00	25.00	✓
EMPLOYEE CREDIT UNION								
Vendor Totals Number Name				Gross	Discount	No-Pay	Net	
C1030 CAL COM FEDERAL CREDIT UNION ✓				25.00	0.00	0.00	25.00	
Vendor# Vendor Name			Class	Pay Code				
10381 CAREFUSION 211, INC								
Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
9105937379	08/26/20	08/13/20	09/16/20	421.39	0.00	0.00	421.39	✓
SUPPLIES OB								
Vendor Totals Number Name				Gross	Discount	No-Pay	Net	
10381 CAREFUSION 211, INC ✓				421.39	0.00	0.00	421.39	
Vendor# Vendor Name			Class	Pay Code				
C1992 CDW GOVERNMENT, INC.			M					
Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net	
XD95070	08/27/20	08/04/20	09/03/20	2,137.35	0.00	0.00	2,137.35	✓
NEW COMPUTERS ER								
XD99977	08/27/20	08/05/20	09/04/20	3,289.35	0.00	0.00	3,289.35	✓
NEW COMPUTERS ER								
XG67453	08/27/20	08/07/20	09/06/20	461.36	0.00	0.00	461.36	✓
ZEBRA PRINTER SETUP LAB								
XG18562	08/27/20	08/07/20	09/06/20	962.72	0.00	0.00	962.72	✓
ZEBRA PRINTER SETUP LAB								
XH09653	08/27/20	08/10/20	09/09/20	679.61	0.00	0.00	679.61	✓
ZEBRA PRINTER SETUP LAB								
XF57011	08/28/20	08/05/20	09/04/20	759.92	0.00	0.00	759.92	✓
NEW COMPUTERS CLINIC								
XH55759	08/28/20	08/11/20	09/10/20	278.27	0.00	0.00	278.27	✓
SUPPLIES ER								
XH64941	08/28/20	08/11/20	09/10/20	213.42	0.00	0.00	213.42	✓
SUPPLIES BUS OFFICE								
XJ50657	08/28/20	08/12/20	09/11/20	5,681.68	0.00	0.00	5,681.68	✓
COMPUTERS CLINIC								
XJ56992	08/28/20	08/13/20	09/12/20	315.58	0.00	0.00	315.58	✓
SUPPLIES IT								
XK29227	08/28/20	08/14/20	09/13/20	143.66	0.00	0.00	143.66	✓
OFFICE SUPPLIES HR								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C1992	CDW GOVERNMENT, INC.				14,922.92	0.00	0.00	14,922.92

Vendor#	Vendor Name			Class	Pay Code				
10350	CENTURION MEDICAL PRODUCTS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	91822017		08/10/20	07/29/20	09/16/20		143.92	0.00	0.00	143.92
		CS INVENTORY								
	91827272		08/10/20	08/05/20	09/16/20		835.84	0.00	0.00	835.84
		CS INVENTORY & RECOVERY								
	91828256		08/10/20	08/06/20	09/16/20		56.07	0.00	0.00	56.07
		CS INVENTORY								
	91829495		08/26/20	08/10/20	09/16/20		669.71	0.00	0.00	669.71
		CS INVENTORY								
	91833034		08/26/20	08/13/20	09/16/20		736.63	0.00	0.00	736.63
		CS INVENTORY								
	91834849		08/26/20	08/17/20	09/16/20		760.04	0.00	0.00	760.04
		CS INVENTORY & PT SUPPLIE								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10350	CENTURION MEDICAL PRODUCTS				3,202.21	0.00	0.00	3,202.21

Vendor#	Vendor Name			Class	Pay Code				
C1410	CERTIFIED LABORATORIES			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	2008652		08/27/20	08/11/20	09/10/20		158.87	0.00	0.00	158.87
		SUPPLIES PLANT OPS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1410	CERTIFIED LABORATORIES				158.87	0.00	0.00	158.87

Vendor#	Vendor Name			Class	Pay Code				
11030	COMBINED INSURANCE CO								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20304		08/31/20	08/28/20	09/01/20		2,832.30	0.00	0.00	2,832.30
		EMPLOYEE PERSONA INS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11030	COMBINED INSURANCE CO				2,832.30	0.00	0.00	2,832.30

Vendor#	Vendor Name			Class	Pay Code				
C1970	CONMED CORPORATION			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	960973		08/26/20	08/18/20	09/17/20		591.61	0.00	0.00	591.61
		SUPPLIES SURGERY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1970	CONMED CORPORATION				591.61	0.00	0.00	591.61

Vendor#	Vendor Name			Class	Pay Code				
10509	DA&E								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20262		08/28/20	08/21/20	09/20/20		3,325.00	0.00	0.00	3,325.00
		PROF FEES ACCOUNTING								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10509	DA&E				3,325.00	0.00	0.00	3,325.00

Vendor#	Vendor Name			Class	Pay Code				
10368	DEWITT POTH & SON								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	447807-0		08/26/20	08/10/20	09/16/20		7.14	0.00	0.00	7.14

		CS INVENTORY							
	447806-0		08/26/20	08/10/20	09/16/20	487.05	0.00	0.00	487.05
		CS INVENTORY & CLINIC SUP							
	447995-0		08/26/20	08/12/20	09/16/20	315.75	0.00	0.00	315.75
		CS INVENTORY							
	448463-0		08/26/20	08/17/20	09/16/20	183.60	0.00	0.00	183.60
		CS INVENTORY & DIETARY SU							
	447919-0		08/28/20	08/11/20	09/10/20	153.63	0.00	0.00	153.63
		OFFICE SUPPLIES ADMIN							
	448393-0		08/28/20	08/14/20	09/13/20	33.72	0.00	0.00	33.72
		SUPPLIES XRAY							
	448506-0		08/28/20	08/17/20	09/16/20	41.74	0.00	0.00	41.74
		SUPPLIES HIM							
	449020-0		08/28/20	08/21/20	09/20/20	173.67	0.00	0.00	173.67
		OFFICE SUPPLIES ADMIN							
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10368	DEWITT POTH & SON			1,396.30	0.00	0.00	1,396.30
Vendor#	Vendor Name				Class	Pay Code			
D1752	DLE PAPER & PACKAGING				W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	8328		08/26/20	08/19/20	09/18/20		254.58	0.00	0.00	254.58
		CS FORM SUPPLIES							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		D1752	DLE PAPER & PACKAGING				254.58	0.00	0.00	254.58
Vendor#	Vendor Name				Class	Pay Code			
11046	E-MDS, INC								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	73588		08/31/20	07/27/20	08/26/20		7,335.22	0.00	0.00	7,335.22
		OUTSIDE SRV CLINIC							
	74041		08/31/20	08/19/20	09/18/20		3,688.65	0.00	0.00	3,688.65
		OUTSIDE SRV CLINIC							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11046	E-MDS, INC				11,023.87	0.00	0.00	11,023.87
Vendor#	Vendor Name				Class	Pay Code			
C2510	EVIDENT				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	T1508101378		08/27/20	08/10/20	09/09/20		16,654.53	0.00	0.00	16,654.53
		OUTSIDE SRV COMPUTER SY							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C2510	EVIDENT				16,654.53	0.00	0.00	16,654.53
Vendor#	Vendor Name				Class	Pay Code			
F1100	FEDERAL EXPRESS CORP.				W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	5-133-22876		08/28/20	08/20/20	09/04/20		11.30	0.00	0.00	11.30
		FREIGHT EXP LAB							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		F1100	FEDERAL EXPRESS CORP.				11.30	0.00	0.00	11.30
Vendor#	Vendor Name				Class	Pay Code			
10788	FIRETROL PROTECTION SYSTEMS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	~~100389815~~		08/28/20	08/19/20	09/18/20		~~450.00~~	0.00	0.00	~~450.00~~
		FIRE ALARM REPAIRS							

Invoice Not Billed to MMC

100389798		08/28/20	08/19/20	09/18/20	472.00	0.00	0.00	472.00
FIRE ALARM REPAIRS								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10788	FIRETROL PROTECTION SYSTEMS			922.00	0.00	0.00	922.00 472.00
Vendor#	Vendor Name			Class	Pay Code			
11037	FIRST CLEARING							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
20264		08/28/20	08/20/20	08/20/20		75.00	0.00	0.00	75.00
	EMPLOYEE PERSONAL INVES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11037	FIRST CLEARING				75.00	0.00	0.00	75.00
Vendor#	Vendor Name			Class	Pay Code				
F1400	FISHER HEALTHCARE			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
7337486		08/28/20	08/06/20	09/05/20		1,002.25	0.00	0.00	1,002.25
	LAB SUPPLIES								
7337485		08/28/20	08/06/20	09/05/20		556.16	0.00	0.00	556.16
	LAB SUPPLIES								
7393375		08/28/20	08/07/20	09/06/20		274.26	0.00	0.00	274.26
	LAB SUPPLIES								
7530428		08/28/20	08/11/20	09/10/20		741.33	0.00	0.00	741.33
	LAB SUPPLIES								
7613907		08/28/20	08/12/20	09/11/20		193.51	0.00	0.00	193.51
	LAB SUPPLIES								
7876773		08/28/20	08/17/20	09/16/20		175.78	0.00	0.00	175.78
	LAB SUPPLIES								
7924900		08/28/20	08/18/20	09/17/20		78.95	0.00	0.00	78.95
	SUPPLIES LAB								
7924901		08/28/20	08/18/20	09/17/20		1,032.50	0.00	0.00	1,032.50
	SUPPLIES LAB								
7976727		08/28/20	08/19/20	09/18/20		326.06	0.00	0.00	326.06
	SUPPLIES LAB								
7976726		08/28/20	08/19/20	09/18/20		2,510.26	0.00	0.00	2,510.26
	LAB SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	F1400	FISHER HEALTHCARE				6,891.06	0.00	0.00	6,891.06
Vendor#	Vendor Name			Class	Pay Code				
11078	FUSION MEDICAL STAFFING, LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
58735		08/28/20	08/21/20	09/20/20		2,520.00	0.00	0.00	2,520.00
	PROF FEES PT								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11078	FUSION MEDICAL STAFFING, LLC				2,520.00	0.00	0.00	2,520.00
Vendor#	Vendor Name			Class	Pay Code				
10488	GE HEALTHCARE IITS USA CORP								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
030289606		08/28/20	08/07/20	09/06/20		805.27	0.00	0.00	805.27
	DUES & SUBSCRIPTIONS OB								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10488	GE HEALTHCARE IITS USA CORP				805.27	0.00	0.00	805.27
Vendor#	Vendor Name			Class	Pay Code				

G1001 GETINGE USA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
7971705		08/26/20	08/11/20	09/16/20			109.19	0.00	0.00	109.19
	SURGERY SUPPLIES									
7971706		08/28/20	08/11/20	09/10/20			81.28	0.00	0.00	81.28
	SUPPLIES BIO MED									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1001	GETINGE USA	190.47	0.00	0.00	190.47

Vendor# Vendor Name — Class — Pay Code

10653 GLOBAL EQUIPMENT COMPANY

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
108380331		08/27/20	08/03/20	09/02/20			295.92	0.00	0.00	295.92
	SUPPLIES PLANT OPS									
108381573		08/27/20	08/03/20	09/02/20			478.00	0.00	0.00	478.00
	SUPPLIES PLANT OPS									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10653	GLOBAL EQUIPMENT COMPANY	773.92	0.00	0.00	773.92

Vendor# Vendor Name — Class — Pay Code

W1300 GRAINGER — M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9815072856		08/28/20	08/11/20	09/10/20			32.40	0.00	0.00	32.40
	SUPPLIES CS									
9813077378		08/28/20	08/12/20	09/11/20			303.93	0.00	0.00	303.93
	SUPPLIES MED SURG									
9821205904		08/28/20	08/19/20	09/18/20			50.19	0.00	0.00	50.19
	SUPPLIES PLANT OPS									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	W1300	GRAINGER	386.52	0.00	0.00	386.52

Vendor# Vendor Name — Class — Pay Code

G0930 GRAPHIC CONTROLS LLC — M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
LY5707		08/26/20	08/13/20	09/16/20			119.76	0.00	0.00	119.76
	SUPPLIES ULTRASOUND									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G0930	GRAPHIC CONTROLS LLC	119.76	0.00	0.00	119.76

Vendor# Vendor Name — Class — Pay Code

G0401 GULF COAST DELIVERY

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20305		08/31/20	08/21/20	08/21/20			50.00	0.00	0.00	50.00
	DELIVERY SERVICE XRAY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G0401	GULF COAST DELIVERY	50.00	0.00	0.00	50.00

Vendor# Vendor Name — Class — Pay Code

A1292 GULF COAST HARDWARE / ACE — W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
94015		08/27/20	08/07/20	09/06/20			13.98	0.00	0.00	13.98
	SUPPLIES PT									
94024		08/27/20	08/08/20	09/07/20			20.97	0.00	0.00	20.97
	SUPPLIES PT									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1292	GULF COAST HARDWARE / ACE	34.95	0.00	0.00	34.95

Vendor# Vendor Name — Class — Pay Code

G1210 GULF COAST PAPER COMPANY M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
991053		08/26/20	08/11/20	09/16/20		236.74	0.00	0.00	236.74
	SUPPLIES HOUSEKEEPING								
994815		08/26/20	08/18/20	09/17/20		512.52	0.00	0.00	512.52
	HOUSEKEEPING SUPPLIES								
994808		08/28/20	08/18/20	09/17/20		1,645.66	0.00	0.00	1,645.66
	NEW BURNISHER HOUSEKEE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY	2,394.92	0.00	0.00	2,394.92

Vendor# Vendor Name Class Pay Code

H1050 HAVEL'S INCORPORATED M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1160286		08/26/20	08/19/20	09/18/20		165.95	0.00	0.00	165.95
	SURGERY SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1050	HAVEL'S INCORPORATED	165.95	0.00	0.00	165.95

Vendor# Vendor Name Class Pay Code

H1100 HAYES ELECTRIC SERVICE W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
A2150812-25		08/28/20	08/12/20	09/11/20		5.62	0.00	0.00	5.62
	SUPPLIES PLANT OPS								
A2150820-13		08/28/20	08/20/20	09/19/20		18.00	0.00	0.00	18.00
	SUPPLIES PLANT OPS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1100	HAYES ELECTRIC SERVICE	23.62	0.00	0.00	23.62

Vendor# Vendor Name Class Pay Code

10334 HEALTH CARE LOGISTICS INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
5589938		08/31/20	08/19/20	09/18/20		73.59	0.00	0.00	73.59
	SUPPLIES DIETARY								
5590285		08/31/20	08/19/20	09/18/20		114.55	0.00	0.00	114.55
	SUPPLIES DIETARY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10334	HEALTH CARE LOGISTICS INC	188.14	0.00	0.00	188.14

Vendor# Vendor Name Class Pay Code

H1399 HILL-ROM COMPANY, INC M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
24333391		08/28/20	08/05/20	09/04/20		8,342.40	0.00	0.00	8,342.40
	MATTRESSES MED SURG								
24334739		08/28/20	08/08/20	09/07/20		43.55	0.00	0.00	43.55
	REPAIRS MED SURG								
24341881		08/31/20	08/20/20	09/19/20		420.70	0.00	0.00	420.70
	REPAIRS IN MED SURG								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1399	HILL-ROM COMPANY, INC	8,806.65	0.00	0.00	8,806.65

Vendor# Vendor Name Class Pay Code

H0416 HOLOGIC INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
7589757		08/26/20	08/11/20	09/16/20		3,361.48	0.00	0.00	3,361.48
	SUPPLIES SURGERY								

7595429		08/26/20	08/18/20	09/17/20	3,302.02	0.00	0.00	3,302.02
SURGERY SUPPLIES								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	H0416	HOLOGIC INC			6,663.50	0.00	0.00	6,663.50

Vendor#	Vendor Name	Class	Pay Code
H1850	HOSPIRA WORLDWIDE, INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
919868545		08/28/20	08/19/20	09/18/20			164.30	0.00	0.00	164.30
	REPAIRS MED SURG									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	H1850	HOSPIRA WORLDWIDE, INC					164.30	0.00	0.00	164.30

Vendor#	Vendor Name	Class	Pay Code
I0415	INDEPENDENCE MEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
36494908		08/26/20	08/05/20	09/16/20			37.35	0.00	0.00	37.35
	CS INVENTORY & SURGERY S									
36536509		08/26/20	08/10/20	09/16/20			99.57	0.00	0.00	99.57
	CS INVENTORY									
36552709		08/26/20	08/11/20	09/17/20			13.52	0.00	0.00	13.52
	CS INVENTORY									
36579438		08/26/20	08/13/20	09/16/20			215.70	0.00	0.00	215.70
	CS INVENTORY									
36613512		08/31/20	08/17/20	09/16/20			54.38	0.00	0.00	54.38
	CS INVENTORY									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	I0415	INDEPENDENCE MEDICAL					420.52	0.00	0.00	420.52

Vendor#	Vendor Name	Class	Pay Code
I1127	INTEGRATED MEDICAL SYSTEMS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1138339		08/28/20	07/23/20	08/22/20			41.25	0.00	0.00	41.25
	REPAIRS SURGERY									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	I1127	INTEGRATED MEDICAL SYSTEMS					41.25	0.00	0.00	41.25

Vendor#	Vendor Name	Class	Pay Code
J0150	J & J HEALTH CARE SYSTEMS, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
915008689		08/26/20	08/07/20	09/16/20			179.58	0.00	0.00	179.58
	SURGERY SUPPLIES									
915019225		08/26/20	08/11/20	09/16/20			1,587.36	0.00	0.00	1,587.36
	SURGERY & CLINIC SUPPLIES									
915019226		08/26/20	08/11/20	09/16/20			297.85	0.00	0.00	297.85
	SUPPLIES SURGERY									
915040461		08/26/20	08/12/20	09/17/20			329.30	0.00	0.00	329.30
	CS INVENTORY & SURGERY S									
915070695		08/26/20	08/17/20	09/16/20			287.30	0.00	0.00	287.30
	SURGERY SUPPLIES									
915084630		08/26/20	08/19/20	09/18/20			732.62	0.00	0.00	732.62
	SURGERY SUPPLIES									
915088684		08/26/20	08/19/20	09/18/20			39.15	0.00	0.00	39.15
	SUPPLIES CLINIC									
914991567		08/28/20	08/05/20	09/04/20			382.44	0.00	0.00	382.44
	BLOOD BANK SUPPLIES									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	J0150	J & J HEALTH CARE SYSTEMS, INC	3,835.60	0.00	0.00	3,835.60

Vendor#	Vendor Name	Class	Pay Code
10507	JASON ANGLIN		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20261		08/28/20	08/26/20	08/26/20			77.98	0.00	0.00	77.98
	SUPPLIES PHARMACY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10507	JASON ANGLIN	77.98	0.00	0.00	77.98

Vendor#	Vendor Name	Class	Pay Code
11005	K & T CONSTRUCTION, CO., INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
4-13083-9		08/31/20	08/28/20	08/28/20			145,913.68	0.00	0.00	145,913.68
	CLINIC CONSTRUCTION									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11005	K & T CONSTRUCTION, CO., INC.	145,913.68	0.00	0.00	145,913.68

Vendor#	Vendor Name	Class	Pay Code
10371	LOFTIN EQUIPMENT COMPANY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
S081662		08/28/20	08/07/20	09/06/20			1,699.28	0.00	0.00	1,699.28
	ANNUAL FULL SERVICE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10371	LOFTIN EQUIPMENT COMPANY	1,699.28	0.00	0.00	1,699.28

Vendor#	Vendor Name	Class	Pay Code
10578	LUMINANT ENERGY COMPANY LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
INV0532586		08/17/20	08/03/20	09/18/20			2,537.09	0.00	0.00	2,537.09
	FUEL EXP PLANT OPS									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10578	LUMINANT ENERGY COMPANY LLC	2,537.09	0.00	0.00	2,537.09

Vendor#	Vendor Name	Class	Pay Code
10972	M G TRUST		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20265		08/28/20	08/20/20	08/20/20			1,495.00	0.00	0.00	1,495.00
	EMPLOYEE PERSONAL INVEN									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10972	M G TRUST	1,495.00	0.00	0.00	1,495.00

Vendor#	Vendor Name	Class	Pay Code
J1350	M.C. JOHNSON COMPANY INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
00259249		08/26/20	08/20/20	09/19/20			104.21	0.00	0.00	104.21
	CS INVENTORY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	J1350	M.C. JOHNSON COMPANY INC	104.21	0.00	0.00	104.21

Vendor#	Vendor Name	Class	Pay Code
M1500	MARKS PLUMBING PARTS	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
INV001443391		08/28/20	08/17/20	09/16/20			210.09	0.00	0.00	210.09
	SUPPLIES PLANT OPS									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M1500	MARKS PLUMBING PARTS	210.09	0.00	0.00	210.09

Vendor#	Vendor Name				Class	Pay Code				
M2178	MCKESSON MEDICAL SURGICAL INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	63070977		08/31/20	08/24/20	09/15/20		84.29	0.00	0.00	84.29
		ICU SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2178	MCKESSON MEDICAL SURGICAL INC				84.29	0.00	0.00	84.29
Vendor#	Vendor Name				Class	Pay Code				
M2556	MEGADYNE MEDICAL				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	I1040724		08/26/20	08/05/20	09/16/20		54.00	0.00	0.00	54.00
		SURGERY SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2556	MEGADYNE MEDICAL				54.00	0.00	0.00	54.00
Vendor#	Vendor Name				Class	Pay Code				
10963	MEMORIAL MEDICAL CLINIC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20266		08/28/20	08/20/20	08/20/20		96.00	0.00	0.00	96.00
		CLINIC CO PAYS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10963	MEMORIAL MEDICAL CLINIC				96.00	0.00	0.00	96.00
Vendor#	Vendor Name				Class	Pay Code				
10182	MERCEDES MEDICAL									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	17628/08		08/28/20	08/11/20	09/10/20		270.91	0.00	0.00	270.91
		LAB SUPPLIES								
	1764621		08/28/20	08/18/20	09/17/20		270.91	0.00	0.00	270.91
		SUPPLIES LAB								
	1764847		08/28/20	08/19/20	09/18/20		47.91	0.00	0.00	47.91
		SUPPLIES LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10182	MERCEDES MEDICAL				589.73	0.00	0.00	589.73
Vendor#	Vendor Name				Class	Pay Code				
M2659	MERRY X-RAY/SOURCEONE HEALTHCA				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	30094097215		08/26/20	08/10/20	09/16/20		180.69	0.00	0.00	180.69
		SUPPLIES MAMMO								
	30094098792		08/26/20	08/12/20	09/16/20		1,104.16	0.00	0.00	1,104.16
		SUPPLIES XRAY								
	30094101909		08/26/20	08/18/20	09/17/20		170.64	0.00	0.00	170.64
		SUPPLIES XRAY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2659	MERRY X-RAY/SOURCEONE HEALTHCA				1,455.49	0.00	0.00	1,455.49
Vendor#	Vendor Name				Class	Pay Code				
10764	MICHAEL CHAVANA									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20306		08/31/20	08/26/20	08/26/20		219.75	0.00	0.00	219.75
		TRAVEL EXP ADMIN								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10764	MICHAEL CHAVANA				219.75	0.00	0.00	219.75
Vendor#	Vendor Name				Class	Pay Code				
M2621	MMC AUXILIARY GIFT SHOP				W					

	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20248		08/28/20	08/28/20	08/28/20		140.62	0.00	0.00	140.62
		EMPLOYEE GIFT SHOP PURC								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2621	MMC AUXILIARY GIFT SHOP				140.62	0.00	0.00	140.62
Vendor#	Vendor Name				Class	Pay Code				
10903	MMC CONSTRUCTION									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20309		08/31/20	08/31/20	08/31/20		241,518.00	0.00	0.00	241,518.00
		FUNDING FOR CLINIC ACCT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10903	MMC CONSTRUCTION				241,518.00	0.00	0.00	241,518.00
Vendor#	Vendor Name				Class	Pay Code				
10810	MMC EMPLOYEE BENEFIT PLAN									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20300		08/31/20	08/31/20	08/31/20		5,687.43	0.00	0.00	5,687.43
		EMPLOYEE MEDICAL CLAIMS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10810	MMC EMPLOYEE BENEFIT PLAN				5,687.43	0.00	0.00	5,687.43
Vendor#	Vendor Name				Class	Pay Code				
E1151	MONICA ESCALANTE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20307		08/31/20	08/28/20	08/28/20		277.80	0.00	0.00	277.80
		TRAVEL EXP INDIGENT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		E1151	MONICA ESCALANTE				277.80	0.00	0.00	277.80
Vendor#	Vendor Name				Class	Pay Code				
10536	MORRIS & DICKSON CO, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	7821681		08/28/20	08/25/20	09/04/20		66.08	0.00	0.00	66.08
		PHARMACY DRUGS								
	7821682		08/28/20	08/25/20	09/04/20		119.43	0.00	0.00	119.43
		PHARMACY DRUGS								
	7819832		08/28/20	08/25/20	09/04/20		24.20	0.00	0.00	24.20
		PHARMACY DRUGS								
	CM32261		08/28/20	08/26/20	09/05/20		-395.27	0.00	0.00	-395.27
		PHARMACY CREDIT								
	7826147		08/28/20	08/26/20	09/05/20		1,674.45	0.00	0.00	1,674.45
		PHARMACY DRUGS								
	7826146		08/28/20	08/26/20	09/05/20		21.73	0.00	0.00	21.73
		PHARMACY DRUGS								
	7831607		08/28/20	08/27/20	09/06/20		202.26	0.00	0.00	202.26
		PHARMACY DRUGS								
	7832307		08/28/20	08/27/20	09/06/20		16.14	0.00	0.00	16.14
		PHARMACY DRUGS								
	CM33103		08/28/20	08/27/20	09/06/20		-18.77	0.00	0.00	-18.77
		PHARMACY CREDIT								
	CM33102		08/28/20	08/27/20	09/06/20		-0.72	0.00	0.00	-0.72
		PHARMACY CREDIT								
	7831606		08/28/20	08/27/20	09/06/20		1,307.02	0.00	0.00	1,307.02
		PHARMACY DRUGS								

CM33104		08/28/20	08/27/20	09/06/20	-147.65	0.00	0.00	-147.65
	PHARMACY CREDIT							
7639839		08/31/20	07/08/20	07/18/20	20.42	0.00	0.00	20.42
	PHARMACY DRUGS							
7644647		08/31/20	07/09/20	07/19/20	6.05	0.00	0.00	6.05
	PHARMACY DRUGS							
7801668		08/31/20	08/19/20	08/29/20	118.24	0.00	0.00	118.24
	PHARMACY DRUGS							
CM34528		08/31/20	08/31/20	09/10/20	-474.39	0.00	0.00	-474.39
	PHARMACY CREDIT							
7842680		08/31/20	08/31/20	09/10/20	487.03	0.00	0.00	487.03
	PHARMACY DRUGS							
7842683		08/31/20	08/31/20	09/10/20	15.58	0.00	0.00	15.58
	PHARMACY DRUGS							
7842682		08/31/20	08/31/20	09/10/20	187.03	0.00	0.00	187.03
	PHARMACY DRUGS							
7842681		08/31/20	08/31/20	09/10/20	2,405.17	0.00	0.00	2,405.17
	PHARMACY DRUGS							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC			5,634.03	0.00	0.00	5,634.03

Vendor#	Vendor Name	Class	Pay Code
O0920	OFFICE DEPOT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
785061194001		08/26/20	08/06/20	09/16/20			185.22	0.00	0.00	185.22
	OFFICE SUPPLIES XRAY & BU									
788483010001		08/31/20	08/20/20	09/19/20			61.74	0.00	0.00	61.74
	SUPPLIES XRAY									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	O0920	OFFICE DEPOT					246.96	0.00	0.00	246.96

Vendor#	Vendor Name	Class	Pay Code
OM425	OWENS & MINOR		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
2008556688		08/10/20	08/04/20	09/16/20			3,358.09	0.00	0.00	3,358.09
	CS INVENTORY & LAB									
2008629462		08/10/20	08/06/20	09/16/20			2,416.68	0.00	0.00	2,416.68
	SUPPLIES VARIOUS DEPTS									
2008625063		08/26/20	08/06/20	09/16/20			34.53	0.00	0.00	34.53
	CS INVENTORY									
2008752657		08/26/20	08/11/20	09/16/20			36.88	0.00	0.00	36.88
	SUPPLIES HOUSEKEEPING									
2008753771		08/26/20	08/11/20	09/16/20			94.47	0.00	0.00	94.47
	SURGERY SUPPLIES									
2008753336		08/26/20	08/11/20	09/16/20			17.72	0.00	0.00	17.72
	CS INVENTORY									
2008756094		08/26/20	08/11/20	09/16/20			29.71	0.00	0.00	29.71
	CS INVENTORY									
2008755220		08/26/20	08/11/20	09/16/20			78.44	0.00	0.00	78.44
	SUPPLIES SURGERY									
2008759658		08/26/20	08/11/20	09/16/20			1,022.13	0.00	0.00	1,022.13
	SUPPLIES VARIOUS DEPTS									
2008752869		08/26/20	08/11/20	09/16/20			66.40	0.00	0.00	66.40
	SUPPLIES SURGERY									

2008752824	08/26/20 08/11/20 09/16/20		54.93	0.00	0.00	54.93
SUPPLIES MED SURG							
2008873934	08/26/20 08/13/20 09/16/20		72.07	0.00	0.00	72.07
SUPPLIES VARIOUS DEPTS							
2008876015	08/26/20 08/13/20 09/16/20		280.11	0.00	0.00	280.11
SUPPLIES VARIOUS DEPTS							
2008874580	08/26/20 08/13/20 09/16/20		19.24	0.00	0.00	19.24
CS INVENTORY							
2008873385	08/26/20 08/13/20 09/16/20		10.24	0.00	0.00	10.24
CS INVENTORY							
2008876008	08/26/20 08/13/20 09/16/20		2,271.36	0.00	0.00	2,271.36
CS INVENTORY							
2009007686	08/26/20 08/18/20 09/17/20		28.26	0.00	0.00	28.26
CS INVENTORY							
2009007687	08/26/20 08/18/20 09/17/20		67.81	0.00	0.00	67.81
SUPPLIES DIETARY							
2009008313	08/26/20 08/18/20 09/17/20		1,182.25	0.00	0.00	1,182.25
SUPPLIES SURGERY							
2009008834	08/26/20 08/18/20 09/17/20		1,812.52	0.00	0.00	1,812.52
CS INVENTORY & LAB SUPPL							
2009008409	08/26/20 08/18/20 09/17/20		1,015.91	0.00	0.00	1,015.91
SUPPLIES VARIOUS DEPTS							
2009007202	08/26/20 08/18/20 09/17/20		39.00	0.00	0.00	39.00
SUPPLIES DIETARY							
2009061287	08/26/20 08/20/20 09/19/20		50.85	0.00	0.00	50.85
CS INVENTORY							
2009064953	08/26/20 08/20/20 09/19/20		69.72	0.00	0.00	69.72
CS INVENTORY							
2009069108	08/26/20 08/20/20 09/19/20		974.93	0.00	0.00	974.93
SUPPLIES VARIOUS DEPTS							
2008549858	08/27/20 08/04/20 09/03/20		-653.46	0.00	0.00	-653.46
CREDIT CS INVENTORY							
2009060106	08/27/20 08/20/20 09/19/20		10.24	0.00	0.00	10.24
CS INVENTORY							
2008620652	08/28/20 08/06/20 09/05/20		107.88	0.00	0.00	107.88
REPAIRS CLINC							
2008873171	08/28/20 08/13/20 09/12/20		8,689.76	0.00	0.00	8,689.76
SURGERY CLINIC EXAM TABL							
2009007081	08/28/20 08/18/20 09/17/20		6.26	0.00	0.00	6.26
SUPPLIES ICU							
Vendor Totals Number	Name		Gross	Discount	No-Pay	Net	
OM425	OWENS & MINOR		23,264.93	0.00	0.00	23,264.93	

Vendor#	Vendor Name	Class	Pay Code
11069	PABLO GARZA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20310		08/31/20	08/27/20	08/27/20			1,132.50	0.00	0.00	1,132.50
	OUTSIDE SRV CLINIC									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11069	PABLO GARZA					1,132.50	0.00	0.00	1,132.50

Vendor#	Vendor Name	Class	Pay Code
11111	PHELAN MANUFACTURING CORP		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
91844		08/28/20	08/12/20	09/11/20		35.57	0.00	0.00	35.57
	REPAIRS SURGERY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11111	PHELAN MANUFACTURING CORP				35.57	0.00	0.00	35.57

Vendor#	Vendor Name	Class	Pay Code
10032	PHILIPS HEALTHCARE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
931430151		08/27/20	08/06/20	09/05/20		180.60	0.00	0.00	180.60
	SUPPLIES ICU								
931443168		08/28/20	08/10/20	09/09/20		205.08	0.00	0.00	205.08
	SUPPLIES SURGERY								
931464400		08/28/20	08/13/20	09/12/20		103.36	0.00	0.00	103.36
	SUPPLIES LAB								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10032	PHILIPS HEALTHCARE				489.04	0.00	0.00	489.04

Vendor#	Vendor Name	Class	Pay Code
10541	PLATINUM CODE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
028775		08/26/20	08/05/20	09/16/20		298.64	0.00	0.00	298.64
	SUPPLIES LAB								
028203		08/31/20	07/30/20	08/29/20		47.11	0.00	0.00	47.11
	SUPPLIES XRAY								
028471		08/31/20	08/03/20	09/02/20		279.59	0.00	0.00	279.59
	CS INVENTORY								
029057		08/31/20	08/10/20	09/09/20		439.91	0.00	0.00	439.91
	CS INVENTORY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10541	PLATINUM CODE				1,065.25	0.00	0.00	1,065.25

Vendor#	Vendor Name	Class	Pay Code
P2200	POWER ELECTRIC	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
B14556		08/27/20	08/04/20	09/03/20		3.34	0.00	0.00	3.34
	SUPPLIES PLANT OPS								
A13146		08/27/20	08/06/20	09/05/20		52.58	0.00	0.00	52.58
	SUPPLIES PLANT OPS								
B14684		08/27/20	08/08/20	09/07/20		2.19	0.00	0.00	2.19
	SUPPLIES PT								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	P2200	POWER ELECTRIC				58.11	0.00	0.00	58.11

Vendor#	Vendor Name	Class	Pay Code
10372	PRECISION DYNAMICS CORP (PDC)		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3072420		08/26/20	08/03/20	09/16/20		235.86	0.00	0.00	235.86
	OFFICE SUPPLIES LAB								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10372	PRECISION DYNAMICS CORP (PDC)				235.86	0.00	0.00	235.86

Vendor#	Vendor Name	Class	Pay Code
10645	REVISTA de VICTORIA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
08201529		08/28/20	08/17/20	08/31/20		240.00	0.00	0.00	240.00
	ADVERTISING								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10645	REVISTA de VICTORIA				240.00	0.00	0.00	240.00
Vendor#	Vendor Name			Class	Pay Code				
10897	ROLANDO REYES, SR.								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20308		08/31/20	08/26/20	08/26/20		189.75	0.00	0.00	189.75
		TRAVEL EXPENSE ADMIN								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10897	ROLANDO REYES, SR.				189.75	0.00	0.00	189.75
Vendor#	Vendor Name			Class	Pay Code				
S0900	SAM'S CLUB DIRECT			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	001133		08/31/20	08/07/20	09/08/20		216.48	0.00	0.00	216.48
		SUPPLIES ADMIN								
	REFUND		08/31/20	08/14/20	09/08/20		-16.50	0.00	0.00	-16.50
		CREDIT SUPPLIES ADMIN								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S0900	SAM'S CLUB DIRECT				199.98	0.00	0.00	199.98
Vendor#	Vendor Name			Class	Pay Code				
S1800	SHERWIN WILLIAMS			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	9520-8		08/27/20	08/07/20	09/06/20		17.92	0.00	0.00	17.92
		SUPPLIES PLANT OPS								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S1800	SHERWIN WILLIAMS				17.92	0.00	0.00	17.92
Vendor#	Vendor Name			Class	Pay Code				
K0536	SHIRLEY KARNEI								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20303		08/31/20	08/30/20	08/30/20		1,338.60	0.00	0.00	1,338.60
		OUTSIDE SRV TRANSCRIPTIC								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	K0536	SHIRLEY KARNEI				1,338.60	0.00	0.00	1,338.60
Vendor#	Vendor Name			Class	Pay Code				
S2362	SMITH & NEPHEW								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	92407200		08/26/20	08/17/20	09/16/20		977.25	0.00	0.00	977.25
		SUPPLIES SURGERY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2362	SMITH & NEPHEW				977.25	0.00	0.00	977.25
Vendor#	Vendor Name			Class	Pay Code				
S2400	SO TEX BLOOD & TISSUE CENTER			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	90014966		08/28/20	08/18/20	09/17/20		-3,825.00	0.00	0.00	-3,825.00
		BLOOD BANK SUPPLIES CREI								
	90115036		08/28/20	08/18/20	09/17/20		8,026.00	0.00	0.00	8,026.00
		BLOOD BANK SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2400	SO TEX BLOOD & TISSUE CENTER				4,201.00	0.00	0.00	4,201.00
Vendor#	Vendor Name			Class	Pay Code				
S2951	SYSCO FOOD SERVICES OF			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

508202428		08/31/20	08/20/20	09/09/20		780.17	0.00	0.00	780.17
FOOD SUPPLIES DIETARY									
508273054		08/31/20	08/27/20	09/16/20		358.12	0.00	0.00	358.12
FOOD SUPPLIES DIETARY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2951	SYSCO FOOD SERVICES OF				1,138.29	0.00	0.00	1,138.29
Vendor#	Vendor Name				Class	Pay Code			
11015	TED RODRIGUEZ								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20302		09/01/20	08/31/20	09/12/20		240.00	0.00	0.00	240.00
CONT EDUCATION ER									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11015	TED RODRIGUEZ				240.00	0.00	0.00	240.00
Vendor#	Vendor Name				Class	Pay Code			
10765	TEXAS HOSPITAL ASSOCIATION								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
00174974		08/28/20	08/18/20	08/18/20		6,931.00	0.00	0.00	6,931.00
DUES & SUBCRIPTIONS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10765	TEXAS HOSPITAL ASSOCIATION				6,931.00	0.00	0.00	6,931.00
Vendor#	Vendor Name				Class	Pay Code			
10985	THE COMPLIANCE TEAM, INC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
0011162		08/31/20	08/24/20	08/24/20		2,000.00	0.00	0.00	2,000.00
ACCREDITATION FEE CLINIC									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10985	THE COMPLIANCE TEAM, INC				2,000.00	0.00	0.00	2,000.00
Vendor#	Vendor Name				Class	Pay Code			
S1801	TRACI SHEFCIK				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20260		08/28/20	08/24/20	08/24/20		731.00	0.00	0.00	731.00
DUES & SUBCRIPTONS CLINI(									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S1801	TRACI SHEFCIK				731.00	0.00	0.00	731.00
Vendor#	Vendor Name				Class	Pay Code			
U1054	UNIFIRST HOLDINGS				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8150701814		08/28/20	08/18/20	09/17/20		27.50	0.00	0.00	27.50
OUTSIDE SRV BIO MED									
8150701710		08/28/20	08/18/20	09/17/20		44.53	0.00	0.00	44.53
OUTSIDE SRV MAINT									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	U1054	UNIFIRST HOLDINGS				72.03	0.00	0.00	72.03
Vendor#	Vendor Name				Class	Pay Code			
U1064	UNIFIRST HOLDINGS INC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8400200778		08/27/20	08/14/20	09/13/20		386.34	0.00	0.00	386.34
LAUNDRY SURGERY									
8400200829		08/27/20	08/14/20	09/13/20		1,113.13	0.00	0.00	1,113.13
LAUNDRY HOUSEKEEPING									
8400200959		08/28/20	08/18/20	09/17/20		176.43	0.00	0.00	176.43
LAUNDRY HOUSEKEEPING									

8400200960		08/28/20	08/18/20	09/17/20	175.14	0.00	0.00	175.14
LAUNDRY DIETARY								
8400200962		08/28/20	08/18/20	09/17/20	107.46	0.00	0.00	107.46
LAUNDRY HOUSEKEEPING								
8400200961		08/28/20	08/18/20	09/17/20	104.21	0.00	0.00	104.21
LAUNDRY OB								
8400201013		08/28/20	08/18/20	09/17/20	955.61	0.00	0.00	955.61
LAUNDRY HOUSEKEEPING								
8400200958		08/28/20	08/18/20	09/17/20	204.18	0.00	0.00	204.18
LAUNDRY HOUSEKEEPING								
8400201340		08/28/20	08/21/20	09/20/20	1,198.99	0.00	0.00	1,198.99
LAUNDRY HOUSEKEEPING								
8400201272		08/28/20	08/21/20	09/20/20	386.34	0.00	0.00	386.34
LAUNDRY SURGERY								
8400201002		08/31/20	08/18/20	09/17/20	176.62	0.00	0.00	176.62
LAUNDRY HOUSEKEEPING								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC			4,984.45	0.00	0.00	4,984.45

Vendor#	Vendor Name	Class	Pay Code
U1056	UNIFORM ADVANTAGE	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6346951		08/28/20	08/07/20	09/06/20			493.80	0.00	0.00	493.80
EMPLOYEE UNIFORMS										
6346939		08/28/20	08/07/20	09/06/20			483.76	0.00	0.00	483.76
EMPLOYEE UNIFORMS										
6346904		08/28/20	08/07/20	09/06/20			459.79	0.00	0.00	459.79
EMPLOYEE UNIFORMS										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	U1056	UNIFORM ADVANTAGE					1,437.35	0.00	0.00	1,437.35

Vendor#	Vendor Name	Class	Pay Code
10172	US FOOD SERVICE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
4982268		08/31/20	08/14/20	09/03/20			56.19	0.00	0.00	56.19
SUPPLIES DIETARY										
4989480		08/31/20	08/17/20	09/06/20			1,995.68	0.00	0.00	1,995.68
FOOD SUPPLIES DIETARY										
4989484		08/31/20	08/17/20	09/06/20			13.98	0.00	0.00	13.98
FOOD SUPPLIES DIETARY										
5032340		08/31/20	08/18/20	09/07/20			93.45	0.00	0.00	93.45
SUPPLIES DIETARY										
5058977		08/31/20	08/20/20	09/09/20			2,395.21	0.00	0.00	2,395.21
FOOD SUPPLIES DIETARY										
5120059		08/31/20	08/24/20	09/13/20			2,578.32	0.00	0.00	2,578.32
FOOD SUPPLIES DIETARY										
5190628		08/31/20	08/27/20	09/16/20			1,653.59	0.00	0.00	1,653.59
FOOD SUPPLIES DIETARY										
5248447		08/31/20	08/31/20	09/20/20			1,517.84	0.00	0.00	1,517.84
FOOD SUPPLIES DIETARY										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10172	US FOOD SERVICE					10,304.26	0.00	0.00	10,304.26

Vendor#	Vendor Name	Class	Pay Code

U0650 USI INC M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
376937101016		08/28/20	08/18/20	09/17/20			141.10	0.00	0.00	141.10 ✓
	OFFICE SUPPLIES HR									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U0650	USI INC ✓	141.10	0.00	0.00	141.10

Vendor# Vendor Name Class Pay Code

V0555 VERIZON SOUTHWEST M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
19776970819		08/31/20	08/19/20	09/13/20			63.25	0.00	0.00	63.25 60.67
	TELEPHONE EXPENSE									
55215670819		08/31/20	08/19/20	09/13/20			49.66	0.00	0.00	49.66 ✓
	TELEPHONE EXPENSE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	V0555	VERIZON SOUTHWEST ✓	112.91	0.00	0.00	112.91 110.33

Vendor# Vendor Name Class Pay Code

V0559 VERIZON WIRELESS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
9570764685		08/28/20	08/16/20	09/11/20			156.38	0.00	0.00	156.38 ✓
	TELEPHONE EXPENSE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	V0559	VERIZON WIRELESS ✓	156.38	0.00	0.00	156.38

Vendor# Vendor Name Class Pay Code

V1056 VICTORIA AIR CONDITIONING LTD W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
41086J		08/28/20	08/18/20	09/17/20			2,900.00	0.00	0.00	2,900.00 ✓
	REPAIRS TO HOT WATER PUI									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	V1056	VICTORIA AIR CONDITIONING LTD ✓	2,900.00	0.00	0.00	2,900.00

Vendor# Vendor Name Class Pay Code

10768 VICTORIA MEDICAL FOUNDATION

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20267		08/28/20	08/26/20	08/26/20			1,250.00	0.00	0.00	1,250.00 ✓
	CONT EDUCATION CLINIC $250 x 5									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10768	VICTORIA MEDICAL FOUNDATION	1,250.00	0.00	0.00	1,250.00

Vendor# Vendor Name Class Pay Code

11112 VICTORIA PROFESSIONAL

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
MMC0001		08/31/20	08/31/20	08/31/20			62,000.00	0.00	0.00	62,000.00 ✓
	Hospitalist Coverage - August 2015									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11112	VICTORIA PROFESSIONAL	62,000.00	0.00	0.00	62,000.00

Vendor# Vendor Name Class Pay Code

10793 WAGEWORKS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
125AI0412262		08/27/20	08/07/20	09/06/20			125.00	0.00	0.00	125.00
	FLEX SPENDING FEE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10793	WAGEWORKS	125.00	0.00	0.00	125.00 ✓

Vendor# Vendor Name Class Pay Code

10915 WAGEWORKS ✓

	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20267		08/28/20	08/20/20	08/20/20		1,308.61	0.00	0.00	1,308.61
		MONEY TO FUND FLEX SPENI								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10915	WAGEWORKS				1,308.61	0.00	0.00	1,308.61

Vendor#	Vendor Name	Class	Pay Code
W1040	WATERMARK GRAPHICS INC	M	

	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	106023		08/28/20	08/07/20	09/06/20		1,489.21	0.00	0.00	1,489.21
		EMPLOYEE UNIFORMS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		W1040	WATERMARK GRAPHICS INC				1,489.21	0.00	0.00	1,489.21

Vendor#	Vendor Name	Class	Pay Code
I1110	WERFEN USA LLC		

	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	9310012250		08/17/20	08/05/20	09/04/20		-1,144.38	0.00	0.00	-1,144.38
		LAB SUPPLIES CREDIT								
	9110227386		08/28/20	08/08/20	09/07/20		3,814.60	0.00	0.00	3,814.60
		LAB SUPPLIES								
	9110228218		08/28/20	08/12/20	09/11/20		872.00	0.00	0.00	872.00
		LAB SUPPLIES								
	9110228371		08/28/20	08/12/20	09/11/20		3,814.60	0.00	0.00	3,814.60
		LAB SUPPLIES								
	9110228217		08/28/20	08/12/20	09/11/20		1,947.00	0.00	0.00	1,947.00
		LAB SUPPLIES								
	9110228715		08/28/20	08/14/20	09/13/20		1,571.67	0.00	0.00	1,571.67
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		I1110	WERFEN USA LLC				10,875.49	0.00	0.00	10,875.49

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	728,779.06	0.00	0.00	728,779.06

Pg 6 correction (450.00)
Pg 20 correction (63.25) + 60.67

728,326.48

Michael J. Pfeifer
Calhoun County Judge
Date: 9-3-15

CKs # 162992 to 163099

APPROVED ON

SEP 03 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE: 09/01/15 MEMORIAL MEDICAL CENTER PAGE 1 of 1
TIME: 16:37 EDIT LIST FOR PATIENT REFUNDS ARID=0001 APCDEDIT

PATIENT NUMBER	PAYEE NAME	DATE	PAY AMOUNT	PAT CODE	TYPE	DESCRIPTION	GL NUM
MIS100	01 THE BROADMOOR AT CREEKSIDE	012813	3833.49	2		REFUND FOR MISSAPLIED PAYMENT	
	ARID=0001 TOTAL		3833.49				
TOTAL			3833.49				

2,359.07 +
1,474.42 +
3,833.49 *

APPROVED
ON

SEP 03 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 163100

Michael J. Pfeifer
Calhoun County Judge
Date: 9-3-15

RUN DATE:09/03/15 MEMORIAL MEDICAL CENTER PAGE 1 83
TIME:15:34 CHECK REGISTER GLCKREG
09/03/15 THRU 09/03/15

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	162992	09/03/15	2,242.64	BECTON, DICKINSON & CO (BD)
A/P	162993	09/03/15	489.04	PHILIPS HEALTHCARE
A/P	162994	09/03/15	10,304.26	US FOOD SERVICE
A/P	162995	09/03/15	589.73	MERCEDES MEDICAL
A/P	162996	09/03/15	188.14	HEALTH CARE LOGISTICS INC
A/P	162997	09/03/15	3,202.21	CENTURION MEDICAL PRODUCTS
A/P	162998	09/03/15	1,396.30	DEWITT POTH & SON
A/P	162999	09/03/15	1,699.28	LOFTIN EQUIPMENT COMPANY
A/P	163000	09/03/15	235.86	PRECISION DYNAMICS CORP (PDC)
A/P	163001	09/03/15	421.39	CAREFUSION 211, INC
A/P	163002	09/03/15	805.27	GE HEALTHCARE IITS USA CORP
A/P	163003	09/03/15	77.98	JASON ANGLIN
A/P	163004	09/03/15	3,325.00	DA&E
A/P	163005	09/03/15	.00	VOIDED
A/P	163006	09/03/15	5,634.03	MORRIS & DICKSON CO, LLC
A/P	163007	09/03/15	1,065.25	PLATINUM CODE
A/P	163008	09/03/15	2,537.09	LUMINANT ENERGY COMPANY LLC
A/P	163009	09/03/15	49,546.67	BKD, LLP
A/P	163010	09/03/15	240.00	REVISTA de VICTORIA
A/P	163011	09/03/15	773.92	GLOBAL EQUIPMENT COMPANY
A/P	163012	09/03/15	219.75	MICHAEL CHAVANA
A/P	163013	09/03/15	6,931.00	TEXAS HOSPITAL ASSOCIATION
A/P	163014	09/03/15	1,250.00	VICTORIA MEDICAL FOUNDATION
A/P	163015	09/03/15	472.00	FIRETROL PROTECTION SYSTEMS
A/P	163016	09/03/15	125.00	WAGEWORKS
A/P	163017	09/03/15	5,687.43	MMC EMPLOYEE BENEFIT PLAN
A/P	163018	09/03/15	9,352.20	ACCLARENT, INC.
A/P	163019	09/03/15	189.75	ROLANDO REYES, SR.
A/P	163020	09/03/15	241,518.00	MMC CONSTRUCTION
A/P	163021	09/03/15	1,308.61	WAGEWORKS
A/P	163022	09/03/15	96.00	MEMORIAL MEDICAL CLINIC
A/P	163023	09/03/15	1,495.00	M G TRUST
A/P	163024	09/03/15	2,000.00	THE COMPLIANCE TEAM, INC
A/P	163025	09/03/15	145,913.68	K & T CONSTRUCTION, CO., INC.
A/P	163026	09/03/15	240.00	TED RODRIGUEZ
A/P	163027	09/03/15	2,832.30	COMBINED INSURANCE CO
A/P	163028	09/03/15	75.00	FIRST CLEARING
A/P	163029	09/03/15	11,023.87	E-MDS, INC
A/P	163030	09/03/15	1,132.50	PABLO GARZA
A/P	163031	09/03/15	2,520.00	FUSION MEDICAL STAFFING, LLC
A/P	163032	09/03/15	35.57	PHELAN MANUFACTURING CORP
A/P	163033	09/03/15	62,000.00	VICTORIA PROFESSIONAL
A/P	163034	09/03/15	34.95	GULF COAST HARDWARE / ACE
A/P	163035	09/03/15	256.00	ACTION LUMBER
A/P	163036	09/03/15	272.72	AMERISOURCEBERGEN DRUG CORP
A/P	163037	09/03/15	1,347.48	AIRGAS-SOUTHWEST
A/P	163038	09/03/15	2,200.50	ALCON LABORTORIES INC
A/P	163039	09/03/15	723.71	ALIMED INC.
A/P	163040	09/03/15	146.27	ALPHA TEC SYSTEMS INC
A/P	163041	09/03/15	85.94	AMERICAN ASSOCIATION

BANK--CHECK				
CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	163042	09/03/15	949.24	BARD PERIPHERAL VASCULAR
A/P	163043	09/03/15	534.00	BARD ACCESS
A/P	163044	09/03/15	1,215.00	BAXTER HEALTHCARE CORP
A/P	163045	09/03/15	18,774.08	BECKMAN COULTER INC
A/P	163046	09/03/15	151.69	BOUND TREE MEDICAL, LLC
A/P	163047	09/03/15	220.25	BRIGGS HEALTHCARE
A/P	163048	09/03/15	25.00	CAL COM FEDERAL CREDIT UNION
A/P	163049	09/03/15	158.87	CERTIFIED LABORATORIES
A/P	163050	09/03/15	591.61	CONMED CORPORATION
A/P	163051	09/03/15	14,922.92	CDW GOVERNMENT, INC.
A/P	163052	09/03/15	16,654.53	EVIDENT
A/P	163053	09/03/15	252.00	C R BARD, INC
A/P	163054	09/03/15	254.58	DLE PAPER & PACKAGING
A/P	163055	09/03/15	277.80	MONICA ESCALANTE
A/P	163056	09/03/15	11.30	FEDERAL EXPRESS CORP.
A/P	163057	09/03/15	6,891.06	FISHER HEALTHCARE
A/P	163058	09/03/15	50.00	GULF COAST DELIVERY
A/P	163059	09/03/15	119.76	GRAPHIC CONTROLS LLC
A/P	163060	09/03/15	190.47	GETINGE USA
A/P	163061	09/03/15	2,394.92	GULF COAST PAPER COMPANY
A/P	163062	09/03/15	6,663.50	HOLOGIC INC
A/P	163063	09/03/15	165.95	HAVEL'S INCORPORATED
A/P	163064	09/03/15	23.62	HAYES ELECTRIC SERVICE
A/P	163065	09/03/15	8,806.65	HILL-ROM COMPANY, INC
A/P	163066	09/03/15	164.30	HOSPIRA WORLDWIDE, INC
A/P	163067	09/03/15	420.52	INDEPENDENCE MEDICAL
A/P	163068	09/03/15	10,875.49	WERFEN USA LLC
A/P	163069	09/03/15	41.25	INTEGRATED MEDICAL SYSTEMS
A/P	163070	09/03/15	3,835.60	J & J HEALTH CARE SYSTEMS, INC
A/P	163071	09/03/15	104.21	M.C. JOHNSON COMPANY INC
A/P	163072	09/03/15	1,338.60	SHIRLEY KARNEI
A/P	163073	09/03/15	210.09	MARKS PLUMBING PARTS
A/P	163074	09/03/15	84.29	MCKESSON MEDICAL SURGICAL INC
A/P	163075	09/03/15	531.12	BAYER HEALTHCARE
A/P	163076	09/03/15	54.00	MEGADYNE MEDICAL
A/P	163077	09/03/15	140.62	MMC AUXILIARY GIFT SHOP
A/P	163078	09/03/15	1,455.49	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	163079	09/03/15	246.96	OFFICE DEPOT
A/P	163080	09/03/15	.00	VOIDED
A/P	163081	09/03/15	.00	VOIDED
A/P	163082	09/03/15	.00	VOIDED
A/P	163083	09/03/15	23,264.93	OWENS & MINOR
A/P	163084	09/03/15	58.11	POWER ELECTRIC
A/P	163085	09/03/15	199.98	SAM'S CLUB DIRECT
A/P	163086	09/03/15	17.92	SHERWIN WILLIAMS
A/P	163087	09/03/15	731.00	TRACI SHEFCIK
A/P	163088	09/03/15	977.25	SMITH & NEPHEW
A/P	163089	09/03/15	4,201.00	SO TEX BLOOD & TISSUE CENTER
A/P	163090	09/03/15	1,138.29	SYSCO FOOD SERVICES OF
A/P	163091	09/03/15	141.10	USI INC
A/P	163092	09/03/15	72.03	UNIFIRST HOLDINGS

BANK--CHECK--				
CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	163093	09/03/15	1,437.35	UNIFORM ADVANTAGE
A/P	163094	09/03/15	4,984.45	UNIFIRST HOLDINGS INC
A/P	163095	09/03/15	110.33	VERIZON SOUTHWEST
A/P	163096	09/03/15	156.38	VERIZON WIRELESS
A/P	163097	09/03/15	2,900.00	VICTORIA AIR CONDITIONING LTD
A/P	163098	09/03/15	1,489.21	WATERMARK GRAPHICS INC
A/P	163099	09/03/15	386.52	GRAINGER
A/P	163100	09/03/15	3,833.49	THE BROADMOOR AT CREEKS
TOTALS:			732,159.97	

APPROVED
ON

SEP 03 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
9/8/2015

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	314,341.15	66,543.31	-	314,241.15	-	-	66,643.31	66,543.31

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 0614
Account # 4257

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	47,714.23	12,313.36	-	47,614.23	-	-	12,413.36	12,313.36
Crescent	4588	16,720.37	51,254.29	-	16,620.37	-	-	51,354.29	51,254.29
Broadmoor	4596	631,800.48	31,024.80	-	631,700.48	-	-	31,124.80	31,024.80
Fort Bend	4618	92,072.88	37,157.63	-	91,972.88	-	-	37,257.63	37,157.63
									131,750.08

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 0614
Account: 2922

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:

APPROVED
SEP - 8 2015
COUNTY AUDITOR

Michael J. Pfeifer
Calhoun County Judge
Date: 9-11-15

A:\NH Weekly Transfers\NH UPL Transfer Summary.xlsx

IBC Bank Activity
8/31/15 through 9/7/15

Ashford Gardens					**Transfer-Out**	**Transfer-In**	
9/1/2015	5025	4553	301	COMMERCIAL DEPOSIT		3,183.04	
9/2/2015	5025	4553	495	OUTGOING MONEY TRANSFER	314,241.15		ASHFORD HEALTH CARE CENTER LTD
9/2/2015	5025	4553	301	COMMERCIAL DEPOSIT		63,360.27	
					314,241.15	**66,543.31**	

Solera at West Houston					**Transfer-Out**	**Transfer-In**	
9/2/2015	5025	4561	301	COMMERCIAL DEPOSIT		12,162.32	
9/2/2015	5025	4561	142	ACH CREDIT RECEIVED		151.04	Molina HC of TX Molina HC
9/2/2015	5025	4561	495	OUTGOING MONEY TRANSFER	47,614.23		CANTEX HEALTH CARE CENTERS LLC
					47,614.23	**12,313.36**	

Crescent					**Transfer-Out**	**Transfer-In**	
9/1/2015	5025	4588	301	COMMERCIAL DEPOSIT		6,421.88	
9/2/2015	5025	4588	495	OUTGOING MONEY TRANSFER	16,620.37		CANTEX HEALTH CARE CENTERS III
9/2/2015	5025	4588	301	COMMERCIAL DEPOSIT		30,000.07	
9/4/2015	5025	4588	142	ACH CREDIT RECEIVED		14,832.34	AGING DISAB SVCS HCCLAIMPMT
					16,620.37	**51,254.29**	

Broadmoor					**Transfer-Out**	**Transfer-In**	
9/1/2015	5025	4596	301	COMMERCIAL DEPOSIT		3,072.56	
9/2/2015	5025	4596	301	COMMERCIAL DEPOSIT		24,712.05	
9/2/2015	5025	4596	495	OUTGOING MONEY TRANSFER	631,700.48		CANTEX HEALTH CARE CENTERS III
9/4/2015	5025	4596	142	ACH CREDIT RECEIVED		3,240.19	AGING DISAB SVCS HCCLAIMPMT
					631,700.48	**31,024.80**	

Fort Bend					**Transfer-Out**	**Transfer-In**	
9/1/2015	5025	4618	301	COMMERCIAL DEPOSIT		31,487.27	
9/2/2015	5025	4618	495	OUTGOING MONEY TRANSFER	91,972.88		CANTEX HEALTH CARE CENTERS III
9/2/2015	5025	4618	301	COMMERCIAL DEPOSIT		5,670.36	
					91,972.88	**37,157.63**	

Account Portfolio as of 09/08/2015 8:54:30 AM

Account Display
◉ Display By Account Type
○ Display By Asset/Liability

Commercial Checking Accounts

Account Name	Account Number	Today's Beginning Balance	Available Balance
Memorial Medical Center	3387	$325,069.79	$325,069.79
Memorial Medical Center	4553	$66,643.31	$66,643.31
Memorial Medical Center	4561	$12,413.36	$12,413.36
Memorial Medical Center	4588	$51,354.29	$51,354.29
Memorial Medical Center	4596	$31,124.80	$31,124.80
Memorial Medical Center	4618	$37,257.63	$37,257.63
Memorial Medical Center Operat	0301	$1,871,459.82	$1,854,667.28
County of Calhoun Indigent	1101	$4,833.48	$4,833.48
Totals		**$2,400,156.48**	**$2,383,363.94**

APPROVED
BY

SEP 0 9 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

09/09/2015 08:39 — MEMORIAL MEDICAL CENTER — AP Open Invoice List — Due Dates Through: 09/15/2015 — 0 — ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
10832	ACI/BOLAND, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
0033401	CLINIC CONSTRUCTION	09/08/20	08/11/20	09/10/20			4,713.39	0.00	0.00	4,713.39

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10832	ACI/BOLAND, INC.	4,713.39	0.00	0.00	4,713.39

Vendor#	Vendor Name	Class	Pay Code
10814	ALLIED BENEFIT SYSTEMS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20318	EMPLOYEE MEDICAL INS PRE	09/08/20	08/17/20	09/15/20			27,582.60	0.00	0.00	27,582.60

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10814	ALLIED BENEFIT SYSTEMS	27,582.60	0.00	0.00	27,582.60

Vendor#	Vendor Name	Class	Pay Code
C1010	CABLE ONE	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20325	OUTSIDE SRV IT	09/08/20	09/08/20	09/15/20			1,400.00	0.00	0.00	1,400.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1010	CABLE ONE	1,400.00	0.00	0.00	1,400.00

Vendor#	Vendor Name	Class	Pay Code
C1203	CALHOUN COUNTY WASTE MGMT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
448747	OUTSIDE SRV GOUNDS	09/08/20	08/31/20	08/31/20			5.00	0.00	0.00	5.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1203	CALHOUN COUNTY WASTE MGMT	5.00	0.00	0.00	5.00

Vendor#	Vendor Name	Class	Pay Code
C2510	EVIDENT	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20319	DEPOSIT INTERFACE EQUIP I	09/08/20	09/02/20	09/02/20			506.00	0.00	0.00	506.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C2510	EVIDENT	506.00	0.00	0.00	506.00

Vendor#	Vendor Name	Class	Pay Code
F1100	FEDERAL EXPRESS CORP.	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
5-140-70082	FREIGHT EXPENSE PT	09/08/20	08/27/20	09/11/20			35.37	0.00	0.00	35.37

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	F1100	FEDERAL EXPRESS CORP.	35.37	0.00	0.00	35.37

Vendor#	Vendor Name	Class	Pay Code
10283	GE HEALTHCARE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6000272561-2	MAINT CONTR MRI	08/31/20	08/01/20	08/31/20			355.47	0.00	0.00	355.47
6000272561		08/31/20	08/01/20	08/31/20			3,078.28	0.00	0.00	3,078.28

		MAINT CONTR XRAY							
	6000275396		08/31/20	08/01/20	08/31/20		416.61	0.00	0.00	416.61
		MAINT CONT XRAY							
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10283	GE HEALTHCARE					3,850.36	0.00	0.00	3,850.36
Vendor#	Vendor Name					Class	Pay Code			
10720	LIFESOURCE EDUCATIONAL SRV LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	15024		08/31/20	08/31/20	09/14/20		750.00	0.00	0.00	750.00
		CONT EDUCATION NURSING								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10720	LIFESOURCE EDUCATIONAL SRV LLC					750.00	0.00	0.00	750.00
Vendor#	Vendor Name					Class	Pay Code			
M2621	MMC AUXILIARY GIFT SHOP					W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20320		09/08/20	09/08/20	09/08/20		383.05	0.00	0.00	383.05
		EMPLOYEE GIFT SHOP PURC								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M2621	MMC AUXILIARY GIFT SHOP					383.05	0.00	0.00	383.05
Vendor#	Vendor Name					Class	Pay Code			
M2662	MMC VOLUNTEERS					W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	671210		08/31/20	09/01/20	09/01/20		95.00	0.00	0.00	95.00
		MISC EXPENSE ADMIN								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M2662	MMC VOLUNTEERS					95.00	0.00	0.00	95.00
Vendor#	Vendor Name					Class	Pay Code			
10536	MORRIS & DICKSON CO, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	7846419		09/08/20	09/01/20	09/11/20		95.73	0.00	0.00	95.73
		PHARMACY DRUGS								
	7846418		09/08/20	09/01/20	09/11/20		2,238.03	0.00	0.00	2,238.03
		PHARMACY DRUGS								
	CM34930		09/08/20	09/01/20	09/11/20		-78.34	0.00	0.00	-78.34
		PHARMACY CREDIT								
	7847072		09/08/20	09/01/20	09/11/20		2.67	0.00	0.00	2.67
		PHARMACY DRUGS								
	7846417		09/08/20	09/01/20	09/11/20		42.31	0.00	0.00	42.31
		PHARMACY DRUGS								
	7847712		09/08/20	09/01/20	09/11/20		110.21	0.00	0.00	110.21
		PHARMACY DRUGS								
	7847187		09/08/20	09/01/20	09/11/20		100.04	0.00	0.00	100.04
		PHARMACY DRUGS								
	7853279		09/08/20	09/02/20	09/12/20		41.88	0.00	0.00	41.88
		PHARMACY DRUGS								
	7855366		09/08/20	09/02/20	09/12/20		2,560.73	0.00	0.00	2,560.73
		PHARMACY DRUGS								
	7855365		09/08/20	09/02/20	09/12/20		3,415.07	0.00	0.00	3,415.07
		PHARMACY DRUGS								
	7855367		09/08/20	09/02/20	09/12/20		275.90	0.00	0.00	275.90
		PHARMACY DRUGS								
	7859993		09/08/20	09/03/20	09/13/20		563.76	0.00	0.00	563.76

		PHARMACY DRUGS							
	7859994		09/08/20	09/03/20	09/13/20	48.25	0.00	0.00	48.25
		PHARMACY DRUGS							
	7859992		09/08/20	09/03/20	09/13/20	37.50	0.00	0.00	37.50
		PHARMACY DRUGS							
	7863654		09/08/20	09/04/20	09/14/20	75.27	0.00	0.00	75.27
		PHARMACY DRUGS							
	7863653		09/08/20	09/04/20	09/14/20	150.53	0.00	0.00	150.53
		PHARMACY DRUGS							
	7863762		09/08/20	09/04/20	09/14/20	424.90	0.00	0.00	424.90
		PHARMACY DRUGS							
	CM36358		09/08/20	09/04/20	09/14/20	-182.62	0.00	0.00	-182.62
		PHARMACY CREDIT							
	7863652		09/08/20	09/04/20	09/14/20	28,547.13	0.00	0.00	28,547.13
		PHARMACY DRUGS							
	7863651		09/08/20	09/04/20	09/14/20	111.39	0.00	0.00	111.39
		PHARMACY DRUGS							
	7861901		09/08/20	09/04/20	09/14/20	4,053.60	0.00	0.00	4,053.60
		PHARMACY DRUGS							
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10536	MORRIS & DICKSON CO, LLC			42,633.94	0.00	0.00	42,633.94
Vendor#	Vendor Name				Class	Pay Code			
OM425	OWENS & MINOR								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	2008762158		08/31/20	08/11/20	09/10/20		1,362.69	0.00	0.00	1,362.69
		CS INVENTORY & LAB SUPPL							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		OM425	OWENS & MINOR				1,362.69	0.00	0.00	1,362.69
Vendor#	Vendor Name				Class	Pay Code			
10032	PHILIPS HEALTHCARE								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	931380958		08/31/20	07/29/20	08/28/20		2,626.58	0.00	0.00	2,626.58
		MAINT CONTR NUC MED							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10032	PHILIPS HEALTHCARE				2,626.58	0.00	0.00	2,626.58
Vendor#	Vendor Name				Class	Pay Code			
10927	ROSHANDA GRAY								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20321		09/08/20	08/31/20	08/31/20		274.05	0.00	0.00	274.05
		TRAVEL EXP ADMIN							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10927	ROSHANDA GRAY				274.05	0.00	0.00	274.05
Vendor#	Vendor Name				Class	Pay Code			
11113	SECRETARY OF STATE OF TEXAS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20322		09/08/20	09/03/20	09/03/20		8.00	0.00	0.00	8.00
		MISC EXPENSE CLINIC							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11113	SECRETARY OF STATE OF TEXAS				8.00	0.00	0.00	8.00
Vendor#	Vendor Name				Class	Pay Code			
S2001	SIEMENS MEDICAL SOLUTIONS INC				M				

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
115182963		08/31/20	07/30/20	08/29/20			633.33	0.00	0.00	633.33
	MAINT CONTR MAMMO									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	S2001	SIEMENS MEDICAL SOLUTIONS INC					633.33	0.00	0.00	633.33

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
193290		09/08/20	09/01/20	09/10/20			390.00	0.00	0.00	390.00
	ADVERTISING EXPENSE									
193228		09/08/20	09/01/20	09/10/20			180.00	0.00	0.00	180.00
	ADVERTISING EXPENSE									
193226		09/08/20	09/01/20	09/10/20			810.00	0.00	0.00	810.00
	ADVERTISING EXPENSE									
193227		09/08/20	09/01/20	09/10/20			270.00	0.00	0.00	270.00
	ADVERTISING EXPENSE									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10699	SIGN AD, LTD.					1,650.00	0.00	0.00	1,650.00

Vendor#	Vendor Name	Class	Pay Code
T2204	TEXAS MUTUAL INSURANCE CO	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20323		09/08/20	09/08/20	09/15/20			5,902.00	0.00	0.00	5,902.00
	WORK COMP INS									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	T2204	TEXAS MUTUAL INSURANCE CO					5,902.00	0.00	0.00	5,902.00

Vendor#	Vendor Name	Class	Pay Code
10758	TEXAS SELECT STAFFING, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
0006659-51-079		08/31/20	07/09/20	08/08/20			2,052.00	0.00	0.00	2,052.00
	PRO FEES OB									
0006702-51-079		08/31/20	07/16/20	08/15/20			2,151.75	0.00	0.00	2,151.75
	CONTRACT NURSING									
0006745-51-079		08/31/20	07/23/20	08/22/20			2,052.00	0.00	0.00	2,052.00
	CONTRACT NURSING									
0006787-51-079		08/31/20	07/30/20	08/29/20			2,052.00	0.00	0.00	2,052.00
	CONTRACT NURSING									
0006829-51-079		08/31/20	08/06/20	09/05/20			2,052.00	0.00	0.00	2,052.00
	CONTRACT NURSING									
0006872-51-079		08/31/20	08/13/20	09/12/20			2,052.00	0.00	0.00	2,052.00
	CONTRACT NURSING									
0006912-51-079		08/31/20	08/20/20	09/11/20			2,052.00	0.00	0.00	2,052.00
	CONTRACT NURSING									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10758	TEXAS SELECT STAFFING, LLC					14,463.75	0.00	0.00	14,463.75

Vendor#	Vendor Name	Class	Pay Code
11039	THE BRATTON FIRM		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20317		08/31/20	07/07/20	08/06/20			173.70	0.00	0.00	173.70
	COLLECTION EXPENSE									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11039	THE BRATTON FIRM					173.70	0.00	0.00	173.70

Vendor#	Vendor Name	Class	Pay Code

T1724 TOSHIBA AMERICA MEDICAL SYST.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
10175326		08/31/20	08/08/20	09/07/20		3,483.86	0.00	0.00	3,483.86
	MAINT CONT CT SCAN								
10175325		09/08/20	08/08/20	09/07/20		9,000.00	0.00	0.00	9,000.00
	MAINT CONTR CT SCAN								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	T1724	TOSHIBA AMERICA MEDICAL SYST.	12,483.86	0.00	0.00	12,483.86

Vendor#	Vendor Name	Class	Pay Code
U2000	US POSTAL SERVICE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20324		09/08/20	09/07/20	09/07/20		1,000.00	0.00	0.00	1,000.00
	POSTAGE EXPENSE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U2000	US POSTAL SERVICE	1,000.00	0.00	0.00	1,000.00

Vendor#	Vendor Name	Class	Pay Code
10924	VICTORIA PROFESSIONAL MEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20		09/08/20	09/02/20	09/02/20		15,000.00	0.00	0.00	15,000.00
	PROF FEE ER								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10924	VICTORIA PROFESSIONAL MEDICAL	15,000.00	0.00	0.00	15,000.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	137,532.67	0.00	0.00	137,532.67

APPROVED
BY

SEP 09 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CKS# 163101
+0
163124

Michael J. Pfeifer
Calhoun County Judge
Date: 9-11-15

APPROVED
ON
SEP 0 9 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE: 09/09/15
TIME: 08:36

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
		090915	191.00				
		090915	250.00				
		090915	235.00				
		090915	150.00				
		040715	184.00				
		090915	1260.00				
		090915	352.00				
		090915	321.92				
		090915	100.39				
		090915	107.70				
		090915	46.67				
		090915	17.77				
		090915	175.06				
		090915	150.00				
		090915	25.00				
		090915	25.00				

Michael J. Pfeifer
Calhoun County Judge
Date: 9-11-15

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
[redacted]		090915	150.54			[redacted]	
		012813	3150.00				
	ARID=0001 TOTAL		6892.05				
TOTAL			6892.05				

APPROVED
BY

SEP 09 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Judge Pfeifer's signature on Page 1

CKS# 163125
to
#163142

BANK--CHECK CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	163101	09/09/15	2,626.58	PHILIPS HEALTHCARE
A/P	163102	09/09/15	3,850.36	GE HEALTHCARE
A/P	163103	09/09/15	.00	VOIDED
A/P	163104	09/09/15	42,633.94	MORRIS & DICKSON CO, LLC
A/P	163105	09/09/15	1,650.00	SIGN AD, LTD.
A/P	163106	09/09/15	750.00	LIFESOURCE EDUCATIONAL SRV LLC
A/P	163107	09/09/15	14,463.75	TEXAS SELECT STAFFING, LLC
A/P	163108	09/09/15	27,582.60	ALLIED BENEFIT SYSTEMS
A/P	163109	09/09/15	4,713.39	ACI/BOLAND, INC.
A/P	163110	09/09/15	15,000.00	VICTORIA PROFESSIONAL MEDICAL
A/P	163111	09/09/15	274.05	ROSHANDA GRAY
A/P	163112	09/09/15	173.70	THE BRATTON FIRM
A/P	163113	09/09/15	8.00	SECRETARY OF STATE OF TEXAS
A/P	163114	09/09/15	1,400.00	CABLE ONE
A/P	163115	09/09/15	5.00	CALHOUN COUNTY WASTE MGMT
A/P	163116	09/09/15	506.00	EVIDENT
A/P	163117	09/09/15	35.37	FEDERAL EXPRESS CORP.
A/P	163118	09/09/15	383.05	MMC AUXILIARY GIFT SHOP
A/P	163119	09/09/15	95.00	MMC VOLUNTEERS
A/P	163120	09/09/15	1,362.69	OWENS & MINOR
A/P	163121	09/09/15	633.33	SIEMENS MEDICAL SOLUTIONS INC
A/P	163122	09/09/15	12,483.86	TOSHIBA AMERICA MEDICAL SYST.
A/P	163123	09/09/15	5,902.00	TEXAS MUTUAL INSURANCE CO
A/P	163124	09/09/15	1,000.00	US POSTAL SERVICE
A/P	163125	09/09/15	191.00	[redacted]
A/P	163126	09/09/15	250.00	
A/P	163127	09/09/15	235.00	
A/P	163128	09/09/15	150.00	
A/P	163129	09/09/15	184.00	
A/P	163130	09/09/15	1,260.00	
A/P	163131	09/09/15	352.00	
A/P	163132	09/09/15	321.92	
A/P	163133	09/09/15	100.39	
A/P	163134	09/09/15	107.70	
A/P	163135	09/09/15	46.67	
A/P	163136	09/09/15	17.77	
A/P	163137	09/09/15	175.06	
A/P	163138	09/09/15	150.00	
A/P	163139	09/09/15	25.00	
A/P	163140	09/09/15	25.00	
A/P	163141	09/09/15	150.54	
A/P	163142	09/09/15	3,150.00	
TOTALS:			144,424.72	

APPROVED
ON
SEP 09 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:09/11/15 MEMORIAL MEDICAL CENTER PAGE 1
TIME:13:21 CHECK REGISTER and payable list GLCKREG
09/11/15 THRU 09/11/15

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	000666	09/11/15	552.85	MCKESSON - HEB Pharmacy
A/P	000667	09/11/15	1,072.87	MCKESSON - Walmart Pharmacy
A/P	000668	09/11/15	1,201.00	MCKESSON - CVS Pharmacy
TOTALS:			2,826.72	

340B Prescription Expenses

APPROVED
ON

SEP 11 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Michael J. Pfeifer
Calhoun County Judge
Date: 9-23-15

RUN DATE:09/14/15 MEMORIAL MEDICAL CENTER PAGE 1
TIME:10:18 CHECK REGISTER and payable List GLCKREG
09/14/15 THRU 09/14/15

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	000669	09/14/15	744.07	MCKESSON – HEB Pharmacy
A/P	000670	09/14/15	1,023.62	MCKESSON - Walmart Pharmacy
A/P	000671	09/14/15	524.69	MCKESSON – CVS Pharmacy
TOTALS:			2,292.38	

340B Prescription Expenses

APPROVED
ON

SEP 14 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Michael J. Pfeifer
Calhoun County Judge
Date: 9-23-15

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
9/14/2015

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	66,643.31	8,928.14	-	66,543.31	-	-	9,028.14	8,928.14

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 0614
Account # 4257

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	12,413.36	31,167.35	-	12,313.36	-	-	31,267.35	31,167.35
Crescent	4588	51,354.29	631,570.52	-	51,254.29	-	-	631,670.52	631,570.52
Broadmoor	4596	31,124.80	824,130.07	-	31,024.80	-	-	824,230.07	824,130.07
Fort Bend	4618	37,257.63	184,654.01	-	37,157.63	-	-	184,754.01	184,654.01
									1,671,521.95

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 0614
Account # 2922

Michael J. Pfeifer
Harrison County Judge
9-23-15

Approved:

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
SEP 14 2015
COUNTY AUDITOR

A:\NH Weekly Transfers\NH UPL Transfer Summary.xlsx

IBC Bank Activity
9/8/15 through 9/14/15

Ashford Gardens					**Transfer-Out**	**Transfer-In**	
9/9/2015	5025	4553	495	OUTGOING MONEY TRANSFER	66,543.31		ASHFORD HEALTH CARE CENTER LTD
9/9/2015	5025	4553	301	COMMERCIAL DEPOSIT		8,928.14	
					66,543.31	**8,928.14**	

Solera at West Houston					**Transfer-Out**	**Transfer-In**	
9/9/2015	5025	4561	301	COMMERCIAL DEPOSIT		28,196.28	
9/9/2015	5025	4561	495	OUTGOING MONEY TRANSFER	12,313.36		CANTEX HEALTH CARE CENTERS LLC
9/9/2015	5025	4561	142	ACH CREDIT RECEIVED		2,971.07	Molina HC of TX Molina HC
					12,313.36	**31,167.35**	

Crescent					**Transfer-Out**	**Transfer-In**	
9/9/2015	5025	4588	495	OUTGOING MONEY TRANSFER	51,254.29		CANTEX HEALTH CARE CENTERS III
9/9/2015	5025	4588	301	COMMERCIAL DEPOSIT		12,952.30	
9/9/2015	5025	4588	195	INCOMING MONEY TRANSFER		618,618.22	CANTEX HEALTH CARE CENTERS III
					51,254.29	**631,570.52**	

Broadmoor					**Transfer-Out**	**Transfer-In**	
9/9/2015	5025	4596	301	COMMERCIAL DEPOSIT		28,859.11	
9/9/2015	5025	4596	195	INCOMING MONEY TRANSFER		794,681.51	CANTEX HEALTH CARE CENTERS III
9/9/2015	5025	4596	495	OUTGOING MONEY TRANSFER	31,024.80		CANTEX HEALTH CARE CENTERS III
9/11/2015	5025	4596	142	ACH CREDIT RECEIVED		589.45	AGING DISAB SVCS HCCLAIMPMT
					31,024.80	**824,130.07**	

Fort Bend					**Transfer-Out**	**Transfer-In**	
9/9/2015	5025	4618	495	OUTGOING MONEY TRANSFER	37,157.63		CANTEX HEALTH CARE CENTERS III
9/9/2015	5025	4618	195	INCOMING MONEY TRANSFER		184,654.01	CANTEX HEALTH CARE CENTERS III
					37,157.63	**184,654.01**	

lio as of 09/14/2015 9:18:22 AM

Account Display
◉ Display By Account Type
○ Display By Asset/Liability

Commercial Checking Accounts

Account Name	Account Number	Today's Beginning Balance	Available Balance
Memorial Medical Center	3387	$325,069.79	$325,069.79
Memorial Medical Center	4553	$9,028.14	$16,966.53
Memorial Medical Center	4561	$31,267.35	$31,267.35
Memorial Medical Center	4588	$631,670.52	$631,670.52
Memorial Medical Center	4596	$824,230.07	$876,716.52
Memorial Medical Center	4618	$184,754.01	$184,754.01
Memorial Medical Center Operat	0301	$1,428,510.47	$1,444,562.37
County of Calhoun Indigent	1101	$4,833.48	$4,833.48
Totals		**$3,439,363.83**	**$3,515,840.57**

APPROVED
ON

SEP 16 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

09/15/2015
17:10

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 10/03/2015

0
ap_open_invoice.template

Vendor#	Vendor Name	Class	Pay Code
A1350	ACTION LUMBER	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
005437 ✓		08/31/20	08/24/20	09/23/20		256.00	0.00	0.00	256.00 ✓
	SUPPLIES PLANT OPS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1350	ACTION LUMBER ✓	256.00	0.00	0.00	256.00

Vendor#	Vendor Name	Class	Pay Code
A1790	AFLAC	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
811338 ✓		09/15/20	09/11/20	10/01/20		3,473.35	0.00	0.00	3,473.35 ✓
	EMPLOYEE PERSONAL INS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1790	AFLAC ✓	3,473.35	0.00	0.00	3,473.35

Vendor#	Vendor Name	Class	Pay Code
A1679	AIR SPECIALTY & EQUIPMENT CO	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
33443 ✓		09/14/20	09/01/20	10/01/20		5,215.00	0.00	0.00	5,215.00 ✓
	AIR COMPRESSOR REPAIRS								
33442 ✓		09/14/20	09/01/20	10/01/20		7,800.00	0.00	0.00	7,800.00 ✓
	AIR COMPRESSOR REPAIRS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1679	AIR SPECIALTY & EQUIPMENT CO ✓	13,015.00	0.00	0.00	13,015.00

Vendor#	Vendor Name	Class	Pay Code
A1680	AIRGAS-SOUTHWEST	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9042617698 ✓		08/31/20	08/19/20	09/22/20		48.43	0.00	0.00	48.43 ✓
	SUPPLIES PLANT OPS								
9042902391 ✓		09/11/20	08/25/20	09/24/20		296.14	0.00	0.00	296.14 ✓
	SUPPLIES PLANT OPS								
9042938706 ✓		09/11/20	08/31/20	09/30/20		1,864.97	0.00	0.00	1,864.97 ✓
	OXYGEN CARDIO								
9929680111 ✓		09/15/20	08/31/20	09/30/20		380.97	0.00	0.00	380.97 ✓
	SUPPLIES PLANT OPS								
9929680112 ✓		09/15/20	08/31/20	09/30/20		421.27	0.00	0.00	421.27 ✓
	SUPPLIES PLANT OPS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS-SOUTHWEST ✓	3,011.78	0.00	0.00	3,011.78

Vendor#	Vendor Name	Class	Pay Code
A1715	ALCO SALES & SERVICE CO	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2613620-IN ✓		09/15/20	09/04/20			222.67	0.00	0.00	222.67 ✓
	SUPPLIES OB								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1715	ALCO SALES & SERVICE CO ✓	222.67	0.00	0.00	222.67

Vendor#	Vendor Name	Class	Pay Code
10533	ALERE NORTH AMERICA INC		

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

	90748313		08/31/20	08/24/20	09/23/20	112.92	0.00	0.00	112.92
		SUPPLIES LAB							
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10533	ALERE NORTH AMERICA INC			112.92	0.00	0.00	112.92
Vendor#	Vendor Name				Class	Pay Code			
A1705	ALIMED INC.				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	RPSV01949362		09/11/20	08/31/20	09/30/20		220.28	0.00	0.00	220.28
		SUPPLIES PT								
	R9SV01950234		09/11/20	08/31/20	09/30/20		558.01	0.00	0.00	558.01
		SUPPLIES PT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1705	ALIMED INC.				778.29	0.00	0.00	778.29
Vendor#	Vendor Name				Class	Pay Code				
10592	AMERICAN PROFICIENCY INSTITUTE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	403177		08/31/20	08/25/20	09/24/20		9,070.00	0.00	0.00	9,070.00
		DUES & SUBCRIPTIONS LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10592	AMERICAN PROFICIENCY INSTITUTE				9,070.00	0.00	0.00	9,070.00
Vendor#	Vendor Name				Class	Pay Code				
A1360	AMERISOURCEBERGEN DRUG CORP				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	764145133		09/11/20	09/10/20	09/25/20		115.80	0.00	0.00	115.80
		PHARMACY DRUGS								
	764406245		09/15/20	09/15/20	08/25/20		77.20	0.00	0.00	77.20
		PHARMACY DRUGS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1360	AMERISOURCEBERGEN DRUG CORP				193.00	0.00	0.00	193.00
Vendor#	Vendor Name				Class	Pay Code				
B1075	BAXTER HEALTHCARE CORP				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	48429156		08/31/20	08/27/20	09/26/20		257.48	0.00	0.00	257.48
		CS INVENTORY								
	48466315		09/11/20	09/01/20	10/01/20		2,767.00	0.00	0.00	2,767.00
		IV PUMP RENTAL								
	48464175		09/11/20	09/01/20	10/01/20		118.86	0.00	0.00	118.86
		SUPPLIES ANESTHESIA								
	48467759		09/11/20	09/01/20	10/01/20		190.50	0.00	0.00	190.50
		IV PUMP RENTAL								
	48368831		09/14/20	08/20/20	09/19/20		32.66	0.00	0.00	32.66
		PHARMACY DRUGS								
	48386919		09/14/20	08/24/20	09/23/20		90.72	0.00	0.00	90.72
		PHARMACY DRUGS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1075	BAXTER HEALTHCARE CORP				3,457.22	0.00	0.00	3,457.22
Vendor#	Vendor Name				Class	Pay Code				
M2485	BAYER HEALTHCARE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	6003113349		09/11/20	08/27/20	09/26/20		796.68	0.00	0.00	796.68
		SUPPLIES CT SCAN								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net

	M2485	BAYER HEALTHCARE				796.68	0.00	0.00	796.68
Vendor#	Vendor Name			Class	Pay Code				
B1220	BECKMAN COULTER INC			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	105067639		08/31/20	08/05/20	09/22/20		458.94	0.00	0.00	458.94
		LAB SUPPLIES								
	105068774		08/31/20	08/06/20	09/22/20		2,997.45	0.00	0.00	2,997.45
		LAB SUPPLIES								
	105097214		08/31/20	08/19/20	09/22/20		147.48	0.00	0.00	147.48
		LAB SUPPLIES								
	105115204		09/11/20	08/27/20	09/26/20		326.73	0.00	0.00	326.73
		SUPPLIES LAB								
	105125277		09/11/20	09/01/20	10/01/20		564.02	0.00	0.00	564.02
		LAB SUPPLIES								
	105129831		09/11/20	09/02/20	10/02/20		744.14	0.00	0.00	744.14
		LAB SUPPLIES								
	105129087		09/11/20	09/02/20	10/02/20		2,756.26	0.00	0.00	2,756.26
		LAB SUPPLIES								
	105129332		09/11/20	09/02/20	10/02/20		10,227.05	0.00	0.00	10,227.05
		LAB SUPPLIES								
	4255604		09/14/20	08/25/20	09/24/20		825.69	0.00	0.00	825.69
		MAINT CONT LAB								
	105113564		09/14/20	08/27/20	09/26/20		1,128.79	0.00	0.00	1,128.79
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC				20,176.55	0.00	0.00	20,176.55
Vendor#	Vendor Name			Class	Pay Code				
10024	BECTON, DICKINSON & CO (BD)								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	9101608027		08/31/20	08/26/20	09/25/20		898.60	0.00	0.00	898.60
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10024	BECTON, DICKINSON & CO (BD)				898.60	0.00	0.00	898.60
Vendor#	Vendor Name			Class	Pay Code				
B1400	BIOMET SPORTS MEDICINE			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	08-318994		08/31/20	08/24/20	09/23/20		480.00	0.00	0.00	480.00
		SUPPLIES SURGERY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1400	BIOMET SPORTS MEDICINE				480.00	0.00	0.00	480.00
Vendor#	Vendor Name			Class	Pay Code				
10599	BKD, LLP								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	BK00489788		07/31/20	07/31/20	10/01/20		19,441.50	0.00	0.00	19,441.50
		AUDITING FEES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10599	BKD, LLP				19,441.50	0.00	0.00	19,441.50
Vendor#	Vendor Name			Class	Pay Code				
B1115	BRUCE'S AUTO REPAIR								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20340		09/11/20	09/10/20	09/10/20		7.00	0.00	0.00	7.00

INSPECTION STICKER

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	B1115	BRUCE'S AUTO REPAIR	7.00	0.00	0.00	7.00

Vendor#	Vendor Name	Class	Pay Code
D1040	C R BARD, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
23271930 ✓		09/11/20	08/31/20	09/30/20		126.00	0.00	0.00	126.00 ✓
	SUPPLIES SURGERY								
23273633 ✓		09/11/20	09/02/20	10/02/20		126.00	0.00	0.00	126.00 ✓
	SUPPLIES SURGERY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	D1040	C R BARD, INC ✓	252.00	0.00	0.00	252.00

Vendor#	Vendor Name	Class	Pay Code
C1033	CAD SOLUTIONS, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
201979 ✓		08/31/20	07/31/20	09/22/20		536.00	0.00	0.00	536.00 ✓
	OUTSIDE SRV MAMMO								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1033	CAD SOLUTIONS, INC ✓	536.00	0.00	0.00	536.00

Vendor#	Vendor Name	Class	Pay Code
C1030	CAL COM FEDERAL CREDIT UNION	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20335		09/11/20	09/10/20	09/10/20		25.00	0.00	0.00	25.00 ✓
	EMPLOYEE CREDIT UNION								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1030	CAL COM FEDERAL CREDIT UNION ✓	25.00	0.00	0.00	25.00

Vendor#	Vendor Name	Class	Pay Code
C1390	CENTRAL DRUGS	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20343		09/14/20	08/31/20	09/30/20		520.00	0.00	0.00	520.00 ✓
	PHARMACY DRUGS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1390	CENTRAL DRUGS ✓	520.00	0.00	0.00	520.00

Vendor#	Vendor Name	Class	Pay Code
10350	CENTURION MEDICAL PRODUCTS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
91841628 ✓		08/31/20	08/26/20	09/25/20		460.62	0.00	0.00	460.62 ✓
	CS INVENTORY & RECOVERY								
91843699 ✓		09/11/20	08/31/20	09/30/20		532.00	0.00	0.00	532.00 ✓
	CS INVENTORY								
91843700 ✓		09/11/20	08/31/20	09/30/20		191.84	0.00	0.00	191.84 ✓
	CS INVENTORY								
91846376 ✓		09/11/20	09/02/20	10/02/20		331.38	0.00	0.00	331.38 ✓
	CS INVENTORY & RECOVERY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10350	CENTURION MEDICAL PRODUCTS ✓	1,515.84	0.00	0.00	1,515.84

Vendor#	Vendor Name	Class	Pay Code
10786	CLINICAL PATHOLOGY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20344		09/14/20	08/31/20	09/30/20		7,698.24	0.00	0.00	7,698.24 ✓
	OUTSIDE SRV LAB								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net

	10786 CLINICAL PATHOLOGY ✓					7,698.24	0.00	0.00	7,698.24
Vendor#	Vendor Name			Class	Pay Code				
C1970	CONMED CORPORATION			M					
	Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	964289 ✓	08/31/20	08/24/20	09/23/20		119.76	0.00	0.00	119.76 ✓
	SURGERY SUPPLIES								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net
	C1970 CONMED CORPORATION ✓					119.76	0.00	0.00	119.76
Vendor#	Vendor Name			Class	Pay Code				
L1430	CONMED LINVATEC			M					
	Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	2062809 ✓	08/31/20	08/24/20	09/23/20		49.44	0.00	0.00	49.44 ✓
	SURGERY SUPPLIES								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net
	L1430 CONMED LINVATEC ✓					49.44	0.00	0.00	49.44
Vendor#	Vendor Name			Class	Pay Code				
11004	CSI LEASING INC								
	Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	RT00104475 ✓	09/11/20	08/27/20	10/01/20		7,682.67	0.00	0.00	7,682.67 ✓
	MED SURG & CLINIC LEASE								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net
	11004 CSI LEASING INC ✓					7,682.67	0.00	0.00	7,682.67
Vendor#	Vendor Name			Class	Pay Code				
R1050	CULLIGAN OF VICTORIA			M					
	Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	CREDIT ✓	09/15/20	08/31/20	08/31/20		-142.39	0.00	0.00	-142.39 ✓
	CREDIT OT PLANT OPS SUPP								
	555X01521004 ✓	09/15/20	08/31/20	09/22/20		493.50	0.00	0.00	493.50 ✓
	SUPPLIES PLANT OPS								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net
	R1050 CULLIGAN OF VICTORIA ✓					351.11	0.00	0.00	351.11
Vendor#	Vendor Name			Class	Pay Code				
C1443	CYGNUS MEDICAL LLC			M					
	Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	175799 ✓	08/31/20	08/19/20	09/22/20		439.00	0.00	0.00	439.00 ✓
	SUPPLIES SURGERY								
	Vendor Totals Number Name					Gross	Discount	No-Pay	Net
	C1443 CYGNUS MEDICAL LLC ✓					439.00	0.00	0.00	439.00
Vendor#	Vendor Name			Class	Pay Code				
10368	DEWITT POTH & SON								
	Invoice# Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	449593-0 ✓	08/31/20	08/27/20	09/26/20		51.98	0.00	0.00	51.98 ✓
	OFFICE SUPPLIES ACCOUNTI								
	449601-0 ✓	08/31/20	08/27/20	09/26/20		300.38	0.00	0.00	300.38 ✓
	CS INVENTORY & ER SUPPLIE								
	449800-0 ✓	09/11/20	08/31/20	09/30/20		709.48	0.00	0.00	709.48 ✓
	SUPPLIES VARIOUS DEPTS								
	449875-0 ✓	09/11/20	09/01/20	10/01/20		24.11	0.00	0.00	24.11 ✓
	SUPPLIES BEHAVIORAL HLTH								
	449893-0 ✓	09/11/20	09/01/20	10/01/20		68.59	0.00	0.00	68.59 ✓
	SUPPLIES PHARMACY								

449957-0 ✓		09/11/20	09/02/20	10/02/20		41.82	0.00	0.00	41.82 ✓
SUPPLIES MED SURG									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON ✓				1,196.36	0.00	0.00	1,196.36
Vendor#	Vendor Name				Class	Pay Code			
D1710	DOWNTOWN CLEANERS				W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20312		08/31/20	07/29/20	09/22/20		35.00	0.00	0.00	35.00 ✓
	OUTSIDE SRV HOUSEKEEPIN								
20313		08/31/20	08/06/20	09/22/20		35.00	0.00	0.00	35.00 ✓
	OUTSIDE SRV HOUSEKEEPIN								
20314		08/31/20	08/13/20	09/22/20		35.00	0.00	0.00	35.00 ✓
	OUTSIDE SRV HOUSEKEEPIN								
20316		08/31/20	08/20/20	09/22/20		35.00	0.00	0.00	35.00 ✓
	OUTSIDE SRV HOUSEKEEPIN								
20315		08/31/20	08/27/20	09/26/20		42.00	0.00	0.00	42.00 ✓
	OUTSIDE SRV HOUSEKEEPIN								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	D1710	DOWNTOWN CLEANERS ✓				182.00	0.00	0.00	182.00
Vendor#	Vendor Name				Class	Pay Code			
11096	DR JEWEL LINCOLN								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20329		09/11/20	09/09/20	09/09/20		10,348.50	0.00	0.00	10,348.50
	LIBAILITY INS PER AGREEMEI						Took off - Per Jerry		
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11096	DR JEWEL LINCOLN				10,348.50	0.00	0.00	10,348.50
Vendor#	Vendor Name				Class	Pay Code			
E3400	EMERGENCY MEDICAL PRODUCTS				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1764854 ✓		09/11/20	09/01/20	10/01/20		78.30	0.00	0.00	78.30 ✓
	CS INVENTORY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	E3400	EMERGENCY MEDICAL PRODUCTS ✓				78.30	0.00	0.00	78.30
Vendor#	Vendor Name				Class	Pay Code			
10042	ERBE USA INC SURGICAL SYSTEMS								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
338270 ✓		09/11/20	08/31/20	09/30/20		152.00	0.00	0.00	152.00 ✓
	SUPPLIES SURGERY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10042	ERBE USA INC SURGICAL SYSTEMS ✓				152.00	0.00	0.00	152.00
Vendor#	Vendor Name				Class	Pay Code			
C2510	EVIDENT				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
911521 ✓		08/31/20	08/27/20	09/26/20		717.05	0.00	0.00	717.05 ✓
	SUPPLIES ACCOUNTING								
A1509031378 ✓		09/15/20	09/03/20	10/03/20		18,018.00	0.00	0.00	18,018.00 ✓
	SOFTWARE MAINT IT								
Vendor Totals	Number	Name ✓				Gross	Discount	No-Pay	Net
	C2510	EVIDENT				18,735.05	0.00	0.00	18,735.05
Vendor#	Vendor Name				Class	Pay Code			
S0501	EVOQUA WATER TECHNOLOGIES LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net

902313444		09/11/20	09/01/20	10/01/20		148.72	0.00	0.00	148.72
	MAINT CONT LAB								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S0501	EVOQUA WATER TECHNOLOGIES LLC				148.72	0.00	0.00	148.72
Vendor#	Vendor Name				Class	Pay Code			
10689	FASTHEALTH CORPORATION								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	09A15mmc		09/11/20	09/01/20	10/01/20		495.00	0.00	0.00	495.00
		OUTSIDE SRV ADMIN								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	10689	FASTHEALTH CORPORATION					495.00	0.00	0.00	495.00
Vendor#	Vendor Name				Class	Pay Code				
11037	FIRST CLEARING								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20338		09/11/20	09/10/20	09/10/20		75.00	0.00	0.00	75.00
		EMPLOYEE PERSONAL INVES								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	11037	FIRST CLEARING					75.00	0.00	0.00	75.00
Vendor#	Vendor Name				Class	Pay Code				
F1400	FISHER HEALTHCARE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	8033778		08/31/20	08/20/20	09/22/20		659.36	0.00	0.00	659.36
		LAB SUPPLIES								
	8136239		08/31/20	08/24/20	09/23/20		116.00	0.00	0.00	116.00
		LAB SUPPLIES								
	8192768		08/31/20	08/25/20	09/24/20		1,418.04	0.00	0.00	1,418.04
		LAB SUPPLIES								
	8192767		08/31/20	08/25/20	09/24/20		129.05	0.00	0.00	129.05
		LAB SUPPLIES								
	8192765		08/31/20	08/25/20	09/24/20		343.45	0.00	0.00	343.45
		LAB SUPPLIES								
	8192766		08/31/20	08/25/20	09/24/20		140.35	0.00	0.00	140.35
		LAB SUPPLIES								
	8256147		08/31/20	08/26/20	09/25/20		129.78	0.00	0.00	129.78
		LAB SUPPLIES								
	8256148		08/31/20	08/26/20	09/25/20		2,279.37	0.00	0.00	2,279.37
		LAB SUPPLIES								
	8523718		09/11/20	09/01/20	10/01/20		121.86	0.00	0.00	121.86
		LAB SUPPLIES								
	8523717		09/11/20	09/01/20	10/01/20		204.50	0.00	0.00	204.50
		LAB SUPPLIES								
	8601356		09/11/20	09/02/20	10/02/20		407.49	0.00	0.00	407.49
		LAB SUPPLIES								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	F1400	FISHER HEALTHCARE					5,949.25	0.00	0.00	5,949.25
Vendor#	Vendor Name				Class	Pay Code				
10678	FIVE STAR STERILIZER SERVICES									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	4061		08/31/20	08/25/20	09/24/20		416.23	0.00	0.00	416.23
		INSTRUMENT REPAIRS SURG								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net

	10678	FIVE STAR STERILIZER SERVICES				416.23	0.00	0.00	416.23
Vendor#	Vendor Name			Class	Pay Code				
F1653	FORT BEND SERVICES, INC								
	Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	0198296-IN		09/15/20 09/02/20	10/02/20		530.00	0.00	0.00	530.00
		MAINT CONT PLANT OPS							
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
		F1653 FORT BEND SERVICES, INC				530.00	0.00	0.00	530.00
Vendor#	Vendor Name			Class	Pay Code				
10901	GENESIS DIAGNOSTICS								
	Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	44837		08/31/20 08/24/20	09/23/20		285.64	0.00	0.00	285.64
		LAB SUPPLIES							
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
		10901 GENESIS DIAGNOSTICS				285.64	0.00	0.00	285.64
Vendor#	Vendor Name			Class	Pay Code				
G1001	GETINGE USA								
	Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	7974401		09/11/20 08/25/20	09/24/20		565.42	0.00	0.00	565.42
		INSTRUMENT REPAIRS SURG							
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
		G1001 GETINGE USA				565.42	0.00	0.00	565.42
Vendor#	Vendor Name			Class	Pay Code				
10653	GLOBAL EQUIPMENT CO. INC.								
	Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	108482717		09/11/20 08/27/20	09/26/20		239.00	0.00	0.00	239.00
		SUPPLIES PLANT OPS							
	108503191		09/11/20 09/02/20	10/02/20		239.00	0.00	0.00	239.00
		SUPPLIES HOUSEKEEPING							
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
		10653 GLOBAL EQUIPMENT CO. INC.				478.00	0.00	0.00	478.00
Vendor#	Vendor Name			Class	Pay Code				
W1300	GRAINGER			M					
	Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	9825644728		08/31/20 08/24/20	09/23/20		285.75	0.00	0.00	285.75
		SUPPLIES XRAY							
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
		W1300 GRAINGER				285.75	0.00	0.00	285.75
Vendor#	Vendor Name			Class	Pay Code				
G1050	GREENHOUSE FLORAL DESIGNERS			W					
	Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	33292		09/11/20 08/03/20	09/03/20		60.00	0.00	0.00	60.00
		MISC EXPENSE ADMIN - Sympathy							
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
		G1050 GREENHOUSE FLORAL DESIGNERS				60.00	0.00	0.00	60.00
Vendor#	Vendor Name			Class	Pay Code				
A1292	GULF COAST HARDWARE / ACE			W					
	Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	94420		08/31/20 08/24/20	09/23/20		39.99	0.00	0.00	39.99
		SUPPLIES PLANT OPS							
	94479		08/31/20 08/25/20	09/24/20		17.99	0.00	0.00	17.99
		SUPPLIES PLANT OPS							

94599	08/31/20	08/28/20	09/27/20		9.96	0.00	0.00	9.96
SUPPLIES PLANT OPS								
94698	09/11/20	09/02/20	10/02/20		10.97	0.00	0.00	10.97
SUPPLIES PLANT OPS								
94721	09/11/20	09/02/20	10/02/20		13.49	0.00	0.00	13.49
SUPPLIES PLANT OPS								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	A1292	GULF COAST HARDWARE / ACE			92.40	0.00	0.00	92.40

Vendor#	Vendor Name	Class	Pay Code
G1210	GULF COAST PAPER COMPANY	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
998944		08/26/20	08/25/20	09/24/20			364.33	0.00	0.00	364.33
SUPPLIES HOUSEKEEPING										
1002666		09/11/20	09/01/20	10/01/20			136.99	0.00	0.00	136.99
SUPPLIES HOUSEKEEPING										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY	501.32	0.00	0.00	501.32

Vendor#	Vendor Name	Class	Pay Code
H0030	H E BUTT GROCERY	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
027791		09/15/20	08/17/20	09/06/20			21.02	0.00	0.00	21.02
FOOD SUPPLIES DIETARY										
036891		09/15/20	08/21/20	09/10/20			32.34	0.00	0.00	32.34
FOOD SUPPLIES DIETARY										
050007		09/15/20	08/27/20	09/16/20			70.36	0.00	0.00	70.36
FOOD SUPPLIES DIETARY										
057264		09/15/20	08/30/20	09/19/20			18.64	0.00	0.00	18.64
FOOD SUPPLIES DIETARY										
061106		09/15/20	09/01/20	09/21/20			18.44	0.00	0.00	18.44
FOOD SUPPLIES DIETARY										
063398		09/15/20	09/02/20	09/22/20			62.75	0.00	0.00	62.75
FOOD SUPPLIES DIETARY										
072323		09/15/20	09/05/20	09/25/20			125.51	0.00	0.00	125.51
FOOD SUPPLIES DIETARY										
092572		09/15/20	09/14/20	10/03/20			162.43	0.00	0.00	162.43
FOOD SUPPLIES DIETARY										
091596		09/15/20	09/14/20	10/03/20			25.69	0.00	0.00	25.69
FOOD SUPPLIES DIETARY										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H0030	H E BUTT GROCERY	537.18	0.00	0.00	537.18

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
5595459		08/31/20	08/25/20	09/24/20			267.82	0.00	0.00	267.82
SUPPLIES PHARMACY										

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10334	HEALTH CARE LOGISTICS INC	267.82	0.00	0.00	267.82

Vendor#	Vendor Name	Class	Pay Code
H1399	HILL-ROM COMPANY, INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
24347152		09/11/20	08/29/20	09/28/20			113.61	0.00	0.00	113.61

	INSTRUMENT REPAIRS MED S							
24347153		09/11/20	08/29/20	09/28/20	228.99	0.00	0.00	228.99
	INSTRUMENT REPAIRS ICU							
24349658		09/11/20	09/02/20	10/02/20	8,342.40	0.00	0.00	8,342.40
	NEW MATTRESSES							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	H1399	HILL-ROM COMPANY, INC			8,685.00	0.00	0.00	8,685.00

Vendor#	Vendor Name	Class	Pay Code
H1600	HOBART SALES & SERVICE	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
32210208		09/14/20	08/31/20	09/30/20			791.19	0.00	0.00	791.19
	REPAIRS TO ELEC FRYER DIE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1600	HOBART SALES & SERVICE	791.19	0.00	0.00	791.19

Vendor#	Vendor Name	Class	Pay Code
11114	HOSPITALPORTAL.NET		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
13560		09/11/20	08/26/20	09/25/20			11,250.00	0.00	0.00	11,250.00
	INTERNET PORTAL									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11114	HOSPITALPORTAL.NET	11,250.00	0.00	0.00	11,250.00

Vendor#	Vendor Name	Class	Pay Code
10922	HUNTER PHARMACY SERVICES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1226		09/11/20	08/31/20	09/30/20			14,009.71	0.00	0.00	14,009.71
	PROF FEES PHARMACY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10922	HUNTER PHARMACY SERVICES	14,009.71	0.00	0.00	14,009.71

Vendor#	Vendor Name	Class	Pay Code
I0415	INDEPENDENCE MEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
36692381		08/31/20	08/24/20	09/23/20			26.90	0.00	0.00	26.90
	CS INVENTORY									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I0415	INDEPENDENCE MEDICAL	26.90	0.00	0.00	26.90

Vendor#	Vendor Name	Class	Pay Code
I1127	INTEGRATED MEDICAL SYSTEMS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1157901		08/31/20	08/24/20	09/23/20			704.00	0.00	0.00	704.00
	INSTRUMENT REPAIRS SURG									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I1127	INTEGRATED MEDICAL SYSTEMS	704.00	0.00	0.00	704.00

Vendor#	Vendor Name	Class	Pay Code
J0150	J & J HEALTH CARE SYSTEMS, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
915103644		08/31/20	08/21/20	09/22/20			19.90	0.00	0.00	19.90
	SUPPLIES CLINIC									
915113233		08/31/20	08/24/20	09/23/20			1,431.34	0.00	0.00	1,431.34
	SURGERY SUPPLIES									
915119495		08/31/20	08/25/20	09/24/20			382.44	0.00	0.00	382.44
	BLOOD BANK SUPPLIES									
915126662		09/11/20	08/26/20	09/25/20			515.39	0.00	0.00	515.39

	SUPPLIES BLOOD BANK							
915158687	09/11/20	08/31/20	09/30/20		176.08	0.00	0.00	176.08
	SUPPLIES ER							
915110738	09/14/20	08/24/20	09/23/20		866.57	0.00	0.00	866.57
	BLOOD BANK SUPPLIES							
915176243	09/14/20	09/02/20	10/02/20		42.00	0.00	0.00	42.00
	SUPPLIES SURGERY							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	J0150	J & J HEALTH CARE SYSTEMS, INC			3,433.72	0.00	0.00	3,433.72

Vendor#	Vendor Name			Class	Pay Code				
10285	JAMES A DANIEL								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20347		09/15/20	09/15/20	10/01/20		750.00	0.00	0.00	750.00
		STORAGE RENT OCT 2015								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10285	JAMES A DANIEL				750.00	0.00	0.00	750.00

Vendor#	Vendor Name			Class	Pay Code				
K1255	KRAMES								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8068007		09/11/20	08/28/20	09/27/20		101.66	0.00	0.00	101.66
		SUPPLIES CLINIC								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		K1255	KRAMES				101.66	0.00	0.00	101.66

Vendor#	Vendor Name			Class	Pay Code				
10771	LCA BANK CORPORATION								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	3602906		09/11/20	09/01/20	09/25/20		1,973.00	0.00	0.00	1,973.00
		OUTSIDE SRV HIM								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10771	LCA BANK CORPORATION				1,973.00	0.00	0.00	1,973.00

Vendor#	Vendor Name			Class	Pay Code				
10720	LIFESOURCE EDUCATIONAL SRV LLC								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	15025	(10524)	09/15/20	08/28/20	09/25/20		500.00	0.00	0.00	500.00
		CONT EDUCATION NURSING								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10720	LIFESOURCE EDUCATIONAL SRV LLC				500.00	0.00	0.00	500.00

Vendor#	Vendor Name			Class	Pay Code				
L1640	LOWE'S HOME CENTERS INC			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	93718850		09/11/20	08/27/20	09/28/20		177.63	0.00	0.00	177.63
		SUPPLIES IT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		L1640	LOWE'S HOME CENTERS INC				177.63	0.00	0.00	177.63

Vendor#	Vendor Name			Class	Pay Code				
10972	M G TRUST								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20337		09/11/20	09/10/20	09/10/20		1,495.00	0.00	0.00	1,495.00
		EMPLOYEE PERSONAL INVES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10972	M G TRUST				1,495.00	0.00	0.00	1,495.00

Vendor#	Vendor Name	Class	Pay Code
M2827	MEDIVATORS	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2130525	SUPPLIES SURGERY	09/11/20	08/05/20	09/04/20		245.20	0.00	0.00	245.20

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2827	MEDIVATORS	245.20	0.00	0.00	245.20

Vendor#	Vendor Name	Class	Pay Code
10963	MEMORIAL MEDICAL CLINIC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20336	CLINIC CO PAYS	09/11/20	09/10/20	09/10/20		118.00	0.00	0.00	118.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10963	MEMORIAL MEDICAL CLINIC	118.00	0.00	0.00	118.00

Vendor#	Vendor Name	Class	Pay Code
10182	MERCEDES MEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1765814	LAB SUPPLIES	08/31/20	08/24/20	09/23/20		248.00	0.00	0.00	248.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10182	MERCEDES MEDICAL	248.00	0.00	0.00	248.00

Vendor#	Vendor Name	Class	Pay Code
M2659	MERRY X-RAY/SOURCEONE HEALTHCA	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
30094106447	XRAY SUPPLIES	08/31/20	08/26/20	09/25/20		1,721.21	0.00	0.00	1,721.21
30094110243	SUPPLIES CT SCAN	09/11/20	09/02/20	10/02/20		363.01	0.00	0.00	363.01
30094110244	SUPPLIES CT SCAN	09/11/20	09/02/20	10/02/20		107.27	0.00	0.00	107.27
30094111152	SUPPLIES CT SCAN	09/11/20	09/03/20	10/03/20		107.27	0.00	0.00	107.27
30094108813	SUPPLIES SURGERY	09/14/20	08/31/20	09/30/20		153.93	0.00	0.00	153.93
30094109670	XRAY SUPPLIES	09/14/20	09/01/20	10/01/20		614.88	0.00	0.00	614.88

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	M2659	MERRY X-RAY/SOURCEONE HEALTHCA	3,067.57	0.00	0.00	3,067.57

Vendor#	Vendor Name	Class	Pay Code
10377	MGMA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20335	1101858094 DUES & SUBCRIPTIONS	09/11/20	09/10/20	09/10/20		380.00	0.00	0.00	380.00

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10377	MGMA	380.00	0.00	0.00	380.00

Vendor#	Vendor Name	Class	Pay Code
11109	MINDRAY CAPITAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
633431	LEASE & RENTAL ER	09/15/20	09/11/20	10/01/20		6,655.11	0.00	0.00	6,655.11

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11109	MINDRAY CAPITAL	6,655.11	0.00	0.00	6,655.11

Vendor#	Vendor Name				Class	Pay Code				
10810	MMC EMPLOYEE BENEFIT PLAN									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20326		09/11/20	09/08/20	09/08/20		24,086.27	0.00	0.00	24,086.27
		EMPLOYEE MEDICAL CLAIMS								
	20346		09/15/20	09/14/20	09/14/20		27,114.23	0.00	0.00	27,114.23
		EMPLOYEE MEDICAL CLAIMS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10810	MMC EMPLOYEE BENEFIT PLAN				51,200.50	0.00	0.00	51,200.50
Vendor#	Vendor Name				Class	Pay Code				
10536	MORRIS & DICKSON CO, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	7871216		09/11/20	09/08/20	09/18/20		210.62	0.00	0.00	210.62
		PHARMACY DRUGS								
	7868910		09/11/20	09/08/20	09/18/20		4,053.60	0.00	0.00	4,053.60
		PHARMACY DRUGS								
	7871217		09/11/20	09/08/20	09/18/20		1,994.24	0.00	0.00	1,994.24
		PHARMACY DRUGS								
	7870590		09/11/20	09/08/20	09/18/20		206.75	0.00	0.00	206.75
		PHARMACY DRUGS								
	7871218		09/11/20	09/08/20	09/18/20		391.76	0.00	0.00	391.76
		PHARMACY DRUGS								
	7871219		09/11/20	09/08/20	09/18/20		561.51	0.00	0.00	561.51
		PHARMACY DRUGS								
	CM37774		09/11/20	09/09/20	09/19/20		-20.76	0.00	0.00	-20.76
		PHARMACY CREDIT								
	CM7777 (CM37777)		09/11/20	09/09/20	09/19/20		-2.47	0.00	0.00	-2.47
		PHARMACY CREDIT								
	CM37766		09/11/20	09/09/20	09/19/20		-13.06	0.00	0.00	-13.06
		PHARMACY CREDIT								
	7878020		09/11/20	09/09/20	09/19/20		1,984.09	0.00	0.00	1,984.09
		PHARMACY DRUGS								
	CM37765		09/11/20	09/09/20	09/19/20		-9.38	0.00	0.00	-9.38
		PHARMACY CREDIT								
	CM37771		09/11/20	09/09/20	09/19/20		-2.47	0.00	0.00	-2.47
		PHARMACY CREDIT								
	7878019		09/11/20	09/09/20	09/19/20		66.85	0.00	0.00	66.85
		PHARMACY DRUGS								
	7874523		09/11/20	09/09/20	09/19/20		1,500.00	0.00	0.00	1,500.00
		OUTSIDE SRV PHARMACY								
	CM37763		09/11/20	09/09/20	09/19/20		-1.70	0.00	0.00	-1.70
		PHARMACY CREDIT								
	CM37770		09/11/20	09/09/20	09/19/20		-2.47	0.00	0.00	-2.47
		PHARMACY CREDIT								
	CM37775		09/11/20	09/09/20	09/19/20		-33.07	0.00	0.00	-33.07
		PHARMACY CREDIT								
	7878021		09/11/20	09/09/20	09/19/20		22.92	0.00	0.00	22.92
		PHARMACY DRUGS								
	CM37773		09/11/20	09/09/20	09/19/20		-10.38	0.00	0.00	-10.38
		PHARMACY CREDIT								
	CM37767		09/11/20	09/09/20	09/19/20		-15.23	0.00	0.00	-15.23

	PHARMACY CREDIT							
CM37762	09/11/20	09/09/20	09/19/20	-19.10	0.00	0.00	-19.10	
	PHARMACY CREDIT							
CM37768	09/11/20	09/09/20	09/19/20	-105.00	0.00	0.00	-105.00	
	PHARMACY CREDIT							
CM37761	09/11/20	09/09/20	09/19/20	-21.19	0.00	0.00	-21.19	
	PHARMACY CREDIT							
CM37769	09/11/20	09/09/20	09/19/20	-2.47	0.00	0.00	-2.47	
	PHARMACY CREDIT							
CM37772	09/11/20	09/09/20	09/19/20	-157.40	0.00	0.00	-157.40	
	PHARMACY CREDIT							
7878018	09/11/20	09/09/20	09/19/20	130.97	0.00	0.00	130.97	
	PHARMACY DRUGS							
CM37764	09/11/20	09/09/20	09/19/20	-4.94	0.00	0.00	-4.94	
	PHARMACY CREDIT							
CM37776	09/11/20	09/09/20	09/19/20	-2.47	0.00	0.00	-2.47	
	PHARMACY CREDIT							
7875207	09/11/20	09/09/20	09/19/20	206.75	0.00	0.00	206.75	
	PHARMACY DRUGS							
7883022	09/11/20	09/10/20	09/20/20	242.46	0.00	0.00	242.46	
	PHARMACY DRUGS							
CM38311	09/11/20	09/10/20	09/20/20	-395.32	0.00	0.00	-395.32	
	PHARMACY CREDIT							
7883021	09/11/20	09/10/20	09/20/20	14.72	0.00	0.00	14.72	
	PHARMACY DRUGS							
7883020	09/11/20	09/10/20	09/20/20	704.69	0.00	0.00	704.69	
	PHARMACY DRUGS							
7895325	09/15/20	09/14/20	09/24/20	553.40	0.00	0.00	553.40	
	PHARMACY DRUGS							
7895328	09/15/20	09/14/20	09/24/20	8.77	0.00	0.00	8.77	
	PHARMACY DRUGS							
7892318	09/15/20	09/14/20	09/24/20	196.86	0.00	0.00	196.86	
	PHARMACY DRUGS							
7895327	09/15/20	09/14/20	09/24/20	4,586.53	0.00	0.00	4,586.53	
	PHARMACY DRUGS							
7895326	09/15/20	09/14/20	09/24/20	52.05	0.00	0.00	52.05	
	PHARMACY DRUGS							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	16,870.66	0.00	0.00	16,870.66

Vendor#	Vendor Name	Class	Pay Code
10188	NATUS MEDICAL INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1040260859	SUPPLIES BIO MED	09/15/20	09/01/20	10/01/20			507.22	0.00	0.00	507.22

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10188	NATUS MEDICAL INC	507.22	0.00	0.00	507.22

Vendor#	Vendor Name	Class	Pay Code
10868	NOVA BIOMEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
90084171	SUPPLIES LAB	09/15/20	12/19/20	01/19/20			25.00	0.00	0.00	25.00
90136220		09/15/20	05/22/20	06/21/20			3,165.34	0.00	0.00	3,165.34

	CS INVENTORY							
2009193412 ✓		08/31/20	08/25/20	09/24/20	54.93	0.00	0.00	54.93 ✓
	CLINIC SUPPLIES							
2009283966 ✓		08/31/20	08/27/20	09/26/20	815.31	0.00	0.00	815.31 ✓
	SUPPLIES VARIOUS DEPTS							
2009293152 ✓		08/31/20	08/27/20	09/26/20	25.10	0.00	0.00	25.10 ✓
	CS INVENTORY							
2009291830 ✓		08/31/20	08/27/20	09/26/20	24.37	0.00	0.00	24.37 ✓
	CS INVENTORY							
2009297124 2009297124		08/31/20	08/27/20	09/26/20	151.33	0.00	0.00	151.33 ✓
	SUPPLIES CARDIO							
2009454378 ✓		09/11/20	09/01/20	10/01/20	130.56	0.00	0.00	130.56 ✓
	SUPPLIES SURGERY							
2009454300 ✓		09/11/20	09/01/20	10/01/20	66.40	0.00	0.00	66.40 ✓
	SUPPLIES SURGERY							
2009452785 ✓		09/11/20	09/01/20	10/01/20	987.74	0.00	0.00	987.74 ✓
	SUPPLIES VARIOUS DEPTS							
2009454450 ✓		09/11/20	09/01/20	10/01/20	38.92	0.00	0.00	38.92 ✓
	CS INVENTORY							
2009453857 ✓		09/11/20	09/01/20	10/01/20	128.65	0.00	0.00	128.65 ✓
	SUPPLIES SURGERY							
2009453539 ✓		09/11/20	09/01/20	10/01/20	757.80	0.00	0.00	757.80 ✓
	SUPPLIES VARIOUS DEPTS							
2009453534 ✓		09/11/20	09/01/20	10/01/20	2,967.14	0.00	0.00	2,967.14 ✓
	CS INVENTORY & LAB SUPPLI							
2009538208 ✓		09/11/20	09/03/20	10/03/20	237.12	0.00	0.00	237.12 ✓
	SUPPLIES HOUSEKEEPING							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	OM425	OWENS & MINOR ✓			10,755.84	0.00	0.00	10,755.84

Vendor#	Vendor Name	Class	Pay Code
P0706	PALACIOS BEACON	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20336		09/11/20	09/01/20	10/01/20		220.00	0.00	0.00	220.00 ✓
	ADVERTISING								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	P0706	PALACIOS BEACON ✓	220.00	0.00	0.00	220.00

Vendor#	Vendor Name	Class	Pay Code
10204	PHARMEDIUM SERVICES LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
A1390495 ✓		09/14/20	08/21/20	09/20/20		359.85	0.00	0.00	359.85 ✓
	PHARMACY DRUGS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10204	PHARMEDIUM SERVICES LLC ✓	359.85	0.00	0.00	359.85

Vendor#	Vendor Name	Class	Pay Code
10541	PLATINUM CODE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
082715		09/11/20	08/27/20	09/26/20		437.05	0.00	0.00	437.05 ✓
030846	CS INVENTORY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10541	PLATINUM CODE ✓	437.05	0.00	0.00	437.05

Vendor#	Vendor Name	Class	Pay Code
10114	PORT LAVACA CHAMBER OF COMMERC		

SUPPLIES LAB

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10868	NOVA BIOMEDICAL ✓	3,190.34	0.00	0.00	3,190.34

Vendor#	Vendor Name	Class	Pay Code
N1225	NUTRITION OPTIONS	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20341		09/11/20	09/30/20	09/30/20			3,750.00	0.00	0.00	3,750.00 ✓

PROF FEES NUTRITIONIST

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	N1225	NUTRITION OPTIONS ✓	3,750.00	0.00	0.00	3,750.00

Vendor#	Vendor Name	Class	Pay Code
O0920	OFFICE DEPOT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
789238578001 ✓		09/11/20	08/25/20	09/24/20			123.48	0.00	0.00	123.48 ✓

OFFICE SUPPLIES HIM

789297996001 ✓		09/11/20	08/25/20	09/24/20			61.74	0.00	0.00	61.74 ✓

SUPPLIES XRAY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	O0920	OFFICE DEPOT ✓	185.22	0.00	0.00	185.22

Vendor#	Vendor Name	Class	Pay Code
10008	OMNI-PORT LAVACA 07, L.P.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20348		09/15/20	09/15/20	10/01/20			11,001.20	0.00	0.00	11,001.20 ✓

RENT FOR PT & BEHAVE HEA Oct 2015

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10008	OMNI-PORT LAVACA 07, L.P.	11,001.20	0.00	0.00	11,001.20

Vendor#	Vendor Name	Class	Pay Code
10777	OSCAR TORRES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
209758 ✓		09/11/20	09/05/20	10/03/20			250.00	0.00	0.00	250.00 ✓

OUTSIDE SRV PLANT OPS

209759 ✓		09/11/20	09/05/20	10/03/20			45.00	0.00	0.00	45.00 ✓

OUTSIDE SRV PLANT OPS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10777	OSCAR TORRES ✓	295.00	0.00	0.00	295.00

Vendor#	Vendor Name	Class	Pay Code
OM425	OWENS & MINOR		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
2009198121 ✓		08/31/20	08/25/20	09/24/20			922.13	0.00	0.00	922.13 ✓

CS INVENTORY

2009199140 ✓		08/31/20	08/25/20	09/24/20			1,305.73	0.00	0.00	1,305.73 ✓

SUPPLIES VARIOUS DEPTS

2009201429 ✓		08/31/20	08/25/20	09/24/20			1,844.04	0.00	0.00	1,844.04 ✓

SUPPLIES VARIOUS DEPTS

2009195307 ✓		08/31/20	08/25/20	09/24/20			21.36	0.00	0.00	21.36 ✓

SUPPLIES DIETARY

2009195500 ✓		08/31/20	08/25/20	09/24/20			241.85	0.00	0.00	241.85 ✓

CS INVENTORY

2009196528 ✓		08/31/20	08/25/20	09/24/20			4.16	0.00	0.00	4.16 ✓

CS INVENTORY

2009195488 ✓		08/31/20	08/25/20	09/24/20			31.20	0.00	0.00	31.20 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20339		09/11/20	09/10/20	09/10/20		165.00	0.00	0.00	165.00
	FAIR BOOTH PT								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10114	PORT LAVACA CHAMBER OF COMMERC				165.00	0.00	0.00	165.00
Vendor#	Vendor Name			Class	Pay Code				
P2100	PORT LAVACA WAVE			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20337		09/11/20	08/31/20	09/30/20		800.50	0.00	0.00	800.50
	ADVERTISING								
20342		09/11/20	08/31/20	09/30/20		2,295.58	0.00	0.00	2,295.58
	ADVERTISING								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	P2100	PORT LAVACA WAVE				3,096.08	0.00	0.00	3,096.08
Vendor#	Vendor Name			Class	Pay Code				
P2200	POWER ELECTRIC			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
A13794		08/31/20	08/26/20	09/25/20		11.29	0.00	0.00	11.29
	SUPPLIES PLANT OPS								
B15304		09/11/20	09/01/20	10/01/20		16.28	0.00	0.00	16.28
	SUPPLIES PT								
B15331		09/11/20	09/02/20	10/02/20		113.16	0.00	0.00	113.16
	SUPPLIES PLANT OPS								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	P2200	POWER ELECTRIC				140.73	0.00	0.00	140.73
Vendor#	Vendor Name			Class	Pay Code				
10372	PRECISION DYNAMICS CORP (PDC)								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3097688		09/11/20	08/31/20	09/30/20		431.77	0.00	0.00	431.77
	CS INVENTORY								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10372	PRECISION DYNAMICS CORP (PDC)				431.77	0.00	0.00	431.77
Vendor#	Vendor Name			Class	Pay Code				
P1725	PREMIER SLEEP DISORDERS CENTER			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
53		09/11/20	09/02/20	10/02/20		3,400.00	0.00	0.00	3,400.00
	PROF FEES CARDIO								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	P1725	PREMIER SLEEP DISORDERS CENTER				3,400.00	0.00	0.00	3,400.00
Vendor#	Vendor Name			Class	Pay Code				
11028	PROFESSIONAL SERVICE								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
00388889		09/11/20	08/31/20	09/30/20		983.10	0.00	0.00	983.10
	NEW CLINIC EXPENSE								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11028	PROFESSIONAL SERVICE				983.10	0.00	0.00	983.10
Vendor#	Vendor Name			Class	Pay Code				
R1268	RADIOLOGY UNLIMITED, PA			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20311		08/31/20	08/31/20	09/22/20		25.00	0.00	0.00	25.00
	READ FEES XRAY								

20327		09/11/20	03/06/20	04/06/20	300.00	0.00	0.00	300.00
READ FEES XRAY								
20328		09/11/20	04/02/20	05/02/20	300.00	0.00	0.00	300.00
READ FEES XRAY								
20330		09/11/20	05/29/20	06/29/20	360.00	0.00	0.00	360.00
READ FEES XRAY								
20331		09/11/20	06/30/20	07/30/20	150.00	0.00	0.00	150.00
READ FEES XRAY								
20332		09/11/20	08/05/20	09/05/20	135.00	0.00	0.00	135.00
READ FEES XRAY								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	R1268	RADIOLOGY UNLIMITED, PA			1,270.00	0.00	0.00	1,270.00
Vendor#	Vendor Name			Class	Pay Code			
11009	RECONDO							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
INV-07875		08/31/20	08/24/20	09/23/20		4,750.00	0.00	0.00	4,750.00
OUTSIDE SRV BUS OFFICE									
INV-08023		09/14/20	09/01/20	10/01/20		4,050.00	0.00	0.00	4,050.00
OUTSIDE SRV BUS OFFICE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11009	RECONDO				8,800.00	0.00	0.00	8,800.00
Vendor#	Vendor Name			Class	Pay Code				
10987	REVCYCLE+, INC.								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
MLVAC-4278		09/11/20	08/31/20	09/30/20		2,416.05	0.00	0.00	2,416.05
MAINT CONTR HIM									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10987	REVCYCLE+, INC.				2,416.05	0.00	0.00	2,416.05
Vendor#	Vendor Name			Class	Pay Code				
I0520	RICOH USA, INC.			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
95363291		09/15/20	08/31/20	09/19/20		5,949.00	0.00	0.00	5,949.00
COPIER LEASE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	I0520	RICOH USA, INC.				5,949.00	0.00	0.00	5,949.00
Vendor#	Vendor Name			Class	Pay Code				
11115	S. TEX BROADCASTING								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
6566		09/11/20	09/04/20	10/03/20		400.00	0.00	0.00	400.00
ADVERTISING									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11115	S. TEX BROADCASTING				400.00	0.00	0.00	400.00
Vendor#	Vendor Name			Class	Pay Code				
S1800	SHERWIN WILLIAMS			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
0277-4		08/31/20	08/27/20	09/26/20		11.47	0.00	0.00	11.47
SUPPLIES PLANT OPS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S1800	SHERWIN WILLIAMS				11.47	0.00	0.00	11.47
Vendor#	Vendor Name			Class	Pay Code				
10995	SHIFTHOUND								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

1509592		08/31/20	08/31/20	09/30/20		425.00	0.00	0.00	425.00
DUES & SUBSCRIPTIONS NUF									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10995	SHIFTHOUND				425.00	0.00	0.00	425.00
Vendor#	Vendor Name			Class	Pay Code				
K0536	SHIRLEY KARNEI								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
20345		09/14/20	09/13/20	09/13/20		1,191.00	0.00	0.00	1,191.00
	OUTSIDE SRV TRANSCRIPTIC 8/31 - 9/13/15								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	K0536	SHIRLEY KARNEI				1,191.00	0.00	0.00	1,191.00
Vendor#	Vendor Name			Class	Pay Code				
S2001	SIEMENS MEDICAL SOLUTIONS INC			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
115192024		08/31/20	08/18/20	09/22/20		832.25	0.00	0.00	832.25
	MAINT CONTR ULTRASOUND								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2001	SIEMENS MEDICAL SOLUTIONS INC				832.25	0.00	0.00	832.25
Vendor#	Vendor Name			Class	Pay Code				
S2362	SMITH & NEPHEW								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
92420747		08/31/20	08/24/20	09/23/20		245.87	0.00	0.00	245.87
	SURGERY SUPPLIES								
92420748		08/31/20	08/24/20	09/23/20		245.87	0.00	0.00	245.87
	SURGERY SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2362	SMITH & NEPHEW				491.74	0.00	0.00	491.74
Vendor#	Vendor Name			Class	Pay Code				
S2345	SOUTHEAST TEXAS HEALTH SYS			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
25507		09/14/20	09/01/20	10/01/20		1,000.00	0.00	0.00	1,000.00
	DUES & SUBSCRIPTIONS ADM								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2345	SOUTHEAST TEXAS HEALTH SYS				1,000.00	0.00	0.00	1,000.00
Vendor#	Vendor Name			Class	Pay Code				
S3940	STERIS CORPORATION			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
5806753		09/11/20	08/31/20	09/30/20		108.45	0.00	0.00	108.45
	INSTRUMENT REPAIRS MED S								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S3940	STERIS CORPORATION				108.45	0.00	0.00	108.45
Vendor#	Vendor Name			Class	Pay Code				
S2833	STRYKER ENDOSCOPY								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
6153595-E		09/11/20	08/27/20	09/26/20		7,853.78	0.00	0.00	7,853.78
	SURGERY LIGHT SOURCE								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2833	STRYKER ENDOSCOPY				7,853.78	0.00	0.00	7,853.78
Vendor#	Vendor Name			Class	Pay Code				
10735	STRYKER SUSTAINABILITY								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

2526253		08/27/20	07/31/20	09/22/20	-25.50	0.00	0.00	-25.50
CREDIT SURGERY SUPPLIES								
2546029		08/31/20	08/26/20	09/22/20	169.69	0.00	0.00	169.69
SUPPLIES SURGERY								
2552065		09/14/20	09/02/20	10/02/20	169.69	0.00	0.00	169.69
SUPPLIES SURGERY								
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10735	STRYKER SUSTAINABILITY			313.88	0.00	0.00	313.88
Vendor#	Vendor Name			Class	Pay Code			
10982	TELCOR							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
22722		09/11/20	09/01/20	10/01/20		2,670.00	0.00	0.00	2,670.00
MAINT CONT LAB								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10982	TELCOR				2,670.00	0.00	0.00	2,670.00
Vendor#	Vendor Name			Class	Pay Code			
10611	TELE-PHYSICIANS, P.A. (TX)							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
TX0001109		09/15/20	08/31/20	08/31/20		600.00	0.00	0.00	600.00
PRO FEES ER									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10611	TELE-PHYSICIANS, P.A. (TX)				600.00	0.00	0.00	600.00
Vendor#	Vendor Name			Class	Pay Code				
T2050	TEXAS HOSPITAL INS EXCHANGE			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
20349		09/15/20	09/15/20	10/01/20		3,569.00	0.00	0.00	3,569.00
LIABILITY INS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	T2050	TEXAS HOSPITAL INS EXCHANGE				3,569.00	0.00	0.00	3,569.00
Vendor#	Vendor Name			Class	Pay Code				
T2230	TEXAS WIRED MUSIC INC			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
A835758		09/15/20	09/01/20	10/01/20		73.95	0.00	0.00	73.95
OUTSIDE SRV ADMIN									
A835757		09/15/20	09/01/20	10/01/20		63.95	0.00	0.00	63.95
OUTSIDE SRV ADMIN									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	T2230	TEXAS WIRED MUSIC INC				137.90	0.00	0.00	137.90
Vendor#	Vendor Name			Class	Pay Code				
T2303	TG			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
20333		09/11/20	09/10/20	09/10/20		144.40	0.00	0.00	144.40
GARNISHMENT OFR STUDEN									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	T2303	TG				144.40	0.00	0.00	144.40
Vendor#	Vendor Name			Class	Pay Code				
V1050	THE VICTORIA ADVOCATE			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
20338		09/11/20	08/31/20	09/30/20		168.86	0.00	0.00	168.86
ADVERTSING									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	V1050	THE VICTORIA ADVOCATE				168.86	0.00	0.00	168.86

Vendor#	Vendor Name				Class	Pay Code				
10732	THERACOM, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	128707898-301		08/28/20	08/03/20	10/01/20		637.00	0.00	0.00	637.00
		PHARMACY DRUGS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10732	THERACOM, LLC				637.00	0.00	0.00	637.00
Vendor#	Vendor Name				Class	Pay Code				
T0801	TLC STAFFING				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	14695		08/17/20	08/03/20	09/30/20		785.63	0.00	0.00	785.63 Took off Per Vicky
		CONTRACT NURSING								
	14831		09/14/20	09/01/20	09/01/20		513.28	0.00	0.00	513.28
		CONTRACT NURSING								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		T0801	TLC STAFFING				1,298.91	0.00	0.00	1,298.91 513.28
Vendor#	Vendor Name				Class	Pay Code				
U1054	UNIFIRST HOLDINGS				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8150702442		08/28/20	08/25/20	09/24/20		50.40	0.00	0.00	50.40
		OUTSIDE SRV MAINT								
	8150702553		08/28/20	08/25/20	09/24/20		28.50	0.00	0.00	28.50
		OUTSIDE SRV BIO MED								
	8150703310		09/14/20	09/01/20	10/01/20		28.50	0.00	0.00	28.50
		OUTSIDE SRV BIO MED								
	8150703201		09/14/20	09/01/20	10/01/20		46.60	0.00	0.00	46.60
		OUTSIDE SRV MAINT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		U1054	UNIFIRST HOLDINGS				154.00	0.00	0.00	154.00
Vendor#	Vendor Name				Class	Pay Code				
U1064	UNIFIRST HOLDINGS INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8400201447		08/28/20	08/25/20	09/24/20		204.18	0.00	0.00	204.18
		LAUNDRY HOUSEKEEPING								
	8400201451		08/28/20	08/25/20	09/24/20		107.51	0.00	0.00	107.51
		LAUNDRY HOUSEKEEPING								
	8400201450		08/28/20	08/25/20	09/24/20		104.21	0.00	0.00	104.21
		LAUNDRY OB								
	8400201448		08/28/20	08/25/20	09/24/20		184.52	0.00	0.00	184.52
		LAUNDRY HOUSEKEEPING								
	8400201449		08/28/20	08/25/20	09/24/20		175.14	0.00	0.00	175.14
		LAUNDRY DIETARY								
	8400201504		08/28/20	08/25/20	09/24/20		898.12	0.00	0.00	898.12
		LAUNDRY HOUSEKEEPING								
	8400201491		08/31/20	08/25/20	09/24/20		138.61	0.00	0.00	138.61
		LAUNDRY HOUSEKEEPING								
	8400201818		08/31/20	08/28/20	09/27/20		886.98	0.00	0.00	886.98
		LAUNDRY HOUSEKEEPING								
	8400201766		08/31/20	08/28/20	09/27/20		406.94	0.00	0.00	406.94
		LAUNDRY SURGERY								
	8400201949		09/14/20	09/01/20	10/01/20		204.18	0.00	0.00	204.18

	LAUNDRY HOUSEKEEPING								
	8400201951		09/14/20	09/01/20	10/01/20	175.14	0.00	0.00	175.14
	LAUNDRY DIETARY								
	8400202002		09/14/20	09/01/20	10/01/20	850.36	0.00	0.00	850.36
	LAUNDRY HOUSEKEEPING								
	8400201950		09/14/20	09/01/20	10/01/20	159.76	0.00	0.00	159.76
	LAUNDRY HOUSEKEEPING								
	8400201952		09/14/20	09/01/20	10/01/20	104.21	0.00	0.00	104.21
	LAUNDRY OB								
	8400201953		09/14/20	09/01/20	10/01/20	107.51	0.00	0.00	107.51
	LAUNDRY HOUSEKEEPING								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		U1064	UNIFIRST HOLDINGS INC			4,707.37	0.00	0.00	4,707.37
Vendor#	Vendor Name				Class	Pay Code			
U0414	UNUM LIFE INS CO OF AMERICA								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	20350		09/15/20	09/11/20	10/01/20	5,121.44	0.00	0.00	5,121.44
	LIFE & LG TERM DISABILITY I								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		U0414	UNUM LIFE INS CO OF AMERICA			5,121.44	0.00	0.00	5,121.44
Vendor#	Vendor Name				Class	Pay Code			
V1471	VICTORIA RADIOWORKS, LTD				W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	15080239		09/11/20	08/31/20	09/30/20	260.00	0.00	0.00	260.00
	ADVERTISING								
	15080240		09/11/20	08/31/20	09/30/20	260.00	0.00	0.00	260.00
	ADVERTISING								
	15080242		09/11/20	08/31/20	09/30/20	40.00	0.00	0.00	40.00
	ADVERTISING								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		V1471	VICTORIA RADIOWORKS, LTD			560.00	0.00	0.00	560.00
Vendor#	Vendor Name				Class	Pay Code			
10915	WAGEWORKS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	20334		09/11/20	09/10/20	09/10/20	1,308.61	0.00	0.00	1,308.61
	MONEY TO FUND FLEX SPENI								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10915	WAGEWORKS			1,308.61	0.00	0.00	1,308.61
Vendor#	Vendor Name				Class	Pay Code			
10943	WALLER,LANSDEN, DORTCH & DAVIS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	10573341		09/11/20	08/13/20	09/13/20	430.00	0.00	0.00	430.00
	LEGAL SERVICES								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10943	WALLER,LANSDEN, DORTCH & DAVIS			430.00	0.00	0.00	430.00
Vendor#	Vendor Name				Class	Pay Code			
W1040	WATERMARK GRAPHICS INC				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	106311		09/11/20	08/24/20	09/23/20	260.00	0.00	0.00	260.00
	OFFICE SUPPLIES HOSPITALI								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		W1040	WATERMARK GRAPHICS INC			260.00	0.00	0.00	260.00

Vendor#	Vendor Name				Class	Pay Code				
I1110	WERFEN USA LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	9110231570		08/31/20	08/25/20	09/24/20		115.00	0.00	0.00	115.00
		LAB SUPPLIES								
	9110232830		09/11/20	08/31/20	09/30/20		546.00	0.00	0.00	546.00
		LAB SUPPLIES								
	9110232829		09/11/20	08/31/20	09/30/20		375.95	0.00	0.00	375.95
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		I1110	WERFEN USA LLC				1,036.95	0.00	0.00	1,036.95
Vendor#	Vendor Name				Class	Pay Code				
10325	WHOLESALE ELECTRIC SUPPLY									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	79+3934509		09/11/20	09/03/20	10/03/20		165.00	0.00	0.00	165.00
		SUPPLIES PLANT OPS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10325	WHOLESALE ELECTRIC SUPPLY				165.00	0.00	0.00	165.00
Vendor#	Vendor Name				Class	Pay Code				
Y1000	YOUNG PLUMBING CO				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	149144		08/31/20	08/28/20	09/27/20		55.45	0.00	0.00	55.45
		SUPPLIES PLANT OPS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		Y1000	YOUNG PLUMBING CO				55.45	0.00	0.00	55.45

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	351,648.32	0.00	0.00	351,648.32

Pg 3 correction (7.00)
no receipt

Pg 6 correction (10,348.50)
wrong Payee +
question on amount

Pg 21 correction (785.63)
invoice missing

340,507.19

Michael J. Pfeifer
Judge
9-23-15

APPROVED
ON
SEP 16 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

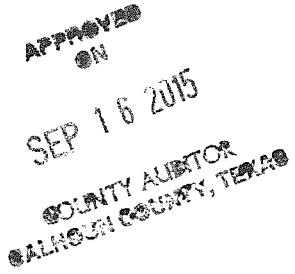
CKS# 163143
+0
163261

RUN DATE:09/17/15 MEMORIAL MEDICAL CENTER PAGE 1 93
TIME:10:04 CHECK REGISTER GLCKREG
09/17/15 THRU 09/17/15

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	163143	09/17/15	11,001.20	OMNI-PORT LAVACA 07, L.P.
A/P	163144	09/17/15	898.60	BECTON, DICKINSON & CO (BD)
A/P	163145	09/17/15	152.00	ERBE USA INC SURGICAL SYSTEMS
A/P	163146	09/17/15	165.00	PORT LAVACA CHAMBER OF COMMERC
A/P	163147	09/17/15	248.00	MERCEDES MEDICAL
A/P	163148	09/17/15	507.22	NATUS MEDICAL INC
A/P	163149	09/17/15	359.85	PHARMEDIUM SERVICES LLC
A/P	163150	09/17/15	750.00	JAMES A DANIEL
A/P	163151	09/17/15	165.00	WHOLESALE ELECTRIC SUPPLY
A/P	163152	09/17/15	267.82	HEALTH CARE LOGISTICS INC
A/P	163153	09/17/15	1,515.84	CENTURION MEDICAL PRODUCTS
A/P	163154	09/17/15	1,196.36	DEWITT POTH & SON
A/P	163155	09/17/15	431.77	PRECISION DYNAMICS CORP (PDC)
A/P	163156	09/17/15	380.00	MCMA
A/P	163157	09/17/15	112.92	ALERE NORTH AMERICA INC
A/P	163158	09/17/15	.00	VOIDED
A/P	163159	09/17/15	.00	VOIDED
A/P	163160	09/17/15	16,870.66	MORRIS & DICKSON CO, LLC
A/P	163161	09/17/15	437.05	PLATINUM CODE
A/P	163162	09/17/15	9,070.00	AMERICAN PROFICIENCY INSTITUTE
A/P	163163	09/17/15	19,441.50	BKD, LLP
A/P	163164	09/17/15	600.00	TELE-PHYSICIANS, P.A. (TX)
A/P	163165	09/17/15	478.00	GLOBAL EQUIPMENT CO. INC.
A/P	163166	09/17/15	416.23	FIVE STAR STERILIZER SERVICES
A/P	163167	09/17/15	495.00	FASTHEALTH CORPORATION
A/P	163168	09/17/15	500.00	LIFESOURCE EDUCATIONAL SRV LLC
A/P	163169	09/17/15	637.00	THERACOM, LLC
A/P	163170	09/17/15	313.88	STRYKER SUSTAINABILITY
A/P	163171	09/17/15	1,973.00	LCA BANK CORPORATION
A/P	163172	09/17/15	295.00	OSCAR TORRES
A/P	163173	09/17/15	7,698.24	CLINICAL PATHOLOGY
A/P	163174	09/17/15	51,200.50	MMC EMPLOYEE BENEFIT PLAN
A/P	163175	09/17/15	3,190.34	NOVA BIOMEDICAL
A/P	163176	09/17/15	285.64	GENESIS DIAGNOSTICS
A/P	163177	09/17/15	1,308.61	WAGEWORKS
A/P	163178	09/17/15	14,009.71	HUNTER PHARMACY SERVICES
A/P	163179	09/17/15	430.00	WALLER,LANSDEN, DORTCH & DAVIS
A/P	163180	09/17/15	118.00	MEMORIAL MEDICAL CLINIC
A/P	163181	09/17/15	1,495.00	M G TRUST
A/P	163182	09/17/15	2,670.00	TELCOR
A/P	163183	09/17/15	2,416.05	REVCYCLE+, INC.
A/P	163184	09/17/15	425.00	SHIFTHOUND
A/P	163185	09/17/15	7,682.67	CSI LEASING INC
A/P	163186	09/17/15	8,800.00	RECONDO
A/P	163187	09/17/15	983.10	PROFESSIONAL SERVICE
A/P	163188	09/17/15	75.00	FIRST CLEARING
A/P	163189	09/17/15	6,655.11	MINDRAY CAPITAL
A/P	163190	09/17/15	11,250.00	HOSPITALPORTAL.NET
A/P	163191	09/17/15	400.00	S. TEX BROADCASTING
A/P	163192	09/17/15	92.40	GULF COAST HARDWARE / ACE

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	163193	09/17/15	256.00	ACTION LUMBER
A/P	163194	09/17/15	193.00	AMERISOURCEBERGEN DRUG CORP
A/P	163195	09/17/15	13,015.00	AIR SPECIALTY & EQUIPMENT CO
A/P	163196	09/17/15	3,011.78	AIRGAS-SOUTHWEST
A/P	163197	09/17/15	778.29	ALIMED INC.
A/P	163198	09/17/15	222.67	ALCO SALES & SERVICE CO
A/P	163199	09/17/15	3,473.35	AFLAC
A/P	163200	09/17/15	3,457.22	BAXTER HEALTHCARE CORP
A/P	163201	09/17/15	20,176.55	BECKMAN COULTER INC
A/P	163202	09/17/15	480.00	BIOMET SPORTS MEDICINE
A/P	163203	09/17/15	25.00	CAL COM FEDERAL CREDIT UNION
A/P	163204	09/17/15	536.00	CAD SOLUTIONS, INC
A/P	163205	09/17/15	520.00	CENTRAL DRUGS
A/P	163206	09/17/15	439.00	CYGNUS MEDICAL LLC
A/P	163207	09/17/15	119.76	CONMED CORPORATION
A/P	163208	09/17/15	18,735.05	EVIDENT
A/P	163209	09/17/15	252.00	C R BARD, INC
A/P	163210	09/17/15	182.00	DOWNTOWN CLEANERS
A/P	163211	09/17/15	78.30	EMERGENCY MEDICAL PRODUCTS
A/P	163212	09/17/15	5,949.25	FISHER HEALTHCARE
A/P	163213	09/17/15	530.00	FORT BEND SERVICES, INC
A/P	163214	09/17/15	565.42	GETINGE USA
A/P	163215	09/17/15	60.00	GREENHOUSE FLORAL DESIGNERS
A/P	163216	09/17/15	501.32	GULF COAST PAPER COMPANY
A/P	163217	09/17/15	537.18	H E BUTT GROCERY
A/P	163218	09/17/15	8,685.00	HILL-ROM COMPANY, INC
A/P	163219	09/17/15	791.19	HOBART SALES & SERVICE
A/P	163220	09/17/15	26.90	INDEPENDENCE MEDICAL
A/P	163221	09/17/15	5,949.00	RICOH USA, INC.
A/P	163222	09/17/15	1,036.95	WERFEN USA LLC
A/P	163223	09/17/15	704.00	INTEGRATED MEDICAL SYSTEMS
A/P	163224	09/17/15	3,433.72	J & J HEALTH CARE SYSTEMS, INC
A/P	163225	09/17/15	1,191.00	SHIRLEY KARNEI
A/P	163226	09/17/15	101.66	KRAMES
A/P	163227	09/17/15	49.44	CONMED LINVATEC
A/P	163228	09/17/15	177.63	LOWE'S HOME CENTERS INC
A/P	163229	09/17/15	796.68	BAYER HEALTHCARE
A/P	163230	09/17/15	3,067.57	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	163231	09/17/15	245.20	MEDIVATORS
A/P	163232	09/17/15	3,750.00	NUTRITION OPTIONS
A/P	163233	09/17/15	185.22	OFFICE DEPOT
A/P	163234	09/17/15	.00	VOIDED
A/P	163235	09/17/15	.00	VOIDED
A/P	163236	09/17/15	10,755.84	OWENS & MINOR
A/P	163237	09/17/15	220.00	PALACIOS BEACON
A/P	163238	09/17/15	3,400.00	PREMIER SLEEP DISORDERS CENTER
A/P	163239	09/17/15	3,096.08	PORT LAVACA WAVE
A/P	163240	09/17/15	140.73	POWER ELECTRIC
A/P	163241	09/17/15	351.11	CULLIGAN OF VICTORIA
A/P	163242	09/17/15	1,270.00	RADIOLOGY UNLIMITED, PA
A/P	163243	09/17/15	148.72	EVOQUA WATER TECHNOLOGIES LLC

BANK--CHECK CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	163244	09/17/15	11.47	SHERWIN WILLIAMS
A/P	163245	09/17/15	832.25	SIEMENS MEDICAL SOLUTIONS INC
A/P	163246	09/17/15	1,000.00	SOUTHEAST TEXAS HEALTH SYS
A/P	163247	09/17/15	491.74	SMITH & NEPHEW
A/P	163248	09/17/15	7,853.78	STRYKER ENDOSCOPY
A/P	163249	09/17/15	108.45	STERIS CORPORATION
A/P	163250	09/17/15	513.28	TLC STAFFING
A/P	163251	09/17/15	3,569.00	TEXAS HOSPITAL INS EXCHANGE
A/P	163252	09/17/15	137.90	TEXAS WIRED MUSIC INC
A/P	163253	09/17/15	144.40	TG
A/P	163254	09/17/15	5,121.44	UNUM LIFE INS CO OF AMERICA
A/P	163255	09/17/15	154.00	UNIFIRST HOLDINGS
A/P	163256	09/17/15	4,707.37	UNIFIRST HOLDINGS INC
A/P	163257	09/17/15	168.86	THE VICTORIA ADVOCATE
A/P	163258	09/17/15	560.00	VICTORIA RADIOWORKS, LTD
A/P	163259	09/17/15	260.00	WATERMARK GRAPHICS INC
A/P	163260	09/17/15	285.75	GRAINGER
A/P	163261	09/17/15	55.45	YOUNG PLUMBING CO
TOTALS:			340,507.19	



RUN DATE:09/21/15 MEMORIAL MEDICAL CENTER PAGE 1
TIME:15:15 CHECK REGISTER - Payable list GLCKREG
09/21/15 THRU 09/21/15

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	000672	09/21/15	1,242.43	MCKESSON - HEB Pharmacy
A/P	000673	09/21/15	581.08	MCKESSON - Walmart Pharmacy
A/P	000674	09/21/15	1,059.63	MCKESSON - CVS Pharmacy
TOTALS:			2,883.14	

340 B Prescription Expenses

APPROVED
BN

SEP 21 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Michael J. Pfeifer
Calhoun County Judge
Date: 9-23-15

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
9/21/2015

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	9,028.14	40,066.28	-	8,928.14	-	-	40,166.28	40,066.28

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 0614
Account # 4257

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	31,267.35	61,372.18	-	31,167.35	-	-	61,472.18	61,372.18
Crescent	4588	631,670.52	35,379.63	-	631,570.52	-	-	35,479.63	35,379.63
Broadmoor	4596	824,230.07	92,201.31	-	824,130.07	-	-	92,301.31	92,201.31
Fort Bend	4618	184,754.01	197.04	-	184,654.01	-	-	297.04	-
									188,953.12

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 0614
Account # [illegible]2922

Approved:

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.

Michael J. Pfeifer
Calhoun County Judge
Date: 9-23-15

APPROVED
SEP 21 2015
COUNTY AUDITOR

A:\NH Weekly Transfers\NH UPL Transfer Summary.xlsx

IBC Bank Activity
9/14/15 through 9/20/15

Ashford Gardens					Transfer-Out	Transfer-In	
9/14/2015	5025	4553	495	OUTGOING MONEY TRANSFER	8,928.14		ASHFORD HEALTH CARE CENTER LTD
9/14/2015	5025	4553	142	ACH CREDIT RECEIVED		7,938.39	Molina HC of TX Molina HC
9/14/2015	5025	4553	301	COMMERCIAL DEPOSIT		6,699.90	
9/18/2015	5025	4553	301	COMMERCIAL DEPOSIT		25,427.99	
					8,928.14	**40,066.28**	

Solera at West Houston					Transfer-Out	Transfer-In	
9/14/2015	5025	4561	301	COMMERCIAL DEPOSIT		22,748.40	
9/14/2015	5025	4561	495	OUTGOING MONEY TRANSFER	31,167.35		CANTEX HEALTH CARE CENTERS LLC
9/15/2015	5025	4561	142	ACH CREDIT RECEIVED		408.64	Molina HC of TX Molina HC
9/18/2015	5025	4561	301	COMMERCIAL DEPOSIT		38,215.14	
					31,167.35	**61,372.18**	

Crescent					Transfer-Out	Transfer-In	
9/14/2015	5025	4588	495	OUTGOING MONEY TRANSFER	631,570.52		CANTEX HEALTH CARE CENTERS III
9/14/2015	5025	4588	301	COMMERCIAL DEPOSIT		22,100.10	
9/15/2015	5025	4588	142	ACH CREDIT RECEIVED		3,790.73	Molina HC of TX Molina HC
9/18/2015	5025	4588	301	COMMERCIAL DEPOSIT		9,488.80	
					631,570.52	**35,379.63**	

Broadmoor					Transfer-Out	Transfer-In	
9/14/2015	5025	4596	142	ACH CREDIT RECEIVED		52,486.45	TEXAS COMPTROLLR INV-PAYMTS
9/14/2015	5025	4596	301	COMMERCIAL DEPOSIT		25,482.36	
9/14/2015	5025	4596	495	OUTGOING MONEY TRANSFER	824,130.07		CANTEX HEALTH CARE CENTERS III
9/18/2015	5025	4596	301	COMMERCIAL DEPOSIT		14,232.50	
					824,130.07	**92,201.31**	

Fort Bend					Transfer-Out	Transfer-In	
9/14/2015	5025	4618	495	OUTGOING MONEY TRANSFER	184,654.01		CANTEX HEALTH CARE CENTERS III
9/14/2015	5025	4618	301	COMMERCIAL DEPOSIT		197.04	
					184,654.01	**197.04**	

lio as of 09/21/2015 9:57:16 AM

Account Display
◉ Display By Account Type
○ Display By Asset/Liability

Commercial Checking Accounts

Account Name	Account Number	Today's Beginning Balance	Available Balance
Memorial Medical Center	3387	$325,069.79	$325,069.79
Memorial Medical Center	4553	$40,166.28	$40,166.28
Memorial Medical Center	4561	$61,472.18	$61,472.18
Memorial Medical Center	4588	$35,479.63	$35,479.63
Memorial Medical Center	4596	$92,301.31	$92,301.31
Memorial Medical Center	4618	$297.04	$297.04
Memorial Medical Center Operat	0301	$1,204,704.70	$1,235,135.24
County of Calhoun Indigent	1101	$3,221.86	$3,221.86
Totals		**$1,762,712.79**	**$1,793,143.33**

APPROVED
BY

SEP 23 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

09/22/2015 MEMORIAL MEDICAL CENTER 0
13:23 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 10/03/2015

Vendor#	Vendor Name				Class	Pay Code				
10950	ACUTE CARE INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	21927		09/21/20	08/20/20	09/20/20		1,400.00	0.00	0.00	1,400.00
		OUTSIDE SRV ER								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10950	ACUTE CARE INC				1,400.00	0.00	0.00	1,400.00
Vendor#	Vendor Name				Class	Pay Code				
A1705	ALIMED INC.				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	RPSV01962792		09/21/20	09/15/20	09/30/20		266.18	0.00	0.00	266.18
		SUPPLIES OCC THERAPY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1705	ALIMED INC.				266.18	0.00	0.00	266.18
Vendor#	Vendor Name				Class	Pay Code				
10938	BANK OF THE WEST									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	3613670		09/21/20	09/10/20	10/01/20		6,145.37	0.00	0.00	6,145.37
		LEASE & RENTAL PHARMACY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10938	BANK OF THE WEST				6,145.37	0.00	0.00	6,145.37
Vendor#	Vendor Name				Class	Pay Code				
C1010	CABLE ONE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20358		09/21/20	09/21/20	09/30/20		635.35	0.00	0.00	635.35
		OUTSIDE SRV IT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1010	CABLE ONE				635.35	0.00	0.00	635.35
Vendor#	Vendor Name				Class	Pay Code				
C1048	CALHOUN COUNTY				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20351		09/21/20	08/24/20	09/23/20		139.62	0.00	0.00	139.62
		TRANSPORTATION FUEL								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1048	CALHOUN COUNTY				139.62	0.00	0.00	139.62
Vendor#	Vendor Name				Class	Pay Code				
10988	CALHOUN SPORTS MEDICINE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20352		09/21/20	09/14/20	09/14/20		250.00	0.00	0.00	250.00
		PT SPONSOR FOR BREAST C. - Advertising - Logo on Shirt								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10988	CALHOUN SPORTS MEDICINE				250.00	0.00	0.00	250.00
Vendor#	Vendor Name				Class	Pay Code				
C2157	COOPER SURGICAL INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	3877919		09/11/20	08/31/20	09/30/20		105.87	0.00	0.00	105.87
		SUPPLIES SURGERY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net

		C2157	COOPER SURGICAL INC				105.87	0.00	0.00	105.87
Vendor#	Vendor Name				Class	Pay Code				
11079	DR. PETER ROJAS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	61166		09/21/20	09/15/20	09/15/20		355.63	0.00	0.00	355.63
		HEAD LAMP FOR OP CLINIC								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11079	DR. PETER ROJAS				355.63	0.00	0.00	355.63
Vendor#	Vendor Name				Class	Pay Code				
11118	DR. WILLIAM CROWLEY									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20357		09/21/20	09/17/20	09/17/20		3,309.13	0.00	0.00	3,309.13
		INCENTIVE PAYMENT DR CRC								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11118	DR. WILLIAM CROWLEY				3,309.13	0.00	0.00	3,309.13
Vendor#	Vendor Name				Class	Pay Code				
F1100	FEDERAL EXPRESS CORP.				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	5-154-98718		09/21/20	09/10/20	09/25/20		15.48	0.00	0.00	15.48
		FREIGHT EXP LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		F1100	FEDERAL EXPRESS CORP.				15.48	0.00	0.00	15.48
Vendor#	Vendor Name				Class	Pay Code				
10488	GE HEALTHCARE IITS USA CORP									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	030297283		09/21/20	09/04/20	10/03/20		805.27	0.00	0.00	805.27
		DUES & SUBCRIPTIONS OB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10488	GE HEALTHCARE IITS USA CORP				805.27	0.00	0.00	805.27
Vendor#	Vendor Name				Class	Pay Code				
H1850	HOSPIRA WORLDWIDE, INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	919890819		09/11/20	08/31/20	09/30/20		316.78	0.00	0.00	316.78
		CS INVENTORY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		H1850	HOSPIRA WORLDWIDE, INC				316.78	0.00	0.00	316.78
Vendor#	Vendor Name				Class	Pay Code				
11098	JERI DAVIS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20362		09/22/20	09/22/20	09/22/20		93.63	0.00	0.00	93.63
		FOOD SUPPLIES DIETARY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11098	JERI DAVIS				93.63	0.00	0.00	93.63
Vendor#	Vendor Name				Class	Pay Code				
11105	JERRY PICKETT									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20358		09/21/20	08/28/20	08/28/20		63.50	0.00	0.00	63.50
		OUSTIDE SRV CLINIC								
	20359		09/21/20	09/21/20	09/21/20		7.00	0.00	0.00	7.00
		INSPECTION FEE DODGE CAF								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11105	JERRY PICKETT				70.50	0.00	0.00	70.50

Vendor#	Vendor Name				Class	Pay Code				
K0530	KCI USA				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	25616835		09/21/20	06/22/20	07/22/20		398.82	0.00	0.00	398.82
		SUPPLIES PT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		K0530	KCI USA				398.82	0.00	0.00	398.82
Vendor#	Vendor Name				Class	Pay Code				
L1288	LANGUAGE LINE SERVICES				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	3659743		09/21/20	08/31/20	09/30/20		5.40	0.00	0.00	5.40
		OUTSIDE SRV ADMIN								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		L1288	LANGUAGE LINE SERVICES				5.40	0.00	0.00	5.40
Vendor#	Vendor Name				Class	Pay Code				
11099	MARLIN BUSINESS BANK									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	13528721		09/21/20	09/14/20	10/03/20		662.27	0.00	0.00	662.27
		LEASE & RENTAL IT Computer System								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11099	MARLIN BUSINESS BANK				662.27	0.00	0.00	662.27
Vendor#	Vendor Name				Class	Pay Code				
M2650	METLIFE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20359		09/21/20	09/21/20	10/01/20		258.52	0.00	0.00	258.52
		EMPLOYEE PERSONAL INS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2650	METLIFE				258.52	0.00	0.00	258.52
Vendor#	Vendor Name				Class	Pay Code				
10810	MMC EMPLOYEE BENEFIT PLAN									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20356		09/21/20	09/21/20	09/21/20		16,537.89	0.00	0.00	16,537.89
		EMPLOYEE INS CLAIMS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10810	MMC EMPLOYEE BENEFIT PLAN				16,537.89	0.00	0.00	16,537.89
Vendor#	Vendor Name				Class	Pay Code				
10536	MORRIS & DICKSON CO, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	7885786		09/21/20	09/11/20	09/21/20		73.73	0.00	0.00	73.73
		PHARMACY DRUGS								
	7887329		09/21/20	09/11/20	09/21/20		34.48	0.00	0.00	34.48
		PHARMACY DRUGS								
	7887327		09/21/20	09/11/20	09/21/20		329.89	0.00	0.00	329.89
		PHARMACY DRUGS								
	7887328		09/21/20	09/11/20	09/21/20		99.56	0.00	0.00	99.56
		PHARMACY DRUGS								
	7900513		09/21/20	09/15/20	09/25/20		120.38	0.00	0.00	120.38
		PHARMACY DRUGS								
	7900514		09/21/20	09/15/20	09/25/20		819.97	0.00	0.00	819.97
		PHARMACY DRUGS								
	7897842		09/21/20	09/15/20	09/25/20		463.35	0.00	0.00	463.35

	PHARMACY DRUGS							
7900515		09/21/20	09/15/20	09/25/20	222.33	0.00	0.00	222.33
	PHARMACY DRUGS							
7906458		09/21/20	09/16/20	09/26/20	2,345.56	0.00	0.00	2,345.56
	PHARMACY DRUGS							
7906457		09/21/20	09/16/20	09/26/20	188.97	0.00	0.00	188.97
	PHARMACY DRUGS							
7906640		09/21/20	09/16/20	09/26/20	27.24	0.00	0.00	27.24
	PHARMACY DRUGS							
5213		09/21/20	09/16/20	09/26/20	-3.02	0.00	0.00	-3.02
	PHARMACY CREDIT							
7906459		09/21/20	09/16/20	09/26/20	13.76	0.00	0.00	13.76
	PHARMACY DRUGS							
7908268		09/21/20	09/17/20	09/27/20	1,304.45	0.00	0.00	1,304.45
	PHARMACY DRUGS							
7911073		09/21/20	09/17/20	09/27/20	24.20	0.00	0.00	24.20
	PHARMACY DRUGS							
7911075		09/21/20	09/17/20	09/27/20	1,290.42	0.00	0.00	1,290.42
	PHARMACY DRUGS							
7911074		09/21/20	09/17/20	09/27/20	81.04	0.00	0.00	81.04
	PHARMACY DRUGS							
7916063		09/21/20	09/18/20	09/28/20	24.38	0.00	0.00	24.38
	PHARMACY DRUGS							
7916249		09/21/20	09/18/20	09/28/20	8.66	0.00	0.00	8.66
	PHARMACY DRUGS							
7916247		09/21/20	09/18/20	09/28/20	251.27	0.00	0.00	251.27
	PHARMACY DRUGS							
7916248		09/21/20	09/18/20	09/28/20	1,011.13	0.00	0.00	1,011.13
	PHARMACY DRUGS							
7922896		09/22/20	09/21/20	10/01/20	1,970.24	0.00	0.00	1,970.24
	PHARMACY DRUGS							
7922895		09/22/20	09/21/20	10/01/20	134.45	0.00	0.00	134.45
	PHARMACY DRUGS							
7922894		09/22/20	09/21/20	10/01/20	95.85	0.00	0.00	95.85
	PHARMACY DRUGS							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC			10,932.29	0.00	0.00	10,932.29

Vendor#	Vendor Name			Class	Pay Code				
OM425	OWENS & MINOR								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
2006345607		09/09/20	05/26/20	06/25/20			89.71	0.00	0.00	89.71
	CS INVENTORY									
2009534916		09/11/20	09/03/20	10/03/20			769.77	0.00	0.00	769.77
	CS INVENTORY									
2009454259		09/21/20	09/01/20	10/01/20			-7.31	0.00	0.00	-7.31
	CREDIT CS INVENTORY									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	OM425	OWENS & MINOR					852.17	0.00	0.00	852.17

Vendor#	Vendor Name			Class	Pay Code				
11069	PABLO GARZA								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20353		09/21/20	09/15/20	09/15/20			1,177.50	0.00	0.00	1,177.50

OUTSIDE SRV CLINIC 8/31/15 to 9/15/15 39.25 hrs

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11069	PABLO GARZA ✓	1,177.50	0.00	0.00	1,177.50

Vendor#	Vendor Name	Class	Pay Code
10204	PHARMEDIUM SERVICES LLC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
A1402496 ✓		09/14/20	09/04/20	10/03/20			295.60	0.00	0.00	295.60 ✓

PHARMACY DRUGS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10204	PHARMEDIUM SERVICES LLC ✓	295.60	0.00	0.00	295.60

Vendor#	Vendor Name	Class	Pay Code
10326	PRINCIPAL LIFE ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20361		09/21/20	09/17/20	10/01/20			2,073.36	0.00	0.00	2,073.36 ✓

EMPLOYEE PERSONAL INS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10326	PRINCIPAL LIFE ✓	2,073.36	0.00	0.00	2,073.36

Vendor#	Vendor Name	Class	Pay Code
11117	SANDRA DURHAM		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20354		09/21/20	09/16/20	09/15/20			195.65	0.00	0.00	195.65 ✓

TRAVEL EXP ER 9/11-13/2015 TNCC (Beeville TX)

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11117	SANDRA DURHAM ✓	195.65	0.00	0.00	195.65

Vendor#	Vendor Name	Class	Pay Code
10936	SIEMENS FINANCIAL SERVICES ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
4512941 ✓		09/21/20	09/06/20	09/24/20			1,333.33	0.00	0.00	1,333.33 ✓

LEASE & RENTAL LAB DX W A-40 Plus System

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
S2270	SMILE MAKERS ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
7583485 ✓		09/21/20	08/27/20	09/26/20			48.92	0.00	0.00	48.92 ✓

SUPPLIES CLINIC

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2270	SMILE MAKERS ✓	48.92	0.00	0.00	48.92

Vendor#	Vendor Name	Class	Pay Code
10845	STAPLES ADVANTAGE ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
8035393534 ✓		09/21/20	08/01/20	08/31/20			3,087.00	0.00	0.00	3,087.00 ✓

FURNITURE FOR HOSPITALIS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10845	STAPLES ADVANTAGE ✓	3,087.00	0.00	0.00	3,087.00

Vendor#	Vendor Name	Class	Pay Code
10333	SUNTRUST EQUIPMENT FINANCE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1562398		09/21/20	09/11/20	09/11/20			907.56	0.00	0.00	907.56 ✓

LATE CHARGES END OF CON

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net

	10333	SUNTRUST EQUIPMENT FINANCE				907.56	0.00	0.00	907.56
Vendor#	Vendor Name				Class	Pay Code			
S2951	SYSCO FOOD SERVICES OF				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	509032506 ✓		09/21/20	09/03/20	09/23/20		628.13	0.00	0.00	628.13 ✓
		FOOD SUPPLIES DIETARY ✓								
	509102494 ✓		09/21/20	09/10/20	09/30/20		324.73	0.00	0.00	324.73 ✓
		FOOD SUPPLIES DIETARY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S2951	SYSCO FOOD SERVICES OF				952.86	0.00	0.00	952.86
Vendor#	Vendor Name				Class	Pay Code				
T2063	TEXAS MEDICAID & HEALTHCARE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net OK
	20360		09/21/20	09/02/20	09/02/20		0	0.00	0.00	3,606.00 ✓
		MEDICAID AUDIT SETTLEMEN 2012								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		T2063	TEXAS MEDICAID & HEALTHCARE ✓				0	0.00	0.00	3,606.00
Vendor#	Vendor Name				Class	Pay Code				
10808	TEXAS PRESCRIPTION PROGRAM									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20355		09/21/20	09/18/20	09/18/20		36.00	0.00	0.00	36.00 ✓
		PRESCIPTION PADS DR TRUong 45cts/100set								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10808	TEXAS PRESCRIPTION PROGRAM ✓				36.00	0.00	0.00	36.00
Vendor#	Vendor Name				Class	Pay Code				
10954	TEXAS PRN ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	011226 ✓		09/21/20	08/08/20	09/07/20		~~3,448.50~~	0.00	0.00	~~3,448.50~~ 2736.00
		CONTRACT NURSING 8/4, 8/5, 8/6 8/8/15 12x4=48hrs								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10954	TEXAS PRN ✓				~~3,448.50~~	0.00	0.00	~~3,448.50~~ 2736.00
Vendor#	Vendor Name				Class	Pay Code				
11067	TRIZETTO PROVIDER SOLUTIONS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	35FK091500 ✓		09/21/20	09/01/20	10/01/20		495.00	0.00	0.00	495.00 ✓
		OUTSIDE SRV CLINIC Smart Solutions 9/2015 (5)								
	3A3X091500 ✓		09/21/20	09/01/20	10/01/20		99.00	0.00	0.00	99.00 ✓
		OUTSIDE SRV SPECIALTY CLI Smart Solutions 9/2015 (one)								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11067	TRIZETTO PROVIDER SOLUTIONS ✓				594.00	0.00	0.00	594.00
Vendor#	Vendor Name				Class	Pay Code				
10172	US FOOD SERVICE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	4726066 ✓		09/21/20	08/03/20	08/23/20		3,009.49	0.00	0.00	3,009.49 ✓
		FOOD SUPPLIES DIETARY ✓								
	4726068 ✓		09/21/20	08/03/20	08/23/20		49.11	0.00	0.00	49.11 ✓
		FOOD SUPPLIES DIETARY ✓								
	5318719 ✓		09/21/20	09/03/20	09/23/20		2,164.66	0.00	0.00	2,164.66 ✓
		FOOD SUPPLIES DIETARY ✓								
	5383200 ✓		09/21/20	09/07/20	09/27/20		2,605.83	0.00	0.00	2,605.83 ✓
		FOOD SUPPLIES DIETARY ✓								
	5441364 ✓		09/21/20	09/10/20	09/30/20		2,089.73	0.00	0.00	2,089.73 ✓

	FOOD SUPPLIES DIETARY							
	5441359	09/21/20	09/10/20	09/30/20	18.35	0.00	0.00	18.35
	FOOD SUPPLIES DIETARY							
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
	10172	US FOOD SERVICE			9,937.17	0.00	0.00	9,937.17

Vendor#	Vendor Name	Class	Pay Code
V0555	VERIZON SOUTHWEST	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
55267130915		09/21/20	09/07/20	10/02/20			1,372.83	0.00	0.00	1,372.83
	TELEPHONE EXP Took off Sales Tax + Federal Excise Tax (120.22)									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	V0555	VERIZON SOUTHWEST					1,372.83	0.00	0.00	1,372.83

Vendor#	Vendor Name	Class	Pay Code
X0100	X-RITE INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
861744		09/21/20	06/18/20	07/18/20			195.00	0.00	0.00	195.00
	OUTSIDE SRV MAMMO unit 331									
863645		09/21/20	07/01/20	08/01/20			320.00	0.00	0.00	320.00
	OUTSIDE SRV MAMMO									
863888		09/21/20	07/02/20	08/02/20			420.00	0.00	0.00	420.00
	OUTSIDE SRV MAMMO									
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	X0100	X-RITE INC					935.00	0.00	0.00	935.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	73,557.45	0.00	0.00	73,557.45

Pg 2 correction (3,309.13)

Pg 6 correction (Overstated hours) (3,448.50) + 2,736.00

69,535.82

Michael J. Pfeifer
Calhoun County Judge
Date: 9-28-15

APPROVED
ON
SEP 23 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CKS# 163262 to #163298

RUN DATE:09/23/15 MEMORIAL MEDICAL CENTER PAGE 1
TIME:13:30 CHECK REGISTER GLCKREG
09/23/15 THRU 09/23/15

BANK	CHECK NUMBER	DATE	AMOUNT	PAYEE
A/P	163262	09/23/15	9,937.17	US FOOD SERVICE
A/P	163263	09/23/15	295.60	PHARMEDIUM SERVICES LLC
A/P	163264	09/23/15	2,073.36	PRINCIPAL LIFE
A/P	163265	09/23/15	907.56	SUNTRUST EQUIPMENT FINANCE
A/P	163266	09/23/15	805.27	GE HEALTHCARE IITS USA CORP
A/P	163267	09/23/15	.00	VOIDED
A/P	163268	09/23/15	10,932.29	MORRIS & DICKSON CO, LLC
A/P	163269	09/23/15	36.00	TEXAS PRESCRIPTION PROGRAM
A/P	163270	09/23/15	16,537.89	MMC EMPLOYEE BENEFIT PLAN
A/P	163271	09/23/15	3,087.00	STAPLES ADVANTAGE
A/P	163272	09/23/15	1,333.33	SIEMENS FINANCIAL SERVICES
A/P	163273	09/23/15	6,145.37	BANK OF THE WEST
A/P	163274	09/23/15	1,400.00	ACUTE CARE INC
A/P	163275	09/23/15	2,736.00	TEXAS PRN
A/P	163276	09/23/15	250.00	CALHOUN SPORTS MEDICINE
A/P	163277	09/23/15	594.00	TRIZETTO PROVIDER SOLUTIONS
A/P	163278	09/23/15	1,177.50	PABLO GARZA
A/P	163279	09/23/15	355.63	DR. PETER ROJAS
A/P	163280	09/23/15	93.63	JERI DAVIS
A/P	163281	09/23/15	662.27	MARLIN BUSINESS BANK
A/P	163282	09/23/15	70.50	JERRY PICKETT
A/P	163283	09/23/15	195.65	SANDRA DURHAM
A/P	163284	09/23/15	266.18	ALIMED INC.
A/P	163285	09/23/15	635.35	CABLE ONE
A/P	163286	09/23/15	139.62	CALHOUN COUNTY
A/P	163287	09/23/15	105.87	COOPER SURGICAL INC
A/P	163288	09/23/15	15.48	FEDERAL EXPRESS CORP.
A/P	163289	09/23/15	316.78	HOSPIRA WORLDWIDE, INC
A/P	163290	09/23/15	398.82	KCI USA
A/P	163291	09/23/15	5.40	LANGUAGE LINE SERVICES
A/P	163292	09/23/15	258.52	METLIFE
A/P	163293	09/23/15	852.17	OWENS & MINOR
A/P	163294	09/23/15	48.92	SMILE MAKERS
A/P	163295	09/23/15	952.86	SYSCO FOOD SERVICES OF
A/P	163296	09/23/15	3,606.00	TEXAS MEDICAID & HEALTHCARE
A/P	163297	09/23/15	1,372.83	VERIZON SOUTHWEST
A/P	163298	09/23/15	935.00	X-RITE INC
TOTALS:			69,535.82	

APPROVED
ON
SEP 23 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

IBC BANK
We Do More

September 2015 Statement

Open Date: 08/06/2015 Closing Date: 09/03/2015

Visa® Business Card
MEMORIAL MEDICAL CNT
JERRY L PICKETT

Cardmember Service
BUS 30 ELN 78 3

New Balance	**$1,582.28**
Minimum Payment Due	**$16.00**
Payment Due Date	**10/01/2015**

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay up to a $39.00 Late Fee and your APRs may be increased up to the Penalty APR of 28.99%.

Activity Summary

Previous Balance	+	$2,759.44
Payments	-	$2,547.96CR
Other Credits		$0.00
Purchases	+	$1,370.80
Balance Transfers		$0.00
Advances		$0.00
Other Debits		$0.00
Fees Charged		$0.00
Interest Charged		$0.00
New Balance	=	**$1,582.28**
Past Due		**$0.00**
Minimum Payment Due		**$16.00**
Credit Line		$10,000.00
Available Credit		$8,417.72
Days in Billing Period		29

Michael J. Pfeifer
Calhoun County Judge
Date: 9-28-15

MMC will Pay By Phone

$1,370.80
+ 211.48
1,582.28

APPROVED
BY

SEP 23 2015

COUNTY AUDITOR

Payment Options:

Mail payment coupon with a check

Pay online at [illegible] Pay by phone

Please detach and send coupon with check payable to: Cardmember Service

IBC BANK
We Do More

Account Number	
Payment Due Date	10/01/2015
New Balance	$1,582.28
Minimum Payment Due	$16.00

Amount Enclosed $_____

. to pay by phone
. to change your address

MEMORIAL MEDICAL CNT
JERRY L PICKETT
202 S ANN ST
PORT LAVACA TX 77979-4204

Cardmember Service
P.O. Box 790408
St. Louis, MO 63179-0408

IBC BANK
We Do More

September 2015 Statement 08/06/2015 - 09/03/2015

MEMORIAL MEDICAL CNT
JERRY L PICKETT

Cardmember Service

Important Messages

Paying Interest: You have a 24 to 30 day interest-free period for Purchases provided you have paid your previous balance in full by the Payment Due Date shown on your monthly Account statement. In order to avoid additional INTEREST CHARGES on Purchases, you must pay your new balance in full by the Payment Due Date shown on the front of your monthly Account statement.

There is no interest-free period for transactions that post to the Account as Advances or Balance Transfers except as provided in any Offer Materials. Those transactions are subject to interest from the date they post to the Account until the date they are paid in full.

Cut expenses instead of coupons with Visa SavingsEdge. You'll spend less time looking for deals and more time getting your business to its next big moment. Just enroll your eligible Visa Business Card for free and use it to make qualifying purchases at participating merchants. Then watch your savings add up as statement credits. For complete details and to enroll your card for FREE, visit visasavingsedge.com.

Transactions

Payments and Other Credits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
08/31	08/31		PAYMENT THANK YOU	$2,547.96CR	
			TOTAL THIS PERIOD	$2,547.96CR	

Purchases and Other Debits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
08/25	08/24	1537	CULLIGAN 361-5755762 TX Solar Salt	$380.80 ✓	✓
08/27	08/26	6049	TRIZETTO CORPORATION SAINT LOUIS MO mmcclinic	$990.00 ✓	✓
			TOTAL THIS PERIOD	$1,370.80	

Reimb from Reyes- conference Meals 211.48 - Reimb made to mmc

2015 Totals Year-to-Date	1,582.28
Total Fees Charged in 2015	$0.00
Total Interest Charged in 2015	$0.00

Company Approval *(This area for use by your company)*

Signature/Approval: _____ Accounting Code: _____

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Cardmember Service

Date: 9/21/15

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required | Expense # | Department | Deliver To

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	—		Culligan - Solar Salt - Marlin Sayers			380.80 ✓
2	—		TRIzetto - Memorial Medical		*	990.00 ✓
3			Clinic			1,370.80
4			* Inv 35FK071500 7/1/15	495.00		
5		Company Waived late fee	* Inv 35FK081500 8/1/15	5.00 late fee		Did Not Pay
6			* Inv 35FK081500 8/1/15	495.00		
7						
8						
9		- per Vicki				
10						

APPROVED BY SEP 23 2015 COUNTY AUDITOR CALHOUN COUNTY, TEXAS

Est. Freight _____ Est. Total Cost _____ TOTAL COST _____

NOTES:

Charges made on Jenny Pickett's credit card XXX 5568

Contact: | Date:

Quoted By:

Buyer: | E.T.A.

Dept. Director _____

Dir. Nursing _____

Adm.Dir. Clinical Service _____

CFO _____

Administrator _____

RECEIPT

MEMORIAL MEDICAL CENTER
815 N VIRGINIA
PORT LAVACA, TX 779793025

DATE	RECEIPT NUMBER	TYPE OF PAYMENT	PAYOR NAME
09/23/15	413845	PAYMENT-CHECK	ROLANDO REYES

ACCOUNT NO.	ACCOUNT NAME	AMOUNT	OFFICE USE
10250000	OTHER DEPOSITS -R	211.48	10250000

APPROVED
BY
SEP 23 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reyes Reimb
Trio Meals
from conference

211.48

THIS IS YOUR RECEIPT
PLEASE KEEP FOR YOUR RECORDS

MRP

IBC BANK
We Do More

September 2015 Statement

Open Date: 08/06/2015 Closing Date: 09/03/2015

Visa® Business Card
MEMORIAL MEDICAL CNT
JASON W ANGLIN

Cardmember Service
BUS 30 ELN 78 3

New Balance	**$3,286.52**
Minimum Payment Due	**$33.00**
Payment Due Date	**10/01/2015**

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay up to a $39.00 Late Fee and your APRs may be increased up to the Penalty APR of 28.99%.

Activity Summary

Previous Balance	+	$2,588.54
Payments	-	$2,588.54CR
Other Credits		$0.00
Purchases	+	$3,286.52
Balance Transfers		$0.00
Advances		$0.00
Other Debits		$0.00
Fees Charged		$0.00
Interest Charged		$0.00
New Balance	=	**$3,286.52**
Past Due		**$0.00**
Minimum Payment Due		**$33.00**
Credit Line		$10,000.00
Available Credit		$6,713.48
Days in Billing Period		29

Michael J. Pfeifer
Calhoun County Judge
Date: 9-23-15

$3,286.52 ✓

MMC will Pay By Phone

APPROVED ON
SEP 23 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Payment Options:

Mail payment coupon with a check

Pay online at r

Pay by phone 1.

Please detach and send coupon with check payable to: Cardmember Service

IBC BANK
We Do More

. to pay by phone
. to change your address

Account Number	
Payment Due Date	10/01/2015
New Balance	$3,286.52
Minimum Payment Due	$33.00

Amount Enclosed $_____

MEMORIAL MEDICAL CNT
JASON W ANGLIN
202 S ANN ST # A
PORT LAVACA TX 77979-4204

Cardmember Service
P.O. Box 790408
St. Louis, MO 63179-0408

MEMORIAL MEDICAL CNT
JASON W ANGLIN

Cardmember Service

Important Messages

Paying Interest: You have a 24 to 30 day interest-free period for Purchases provided you have paid your previous balance in full by the Payment Due Date shown on your monthly Account statement. In order to avoid additional INTEREST CHARGES on Purchases, you must pay your new balance in full by the Payment Due Date shown on the front of your monthly Account statement.

There is no interest-free period for transactions that post to the Account as Advances or Balance Transfers except as provided in any Offer Materials. Those transactions are subject to interest from the date they post to the Account until the date they are paid in full.

Cut expenses instead of coupons with Visa SavingsEdge. You'll spend less time looking for deals and more time getting your business to its next big moment. Just enroll your eligible Visa Business Card for free and use it to make qualifying purchases at participating merchants. Then watch your savings add up as statement credits. For complete details and to enroll your card for FREE, visit visasavingsedge.com.

Transactions

Payments and Other Credits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
08/26	08/25	0189	PAYMENT THANK YOU	$2,588.54CR	
			TOTAL THIS PERIOD	$2,588.54CR	

Purchases and Other Debits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
08/17	08/14	6262	SOUTHWES 5262135019878 800-435-9792 TX BETHANY/DANETT 09/21/15 HOUSTN HOBBY TO NASHVILLE Airline fees for Training/Conference NASHVILLE TO HOUSTN HOBBY	$377.00 ✓	
08/21	08/19	2869	HERRIN PUBLISHING PART 610-2404918 PA	$675.00 ✓	Registration-S. Ruddick
08/21	08/20	0118	SQ *CPSI Fairhope AL DSalinas/M Sutherland	$125.00 ✓	CPSI Registration
08/24	08/21	7873	HILTON HOTELS NASSAU B HOUSTON TX N. Garner 08/19/15 FOR 02 NIGHTS FOLIO: 0015012208210	$266.28 ✓	Hotel - Conference/Trng
08/24	08/18	0385	SHELLFISH SPORTSBAR & PORT LAVACA TX Dinner/Social	$600.62 ✓	9 Drs/2 spouses/4 Admin
08/24	08/20	0669	SOUTHWES 5260672874905 800-435-9792 TX Airline SALINAS/DANIEL 08/20/15 Fees for Trng/Conference DALLAS LOVE TO DALLAS LOVE DALLAS LOVE TO AUSTIN	$526.02 ✓	
08/27	08/26	2232	NPDB NPDB.HRSA.GOV 800-767-6732 VA	$3.00 ✓	1 physician
08/27	08/26	2315	NPDB NPDB.HRSA.GOV 800-767-6732 VA	$6.00 ✓	2 physicians
08/28	08/26	3450	HOLIDAY INN EXP CONROE 936-7885200 TX M. Esclante 08/24/15 Indigent Hc Seminar FOLIO: 11070922	$372.80 ✓	Hotel - Trng/Conference
08/31	08/28	4335	AMA PROFILES 800-665-2882 IL	$42.00 ✓	1 Doctor
08/31	08/28	4607	NPDB NPDB.HRSA.GOV 800-767-6732 VA	$3.00 ✓	1 Doctor
09/01	08/28	1309	AT&T EXECUTIVE16199200 AUSTIN TX Roshanda Gray 08/26/15 FOLIO: 22038438	$289.80 ✓	Hotel - Conference
			TOTAL THIS PERIOD	$3,286.52	

(1)

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Cardmember Services

Date: 9/15/15

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required | Expense # | Department | Deliver To

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	—		Southwest - Flight for Danette			377.00 ✓
2			Bethany to Nashville, TN			
3			(Physician Practice Mgmt Forum)			
4	—		Herrin Publishing - Registration			675.00 ✓
5			fee for Sandy Ruddick, OR			
6	—		SQ CPSI - Registration for			125.00 ✓
7			MMC - 2015 Best Practices Conf.			
8			(Danielle Salinas + Marissa Sutherland)			
9	—		Hilton Hotels - for Nadine Garner -			266.28 ✓
10		Texas Reportable	Adverse Event - by the State			

Est. Freight _____ Est. Total Cost _____ TOTAL COST 1,443.28

NOTES:

Charges made to Mr. Angeins credit card XXX 4378

Contact: | Date:

Quoted By:

Buyer: | E.T.A.

APPROVED BY
SEP 23 2015
SECURITY DIRECTOR

Dept. Director _____

Dir. Nursing _____

Adm. Dir. Clinical Service _____

CFO _____

Administrator _____

(2)

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Cardmember Services

Date: 9/15/15

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required | Expense # | Department | Deliver To

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	-		Shellfish Drill - Physicians/Admin			600.62 ✓
2			Dinner/Social (9 Doctors/2 spouses/4 Admin)			
3	-		Southwest - Flights for			526.02 ✓
4			Danielle Salinas & Marissa			
5			Sutherland (2015 Best Practice Conf. - Chicago)			
6	-		NPDB - 1 Physician			3.00 ✓
7	-		NPDB - 2 Physicians			6.00 ✓
8	-		Holiday Inn Express - Conroe			372.80 ✓
9			Hotel expense for Monica Escalante			
10	-		Diligent Healthcare Seminar			

Est. Freight _____ Est. Total Cost _____ TOTAL COST 1508.44

NOTES:

Charges made to Jason's credit card XXX 4378

APPROVED BY

SEP 23 2015

COUNTY AUDITOR CALHOUN COUNTY, TEXAS

Contact: | Date:

Quoted By:

Buyer: | E.T.A.

Dept. Director _____

Dir. Nursing _____

Adm.Dir. Clinical Service _____

CFO _____

Administrator _____

(3)

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Vendor Name: Cardmember Services

Date: 9/15/15

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required | Expense # | Department | Deliver To

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	-		AMA Profiles - 1 Doctor			42.00 ✓
2	-		NPDB - 1 Doctor			3.00 ✓
3	-		AT&T Executive - Hotel			289.80 ✓
4			expense for Roshanda Gray			
5						
6						
7						
8						
9						
10						

Est. Freight _____ Est. Total Cost _____ TOTAL COST 334.80 pg 3
1,508.44 pg 2
1,443.28 pg 1
3,286.52 ✓

NOTES:

charges made to Jason's Credit card xxx 4378

APPROVED BY

SEP 23 2015

COUNTY AUDITOR CALHOUN COUNTY, TEXAS

Contact:	Date:
Quoted By:	
Buyer:	E.T.A.

Dept. Director _____

Dir. Nursing _____

Adm.Dir. Clinical Service _____

CFO _____

Administrator _____

RUN DATE:09/24/15 MEMORIAL MEDICAL CENTER CRT#019 PAGE 1
TIME:14:24 EDIT LIST FOR BATCH 019 4500 TRANSACTION SEQUENCE GLEDIT

SEQ.	ACCOUNT NUMBER	A.H.A. NUMBER	TRANS DATE	JOURNAL	AMOUNT	SUB-LED	REFERENCE	MEMO	G.L. ACCOUNT DESCRIPTION
1	20000000		09/24/15	PJ	11.99CR	11120	20368	JAYNE CANALES	INV DT=09/17/15 DUE=091715
2	40220038		09/24/15	PJ	11.99	11120	20368	JAYNE CANALES	SUPPLIES GENERAL -PHARM
	60220038					22240	40736		

- Reimb Meds for patient See Attached

-R E C A P-

JOURNAL	YRMO	COUNT	DEBIT	CREDIT		
PJ	1509	2	11.99	11.99		
	TOTAL	2	11.99	11.99	A/P TOTAL	11.99

ACCOUNT TOTAL RECAP ON NEXT PAGE

APPROVED
ON
SEP 24 2015 CK# 163299

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Michael J. Pfeifer
Calhoun County Judge
Date: 9-28-15

11120

20368

MEMORIAL MEDICAL CENTER

CHECK REQUEST

Jayne Canales

Date Requested: 9/17/15

PAYEE

APPROVED ON SEP 24 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Voucher Check

AMOUNT 11.99

G/L NUMBER: 40220038

EXPLANATION: Dr Bunnell requested Prochlorperazine 150 mg. Off formulary wanted it given now. Drug store only would fill with 8 now 5 pills ordered by Dr Bunnell with script. Jayne paid for it to give now dose

REQUESTED BY: C Mendez

AUTHORIZED BY: Richard S. Ing 9-23-15

8

RUN DATE:09/24/15 MEMORIAL MEDICAL CENTER PAGE 1
TIME:14:31 CHECK REGISTER GLCKREG
09/24/15 THRU 09/24/15

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

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	163299	09/24/15	11.99	JAYNE CANALES
TOTALS:			11.99	

APPROVED
ON
SEP 24 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE:09/28/15 MEMORIAL MEDICAL CENTER PAGE 1
TIME:15:46 CHECK REGISTER AND Payable List GLCKREG
09/28/15 THRU 09/28/15

BANK--CHECK-- CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	000675	09/28/15	1,188.65	MCKESSON - HEB Pharmacy
A/P	000676	09/28/15	1,411.69	MCKESSON - Walmart Pharmacy
A/P	000677	09/28/15	176.30	MCKESSON - CVS Pharmacy
TOTALS:			2,776.64	

340 B Prescription Expenses

APPROVED
ON

SEP 28 2015

BY
CALHOUN COUNTY AUDITOR

Michael J. Pfeifer
Calhoun County Judge
Date: 10-9-15

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
9/28/2015

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	40,166.28	379,660.93	-	40,066.58	-	-	379,760.63	379,660.63

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA)0614
Account # 4257

Nursing Home	IBC Account Number	Previous Balance	ACH Transfer-In	IGT Transfer-In	Transfer-Out	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	61,472.18	835,584.54	-	61,372.18	-	-	835,684.54	835,584.54
Crescent	4588	35,479.63	575,719.43	-	35,379.63	-	-	575,819.43	575,719.43
Broadmoor	4596	92,301.31	773,794.18	-	92,201.31	-	-	773,894.18	773,794.18
Fort Bend	4618	297.04	253,511.54	-	-	-	-	253,808.58	253,708.58
									2,438,806.73

Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoar:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA)0614
Account #: 2922

Approved:

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.

Michael J. Pfeifer
Calhoun County Judge
Date: 10-9-15

APPROVED
SEP 28 2015
COUNTY AUDITOR

A:\NH Weekly Transfers\NH UPL Transfer Summary.xlsx

IBC Bank Activity
9/21/15 through 9/27/15

Ashford Gardens					Transfer-Out	Transfer-In	
9/22/2015	5025	4553	142	ACH CREDIT RECEIVED		16,575.62	Molina HC of TX Molina HC
9/22/2015	5025	4553	142	ACH CREDIT RECEIVED		21,685.32	Molina HC of TX Molina HC
9/23/2015	5025	4553	142	ACH CREDIT RECEIVED		492.88	Molina HC of TX Molina HC
9/23/2015	5025	4553	142	ACH CREDIT RECEIVED		3,342.10	AGING DISAB SVCS HCCLAIMPMT
9/23/2015	5025	4553	195	INCOMING MONEY TRANSFER		325,429.67	CANTEX HEALTH CARE CENTERS LLC
9/24/2015	5025	4553	495	OUTGOING MONEY TRANSFER	40,066.28		ASHFORD HEALTH CARE CENTER LTD
9/25/2015	5025	4553	142	ACH CREDIT RECEIVED		12,135.34	AGING DISAB SVCS HCCLAIMPMT
					40,066.28	**379,660.93**	

Solera at West Houston					Transfer-Out	Transfer-In	
9/22/2015	5025	4561	142	ACH CREDIT RECEIVED		8,054.29	Molina HC of TX Molina HC
9/22/2015	5025	4561	142	ACH CREDIT RECEIVED		3,276.51	Molina HC of TX Molina HC
9/22/2015	5025	4561	142	ACH CREDIT RECEIVED		2,454.99	Molina HC of TX Molina HC
9/23/2015	5025	4561	195	INCOMING MONEY TRANSFER		817,260.60	CANTEX HEALTH CARE CENTERS III
9/24/2015	5025	4561	495	OUTGOING MONEY TRANSFER	61,372.18		CANTEX HEALTH CARE CENTERS LLC
9/25/2015	5025	4561	142	ACH CREDIT RECEIVED		1,876.27	Molina HC of TX Molina HC
9/25/2015	5025	4561	142	ACH CREDIT RECEIVED		1,037.81	Molina HC of TX Molina HC
9/25/2015	5025	4561	142	ACH CREDIT RECEIVED		1,624.07	Molina HC of TX Molina HC
					61,372.18	**835,584.54**	

Crescent					Transfer-Out	Transfer-In	
9/22/2015	5025	4588	142	ACH CREDIT RECEIVED		5,181.84	Molina HC of TX Molina HC
9/23/2015	5025	4588	195	INCOMING MONEY TRANSFER		565,455.59	CANTEX HEALTH CARE CENTERS III
9/24/2015	5025	4588	495	OUTGOING MONEY TRANSFER	35,379.63		CANTEX HEALTH CARE CENTERS III
9/24/2015	5025	4588	142	ACH CREDIT RECEIVED		5,082.00	Molina HC of TX Molina HC
					35,379.63	**575,719.43**	

Broadmoor					Transfer-Out	Transfer-In	
9/23/2015	5025	4596	142	ACH CREDIT RECEIVED		415.25	AGING DISAB SVCS HCCLAIMPMT
9/24/2015	5025	4596	495	OUTGOING MONEY TRANSFER	92,201.31		CANTEX HEALTH CARE CENTERS III
9/24/2015	5025	4596	195	INCOMING MONEY TRANSFER		773,378.93	CANTEX HEALTH CARE CENTERS III
					92,201.31	**773,794.18**	

Fort Bend					Transfer-Out	Transfer-In	
9/22/2015	5025	4618	142	ACH CREDIT RECEIVED		34,767.11	Molina HC of TX Molina HC
9/23/2015	5025	4618	142	ACH CREDIT RECEIVED		1,581.63	Molina HC of TX Molina HC
9/23/2015	5025	4618	195	INCOMING MONEY TRANSFER		213,980.54	CANTEX HEALTH CARE CENTERS III
9/23/2015	5025	4618	142	ACH CREDIT RECEIVED		2,759.36	AGING DISAB SVCS HCCLAIMPMT
9/25/2015	5025	4618	142	ACH CREDIT RECEIVED		422.90	Molina HC of TX Molina HC
					0.00	**253,511.54**	

+ 197.04 Deposit 9/14/15 (See attached)

253,708.58

IBC Bank Activity
9/14/15 through 9/20/15

Ashford Gardens					Transfer-Out	Transfer-In	
9/14/2015	5025	4553	495	OUTGOING MONEY TRANSFER	8,928.14		ASHFORD HEALTH CARE CENTER LTD
9/14/2015	5025	4553	142	ACH CREDIT RECEIVED		7,938.39	Molina HC of TX Molina HC
9/14/2015	5025	4553	301	COMMERCIAL DEPOSIT		6,699.90	
9/18/2015	5025	4553	301	COMMERCIAL DEPOSIT		25,427.99	
					8,928.14	40,066.28	

Solera at West Houston					Transfer-Out	Transfer-In	
9/14/2015	5025	4561	301	COMMERCIAL DEPOSIT		22,748.40	
9/14/2015	5025	4561	495	OUTGOING MONEY TRANSFER	31,167.35		CANTEX HEALTH CARE CENTERS LLC
9/15/2015	5025	4561	142	ACH CREDIT RECEIVED		408.64	Molina HC of TX Molina HC
9/18/2015	5025	4561	301	COMMERCIAL DEPOSIT		38,215.14	
					31,167.35	61,372.18	

Crescent					Transfer-Out	Transfer-In	
9/14/2015	5025	4588	495	OUTGOING MONEY TRANSFER	631,570.52		CANTEX HEALTH CARE CENTERS III
9/14/2015	5025	4588	301	COMMERCIAL DEPOSIT		22,100.10	
9/15/2015	5025	4588	142	ACH CREDIT RECEIVED		3,790.73	Molina HC of TX Molina HC
9/18/2015	5025	4588	301	COMMERCIAL DEPOSIT		9,488.80	
					631,570.52	35,379.63	

Broadmoor					Transfer-Out	Transfer-In	
9/14/2015	5025	4596	142	ACH CREDIT RECEIVED		52,486.45	TEXAS COMPTROLLR INV-PAYMTS
9/14/2015	5025	4596	301	COMMERCIAL DEPOSIT		25,482.36	
9/14/2015	5025	4596	495	OUTGOING MONEY TRANSFER	824,130.07		CANTEX HEALTH CARE CENTERS III
9/18/2015	5025	4596	301	COMMERCIAL DEPOSIT		14,232.50	
					824,130.07	92,201.31	

Fort Bend					Transfer-Out	Transfer-In	
9/14/2015	5025	4618	495	OUTGOING MONEY TRANSFER	184,654.01		CANTEX HEALTH CARE CENTERS III
9/14/2015	5025	4618	301	COMMERCIAL DEPOSIT		197.04	
					184,654.01	197.04	

No transfer prior week
< $5000

lio as of 09/28/2015 8:24:51 AM

Account Display
◉ Display By Account Type
○ Display By Asset/Liability

Commercial Checking Accounts

Account Name	Account Number	Today's Beginning Balance	Available Balance
Memorial Medical Center	3387	$325,069.79	$325,069.79
Memorial Medical Center	4553	$379,760.93	$379,760.93
Memorial Medical Center	4561	$835,684.54	$835,968.42
Memorial Medical Center	4588	$575,819.43	$575,819.43
Memorial Medical Center	4596	$773,894.18	$773,894.18
Memorial Medical Center	4618	$253,808.58	$253,808.58
Memorial Medical Center Operat	0301	$1,074,796.81	$1,158,885.50
County of Calhoun Indigent	1101	$2,489.39	$2,489.39
Totals		**$4,221,323.65**	**$4,305,696.22**

APPROVED

SEP 30 2015

COUNTY AUDITOR
GALVESTON COUNTY, TEXAS

09/30/2015 MEMORIAL MEDICAL CENTER 0
09:02 AP Open Invoice List ap_open_invoice.template
Due Dates Through: 10/15/2015

Vendor#	Vendor Name				Class	Pay Code				
A1360	AMERISOURCEBERGEN DRUG CORP				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	764923065		09/24/20	09/23/20	10/10/20		115.80	0.00	0.00	115.80
		PHARMACY DRUGS								
	765212845		09/29/20	09/28/20	10/10/20		6.51	0.00	0.00	6.51
		PHARMACY DRUGS								
	765191562		09/29/20	09/28/20	10/10/20		180.09	0.00	0.00	180.09
		PHARMACY DRUGS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1360	AMERISOURCEBERGEN DRUG CORP				302.40	0.00	0.00	302.40
Vendor#	Vendor Name				Class	Pay Code				
A2050	AMTEC MEDICAL INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	61667-1		09/29/20	07/06/20	08/05/20		23.97	0.00	0.00	23.97
		FREIGHT NUC MED								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A2050	AMTEC MEDICAL INC				23.97	0.00	0.00	23.97
Vendor#	Vendor Name				Class	Pay Code				
A2218	AQUA BEVERAGE COMPANY				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	650980		09/29/20	08/27/20	09/27/20		27.59	0.00	0.00	27.59
		SUPPLIES LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A2218	AQUA BEVERAGE COMPANY				27.59	0.00	0.00	27.59
Vendor#	Vendor Name				Class	Pay Code				
B1075	BAXTER HEALTHCARE CORP				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	48530921		09/14/20	09/04/20	10/04/20		364.48	0.00	0.00	364.48
		SUPPLIES VARIOUS DEPTS								
	48579633		09/18/20	09/10/20	10/10/20		367.17	0.00	0.00	367.17
		CS INVENTORY & LAB SUPPLI								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		B1075	BAXTER HEALTHCARE CORP				731.65	0.00	0.00	731.65
Vendor#	Vendor Name				Class	Pay Code				
B1220	BECKMAN COULTER INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	105132216		09/21/20	09/03/20	10/04/20		1,972.72	0.00	0.00	1,972.72
		PROPERTY TAX LAB								
	105132456		09/21/20	09/03/20	10/04/20		138.04	0.00	0.00	138.04
		LAB SUPPLIES								
	105132237		09/21/20	09/03/20	10/04/20		3,228.04	0.00	0.00	3,228.04
		PROPERTY TAX LAB								
	105129961		09/21/20	09/03/20	10/04/20		14,952.28	0.00	0.00	14,952.28
		LAB SUPPLIES								
	105132081		09/21/20	09/03/20	10/04/20		1,249.68	0.00	0.00	1,249.68
		LAB SUPPLIES								
	105130213		09/21/20	09/03/20	10/04/20		162.44	0.00	0.00	162.44

	LAB SUPPLIES								
105132247		09/21/20	09/03/20	10/04/20		2,779.73	0.00	0.00	2,779.73
	PROPERTY TAX LAB								
105137971		09/21/20	09/08/20	10/04/20		521.12	0.00	0.00	521.12
	LAB SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	B1220	BECKMAN COULTER INC				25,004.05	0.00	0.00	25,004.05
Vendor#	Vendor Name				Class	Pay Code			
11050	BIRCH COMMUNICATIONS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	19319372		09/23/20	09/16/20	10/15/20		900.84	0.00	0.00	900.84
	TELEPHONE EXPENSE								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11050	BIRCH COMMUNICATIONS					900.84	0.00	0.00	900.84
Vendor#	Vendor Name				Class	Pay Code			
11123	BUSINESS INTERIORS BY STAPLES								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
Job Quote	0005435183		09/29/20	09/22/20	09/22/20		66,864.83	0.00	0.00	66,864.83
	CLINIC FURNITURE DEPOSIT								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11123	BUSINESS INTERIORS BY STAPLES					66,864.83	0.00	0.00	66,864.83
Vendor#	Vendor Name				Class	Pay Code			
C1030	CAL COM FEDERAL CREDIT UNION				W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20363		09/24/20	09/24/20	09/24/20		25.00	0.00	0.00	25.00
	EMPLOYEE CREDIT UNION								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C1030	CAL COM FEDERAL CREDIT UNION					25.00	0.00	0.00	25.00
Vendor#	Vendor Name				Class	Pay Code			
10350	CENTURION MEDICAL PRODUCTS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	91850476		09/14/20	09/09/20	10/09/20		939.72	0.00	0.00	939.72
	CS INVENTORY								
	91853241		09/18/20	09/14/20	10/14/20		395.95	0.00	0.00	395.95
	CS INVENTORY								
	10350		09/23/20	09/01/20	10/01/20		-23.52	0.00	0.00	-23.52
	CREDIT CS INVENTORY ref 33319 Doc# 0091774525								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10350	CENTURION MEDICAL PRODUCTS					1,312.15	0.00	0.00	1,312.15
Vendor#	Vendor Name				Class	Pay Code			
10661	CENTURYLINK								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	1350885703		09/25/20	09/03/20	10/03/20		306.79	0.00	0.00	306.79
	TELEPHONE EXP								
	1347756829		09/28/20	08/03/20	09/02/20		238.48	0.00	0.00	238.48
	TELEPHONE EXPENSE								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10661	CENTURYLINK					545.27	0.00	0.00	545.27
Vendor#	Vendor Name				Class	Pay Code			
C1410	CERTIFIED LABORATORIES				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	2046532		09/28/20	09/15/20	10/15/20		283.50	0.00	0.00	283.50

SUPPLIES DIETARY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1410	CERTIFIED LABORATORIES	283.50	0.00	0.00	283.50

Vendor#	Vendor Name	Class	Pay Code
C1412	CERTIFIED PROSTHETICS &	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9299		09/25/20	06/30/20	07/30/20		775.00	0.00	0.00	775.00

SUPPLIES MED SURG

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1412	CERTIFIED PROSTHETICS &	775.00	0.00	0.00	775.00

Vendor#	Vendor Name	Class	Pay Code
C1730	CITY OF PORT LAVACA	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20383		09/29/20	09/17/20	10/05/20		5,796.69	0.00	0.00	5,796.69
	WATER & SEWER								
20382		09/29/20	09/17/20	10/05/20		419.45	0.00	0.00	419.45
	WATER & SEWER								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1730	CITY OF PORT LAVACA	6,216.14	0.00	0.00	6,216.14

Vendor#	Vendor Name	Class	Pay Code
C1970	CONMED CORPORATION	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
972387		09/14/20	09/09/20	10/09/20		119.76	0.00	0.00	119.76

SUPPLIES SURGERY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1970	CONMED CORPORATION	119.76	0.00	0.00	119.76

Vendor#	Vendor Name	Class	Pay Code
10556	CPP WOUND CARE #28,LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
18310		09/23/20	09/10/20	10/10/20		25,525.00	0.00	0.00	25,525.00

PROF FEES WOUND CARE

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10556	CPP WOUND CARE #28,LLC	25,525.00	0.00	0.00	25,525.00

Vendor#	Vendor Name	Class	Pay Code
10006	CUSTOM MEDICAL SPECIALTIES		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
196742		09/14/20	09/08/20	10/08/20		586.72	0.00	0.00	586.72

SUPPLIES CT SCAN

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10006	CUSTOM MEDICAL SPECIALTIES	586.72	0.00	0.00	586.72

Vendor#	Vendor Name	Class	Pay Code
C1443	CYGNUS MEDICAL LLC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
177168		09/24/20	09/14/20	10/14/20		263.00	0.00	0.00	263.00

SUPPLIES SURGERY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	C1443	CYGNUS MEDICAL LLC	263.00	0.00	0.00	263.00

Vendor#	Vendor Name	Class	Pay Code
S2896	DANETTE BETHANY	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20387		09/29/20	09/29/20	09/29/20		298.24	0.00	0.00	298.24

TRAVEL EXP CLINIC 9/21-25/2015 - Conference Brentwood TN

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2896	DANETTE BETHANY	298.24	0.00	0.00	298.24

Vendor#	Vendor Name	Class	Pay Code
10990	DANIELLE SALINAS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20384		09/29/20	09/29/20	09/29/20			110.00	0.00	0.00	110.00
	TRAVEL EXP NURSE ADMIN 9/22-25/2015 Conference Chicago IL									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10990	DANIELLE SALINAS	110.00	0.00	0.00	110.00

Vendor#	Vendor Name	Class	Pay Code
11116	DESIGNS FOR VISION, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
1194671		09/15/20	09/08/20	10/08/20			1,935.00	0.00	0.00	1,935.00
	HEADSET FOR DR ROJAS - Surgery									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11116	DESIGNS FOR VISION, INC.	1,935.00	0.00	0.00	1,935.00

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
450393-0		09/11/20	09/04/20	10/04/20			375.16	0.00	0.00	375.16
	CS INVENTORY									
451082-0		09/11/20	09/14/20	10/14/20			343.20	0.00	0.00	343.20
	CS INVENTORY									
451088-0		09/23/20	09/14/20	10/14/20			70.46	0.00	0.00	70.46
	SUPPLIES HOSPITALIST									
451089-0		09/23/20	09/14/20	10/14/20			90.04	0.00	0.00	90.04
	OFFICE SUPPLIES HR									
4331877-0-2		09/24/20	02/27/20	03/29/20			62.22	0.00	0.00	62.22
	SUPPLIES ER									
438396-0		09/24/20	04/23/20	05/23/20			347.46	0.00	0.00	347.46
	SUPPLIES MAINT									
440984-0		09/24/20	05/21/20	06/20/20			23.59	0.00	0.00	23.59
	OFFICE SUPPLIES NURSE AD									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON	1,312.13	0.00	0.00	1,312.13

Vendor#	Vendor Name	Class	Pay Code
D1752	DLE PAPER & PACKAGING	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
8352		09/14/20	09/09/20	10/09/20			79.95	0.00	0.00	79.95
	FORMS BUS OFFICE									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	D1752	DLE PAPER & PACKAGING	79.95	0.00	0.00	79.95

Vendor#	Vendor Name	Class	Pay Code
D1710	DOWNTOWN CLEANERS	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20373		09/24/20	09/03/20	10/03/20			35.00	0.00	0.00	35.00
	OUTSIDE SRV HOUSEKEEPIN									
20374		09/24/20	09/17/20	10/15/20			35.00	0.00	0.00	35.00
	OUTSIDE SRV HOUSEKEEPIN									

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	D1710	DOWNTOWN CLEANERS	70.00	0.00	0.00	70.00

Vendor#	Vendor Name				Class	Pay Code				
10292	ECPTOTE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20380		09/29/20	09/22/20	09/22/20		215.00	0.00	0.00	215.00
		DUES & SUBCRIPTIONS PT Restoration of a cancelled facility registration								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10292	ECPTOTE				215.00	0.00	0.00	215.00
Vendor#	Vendor Name				Class	Pay Code				
C2510	EVIDENT				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	911338		09/23/20	08/24/20	09/23/20		1,397.08	0.00	0.00	1,397.08
		OUTSIDE SRV HOSPITALIST								
	911825		09/29/20	09/08/20	10/08/20		3,523.00	0.00	0.00	3,523.00
		MINOR EQUIP IT								
	911824		09/29/20	09/08/20	10/08/20		1,414.87	0.00	0.00	1,414.87
		OUTSIDE SRV HIM								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C2510	EVIDENT				6,334.95	0.00	0.00	6,334.95
Vendor#	Vendor Name				Class	Pay Code				
11121	EXEBRIDGE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	11342		09/28/20	08/12/20	09/11/20		7,040.00	0.00	0.00	7,040.00
		INTRANET PROJECT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11121	EXEBRIDGE				7,040.00	0.00	0.00	7,040.00
Vendor#	Vendor Name				Class	Pay Code				
11037	FIRST CLEARING									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	20364		09/24/20	09/24/20	09/24/20		75.00	0.00	0.00	75.00
		EMPLOYEE PERSONAL INVES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11037	FIRST CLEARING				75.00	0.00	0.00	75.00
Vendor#	Vendor Name				Class	Pay Code				
F1400	FISHER HEALTHCARE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8682523		09/23/20	09/03/20	10/03/20		162.53	0.00	0.00	162.53
		LAB SUPPLIES								
	8768552		09/23/20	09/04/20	10/04/20		102.72	0.00	0.00	102.72
		LAB SUPPLIES								
	8856998		09/23/20	09/08/20	10/08/20		1,560.00	0.00	0.00	1,560.00
		LAB SUPPLIES								
	8857006		09/23/20	09/08/20	10/08/20		2,139.37	0.00	0.00	2,139.37
		LAB SUPPLIES								
	8856994		09/23/20	09/08/20	10/08/20		53.67	0.00	0.00	53.67
		LAB SUPPLIES								
	9261362		09/29/20	09/10/20	10/10/20		677.75	0.00	0.00	677.75
		LAB SUPPLIES								
	0580338		09/29/20	09/15/20	10/15/20		53.67	0.00	0.00	53.67
		LAB SUPPLIES								
	0580347		09/29/20	09/15/20	10/15/20		3,211.79	0.00	0.00	3,211.79
		LAB SUPPLIES								

	0580339		09/29/20	09/15/20	10/15/20		53.67	0.00	0.00	53.67
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		F1400	FISHER HEALTHCARE				8,015.17	0.00	0.00	8,015.17
Vendor#	Vendor Name				Class	Pay Code				
10678	FIVE STAR STERILIZER SERVICES									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	4093		09/23/20	09/14/20	10/14/20		274.43	0.00	0.00	274.43
		SURGERY REPAIRS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10678	FIVE STAR STERILIZER SERVICES				274.43	0.00	0.00	274.43
Vendor#	Vendor Name				Class	Pay Code				
11078	FUSION MEDICAL STAFFING, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	60249		09/23/20	09/11/20	10/10/20		2,079.00	0.00	0.00	2,079.00
		PROF FEES PT 9/8 - 11/2015								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11078	FUSION MEDICAL STAFFING, LLC				2,079.00	0.00	0.00	2,079.00
Vendor#	Vendor Name				Class	Pay Code				
G1870	GOLDEN CRESCENT COMMUNICATIONS				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	37705		09/28/20	08/18/20	09/17/20		134.45	0.00	0.00	134.45
		SUPPLIES PLANT OPS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		G1870	GOLDEN CRESCENT COMMUNICATIONS				134.45	0.00	0.00	134.45
Vendor#	Vendor Name				Class	Pay Code				
A1292	GULF COAST HARDWARE / ACE				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	94927		09/24/20	09/10/20	10/10/20		14.14	0.00	0.00	14.14
		SUPPLIES PLANT OPS								
	94904		09/24/20	09/10/20	10/10/20		187.98	0.00	0.00	187.98
		SUPPLIES PLANT OPS								
	94954		09/24/20	09/11/20	10/11/20		20.47	0.00	0.00	20.47
		SUPPLIES PLANT OPS								
	95018		09/24/20	09/14/20	10/14/20		65.56	0.00	0.00	65.56
		SUPPLIES PLANT OPS								
	95063		09/24/20	09/15/20	10/15/20		80.28	0.00	0.00	80.28
		SUPPLIES PLANT OPS								
	95095		09/24/20	09/16/20	10/15/20		164.81	0.00	0.00	164.81
		SUPPLIES PLANT OPS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1292	GULF COAST HARDWARE / ACE				533.24	0.00	0.00	533.24
Vendor#	Vendor Name				Class	Pay Code				
G1210	GULF COAST PAPER COMPANY				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	1006388		09/11/20	09/08/20	10/08/20		374.28	0.00	0.00	374.28
		SUPPLIES HOUSEKEEPING								
	1006380		09/11/20	09/08/20	10/08/20		88.26	0.00	0.00	88.26
		SUPPLIES HOUSEKEEPING								
	1010651		09/11/20	09/15/20	10/15/20		383.29	0.00	0.00	383.29
		SUPPLIES HOUSEKEEPING								
	882236		09/28/20	01/13/20	02/12/20		32.40	0.00	0.00	32.40

SUPPLIES HOUSEKEEPING

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY	878.23	0.00	0.00	878.23

Vendor#	Vendor Name	Class	Pay Code
H0030	H E BUTT GROCERY	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
030171		09/29/20	08/18/20	09/07/20		37.60	0.00	0.00	37.60
	FOOD SUPPLIES DIETARY								
079812		09/29/20	09/09/20	09/29/20		69.16	0.00	0.00	69.16
	FOOD SUPPLIES DIETARY								
091474		09/29/20	09/14/20	10/04/20		43.43	0.00	0.00	43.43
	FOOD SUPPLIES DIETARY								
098403		09/29/20	09/17/20	10/07/20		68.30	0.00	0.00	68.30
	FOOD SUPPLIES DIETARY								
003621		09/29/20	09/19/20	10/09/20		43.11	0.00	0.00	43.11
	FOOD SUPPLIES DIETARY								
005798		09/29/20	09/20/20	10/10/20		54.19	0.00	0.00	54.19
	FOOD SUPPLIES DIETARY								
012988		09/29/20	09/23/20	10/13/20		21.72	0.00	0.00	21.72
	FOOD SUPPLIES DIETARY								
011879		09/29/20	09/23/20	10/13/20		92.66	0.00	0.00	92.66
	FOOD SUPPLIES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H0030	H E BUTT GROCERY	430.17	0.00	0.00	430.17

Vendor#	Vendor Name	Class	Pay Code
H1100	HAYES ELECTRIC SERVICE	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
A2150812-22		09/23/20	08/12/20	09/11/20		21.60	0.00	0.00	21.60
	REPAIRS BIO MED								
A2150826-09		09/23/20	08/26/20	09/25/20		232.42	0.00	0.00	232.42
	INSTRUMENT REPAIRS SURG								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1100	HAYES ELECTRIC SERVICE	254.02	0.00	0.00	254.02

Vendor#	Vendor Name	Class	Pay Code
H1399	HILL-ROM COMPANY, INC	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
24351925		09/15/20	09/05/20	10/05/20		271.71	0.00	0.00	271.71

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1399	HILL-ROM COMPANY, INC	271.71	0.00	0.00	271.71

Vendor#	Vendor Name	Class	Pay Code
I0415	INDEPENDENCE MEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
36842781		09/14/20	09/04/20	10/04/20		33.95	0.00	0.00	33.95
	CS INVENTORY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I0415	INDEPENDENCE MEDICAL	33.95	0.00	0.00	33.95

Vendor#	Vendor Name	Class	Pay Code
J0150	J & J HEALTH CARE SYSTEMS, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
915124874		09/11/20	08/25/20	10/04/20		121.43	0.00	0.00	121.43

SUPPLIES SURGERY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	J0150	J & J HEALTH CARE SYSTEMS, INC	121.43	0.00	0.00	121.43

Vendor#	Vendor Name	Class	Pay Code
11122	K & M SPORTS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
80080		09/28/20	09/24/20	09/24/20		250.00	0.00	0.00	250.00
	ADVERTISING 4X4								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11122	K & M SPORTS	250.00	0.00	0.00	250.00

Vendor#	Vendor Name	Class	Pay Code
11124	KELLY SCHOTT		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20385		09/29/20	09/29/20	09/29/20			0.00	0.00	94.08
	TRAVEL EXP ER Mileage 168mi 9/7-9/2014 TNCC - Victoria TX								

OK - this was for 2014

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11124	KELLY SCHOTT		0.00	0.00	94.08

Vendor#	Vendor Name	Class	Pay Code
L0700	LABCORP OF AMERICA HOLDINGS	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
49083554		09/29/20	08/29/20	09/28/20		73.00	0.00	0.00	73.00
	OUTSIDE SRV LAB								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	L0700	LABCORP OF AMERICA HOLDINGS	73.00	0.00	0.00	73.00

Vendor#	Vendor Name	Class	Pay Code
10972	M G TRUST		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20365		09/24/20	09/24/20	09/24/20		1,457.50	0.00	0.00	1,457.50
	EMPLOYEE PERSONAL INVES								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10972	M G TRUST	1,457.50	0.00	0.00	1,457.50

Vendor#	Vendor Name	Class	Pay Code
10778	MAGAW MEDICAL		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
12854		09/14/20	09/09/20	10/09/20		64.00	0.00	0.00	64.00
	CS INVENTORY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10778	MAGAW MEDICAL	64.00	0.00	0.00	64.00

Vendor#	Vendor Name	Class	Pay Code
R1452	MARISSA SUTHERLAND	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20381		09/29/20	09/28/20	09/28/20		289.00	0.00	0.00	289.00
	TRAVEL EXP HIM 9/22-25/2015 Chicago IL								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	R1452	MARISSA SUTHERLAND	289.00	0.00	0.00	289.00

Vendor#	Vendor Name	Class	Pay Code
M1511	MARKETLAB, INC	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
M037263		09/28/20	09/11/20	10/11/20		458.21	0.00	0.00	458.21
	SUPPLIES CLINIC								
M038227		09/29/20	09/15/20	10/15/20		334.21	0.00	0.00	334.21
	BLOOD BANK SUPPLIES								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	M1511	MARKETLAB, INC				792.42	0.00	0.00	792.42

Vendor#	Vendor Name			Class	Pay Code				
M1500	MARKS PLUMBING PARTS			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	INV001449976		09/15/20	09/10/20	10/10/20		321.40	0.00	0.00	321.40
		SUPPLIES PLANT OPS								
	INV001451390		09/23/20	09/15/20	10/15/20		138.90	0.00	0.00	138.90
		SUPPLIES PLANT OPS								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M1500	MARKS PLUMBING PARTS					460.30	0.00	0.00	460.30

Vendor#	Vendor Name			Class	Pay Code				
M1950	MARTIN PRINTING CO			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	67607		09/23/20	08/31/20	09/30/20		145.63	0.00	0.00	145.63
		SUPPLIES CLINIC								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M1950	MARTIN PRINTING CO					145.63	0.00	0.00	145.63

Vendor#	Vendor Name			Class	Pay Code				
M2178	MCKESSON MEDICAL SURGICAL INC								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	63709435		09/23/20	09/03/20	10/15/20		310.96	0.00	0.00	310.96
		LAB SUPPLIES								
	63098187		09/29/20	08/25/20	09/15/20		414.46	0.00	0.00	414.46
		SUPPLIES LAB								
	63398128		09/29/20	08/28/20	09/15/20		1,226.58	0.00	0.00	1,226.58
		LAB SUPPLIES								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M2178	MCKESSON MEDICAL SURGICAL INC					1,952.00	0.00	0.00	1,952.00

Vendor#	Vendor Name			Class	Pay Code				
M2827	MEDIVATORS			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	2155995		09/11/20	09/09/20	10/09/20		245.20	0.00	0.00	245.20
		SUPPLIES SURGERY								
	2159454		09/11/20	09/14/20	10/14/20		245.20	0.00	0.00	245.20
		SUPPLIES SURGERY								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M2827	MEDIVATORS					490.40	0.00	0.00	490.40

Vendor#	Vendor Name			Class	Pay Code				
M2470	MEDLINE INDUSTRIES INC			M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	1088647562		09/11/20	09/10/20	10/10/20		214.28	0.00	0.00	214.28
		SUPPLIES SURGERY								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net
	M2470	MEDLINE INDUSTRIES INC					214.28	0.00	0.00	214.28

Vendor#	Vendor Name			Class	Pay Code				
10182	MERCEDES MEDICAL								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	1769389		09/23/20	09/08/20	10/08/20		578.23	0.00	0.00	578.23
		LAB SUPPLIES								
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net

	10182	MERCEDES MEDICAL				578.23	0.00	0.00	578.23
Vendor#	Vendor Name				Class	Pay Code			
M2659	MERRY X-RAY/SOURCEONE HEALTHCA				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	30094114419		09/11/20	09/10/20	10/10/20		153.88	0.00	0.00	153.88
		SUPPLIES SURGERY								
	30094115919		09/11/20	09/14/20	10/14/20		153.88	0.00	0.00	153.88
		SUPPLIES SURGERY								
	30094111834		09/14/20	09/04/20	10/04/20		303.39	0.00	0.00	303.39
		SUPPLIES XRAY								
	30094112465		09/14/20	09/08/20	10/08/20		896.58	0.00	0.00	896.58
		XRAY SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2659	MERRY X-RAY/SOURCEONE HEALTHCA				1,507.73	0.00	0.00	1,507.73
Vendor#	Vendor Name				Class	Pay Code				
M2621	MMC AUXILIARY GIFT SHOP				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20375		09/28/20	09/28/20	09/28/20		185.62	0.00	0.00	185.62
		EMPLOYEE GIFT SHOP PURC								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M2621	MMC AUXILIARY GIFT SHOP				185.62	0.00	0.00	185.62
Vendor#	Vendor Name				Class	Pay Code				
10810	MMC EMPLOYEE BENEFIT PLAN									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20378		09/28/20	09/28/20	09/28/20		24,477.48	0.00	0.00	24,477.48
		EMPLOYEE MEDICAL CLAIMS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10810	MMC EMPLOYEE BENEFIT PLAN				24,477.48	0.00	0.00	24,477.48
Vendor#	Vendor Name				Class	Pay Code				
10536	MORRIS & DICKSON CO, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	7926628		09/24/20	09/22/20	10/02/20		81.67	0.00	0.00	81.67
		PHARMACY DRUGS								
	7925822		09/24/20	09/22/20	10/02/20		148.61	0.00	0.00	148.61
		PHARMACY DRUGS								
	7925820		09/24/20	09/22/20	10/02/20		37.15	0.00	0.00	37.15
		PHARMACY DRUGS								
	7925821		09/24/20	09/22/20	10/02/20		37.15	0.00	0.00	37.15
		PHARMACY DRUGS								
	7925823		09/24/20	09/22/20	10/02/20		60.31	0.00	0.00	60.31
		PHARMACY DRUGS								
	7926627		09/24/20	09/22/20	10/02/20		1,782.21	0.00	0.00	1,782.21
		PHARMACY DRUGS								
	7926803		09/24/20	09/22/20	10/02/20		6.38	0.00	0.00	6.38
		PHARMACY DRUGS								
	7926626		09/24/20	09/22/20	10/02/20		705.71	0.00	0.00	705.71
		PHARMACY DRUGS								
	7927233		09/24/20	09/22/20	10/02/20		10.92	0.00	0.00	10.92
		PHARMACAY DRUGS								
	7932319		09/24/20	09/23/20	10/03/20		19.10	0.00	0.00	19.10
		PHARMACY DRUGS								
	7932320		09/24/20	09/23/20	10/03/20		1,082.17	0.00	0.00	1,082.17

	PHARMACY DRUGS							
7930913	09/24/20	09/23/20	10/03/20		37.15	0.00	0.00	37.15
	PHARMACY DRUGS							
7930912	09/24/20	09/23/20	10/03/20		185.77	0.00	0.00	185.77
	PHARMACY DRUGS							
7937440	09/29/20	09/24/20	10/04/20		1,559.60	0.00	0.00	1,559.60
	PHARMACY DRUGS							
7937439	09/29/20	09/24/20	10/04/20		59.06	0.00	0.00	59.06
	PHARMACY DRUGS							
6447	09/29/20	09/24/20	10/04/20		-317.42	0.00	0.00	-317.42
	PHARMACY CREDIT							
7942256	09/29/20	09/25/20	10/05/20		5,358.93	0.00	0.00	5,358.93
	PHARMACY DRUGS							
7942255	09/29/20	09/25/20	10/05/20		58.75	0.00	0.00	58.75
	PHARMACY DRUGS							
7942257	09/29/20	09/25/20	10/05/20		2.61	0.00	0.00	2.61
	PHARMACY DRUGS							
7940916	09/29/20	09/25/20	10/05/20		88.78	0.00	0.00	88.78
	PHARMACY DRUGS							
7949032	09/29/20	09/28/20	10/08/20		470.57	0.00	0.00	470.57
	PHARMACY DRUGS							
7949031	09/29/20	09/28/20	10/08/20		179.38	0.00	0.00	179.38
	PHARMACY DRUGS							
7949624	09/29/20	09/28/20	10/08/20		230.28	0.00	0.00	230.28
	PHARMACY DRUGS							
7949029	09/29/20	09/28/20	10/08/20		5.88	0.00	0.00	5.88
	PHARMACY DRUGS							
7949176	09/29/20	09/28/20	10/08/20		262.48	0.00	0.00	262.48
	PHARMACY DRUGS							
7949030	09/29/20	09/28/20	10/08/20		2,249.23	0.00	0.00	2,249.23
	PHARMACY DRUGS							

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	14,402.43	0.00	0.00	14,402.43

Vendor#	Vendor Name	Class	Pay Code
10862	NIGHTINGALE NURSES, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
NN-182682		07/31/20	05/09/20	07/08/20		3,253.50	0.00	0.00	3,253.50
	CONTRACT NURSING 5/1-7/2010								
NN-184525		09/29/20	06/06/20	08/05/20		1,944.00	0.00	0.00	1,944.00
	CONTRACT NURSING 5/29-6/4/2015								
NN-185336		09/29/20	06/13/20	08/12/20		1,944.00	0.00	0.00	1,944.00
	CONTRACT NURSING 6/5-6/11/2015								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10862	NIGHTINGALE NURSES, LLC	7,141.50	0.00	0.00	7,141.50

Vendor#	Vendor Name	Class	Pay Code
10601	NOBLE AMERICAS ENERGY		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
4848491		09/29/20	09/03/20	10/05/20		35,619.87	0.00	0.00	35,619.87
	ELECTRICITY 9/29/15								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10601	NOBLE AMERICAS ENERGY	35,619.87	0.00	0.00	35,619.87

Vendor#	Vendor Name				Class	Pay Code				
O0920	OFFICE DEPOT									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	791452892001		09/14/20	09/03/20	10/04/20		61.74	0.00	0.00	61.74
		SUPPLIES BUS OFFICE								
	793828999001		09/24/20	09/15/20	10/15/20		46.30	0.00	0.00	46.30
		OFFICE SUPPLIES XRAY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		O0920	OFFICE DEPOT				108.04	0.00	0.00	108.04
Vendor#	Vendor Name				Class	Pay Code				
O1500	OLYMPUS AMERICA INC				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	91323915		08/31/20	09/25/20	10/09/20		83.50	0.00	0.00	83.50
		SUPPLIES SURGERY 8/25/15								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		O1500	OLYMPUS AMERICA INC				83.50	0.00	0.00	83.50
Vendor#	Vendor Name				Class	Pay Code				
OM425	OWENS & MINOR									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	2009834554		09/11/20	09/15/20	10/15/20		2,122.61	0.00	0.00	2,122.61
		SUPPLIES VARIOUS DEPTS								
	2009597923		09/14/20	09/08/20	10/08/20		1,184.46	0.00	0.00	1,184.46
		CS INVENTORY & RECOVERY								
	2009597586		09/14/20	09/08/20	10/08/20		360.53	0.00	0.00	360.53
		SUPPLIES VARIOUS DEPTS								
	2009605056		09/14/20	09/08/20	10/08/20		37.90	0.00	0.00	37.90
		CS INVENTORY								
	2009705003		09/14/20	09/10/20	10/10/20		100.74	0.00	0.00	100.74
		SURGERY SUPPLIES								
	2009689230		09/14/20	09/10/20	10/10/20		3.56	0.00	0.00	3.56
		SUPPLIES DIETARY								
	2009694800		09/14/20	09/10/20	10/10/20		564.29	0.00	0.00	564.29
		SUPPLIES VARIOUS DEPTS								
	2009689229		09/14/20	09/10/20	10/10/20		56.86	0.00	0.00	56.86
		SUPPLIES DIETARY								
	2009697165		09/14/20	09/10/20	10/10/20		2,055.75	0.00	0.00	2,055.75
		SUPPLIES VARIOUS DEPTS								
	2009704807		09/14/20	09/10/20	10/10/20		125.00	0.00	0.00	125.00
		SUPPLIES CLINIC								
	2009689904		09/14/20	09/10/20	10/10/20		265.38	0.00	0.00	265.38
		C S INVENTORY								
	2009562228		09/15/20	09/04/20	10/04/20		731.25	0.00	0.00	731.25
		SUPPLIES LAB								
	2009826380		09/18/20	09/15/20	10/15/20		91.28	0.00	0.00	91.28
		SUPPLIES CARIO								
	2009824931		09/18/20	09/15/20	10/15/20		73.76	0.00	0.00	73.76
		SUPPLIES HOUSEKEEPING								
	2009834563		09/18/20	09/15/20	10/15/20		16.17	0.00	0.00	16.17
		SUPPLIES PT								
	800036303		09/24/20	07/31/20	08/30/20		1.62	0.00	0.00	1.62
		SERVICE CHARGE								
	2009047179		09/24/20	08/19/20	09/18/20		-69.72	0.00	0.00	-69.72

		CREDIT CS INVENTORY							
	2009592129		09/24/20	09/08/20	10/08/20	301.26	0.00	0.00	301.26
		SUPPLIES SURGERY							
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		OM425	OWENS & MINOR			8,022.70	0.00	0.00	8,022.70
Vendor#	Vendor Name				Class	Pay Code			
10737	PEM FILINGS								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	4369		09/28/20	09/19/20	09/29/20		2,057.25	0.00	0.00	2,057.25
		PROF FEES ADMIN								
	4367		09/28/20	09/21/20	10/01/20		2,730.00	0.00	0.00	2,730.00
		PROF FEES ADMIN								
	4368		09/28/20	09/21/20	10/01/20		422.17	0.00	0.00	422.17
		PROF FEES ADMIN								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10737	PEM FILINGS				5,209.42	0.00	0.00	5,209.42
Vendor#	Vendor Name				Class	Pay Code				
10606	PENLON, INC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	OP/0005173		09/29/20	09/22/20	10/12/20		2,778.90	0.00	0.00	2,778.90
		REPAIRS ANESTHESA								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10606	PENLON, INC				2,778.90	0.00	0.00	2,778.90
Vendor#	Vendor Name				Class	Pay Code				
10541	PLATINUM CODE									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	032087		09/18/20	09/11/20	10/11/20		330.37	0.00	0.00	330.37
		CS INVENTORY								
	0320921.1		09/18/20	09/11/20	10/11/20		242.73	0.00	0.00	242.73
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10541	PLATINUM CODE				573.10	0.00	0.00	573.10
Vendor#	Vendor Name				Class	Pay Code				
P1876	POLYMEDCO INC.				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	1057160		09/23/20	09/08/20	10/08/20		608.70	0.00	0.00	608.70
		LAB SUPPLIES								
	1057230		09/23/20	09/09/20	10/09/20		125.26	0.00	0.00	125.26
		LAB SUPPLIES								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		P1876	POLYMEDCO INC.				733.96	0.00	0.00	733.96
Vendor#	Vendor Name				Class	Pay Code				
P2200	POWER ELECTRIC				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	A14294		09/15/20	09/14/20	10/14/20		7.19	0.00	0.00	7.19
		SUPPLIES BIO MED								
	A14181		09/24/20	09/09/20	10/09/20		29.70	0.00	0.00	29.70
		SUPPLIES PLANT OPS								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		P2200	POWER ELECTRIC				36.89	0.00	0.00	36.89
Vendor#	Vendor Name				Class	Pay Code				

10372 PRECISION DYNAMICS CORP (PDC)

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3113808		09/24/20	09/15/20	10/15/20		275.62	0.00	0.00	275.62
	CS INVENTORY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10372	PRECISION DYNAMICS CORP (PDC)	275.62	0.00	0.00	275.62

Vendor# R1268 Vendor Name RADIOLOGY UNLIMITED, PA Class W Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20376		09/28/20	08/05/20	09/04/20		300.00	0.00	0.00	300.00
	READ FEES XRAY								
20377		09/28/20	08/31/20	09/30/20		600.00	0.00	0.00	600.00
	READ FEES XRAY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	R1268	RADIOLOGY UNLIMITED, PA	900.00	0.00	0.00	900.00

Vendor# 10927 Vendor Name ROSHANDA GRAY Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20388		09/29/20	09/28/20	09/28/20		230.10	0.00	0.00	230.10
	TRAVEL EXP ADMIN 9/24-25/15 Austin TX THA Leadership Fellows Program								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10927	ROSHANDA GRAY	230.10	0.00	0.00	230.10

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
700826642		09/23/20	08/28/20	09/27/20		213.54	0.00	0.00	213.54
	SUPPLIES PLANT OPS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S1405	SERVICE SUPPLY OF VICTORIA INC	213.54	0.00	0.00	213.54

Vendor# K0536 Vendor Name SHIRLEY KARNEI Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20386		09/29/20	09/27/20	09/27/20		1,421.30	0.00	0.00	1,421.30
	OUTSIDE SRV TRANSCRIPTIC 9/14 - 9/25/2015								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	K0536	SHIRLEY KARNEI	1,421.30	0.00	0.00	1,421.30

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

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
191334		09/28/20	07/01/20	07/31/20		390.00	0.00	0.00	390.00
	ADVERTISING								
F1509054		09/28/20	09/11/20	10/11/20		5.85	0.00	0.00	5.85
	FINANCE CHARGE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10699	SIGN AD, LTD.	395.85	0.00	0.00	395.85

Vendor# S2362 Vendor Name SMITH & NEPHEW Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
92468113		09/24/20	09/14/20	10/14/20		247.06	0.00	0.00	247.06
	SUPPLIES SURGERY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	S2362	SMITH & NEPHEW	247.06	0.00	0.00	247.06

Vendor#	Vendor Name				Class	Pay Code				
S2400	SO TEX BLOOD & TISSUE CENTER				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	90015261		09/29/20	08/31/20	09/30/20		7,206.00	0.00	0.00	7,206.00
		BLOOD BANK SUPPLIES								
	90015186		09/29/20	08/31/20	09/30/20		-2,830.00	0.00	0.00	-2,830.00
		BLOOD BANK CREDIT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S2400	SO TEX BLOOD & TISSUE CENTER				4,376.00	0.00	0.00	4,376.00
Vendor#	Vendor Name				Class	Pay Code				
S2694	STANFORD VACUUM SERVICE				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	455006		09/28/20	09/10/20	10/10/20		340.00	0.00	0.00	340.00
		OUTSIDE SRV DIETARY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S2694	STANFORD VACUUM SERVICE				340.00	0.00	0.00	340.00
Vendor#	Vendor Name				Class	Pay Code				
S3940	STERIS CORPORATION				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	5821826		09/23/20	09/11/20	10/11/20		536.16	0.00	0.00	536.16
		INSTURMENT REPAIRS SURG								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S3940	STERIS CORPORATION				536.16	0.00	0.00	536.16
Vendor#	Vendor Name				Class	Pay Code				
11083	STRATUS VIDEO INTERPRETING									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	INV-4681		09/29/20	09/01/20	10/01/20		685.50	0.00	0.00	685.50
		OUTSIDE SRV ADMIN								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11083	STRATUS VIDEO INTERPRETING				685.50	0.00	0.00	685.50
Vendor#	Vendor Name				Class	Pay Code				
S2830	STRYKER SALES CORP				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	231391A		09/24/20	09/15/20	10/15/20		408.71	0.00	0.00	408.71
		SUPPLIES SURGERY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S2830	STRYKER SALES CORP				408.71	0.00	0.00	408.71
Vendor#	Vendor Name				Class	Pay Code				
11103	STUDER GROUP, LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	064310		09/11/20	09/08/20	10/08/20		17,500.00	0.00	0.00	17,500.00
		LEADERSHIP GROUP 9812								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11103	STUDER GROUP, LLC				17,500.00	0.00	0.00	17,500.00
Vendor#	Vendor Name				Class	Pay Code				
S2951	SYSCO FOOD SERVICES OF				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	509172477		09/28/20	09/17/20	10/07/20		1,237.40	0.00	0.00	1,237.40
		FOOD SUPPLIES DIETARY								
	509242631		09/28/20	09/24/20	10/14/20		849.32	0.00	0.00	849.32
		FOOD SUPPLIES DIETARY								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	S2951	SYSCO FOOD SERVICES OF				2,086.72	0.00	0.00	2,086.72

Vendor#	Vendor Name			Class	Pay Code				
T2539	T-SYSTEM, INC			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
205EV-3490		09/28/20	08/31/20	09/30/20		4,555.00	0.00	0.00	4,555.00
	MAINT CONTR ER								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	T2539	T-SYSTEM, INC				4,555.00	0.00	0.00	4,555.00

Vendor#	Vendor Name			Class	Pay Code				
11106	TELEVOX								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV001518461		09/23/20	08/31/20	09/30/20		311.72	0.00	0.00	311.72
	OUTSIDE SRV CLINIC								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11106	TELEVOX				311.72	0.00	0.00	311.72

Vendor#	Vendor Name			Class	Pay Code				
10765	TEXAS HOSPITAL ASSOCIATION								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20386		09/29/20	09/29/20	09/29/20		295.00	0.00	0.00	295.00
	CONFERENCE DUES THA Annual Conference Jan 21-22, 2016								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10765	TEXAS HOSPITAL ASSOCIATION				295.00	0.00	0.00	295.00

Vendor#	Vendor Name			Class	Pay Code				
T2204	TEXAS MUTUAL INSURANCE CO			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20379		09/28/20	09/28/20	09/28/20		6,028.00	0.00	0.00	6,028.00
	WORK COMP INS								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	T2204	TEXAS MUTUAL INSURANCE CO				6,028.00	0.00	0.00	6,028.00

Vendor#	Vendor Name			Class	Pay Code				
10758	TEXAS SELECT STAFFING, LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
0006996-51-079		09/23/20	09/03/20	10/03/20		2,052.00	0.00	0.00	2,052.00
	CONTRACT NURSING 8/25-27/2015								
0007038-51-079		09/23/20	09/09/20	10/09/20		2,052.00	0.00	0.00	2,052.00
	PROF FEES OB 8/28-30/2015								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10758	TEXAS SELECT STAFFING, LLC				4,104.00	0.00	0.00	4,104.00

Vendor#	Vendor Name			Class	Pay Code				
T2303	TG			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20366		09/24/20	09/24/20	09/24/20		135.35	0.00	0.00	135.35
	EMPLOYEE STUDENT LOAN C								

Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	T2303	TG				135.35	0.00	0.00	135.35

Vendor#	Vendor Name			Class	Pay Code				
V1050	THE VICTORIA ADVOCATE			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20369		09/24/20	06/28/20	07/28/20		24.80	0.00	0.00	24.80
	DUES & SUBSCRIPTIONS ADM								
203070		09/24/20	07/12/20	08/11/20		24.80	0.00	0.00	24.80

		DUES & SUBCRIPTIONS ADMI							
	20372		09/24/20	09/06/20	10/06/20	24.80	0.00	0.00	24.80
		DUES & SUBSCRIPTIONS ADM							
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		V1050	THE VICTORIA ADVOCATE			74.40	0.00	0.00	74.40
Vendor#	Vendor Name				Class	Pay Code			
10732	THERACOM, LLC								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	129383527-301		08/28/20	08/12/20	10/10/20		1,274.00	0.00	0.00	1,274.00
		PHARMACY DRUGS							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10732	THERACOM, LLC				1,274.00	0.00	0.00	1,274.00
Vendor#	Vendor Name				Class	Pay Code			
11119	THOMAS LAND PUBLISHERS INC								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	520		09/23/20	08/27/20	09/26/20		421.35	0.00	0.00	421.35
		SUPPLIES PHARMACY							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11119	THOMAS LAND PUBLISHERS INC				421.35	0.00	0.00	421.35
Vendor#	Vendor Name				Class	Pay Code			
T2250	THYSSENKRUPP ELEVATOR CORP				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	5000405828		09/23/20	09/09/20	10/09/20		895.00	0.00	0.00	895.00
		ELEVATOR REPAIRS							
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		T2250	THYSSENKRUPP ELEVATOR CORP				895.00	0.00	0.00	895.00
Vendor#	Vendor Name				Class	Pay Code			
T0801	TLC STAFFING				W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	14695		08/17/20	08/03/20	08/03/20		785.63	0.00	0.00	785.63
		CONTRACT NURSING 7/31/15								
	14937		09/28/20	09/21/20	09/21/20		527.10	0.00	0.00	527.10
		CONTRACT NURSING 9/18/15								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		T0801	TLC STAFFING				1,312.73	0.00	0.00	1,312.73
Vendor#	Vendor Name				Class	Pay Code			
U1054	UNIFIRST HOLDINGS				W				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	8150703956		09/11/20	09/08/20	10/08/20		46.60	0.00	0.00	46.60
		OUTSIDE SRV MAINT								
	8150704061		09/11/20	09/08/20	10/08/20		28.50	0.00	0.00	28.50
		OUTSIDE SRV BIO MED								
	8150704712		09/23/20	09/15/20	10/15/20		46.60	0.00	0.00	46.60
		OUTSIDE SRV MAINT								
	8150704814		09/23/20	09/15/20	10/15/20		28.50	0.00	0.00	28.50
		OUTSIDE SRV BIO MED								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		U1054	UNIFIRST HOLDINGS				150.20	0.00	0.00	150.20
Vendor#	Vendor Name				Class	Pay Code			
U1064	UNIFIRST HOLDINGS INC								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

8400202278	09/11/20	09/04/20	10/04/20		386.34	0.00	0.00	386.34
LAUNDRY SURGERY								
8400202323	09/11/20	09/04/20	10/04/20		830.50	0.00	0.00	830.50
LAUNDRY HOUSEKEEPING								
8400202453	09/11/20	09/08/20	10/08/20		204.18	0.00	0.00	204.18
LAUNDRY HOUSEKEEPING								
8400202455	09/11/20	09/08/20	10/08/20		175.14	0.00	0.00	175.14
LAUNDRY DIETARY								
8400202508	09/11/20	09/08/20	10/08/20		1,087.75	0.00	0.00	1,087.75
LAUNDRY HOUSEKEEPING								
8400202457	09/11/20	09/08/20	10/08/20		107.51	0.00	0.00	107.51
LAUNDRY HOUSEKEEPING								
8400202454	09/11/20	09/08/20	10/08/20		161.09	0.00	0.00	161.09
LAUNDRY HOUSEKEEPING								
8400202456	09/11/20	09/08/20	10/08/20		104.21	0.00	0.00	104.21
LAUNDRY OB								
8400202814	09/15/20	09/11/20	10/11/20		1,059.12	0.00	0.00	1,059.12
LAUNDRY HOUSEKEEPING								
9400202769	09/15/20	09/11/20	10/11/20		386.34	0.00	0.00	386.34
LAUNDRY SURGERY								
8400202939	09/23/20	09/15/20	10/15/20		204.18	0.00	0.00	204.18
LAUNDRY HOUSEKEEPING								
8400202940	09/23/20	09/15/20	10/15/20		122.87	0.00	0.00	122.87
LAUNDRY HOUSEKEEPING								
8400202943	09/23/20	09/15/20	10/15/20		107.51	0.00	0.00	107.51
LAUNDRY HOUSEKEEPING								
8400202942	09/23/20	09/15/20	10/15/20		104.21	0.00	0.00	104.21
LAUNDRY OB								
8400202994	09/23/20	09/15/20	10/15/20		1,015.51	0.00	0.00	1,015.51
LAUNDRY HOUSEKEEPING								
8400202941	09/23/20	09/15/20	10/15/20		175.14	0.00	0.00	175.14
LAUNDRY DIETARY								
8400201991	09/28/20	09/01/20	10/01/20		175.21	0.00	0.00	175.21
LAUNDRY DIETARY								
8400202495	09/28/20	09/08/20	10/08/20		130.49	0.00	0.00	130.49
LAUNDRY DIETARY								
8400202983	09/28/20	09/15/20	10/15/20		130.49	0.00	0.00	130.49
LAUNDRY DIETARY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	6,667.79	0.00	0.00	6,667.79

Vendor#	Vendor Name	Class	Pay Code
U1056	UNIFORM ADVANTAGE	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
6404926		09/23/20	09/04/20	10/04/20			104.93	0.00	0.00	104.93
	EMPLOYEE UNIFORMS									
6420473		09/24/20	09/14/20	10/14/20			~~31.85~~	0.00	0.00	~~31.85~~ 29.98
	EMPLOYEE UNIFORMS									
6414292		09/28/20	09/10/20	10/10/20			239.87	0.00	0.00	239.87
	EMPLOYEE UNIFORMS									
6416661		09/28/20	09/11/20	10/11/20			306.53	0.00	0.00	306.53
	EMPLOYEE UNIFORMS									
6426006		09/28/20	09/16/20				23.29	0.00	0.00	23.29

EMPLOYEE UNIFORMS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1056	UNIFORM ADVANTAGE	706.47	0.00	0.00	706.47 704.60

Vendor#	Vendor Name	Class	Pay Code
10172	US FOOD SERVICE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
5510442		09/23/20	09/14/20	10/04/20		91.05	0.00	0.00	91.05
	FOOD SUPPLIES DIETARY								
5510441		09/23/20	09/14/20	10/04/20		2,216.81	0.00	0.00	2,216.81
	FOOD SUPPLIES DIETARY								
4844398		09/28/20	08/07/20	08/27/20		44.40	0.00	0.00	44.40
	SUPPLIES DIETARY								
5237093		09/28/20	08/28/20	09/17/20		49.20	0.00	0.00	49.20
	SUPPLIES DIETARY								
5244905		09/28/20	08/29/20	09/18/20		44.61	0.00	0.00	44.61
	SUPPLIES ADMIN								
5293703		09/28/20	09/01/20	09/21/20		64.84	0.00	0.00	64.84
	SUPPLIES DIETARY								
5438376		09/28/20	09/09/20	09/29/20		88.40	0.00	0.00	88.40
	SUPPLIES DIETARY								
5551912		09/28/20	09/15/20	10/05/20		30.61	0.00	0.00	30.61
	SUPPLIES DIETARY								
5578602		09/28/20	09/17/20	10/07/20		2,307.00	0.00	0.00	2,307.00
	FOOD SUPPLIES DIETARY								
5640259		09/28/20	09/21/20	10/11/20		2,239.17	0.00	0.00	2,239.17
	FOOD SUPPLIES DIETARY								
5709717		09/28/20	09/24/20	10/14/20		2,319.89	0.00	0.00	2,319.89
	FOOD SUPPLIES DIETARY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10172	US FOOD SERVICE	9,495.98	0.00	0.00	9,495.98

Vendor#	Vendor Name	Class	Pay Code
U2000	US POSTAL SERVICE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20371		09/24/20	09/14/20	09/14/20		1,200.00	0.00	0.00	1,200.00
	POSTAGE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U2000	US POSTAL SERVICE	1,200.00	0.00	0.00	1,200.00

Vendor#	Vendor Name	Class	Pay Code
10793	WAGEWORKS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
125AI0418052		09/23/20	09/11/20	10/11/20		125.00	0.00	0.00	125.00
	FLEX SPENDING ADMIN FEE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10793	WAGEWORKS	125.00	0.00	0.00	125.00

Vendor#	Vendor Name	Class	Pay Code
10915	WAGEWORKS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20367		09/24/20	09/24/20			1,725.28	0.00	0.00	1,725.28
	MONEY TO FUND FLEX SPENI								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10915	WAGEWORKS	1,725.28	0.00	0.00	1,725.28

Vendor#	Vendor Name				Class	Pay Code				
W1005	WALMART COMMUNITY				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	019880		09/24/20	08/19/20	10/12/20		5.42	0.00	0.00	5.42
		SUPPLIES PHARMACY								
	021886		09/24/20	08/21/20	10/12/20		6.96	0.00	0.00	6.96
		SUPPLIES XRAY								
	024089		09/24/20	08/24/20	10/12/20		98.80	0.00	0.00	98.80
		SUPPLIES PLANT OPS								
	001098		09/24/20	09/01/20			27.94	0.00	0.00	27.94
		SUPPLIES IT								
	009445		09/24/20	09/09/20	10/12/20		53.36	0.00	0.00	53.36
		SUPPLIES SURGERY & PT								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		W1005	WALMART COMMUNITY				192.48	0.00	0.00	192.48
Vendor#	Vendor Name				Class	Pay Code				
I1110	WERFEN USA LLC									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	9110236514		09/29/20	09/15/20	10/15/20		1,571.67	0.00	0.00	1,571.67
		MAINT CONT LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		I1110	WERFEN USA LLC				1,571.67	0.00	0.00	1,571.67
Vendor#	Vendor Name				Class	Pay Code				
10325	WHOLESALE ELECTRIC SUPPLY									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	79-3936472		09/11/20	09/04/20	10/04/20		198.90	0.00	0.00	198.90
		SUPPLIES PLANT OPS								
	79-3936737		09/15/20	09/08/20	10/08/20		155.04	0.00	0.00	155.04
		SUPPLIES XRAY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10325	WHOLESALE ELECTRIC SUPPLY				353.94	0.00	0.00	353.94
Vendor#	Vendor Name				Class	Pay Code				
Y1050	YOUNG				M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	149257		09/29/20	09/09/20	10/09/20		7.60	0.00	0.00	7.60
		SUPPLIES BIO MET								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		Y1050	YOUNG				7.60	0.00	0.00	7.60

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	338,964.44	0.00	0.00	338,964.44

Pg 18-19 correction { <706.47> +704.60 = 338,962.57

APPROVED ON SEP 30 2015 COUNTY AUDITOR CALHOUN COUNTY, TEXAS

Michael J. Pfeifer
Calhoun County Judge
Date: 10-9-15

RUN DATE:10/01/15 MEMORIAL MEDICAL CENTER PAGE 1 023
TIME:09:14 CHECK REGISTER GLCKREG
10/01/15 THRU 10/01/15

BANK	CODE	NUMBER	DATE	AMOUNT	PAYEE
	A/P	163301	10/01/15	586.72	CUSTOM MEDICAL SPECIALTIES
	A/P	163302	10/01/15	9,495.98	US FOOD SERVICE
	A/P	163303	10/01/15	578.23	MERCEDES MEDICAL
	A/P	163304	10/01/15	215.00	ECPTOTE
	A/P	163305	10/01/15	353.94	WHOLESALE ELECTRIC SUPPLY
	A/P	163306	10/01/15	1,312.15	CENTURION MEDICAL PRODUCTS
	A/P	163307	10/01/15	1,312.13	DEWITT POTH & SON
	A/P	163308	10/01/15	275.62	PRECISION DYNAMICS CORP (PDC)
	A/P	163309	10/01/15	.00	VOIDED
	A/P	163310	10/01/15	14,402.43	MORRIS & DICKSON CO, LLC
	A/P	163311	10/01/15	573.10	PLATINUM CODE
	A/P	163312	10/01/15	25,525.00	CPP WOUND CARE #28,LLC
	A/P	163313	10/01/15	35,619.87	NOBLE AMERICAS ENERGY
	A/P	163314	10/01/15	2,778.90	PENLON, INC
	A/P	163315	10/01/15	545.27	CENTURYLINK
	A/P	163316	10/01/15	274.43	FIVE STAR STERILIZER SERVICES
	A/P	163317	10/01/15	395.85	SIGN AD, LTD.
	A/P	163318	10/01/15	1,274.00	THERACOM, LLC
	A/P	163319	10/01/15	5,209.42	PEM FILINGS
	A/P	163320	10/01/15	4,104.00	TEXAS SELECT STAFFING, LLC
	A/P	163321	10/01/15	295.00	TEXAS HOSPITAL ASSOCIATION
	A/P	163322	10/01/15	64.00	MAGAW MEDICAL
	A/P	163323	10/01/15	125.00	WAGEWORKS
	A/P	163324	10/01/15	24,477.48	MMC EMPLOYEE BENEFIT PLAN
	A/P	163325	10/01/15	7,141.50	NIGHTINGALE NURSES, LLC
	A/P	163326	10/01/15	1,725.28	WAGEWORKS
	A/P	163327	10/01/15	230.10	ROSHANDA GRAY
	A/P	163328	10/01/15	1,457.50	M G TRUST
	A/P	163329	10/01/15	110.00	DANIELLE SALINAS
	A/P	163330	10/01/15	75.00	FIRST CLEARING
	A/P	163331	10/01/15	900.84	BIRCH COMMUNICATIONS
	A/P	163332	10/01/15	2,079.00	FUSION MEDICAL STAFFING, LLC
	A/P	163333	10/01/15	685.50	STRATUS VIDEO INTERPRETING
	A/P	163334	10/01/15	17,500.00	STUDER GROUP, LLC
	A/P	163335	10/01/15	311.72	TELEVOX
	A/P	163336	10/01/15	1,935.00	DESIGNS FOR VISION, INC.
	A/P	163337	10/01/15	421.35	THOMAS LAND PUBLISHERS INC
	A/P	163338	10/01/15	7,040.00	EXEBRIDGE
	A/P	163339	10/01/15	250.00	K & M SPORTS
	A/P	163340	10/01/15	66,864.83	BUSINESS INTERIORS BY STAPLES
	A/P	163341	10/01/15	94.08	KELLY SCHOTT
	A/P	163342	10/01/15	533.24	GULF COAST HARDWARE / ACE
	A/P	163343	10/01/15	302.40	AMERISOURCEBERGEN DRUG CORP
	A/P	163344	10/01/15	23.97	AMTEC MEDICAL INC
	A/P	163345	10/01/15	27.59	AQUA BEVERAGE COMPANY
	A/P	163346	10/01/15	731.65	BAXTER HEALTHCARE CORP
	A/P	163347	10/01/15	25,004.05	BECKMAN COULTER INC
	A/P	163348	10/01/15	25.00	CAL COM FEDERAL CREDIT UNION
	A/P	163349	10/01/15	283.50	CERTIFIED LABORATORIES
	A/P	163350	10/01/15	775.00	CERTIFIED PROSTHETICS &

BANK--CHECK CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	163351	10/01/15	263.00	CYGNUS MEDICAL LLC
A/P	163352	10/01/15	6,216.14	CITY OF PORT LAVACA
A/P	163353	10/01/15	119.76	CONMED CORPORATION
A/P	163354	10/01/15	6,334.95	EVIDENT
A/P	163355	10/01/15	70.00	DOWNTOWN CLEANERS
A/P	163356	10/01/15	79.95	DLE PAPER & PACKAGING
A/P	163357	10/01/15	8,015.17	FISHER HEALTHCARE
A/P	163358	10/01/15	878.23	GULF COAST PAPER COMPANY
A/P	163359	10/01/15	134.45	GOLDEN CRESCENT COMMUNICATIONS
A/P	163360	10/01/15	430.17	H E BUTT GROCERY
A/P	163361	10/01/15	254.02	HAYES ELECTRIC SERVICE
A/P	163362	10/01/15	271.71	HILL-ROM COMPANY, INC
A/P	163363	10/01/15	33.95	INDEPENDENCE MEDICAL
A/P	163364	10/01/15	1,571.67	WERFEN USA LLC
A/P	163365	10/01/15	121.43	J & J HEALTH CARE SYSTEMS, INC
A/P	163366	10/01/15	1,421.30	SHIRLEY KARNEI
A/P	163367	10/01/15	73.00	LABCORP OF AMERICA HOLDINGS
A/P	163368	10/01/15	460.30	MARKS PLUMBING PARTS
A/P	163369	10/01/15	792.42	MARKETLAB, INC
A/P	163370	10/01/15	145.63	MARTIN PRINTING CO
A/P	163371	10/01/15	1,952.00	MCKESSON MEDICAL SURGICAL INC
A/P	163372	10/01/15	214.28	MEDLINE INDUSTRIES INC
A/P	163373	10/01/15	185.62	MMC AUXILIARY GIFT SHOP
A/P	163374	10/01/15	1,507.73	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	163375	10/01/15	490.40	MEDIVATORS
A/P	163376	10/01/15	108.04	OFFICE DEPOT
A/P	163377	10/01/15	83.50	OLYMPUS AMERICA INC
A/P	163378	10/01/15	.00	VOIDED
A/P	163379	10/01/15	.00	VOIDED
A/P	163380	10/01/15	8,022.70	OWENS & MINOR
A/P	163381	10/01/15	733.96	POLYMEDCO INC.
A/P	163382	10/01/15	36.89	POWER ELECTRIC
A/P	163383	10/01/15	900.00	RADIOLOGY UNLIMITED, PA
A/P	163384	10/01/15	289.00	MARISSA SUTHERLAND
A/P	163385	10/01/15	213.54	SERVICE SUPPLY OF VICTORIA INC
A/P	163386	10/01/15	247.06	SMITH & NEPHEW
A/P	163387	10/01/15	4,376.00	SO TEX BLOOD & TISSUE CENTER
A/P	163388	10/01/15	340.00	STANFORD VACUUM SERVICE
A/P	163389	10/01/15	408.71	STRYKER SALES CORP
A/P	163390	10/01/15	298.24	DANETTE BETHANY
A/P	163391	10/01/15	2,086.72	SYSCO FOOD SERVICES OF
A/P	163392	10/01/15	536.16	STERIS CORPORATION
A/P	163393	10/01/15	1,312.73	TLC STAFFING
A/P	163394	10/01/15	6,028.00	TEXAS MUTUAL INSURANCE CO
A/P	163395	10/01/15	895.00	THYSSENKRUPP ELEVATOR CORP
A/P	163396	10/01/15	135.35	TG
A/P	163397	10/01/15	4,555.00	T-SYSTEM, INC
A/P	163398	10/01/15	150.20	UNIFIRST HOLDINGS
A/P	163399	10/01/15	704.60	UNIFORM ADVANTAGE
A/P	163400	10/01/15	.00	VOIDED
A/P	163401	10/01/15	6,667.79	UNIFIRST HOLDINGS INC

BANK--CHECK				
CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	163402	10/01/15	1,200.00	US POSTAL SERVICE
A/P	163403	10/01/15	74.40	THE VICTORIA ADVOCATE
A/P	163404	10/01/15	192.48	WALMART COMMUNITY
A/P	163405	10/01/15	7.60	YOUNG
TOTALS:			338,962.57	

APPROVED
ON
SEP 30 2015
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

PH

TOLL FEE PHONE NUMBER: 1-800-555-3453
(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

		ENTER:	
☑ "ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"			
☑ "ENTER YOUR 4-DIGIT PIN"	###		
☑ "MAKE A PAYMENT, PRESS 1"		1	
☑ "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★	941	#
☑ "IF FEDERAL TAX DEPOSIT ENTER 1"		1	
☑ "ENTER 2-DIGIT TAX FILING YEAR"	★	15	
☑ "ENTER 2-DIGIT TAX FILING ENDING MONTH"	★	9	
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			
☑ "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★	$ 93,590.64	#
"1 TO CONFIRM"		1	
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"		$ 44,754.88	#
"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 10,466.86	#
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 38,368.90	#
	CHECK	$ -	
☐ "6-DIGIT SETTLEMENT DATE"	★	9/2/2015	
"1 TO CONFIRM"		1	
☐ ACKNOWLEDGEMENT NUMBER		63038669	

CALLED IN BY:	CAtkinson
CALLED IN DATE:	9/1/2015
CALLED IN TIME:	9:30am

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

ENTER VOID CKS AS NEGATIVE NUMBERS

		VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: BEGIN	08/07/15					
PAY PERIOD: END	08/20/15					
PAY DATE:	08/27/15					
GROSS PAY:	$ 376,183.48					$ 376,183.48
DEDUCTIONS:						
-	$ 958.84					$ 958.84
BOOTS	$ -					$ -
CAFÉ-C	$ 584.13					$ 584.13
CAFÉ-D	$ 1,154.69					$ 1,154.69
CAFÉ-H	$ 11,274.25					$ 11,274.25
CAFÉ-I	$ 168.49					$ 168.49
CAFÉ-L	$ 363.70					$ 363.70
CAFÉ-P	$ 403.19					$ 403.19
CANCER	$ 41.18					$ 41.18
CLINIC	$ 96.00					$ 96.00
COMBIN	$ 1,201.79					$ 1,201.79
CREDUN	$ 25.00					$ 25.00
DENTAL	$ 302.50					$ 302.50
DEP-LF	$ 467.96					$ 467.96
EAT	$ 215.00					$ 215.00
FED TAX	$ 38,368.90					$ 38,368.90
FICA-M	$ 5,233.40					$ 5,233.40
FICA-O	$ 22,365.45					$ 22,365.45
FLEX S	$ 1,308.61					$ 1,308.61
FLX-FE	$ 69.50					$ 69.50
GIFT S	$ 152.45					$ 152.45
GRP-IN	$ 129.26					$ 129.26
GTL	$ -					$ -
HOSP-I	$ 2,485.00					$ 2,485.00
MISC	$ -					$ -
OTHER	$ 753.38					$ 753.38
PHI	$ -					$ -
PR FIN	$ 470.71					$ 470.71
RELAY	$ -					$ -
REPAY	$ -					$ -
STONE	$ 1,495.00					$ 1,495.00
STONE2	$ 75.00					$ 75.00
[illegible]DEN	$ 131.94					$ 131.94
[illegible]R	$ 26,332.87					$ 26,332.87
UW/HOS	$ -					$ -
TOTAL DEDUCTIONS:	$ 116,628.19	$ -	$ -	$ -	$ -	$ 116,628.19
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	
NET PAY:	$ 259,555.29	$ -	$ -	$ -	$ -	$ 259,555.29
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	

TOTAL CAFÉ 125 PLAN: $ 15,257.06 — Less Exempt:

TAXABLE PAY: $ 360,926.42 $ 360,926.42

		CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45%	$ 5,233.43		
FICA - MED (EE)	1.45%	$ 5,233.43	$ 5,233.40	$ 0.03
FICA - SOC SEC (ER)	6.20%	$ 22,377.44		
FICA - SOC SEC (EE)	6.20%	$ 22,377.44	$ 22,365.45	$ 11.99
FED WITHHOLDING		$ 38,368.90	$ 38,368.90	
TAX DEPOSIT:		$ 93,590.64	$ 93,566.60	$ 24.04
FICA - MEDICARE	2.90%	$ 10,466.86		
FICA - SOCIAL SECURITY	12.40%	$ 44,754.88		
FED WITHHOLDING		$ 38,368.90		
TOTAL TAX:		$ 93,590.64		

Exempt Amt:	
Employees over FICA-SS Cap:	$ -
Jason Anglin	
Diane	
Paycode S - Employee Reimb.:	
Roshanda S. Gray	
TOTAL:	$ -

PREPARED BY: Clarri Atkinson

PREPARED DATE: 9/1/2015

TOLL FEE PHONE NUMBER: 1-800-555-3453
(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

		ENTER:	
☑	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"		
☑	"ENTER YOUR 4-DIGIT PIN"	###	
☑	"MAKE A PAYMENT, PRESS 1"		1
☑	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★	941 #
☑	"IF FEDERAL TAX DEPOSIT ENTER 1"		1
☑	"ENTER 2-DIGIT TAX FILING YEAR"	★	15
☑	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★	9

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

☑	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★	$ 93,543.01 #
	"1 TO CONFIRM"		1
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"		$ 43,877.52 #
	"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 10,474.62 #
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 39,190.87 #
		CHECK	$ -
☑	"6-DIGIT SETTLEMENT DATE"	★	9/16/2015
	"1 TO CONFIRM"		1

☐	ACKNOWLEDGEMENT NUMBER	30321900

CALLED IN BY:	Cathleen
CALLED IN DATE:	9/15/2015
CALLED IN TIME:	9:33am

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED *3/18/2014*

ENTER VOID CKS AS NEGATIVE NUMBERS

			VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: BEGIN		08/21/15					
PAY PERIOD: END		09/03/15					
PAY DATE:		09/10/15					
GROSS PAY:		$ 376,180.71			$ 197.76		$ 376,378.47
DEDUCTIONS:							
[illegible]		$ 772.00					$ 772.00
BOOTS		$ -					$ -
CAFÉ-C		$ 584.13					$ 584.13
CAFÉ-D		$ 1,165.15					$ 1,165.15
CAFÉ-H		$ 11,217.10					$ 11,217.10
CAFÉ-I		$ 168.49					$ 168.49
CAFÉ-L		$ 345.40					$ 345.40
CAFÉ-P		$ 395.93					$ 395.93
CANCER		$ 28.50					$ 28.50
CLINIC		$ 118.00					$ 118.00
COMBIN		$ 1,142.09					$ 1,142.09
CREDUN		$ 25.00					$ 25.00
DENTAL		$ 292.50					$ 292.50
DEP-LF		$ 449.82					$ 449.82
EAT		$ 50.00					$ 50.00
FED TAX		$ 39,190.87					$ 39,190.87
FICA-M		$ 5,234.49			$ 2.87		$ 5,237.36
FICA-O		$ 21,938.61			$ 12.26		$ 21,950.87
FLEX S		$ 1,308.61					$ 1,308.61
FLX-FE		$ 69.50					$ 69.50
GIFT S		$ 141.30					$ 141.30
GRP-IN		$ 129.26					$ 129.26
GTL		$ -					$ -
HOSP-I		$ 2,380.00					$ 2,380.00
MISC		$ -					$ -
OTHER		$ 2,158.61					$ 2,158.61
PHI		$ -					$ -
PR FIN		$ 468.29					$ 468.29
RELAY		$ -					$ -
REPAY		$ -					$ -
STONE		$ 1,495.00					$ 1,495.00
STONE2		$ 75.00					$ 75.00
[illegible]EN		$ 144.40					$ 144.40
[illegible]R		$ 26,332.71			$ 13.84		$ 26,346.55
UW/HOS		$ -					$ -
TOTAL DEDUCTIONS:		$ 117,820.76	$ -	$ -	$ 28.97	$ -	$ 117,849.73
		SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	
NET PAY:		$ 258,359.95	$ -	$ -	$ 168.79	$ -	$ 258,528.74
		SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	

TOTAL CAFÉ 125 PLAN: $ 15,184.81 **Less Exempt:**

TAXABLE PAY: $ 361,193.66 $ 353,850.93 **Exempt Amt:**

		CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45%	$ 5,237.31		
FICA - MED (EE)	1.45%	$ 5,237.31	$ 5,237.36	$ (0.05)
FICA - SOC SEC (ER)	6.20%	$ 21,938.76		
FICA - SOC SEC (EE)	6.20%	$ 21,938.76	$ 21,950.87	$ (12.11)
FED WITHHOLDING		$ 39,190.87	$ 39,190.87	
TAX DEPOSIT:		$ 93,543.01	$ 93,567.33	$ (24.32)

FICA - MEDICARE	2.90%	$ 10,474.62
FICA - SOCIAL SECURITY	12.40%	$ 43,877.52
FED WITHHOLDING		$ 39,190.87
TOTAL TAX:		$ 93,543.01

Employees over FICA-SS Cap: $ -

Jason Anglin $ 7,342.73

8/27 & 9/10 p/r

Paycode S - Employee Reimb.:

Roshanda S. Gray

TOTAL: $ 7,342.73

PREPARED BY: Clarri Atkinson

PREPARED DATE: 9/15/2015

Employee	PayCd	Dept	Hrs	OT	SH	WE	HO	CB	Rate	Gross	Code	Amount	Code	Amount	Code	Amount
54024 FT Hrly: 12.3600	I	074	16.00	N	N	N	N		12.3600	197.76	FICA-M	2.87	FICA-O	12.26	TSA-R	13.84
MONICA A ESCALANTE																
Fed-Ex: M-02 St-Ex: -00																
Total:			16.00							(Gross: 197.76	Deductions:	28.97	Net:	168.79)		

Department Summary

PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross
I		16.00	N	N	N	N		197.76

Deductions Summary					
A/R	AWARDS		BOOTS		
CAFE H	CAFE-C		CAFE-D		
CAFE-F	CAFE-H		CAFE-I		
CAFE-L	CAFE-P		CANCER		
CLINIC	COMBIN		CREDUN		
DENTAL	DEP-LF		EAT		
FEDTAX	FICA-M	2.87	FICA-O	12.26	
FLEX S	FLX FE		FORT D		
FUTA	GIFT S		GRANT		
GRP-IN	GTL		HOSP-I		
ID TFT	LEAF		MISC		
MISC/	OTHER		PHI		
PHI***	PR FIN		RELAY		
REPAY	SIGNON		ST-TX		
STONE	STONE2		STUDEN		
TSA-1	TSA-2		TSA-C		
TSA-P	TSA-R	13.84	TUTION		
UW/HOS					

Department Totals: 16.00 (Gross: 197.76 Deductions: 28.97 Net: 168.79)

Checks Count:- FT 1 PT Other Female 1 Male Credit OverAmt ZeroNet Term Total: 1

CR #617762

Final Summary

PayCode Summary

PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross
1	REGULAR PAY-S1	9009.25	N		N	N		173808.89
1	REGULAR PAY-S1	1508.25	N		N	N	N	59942.94
1	REGULAR PAY-S1	184.50	Y		N	N		5505.46
2	REGULAR PAY-S2	2439.75	N		N	N		54235.47
2	REGULAR PAY-S2	126.00	Y		N	N		4156.42
3	REGULAR PAY-S3	1448.00	N		N	N		36105.27
3	REGULAR PAY-S3	101.00	Y		N	N		3955.05
C	CALL PAY	256.00	N		N	N	N	512.00
C	CALL PAY	2657.25	N	1	N	N		5314.50
D	DOUBLE TIME	5.75	N		N	N	N	417.91
E	EXTRA WAGES		N		N	N	N	1525.55
E	EXTRA WAGES		N	1	N	N	N	1178.75
F	FUNERAL LEAVE	16.00	N	1	N	N		336.32
I	INSERVICE	41.53	N	1	N	N		1290.89
J	JURY LEAVE	12.50	N	1	N	N		198.00
K	EXTENDED-ILLNESS-BANK	140.00	N		N	N	N	1479.16
K	EXTENDED-ILLNESS-BANK	114.00	N	1	N	N		2420.86
P	PAID-TIME-OFF	90.00	N		N	N	N	1667.68
P	PAID-TIME-OFF	1023.32	N	1	N	N		21031.59
X	CALL PAY 2	160.00	N		N	N	N	320.00
Y	YMCA/CURVES		N		N	N	N	45.00
Z	CALL PAY 3	96.00	N		N	N	N	288.00
t	PHONE & DATA		N		N	N	N	445.00

Deductions Summary

Code	Amount	Code	Amount	Code	Amount
A/R	772.00	AWARDS		BOOTS	
CAFE H		CAFE-C	584.13	CAFE-D	1165.15
CAFE-F		CAFE-H	11217.10	CAFE-I	168.49
CAFE-L	345.40	CAFE-P	395.93	CANCER	28.50
CLINIC	118.00	COMBIN	1142.09	CREDUN	25.00
DENTAL	292.50	DEP-LF	449.82	EAT	50.00
FEDTAX	39190.87	FICA-M	5234.49	FICA-O	21938.61
FLEX S	1308.61	FLX FE	69.50	FORT D	
FUTA		GIFT S	141.30	GRANT	
GRP-IN	129.26	GTL		HOSP-I	2380.00
ID TFT		LEAF		MISC	
MISC/		OTHER	2158.61	PHI	
PHI***		PR FIN	468.29	RELAY	
REPAY		SIGNON		ST-TX	
STONE	1495.00	STONE2	75.00	STUDEN	144.40
TSA-1		TSA-2		TSA-C	
TSA-P		TSA-R	26332.71	TUTION	
UW/HOS					

Grand Totals: 19429.10 ------- (Gross: 376180.71 Deductions: 117820.76 Net: 258359.95)

Checks Count:- FT 185 PT 14 Other 41 Female 206 Male 34 Credit OverAmt 27 ZeroNet Term Total: 240

TOLL FEE PHONE NUMBER: 1-800-555-3453
(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

		ENTER:	
☑	"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"		
☑	"ENTER YOUR 4-DIGIT PIN"	###	
☑	"MAKE A PAYMENT, PRESS 1"		1
☑	"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★	941 #
☑	"IF FEDERAL TAX DEPOSIT ENTER 1"		1
☑	"ENTER 2-DIGIT TAX FILING YEAR"	★	15
☑	"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★	9
	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		
☑	"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★	$ 93,019.84 #
	"1 TO CONFIRM"		1
	"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"		$ 44,026.96 #
	"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 10,493.78 #
	"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 38,499.10 #
		CHECK	$ -
☑	"6-DIGIT SETTLEMENT DATE"	★	9/30/2015
	"1 TO CONFIRM"		1
☐	ACKNOWLEDGEMENT NUMBER		70647180

CALLED IN BY:	
CALLED IN DATE:	9/25/2015
CALLED IN TIME:	11:58 AM

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED *3/18/2014*

ENTER VOID CKS AS NEGATIVE NUMBERS

		VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: BEGIN	09/04/15					
PAY PERIOD: END	09/17/15					
PAY DATE:	09/24/15					
GROSS PAY:	$ 377,436.27			$ 197.88		$ 377,634.15
DEDUCTIONS:						
[illegible]	$ 961.60					$ 961.60
BOOTS	$ -					$ -
CAFÉ-C	$ 618.91					$ 618.91
CAFÉ-D	$ 1,169.31					$ 1,169.31
CAFÉ-H	$ 11,329.99					$ 11,329.99
CAFÉ-I	$ 168.49					$ 168.49
CAFÉ-L	$ 364.32					$ 364.32
CAFÉ-P	$ 403.53					$ 403.53
CANCER	$ 28.50					$ 28.50
CLINIC	$ 98.00					$ 98.00
COMBIN	$ 1,142.09					$ 1,142.09
CREDUN	$ 25.00					$ 25.00
DENTAL	$ 292.50					$ 292.50
DEP-LF	$ 449.82					$ 449.82
EAT	$ 20.00					$ 20.00
FED TAX	$ 38,499.10					$ 38,499.10
FICA-M	$ 5,243.99			$ 2.87		$ 5,246.86
FICA-O	$ 22,001.22			$ 12.27		$ 22,013.49
FLEX S	$ 1,725.28					$ 1,725.28
FLX-FE	$ 69.50					$ 69.50
GIFT S	$ 190.98					$ 190.98
GRP-IN	$ 129.26					$ 129.26
GTL	$ -					$ -
HOSP-I	$ 2,380.00					$ 2,380.00
MISC	$ -					$ -
OTHER	$ 1,618.08					$ 1,618.08
PHI	$ -					$ -
PR FIN	$ 481.45					$ 481.45
RELAY	$ -					$ -
REPAY	$ -					$ -
STONE	$ 1,457.50					$ 1,457.50
STONE2	$ 75.00					$ 75.00
ST[illegible]EN	$ 144.40					$ 144.40
T[illegible]	$ 26,401.91			$ 13.85		$ 26,415.76
UWHOS	$ -					$ -
TOTAL DEDUCTIONS:	$ 117,489.73	$ -	$ -	$ 28.99	$ -	$ 117,518.72
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	
NET PAY: (includes 617.63 628.20)	$ 259,946.54	$ -	$ -	$ 168.89	$ -	$ 260,115.43 ✓
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	
TOTAL CAFÉ 125 PLAN:	$ 15,779.83	Less Exempt:				
TAXABLE PAY:	$ 361,854.32	$ 355,056.07				Exempt Amt:

		CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45%	$ 5,246.89		
FICA - MED (EE)	1.45%	$ 5,246.89	$ 5,246.86	$ 0.03
FICA - SOC SEC (ER)	6.20%	$ 22,013.48		
FICA - SOC SEC (EE)	6.20%	$ 22,013.48	$ 22,013.49	$ (0.01)
FED WITHHOLDING		$ 38,499.10	$ 38,499.10	
TAX DEPOSIT:		$ 93,019.84	$ 93,019.80	$ 0.04
FICA - MEDICARE	2.90%	$ 10,493.78		
FICA - SOCIAL SECURITY	12.40%	$ 44,026.96		
FED WITHHOLDING		$ 38,499.10		
TOTAL TAX:		$ 93,019.84 ✓		

Employees over FICA-SS Cap:	$ -
Jason Anglin	$ 6,798.25
8/27 & 9/10 p/r	
Paycode S - Employee Reimb.:	
Roshanda S. Gray	
TOTAL:	$ 6,798.25

PREPARED BY: Clarri Atkinson

PREPARED DATE: 9/25/2015

Final Summary

PayCode Summary

PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross
1	REGULAR PAY-S1	8468.75	N		N	N		170508.36
1	REGULAR PAY-S1	1048.00	N		N	N	N	40454.38
1	REGULAR PAY-S1	222.25	N		N	Y		6428.44
1	REGULAR PAY-S1	156.00	Y		N	N		4491.93
2	REGULAR PAY-S2	2423.00	N		N	N		54896.61
2	REGULAR PAY-S2	147.25	N		N	Y		4936.88
2	REGULAR PAY-S2	76.25	Y		N	N		2572.05
3	REGULAR PAY-S3	1500.00	N		N	N		39322.22
3	REGULAR PAY-S3	96.25	N		N	Y		3894.51
3	REGULAR PAY-S3	29.00	Y		N	N		1004.37
3	REGULAR PAY-S3	.50	Y		N	N	N	24.69
C	CALL PAY	2749.50	N	1	N	N		5499.00
D	DOUBLE TIME	8.25	N		N	N		661.49
D	DOUBLE TIME	3.75	N		N	N	N	293.18
E	EXTRA WAGES		N		N	N	N	114.39
E	EXTRA WAGES		N	1	N	N	N	812.75
F	FUNERAL LEAVE	20.00	N	1	N	N		409.36
I	INSERVICE	43.00	N	1	N	N		1152.36
J	JURY LEAVE	8.00	N	1	N	N		126.72
K	EXTENDED-ILLNESS-BANK	80.00	N		N	N	N	914.40
K	EXTENDED-ILLNESS-BANK	156.00	N	1	N	N		2522.68
P	PAID-TIME-OFF	50.00	N		N	N	N	1219.38
P	PAID-TIME-OFF	1550.00	N	1	N	N		33672.86
X	CALL PAY 2	128.00	N		N	N	N	256.00
X	CALL PAY 2	16.00	N	1	N	N		32.00
Z	CALL PAY 3	72.00	N		N	N	N	216.00
Z	CALL PAY 3	48.00	N	1	N	N		144.00
p	PAID TIME OFF - PROBATION	62.00	N	1	N	N		855.26

Deductions Summary

Code	Amount	Code	Amount	Code	Amount
A/R	961.60	AWARDS		BOOTS	
CAFE H		CAFE-C	618.91	CAFE-D	1169.31
CAFE-F		CAFE-H	11329.99	CAFE-I	168.49
CAFE-L	364.32	CAFE-P	403.53	CANCER	28.50
CLINIC	98.00	COMBIN	1142.09	CREDUN	25.00
DENTAL	292.50	DEP-LF	449.82	EAT	20.00
FEDTAX	38499.10	FICA-M	5243.99	FICA-O	22001.22
FLEX S	1725.28	FLX FE	69.50	FORT D	
FUTA		GIFT S	190.98	GRANT	
GRP-IN	129.26	GTL		HOSP-I	2380.00
ID TFT		LEAF		MISC	
MISC/		OTHER	1618.08	PHI	
PHI***		PR FIN	481.45	RELAY	
REPAY		SIGNON		ST-TX	
STONE	1457.50	STONE2	75.00	STUDEN	144.40
TSA-1		TSA-2		TSA-C	
TSA-P		TSA-R	26401.91	TUTION	
UW/HOS					

Grand Totals: 19161.75 (Gross: 377436.27 Deductions: 117489.73 Net: 259946.54)

Checks Count:- FT 186 PT 14 Other 43 Female 210 Male 33 Credit OverAmt 25 ZeroNet Term Total: 243

Department 002
Dept. Sequence

Num/Type/Name/Pay/Exempt	PayCd	Dept	Hrs	OT	SH	WE	HO	CB	Rate	Gross	Code	Amount	Code	Amount	Code	Amount
00474 FT Hrly: 16.4900 K	K	002	12.00	N		N	N	N	16.4900	197.88	FICA-M	2.87	FICA-O	12.27	TSA-R	13.85
FRANCISCA FRANCO																
Fed-Ex: M-00 St-Ex: M-00																
Total:			12.00						(Gross:	197.88	Deductions:	28.99	Net:	168.89)		

Department Summary

PayCode Summary

PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross
K		12.00	N		N	N	N	197.88

Deductions Summary

Code	Amount	Code	Amount	Code	Amount
A/R		AWARDS		BOOTS	
CAFE H		CAFE-C		CAFE-D	
CAFE-F		CAFE-H		CAFE-I	
CAFE-L		CAFE-P		CANCER	
CLINIC		COMBIN		CREDUN	
DENTAL		DEP-LF		EAT	
FEDTAX		FICA-M	2.87	FICA-O	12.27
FLEX S		FLX FE		FORT D	
FUTA		GIFT S		GRANT	
GRP-IN		GTL		HOSP-I	
ID TFT		LEAF		MISC	
MISC/		OTHER		PHI	
PHI***		PR FIN		RELAY	
REPAY		SIGNON		ST-TX	
STONE		STONE2		STUDEN	
TSA-1		TSA-2		TSA-C	
TSA-P		TSA-R	13.85	TUTION	
UW/HOS					

Department Totals:	12.00	(Gross:	197.88	Deductions:	28.99	Net:	168.89)
Checks Count:- FT 1	PT	Other	Female 1	Male	Credit	OverAmt	ZeroNet	Term	Total: 1

MEMORIAL MEDICAL CENTER

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- OCTOBER 2015

Monthly Electronic Transfers for Operating Expenses

9/1/2015	Phreesia Inc Bill	- Service Fee for Clinic Phreesia Tablets (4 Units)	180.00
9/1/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	793.85
9/1/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,030.70
9/1/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,771.12
9/1/2015	Cardmember Service	- IBC Credit Card Invoice	2,547.96
9/2/2015	IBC Merch Bank Discount	- Credit Card Processing Fee	19.95
9/2/2015	IBC Merch Bank Fee	- Credit Card Processing Fee	29.95
9/2/2015	IRS USATAXPYMT	- Payroll Taxes	93,590.64 ✓
9/3/2015	Vivonet Acquisit Payment	- Credit Card Machine Lease Expense	99.00
9/3/2015	IBC Merch Bank Deposit	- Credit Card Processing Fee	242.39
9/3/2015	IBC Merch Bank Deposit	- Credit Card Processing Fee	279.78
9/3/2015	IBC Merch Bank Deposit	- Credit Card Processing Fee	831.14
9/8/2015	FDGL Lease Payment	- Credit Card Machine Lease Expense	59.25
9/8/2015	FDGL Lease Payment	- Credit Card Machine Lease Expense	59.25
9/8/2015	FDGL Lease Payment	- Credit Card Machine Lease Expense	86.30
9/8/2015	Phreesia Inc Bill	- Termination Fee for Clinic Phreesia Tablets	1,000.00
9/8/2015	State Comptrlr Texnet	- IGT 2015 Advanced DSH	21,587.00
9/9/2015	Dep Item Returned	- Returned Check	25.00
9/9/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	552.85
9/9/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,072.87
9/9/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,201.00
9/10/2015	FDGL Lease Payment	- Credit Card Machine Lease Expense	30.17
9/10/2015	ACS SLS Expertpay	- Child Support	360.81
9/10/2015	Memorial Medical Payroll	- Payroll	258,359.95 +168.79
9/14/2015	State Comptrlr Texnet	- IGT DY4 DSRIP	7,770.20
9/15/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	524.69
9/15/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	744.07
9/15/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,023.62
9/15/2015	Texas County DRS	- Retirement Funding	110,538.72
9/16/2015	Texas County DRS	- Retirement Funding	1,000.14
9/16/2015	Webfile Tax Portal	- Sales Tax	1,036.27
9/16/2015	IRS USATAXPYMT	- Payroll Taxes	93,543.01 ✓
9/21/2015	Telecheck	- Credit Card Processing Fee	5.00
9/22/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	581.08
9/22/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,059.63
9/22/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,242.43
9/24/2015	ACS SLS Expertpay	- Child Support	360.81
9/24/2015	Cardmember Service	- IBC Credit Card Invoice	1,582.28
9/24/2015	Cardmember Service	- IBC Credit Card Invoice	3,286.52
9/24/2015	Memorial Medical Payroll	- Payroll	259,318.25 + 628.94 + 168.89
9/25/2015	Dep Item Returned	- Returned Check	50.00
9/25/2015	Phreesia Inc Bill	- Service Fee for Clinic Phreesia Tablets (4 Units)	180.00
9/29/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	176.30
9/29/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,188.65
9/29/2015	Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,411.69
9/30/2015	IRS USATAXPYMT	- Payroll Taxes	93,019.84 ✓
			$ 965,454.13 ✓

Note: Each month all electronic debit activity should be included on this form. Have CEO or CFO sign and then return the signed form to the County Auditors.

APPROVED ON

OCT 21 2015

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

A:\2015\Electronic Transfer Activity.xlsx

IBC

BANK

International Bank of Commerce
311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2435
MEMORIAL MEDICAL CENTER OPERATING
COUNTY OF CALHOUN
201 W AUSTIN STREET
PORT LAVACA TX 77979

STATEMENT 408

CUSTOMER NO.	PAGE NO.
	8 of 10

09/01/2015 to 09/30/2015
STATEMENT PERIOD

For 24 hour information about your account, please call IBC Voice at number given. Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

09/28	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160912889	25.00
09/28	Electronic Deposit	BCBS TEXAS HCCLAIMPMT C15267E01630770	18.15
09/29	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 451356	23,773.62
09/29	Electronic Deposit	BCBS TEXAS HCCLAIMPMT C15268E40210670	7,461.47
09/29	Electronic Deposit	AETNA H09 HCCLAIMPMT 1689630865	1,848.40
09/29	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160910883	1,417.35
09/29	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160911881	724.36
09/29	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160913887	304.91
09/29	Electronic Deposit	TEXAS COMPTROLLR INV-PAYMTS 17460034113000	18.00
09/30	Electronic Deposit	TEXAS COMPTROLLR INV-PAYMTS 17460034113000	62,382.88
09/30	Electronic Deposit	BCBS TEXAS HCCLAIMPMT C15271E40319200	9,462.27
09/30	Electronic Deposit	Driscoll Childre Driscoll C MEMORIAL MEDICA	5,314.63
09/30	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 451356	4,707.69
09/30	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160910883	3,140.48
09/30	Electronic Deposit	BCBS TEXAS HCCLAIMPMT C15271E01704270	1,677.96
09/30	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160911881	1,104.08
09/30	Electronic Deposit	AETNA H09 HCCLAIMPMT 1689630865	870.61
09/30	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160913887	124.05
09/30	Electronic Deposit	TEXAS COMPTROLLR INV-PAYMTS 17460034113000	86.60
09/30	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160912889	45.60
09/30	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160914885	30.00

Debits

09/01	Electronic Payment	PHREESIA INC JULYBILL 669130	180.00
09/01	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02598463	793.85
09/01	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02598541	1,030.70
09/01	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02598533	1,771.12
09/01	Electronic Payment	CARDMEMBER SERV ELECT PYMT	2,547.96
09/02	Electronic Payment	IBC MERCH BNKCD DISCOUNT 674200009993	19.95
09/02	Electronic Payment	IBC MERCH BNKCD FEE 674200009993	29.95
09/02	Electronic Payment	IRS USATAXPYMT 220564563038669	93,590.64
09/03	Electronic Payment	VIVONET ACQUISIT PAYMENT 508574	99.00
09/03	Electronic Payment	IBC MERCH BNKCD DEPOSIT 971160913887	242.39
09/03	Electronic Payment	IBC MERCH BNKCD DEPOSIT 971160914885	279.78
09/03	Electronic Payment	IBC MERCH BNKCD DEPOSIT 971160910883	831.14
09/08	Electronic Payment	FDGL LEASE PYMT	59.25
09/08	Electronic Payment	FDGL LEASE PYMT	59.25
09/08	Electronic Payment	FDGL LEASE PYMT	86.30
09/08	Electronic Payment	PHREESIA INC TERM FEE 669130	1,000.00
09/08	Electronic Payment	STATE COMPTRLR TEXNET 21761796/50904	21,587.00
09/09	Dep Item Returned	(Tracer# 17000137)	25.00
09/09	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02602021	552.85
09/09	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02602136	1,072.87
09/09	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02602152	1,201.00
09/10	Electronic Payment	FDGL LEASE PYMT	30.17
09/10	Electronic Payment	ACS SLS EXPERTPAY xxxxx3411	360.81
09/10	Electronic Payment	MEMORIAL MEDICAL PAYROLL	258,359.95
09/14	Electronic Payment	STATE COMPTRLR TEXNET 21788305/50911	7,770.20
09/15	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02610408	524.69

IBC

BANK

International Bank of Commerce
311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2436
MEMORIAL MEDICAL CENTER OPERATING
COUNTY OF CALHOUN
201 W AUSTIN STREET
PORT LAVACA TX 77979

STATEMENT 408

CUSTOMER NO.	PAGE NO.
	9 of 10

09/01/2015 to 09/30/2015
STATEMENT PERIOD

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09/15	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02610272	744.07
09/15	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02610395	1,023.62
09/15	Electronic Payment	TEXAS COUNTY DRS RECEIVABLE 419	110,538.72
09/16	Electronic Payment	TEXAS COUNTY DRS RECEIVABLE 419	1,000.14
09/16	Electronic Payment	WEBFILE TAX PYMT DD 902/21860845	1,036.27
09/16	Electronic Payment	IRS USATAXPYMT 220565930321900	93,543.01
09/21	Electronic Payment	Telecheck INV092015D xxxxx9736	5.00
09/22	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02613771	581.08
09/22	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02613781	1,059.63
09/22	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02613683	1,242.43
09/24	Electronic Payment	ACS SLS EXPERTPAY xxxxx3411	360.81
09/24	Electronic Payment	CARDMEMBER SERV ELECT PYMT	1,582.28
09/24	Electronic Payment	CARDMEMBER SERV ELECT PYMT	3,286.52
09/24	Electronic Payment	MEMORIAL MEDICAL PAYROLL	259,318.25
09/25	Dep Item Returned	(Tracer# 17000108)	50.00
09/25	Electronic Payment	PHREESIA INC AUGBILLING 669130	180.00
09/29	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02622078	176.30
09/29	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02622001	1,188.65
09/29	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02622068	1,411.69
09/30	Electronic Payment	IRS USATAXPYMT 220567370647180	93,019.84

Daily Ending Balance

09/01	2,107,679.91	09/11	1,428,510.47	09/22	1,215,738.81
09/02	1,812,788.77	09/14	1,495,947.03	09/23	1,147,777.81
09/03	1,816,132.33	09/15	1,356,666.48	09/24	881,052.35
09/04	1,871,459.82	09/16	1,278,924.45	09/25	1,074,796.81
09/08	1,827,533.98	09/17	1,329,270.95	09/28	1,345,330.36
09/09	1,518,664.01	09/18	1,204,704.70	09/29	1,372,041.12
09/10	1,413,917.04	09/21	1,281,210.45	09/30	1,419,439.62

IBC

BANK

International Bank of Commerce
311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2037
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
PRIVATE WAIVER CLEARING FUND
202 S ANN ST STE A
PORT LAVACA TX 77979

STATEMENT

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09/01/2015 to 09/30/2015
STATEMENT PERIOD

For 24 hour information about your account, please call IBC Voice at number given. Your officer is Derek J. Schmidt.
Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
325,069.79	0	0.00	0	0.00	325,069.79

Notice to Customers: A CTR Reference Guide

Why is my financial institution asking me for identification and personal information?

Federal law requires financial institutions to report currency (cash or coin) transactions over $10,000 conducted by, or on behalf of, one person, as well as multiple currency transactions that aggregate to be over $10,000 in a single day. These transactions are reported on Currency Transaction Reports (CTRs). The federal law requiring these reports was passed to safeguard the financial industry from threats posed by money laundering and other financial crime. To comply with this law, financial institutions must obtain personal identification information about the individual conducting the transaction such as a Social Security number as well as a driver's license or other government issued document. This requirement applies whether the individual conducting the transaction has an account relationship with the institution or not. There is no general prohibition against handling large amounts of currency and the filing of a CTR is required regardless of the reasons for the currency transaction. The financial institution collects this information in a manner consistent with a customer's right to financial privacy.

Can I break up my currency transactions into multiple, smaller amounts to avoid being reported to the government?

No. This is called "structuring." Federal law makes it a crime to break up transactions into smaller amounts for the purpose of evading the CTR reporting requirement and this may lead to a required disclosure from the financial institution to the government. Structuring transactions to prevent a CTR from being reported can result in imprisonment for not more than five years and/or a fine of up to $250,000. If structuring involves more than $100,000 in a twelve month period or is performed while violating another law of the United States, the penalty is doubled.

BANK
International Bank of Commerce
311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2080
MEMORIAL MEDICAL CENTER CONSTRUCTION COU
CLINIC SERIES 2014
202 S ANN STE A
PORT LAVACA TX 77979

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09/01/2015 to 09/30/2015
STATEMENT PERIOD

For 24 hour information about your account, please call IBC Voice at number given. Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
1,753,780.21	1	241,518.00	0	0.00	1,995,298.21

Deposits (Credits)

Date	Deposit#	Amount
09/09		241,518.00

Daily Ending Balance

09/09	1,995,298.21

Notice to Customers: A CTR Reference Guide

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IBC

BANK

International Bank of Commerce
311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2438

COUNTY OF CALHOUN TEXAS
INDIGENT HEALTHCARE
202 S Ann St Ste A
Port Lavaca TX 77979

STATEMENT

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09/01/2015 to 09/30/2015
STATEMENT PERIOD

For 24 hour information about your account, please call IBC Voice at number given. Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
6,663.70	1	42,956.11	13	45,858.73	3,761.08

Deposits (Credits)

Date	Deposit#	Amount
09/30		42,956.11

Checks (Debits)

Date	Check #	Amount	Date	Check #	Amount	Date	Check #	Amount
09/04	11720	967.03	09/25	11734	358.45	09/25	11740	140.37
09/02 *	11722	280.69	09/18	11735	1,244.92	09/23	11741	233.65
09/01 *	11731	582.50	09/16	11736	157.45	09/30 *	11745	6,653.77
09/17	11732	145.70	09/15 *	11739	30.28	09/30	11746	35,030.65
09/15	11733	33.27						

* Indicates a skip in check number sequence

Daily Ending Balance

09/01	6,081.20	09/16	4,612.48	09/23	2,988.21
09/02	5,800.51	09/17	4,466.78	09/25	2,489.39
09/04	4,833.48	09/18	3,221.86	09/30	3,761.08
09/15	4,769.93				

Notice to Customers: A CTR Reference Guide

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IBC

BANK

International Bank of Commerce
311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2123
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH ASHFORD
202 S ANN ST STE A
PORT LAVACA TX 77979

STATEMENT

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09/01/2015 to 09/30/2015
STATEMENT PERIOD

For 24 hour information about your account, please call IBC Voice at number given. Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
314,341.15	13	524,573.93	5	809,439.51	29,475.57

Deposits (Credits)

Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#	Amount
09/01		3,183.04	09/09		8,928.14	09/18		25,427.99
09/02		63,360.27	09/14		6,699.90	09/28		29,375.27

Electronic Activity

	Credits		
09/14	Electronic Deposit	Molina HC of TX Molina HC PN1326436189	7,938.39
09/22	Electronic Deposit	Molina HC of TX Molina HC PN1326436189	21,685.32
09/22	Electronic Deposit	Molina HC of TX Molina HC PN1326436189	16,575.62
09/23	Incoming Wire	0177 CANTEX HEALTH CARE CENTERS LLC	325,429.67
09/23	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005	3,342.10
09/23	Electronic Deposit	Molina HC of TX Molina HC PN1326436189	492.80
09/25	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005	12,135.34
	Debits		
09/02	Outgoing Wire	0007 ASHFORD HEALTH CARE CENTER LTD	314,241.15
09/09	Outgoing Wire	0351 ASHFORD HEALTH CARE CENTER LTD	66,543.31
09/14	Outgoing Wire	0480 ASHFORD HEALTH CARE CENTER LTD	8,928.14
09/24	Outgoing Wire	0004 ASHFORD HEALTH CARE CENTER LTD	40,066.28
09/30	Outgoing Wire	0145 ASHFORD HEALTH CARE CENTER LTD	379,660.62

309,147.14
+ 5,093.99
314,241.15
Last Month's Credit

379,660.62
- 314,241.15
65,418.47

Daily Ending Balance

09/01	317,524.19	09/18	40,166.28	09/25	379,760.93
09/02	66,643.31	09/22	78,427.22	09/28	409,136.20
09/09	9,028.14	09/23	407,691.87	09/30	29,475.57
09/14	14,738.29	09/24	367,625.59		

IBC

BANK

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Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2129
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH BROADMOOR
202 S ANN ST STE A
PORT LAVACA TX 77979

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For 24 hour information about your account, please call IBC Voice at number given. Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
631,800.48	13	1,757,566.53	5	2,352,850.84	36,516.17

Deposits (Credits)

Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#	Amount
09/01		3,072.56	09/09		28,859.11	09/18		14,232.50
09/02		24,712.05	09/14		25,482.36	09/28		24,434.43

Electronic Activity

	Credits		
09/04	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004	3,240.19
09/09	Incoming Wire	0309 CANTEX HEALTH CARE CENTERS III	794,681.51
09/11	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004	589.45
09/14	Electronic Deposit	TEXAS COMPTROLLR INV-PAYMTS 17460034113004	52,486.45
09/23	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004	415.25
09/24	Incoming Wire	0769 CANTEX HEALTH CARE CENTERS III	773,378.98
09/29	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004	11,981.74
	Debits		
09/02	Outgoing Wire	0010 CANTEX HEALTH CARE CENTERS III	631,700.48
09/09	Outgoing Wire	0355 CANTEX HEALTH CARE CENTERS III	31,024.80
09/14	Outgoing Wire	0483 CANTEX HEALTH CARE CENTERS III	824,130.07
09/24	Outgoing Wire	0007 CANTEX HEALTH CARE CENTERS III	92,201.31
09/30	Outgoing Wire	0149 CANTEX HEALTH CARE CENTERS III	779,794.18

619,118.28
+ 7,938.00
627,056.28
Last Months dep
+46420 on last months statement
+631,700.48

Daily Ending Balance

09/01	634,873.04	09/11	824,230.07	09/24	773,894.18
09/02	27,884.61	09/14	78,068.81	09/28	798,328.61
09/04	31,124.80	09/18	92,301.31	09/29	810,310.35
09/09	823,640.62	09/23	92,716.56	09/30	36,516.17

IBC

BANK

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311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2127
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH CRESCENT
202 S ANN ST STE A
PORT LAVACA TX 77979

STATEMENT

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Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
16,720.37	13	1,310,125.02	5	1,310,544.24	16,301.15

Deposits (Credits)

Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#	Amount
09/01		6,421.88	09/09		12,952.30	09/18		9,488.80
09/02		30,000.07	09/14		22,100.10	09/28		13,346.81

Electronic Activity

	Credits		
09/04	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113008	14,832.34
09/09	Incoming Wire	0308 CANTEX HEALTH CARE CENTERS III	618,618.22
09/15	Electronic Deposit	Molina HC of TX Molina HC PN1669860425	3,790.73
09/22	Electronic Deposit	Molina HC of TX Molina HC PN1669860425	5,181.84
09/23	Incoming Wire	0178 CANTEX HEALTH CARE CENTERS III	569,455.59
09/24	Electronic Deposit	Molina HC of TX Molina HC PN1669860425	6,002.00
09/29	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113008	2,854.34
	Debits		
09/02	Outgoing Wire	0009 CANTEX HEALTH CARE CENTERS III	16,620.37
09/09	Outgoing Wire	0353 CANTEX HEALTH CARE CENTERS III	51,254.29
09/14	Outgoing Wire	0482 CANTEX HEALTH CARE CENTERS III	631,570.52
09/24	Outgoing Wire	0006 CANTEX HEALTH CARE CENTERS III	35,379.63
09/30	Outgoing Wire	0148 CANTEX HEALTH CARE CENTERS III	575,719.43

last month's dep. 16,720.37

Daily Ending Balance

09/01	23,142.25	09/15	25,990.83	09/24	575,819.43
09/02	36,521.95	09/18	35,479.63	09/28	589,166.24
09/04	51,354.29	09/22	40,661.47	09/29	592,020.58
09/09	631,670.52	09/23	606,117.06	09/30	16,301.15
09/14	22,200.10				

IBC

BANK

International Bank of Commerce
311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2131
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH FORT BEND
202 S ANN ST STE A
PORT LAVACA TX 77979

STATEMENT

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09/01/2015 to 09/30/2015
STATEMENT PERIOD

For 24 hour information about your account, please call IBC Voice at number given. Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
92,072.88	12	498,493.14	4	567,493.10	23,072.92

Deposits (Credits)

Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#	Amount
09/01		31,487.27	09/14		197.04	09/28		3,024.00
09/02		5,670.36						

Electronic Activity

Last month's dep. 91,972.88

	Credits		
09/09	Incoming Wire	0310 CANTEX HEALTH CARE CENTERS III	184,654.01
09/22	Electronic Deposit	Molina HC of TX Molina HC PN1730577503	34,767.11
09/23	Incoming Wire	0214 CANTEX HEALTH CARE CENTERS III	213,980.54
09/23	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006	2,759.86
09/23	Electronic Deposit	Molina HC of TX Molina HC PN1730577503	1,561.63
09/25	Electronic Deposit	Molina HC of TX Molina HC PN1730577503	422.90
09/29	Electronic Deposit	Molina HC of TX Molina HC PN1730577503	12,014.02
09/30	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006	7,934.90
	Debits		
09/02	Outgoing Wire	0011 CANTEX HEALTH CARE CENTERS III	91,972.88
09/09	Outgoing Wire	0356 CANTEX HEALTH CARE CENTERS III	37,157.63
09/14	Outgoing Wire	0484 CANTEX HEALTH CARE CENTERS III	184,654.01
09/30	Outgoing Wire	0150 CANTEX HEALTH CARE CENTERS III	253,706.58

253,706.58 + 197.04 →

Daily Ending Balance

09/01	123,560.15	09/22	35,064.15	09/28	256,832.58
09/02	37,257.63	09/23	253,385.68	09/29	268,846.60
09/09	184,754.01	09/25	253,808.58	09/30	23,072.92
09/14	297.04				

IBC BANK
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311 North Virginia
Port Lavaca, Texas 77979

CUSTOMER

8/NE/131/019/2125
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH SOLERA
202 S ANN ST STE A
PORT LAVACA TX 77979

STATEMENT

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09/01/2015 to 09/30/2015
STATEMENT PERIOD

For 24 hour information about your account, please call IBC Voice at number given. Please examine and report any discrepancies within 14 days from your statement date by calling (361) 552-9771.

Regular Checking — Account Recap — Account Number -

Beginning Balance	Number of Credits	Deposits (Credits)	Number of Debits	Withdrawals (Debits)	Closing Balance
47,714.23	16	975,054.60	5	988,051.66	34,717.17

Deposits (Credits)

Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#	Amount
09/02		12,162.32	09/14		22,748.40	09/28		34,333.29
09/09		28,196.28	09/18		38,215.14			

Electronic Activity

Last month's deposit 47,614.23

	Credits		
09/02	Electronic Deposit	Molina HC of TX Molina HC PN1497143259	151.04
09/09	Electronic Deposit	Molina HC of TX Molina HC PN1497143259	2,971.07
09/15	Electronic Deposit	Molina HC of TX Molina HC PN1669860433	408.64
09/22	Electronic Deposit	Molina HC of TX Molina HC PN1497143259	8,054.29
09/22	Electronic Deposit	Molina HC of TX Molina HC PN1497143259	3,276.51
09/22	Electronic Deposit	Molina HC of TX Molina HC PN1669860433	2,454.99
09/23	Incoming Wire	0176 CANTEX HEALTH CARE CENTERS III	817,260.60
09/25	Electronic Deposit	Molina HC of TX Molina HC PN1497143259	1,876.27
09/25	Electronic Deposit	Molina HC of TX Molina HC PN1669860433	1,624.07
09/25	Electronic Deposit	Molina HC of TX Molina HC PN1497143259	1,037.81
09/28	Electronic Deposit	Molina HC of TX Molina HC PN1497143259	283.88
	Debits		
09/02	Outgoing Wire	0008 CANTEX HEALTH CARE CENTERS LLC	47,614.23
09/09	Outgoing Wire	0352 CANTEX HEALTH CARE CENTERS LLC	12,313.36
09/14	Outgoing Wire	0481 CANTEX HEALTH CARE CENTERS LLC	31,167.35
09/24	Outgoing Wire	0005 CANTEX HEALTH CARE CENTERS LLC	61,372.18
09/30	Outgoing Wire	0147 CANTEX HEALTH CARE CENTERS LLC	895,584.54

Daily Ending Balance

09/02	12,413.36	09/18	61,472.18	09/25	835,684.54
09/09	31,267.35	09/22	75,257.97	09/28	870,301.71
09/14	22,848.40	09/23	892,518.57	09/30	34,717.17
09/15	23,257.04	09/24	831,146.39		