

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ----- April 28, 2016

PAYABLES AND PAYROLL

3/1/2016 Credit Card Invoice	\$ 3,054.08
3/7/2016 McKesson Drugs	1,821.25
3/8/2016 Payroll	255,258.53
3/9/2016 Payroll w/ checks	1,369.90
3/11/2016 Payroll w/ checks	181.92
3/14/2016 McKesson Drugs	1,706.32
3/15/2016 TDCRS	113,182.46
3/15/2016 Payroll Liabilities	95,878.11
3/21/2016 McKesson Drugs	2,106.12
3/22/2016 Payroll	257,774.06
3/24/2016 Credit Card Invoice	4,276.44
3/28/2016 McKesson Drugs	3,736.29
3/29/2016 Payroll Liabilities	97,043.44
3/30/2016 Credit Card Invoice	4,415.80
3/3/2016 Weekly Payables	296,788.92
3/3/2016 Patient Refunds	171.39
3/9/2016 Weekly Payables	171,286.91
3/9/2016 Patient Refunds	3,202.61
3/16/2016 Weekly Payables	177,879.45
3/16/2016 Patient Refunds	32,204.04
3/16/2016 Renewal of Pharmacy License	451.00
3/23/2016 Weekly Payables	243,669.11
3/30/2016 Weekly Payables	244,351.28
3/30/2016 Patient Refunds	3,517.71

3/31/2016 Monthly Electronic Transfers for Payroll Expenses(not incl above)	362.31
3/31/2016 Monthly Electronic Transfers for Operating Expenses	6,560.90

Total Payables and Payroll **\$ 2,022,250.35**

INTER-GOVERNMENT TRANSFERS

Inter-Government Transfers for February 2016 97,860.70

Total Inter-Government Transfers **\$ 97,860.70**

INTRA-ACCOUNT TRANSFERS

Total Intra-Account Transfers **\$ -**

SUBTOTAL MEMORIAL MEDICAL CENTER DISBURSEMENTS **\$ 2,120,111.05**

INDIGENT HEALTHCARE FUND EXPENSES **\$ 22,909.32**

NURSING HOME UPL EXPENSES FOR Add'l February and March 2016 **\$ 5,540,409.05**

IGT NH Program **\$ -**

MMC Construction **\$ 277,982.90**

GRAND TOTAL DISBURSEMENTS APPROVED 4/28/2016 **\$ 7,961,412.32**

APPROVED

APR 28 2016
CALHOUN COUNTY
COMMISSIONERS COURT

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---- April 28, 2016

INDIGENT HEALTHCARE FUND:

INDIGENT EXPENSES

HEB Pharmacy	141.80
MMCenter (In-patient \$10640.08 / Out-patient \$185.35 / ER \$0.00)	10,825.43
Memorial Medical Clinic	3,464.39
Port Lavaca Clinic	78.56
Radiology Unlimited PA	465.80

SUBTOTAL **14,975.98**

Memorial Medical Center (Indigent Healthcare Payroll and Expenses) 8,393.34

Less: Co-Pays collected in March 2016 (460.00)

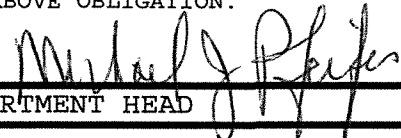
TOTAL APPROVED INDIGENT HEALTHCARE FUND EXPENSES	22,909.32
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800 04282016 01 CALHOUN COUNTY, TEXAS

DATE: 4/28/2016

CC Indigent Health Care

VENDOR # 852

ACCOUNT NUMBER	DESCRIPTION OF GOODS OR SERVICES	QUANTITY	UNIT PRICE	TOTAL PRICE
1000-800-98722-999	Transfer to pay bills for Indigent Health Care approved by Commissioners Court on 04/28/2016			\$22,909.32
1000-001-46010	March Interest \$0.00			\$0.00
				\$22,909.32
COUNTY AUDITOR APPROVAL ONLY	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.			
APPROVED ON APR 26 2016 BY CALHOUN COUNTY AUDITOR	BY: 		4/28/16	
	DEPARTMENT HEAD		DATE	

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---- April 28, 2014

Nursing Home UPL

Weekly Cantex Transfer		ACH Deposits		ACH Transfers	
IN	OUT				
2/23/16-2/29/16	3/1/2016 Ashford-4553			\$	218,302.10
2/29/16-3/03/16	3/9/2016 Ashford-4553	\$	125,151.36		125,151.36
3/07/16-3/11/16	3/16/2016 Ashford-4553		59,355.58		59,355.58
3/14/16-3/17/16	3/23/2016 Ashford-4553		229,915.94		229,915.94
3/22/16-3/25/16	3/30/2016 Ashford-4553		177,302.71		177,302.71
3/28/16-3/31/16	Ashford-4553		88,579.13		
2/22/16-2/26/16	3/1/2016 Broadmoor-4596			\$	495,273.19
2/29/16-3/02/16	3/9/2016 Broadmoor-4596		36,722.75		36,722.75
3/07/16-3/10/16	3/16/2016 Broadmoor-4596		54,815.84		54,815.84
3/15/16-3/17/16	3/23/2016 Broadmoor-4596		94,247.79		94,247.79
3/21/16-3/25/16	3/30/2016 Broadmoor-4596		1,097,550.81		1,097,550.81
3/29/16-3/31/16	Broadmoor-4596		72,539.06		
2/22/16-2/26/16	3/1/2016 Crescent-4588			\$	227,464.34
2/29/16-3/02/16	3/9/2016 Crescent-4588		49,100.61		49,100.61
3/08/16-3/10/16	3/16/2016 Crescent-4588		48,055.02		48,055.02
3/16/16-3/17/16	3/23/2016 Crescent-4588		24,819.08		24,819.08
3/21/16-3/25/16	3/30/2016 Crescent-4588		241,119.68		241,119.68
3/28/16-3/31/16	Crescent-4588		90,889.67		
2/22/16-2/26/16	3/1/2016 Fort Bend-4618			\$	198,900.11
2/29/16-3/04/16	3/9/2016 Fort Bend-4618		19,647.11		19,647.11
3/08/16-3/10/16	3/16/2016 Fort Bend-4618		27,967.39		27,967.39
3/14/16-3/18/16	3/23/2016 Fort Bend-4618		32,152.28		32,152.28
3/21/16-3/25/16	3/30/2016 Fort Bend-4618		60,160.19		60,160.19
3/28/16-3/31/16	Fort Bend-4618		38,559.65		
2/22/16-2/25/16	3/1/2016 Solera-4561			\$	346,612.86
2/29/16-3/04/16	3/2/2016 Solera-4561		109,738.96		109,738.96
3/08/16-3/11/16	3/16/2016 Solera-4561		65,949.86		65,949.86
3/15/16-3/17/16	3/23/2016 Solera-4561		59,384.83		59,384.83
3/22/16-3/25/16	3/30/2016 Solera-4561		301,421.14		301,421.14
3/29/16-3/31/16	Solera-4561		167,793.21		
SUBTOTAL			3,372,939.65		4,401,131.53
Add'l February Transfer					1,139,277.52
IGT				ACH Transfers	
					-
SUBTOTAL		\$	-	\$	-

TOTAL APPROVED NURSING HOME WEEKLY CANTEX TRANSI	5,540,409.05
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MEMORIAL MEDICAL CENTER CONSTRUCTION ACCOUNT

COMMISSIONERS COURT APPROVAL LIST FOR ----April 28, 2016

PAYABLES

3/15/2016 K & T Construction	\$ 277,982.90
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Total Approved MMC Construction Expenses	277,982.90
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©IHS
Issued 04/25/16

Source Totals Report
Calhoun Indigent Health Care
Batch Dates 04/15/2016 through 04/15/2016
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	3,549.26	465.80
02	Prescription Drugs	145.33	141.80
08	Rural Health Clinics	5,306.12	3,542.95
13	Mmc - Inpatient Hospital	21,714.45	10,640.08
14	Mmc - Hospital Outpatient	383.00	185.35
	Expenditures	31,148.27	15,026.09
	Reimb/Adjustments	-50.11	-50.11
	Grand Total	31,098.16	14,975.98

COPAYS <-460.00>

EXPENSES 8393.34

TOTAL 22909.32

Recorded ARM 4/11/16
Reviewed

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

JE # 031638

APR 12 2016
BY 
CALHOUN COUNTY AUDITOR

Indigent Healthcare Program
Incurred by MMC
MARCH 2016

Indigent H'care Coordinator Salary

# 40000074	3-Mar	\$ 1,717.01
# 40000074	17-Mar	1,648.52
# 40000074	31-Mar	2,862.52
# 40050074		81.11
# 40050074		16.22
(# 40010074)		115.36

6,440.74

Benefits:

#40040074

363.08

FICA

# 40015074	3-Mar	85.95
# 40015074	17-Mar	78.92
# 40015074	31-Mar	157.92

322.79

FUTA

# 40025074	3-Mar	3.74
# 40025074	17-Mar	3.43
# 40025075	31-Mar	6.86

14.03

Other Benefits (18 %)

63200000

1,159.33

General Supplies

40220074

7.85

Office Supplies

40225074

85.52

Forms

#40230074

-

Continuing Education

#40610074

-

Outside Services

#40510074

-

Freight

#40215074

-

Travel

#40600074

-

RUN DATE: 04/11/16
TIME: 18:59

MEMORIAL MEDICAL CENTER
GL DETAIL REPORT - COST CENTER SEQUENCE
FOR: 03/01/16 - 03/31/16

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GLGLDC

ACCT NUMBER & DESC	DATE	MEMO	REFERENCE	JOURNAL	CS#/BAT/SEQ	ACTIVITY	BALANCE
40000074 SALARIES REG PROD		-CALHO					
40000074 SALARIES REG PROD		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				6,774.61
	03/01/16	REVERSE ACCRUAL		PR	19 4876 401	-1,300.97	
	03/03/16	PAY-P.02/19/16 03/03/16		PR	19 4916 45	1,717.01	-
	03/17/16	PAY-P.03/04/16 03/17/16		PR	19 4948 47	1,648.52	-
	03/31/16	PAY-P.03/18/16 03/31/16		PR	19 4982 46	2,862.52	-
	03/31	ACTIVITY/END BALANCE				4,927.08	11,701.69
40005074 SALARIES OVERTIME		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				38.68
	03/01/16	REVERSE ACCRUAL		PR	19 4876 457	-17.05	
	03/03/16	PAY-P.02/19/16 03/03/16		PR	19 4916 72	81.11	-
	03/31/16	PAY-P.03/18/16 03/31/16		PR	19 4982 70	16.22	-
	03/31	ACTIVITY/END BALANCE				80.28	118.96
40010074 SALARIES PTO/EIB		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				2,690.85
	03/01/16	REVERSE ACCRUAL		PR	19 4876 509	-90.64	
	03/03/16	Auto PR Bene Accrual Re		PR	19 4875 87	-559.06	
	03/03/16	Auto PR Bene Accrual		PR	19 4915 89	678.89	
	03/17/16	Auto PR Bene Accrual Re		PR	19 4915 91	-678.89	
	03/17/16	Auto PR Bene Accrual		PR	19 4947 85	683.36	
	03/17/16	PAY-P.03/04/16 03/17/16		PR	19 4948 98	115.36	-
	03/31/16	Auto PR Bene Accrual Re		PR	19 4947 87	-683.36	
	03/31/16	Auto PR Bene Accrual		PR	19 4981 85	803.19	
	03/31	ACTIVITY/END BALANCE				268.85	2,959.70
40015074 FICA		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				20.54
	03/01/16	REVERSE ACCRUAL		PR	19 4876 687	-51.70	
	03/01/16	REVERSE ACCRUAL		PR	19 4876 747	-12.10	
	03/03/16	PAY-P.02/19/16 03/03/16		PR	19 4916 372	16.29	>
	03/03/16	PAY-P.02/19/16 03/03/16		PR	19 4916 402	69.66	>
	03/17/16	PAY-P.03/04/16 03/17/16		PR	19 4948 374	14.96	>
	03/17/16	PAY-P.03/04/16 03/17/16		PR	19 4948 405	63.96	>
	03/31/16	PAY-P.03/18/16 03/31/16		PR	19 4982 377	29.93	>
	03/31/16	PAY-P.03/18/16 03/31/16		PR	19 4982 408	127.99	>
	03/31	ACTIVITY/END BALANCE				258.99	279.53
40025074 FUT		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				2.75
	03/01/16	REVERSE ACCRUAL		PR	19 4876 807	-2.75	
	03/03/16	PAY-P.02/19/16 03/03/16		PR	19 4916 432	3.74	-
	03/17/16	PAY-P.03/04/16 03/17/16		PR	19 4948 436	3.43	-
	03/31/16	PAY-P.03/18/16 03/31/16		PR	19 4982 439	6.86	-
	03/31	ACTIVITY/END BALANCE				11.28	14.03
40040074 RETIREMENT		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				20.53
	03/01/16	REVERSE ACCRUAL		PR	19 4876 865	-72.05	

RUN DATE: 04/11/16
TIME: 18:59

MEMORIAL MEDICAL CENTER
GL DETAIL REPORT - COST CENTER SEQUENCE
FOR: 03/01/16 - 03/31/16

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GLGLDC

ACCT NUMBER & DESC	DATE	MEMO	REFERENCE	JOURNAL	CS#/BAT/SEQ	ACTIVITY	BALANCE
40040074 RETIREMENT		-CALHOUN C					
	03/03/16	PAY-P.02/19/16	03/03/16	PR	19 4916 462	96.60	-
	03/17/16	PAY-P.03/04/16	03/17/16	PR	19 4948 467	89.37	-
	03/31/16	PAY-P.03/18/16	03/31/16	PR	19 4982 470	177.11	-
		03/31 ACTIVITY/END BALANCE				291.03	311.56
40220074 SUPPLIES GENERAL		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				.00
	03/31/16	DEWITT POTH & SON	468497-0	PJ	19 4976 8	6.57	
	03/31/16	AUTO-TRAN/EXP.REPORT	000000	MM	25 700 26	1.28	
		03/31 ACTIVITY/END BALANCE				7.85	7.85
40225074 OFFICE SUPPLIES		-CALHO	BEGINNING BALANCE AS OF: 03/01/16				.00
	03/18/16	DIVERSIFIED BUSINESS SY	26434	PJ	19 4941 15	59.20	
	03/31/16	DEWITT POTH & SON	468298-0	PJ	19 4989 12	5.82	
	03/31/16	AUTO-TRAN/EXP.REPORT	000000	MM	25 700 54	20.50	
		03/31 ACTIVITY/END BALANCE				85.52	85.52
40450074 REIMBURSEMENT			BEGINNING AND ENDING BALANCE:				-8,619.13
			COST CENTER TOTAL:			5,930.88	

			ENDING BALANCE GRAND TOTAL:				6,859.71
			GRAND TOTAL ACTIVITY:				5,930.88

Calhoun County Indigent Care Patient Caseload

	Approved	Denied	Removed	Active	Pending
January	4	5	3	58	6
February	7	2	8	57	7
March	2	3	5	51	9
April					
May					
June					
July					
August					
September					
October					
November					
December					
YTD	13	10	16	166	22
Monthly Avg	4	3	5	55	7
December 2015 Active		57			

RUN DATE: 04/07/16
TIME: 11:45

MEMORIAL MEDICAL CENTER
RECEIPTS FROM 03/01/16 TO 03/31/16

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RCMREP

G/L NUMBER	RECEIPT PAY DATE	NUMBER	TYPE	PAYER	CASH AMOUNT	RECEIPT AMOUNT	NUMBER	NAME	DISC DATE	COLL INIT	GL CASH CODE ACCOUNT
50240.000	03/02/16	426366	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/02/16	426397	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/02/16	426401	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/02/16	426431	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/03/16	426473	CK		10.00	10.00			00/00/00	PLB	2
50240.000	03/03/16	426515	CA		10.00	10.00			00/00/00	TJC	2
50240.000	03/03/16	426533	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/03/16	426534	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/03/16	426537	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/04/16	426613	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/07/16	426714	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/07/16	426715	CA		10.00	10.00			00/00/00	JC	2
50240.000	03/07/16	426737	CK		10.00	10.00			00/00/00	JC	2
50240.000	03/09/16	426993	CA		10.00	10.00			00/00/00	LMV	2
50240.000	03/09/16	427003	CA		10.00	10.00			00/00/00	LMV	2
50240.000	03/10/16	427069	CA		10.00	10.00			00/00/00	LMV	2
50240.000	03/11/16	427132	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/11/16	427174	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/11/16	427191	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/14/16	427239	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/14/16	427290	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/15/16	427387	CA		10.00	10.00			00/00/00	LMV	2
50240.000	03/15/16	427417	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/16/16	427513	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/17/16	427583	MC		10.00	10.00			00/00/00	LMV	2
50240.000	03/21/16	427801	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/21/16	427806	CA		10.00	10.00			00/00/00	LMV	2
50240.000	03/21/16	427832	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/21/16	427838	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/22/16	427870	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/22/16	427888	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/23/16	427995	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/24/16	428152	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/24/16	428156	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/24/16	428251	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/25/16	428314	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/25/16	428320	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/28/16	428366	CA		10.00	10.00			00/00/00	JC	2
50240.000	03/28/16	428417	VI		10.00	10.00			00/00/00	PLB	2
50240.000	03/29/16	428450	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/29/16	428553	CA		10.00	10.00			00/00/00	PLB	2
50240.000	03/31/16	428800	CA		10.00	10.00			00/00/00	PLB	2

TOTAL 50240.000 COUNTY INDIGENT COPAYS

460.00

RUN DATE: 04/07/16
TIME: 11:45

MEMORIAL MEDICAL CENTER
RECEIPTS FROM 03/01/16 TO 03/31/16

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RCMREP

G/L	RECEIPT PAY	CASH	RECEIPT	DISC	COLL GL CASH
NUMBER	DATE NUMBER TYPE PAYER	AMOUNT	AMOUNT NUMBR NAME	DATE INIT CODE ACCOUNT	

50240.000	03/01/16	426258 CA	10.00	10.00	00/00/00	PLB	2
50240.000	03/01/16	426264 CA	10.00	10.00	00/00/00	PLB	2
50240.000	03/01/16	426302 CA	10.00	10.00	00/00/00	PLB	2
50240.000	03/01/16	426303 CA	10.00	10.00	00/00/00	PLB	2



February 2016 Statement

Open Date: 01/07/2016 Closing Date: 02/03/2016

Visa® Business Card
MEMORIAL MEDICAL CNT
JERRY L PICKETT

New Balance \$3,054.08
Minimum Payment Due \$31.00
Payment Due Date 03/01/2016

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%.

Cardmember Service

BUS 30 ELN 68 3

Activity Summary

Previous Balance	+	\$3,148.10
Payments	-	\$3,148.10 ^{CR}
Other Credits		\$0.00
Purchases	+	\$3,054.08
Balance Transfers		\$0.00
Advances		\$0.00
Other Debits		\$0.00
Fees Charged		\$0.00
Interest Charged		\$0.00
New Balance	=	\$3,054.08
Past Due		\$0.00
Minimum Payment Due		\$31.00
Credit Line		\$10,000.00
Available Credit		\$6,945.92
Days in Billing Period		28

Michael J. Pfeifer
Calhoun County Judge
Date: 3-21-16

*NMC
will pay
By phone*

\$ 3,054.08

APPROVED
ON

MAR 01 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Payment Options:



Mail payment coupon
with a check



Pay online at



Pay by phone

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



24-Hour Cardmember Service:

- to pay by phone
- to change your address

Payment Due Date	3/01/2016
New Balance	\$3,054.08
Minimum Payment Due	\$31.00

Amount Enclosed \$ _____

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



February 2016 Statement 01/07/2016 - 02/03/2016

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.

Pay taxes instantly with your credit card. It's a fast, easy and secure way to pay your federal and state taxes. You will receive an electronic receipt so you will know your payment was received on time. See the enclosed insert for more details.

Visa Payment Controls allows you to customize each of your employee's business credit cards to control where, when, and how your employees use them. Easily set controls that limit card use by time of day or day of week, dollar amount, transaction types or geographical locations. Visit myaccountaccess.com/vpc to set up customized controls on your employees' business credit cards today.

Transactions

Payments and Other Credits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
01/25	01/25		PAYMENT THANK YOU	\$3,148.10CR	
TOTAL THIS PERIOD				\$3,148.10CR	

Purchases and Other Debits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
01/15	01/13	0204	HOLIDAY INN EXPRESS PORT LAVACA TX 01/10/16 FOR 03 NIGHTS FOLIO: 170997	\$406.77 ✓	
01/27	01/26	0424	AIRESPRING INC. 800-825-1055 CA	\$2,647.31 ✓	
TOTAL THIS PERIOD				\$3,054.08	

2016 Totals Year-to-Date

Total Fees Charged in 2016	\$0.00
Total Interest Charged in 2016	\$0.00

Company Approval

(This area for use by your company)

Signature/Approval: _____

Accounting Code: _____

Continued on Next Page

APPROVED
ON03/02/2016
09:58
MAR 03 2016

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Due Dates Through: 03/15/2016

ap_open_invoice.template

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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
34133		02/18/20	02/08/20	03/09/20		141.00	0.00	0.00	141.00

SUPPLIES PLANT OPS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1679	AIR SPECIALTY & EQUIPMENT CO	141.00	0.00	0.00	141.00	

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
9048292867 ✓		02/24/20	02/11/20	03/12/20		1,942.31	0.00	0.00	1,942.31 ✓

OXYGEN RESP CARE

9048324533 ✓		02/24/20	02/11/20	03/12/20		354.42	0.00	0.00	354.42 ✓
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SUPPLIES PLANT OPS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS-SOUTHWEST	2,296.73	0.00	0.00	2,296.73	

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
774202091 ✓		02/29/20	02/29/20	03/10/20		91.54	0.00	0.00	91.54

PHARMACY DRUGS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1360	AMERISOURCEBERGEN DRUG CORP	91.54	0.00	0.00	91.54 ✓	

Vendor# Vendor Name

Class Pay Code

10713 ANNA HERNANDEZ ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20761		02/29/20	02/25/20	02/25/20		30.24	0.00	0.00	30.24

TRAVEL EXPENSE ER

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
10713	ANNA HERNANDEZ	30.24	0.00	0.00	30.24 ✓	

Vendor# Vendor Name

Class Pay Code

A2260 ARROW INTERNATIONAL INC

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
93635652 ✓		02/29/20	01/01/20	01/31/20		625.00	0.00	0.00	625.00

SUPPLIES ER

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A2260	ARROW INTERNATIONAL INC	625.00	0.00	0.00	625.00 ✓	

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
75154458		02/18/20	02/11/20	03/10/20		779.24	0.00	0.00	779.24

SUPPLIES SURGERY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
B0435	BARD PERIPHERAL VASCULAR	779.24	0.00	0.00	779.24 ✓	

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
50013460 ✓		02/10/20	02/04/20	03/05/20		449.49	0.00	0.00	449.49 ✓

CS INVENTORY										
50069046✓			02/17/20	02/11/20	03/12/20		330.32	0.00	0.00	330.32✓
CS INVENTORY & LAB SUPPLI										
Vendor Totals							Number	Name	Gross	Discount
							B1075	BAXTER HEALTHCARE CORP	779.81	0.00
									0.00	0.00
										Net
										779.81
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	
6003701023✓		02/24/20	02/11/20	03/12/20		258.36	0.00	0.00	258.36	
SUPPLIES CT SCAN										
Vendor Totals							Number	Name	Gross	Discount
							M2485	BAYER HEALTHCARE	258.36	0.00
									0.00	0.00
										Net
										258.36✓
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	
105455108✓		02/29/20	02/09/20	03/10/20		541.09	0.00	0.00	541.09	
LAB SUPPLIES										
Vendor Totals							Number	Name	Gross	Discount
							B1220	BECKMAN COULTER INC	541.09	0.00
									0.00	0.00
										Net
										541.09✓
Vendor#	Vendor Name				Class	Pay Code				
B1320	BEEKLEY MEDICAL ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
INV1004483✓		02/18/20	02/11/20	03/10/20		125.95	0.00	0.00	125.95	
SUPPLIES MRI										
Vendor Totals							Number	Name	Gross	Discount
							B1320	BEEKLEY MEDICAL	125.95	0.00
									0.00	0.00
										Net
										125.95✓
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	
20668128✓		02/24/20	02/16/20	03/09/20		959.62	0.00	0.00	959.62	
TELEPHONE EXP										
Vendor Totals							Number	Name	Gross	Discount
							11050	BIRCH COMMUNICATIONS	959.62	0.00
									0.00	0.00
										Net
										959.62✓
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	
BK00547887✓		01/31/20	01/29/20	03/05/20		25,929.80	0.00	0.00	25,929.80	
AUDITING FEES										
Vendor Totals							Number	Name	Gross	Discount
							10599	BKD, LLP	25,929.80	0.00
									0.00	0.00
										Net
										25,929.80✓
Vendor#	Vendor Name				Class	Pay Code				
B1655	BOSTON SCIENTIFIC CORPORATION ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
948481837✓		02/17/20	02/08/20	03/07/20		457.00	0.00	0.00	457.00	
SUPPLIES SURGERY										
Vendor Totals							Number	Name	Gross	Discount
							B1655	BOSTON SCIENTIFIC CORPORATION	457.00	0.00
									0.00	0.00
										Net
										457.00✓
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	
82053267✓		02/17/20	02/10/20	03/09/20		181.68	0.00	0.00	181.68✓	
CS INVENTORY										

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		B1680	BOUND TREE MEDICAL, LLC							181.68	0.00	0.00	181.68
C1030	CAL COM FEDERAL CREDIT UNION ✓		W										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	20760		02/29/20	02/18/20	02/18/20		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 ✓
A1730	CAREFUSION ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	9106416959 ✓		02/19/20	02/04/20	03/05/20		205.37	0.00	0.00	205.37 ✓			
	SUPPLIES SURGERY												
	9106428544 ✓		02/25/20	02/09/20	03/10/20		73.75	0.00	0.00	73.75 ✓			
	SUPPLIES CLINIC												
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		A1730	CAREFUSION							279.12	0.00	0.00	279.12
Z0850	CARMEN C. ZAPATA-ARROYO ✓		W										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	20736		02/24/20	01/31/20	03/05/20		206.25	0.00	0.00	206.25			
	OUTSIDE SRV OCC THERAPY												
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		Z0850	CARMEN C. ZAPATA-ARROYO							206.25	0.00	0.00	206.25 ✓
10350	CENTURION MEDICAL PRODUCTS ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	91950843 ✓		02/17/20	02/08/20	03/09/20		996.70	0.00	0.00	996.70			
	CS INVENTORY & RECOVERY												
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		10350	CENTURION MEDICAL PRODUCTS							996.70	0.00	0.00	996.70 ✓
C1478	CHANNING L BETE CO INC ✓		M										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	53081201 ✓		02/19/20	02/05/20	03/06/20		92.45	0.00	0.00	92.45			
	SUPPLIES NURSING												
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		C1478	CHANNING L BETE CO INC							92.45	0.00	0.00	92.45 ✓
C1730	CITY OF PORT LAVACA ✓		W										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
	20732		02/24/20	02/18/20	03/07/20		288.12	0.00	0.00	288.12 ✓			
	WATER & SEWER PLANT OPS												
	20733		02/24/20	02/18/20	03/07/20		3,291.99	0.00	0.00	3,291.99 ✓			
	WATER & SEWER PLANT OPS												
	Vendor Totals	Number	Name							Gross	Discount	No-Pay	Net
		C1730	CITY OF PORT LAVACA							3,580.11	0.00	0.00	3,580.11
11030	COMBINED INSURANCE CO ✓												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			

20748		02/29/20	02/29/20	03/01/20			2,680.82	0.00	0.00	2,680.82 ✓
EMPLOYEE PERSONAL INS										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
11030 COMBINED INSURANCE CO							2,680.82	0.00	0.00	2,680.82
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	
145889 ✓		02/17/20	02/08/20	03/07/20		230.00	0.00	0.00	230.00 ✓	
SUPPLIES SURGERY										
147247 ✓		02/17/20	02/10/20	03/09/20		597.99	0.00	0.00	597.99 ✓	
SUPPLIES SURGERY										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
C1970 CONMED CORPORATION							827.99	0.00	0.00	827.99
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	
CM328 ✓		02/12/20	02/01/20	03/10/20		-200.00	0.00	0.00	-200.00 ✓	
CREDIT OUTSIDE SRV WOUN										
18848 ✓		02/25/20	02/10/20	03/11/20		20,100.00	0.00	0.00	20,100.00	
OUTSIDE SRV WOUND CARE										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
10556 CPP WOUND CARE #28,LLC							19,900.00	0.00	0.00	19,900.00
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	
186177 ✓		02/24/20	02/11/20	03/12/20		248.00	0.00	0.00	248.00	
SUPPLIES SURGERY										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
C1443 CYGNUS MEDICAL LLC							248.00	0.00	0.00	248.00 ✓
Vendor#	Vendor Name				Class	Pay Code				
11152	DEBRA MUSTERED ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20766		02/29/20	02/23/20	02/23/20		29.16	0.00	0.00	29.16	
TRAVEL EXPENSE OB										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
11152 DEBRA MUSTERED							29.16	0.00	0.00	29.16 ✓
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	
464041-0 ✓		02/10/20	02/04/20	03/05/20		220.49	0.00	0.00	220.49 ✓	
CS INVENTORY										
464053-0 ✓		02/11/20	02/04/20	03/05/20		160.19	0.00	0.00	160.19 ✓	
OFFICE SUPPLIES SURGERY										
464051-0 ✓		02/11/20	02/04/20	03/05/20		153.95	0.00	0.00	153.95 ✓	
SUPPLIES MED SURG										
464059-0 ✓		02/11/20	02/04/20	03/05/20		4.95	0.00	0.00	4.95 ✓	
OFFICE SUPPLIES ER										
464320-0 ✓		02/11/20	02/08/20	03/09/20		51.98	0.00	0.00	51.98 ✓	
OFFICE SUPPLIES ADMIN										
464306-0 ✓		02/11/20	02/08/20	03/09/20		241.89	0.00	0.00	241.89 ✓	
CS INVENTORY										
464265-0 ✓		02/18/20	02/05/20	03/06/20		14.29	0.00	0.00	14.29 ✓	

SUPPLIES MED SURG												
464330-0 ✓			02/18/20	02/08/20	03/09/20		55.43	0.00	0.00	55.43 ✓		
SUPPLIES CLINIC												
464304-0 ✓			02/18/20	02/08/20	03/09/20		10.33	0.00	0.00	10.33 ✓		
SUPPLIES CS												
464507-0 ✓			02/18/20	02/09/20	03/10/20		174.74	0.00	0.00	174.74 ✓		
OFFICE SUPPLIES ADMIN												
464376-0 ✓			02/18/20	02/09/20	03/10/20		79.94	0.00	0.00	79.94 ✓		
OFFICE SUPPLIES ER												
464736-0 ✓			02/25/20	02/12/20	03/13/20		165.42	0.00	0.00	165.42 ✓		
OFFICE SUPPLIES HR												
464562-0 ✓			02/29/20	02/10/20	03/11/20		38.21	0.00	0.00	38.21 ✓		
OFFICE SUPPLIES ADMIN												
464575-0 ✓			02/29/20	02/10/20	03/11/20		11.37	0.00	0.00	11.37 ✓		
OFFICE SUPPLIES BUS OFFIC												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10368	DEWITT POTH & SON	1,383.18	0.00	0.00	1,383.18
Vendor#	Vendor Name					Class	Pay Code					
D1608	DIVERSIFIED BUSINESS SYSTEMS ✓					M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
26399 ✓		02/29/20	02/09/20	03/10/20			59.20	0.00	0.00	59.20 ✓		
OFFICE SUPPLIES NURSE AD												
26398 ✓		02/29/20	02/09/20	03/10/20			87.20	0.00	0.00	87.20 ✓		
OFFICE SUPPLIES BEHAVE HI												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							D1608	DIVERSIFIED BUSINESS SYSTEMS	146.40	0.00	0.00	146.40
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		
20746		02/29/20	02/08/20	03/08/20			17.50	0.00	0.00	17.50 ✓		
OUTSIDE SRV HOUSEKEEPIN												
20747		02/29/20	02/08/20	03/08/20			35.00	0.00	0.00	35.00 ✓		
OUTSIDE SRV HOUSEKEEPIN												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							D1710	DOWNTOWN CLEANERS	52.50	0.00	0.00	52.50
Vendor#	Vendor Name					Class	Pay Code					
D1785	DYNATRONICS CORPORATION ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
861654 ✓		02/25/20	02/09/20	03/10/20			219.91	0.00	0.00	219.91		
SUPPLIES PT												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							D1785	DYNATRONICS CORPORATION	219.91	0.00	0.00	219.91 ✓
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		
A1602031378 ✓		02/11/20	02/03/20	03/05/20			16,052.00	0.00	0.00	16,052.00 ✓		
SOFTWARE EXP IT												
T1602091378 ✓		02/25/20	02/09/20	03/10/20			14,252.72	0.00	0.00	14,252.72		
SOFTWARE OUTSIDE SERVIC												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							C2510	EVIDENT	30,304.72	0.00	0.00	30,304.72

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	
	5-324-06304		02/24/20	02/18/20	03/05/20		10.47	0.00	0.00	10.47	
	FREIGHT EXP LAB										
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
		F1100	FEDERAL EXPRESS CORP.				10.47	0.00	0.00	10.47	✓
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	
	20758		02/29/20	02/18/20	02/18/20		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	
	4634344 ✓		02/24/20	02/09/20	03/10/20		1,676.39	0.00	0.00	1,676.39	✓
	SUPPLIES LAB										
	4634340 ✓		02/24/20	02/09/20	03/10/20		307.47	0.00	0.00	307.47	✓
	SUPPLIES LAB										
	4369980 ✓		02/29/20	02/08/20	03/09/20		1,269.94	0.00	0.00	1,269.94	✓
	SUPPLIES LAB										
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
		F1400	FISHER HEALTHCARE				3,253.80	0.00	0.00	3,253.80	
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	
	030344376 ✓		02/19/20	02/05/20	03/06/20		805.27	0.00	0.00	805.27	
	DUES & SUBCRPTIONS 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					
10653	GLOBAL EQUIPMENT CO. INC. ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
	109083400 ✓		02/19/20	02/04/20	03/05/20		488.25	0.00	0.00	488.25	
	SUPPLIES ADMIN										
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
		10653	GLOBAL EQUIPMENT CO. INC.				488.25	0.00	0.00	488.25	✓
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	
	9022008271 ✓		02/25/20	02/10/20	03/11/20		51.09	0.00	0.00	51.09	
	SUPPLIES PLANT OPS										
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
		W1300	GRAINGER				51.09	0.00	0.00	51.09	✓
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	
	20749 ✓		02/29/20	02/23/20	02/23/20		250.00	0.00	0.00	250.00	✓
	DELIVERY EXP VARIOUS DEP										
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	

	G0401	GULF COAST DELIVERY				250.00	0.00	0.00	250.00
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
99376 ✓		02/12/20	02/09/20	03/10/20		63.46	0.00	0.00	63.46 ✓
	SUPPLIES PLANT OPS								
99382 ✓		02/12/20	02/09/20	03/10/20		23.98	0.00	0.00	23.98 ✓
	SUPPLIES PLANT OPS								
99450 ✓		02/25/20	02/10/20	03/11/20		13.98	0.00	0.00	13.98 ✓
	SUPPLIES PLANT OPS								
99541 ✓		02/29/20	02/13/20	03/14/20		8.98	0.00	0.00	8.98 ✓
	SUPPLIES PLANT OPS								
99535 ✓		02/29/20	02/13/20	03/14/20		69.93	0.00	0.00	69.93 ✓
	SUPPLIES PLANT OPS								
99677 ✓		02/29/20	02/18/20	03/15/20		49.28	0.00	0.00	49.28 ✓
	SUPPLIES PLANT OPS								
99676 ✓		02/29/20	02/18/20	03/15/20		11.98	0.00	0.00	11.98 ✓
	SUPPLIES PLANT OPS								
99692 ✓		02/29/20	02/19/20	03/15/20		359.40	0.00	0.00	359.40 ✓
	SUPPLIES PLANT OPS								
99693 ✓		02/29/20	02/19/20	03/15/20		-341.43	0.00	0.00	-341.43 ✓
	CREDIT PLANT OPS								
99749 ✓		02/29/20	02/22/20	03/15/20		14.78	0.00	0.00	14.78 ✓
	SUPPLIES PLANT OPS								
99787 ✓		02/29/20	02/23/20	03/15/20		61.93	0.00	0.00	61.93 ✓
49421	SUPPLIES PLANT OPS								2.99
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	A1292	GULF COAST HARDWARE / ACE				336.27	0.00	0.00	336.27
Vendor#	Vendor Name		Class	Pay Code		339.26			339.26
G1210	GULF COAST PAPER COMPANY ✓		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1087277 ✓		02/10/20	02/09/20	03/10/20		60.12	0.00	0.00	60.12 ✓
	SUPPLIES HOUSEKEEPING								
1087275 ✓		02/10/20	02/09/20	03/10/20		481.63	0.00	0.00	481.63 ✓
	SUPPLIES HOUSEKEEPING								
1087238 ✓		02/23/20	02/09/20	03/05/20		49.60	0.00	0.00	49.60 ✓
	SUPPLIES HOUSEKEEPING								
1084608 ✓		02/24/20	02/04/20	03/05/20		134.50	0.00	0.00	134.50 ✓
	SUPPLIES HOUSEKEEPING								
1085431 ✓		02/24/20	02/05/20	03/06/20		36.40	0.00	0.00	36.40 ✓
	SUPPLIES HOUSEKEEPING								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	G1210	GULF COAST PAPER COMPANY				762.25	0.00	0.00	762.25
Vendor#	Vendor Name		Class	Pay Code					
11102	GULF COAST REGIONAL ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
882 ✓		02/22/20	02/04/20	03/05/20		750.00	0.00	0.00	750.00 ✓
	HOSP MEANINGFUL USE								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	11102	GULF COAST REGIONAL				750.00	0.00	0.00	750.00 ✓
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
5770485 ✓		02/24/20	02/12/20	03/13/20		17.67	0.00	0.00	17.67 ✓

SUPPLIES CLINIC

5764059 ✓		02/25/20	02/08/20	03/09/20		206.02	0.00	0.00	206.02 ✓
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SUPPLIES PHARMACY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10334	HEALTH CARE LOGISTICS INC	223.69	0.00	0.00	223.69

Vendor# Vendor Name Class Pay Code

11017 HENRY TROEMNER, LLC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
00780802 ✓		02/29/20	02/09/20	03/10/20		150.00	0.00	0.00	150.00

REPAIRS LAB

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11017	HENRY TROEMNER, LLC	150.00	0.00	0.00	150.00 ✓

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
7762962 ✓		02/24/20	02/12/20	03/13/20		257.94	0.00	0.00	257.94

SUPPLIES MAMMO

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H0416	HOLOGIC INC	257.94	0.00	0.00	257.94 ✓

Vendor# Vendor Name Class Pay Code

H1850 HOSPIRA WORLDWIDE, INC ✓

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Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
920189377 ✓		02/18/20	02/11/20	03/12/20		346.65	0.00	0.00	346.65 ✓

CS INVENTORY

920189376 ✓		02/18/20	02/11/20	03/12/20		316.78	0.00	0.00	316.78 ✓
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CS INVENTORY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	H1850	HOSPIRA WORLDWIDE, INC	663.43	0.00	0.00	663.43

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
34388 38854713		02/17/20	02/08/20	03/09/20		31.24	0.00	0.00	31.24

CS INVENTORY & SURGERY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	I0415	INDEPENDENCE MEDICAL	31.24	0.00	0.00	31.24

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
916011733 ✓		02/18/20	02/09/20	03/10/20		42.00	0.00	0.00	42.00 ✓

CS INVENTORY

916017126 ✓		02/18/20	02/10/20	03/11/20		1,642.84	0.00	0.00	1,642.84 ✓
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SUPPLIES SURGERY

916027837 ✓		02/18/20	02/11/20	03/12/20		56.97	0.00	0.00	56.97 ✓
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SUPPLIES SURGERY

915992723 ✓		02/19/20	02/05/20	03/06/20		510.53	0.00	0.00	510.53 ✓
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BLOOD BANK SUPPLIES

916008070 ✓		02/29/20	02/09/20	03/10/20		717.25	0.00	0.00	717.25 ✓
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BLOOD BANK SUPPLIES

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
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	J0150	J & J HEALTH CARE SYSTEMS, INC					2,969.59	0.00	0.00	2,969.59
Vendor#	Vendor Name		Class	Pay Code						
K1230	KONICA MINOLTA ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	130710 ✓		02/29/20	12/07/20	01/07/20		1,435.76	0.00	0.00	1,435.76
	REPAIRS XRAY									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		K1230	KONICA MINOLTA				1,435.76	0.00	0.00	1,435.76 ✓
Vendor#	Vendor Name		Class	Pay Code						
K1255	KRAMES ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	8088229 ✓		02/25/20	02/10/20	03/11/20		192.38	0.00	0.00	192.38
	SUPPLIES SURGICAL CLINIC									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		K1255	KRAMES				192.38	0.00	0.00	192.38 ✓
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
	16006		02/29/20	02/25/20	03/10/20		780.00	0.00	0.00	780.00
	CONT EDUCATION NURSING									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10720	LIFESOURCE EDUCATIONAL SRV LLC				780.00	0.00	0.00	780.00 ✓
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
	INV0535206 ✓		01/31/20	02/01/20	03/15/20		4,550.95	0.00	0.00	4,550.95
	FUEL PLANT OPS									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10578	LUMINANT ENERGY COMPANY LLC				4,550.95	0.00	0.00	4,550.95 ✓
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
	20759		02/29/20	02/18/20	02/18/20		932.50	0.00	0.00	932.50
	EMPLOYEE PERSONAL INVES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10972	M G TRUST				932.50	0.00	0.00	932.50 ✓
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
	00262296 ✓		02/11/20	02/04/20	03/05/20		104.38	0.00	0.00	104.38
	CS INVENTORY									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		J1350	M.C. JOHNSON COMPANY INC				104.38	0.00	0.00	104.38 ✓
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
	INV001490434 ✓		02/18/20	02/08/20	03/09/20		129.04	0.00	0.00	129.04
	SUPPLIES LAB									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		M1500	MARKS PLUMBING PARTS				129.04	0.00	0.00	129.04 ✓
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	
73042574 ✓		02/24/20	02/09/20	03/15/20		500.31	0.00	0.00	500.31 ✓	
	LAB SUPPLIES									
72545052 ✓		02/25/20	02/01/20	03/15/20		644.96	0.00	0.00	644.96 ✓	
	LAB SUPPLIES									
72630004 ✓		02/25/20	02/02/20	03/15/20		3,744.31	0.00	0.00	3,744.31 ✓	
	LAB SUPPLIES									
72790314 ✓		02/25/20	02/04/20	03/15/20		274.80	0.00	0.00	274.80 ✓	
	LAB SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	M2178 MCKESSON MEDICAL SURGICAL INC					5,164.38	0.00	0.00	5,164.38	
Vendor#	Vendor Name				Class	Pay Code				
11165	MEDICAL DATA SYSTEM ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20750		02/29/20	02/26/20	02/26/20		296.10	0.00	0.00	296.10	
	PAYMENT REFUND									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11165 MEDICAL DATA SYSTEM					296.10	0.00	0.00	296.10 ✓	
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	
2278970 ✓		02/17/20	02/09/20	03/08/20		248.16	0.00	0.00	248.16	
	SUPPLIES SURGERY									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	M2827 MEDIVATORS					248.16	0.00	0.00	248.16 ✓	
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	
1094386514 ✓		02/25/20	02/12/20	03/13/20		145.96	0.00	0.00	145.96	
	SUPPLIES ER									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	M2470 MEDLINE INDUSTRIES INC					145.96	0.00	0.00	145.96 ✓	
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	
20757		02/29/20	02/18/20	02/18/20		110.00	0.00	0.00	110.00	
	CLINIC CO PAYS									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	10963 MEMORIAL MEDICAL CLINIC					110.00	0.00	0.00	110.00 ✓	
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	
1807737 ✓		02/29/20	02/09/20	03/10/20		135.94	0.00	0.00	135.94 ✓	
	SUPPLIES LAB									
1808011 ✓		02/29/20	02/10/20	03/11/20		247.94	0.00	0.00	247.94 ✓	
	LAB SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	10182 MERCEDES MEDICAL					383.88	0.00	0.00	383.88	
Vendor#	Vendor Name				Class	Pay Code				
10904	MERCK SHARP & DOHME CORP ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	

7008426451 ✓	02/24/20 02/15/20 03/05/20	2,900.17	0.00	0.00	2,900.17 ✓
PHARMACY DRUGS					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10904 MERCK SHARP & DOHME CORP	2,900.17	0.00	0.00	2,900.17
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
30094192181 ✓		02/11/20	02/04/20	03/05/20	66.04
SUPPLIES XRAY					
30094196968 ✓		02/24/20	02/11/20	03/12/20	795.73
SUPPLIES XRAY					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	M2659 MERRY X-RAY/SOURCEONE HEALTHCA	861.77	0.00	0.00	861.77
Vendor#	Vendor Name	Class	Pay Code		
M2621	MMC AUXILIARY GIFT SHOP	W			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
20751		02/29/20	02/25/20	02/25/20	331.23 330.23
EMPLOYEE GIFT SHOP PURC					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	M2621 MMC AUXILIARY GIFT SHOP	331.23 330.23	0.00	0.00	330.23 331.23
Vendor#	Vendor Name	Class	Pay Code		
10810	MMC EMPLOYEE BENEFIT PLAN ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
FEBRUARY222016		02/29/20	02/22/20	02/22/20	9,618.87
EMPLOYEE MEDICAL CLAIMS					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10810 MMC EMPLOYEE BENEFIT PLAN	9,618.87	0.00	0.00	9,618.87 ✓
Vendor#	Vendor Name	Class	Pay Code		
10536	MORRIS & DICKSON CO, LLC ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross
8516745 ✓		02/24/20	02/23/20	03/05/20	440.34
PHARMACY DRUGS					
8516744 ✓		02/24/20	02/23/20	03/05/20	58.78
PHARMACY DRUGS					
8516747 ✓		02/24/20	02/23/20	03/05/20	17.35
PHARMACY DRUGS					
8516746 ✓		02/24/20	02/23/20	03/05/20	16.18
PHARMACY DRUGS					
8527351 ✓		02/29/20	02/25/20	02/26/20	5.03
PHARMACY DRUGS					
8526017 ✓		02/29/20	02/25/20	02/26/20	33.30
PHARMACY DRUGS					
8526018 ✓		02/29/20	02/25/20	02/26/20	268.23
PHARMACY DRUGS					
8527349 ✓		02/29/20	02/25/20	02/26/20	224.98
PHARMACY DRUGS					
8527350 ✓		02/29/20	02/25/20	02/26/20	1,236.72
PHARMACY DRUGS					
8527011 ✓		02/29/20	02/25/20	02/26/20	61.04
PHARMACY DRUGS					
8530681 ✓		02/29/20	02/26/20	02/27/20	165.09

PHARMACY DRUGS										
8530680	✓		02/29/20	02/26/20	02/27/20		6,324.53	0.00	0.00	6,324.53 ✓
PHARMACY DRUGS										
8530679	✓		02/29/20	02/26/20	02/27/20		202.67	0.00	0.00	202.67 ✓
PHARMACY DRUGS										
8538906	✓		02/29/20	02/29/20	03/01/20		501.53	0.00	0.00	501.53 ✓
PHARMACY DRUGS										
8538905	✓		02/29/20	02/29/20	03/01/20		411.28	0.00	0.00	411.28 ✓
PHARMACY DRUGS										
8538907	✓		02/29/20	02/29/20	03/01/20		183.36	0.00	0.00	183.36 ✓
PHARMACY DRUGS										
Vendor Totals							Number	Name	Gross	Discount
							10536	MORRIS & DICKSON CO, LLC	10,150.41	0.00
									No-Pay	Net
									0.00	10,150.41
Vendor#	Vendor Name				Class	Pay Code				
11163	NINA GREEN ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20734		02/24/20	02/23/20	03/05/20			23.50	0.00	0.00	23.50
CONT EDUCATION MED SURC										
Vendor Totals							Number	Name	Gross	Discount
							11163	NINA GREEN	23.50	0.00
									No-Pay	Net
									0.00	23.50 ✓
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
90219925	✓	02/25/20	02/05/20	03/06/20			361.08	0.00	0.00	361.08
SUPPLIES LAB										
Vendor Totals							Number	Name	Gross	Discount
							10868	NOVA BIOMEDICAL	361.08	0.00
									No-Pay	Net
									0.00	361.08 ✓
Vendor#	Vendor Name				Class	Pay Code				
00920	OFFICE DEPOT ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
822780217001	✓	02/18/20	02/08/20	03/07/20			61.74	0.00	0.00	61.74
OFFICE SUPPLIES BUS OFFIC										
Vendor Totals							Number	Name	Gross	Discount
							00920	OFFICE DEPOT	61.74	0.00
									No-Pay	Net
									0.00	61.74 ✓
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
2014183059	✓	02/10/20	02/04/20	03/05/20			169.33	0.00	0.00	169.33 ✓
SSUPPLIES VARIOUS DEPTS										
2014326274	✓	02/10/20	02/09/20	03/10/20			10.40	0.00	0.00	10.40 ✓
2014326042	✓	02/10/20	02/09/20	03/10/20			92.63	0.00	0.00	92.63 ✓
SUPPLIES CLINIC & PT										
2014329135	✓	02/10/20	02/09/20	03/10/20			840.38	0.00	0.00	840.38 ✓
SUPPLIES VARIOUS DEPTS										
2014326051	✓	02/10/20	02/09/20	03/10/20			61.10	0.00	0.00	61.10 ✓
SUPPLIES CS										
2014177384	✓	02/11/20	02/04/20	03/05/20			69.42	0.00	0.00	69.42 ✓
CS INVENTORY										
2014175177	✓	02/11/20	02/04/20	03/05/20			20.48	0.00	0.00	20.48 ✓
CS INVENTORY										
2014175168	✓	02/11/20	02/04/20	03/05/20			103.78	0.00	0.00	103.78 ✓

SUPPLIES DIETARY												
2014174831	✓		02/11/20	02/04/20	03/05/20		10.24	0.00	0.00	10.24 ✓		
CS INVENTORY												
2014174792	✓		02/11/20	02/04/20	03/05/20		349.35	0.00	0.00	349.35 ✓		
SUPPLIES SURGERY												
2014183360	✓		02/11/20	02/04/20	03/05/20		1,953.41	0.00	0.00	1,953.41 ✓		
CS INVENTORY												
2014174172	✓		02/11/20	02/04/20	03/05/20		44.25	0.00	0.00	44.25 ✓		
SUPPLIES RESPIRATORY												
2014325121	✓		02/17/20	02/09/20	03/10/20		336.85	0.00	0.00	336.85 ✓		
CS INVENTORY												
2014329548	✓		02/17/20	02/09/20	03/10/20		574.94	0.00	0.00	574.94 ✓		
SUPPLIES SURGERY & RECO												
2014325380	✓		02/17/20	02/09/20	03/10/20		108.27	0.00	0.00	108.27 ✓		
SUPPLIES SURGERY												
2014324876	✓		02/17/20	02/09/20	03/10/20		43.46	0.00	0.00	43.46 ✓		
CS INVENTORY												
2014329938	✓		02/17/20	02/09/20	03/10/20		1,497.56	0.00	0.00	1,497.56 ✓		
CS INVENTORY & PT SUPPLIE												
2014402537	✓		02/17/20	02/11/20	03/12/20		996.86	0.00	0.00	996.86 ✓		
SUPPLIES SURGERY & ICU												
2014397469	✓		02/17/20	02/11/20	03/12/20		33.96	0.00	0.00	33.96 ✓		
SUPPLIES OB												
2014402672	✓		02/17/20	02/11/20	03/12/20		725.89	0.00	0.00	725.89 ✓		
CS INVENTORY												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							OM425	OWENS & MINOR	8,042.56	0.00	0.00	8,042.56
Vendor#	Vendor Name					Class	Pay Code					
11142	PAETEC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
59197650	✓	02/29/20	02/22/20	03/12/20			8,037.82	0.00	0.00	8,037.82		
TELEPHONE EXPENSE												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							11142	PAETEC	8,037.82	0.00	0.00	8,037.82 ✓
Vendor#	Vendor Name					Class	Pay Code					
P1038	PAM PARRISH ✓					W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
20765		02/29/20	02/23/20	02/23/20			29.16	0.00	0.00	29.16		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							P1038	PAM PARRISH	29.16	0.00	0.00	29.16 ✓
Vendor#	Vendor Name					Class	Pay Code					
P1260	PENTAX MEDICAL COMPANY ✓					M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
92062178	✓	02/25/20	02/11/20	03/12/20			7,752.10	0.00	0.00	7,752.10		
1 YR MAINT CONTR SURGER\												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							P1260	PENTAX MEDICAL COMPANY	7,752.10	0.00	0.00	7,752.10 ✓
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		

A1530759 ✓		02/18/20	02/04/20	03/05/20		213.00	0.00	0.00	213.00
PHARMACY DRUGS									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
10204 PHARMEDIUM SERVICES LLC						213.00	0.00	0.00	213.00 ✓
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
932394021 ✓		02/24/20	02/12/20	03/13/20		101.40	0.00	0.00	101.40 ✓
SUPPLIES ICU									
932368704 ✓		02/25/20	02/08/20	03/09/20		213.72	0.00	0.00	213.72 ✓
SUPPLIES RECOVERY									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
10032 PHILIPS HEALTHCARE						315.12	0.00	0.00	315.12
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
1063003 ✓		02/29/20	02/09/20	03/10/20		125.26	0.00	0.00	125.26
LAB SUPPLIES									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
P1876 POLYMEDCO INC.						125.26	0.00	0.00	125.26 ✓
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
B19410 ✓		02/18/20	02/08/20	03/09/20		5.98	0.00	0.00	5.98 ✓
SUPPLIES PLANT OPS									
B19536 ✓		02/29/20	02/12/20	03/13/20		1.19	0.00	0.00	1.19 ✓
A18707	SUPPLIES PLANT OPS								19.99
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
P2200 POWER ELECTRIC						7.17	0.00	0.00	7.17
Vendor#	Vendor Name				Class	Pay Code			
10372	PRECISION DYNAMICS CORP (PDC) ✓					27.14			27.14
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
3276669 ✓		02/17/20	02/05/20	03/06/20		46.06	0.00	0.00	46.06 ✓
CS INVENTORY									
3285130 ✓		02/24/20	02/12/20	03/13/20		51.80	0.00	0.00	51.80 ✓
SUPPLIES MED SURG									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
10372 PRECISION DYNAMICS CORP (PDC)						97.86	0.00	0.00	97.86
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
20767		02/29/20	01/31/20	01/31/20		5,050.00	0.00	0.00	5,050.00
OUTSIDE SRV RESP CARE									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
P1725 PREMIER SLEEP DISORDERS CENTER						5,050.00	0.00	0.00	5,050.00 ✓
Vendor#	Vendor Name				Class	Pay Code			
Q0565	QUESET MEDICAL ✓				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
0118013-IN ✓		02/29/20	02/19/20	02/20/20		228.25	0.00	0.00	228.25
SUPPLIES RESP CARE									
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net
Q0565 QUESET MEDICAL						228.25	0.00	0.00	228.25 ✓

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	
20735		02/24/20	11/30/20	03/05/20		350.00	0.00	0.00	350.00	
	READ FEES XRAY									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	R1268	RADIOLOGY UNLIMITED, PA			350.00	0.00	0.00	350.00	✓	
Vendor#	Vendor Name	Class	Pay Code							
11164	RS CLARK & ASSOCIATES, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20151231		02/24/20	12/31/20	03/05/20		2,566.21	0.00	0.00	2,566.21	
	COLLECTION FEES BUS OFFI									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	11164	RS CLARK & ASSOCIATES, INC			2,566.21	0.00	0.00	2,566.21	✓	
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	
999999		02/29/20	01/22/20	03/08/20		45.00	0.00	0.00	45.00	
	DUES & SUBCRIPTIONS ADMI									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	S0900	SAM'S CLUB DIRECT			45.00	0.00	0.00	45.00	✓	
Vendor#	Vendor Name	Class	Pay Code							
10625	SARA RUBIO ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20744		02/29/20	02/26/20	02/26/20		198.52	0.00	0.00	198.52	
	TRAVEL EXPENSE ER									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	10625	SARA RUBIO			198.52	0.00	0.00	198.52	✓	
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	
5851-1 ✓		02/25/20	02/08/20	03/09/20		109.95	0.00	0.00	109.95	✓
	SUPPLIES PLANT OPS									
6035-0 ✓		02/25/20	02/12/20	03/13/20		69.66	0.00	0.00	69.66	✓
	SUPPLIES PLANT OPS									
6062-4 ✓		02/29/20	02/13/20	03/14/20		2.44	0.00	0.00	2.44	✓
	SUPPLIES PLANT OPS									
6365-1 ✓		02/29/20	02/23/20	03/15/20		73.04	0.00	0.00	73.04	✓
	SUPPLIES PLANT OPS									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	S1800	SHERWIN WILLIAMS			255.09	0.00	0.00	255.09		
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	
20745		02/29/20	02/28/20	02/28/20		1,252.80	0.00	0.00	1,252.80	
	OUTSIDE SRV TRANSCRIPTIC									
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net		
	K0536	SHIRLEY KARNEI			1,252.80	0.00	0.00	1,252.80	✓	
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	

16623		02/29/20	03/01/20	03/10/20		1,275.00	0.00	0.00	1,275.00	✓		
ADVERTISING												
16646		02/29/20	03/01/20	03/10/20		390.00	0.00	0.00	390.00	✓		
ADVERTISING												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						10699	SIGN AD, LTD.	1,665.00	0.00	0.00	1,665.00	
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			
92802737	✓	02/17/20	02/08/20	03/07/20		522.10	0.00	0.00	522.10			
SUPPLIES SURGERY												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						S2362	SMITH & NEPHEW	522.10	0.00	0.00	522.10	✓
Vendor#	Vendor Name					Class	Pay Code					
S2692	STACY SYSTEMS INC ✓					M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
1601027	✓	02/24/20	02/01/20	03/05/20		2,925.00	0.00	0.00	2,925.00			
OUTSIDE SRV PLANT OPS												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						S2692	STACY SYSTEMS INC	2,925.00	0.00	0.00	2,925.00	✓
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			
822168	✓	02/29/20	02/11/20	03/12/20		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					
S2830	STRYKER SALES CORP ✓					M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net			
698152A	✓	02/24/20	02/11/20	03/12/20		47.40	0.00	0.00	47.40			
SUPPLIES SURGERY												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						S2830	STRYKER SALES CORP	47.40	0.00	0.00	47.40	✓
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			
2673255	✓	02/18/20	02/09/20	03/10/20		280.11	0.00	0.00	280.11	✓		
SUPPLIES SURGERY												
2673857	✓	02/18/20	02/10/20	03/11/20		280.11	0.00	0.00	280.11	✓		
SUPPLIES SURGERY												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						10735	STRYKER SUSTAINABILITY	560.22	0.00	0.00	560.22	
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			
070171	✓	02/18/20	02/10/20	03/11/20		1,102.81	0.00	0.00	1,102.81			
LEADERSHIP GROUP												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						11103	STUDER GROUP, LLC	1,102.81	0.00	0.00	1,102.81	✓
Vendor#	Vendor Name					Class	Pay Code					
11070	SUSAN SMALLEY ✓											

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
20752		02/29/20	02/23/20	02/23/20		29.16	0.00	0.00	29.16		
TRAVEL EXPENSE OB											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11070	SUSAN SMALLEY	29.16	0.00	0.00	29.16 ✓
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		
602182720	✓	02/29/20	02/18/20	03/09/20		957.63	0.00	0.00	957.63		
FOOD EXPENSE DIETARY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						S2951	SYSCO FOOD SERVICES OF	957.63	0.00	0.00	957.63 ✓
Vendor#	Vendor Name				Class	Pay Code					
11140	TEXAS ADVANTAGE COMMUNITY BANK ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
20753		02/29/20	02/19/20	02/29/20		3,690.52	0.00	0.00	3,690.52		
LEASE & RENTAL XRAY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11140	TEXAS ADVANTAGE COMMUNITY BANK	3,690.52	0.00	0.00	3,690.52 ✓
Vendor#	Vendor Name				Class	Pay Code					
11133	TEXAS MEDICAL LIABILITY TRUST ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
715618		02/29/20	02/16/20	02/16/20		12,904.50	0.00	0.00	12,904.50		
DR LINCOLN LIABILITY INS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11133	TEXAS MEDICAL LIABILITY TRUST	12,904.50	0.00	0.00	12,904.50 ✓
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		
20764		02/29/20	03/01/20	03/01/20		4,644.00	0.00	0.00	4,644.00		
WORK COMP INS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						T2204	TEXAS MUTUAL INSURANCE CO	4,644.00	0.00	0.00	4,644.00 ✓
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		
20755		02/29/20	02/25/20	02/25/20		106.97	0.00	0.00	106.97 ✓		
STUDENT LOAN GARNISHMEI											
20756	✓	02/29/20	02/25/20	02/25/20		129.09	0.00	0.00	129.09 ✓		
STUDENT LOAN GARNISHMEI											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						T2303	TG	236.06	0.00	0.00	236.06
Vendor#	Vendor Name				Class	Pay Code					
10917	THE STABLE PROGRAM ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
39792	✓	02/18/20	02/05/20	03/07/20		117.27	0.00	0.00	117.27		
SUPPLIES NURSERY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10917	THE STABLE PROGRAM	117.27	0.00	0.00	117.27 ✓
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		
20752		02/29/20	02/21/20	02/21/20		24.80	0.00	0.00	24.80		
DUES & SUBSCRIPTIONS ADMIN											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						V1050	THE VICTORIA ADVOCATE	24.80	0.00	0.00	24.80
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		
8150720599		02/24/20	02/09/20	03/10/20		28.50	0.00	0.00	28.50		
OUTSIDE SRV BIO MED											
8150720499		02/24/20	02/09/20	03/10/20		48.50	0.00	0.00	48.50		
OUTSIDE SRV MAINT											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						U1054	UNIFIRST HOLDINGS	77.00	0.00	0.00	77.00
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		
8400212754		02/24/20	02/02/20	03/05/20		104.21	0.00	0.00	104.21		
LAUNDRY OB											
8400212805		02/24/20	02/02/20	03/05/20		1,200.30	0.00	0.00	1,200.30		
LAUNDRY HOUSEKEEPING											
8400213130		02/24/20	02/05/20	03/06/20		1,078.52	0.00	0.00	1,078.52		
LAUNDRY HOUSEKEEPING											
8400213087		02/24/20	02/05/20	03/06/20		370.62	0.00	0.00	370.62		
LAUNDRY SURGERY											
8400213258		02/24/20	02/09/20	03/10/20		92.51	0.00	0.00	92.51		
LAUNDRY HOUSEKEEPING											
8400213255		02/24/20	02/09/20	03/10/20		196.60	0.00	0.00	196.60		
LAUNDRY HOUSEKEEPING											
8400213257		02/24/20	02/09/20	03/10/20		104.21	0.00	0.00	104.21		
LAUNDRY OB											
8400213256		02/24/20	02/09/20	03/10/20		152.79	0.00	0.00	152.79		
LAUNDRY DIETARY											
8400213307		02/24/20	02/09/20	03/10/20		1,042.08	0.00	0.00	1,042.08		
LAUNDRY HOUSEKEEPING											
8400213619		02/24/20	02/12/20	03/13/20		1,111.42	0.00	0.00	1,111.42		
LAUNDRY HOUSEKEEPING											
8400213577		02/24/20	02/12/20	03/13/20		370.62	0.00	0.00	370.62		
LAUNDRY SURGERY											
8400212794		02/29/20	02/02/20	03/03/20		150.60	0.00	0.00	150.60		
LAUNDRY DIETARY											
8400213294		02/29/20	02/09/20	03/10/20		150.60	0.00	0.00	150.60		
LAUNDRY DIETARY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						U1064	UNIFIRST HOLDINGS INC	6,125.08	0.00	0.00	6,125.08
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		
6703373		02/18/20	02/05/20	03/06/20		272.90	0.00	0.00	272.90		
EMPLOYEE UNIFORMS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						U1056	UNIFORM ADVANTAGE	272.90	0.00	0.00	272.90

Vendor#	Vendor Name				Class	Pay Code				
U1200	UNITED AD LABEL CO INC ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
868845022	✓	02/22/20	02/05/20	03/06/20		127.59	0.00	0.00	127.59	
	SUPPLIES DIETARY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	U1200	UNITED AD LABEL CO INC				127.59	0.00	0.00	127.59	✓
Vendor#	Vendor Name				Class	Pay Code				
U1350	UPS ✓				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
0000778941086	✓	02/29/20	02/20/20	03/02/20		1,074.87	0.00	0.00	1,074.87	
	FREIGHT EXPENSE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	U1350	UPS				1,074.87	0.00	0.00	1,074.87	✓
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	
5108715	✓	02/29/20	01/29/20	02/18/20		31.76	0.00	0.00	31.76	✓
	SUPPLIES DIETARY									
5186610	✓	02/29/20	02/03/20	02/23/20		44.61	0.00	0.00	44.61	✓
	SUPPLIES ADMIN									
5382089	✓	02/29/20	02/15/20	03/06/20		2,011.25	0.00	0.00	2,011.25	✓
	FOOD SUPPLIES DIETARY									
5447935	✓	02/29/20	02/18/20	03/09/20		1,624.80	0.00	0.00	1,624.80	✓
	FOOD SUPPLIES DIETARY									
5447924	✓	02/29/20	02/18/20	03/09/20		54.11	0.00	0.00	54.11	✓
	FOOD SUPPLIES DIETARY									
5511618	✓	02/29/20	02/22/20	03/13/20		2,220.47	0.00	0.00	2,220.47	✓
	FOOD SUPPLIES DIETARY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10172	US FOOD SERVICE				5,987.00	0.00	0.00	5,987.00	
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	
1977697021916		02/29/20	02/19/20	03/15/20		60.67	0.00	0.00	60.67	✓
	TELEPHONE EXPENSE									
5521567021916		02/29/20	02/19/20	03/15/20		57.00	0.00	0.00	57.00	✓
	TELEPHONE EXPENSE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	V0555	VERIZON SOUTHWEST				117.67	0.00	0.00	117.67	
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	
9760603662		02/29/20	02/16/20	03/11/20		238.70	0.00	0.00	238.70	
	TELEPHONE EXPENSE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	V0559	VERIZON WIRELESS				238.70	0.00	0.00	238.70	✓
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	
MMC0007	✓	02/29/20	03/01/20	03/01/20		58,000.00	0.00	0.00	58,000.00	

Michael J. Pfeifer
Calhoun County Judge

Date: 3-21-16

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PROF FEES HOSPITALIST

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
11112	VICTORIA PROFESSIONAL									58,000.00	0.00	0.00	58,000.00 ✓
10793	WAGeworks												
				125AI0446944		02/25/20	02/11/20	03/12/20		125.00	0.00	0.00	125.00
					FLEX SPENDING ADMIN FEE								
10793	WAGeworks									125.00	0.00	0.00	125.00 ✓
10915	WAGeworks												
				20762		02/29/20	02/04/20	02/04/20		1,046.53	0.00	0.00	1,046.53 ✓
					MONEY TO FUND FLEX SPENI								
				20763		02/29/20	02/18/20	02/18/20		2,231.20	0.00	0.00	2,231.20 ✓
					MONEY TO FUND FLEX SPENI								
10915	WAGeworks									3,277.73	0.00	0.00	3,277.73 ✓
W1063	WELCH ALLYN INC												
				93387120		02/25/20	02/09/20	03/10/20		53.85	0.00	0.00	53.85 ✓
					SUPPLIES BIO MED								
W1063	WELCH ALLYN INC									53.85	0.00	0.00	53.85 ✓
11110	WERFEN USA LLC												
				9110264289		12/31/20	12/29/20	03/15/20		28.00	0.00	0.00	28.00 ✓
					LAB SUPPLIES								
				9310013859		01/19/20	12/31/20	03/15/20		-28.00	0.00	0.00	-28.00 ✓
					LAB SUPPLIES CREDIT								
				9310013995		02/25/20	01/05/20	02/04/20		-1,449.55	0.00	0.00	-1,449.55 ✓
					CREDIT LAB SUPPLIES								
				9110275417		02/25/20	02/08/20	03/09/20		4,057.79	0.00	0.00	4,057.79 ✓
					LAB SUPPLIES								
				9110275650		02/29/20	02/09/20	03/10/20		2,667.00	0.00	0.00	2,667.00
					3 MO INVENTORY LAB								
				9110275950		02/29/20	02/10/20	03/11/20		7,348.00	0.00	0.00	7,348.00 ✓
					3 MONTH INVENTORY LAB								
11110	WERFEN USA LLC									12,623.24	0.00	0.00	12,623.24
11166	WEST INTERACTIVE SERVICES CORP												
				INV001597680		02/29/20	01/31/20	03/01/20		303.00	0.00	0.00	303.00
					OUTSIDE SRV CLINIC								
11166	WEST INTERACTIVE SERVICES CORP									303.00	0.00	0.00	303.00 ✓

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
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See top of pg

Michael J. Pfeifer
Calhoun County Judge
Date:

296,764.94

0.00

0.00

296,764.94

Add Gulf Coast
Hardware/ACE { + 2.99

Pg 11
correction { < 330.23 >
+ 331.23

Add Power
Hardware { + 19.99

\$ 296,788.92

296,764.94 +
2.99 +
330.23 -
331.23 +
19.99 +
296,788.92 *

* Judge's signature
on pg 20

APPROVED
ON

MAR 03 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CKS# 165189
+0

#165305

RUN DATE: 03/02/16
TIME: 10:07

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1
APCDEDIT

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
[REDACTED]	[REDACTED]	082515	171.39	2		[REDACTED]	
ARID=0001 TOTAL			171.39				
TOTAL			171.39				

APPROVED
ON

MAR 03 2016

CK#165306

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS


Michael J. Pfeifer
Calhoun County Judge
Date: 3-21-16

8

RUN DATE:03/03/16
TIME:14:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/03/16 THRU 03/03/16

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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
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A/P	165189	03/03/16	315.12	PHILIPS HEALTHCARE
A/P	165190	03/03/16	5,987.00	US FOOD SERVICE
A/P	165191	03/03/16	383.88	MERCEDES MEDICAL
A/P	165192	03/03/16	213.00	PHARMEDIUM SERVICES LLC
A/P	165193	03/03/16	223.69	HEALTH CARE LOGISTICS INC
A/P	165194	03/03/16	996.70	CENTURION MEDICAL PRODUCTS
A/P	165195	03/03/16	.00	VOIDED
A/P	165196	03/03/16	1,383.18	DEWITT POTH & SON
A/P	165197	03/03/16	97.86	PRECISION DYNAMICS CORP (PDC)
A/P	165198	03/03/16	805.27	GE HEALTHCARE IITS USA CORP
A/P	165199	03/03/16	.00	VOIDED
A/P	165200	03/03/16	10,150.41	MORRIS & DICKSON CO, LLC
A/P	165201	03/03/16	19,900.00	CPP WOUND CARE #28,LLC
A/P	165202	03/03/16	4,550.95	LUMINANT ENERGY COMPANY LLC
A/P	165203	03/03/16	25,929.80	BKD, LLP
A/P	165204	03/03/16	198.52	SARA RUBIO
A/P	165205	03/03/16	488.25	GLOBAL EQUIPMENT CO. INC.
A/P	165206	03/03/16	1,665.00	SIGN AD, LTD.
A/P	165207	03/03/16	30.24	ANNA HERNANDEZ
A/P	165208	03/03/16	780.00	LIFESOURCE EDUCATIONAL SRV LLC
A/P	165209	03/03/16	560.22	STRYKER SUSTAINABILITY
A/P	165210	03/03/16	125.00	WAGEWORKS
A/P	165211	03/03/16	9,618.87	MMC EMPLOYEE BENEFIT PLAN
A/P	165212	03/03/16	361.08	NOVA BIOMEDICAL
A/P	165213	03/03/16	2,900.17	MERCK SHARP & DOHME CORP
A/P	165214	03/03/16	3,277.73	WAGEWORKS
A/P	165215	03/03/16	117.27	THE STABLE PROGRAM
A/P	165216	03/03/16	110.00	MEMORIAL MEDICAL CLINIC
A/P	165217	03/03/16	932.50	M G TRUST
A/P	165218	03/03/16	150.00	HENRY TROEMNER, LLC
A/P	165219	03/03/16	2,680.82	COMBINED INSURANCE CO
A/P	165220	03/03/16	75.00	FIRST CLEARING
A/P	165221	03/03/16	959.62	BIRCH COMMUNICATIONS
A/P	165222	03/03/16	29.16	SUSAN SMALLEY
A/P	165223	03/03/16	750.00	GULF COAST REGIONAL
A/P	165224	03/03/16	1,102.81	STUDER GROUP, LLC
A/P	165225	03/03/16	58,000.00	VICTORIA PROFESSIONAL
A/P	165226	03/03/16	12,904.50	TEXAS MEDICAL LIABILITY TRUST
A/P	165227	03/03/16	3,690.52	TEXAS ADVANTAGE COMMUNITY BANK
A/P	165228	03/03/16	8,037.82	PAETEC
A/P	165229	03/03/16	29.16	DEBRA MUSTERED
A/P	165230	03/03/16	23.50	NINA GREEN
A/P	165231	03/03/16	2,566.21	RS CLARK & ASSOCIATES, INC
A/P	165232	03/03/16	296.10	MEDICAL DATA SYSTEM
A/P	165233	03/03/16	303.00	WEST INTERACTIVE SERVICES CORP
A/P	165234	03/03/16	339.26	GULF COAST HARDWARE / ACE
A/P	165235	03/03/16	91.54	AMERISOURCEBERGEN DRUG CORP
A/P	165236	03/03/16	141.00	AIR SPECIALTY & EQUIPMENT CO
A/P	165237	03/03/16	2,296.73	AIRGAS-SOUTHWEST
A/P	165238	03/03/16	279.12	CARBFUSION

RUN DATE:03/03/16
TIME:14:35

MEMORIAL MEDICAL CENTER
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GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165239	03/03/16	625.00	ARROW INTERNATIONAL INC
A/P	165240	03/03/16	779.24	BARD PERIPHERAL VASCULAR
A/P	165241	03/03/16	779.81	BAXTER HEALTHCARE CORP
A/P	165242	03/03/16	541.09	BECKMAN COULTER INC
A/P	165243	03/03/16	125.95	BEEKLEY MEDICAL
A/P	165244	03/03/16	457.00	BOSTON SCIENTIFIC CORPORATION
A/P	165245	03/03/16	181.68	BOUND TREE MEDICAL, LLC
A/P	165246	03/03/16	25.00	CAL COM FEDERAL CREDIT UNION
A/P	165247	03/03/16	248.00	CYGNUS MEDICAL LLC
A/P	165248	03/03/16	92.45	CHANNING L BETE CO INC
A/P	165249	03/03/16	3,580.11	CITY OF PORT LAVACA
A/P	165250	03/03/16	827.99	CONMED CORPORATION
A/P	165251	03/03/16	30,304.72	EVIDENT
A/P	165252	03/03/16	146.40	DIVERSIFIED BUSINESS SYSTEMS
A/P	165253	03/03/16	52.50	DOWNTOWN CLEANERS
A/P	165254	03/03/16	219.91	DYNATRONICS CORPORATION
A/P	165255	03/03/16	10.47	FEDERAL EXPRESS CORP.
A/P	165256	03/03/16	3,253.80	FISHER HEALTHCARE
A/P	165257	03/03/16	250.00	GULF COAST DELIVERY
A/P	165258	03/03/16	762.25	GULF COAST PAPER COMPANY
A/P	165259	03/03/16	257.94	HOLOGIC INC
A/P	165260	03/03/16	663.43	HOSPIRA WORLDWIDE, INC
A/P	165261	03/03/16	31.24	INDEPENDENCE MEDICAL
A/P	165262	03/03/16	12,623.24	WERFEN USA LLC
A/P	165263	03/03/16	2,969.59	J & J HEALTH CARE SYSTEMS, INC
A/P	165264	03/03/16	104.38	M.C. JOHNSON COMPANY INC
A/P	165265	03/03/16	1,252.80	SHIRLEY KARNEI
A/P	165266	03/03/16	1,435.76	KONICA MINOLTA
A/P	165267	03/03/16	192.38	KRAMES
A/P	165268	03/03/16	129.04	MARKS PLUMBING PARTS
A/P	165269	03/03/16	5,164.38	MCKESSON MEDICAL SURGICAL INC
A/P	165270	03/03/16	145.96	MEDLINE INDUSTRIES INC
A/P	165271	03/03/16	258.36	BAYER HEALTHCARE
A/P	165272	03/03/16	331.23	MMC AUXILIARY GIFT SHOP
A/P	165273	03/03/16	861.77	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	165274	03/03/16	248.16	MEDIVATORS
A/P	165275	03/03/16	61.74	OFFICE DEPOT
A/P	165276	03/03/16	.00	VOIDED
A/P	165277	03/03/16	.00	VOIDED
A/P	165278	03/03/16	8,042.56	OWENS & MINOR
A/P	165279	03/03/16	29.16	PAM PARRISH
A/P	165280	03/03/16	7,752.10	PENTAX MEDICAL COMPANY
A/P	165281	03/03/16	5,050.00	PREMIER SLEEP DISORDERS CENTER
A/P	165282	03/03/16	125.26	POLYMEDCO INC.
A/P	165283	03/03/16	27.16	POWER ELECTRIC
A/P	165284	03/03/16	228.25	QUESET MEDICAL
A/P	165285	03/03/16	350.00	RADIOLOGY UNLIMITED, PA
A/P	165286	03/03/16	45.00	SAM'S CLUB DIRECT
A/P	165287	03/03/16	255.09	SHERWIN WILLIAMS
A/P	165288	03/03/16	522.10	SMITH & NEPHEW
A/P	165289	03/03/16	2,925.00	STACY SYSTEMS INC

RUN DATE:03/03/16
TIME:14:35

MEMORIAL MEDICAL CENTER
CHECK REGISTER
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GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165290	03/03/16	340.00	STANFORD VACUUM SERVICE
A/P	165291	03/03/16	47.40	STRYKER SALES CORP
A/P	165292	03/03/16	957.63	SYSO FOOD SERVICES OF
A/P	165293	03/03/16	4,644.00	TEXAS MUTUAL INSURANCE CO
A/P	165294	03/03/16	236.06	TG
A/P	165295	03/03/16	77.00	UNIFIRST HOLDINGS
A/P	165296	03/03/16	272.90	UNIFORM ADVANTAGE
A/P	165297	03/03/16	6,125.08	UNIFIRST HOLDINGS INC
A/P	165298	03/03/16	127.59	UNITED AD LABEL CO INC
A/P	165299	03/03/16	1,074.87	UPS
A/P	165300	03/03/16	117.67	VERIZON SOUTHWEST
A/P	165301	03/03/16	238.70	VERIZON WIRELESS
A/P	165302	03/03/16	24.80	THE VICTORIA ADVOCATE
A/P	165303	03/03/16	53.85	WELCH ALLYN INC
A/P	165304	03/03/16	51.09	GRAINGER
A/P	165305	03/03/16	206.25	CARMEN C. ZAPATA-ARROYO
A/P	165306	03/03/16	171.39	
TOTALS:			296,960.31	

PH

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
3/7/2016

Nursing Home	IBC Account Number	Previous Beginning 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	218,402.10	125,151.36	-	218,302.10	-	-	125,251.36	<u>125,151.36</u>

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co

JP Morgan Chase Bank

ABA 111000614

Acco ██████████ 4257

Nursing Home	IBC Account Number	Previous Beginning 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	346,712.86	109,738.96	-	346,612.86	-	-	109,838.96	<u>109,738.96</u>
Crescent	██████████ 4588	227,564.34	49,100.61	-	227,464.34	-	-	49,200.61	<u>49,100.61</u>
Broadmoor	██████████ 4596	495,373.19	36,722.75	-	495,273.19	-	-	36,822.75	<u>36,722.75</u>
Fort Bend	██████████ 4618	199,000.11	19,647.11	-	198,900.11	-	-	19,747.11	<u>19,647.11</u>
									<u>215,209.43</u>

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

Cantex Health Care Centers III LLC

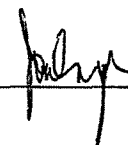
JP Morgan Chase Bank

ABA 111000614

Acco ██████████ 2922

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

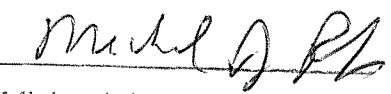
Note 2: Each account has a base balance of \$100 that MMC deposited to open account.

Approved: 

APPROVED

MAR 07 2016

COUNTY AUDITOR


Michael J. Pfeifer
Calhoun County Judge
Date: 3-21-16

IBC Bank Activity
2/29/16 through 3/6/16

Ashford Gardens

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
2/29/2016	113105025	4553 142 ACH CREDIT RECEIVED		28,469.05	675423	NOVITAS SOLUTION HCCLAIMPMT
2/29/2016	113105025	4553 142 ACH CREDIT RECEIVED		448.55	PN1326436189	Molina HC of TX Molina HC
3/1/2016	113105025	4553 495 OUTGOING MONEY TRANSFER	218,302.10			ASHFORD HEALTH CARE CENTER LTD
3/2/2016	113105025	4553 142 ACH CREDIT RECEIVED		1,785.14	PN1326436189	Molina HC of TX Molina HC
3/2/2016	113105025	4553 301 COMMERCIAL DEPOSIT		91,183.69	0 14080955	
3/3/2016	113105025	4553 142 ACH CREDIT RECEIVED		3,264.93	675423	NOVITAS SOLUTION HCCLAIMPMT
			<u>218,302.10</u>	<u>125,151.36</u>		

Solera at West Houston

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
2/29/2016	113105025	4561 142 ACH CREDIT RECEIVED		1,563.84	1.60225E+13	AMERIGROUP CORPD HCCLAIMPMT
2/29/2016	113105025	4561 142 ACH CREDIT RECEIVED		2,015.10	1.60225E+13	AMERIGROUP CORPD HCCLAIMPMT
2/29/2016	113105025	4561 142 ACH CREDIT RECEIVED		12,202.35	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
2/29/2016	113105025	4561 142 ACH CREDIT RECEIVED		30,391.78	676310	NOVITAS SOLUTION HCCLAIMPMT
3/1/2016	113105025	4561 495 OUTGOING MONEY TRANSFER	346,612.86			CANTEX HEALTH CARE CENTERS LLC
3/1/2016	113105025	4561 142 ACH CREDIT RECEIVED		19,046.90	676310	NOVITAS SOLUTION HCCLAIMPMT
3/2/2016	113105025	4561 301 COMMERCIAL DEPOSIT		40,686.98	0 14080990	
3/4/2016	113105025	4561 142 ACH CREDIT RECEIVED		0.01	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/4/2016	113105025	4561 142 ACH CREDIT RECEIVED		3,832.00	676310	NOVITAS SOLUTION HCCLAIMPMT
			<u>346,612.86</u>	<u>109,738.96</u>		

Crescent

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
2/29/2016	113105025	4588 142 ACH CREDIT RECEIVED		5,580.77	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
2/29/2016	113105025	4588 142 ACH CREDIT RECEIVED		1,499.27	PN1669860425	Molina HC of TX Molina HC
2/29/2016	113105025	4588 142 ACH CREDIT RECEIVED		196.25	676323	NOVITAS SOLUTION HCCLAIMPMT
3/1/2016	113105025	4588 495 OUTGOING MONEY TRANSFER	227,464.34			CANTEX HEALTH CARE CENTERS III
3/1/2016	113105025	4588 142 ACH CREDIT RECEIVED		11,368.95	1.60227E+13	AMERIGROUP CORPO HCCLAIMPMT
3/2/2016	113105025	4588 301 COMMERCIAL DEPOSIT		30,455.37	0 14080979	
			<u>227,464.34</u>	<u>49,100.61</u>		

Broadmoor

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
2/29/2016	113105025	4596 142 ACH CREDIT RECEIVED		2,313.24	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/1/2016	113105025	4596 495 OUTGOING MONEY TRANSFER	495,273.19			CANTEX HEALTH CARE CENTERS III
3/2/2016	113105025	4596 301 COMMERCIAL DEPOSIT		30,661.63	0 14080967	
3/2/2016	113105025	4596 142 ACH CREDIT RECEIVED		3,747.88	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
			<u>495,273.19</u>	<u>36,722.75</u>		

Fort Bend

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
2/29/2016	113105025	4618 142 ACH CREDIT RECEIVED		884.31	675663	NOVITAS SOLUTION HCCLAIMPMT
3/1/2016	113105025	4618 495 OUTGOING MONEY TRANSFER	198,900.11			CANTEX HEALTH CARE CENTERS III
3/1/2016	113105025	4618 142 ACH CREDIT RECEIVED		524.40	675663	NOVITAS SOLUTION HCCLAIMPMT
3/2/2016	113105025	4618 301 COMMERCIAL DEPOSIT		11,265.29	0 14080987	
3/3/2016	113105025	4618 142 ACH CREDIT RECEIVED		2,433.76	675663	NOVITAS SOLUTION HCCLAIMPMT
3/4/2016	113105025	4618 142 ACH CREDIT RECEIVED		4,539.35	675663	NOVITAS SOLUTION HCCLAIMPMT
			<u>198,900.11</u>	<u>19,647.11</u>		

Account Portfolio as of 03/07/2016 8:15:14 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	\$25,069.79	\$25,069.79
Memorial Medical Center	4553	\$125,251.36	\$126,149.91
Memorial Medical Center	4561	\$109,838.96	\$109,838.96
Memorial Medical Center	4588	\$49,200.61	\$49,200.61
Memorial Medical Center	4596	\$36,822.75	\$46,164.72
Memorial Medical Center	4618	\$19,747.11	\$19,747.11
Memorial Medical Center Oper	0301	\$1,741,025.30	\$1,779,288.39
County of Calhoun Indigent	1101	\$3,893.16	\$3,893.16
Totals		\$2,110,849.04	\$2,159,352.65

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RUN DATE:03/07/16
TIME:14:40

MEMORIAL MEDICAL CENTER
CHECK REGISTER *AND Payable List*
03/07/16 THRU 03/07/16

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

A/P	000738	03/07/16	132.45	MCKESSON
A/P	000739	03/07/16	395.29	MCKESSON
A/P	000740	03/07/16	1,293.51	MCKESSON
TOTALS:			1,821.25	

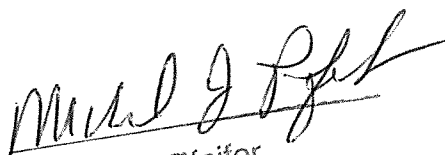
340B Prescription Services

APPROVED
ON

MAR 07 2016

CT

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



Michael J. Pfeifer
Calhoun County Judge
Date: *3-21-16*

McKESSON**STATEMENT**

As of: 03/04/2016

Page: 001

Company: 8000

HEB PHCY 0434/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 190813
Date: 03/04/2016

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

As of: 03/04/2016 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813
Date: 03/04/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
02/29/2016	03/08/2016	7733779030	1000775535	115Invoice	0.45	22.39		21.94✓		7733779030
02/29/2016	03/08/2016	7733779031	1000775956	115Invoice	0.01	0.48		0.47✓		7733779031
03/02/2016	03/08/2016	7734250429	1000777036	115Invoice	2.25	112.29		110.04✓		7734250429
PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item										
TOTAL:										
Subtotals:					135.16	USD				
Future Due:		0.00	If Paid By 03/08/2016,					Due If Paid On Time:		
Past Due:		0.00	Pay This Amount:		132.45	USD		Disc lost if paid late:		2.71
Last Payment		393.74	If Paid After 03/08/2016,					Due If Paid Late:		
02/29/2016			Pay this Amount:		135.16	USD		USD		135.16

APPROVED
ON
MAR - 7 2016
BY
CALHOUN COUNTY AUDITOR

38
3-7-16

MCKESSON**STATEMENT**

As of: 03/04/2016

Page: 001

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 256342
Date: 03/04/2016

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

As of: 03/04/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 03/04/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
02/29/2016	03/08/2016	7733810187	3454581265	115Invoice	0.02	1.01		0.99	✓	7733810187
02/29/2016	02/29/2016	7733868428	1088318 C/R MFC	Pricing Cor		99.92	P	99.92	✓	7733868428
02/29/2016	03/08/2016	7733868429	1088318 C/R MFC	Pricing Cor	0.12	6.20		6.08	✓	7733868429
03/01/2016	03/08/2016	7734029412	3454581268	115Invoice		0.16		0.16	✓	7734029412
03/01/2016	03/08/2016	7734029414	1088690	115Invoice	3.81	190.49		186.68	✓	7734029414
03/03/2016	03/08/2016	7734483177	3454581274	115Invoice	3.43	171.73		168.30	✓	7734483177
03/04/2016	03/08/2016	7734659269	3454581277	115Invoice	2.71	135.71		133.00	✓	7734659269

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

TOTAL: Subtotals: 405.38 USD

Future Due: 0.00

Past Due: 99.92-

Last Payment: 204.47

02/29/2016

If Paid By 03/08/2016,

Pay This Amount:

395.29 USD

Due If Paid On Time:

USD 395.29

Disc lost if paid late:

10.09

If Paid After 03/08/2016,

Pay this Amount:

405.38 USD

Due If Paid Late:

USD 405.38

APPROVED
ON

MAR - 7 2016

BY

CALHOUN COUNTY AUDITOR

739

MCKESSON

STATEMENT

As of: 03/04/2016

Page: 001

Company: 8000

CVS PHCY 7006/MEMORIA PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 262252
Date: 03/04/2016

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

As of: 03/04/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252
Date: 03/04/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
02/29/2016	03/08/2016	7733804760	1000774924	115Invoice	0.11	5.65		5.54	✓	7733804760
02/29/2016	03/08/2016	7733804761	1000775538	115Invoice	17.96	898.12		880.16	✓	7733804761
02/29/2016	03/08/2016	7733804762	1000775959	115Invoice	3.56	178.12		174.56	✓	7733804762
03/01/2016	03/08/2016	7734026193	1000776357	115Invoice	0.02	0.92		0.90	✓	7734026193
03/01/2016	03/08/2016	7734026194	1000776357	115Invoice	0.55	27.30		26.75	✓	7734026194
03/02/2016	03/08/2016	7734271519	1000777039	115Invoice	1.57	78.70		77.13	✓	7734271519
03/02/2016	03/08/2016	7734271520	1000777039	115Invoice	0.27	13.26		12.99	✓	7734271520
03/03/2016	03/08/2016	7734461175	1000777636	115Invoice	0.21	10.27		10.06	✓	7734461175
03/03/2016	03/08/2016	7734461176	1000777636	115Invoice	0.43	21.70		21.27	✓	7734461176
03/04/2016	03/08/2016	7734685332	1000778262	115Invoice	1.72	85.87		84.15	✓	7734685332

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

TOTAL: Subtotals: 1,319.91 USD

Future Due: 0.00 Due If Paid On Time: USD 1,293.51

Past Due: 0.00 Pay This Amount: 1,293.51 USD Disc lost if paid late: 26.40

Last Payment: 1,176.82 If Paid After 03/08/2016, Due If Paid Late: USD 1,319.91

02/29/2016 Pay this Amount: 1,319.91 USD

APPROVED
ON

MAR - 7 2016

BY
CALHOUN COUNTY AUDITOR

Check # 7140

[Signature]
3-7-16

APPROVED
ON

MAR 09 2016

03/08/2016

COUNTY AUDITOR
14-25
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Due Dates Through: 03/22/2016

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

10993 ACE LOCKSMITH SERVICE ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
42472		02/29/20	02/29/20	03/01/20		316.00	0.00	0.00	316.00

OUTSIDE SRV PT

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
10993	ACE LOCKSMITH SERVICE	316.00	0.00	0.00	316.00	✓

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
22290 ✓		02/25/20	02/20/20	03/21/20		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

A1790 AFLAC ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
973539 ✓		03/08/20	02/11/20	03/01/20		3,441.89	0.00	0.00	3,441.89

EMPLOYEE PERSONAL INS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1790	AFLAC	3,441.89	0.00	0.00	3,441.89	✓

Vendor# Vendor Name

Class Pay Code

10569 AHRA ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20775		03/08/20	02/17/20	02/17/20		195.00	0.00	0.00	195.00

DUES & SUBSCRIPTIONS XRAY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
10569	AHRA	195.00	0.00	0.00	195.00	✓

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
372989		03/07/20	02/24/20	03/15/20		29,024.89	0.00	0.00	29,024.89

EMPLOYEE MEDICAL PREMIU

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
10814	ALLIED BENEFIT SYSTEMS	29,024.89	0.00	0.00	29,024.89	✓

Vendor# Vendor Name

Class Pay Code

A1787 AMERICAN COLLEGE OF HEALTHCARE ✓ W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20776		03/08/20	02/17/20	02/17/20		150.00	0.00	0.00	150.00

DUES & SUBSCRIPTIONS XRAY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1787	AMERICAN COLLEGE OF HEALTHCARE	150.00	0.00	0.00	150.00	✓

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
75162980 ✓		02/24/20	02/15/20	03/16/20		689.24	0.00	0.00	689.24

SUPPLIES SURGERY

75172197 ✓		02/24/20	02/17/20	03/18/20		54.66	0.00	0.00	54.66
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CS INVENTORY

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B0435	BARD PERIPHERAL VASCULAR				743.90	0.00	0.00	743.90
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
50098550 ✓		02/24/20	02/15/20	03/16/20			277.30	0.00	0.00	277.30 ✓
CS INVENTORY & RECOVERY										
50131735 ✓		02/24/20	02/18/20	03/19/20			367.05	0.00	0.00	367.05 ✓
CS INVENTORY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1075	BAXTER HEALTHCARE CORP				644.35	0.00	0.00	644.35
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
6003713798 ✓		02/24/20	02/15/20	03/17/20			516.72	0.00	0.00	516.72
SUPPLIES CT SCAN										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		M2485	BAYER HEALTHCARE				516.72	0.00	0.00	516.72 ✓
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
08-369103 ✓		02/24/20	02/15/20	03/16/20			504.00	0.00	0.00	504.00
SUPPLIES SURGERY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1400	BIOMET SPORTS MEDICINE				504.00	0.00	0.00	504.00 ✓
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
8302351 RI ✓		02/29/20	02/15/20	03/16/20			197.20	0.00	0.00	197.20
SUPPLIES NURSERY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1800	BRIGGS HEALTHCARE				197.20	0.00	0.00	197.20 ✓
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
23408615 ✓		02/24/20	02/15/20	03/16/20			330.60	0.00	0.00	330.60
SUPPLIES SURGERY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		D1040	C R BARD, INC				330.60	0.00	0.00	330.60 ✓
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
20768		03/07/20	03/07/20	03/15/20			1,400.00	0.00	0.00	1,400.00
OUTSIDE SRV IT										
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					
C1033	CAD SOLUTIONS, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
202008 ✓		02/29/20	01/31/20	03/01/20			296.00	0.00	0.00	296.00
OUTSIDE SRV MAMMO										

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		C1033	CAD SOLUTIONS, INC				296.00	0.00	0.00	296.00 ✓
Vendor#	Vendor Name			Class	Pay Code					
A1825	CARDINAL HEALTH 414,LLC ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
8000919984 ✓		02/29/20	12/31/20	01/30/20			2,789.57	0.00	0.00	2,789.57 ✓
SUPPLIES NUC MED										
8000921986 ✓		02/29/20	01/09/20	02/13/20			447.44	0.00	0.00	447.44 ✓
SUPPLIES NUC MED										
8000929030 ✓		02/29/20	01/16/20	02/20/20			491.97	0.00	0.00	491.97 ✓
SUPPLIES NUC MED										
8000934645 ✓		02/29/20	01/23/20	02/27/20			711.87	0.00	0.00	711.87 ✓
SUPPLIES NUC MED										
8000953289 ✓		02/29/20	02/13/20	03/19/20			907.07	0.00	0.00	907.07 ✓
SUPPLIES NUC MED										
8000940263 ✓		03/08/20	01/31/20	03/01/20			209.94	0.00	0.00	209.94 ✓
SUPPLIES NUC MED										
8000947745 ✓		03/08/20	02/06/20	03/12/20			393.77	0.00	0.00	393.77 ✓
SUPPLIES NUC MED										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		A1825	CARDINAL HEALTH 414,LLC				5,951.63	0.00	0.00	5,951.63
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
91955748 ✓		02/24/20	02/15/20	03/16/20			547.80	0.00	0.00	547.80 ✓
CS INVENTORY										
91957712 ✓		02/24/20	02/17/20	03/18/20			159.64	0.00	0.00	159.64 ✓
CS INVENTORY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10350	CENTURION MEDICAL PRODUCTS				707.44	0.00	0.00	707.44
Vendor#	Vendor Name			Class	Pay Code					
C1478	CHANNING L BETE CO INC ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
53090020 ✓		02/29/20	02/17/20	03/18/20			429.14	0.00	0.00	429.14
SUPPLIES EDUCATION										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		C1478	CHANNING L BETE CO INC				429.14	0.00	0.00	429.14 ✓
Vendor#	Vendor Name			Class	Pay Code					
10105	CHRIS KOVAREK ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
33 ✓		03/07/20	02/21/20	02/21/20			320.00	0.00	0.00	320.00
OUTSIDE SRV SOC WORKER										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10105	CHRIS KOVAREK				320.00	0.00	0.00	320.00 ✓
Vendor#	Vendor Name			Class	Pay Code					
C1611	CITIZENS MEDICAL CENTER ✓			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
20770		03/07/20	03/01/20	03/01/20			200.00	0.00	0.00	200.00 ✓
CONT EDUCATION EDUCATIC										
20769		03/07/20	03/01/20	03/01/20			360.00	0.00	0.00	360.00 ✓
SUPPLIES EDUCATION										

Vendor Totals		Number	Name			Gross		Discount	No-Pay	Net
		C1611	CITIZENS MEDICAL CENTER			560.00		0.00	0.00	560.00
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	
464818-0 ✓		02/18/20	02/16/20	03/17/20		293.16	0.00	0.00	293.16 ✓	
SUPPLIES VARIOUS DEPTS										
464825-0 ✓		02/18/20	02/16/20	03/17/20		264.19	0.00	0.00	264.19 ✓	
CS INVENTORY										
465148-0 ✓		02/24/20	02/17/20	03/18/20		29.47	0.00	0.00	29.47 ✓	
CS INVENTORY										
464799-0 ✓		02/25/20	02/16/20	03/17/20		12.08	0.00	0.00	12.08 ✓	
OFFICE SUPPLIES ER										
465106-0 ✓		02/29/20	02/17/20	03/18/20		32.22	0.00	0.00	32.22 ✓	
SUPPLIES OB40										
Vendor Totals		Number	Name			Gross		Discount	No-Pay	Net
		10368	DEWITT POTH & SON			631.12		0.00	0.00	631.12
Vendor#	Vendor Name		Class		Pay Code					
T0383	ERIN CLEVINGER ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20771		03/07/20	03/04/20	03/04/20		166.32	0.00	0.00	166.32	
TRAVEL EXPENSE NURSE AD										
Vendor Totals		Number	Name			Gross		Discount	No-Pay	Net
		T0383	ERIN CLEVINGER			166.32		0.00	0.00	166.32 ✓
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	
5-331-63579 ✓		03/08/20	02/25/20	03/11/20		58.42	0.00	0.00	58.42	
FREIGHT EXPENSE										
Vendor Totals		Number	Name			Gross		Discount	No-Pay	Net
		F1100	FEDERAL EXPRESS CORP.			58.42		0.00	0.00	58.42 ✓
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	
100415272 ✓		02/24/20	02/16/20	03/17/20		481.46	0.00	0.00	481.46 ✓	
OUTSIDE SRV PLANT OPS										
100415345 ✓		02/24/20	02/16/20	03/17/20		510.00	0.00	0.00	510.00 ✓	
OUTSIDE SRV PLANT OPS										
Vendor Totals		Number	Name			Gross		Discount	No-Pay	Net
		10788	FIRETROL PROTECTION SYSTEMS			991.46		0.00	0.00	991.46
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	
5847619 ✓		02/29/20	02/16/20	03/18/20		65.12	0.00	0.00	65.12 ✓	
LAB SUPPLIES										
5847655 ✓		02/29/20	02/16/20	03/18/20		523.89	0.00	0.00	523.89 ✓	
LAB SUPPLIES										
4842501		02/29/20	02/10/20	03/11/20		73.48	0.00	0.00	73.48	
LAB SUPPLIES										
5051424 ✓		02/29/20	02/11/20	03/12/20		65.12	0.00	0.00	65.12 ✓	
SUPPLIES LAB										
6110311 ✓		02/29/20	02/17/20	03/18/20		358.51	0.00	0.00	358.51 ✓	

LAB SUPPLIES													
6368273	✓		02/29/20	02/18/20	03/19/20		1,449.68	0.00	0.00	1,449.68	✓		
LAB SUPPLIES													
6602499	✓		02/29/20	02/19/20	03/20/20		119.87	0.00	0.00	119.87	✓		
LAB SUPPLIES													
6602498	✓		02/29/20	02/19/20	03/20/20		457.19	0.00	0.00	457.19	✓		
LAB SUPPLIES													
6988680	✓		02/29/20	02/23/20	03/22/20		469.36	0.00	0.00	469.36	✓		
LAB SUPPLIES													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							F1400	FISHER HEALTHCARE	3,582.22	0.00	0.00	3,582.22	
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			
4348	✓		02/29/20	02/21/20	03/22/20		8,250.00	0.00	0.00	8,250.00			
REPAIRS TO AUTO CLAVE													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10678	FIVE STAR STERILIZER SERVICES	8,250.00	0.00	0.00	8,250.00	✓
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			
75362	✓		02/29/20	02/12/20	03/13/20		4,951.75	0.00	0.00	4,951.75	✓		
PROF FEES PT													
75963			02/29/20	02/19/20	03/20/20		3,802.00	0.00	0.00	3,802.00	✓		
PROF FEES PT													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							11078	FUSION MEDICAL STAFFING, LLC	8,753.75	0.00	0.00	8,753.75	
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			
6000394970	✓		02/29/20	01/04/20	02/03/20		416.61	0.00	0.00	416.61	✓		
MAINT CONT XRAY													
6000414414	✓		02/29/20	02/01/20	03/02/20		3,433.75	0.00	0.00	3,433.75	✓		
MAINT CONT XRAY													
6000414499	✓		02/29/20	02/01/20	03/02/20		416.61	0.00	0.00	416.61	✓		
MAINT CONTR XRAY													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10283	GE HEALTHCARE	4,266.97	0.00	0.00	4,266.97	
Vendor#	Vendor Name					Class	Pay Code						
10642	GLAXOSMITHKLINE PHARMACUETICAL					✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
32994407	✓		01/29/20	01/11/20	03/16/20		2,019.36	0.00	0.00	2,019.36	✓		
PHARMACY DRUGS													
33057840	✓		02/24/20	02/15/20	03/16/20		686.37	0.00	0.00	686.37	✓		
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10642	GLAXOSMITHKLINE PHARMACUETICAL	2,705.73	0.00	0.00	2,705.73	
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			
9027290536	✓		02/24/20	02/16/20	03/17/20		771.32	0.00	0.00	771.32	✓		

SUPPLIES CLINIC

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		W1300	GRAINGER				771.32	0.00	0.00	771.32
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	
99686	✓	02/25/20	02/19/20	03/20/20		8.49	0.00	0.00	8.49	✓
SUPPLIES PLANT OP S										
99687	✓	02/25/20	02/19/20	03/20/20		33.99	0.00	0.00	33.99	✓
SUPPLIES PLANT OPS										
99688	✓	02/25/20	02/19/20	03/20/20		72.95	0.00	0.00	72.95	✓
SUPPLIES PLANT OPS										
397174	✓	02/25/20	02/19/20	03/20/20		44.99	0.00	0.00	44.99	✓
SUPPLIES CLINIC LAB										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		A1292	GULF COAST HARDWARE / ACE				160.42	0.00	0.00	160.42
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	
1090578	✓	02/18/20	02/16/20	03/17/20		515.93	0.00	0.00	515.93	✓
SUPPLIES HOUSEKEEPING										
1090388	✓	02/24/20	02/16/20	03/17/20		353.80	0.00	0.00	353.80	✓
HOUSEKEEPING SUPPLIES										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		G1210	GULF COAST PAPER COMPANY				869.73	0.00	0.00	869.73
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	
5778717	✓	02/29/20	02/19/20	03/20/20		28.41	0.00	0.00	28.41	
SUPPLIES PHARMACY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10334	HEALTH CARE LOGISTICS INC				28.41	0.00	0.00	28.41
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	
7767963	✓	02/29/20	02/18/20	03/19/20		3,302.86	0.00	0.00	3,302.86	
SUPPLIES SURGERY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		H0416	HOLOGIC INC				3,302.86	0.00	0.00	3,302.86
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	
38946455	✓	02/24/20	02/15/20	03/16/20		67.27	0.00	0.00	67.27	✓
SUPPLIES VARIOUS DEPTS										
38985323	✓	02/24/20	02/17/20	03/18/20		11.20	0.00	0.00	11.20	✓
CS INVENTORY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		I0415	INDEPENDENCE MEDICAL				78.47	0.00	0.00	78.47
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	
916038119	✓	02/24/20	02/15/20	03/16/20		737.32	0.00	0.00	737.32	✓

SUPPLIES SURGERY													
916038118	✓		02/24/20	02/15/20	03/16/20		327.92	0.00	0.00	327.92	✓		
SUPPLIES SURGERY													
916014171	✓		02/29/20	02/10/20	03/11/20		149.32	0.00	0.00	149.32	✓		
BLOOD BANK SUPPLIES													
916055861	✓		02/29/20	02/18/20	03/19/20		113.00	0.00	0.00	113.00	✓		
BLOOD BANK SUPPLIES													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							J0150	J & J HEALTH CARE SYSTEMS, INC	1,327.56	0.00	0.00	1,327.56	
Vendor#	Vendor Name					Class	Pay Code						
K1070	KEY SURGICAL INC ✓					M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
776412	✓		02/24/20	02/15/20	03/16/20		40.00	0.00	0.00	40.00	✓		
SUPPLIES SURGERY													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							K1070	KEY SURGICAL INC	40.00	0.00	0.00	40.00	✓
Vendor#	Vendor Name					Class	Pay Code						
M1344	MAINE STANDARDS CO., LLC ✓												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
16-12217	✓		02/29/20	02/18/20	03/19/20		3,158.56	0.00	0.00	3,158.56			
LAB SUPPLIES													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							M1344	MAINE STANDARDS CO., LLC	3,158.56	0.00	0.00	3,158.56	✓
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			
73206188	✓		02/29/20	02/11/20	03/15/20		518.23	0.00	0.00	518.23	✓		
LAB SUPPLIES													
73441388	✓		02/29/20	02/16/20	03/15/20		500.31	0.00	0.00	500.31	✓		
LAB SUPPLIES													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							M2178	MCKESSON MEDICAL SURGICAL INC	1,018.54	0.00	0.00	1,018.54	
Vendor#	Vendor Name					Class	Pay Code						
M2499	MEDTRONIC USA, INC. ✓					W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
2523722227	✓		02/24/20	02/15/20	03/16/20		289.00	0.00	0.00	289.00			
SUPPLIES SURGERY													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							M2499	MEDTRONIC USA, INC.	289.00	0.00	0.00	289.00	✓
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			
11072720	✓		02/24/20	02/15/20	03/16/20		54.00	0.00	0.00	54.00			
SUPPLIES SURGERY													
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						
10182	MERCEDES MEDICAL ✓												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
1809876	✓		02/29/20	02/17/20	03/18/20		93.69	0.00	0.00	93.69			
LAB SUPPLIES													

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10182	MERCEDES MEDICAL				93.69	0.00	0.00	93.69 ✓
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
671217 ✓		02/29/20	03/01/20	03/01/20			96.25	0.00	0.00	96.25
	CREDIT CARD FEE AUX									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		M2662	MMC VOLUNTEERS				96.25	0.00	0.00	96.25 ✓
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
SC1473 ✓		02/29/20	02/25/20	02/26/20			68.28	0.00	0.00	68.28 ✓
	SRV CHARGE PHARMACY									
8545690 ✓		03/07/20	03/01/20	03/02/20			145.03	0.00	0.00	145.03 ✓
	PHARMACY CREDIT									
8545309 ✓		03/07/20	03/01/20	03/02/20			176.47	0.00	0.00	176.47 ✓
	PHARMACY DRUGS									
3392 ✓		03/07/20	03/01/20	03/02/20			-138.27	0.00	0.00	-138.27 ✓
	PHARMACY CREDIT									
3597 ✓		03/07/20	03/01/20	03/02/20			-5.12	0.00	0.00	-5.12 ✓
	PHARMACY CREDIT									
8545689 ✓		03/07/20	03/01/20	03/02/20			218.38	0.00	0.00	218.38 ✓
	PHARMACY DRUGS									
8545691 ✓		03/07/20	03/01/20	03/02/20			8.34	0.00	0.00	8.34 ✓
	PHARMACY CREDIT									
8550218 ✓		03/07/20	03/02/20	03/03/20			124.98	0.00	0.00	124.98 ✓
	PHARMACY DRUGS									
8550219 ✓		03/07/20	03/02/20	03/03/20			493.12	0.00	0.00	493.12 ✓
	PHARMACY DRUGS									
8550220 ✓		03/07/20	03/02/20	03/03/20			140.56	0.00	0.00	140.56 ✓
	PHARMACY DRUGS									
8555302 ✓		03/07/20	03/03/20	03/04/20			10.07	0.00	0.00	10.07 ✓
	PHARMACY DRUGS									
8555299 ✓		03/07/20	03/03/20	03/04/20			7,136.94	0.00	0.00	7,136.94 ✓
	PHARMACY DRUGS									
8555300 ✓		03/07/20	03/03/20	03/04/20			8.66	0.00	0.00	8.66 ✓
	PHARMACY DRUGS									
8555301 ✓		03/07/20	03/03/20	03/04/20			2.70	0.00	0.00	2.70 ✓
	PHARMACY DRUGS									
8555298 ✓		03/07/20	03/03/20	03/04/20			2,678.24	0.00	0.00	2,678.24 ✓
	PHARMACY DRUGS									
8559750 ✓		03/07/20	03/04/20	03/05/20			1,063.16	0.00	0.00	1,063.16 ✓
	PHARMACY DRUGS									
8559749 ✓		03/07/20	03/04/20	03/05/20			0.51	0.00	0.00	0.51 ✓
	PHARMACY DRUGS									
8559751 ✓		03/07/20	03/04/20	03/05/20			996.58	0.00	0.00	996.58 ✓
	PHARMACY DRUGS									
8559752 ✓		03/07/20	03/04/20	03/05/20			110.98	0.00	0.00	110.98 ✓
	PHARMACY DRUGS									
8565173 ✓		03/08/20	03/07/20	03/08/20			139.16	0.00	0.00	139.16 ✓
	PHARMACY DRUGS									

8565273	✓	03/08/20	03/07/20	03/08/20		99.17	0.00	0.00	99.17	✓		
PHARMACY DRUGS												
8565857	✓	03/08/20	03/07/20	03/08/20		31.41	0.00	0.00	31.41	✓		
PHARMACY DRUGS												
8565271	✓	03/08/20	03/07/20	03/08/20		797.12	0.00	0.00	797.12	✓		
PHARMACY DRUGS												
8565272	✓	03/08/20	03/07/20	03/08/20		1,205.40	0.00	0.00	1,205.40	✓		
PHARMACY DRUGS												
8565593	✓	03/08/20	03/07/20	03/08/20		446.95	0.00	0.00	446.95	✓		
PHARMACY DRUGS												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						10536	MORRIS & DICKSON CO, LLC	15,958.82	0.00	0.00	15,958.82	
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		
824896075001	✓	02/29/20	02/18/20	03/19/20			123.48	0.00	0.00	123.48		
OFFICE SUPPLIES XRAY												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						O0920	OFFICE DEPOT	123.48	0.00	0.00	123.48	✓
Vendor#	Vendor Name				Class	Pay Code						
O1410	ON-SITE TESTING SPECIALISTS				✓	W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
21820	✓	02/29/20	02/18/20	03/19/20			179.84	0.00	0.00	179.84		
SUPPLIES LAB												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						O1410	ON-SITE TESTING SPECIALISTS	179.84	0.00	0.00	179.84	✓
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		
2014536580	✓	02/18/20	02/16/20	03/17/20			17.80	0.00	0.00	17.80	✓	
SUPPLIES DIETARY												
2014536594	✓	02/18/20	02/16/20	03/17/20			209.92	0.00	0.00	209.92	✓	
4	CS INVNETORY											
2014550017	✓	02/18/20	02/16/20	03/17/20			2,017.53	0.00	0.00	2,017.53	✓	
SUPPLIES VARIOUS DEPTS												
2014536085	✓	02/18/20	02/16/20	03/17/20			43.02	0.00	0.00	43.02	✓	
CS INVENTORY												
2014617984	✓	02/24/20	02/18/20	03/19/20			239.44	0.00	0.00	239.44	✓	
SUPPLIES VARIOUS DEPTS												
2014612002	✓	02/24/20	02/18/20	03/19/20			92.88	0.00	0.00	92.88	✓	
CS INVNETORY												
2014613548	✓	02/24/20	02/18/20	03/19/20			268.27	0.00	0.00	268.27	✓	
SUPPLIES SURGERY												
2014614153	✓	02/24/20	02/18/20	03/19/20			37.64	0.00	0.00	37.64	✓	
SUPPLIES SURGERY												
2014620188	✓	02/24/20	02/18/20	03/19/20			1,733.13	0.00	0.00	1,733.13	✓	
SUPPLIES VARIOUS DEPTS												
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net	
						OM425	OWENS & MINOR	4,659.63	0.00	0.00	4,659.63	
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		
20772		03/07/20	03/01/20	03/01/20		1,260.00	0.00	0.00	1,260.00		
OUTSIDE SRV CLINC											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11069	PABLO GARZA	1,260.00	0.00	0.00	1,260.00 ✓
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		
932318709 ✓		02/29/20	01/29/20	03/01/20		2,626.58	0.00	0.00	2,626.58		
MAINT CONT 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					
10541	PLATINUM CODE ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
047371 ✓		02/24/20	02/17/20	03/18/20		1,141.97	0.00	0.00	1,141.97		
SUPPLIES VARIOUS DEPTS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10541	PLATINUM CODE	1,141.97	0.00	0.00	1,141.97 ✓
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		
3286984 ✓		02/24/20	02/16/20	03/17/20		152.22	0.00	0.00	152.22 ✓		
SUPPLIES SURGERY & PHARI											
3286550 ✓		02/24/20	02/16/20	03/17/20		275.60	0.00	0.00	275.60 ✓		
CS INVENTORY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10372	PRECISION DYNAMICS CORP (PDC)	427.82	0.00	0.00	427.82
Vendor#	Vendor Name				Class	Pay Code					
10889	PROCESSOR & CHEMICAL SERVICES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
34972 ✓		02/29/20	01/22/20	02/23/20		95.00	0.00	0.00	95.00		
OUTSIDE SRV MAMMO											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10889	PROCESSOR & CHEMICAL SERVICES	95.00	0.00	0.00	95.00 ✓
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		
20773		03/07/20	02/16/20	03/17/20		20.00	0.00	0.00	20.00		
READ FEES XRAY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						R1268	RADIOLOGY UNLIMITED, PA	20.00	0.00	0.00	20.00 ✓
Vendor#	Vendor Name				Class	Pay Code					
11080	RADSOURCE ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
P1737 ✓		03/08/20	03/04/20	03/04/20		8,740.00	0.00	0.00	8,740.00		
BAL DUE ON XRAY AT CLINIC											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11080	RADSOURCE	8,740.00	0.00	0.00	8,740.00
Vendor#	Vendor Name				Class	Pay Code					
11137	REALITY MEDICAL IMAGING OF TX ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		

1177	✓	02/29/20 07/01/20 08/01/20	2,817.50	0.00	0.00	2,817.50	✓			
MAINT CONT XRAY										
1245	✓	03/08/20 12/07/20 01/07/20	2,817.50	0.00	0.00	2,817.50	✓			
MAINT CONT XRAY										
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net		
			11137	REALITY MEDICAL IMAGING OF TX	5,635.00	0.00	0.00	5,635.00		
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	
96417490	✓	03/07/20	02/29/20	03/19/20		5,909.84	0.00	0.00	5,909.84	
COPIER LEASE										
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net		
			I0520	RICOH USA, INC.	5,909.84	0.00	0.00	5,909.84	✓	
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	
115245016	✓	02/29/20	12/31/20	01/22/20		633.33	0.00	0.00	633.33	✓
MAINT CONT MAMMO										
115253364	✓	02/29/20	01/18/20	02/19/20		832.25	0.00	0.00	832.25	✓
MAINT CONT ULTRASOUND										
115256643	✓	02/29/20	01/30/20	03/01/20		633.33	0.00	0.00	633.33	✓
MAINT CONT MAMMO										
115265521	✓	02/29/20	02/18/20	03/19/20		832.25	0.00	0.00	832.25	✓
MAINT CONT ULTRASOUND										
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net		
			S2001	SIEMENS MEDICAL SOLUTIONS INC	2,931.16	0.00	0.00	2,931.16		
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	
92822214	✓	02/24/20	02/17/20	03/18/20		1,023.29	0.00	0.00	1,023.29	
SUPPLIES SURGERY										
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net		
			S2362	SMITH & NEPHEW	1,023.29	0.00	0.00	1,023.29	✓	
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	
90018080	✓	02/29/20	02/17/20	03/18/20		-675.00	0.00	0.00	-675.00	✓
BLOOD BANK CREDIT										
90018154	✓	02/29/20	02/17/20	03/18/20		4,500.00	0.00	0.00	4,500.00	✓
BLOOD BANK SUPPLIES										
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net		
			S2400	SO TEX BLOOD & TISSUE CENTER	3,825.00	0.00	0.00	3,825.00		
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	
25553	✓	03/07/20	11/01/20	12/01/20		150.00	0.00	0.00	150.00	✓
OUTSIDE SRV ADMIN										
25549	✓	03/07/20	11/01/20	12/01/20		1,000.00	0.00	0.00	1,000.00	✓
DUES SUBSCRIPTIONS ADMIN										
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net		
			S2345	SOUTHEAST TEXAS HEALTH SYS	1,150.00	0.00	0.00	1,150.00		

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	
2677737 ✓		02/24/20	02/16/20	03/17/20		328.60	0.00	0.00	328.60	
	SUPPLIES SURGERY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10735	STRYKER SUSTAINABILITY				328.60	0.00	0.00	328.60	✓
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	
602252703		02/29/20	02/25/20	03/16/20		293.31	0.00	0.00	293.31	
	FOOD EXPENSE DIETARY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	S2951	SYSCO FOOD SERVICES OF				293.31	0.00	0.00	293.31	✓
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	
139479401-301 ✓		01/29/20	01/11/20	03/16/20		2,140.32	0.00	0.00	2,140.32	
	PHARMACY DRUGS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10732	THERACOM, LLC				2,140.32	0.00	0.00	2,140.32	✓
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	
10197358 ✓		02/29/20	01/04/20	02/05/20		9,000.00	0.00	0.00	9,000.00	✓
	MAINT CONT CT SCAN									
10202314 ✓		02/29/20	02/02/20	03/03/20		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.				18,000.00	0.00	0.00	18,000.00	
Vendor#	Vendor Name				Class	Pay Code				
11170	TX ANFP ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20774		03/07/20	03/07/20	03/07/20		60.00	0.00	0.00	60.00	
	REGISTRATION FEE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11170	TX ANFP				60.00	0.00	0.00	60.00	✓
Vendor#	Vendor Name				Class	Pay Code				
11169	TXU ENERGY ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
052002540992 ✓		02/29/20	02/27/20	02/27/20		402.45	0.00	0.00	402.45	
	CLINIC ELECTRIC									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11169	TXU ENERGY				402.45	0.00	0.00	402.45	✓
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	
8150721213 ✓		02/29/20	02/16/20	03/17/20		52.30	0.00	0.00	52.30	✓
	OUTSIDE SRV MAINT									
8150721311 ✓		02/29/20	02/16/20	03/17/20		28.50	0.00	0.00	28.50	✓
	OUTSIDE SRV BIO MED									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	

U1054	UNIFIRST HOLDINGS					80.80	0.00	0.00	80.80
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
8400213739	✓	02/24/20	02/16/20	03/17/20		190.98	0.00	0.00	190.98 ✓
	LAUNDRY HOUSEKEEPING								
8400213779	✓	02/29/20	02/16/20	03/17/20		150.60	0.00	0.00	150.60 ✓
	LAUNDRY DIETARY								
8400214074	✓	02/29/20	02/19/20	03/20/20		370.62	0.00	0.00	370.62 ✓
	LAUNDRY SURGERY								
8400214116	✓	02/29/20	02/19/20	03/20/20		1,139.50	0.00	0.00	1,139.50 ✓
	LAUNDRY HOUSEKEEPING								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC				1,851.70	0.00	0.00	1,851.70
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
6736971	✓	02/29/20	02/18/20	03/19/20		108.94	0.00	0.00	108.94 ✓
	EMPLOYEE UNIFORMS								
6736972	✓	02/29/20	02/18/20	03/19/20		149.99	0.00	0.00	149.99 ✓
	EMPLOYEE UNIFORMS								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	U1056	UNIFORM ADVANTAGE				258.93	0.00	0.00	258.93
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
9110276720	✓	02/29/20	02/15/20	03/16/20		1,571.67	0.00	0.00	1,571.67
	LEASE & RENTAL LAB								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC				1,571.67	0.00	0.00	1,571.67 ✓

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	168,518.77	0.00	0.00	168,518.77

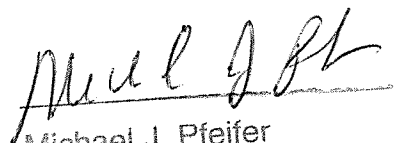
Add

APPROVED
ON

MAR 09 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXASCK #145307-
165398Luminant Energy
Company - February
2016 Contracted Gas
$$\left. \begin{array}{l} + 2768.14 \end{array} \right\}$$

 \$ 171,286.91


 Michael J. Pfeifer
 Calhoun County Judge
 Date: 3-21-16

RUN DATE: 03/08/16
TIME: 16:23

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1
APCDEDIT

PATIENT NUMBER	PAYEE NAME	DATE	PAY AMOUNT	PAT CODE	TYPE	DESCRIPTION	GL NUM
		030716	10.00	✓			
		030716	150.80	✓			
		030716	42.86	✓			
		030716	252.00	✓			
		030716	214.82	✓			
		030716	60.08	✓			
		030716	74.58	✓			
		030716	70.00	✓			
		030716	174.21	✓			
		030716	88.31	✓			
		030716	293.33	✓			
		030716	280.00	✓			
		030716	494.12	✓			
		030716	123.39	✓			
		030716	109.35	✓			
		030716	35.20	✓			

RUN DATE: 03/08/16
TIME: 16:23

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 2
APCDEDIT

PATIENT		PAY PAT			
NUMBER	PAYEE NAME	DATE	AMOUNT	CODE TYPE	DESCRIPTION
		030716	174.48	✓ 2	
		030716	107.11	✓ 2	
		030816	200.00	✓ 2	
		030716	247.97	✓ 2	

ARID=0001 TOTAL

3202.61

TOTAL

3202.61

APPROVED
ON

MAR 09 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Michael J. Pfeifer
Michael J. Pfeifer
Calhoun County Judge
Date: *3-21-16*

8

RUN DATE:03/09/16
TIME:13:23

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/09/16 THRU 03/09/16

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165307	03/09/16	2,626.58	PHILIPS HEALTHCARE
A/P	165308	03/09/16	320.00	CHRIS KOVAREK
A/P	165309	03/09/16	93.69	MERCEDES MEDICAL
A/P	165310	03/09/16	4,266.97	GE HEALTHCARE
A/P	165311	03/09/16	28.41	HEALTH CARE LOGISTICS INC
A/P	165312	03/09/16	707.44	CENTURION MEDICAL PRODUCTS
A/P	165313	03/09/16	631.12	DEWITT POTH & SON
A/P	165314	03/09/16	427.82	PRECISION DYNAMICS CORP (PDC)
A/P	165315	03/09/16	.00	VOIDED
A/P	165316	03/09/16	15,958.82	MORRIS & DICKSON CO, LLC
A/P	165317	03/09/16	1,141.97	PLATINUM CODE
A/P	165318	03/09/16	195.00	AHRA
A/P	165319	03/09/16	2,768.14	LUMINANT ENERGY COMPANY LLC
A/P	165320	03/09/16	2,705.73	GLAXOSMITHKLINE PHARMACUTICAL
A/P	165321	03/09/16	8,250.00	FIVE STAR STERILIZER SERVICES
A/P	165322	03/09/16	2,140.32	THERACOM, LLC
A/P	165323	03/09/16	328.60	STRYKER SUSTAINABILITY
A/P	165324	03/09/16	991.46	FIRETROL PROTECTION SYSTEMS
A/P	165325	03/09/16	29,024.89	ALLIED BENEFIT SYSTEMS
A/P	165326	03/09/16	95.00	PROCESSOR & CHEMICAL SERVICES
A/P	165327	03/09/16	1,400.00	ACUTE CARE INC
A/P	165328	03/09/16	316.00	ACE LOCKSMITH SERVICE
A/P	165329	03/09/16	1,260.00	PABLO GARZA
A/P	165330	03/09/16	8,753.75	FUSION MEDICAL STAFFING, LLC
A/P	165331	03/09/16	8,740.00	RADSOURCE
A/P	165332	03/09/16	5,635.00	REALITY MEDICAL IMAGING OF TX
A/P	165333	03/09/16	402.45	TXU ENERGY
A/P	165334	03/09/16	60.00	TX ANFP
A/P	165335	03/09/16	160.42	GULF COAST HARDWARE / ACE
A/P	165336	03/09/16	150.00	AMERICAN COLLEGE OF HEALTHCARE
A/P	165337	03/09/16	3,441.89	AFLAC
A/P	165338	03/09/16	5,951.63	CARDINAL HEALTH 414,LLC
A/P	165339	03/09/16	743.90	BARD PERIPHERAL VASCULAR
A/P	165340	03/09/16	644.35	BAXTER HEALTHCARE CORP
A/P	165341	03/09/16	504.00	BIOMET SPORTS MEDICINE
A/P	165342	03/09/16	197.20	BRIGGS HEALTHCARE
A/P	165343	03/09/16	1,400.00	CABLE ONE
A/P	165344	03/09/16	296.00	CAD SOLUTIONS, INC
A/P	165345	03/09/16	429.14	CHANNING L BETE CO INC
A/P	165346	03/09/16	560.00	CITIZENS MEDICAL CENTER
A/P	165347	03/09/16	330.60	C R BARD, INC
A/P	165348	03/09/16	58.42	FEDERAL EXPRESS CORP.
A/P	165349	03/09/16	3,582.22	FISHER HEALTHCARE
A/P	165350	03/09/16	869.73	GULF COAST PAPER COMPANY
A/P	165351	03/09/16	3,302.86	HOLGIC INC
A/P	165352	03/09/16	78.47	INDEPENDENCE MEDICAL
A/P	165353	03/09/16	5,909.84	RICOH USA, INC.
A/P	165354	03/09/16	1,571.67	WERFEN USA LLC
A/P	165355	03/09/16	1,327.56	J & J HEALTH CARE SYSTEMS, INC
A/P	165356	03/09/16	40.00	KEY SURGICAL INC

RUN DATE:03/09/16
TIME:13:23

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/09/16 THRU 03/09/16

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GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165357	03/09/16	3,158.56	MAINE STANDARDS CO., LLC
A/P	165358	03/09/16	1,018.54	MCKESSON MEDICAL SURGICAL INC
A/P	165359	03/09/16	516.72	BAYER HEALTHCARE
A/P	165360	03/09/16	289.00	MEDTRONIC USA, INC.
A/P	165361	03/09/16	54.00	MEGADYNE MEDICAL
A/P	165362	03/09/16	96.25	MMC VOLUNTEERS
A/P	165363	03/09/16	123.48	OFFICE DEPOT
A/P	165364	03/09/16	179.84	ON-SITE TESTING SPECIALISTS
A/P	165365	03/09/16	.00	VOIDED
A/P	165366	03/09/16	4,659.63	OWENS & MINOR
A/P	165367	03/09/16	20.00	RADIOLOGY UNLIMITED, PA
A/P	165368	03/09/16	2,931.16	SIEMENS MEDICAL SOLUTIONS INC
A/P	165369	03/09/16	1,150.00	SOUTHEAST TEXAS HEALTH SYS
A/P	165370	03/09/16	1,023.29	SMITH & NEPHEW
A/P	165371	03/09/16	3,825.00	SO TEX BLOOD & TISSUE CENTER
A/P	165372	03/09/16	293.31	SYSO FOOD SERVICES OF
A/P	165373	03/09/16	166.32	ERIN CLEVINGER
A/P	165374	03/09/16	18,000.00	TOSHIBA AMERICA MEDICAL SYST.
A/P	165375	03/09/16	80.80	UNIFIRST HOLDINGS
A/P	165376	03/09/16	258.93	UNIFORM ADVANTAGE
A/P	165377	03/09/16	1,851.70	UNIFIRST HOLDINGS INC
A/P	165378	03/09/16	771.32	GRAINGER
A/P	165379	03/09/16	10.00	
A/P	165380	03/09/16	150.80	
A/P	165381	03/09/16	42.86	
A/P	165382	03/09/16	252.00	
A/P	165383	03/09/16	214.82	
A/P	165384	03/09/16	60.08	
A/P	165385	03/09/16	74.58	
A/P	165386	03/09/16	70.00	
A/P	165387	03/09/16	174.21	
A/P	165388	03/09/16	88.31	
A/P	165389	03/09/16	293.33	
A/P	165390	03/09/16	280.00	
A/P	165391	03/09/16	494.12	
A/P	165392	03/09/16	123.39	
A/P	165393	03/09/16	109.35	
A/P	165394	03/09/16	35.20	
A/P	165395	03/09/16	174.48	
A/P	165396	03/09/16	107.11	
A/P	165397	03/09/16	200.00	
A/P	165398	03/09/16	247.97	

TOTALS:

174,489.52 ✓

RUN DATE:03/14/16
TIME:14:26

MEMORIAL MEDICAL CENTER
CHECK REGISTER *and Payable List*
03/14/16 THRU 03/14/16

PAGE 1
GLCKREG

BANK--CHECK-----

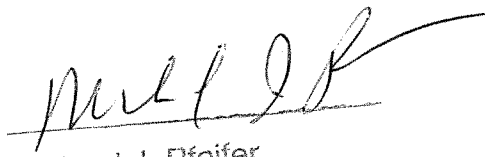
CODE NUMBER DATE AMOUNT PAYEE

A/P	000741	03/14/16	727.94	MCKESSON
A/P	000742	03/14/16	383.56	MCKESSON
A/P	000743	03/14/16	594.82	MCKESSON
TOTALS:			1,706.32	

APPROVED
ON

MAR 14 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



Michael J. Pfeifer
Calhoun County Judge
Date: 3-21-16

McKESSON**STATEMENT**

As of: 03/11/2016

Page: 001

Company: 8000

HEB PHCY 0434/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 190813
Date: 03/11/2016

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

As of: 03/11/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813
Date: 03/11/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
03/07/2016	03/15/2016	7734948550	1000778885	115Invoice	3.68	184.17		180.49	✓	7734948550	
03/07/2016	03/15/2016	7734948553	1000779509	115Invoice	1.13	56.42		55.29	✓	7734948553	
03/07/2016	03/15/2016	7734948554	1000779939	115Invoice	2.76	138.18		135.42	✓	7734948554	
03/08/2016	03/15/2016	7735184700	1000780342	115Invoice	0.03	1.63		1.60	✓	7735184700	
03/09/2016	03/15/2016	7735408868	1000781007	115Invoice	1.67	83.31		81.64	✓	7735408868	
03/10/2016	03/15/2016	7735629887	1000781612	115Invoice	3.68	184.15		180.47	✓	7735629887	
03/11/2016	03/15/2016	7735850731	1000782217	115Invoice	1.90	94.93		93.03	✓	7735850731	

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

TOTAL:

Subtotals: 742.79 USD

Future Due: 0.00

If Paid By 03/15/2016,
Pay This Amount:

727.94 USD

Due If Paid On Time:
USD

727.94

Past Due: 0.00

Disc lost if paid late:

14.85

Last Payment 132.45
03/07/2016

If Paid After 03/15/2016,
Pay this Amount:

742.79 USD

Due If Paid Late:
USD

742.79

APPROVED
ON

MAR 14 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

As of: 03/11/2016

Page: 001

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 256342
Date: 03/11/2016

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

As of: 03/11/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 03/11/2016 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
03/08/2016	03/15/2016	7735179907	3454581284	115Invoice	1.34	66.93		65.59✓		7735179907
03/09/2016	03/15/2016	7735434795	3454581287	115Invoice	3.30	165.24		161.94✓		7735434795
03/10/2016	03/15/2016	7735638202	3454581290	115Invoice	3.18	159.11		155.93✓		7735638202
03/11/2016	03/15/2016	7735825642	1088944	115Invoice		0.10		0.10✓		7735825642

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

TOTAL:

Subtotals: 391.38 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 395.29
03/07/2016

If Paid By 03/15/2016,
Pay This Amount:

383.56 USD

If Paid After 03/15/2016,
Pay this Amount:

391.38 USD

Due If Paid On Time:

383.56

Disc lost if paid late:

7.82

Due If Paid Late:

391.38

APPROVED
ON

MAR 14 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

As of: 03/11/2016

Page: 001

Company: 8000

CVS PHCY 7006/MEMORIA PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 262252
Date: 03/11/2016

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

As of: 03/11/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252
Date: 03/11/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
03/07/2016	03/15/2016	7734971357	1000778887	115Invoice	2.79	139.66		136.87	✓	7734971357
03/07/2016	03/15/2016	7734971358	1000779511	115Invoice	0.38	18.99		18.61	✓	7734971358
03/07/2016	03/15/2016	7734971359	1000779941	115Invoice	0.65	32.32		31.67	✓	7734971359
03/08/2016	03/15/2016	7735175801	1000780344	115Invoice	0.99	49.69		48.70	✓	7735175801
03/09/2016	03/15/2016	7735405650	1000781009	115Invoice	3.56	177.84		174.28	✓	7735405650
03/10/2016	03/15/2016	7735641245	1000781614	115Invoice	0.29	14.49		14.20	✓	7735641245
03/10/2016	03/15/2016	7735641246	1000781614	115Invoice	3.40	170.11		166.71	✓	7735641246
03/11/2016	03/15/2016	7735851907	1000782219	115Invoice	0.08	3.86		3.78	✓	7735851907

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

TOTAL:

Subtotals: 606.96 USD

Future Due: 0.00

If Paid By 03/15/2016,
Pay This Amount:

594.82 USD

Due If Paid On Time:
USD

594.82

Past Due: 0.00

Disc lost if paid late:

12.14

Last Payment 1,293.51
03/07/2016

If Paid After 03/15/2016,
Pay this Amount:

606.96 USD

Due If Paid Late:
USD

606.96

APPROVED
ON

MAR 14 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
3/14/2016

Nursing Home	IBC Account Number	Previous Beginning 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	125,251.36	59,355.58	-	125,151.36	-	-	59,455.58	59,355.58

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co

JP Morgan Chase Bank

ABA 111000614

Acc 4257

Nursing Home	IBC Account Number	Previous Beginning 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	109,838.96	65,949.86	-	109,738.96	-	-	66,049.86	65,949.86
Crescent	4588	49,200.61	48,055.02	-	49,100.61	-	-	48,155.02	48,055.02
Broadmoor	4596	36,822.75	54,815.84	-	36,722.75	-	-	54,915.84	54,815.84
Fort Bend	4618	19,747.11	27,967.39	-	19,647.11	-	-	28,067.39	27,967.39
									196,788.11

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

Cantex Health Care Centers III LLC

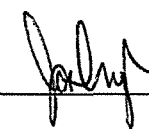
JP Morgan Chase Bank

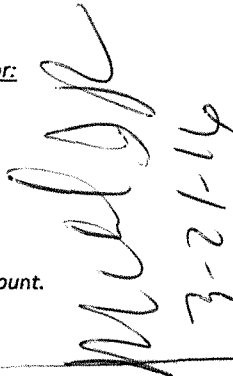
ABA 111000614

Acc 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: 


Michael J. Pfeifer
Galhoum County Judge
Date: _____

APPROVED

MAR 15 2016

COUNTY AUDITOR

IBC Bank Activity
3/7/16 through 3/13/16

Ashford Gardens

			Transfer-Out	Transfer-In	
3/7/2016	113105025	4553 142 ACH CREDIT RECEIVED		898.55	675423 NOVITAS SOLUTION HCCLAIMPMT
3/8/2016	113105025	4553 142 ACH CREDIT RECEIVED		7,345.61	1.746E+13 AGING DISAB SVCS HCCLAIMPMT
3/9/2016	113105025	4553 495 OUTGOING MONEY TRANSFER	125,151.36		ASHFORD HEALTH CARE CENTER LTD
3/9/2016	113105025	4553 142 ACH CREDIT RECEIVED		895.76	1.746E+13 AGING DISAB SVCS HCCLAIMPMT
3/9/2016	113105025	4553 142 ACH CREDIT RECEIVED		4,663.88	PN1326436189 Molina HC of TX Molina HC
3/9/2016	113105025	4553 142 ACH CREDIT RECEIVED		14,698.55	PN1326436189 Molina HC of TX Molina HC
3/10/2016	113105025	4553 301 COMMERCIAL DEPOSIT		30,843.21	0 14044513
3/11/2016	113105025	4553 142 ACH CREDIT RECEIVED		10.02	PN1326436189 Molina HC of TX Molina HC
			125,151.36	59,355.58	

Solera at West Houston

			Transfer-Out	Transfer-In	
3/8/2016	113105025	4561 142 ACH CREDIT RECEIVED		6,365.57	1.60305E+13 AMERIGROUP CORPO HCCLAIMPMT
3/9/2016	113105025	4561 495 OUTGOING MONEY TRANSFER	109,738.96		CANTEX HEALTH CARE CENTERS LLC
3/10/2016	113105025	4561 142 ACH CREDIT RECEIVED		3,220.00	1.746E+13 AGING DISAB SVCS HCCLAIMPMT
3/10/2016	113105025	4561 301 COMMERCIAL DEPOSIT		52,059.67	0 14044548
3/10/2016	113105025	4561 142 ACH CREDIT RECEIVED		2,547.27	1.60308E+13 AMERIGROUP CORPO HCCLAIMPMT
3/11/2016	113105025	4561 142 ACH CREDIT RECEIVED		0.34	1.746E+13 AGING DISAB SVCS HCCLAIMPMT
3/11/2016	113105025	4561 142 ACH CREDIT RECEIVED		1,757.01	1.60309E+13 AMERIGROUP CORPO HCCLAIMPMT
			109,738.96	65,949.86	

Crescent

			Transfer-Out	Transfer-In	
3/8/2016	113105025	4588 142 ACH CREDIT RECEIVED		1,200.84	1.746E+13 AGING DISAB SVCS HCCLAIMPMT
3/8/2016	113105025	4588 142 ACH CREDIT RECEIVED		11,362.12	1.60305E+13 AMERIGROUP CORPO HCCLAIMPMT
3/9/2016	113105025	4588 495 OUTGOING MONEY TRANSFER	49,100.61		CANTEX HEALTH CARE CENTERS III
3/9/2016	113105025	4588 142 ACH CREDIT RECEIVED		3,006.32	PN1669860425 Molina HC of TX Molina HC
3/10/2016	113105025	4588 142 ACH CREDIT RECEIVED		243.22	676323 NOVITAS SOLUTION HCCLAIMPMT
3/10/2016	113105025	4588 301 COMMERCIAL DEPOSIT		32,242.52	0 14044542
			49,100.61	48,055.02	

Broadmoor

			Transfer-Out	Transfer-In	
3/7/2016	113105025	4596 142 ACH CREDIT RECEIVED		9,341.97	676357 NOVITAS SOLUTION HCCLAIMPMT
3/8/2016	113105025	4596 142 ACH CREDIT RECEIVED		1,737.60	1.746E+13 AGING DISAB SVCS HCCLAIMPMT
3/9/2016	113105025	4596 142 ACH CREDIT RECEIVED		957.48	PN1669860433 Molina HC of TX Molina HC
3/9/2016	113105025	4596 142 ACH CREDIT RECEIVED		1,221.57	PN1669860433 Molina HC of TX Molina HC
3/9/2016	113105025	4596 495 OUTGOING MONEY TRANSFER	36,722.75		CANTEX HEALTH CARE CENTERS III
3/10/2016	113105025	4596 301 COMMERCIAL DEPOSIT		41,557.22	0 14044525
			36,722.75	54,815.84	

Fort Bend

			Transfer-Out	Transfer-In	
3/8/2016	113105025	4618 142 ACH CREDIT RECEIVED		5,038.40	1.60304E+13 AMERIGROUP CORPO HCCLAIMPMT
3/8/2016	113105025	4618 142 ACH CREDIT RECEIVED		8,020.54	1.746E+13 AGING DISAB SVCS HCCLAIMPMT
3/9/2016	113105025	4618 142 ACH CREDIT RECEIVED		14,309.48	PN1730577503 Molina HC of TX Molina HC
3/9/2016	113105025	4618 495 OUTGOING MONEY TRANSFER	19,647.11		CANTEX HEALTH CARE CENTERS III
3/10/2016	113105025	4618 301 COMMERCIAL DEPOSIT		598.97	0 14033096
			19,647.11	27,967.39	

Account Portfolio as of 03/14/2016 10:01:06 AM

Account Display
☒ Display By Account Type
☐ Display By Asset/Liability

Commercial Checking Accounts

Account Name	Account Number	Today's Beginning Balance	Available Balance
<u>Memorial Medical Center</u>	3387	\$25,069.79	\$25,069.79
<u>Memorial Medical Center</u>	4553	\$59,455.58	\$101,805.37
<u>Memorial Medical Center</u>	4561	\$66,049.86	\$66,049.86
<u>Memorial Medical Center</u>	4588	\$48,155.02	\$48,155.02
<u>Memorial Medical Center</u>	4596	\$54,915.84	\$54,915.84
<u>Memorial Medical Center</u>	4618	\$28,067.39	\$31,142.37
<u>Memorial Medical Center Oper</u>	0301	\$1,510,788.35	\$1,513,102.55
<u>County of Calhoun Indigent</u>	1101	\$3,893.16	\$3,893.16
Totals		\$1,796,394.99	\$1,844,133.96

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Memorial Medical Center
Clinic Construction Account

3626

DATE 3/15/2016

88-502
1131 10

PAY
TO THE
ORDER OF K & T Construction

\$ 277,982.⁹⁰/_{xx}

Two Hundred Seventy Seven Thousand Nine Hundred Eighty Two & 90

DOLLARS

Security Features
Included.
Details on Back.



Port Lavaca, TX

IBC Voice - (361) 553-4200

FOR Pay App 14

Cindy Mueller

Phonda S. Korman

MP

50251

415411

APPROVED
ON

MAR 15 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Michael R L
3-21-16

8

RUN DATE:03/15/16
TIME:11:25

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/15/16 THRU 03/15/16

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
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C/C	003626	03/15/16	277,982.90	K&T CONSTRUCTION
TOTALS:			277,982.90	

APPROVED
ON

MAR 16 2016

03/15/2016

15:32

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Due Dates Through: 03/29/2016

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
9048703423	✓	03/14/20	02/24/20	03/25/20		294.69	0.00	0.00	294.69

SUPPLIES PLANT OPS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS-SOUTHWEST	294.69	0.00	0.00	294.69	✓

Vendor# Vendor Name

Class Pay Code

A1690 ALCON LABORATORIES, INC. ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20459275	✓	03/14/20	01/05/20	02/04/20		1,431.00	0.00	0.00	1,431.00

INTRA OCULAR LENSES

20652418	✓	03/14/20	02/10/20	03/11/20		159.00	0.00	0.00	159.00
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INTRA OCULAR LENSES

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1690	ALCON LABORATORIES, INC.	1,590.00	0.00	0.00	1,590.00	

Vendor# Vendor Name

Class Pay Code

10419 AMBU INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
216050503	✓	02/29/20	02/22/20	03/23/20		118.63	0.00	0.00	118.63

CS INVENTORY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
10419	AMBU INC	118.63	0.00	0.00	118.63	✓

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
774738149	✓	03/14/20	03/08/20	03/25/20		156.90	0.00	0.00	156.90

PHARMACY DRUGS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1360	AMERISOURCEBERGEN DRUG CORP	156.90	0.00	0.00	156.90	✓

Vendor# Vendor Name

Class Pay Code

A2347 ATD-AUSTIN ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20778		03/14/20	03/08/20	03/08/20		2,850.00	0.00	0.00	2,850.00

ADVERTISING

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A2347	ATD-AUSTIN	2,850.00	0.00	0.00	2,850.00	✓

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
6003747179	✓	03/09/20	02/25/20	03/26/20		516.72	0.00	0.00	516.72

SUPPLIES CT SCAN

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
M2485	BAYER HEALTHCARE	516.72	0.00	0.00	516.72	✓

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
105471627	✓	02/29/20	02/22/20	03/23/20		124.53	0.00	0.00	124.53

SUPPLIES LAB											
105481313	✓	02/29/20	02/25/20	03/26/20		1,102.89	0.00	0.00	1,102.89	✓	
LAB SUPPLIES											
4269779	✓	02/29/20	02/25/20	03/26/20		825.75	0.00	0.00	825.75	✓	
MAINT CONT LAB											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						B1220	BECKMAN COULTER INC	2,053.17	0.00	0.00	2,053.17
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	
23414553	✓	02/29/20	02/22/20	03/23/20			330.60	0.00	0.00	330.60	
SUPPLIES SURGERY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						D1040	C R BARD, INC	330.60	0.00	0.00	330.60 ✓
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	
20779		03/14/20	03/04/20	03/04/20			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				
A1730	CAREFUSION ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
9106467002	✓	03/09/20	02/23/20	03/24/20			34.03	0.00	0.00	34.03	
SUPPLIES SURGERY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						A1730	CAREFUSION	34.03	0.00	0.00	34.03 ✓
Vendor#	Vendor Name					Class	Pay Code				
E1270	CENTERPOINT ENERGY ENTEX ✓					W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
20797		03/15/20	02/29/20	03/15/20			48.09	0.00	0.00	48.09	
FUEL PLANT OPS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						E1270	CENTERPOINT ENERGY ENTEX	48.09	0.00	0.00	48.09 ✓
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	
20788		03/14/20	02/29/20	03/29/20			255.00	0.00	0.00	255.00	
PHARMACY DRUGS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						C1390	CENTRAL DRUGS	255.00	0.00	0.00	255.00 ✓
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	
91960398	✓	02/29/20	02/22/20	03/23/20			937.23	0.00	0.00	937.23 ✓	
CS INVENTORY											
91962746	✓	02/29/20	02/24/20	03/25/20			379.88	0.00	0.00	379.88 ✓	
CS INVENTORY & XRAY SUPP											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10350	CENTURION MEDICAL PRODUCTS	1,317.11	0.00	0.00	1,317.11
Vendor#	Vendor Name					Class	Pay Code				

10661	CENTURYLINK ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1368496725		03/14/20	03/03/20	03/03/20		4.31	0.00	0.00	4.31		
	TELEPHONE EXPENSE										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	10661 CENTURYLINK					4.31	0.00	0.00	4.31	✓	
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		
152279 ✓		02/29/20	02/22/20	03/23/20		89.25	0.00	0.00	89.25		
	SUPPLIES SURGERY										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	C1970 CONMED CORPORATION					89.25	0.00	0.00	89.25	✓	
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		
555X01794601 ✓		03/14/20	02/29/20	03/29/20		624.60	0.00	0.00	624.60		
	SUPPLIES & REPAIRS MAINT										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	R1050 CULLIGAN OF VICTORIA					624.60	0.00	0.00	624.60	✓	
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		
186790 ✓		02/29/20	02/22/20	03/23/20		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					
S2896	DANETTE BETHANY ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
20791		03/15/20	03/11/20	03/11/20		220.69	0.00	0.00	220.69		
	TRAVEL EXPENSE CLINIC										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	S2896 DANETTE BETHANY					220.69	0.00	0.00	220.69	✓	
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		
465459-0 ✓		02/24/20	02/22/20	03/23/20		45.09	0.00	0.00	45.09	✓	
	OFFICE SUPPLIES PT										
465696-0 ✓		02/24/20	02/22/20	03/23/20		92.56	0.00	0.00	92.56	✓	
	OFFICE SUPPLIES NURS ADM										
465461-0 ✓		02/24/20	02/22/20	03/23/20		281.55	0.00	0.00	281.55	✓	
	CS INVENTORY										
465463-0 ✓		02/24/20	02/22/20	03/23/20		380.60	0.00	0.00	380.60	✓	
	SUPPLIES ER										
465747-0 ✓		02/29/20	02/23/20	03/24/20		54.91	0.00	0.00	54.91	✓	
	SUPPLIES PT										
465761-0 ✓		02/29/20	02/23/20	03/24/20		172.75	0.00	0.00	172.75	✓	
	SUPPLIES IV CLINIC										
465762-0 ✓		02/29/20	02/23/20	03/24/20		81.29	0.00	0.00	81.29	✓	
	SUPPLIES MED SURG										

465813-0 ✓	02/29/20 02/24/20 03/25/20	347.94	0.00	0.00	347.94 ✓
CS INVENTORY & DIETARY SI					
466055-0 ✓	02/29/20 02/25/20 03/26/20	103.97	0.00	0.00	103.97 ✓
OFFICE SUPPLIES ACCOUNTI					
466066-0 ✓	02/29/20 02/25/20 03/26/20	125.64	0.00	0.00	125.64 ✓
SUPPLIES DIETARY					
466157-0 ✓	03/14/20 02/26/20 03/27/20	2.34	0.00	0.00	2.34 ✓
SUPPLIES PHARMACY					
Vendor Totals: Number Name		Gross	Discount	No-Pay	Net
10368 DEWITT POTH & SON		1,688.64	0.00	0.00	1,688.64
Vendor#	Vendor Name	Class	Pay Code		
D1785	DYNATRONICS CORPORATION ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
863942 ✓		02/29/20	02/22/20	03/23/20	25.90 0.00 0.00 25.90
SUPPLIES PT					
Vendor Totals: Number Name		Gross	Discount	No-Pay	Net
D1785 DYNATRONICS CORPORATION		25.90	0.00	0.00	25.90 ✓
Vendor#	Vendor Name	Class	Pay Code		
10558	EMPLOYEE ACTIVITIES TEAM ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
20792		03/15/20	03/14/20	03/14/20	2,480.00 0.00 0.00 2,480.00
PAYROLL DEDUCTS FOR EAT					
Vendor Totals: Number Name		Gross	Discount	No-Pay	Net
10558 EMPLOYEE ACTIVITIES TEAM		2,480.00	0.00	0.00	2,480.00 ✓
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
5-339-03998 ✓		03/14/20	03/03/20	03/18/20	99.02 0.00 0.00 99.02
FREIGHT EXP LAB & XRAY					
Vendor Totals: Number Name		Gross	Discount	No-Pay	Net
F1100 FEDERAL EXPRESS CORP.		99.02	0.00	0.00	99.02 ✓
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
20780		03/14/20	03/04/20	03/04/20	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
6368264 ✓		02/29/20	02/18/20	03/23/20	70.37 0.00 0.00 70.37 ✓
LAB SUPPLIES					
6988682 ✓		02/29/20	02/23/20	03/24/20	1,626.39 0.00 0.00 1,626.39 ✓
LAB SUPPLIES					
6988678 ✓		02/29/20	02/23/20	03/24/20	485.56 0.00 0.00 485.56 ✓
LAB SUPPLIES					
7138509 ✓		02/29/20	02/24/20	03/25/20	269.71 0.00 0.00 269.71 ✓
LAB SUPPLIES					
7138508 ✓		02/29/20	02/24/20	03/25/20	3,244.80 0.00 0.00 3,244.80 ✓
LAB SUPPLIES					
Vendor Totals: Number Name		Gross	Discount	No-Pay	Net

	F1400	FISHER HEALTHCARE					5,696.83	0.00	0.00	5,696.83
Vendor#	Vendor Name				Class	Pay Code				
G0321	GALLS,LLC				W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	004936256	✓	02/29/20	02/22/20	03/23/20		57.31	0.00	0.00	57.31
	EMPLOYEE UNIFORMS									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		G0321	GALLS,LLC				57.31	0.00	0.00	57.31 ✓
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
	109177108	✓	03/14/20	02/26/20	03/27/20		107.50	0.00	0.00	107.50
	REPAIRS DIETARY									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10653	GLOBAL EQUIPMENT CO. INC.				107.50	0.00	0.00	107.50 ✓
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
	9037917060	✓	03/14/20	02/26/20	03/27/20		9.10	0.00	0.00	9.10
	SUPPLIES ER									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		W1300	GRAINGER				9.10	0.00	0.00	9.10 ✓
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
	99833	✓	02/29/20	02/24/20	03/25/20		58.54	0.00	0.00	58.54 ✓
	SUPPLIES PLANT OPS									
	99981	✓	02/29/20	02/29/20	03/29/20		34.25	0.00	0.00	34.25 ✓
	SUPPLIES PLANT OPS									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		A1292	GULF COAST HARDWARE / ACE				92.79	0.00	0.00	92.79
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
	1094648	✓	02/29/20	02/23/20	03/24/20		511.17	0.00	0.00	511.17 ✓
	SUPPLIES HOUSEKEEPING									
	1095389	✓	03/14/20	02/24/20	03/25/20		33.38	0.00	0.00	33.38 ✓
	SUPPLIES HOUSEKEEPING									
	1098447	✓	03/14/20	03/01/20	03/29/20		38.01	0.00	0.00	38.01 ✓
	SUPPLIES HOUSEKEEPING									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		G1210	GULF COAST PAPER COMPANY				582.56	0.00	0.00	582.56
Vendor#	Vendor Name				Class	Pay Code				
11017	HENRY TROEMNER, LLC ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	00783127	✓	02/29/20	02/24/20	03/25/20		75.00	0.00	0.00	75.00
	OUTSIDE SRV LAB									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		11017	HENRY TROEMNER, LLC				75.00	0.00	0.00	75.00 ✓
Vendor#	Vendor Name				Class	Pay Code				
10298	HITACHI MEDICAL SYSTEMS ✓									

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
PJIN0087175 ✓		03/14/20	02/15/20	03/25/20		8,333.33	0.00	0.00	8,333.33		
MAINT CONTR MRI											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10298	HITACHI MEDICAL SYSTEMS	8,333.33	0.00	0.00	8,333.33 ✓
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		
7777865 ✓		03/09/20	02/26/20	03/27/20		405.68	0.00	0.00	405.68		
SUPPLIES MAMMO											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						H0416	HOLOGIC INC	405.68	0.00	0.00	405.68 ✓
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		
851079001 ✓		03/14/20	01/01/20	01/31/20		11.25	0.00	0.00	11.25 ✓		
MAINT CONTR ANESTHESA											
920141794 ✓		03/14/20	01/15/20	02/14/20		298.00	0.00	0.00	298.00 ✓		
PHARMACY DRUGS											
920142245 ✓		03/14/20	01/15/20	02/14/20		219.00	0.00	0.00	219.00 ✓		
PHARMACY DRUGS											
851080485 ✓		03/14/20	02/01/20	03/02/20		11.25	0.00	0.00	11.25 ✓		
MAINT CONT ANESTHESA											
920190154 ✓		03/14/20	02/12/20	03/13/20		216.50	0.00	0.00	216.50 ✓		
PHARMACY DRUGS											
851082110 ✓		03/14/20	03/01/20	03/29/20		11.25	0.00	0.00	11.25 ✓		
MAINT CONTR ANESTHESA											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						H1850	HOSPIRA WORLDWIDE, INC	767.25	0.00	0.00	767.25
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		
39057147 ✓		02/29/20	02/23/20	03/24/20		24.93	0.00	0.00	24.93		
CS INVENTORY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						I0415	INDEPENDENCE MEDICAL	24.93	0.00	0.00	24.93 ✓
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		
916076051 ✓		02/29/20	02/22/20	03/23/20		42.00	0.00	0.00	42.00 ✓		
CS INVENTORY											
916084110 ✓		03/09/20	02/23/20	03/24/20		167.60	0.00	0.00	167.60 ✓		
SUPPLIES SURGERY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						J0150	J & J HEALTH CARE SYSTEMS, INC	209.60	0.00	0.00	209.60
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		
20790		03/15/20	03/15/20	03/15/20		750.00	0.00	0.00	750.00		
STORAGE RENTAL											
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				
11128	KELLY J COX ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20796		03/15/20	03/14/20	03/14/20		984.16	0.00	0.00	984.16	
	TRAVEL EXPENSE PT					964.16			964.16	
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11128 KELLY J COX					984.16	0.00	0.00	984.16	
Vendor#	Vendor Name				Class	Pay Code	964.16		964.16	
11167	LAMAR COMPANIES ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
106802452 ✓		02/29/20	02/22/20	03/23/20		500.00	0.00	0.00	500.00	
	ADVERTISING									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11167 LAMAR COMPANIES					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	
84230		03/15/20	02/19/20	03/15/20		725.13	0.00	0.00	725.13	
	MINOR EQUIPMENT LAB									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	L1640 LOWE'S HOME CENTERS INC					725.13	0.00	0.00	725.13	✓
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	
20781		03/14/20	03/04/20	03/04/20		932.50	0.00	0.00	932.50	
	EMPLOYEE PERSONAL INVE									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	10972 M G TRUST					932.50	0.00	0.00	932.50	✓
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	
68301 ✓		02/29/20	02/22/20	03/23/20		209.98	0.00	0.00	209.98	
	SUPPLIES CLINIC									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	M1950 MARTIN PRINTING CO					209.98	0.00	0.00	209.98	✓
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	
1094846027 ✓		02/29/20	02/24/20	03/25/20		31.71	0.00	0.00	31.71	✓
	SUPPLIES CLINIC									
1094846029 ✓		02/29/20	02/24/20	03/25/20		31.68	0.00	0.00	31.68	✓
	SUPPLIES CLINIC									
1094846028 ✓		02/29/20	02/24/20	03/25/20		291.92	0.00	0.00	291.92	✓
	SUPPLIES AUX									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	M2470 MEDLINE INDUSTRIES INC					355.31	0.00	0.00	355.31	
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	
20782		03/14/20	03/04/20	03/04/20		70.00	0.00	0.00	70.00	✓
	EMPLOYEE CO PAYS CLINIC									

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10963	MEMORIAL MEDICAL CLINIC				70.00	0.00	0.00	70.00
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	
30094201909	✓	02/29/20	02/22/20	03/23/20		334.51	0.00	0.00	334.51	✓
	SUPPLIES XRAY									
30094203454	✓	02/29/20	02/24/20	03/25/20		2,094.05	0.00	0.00	2,094.05	✓
	SUPPLIES XRAY									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		M2659	MERRY X-RAY/SOURCEONE HEALTHCA				2,428.56	0.00	0.00	2,428.56
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	
20789		03/14/20	03/10/20	03/10/20		141.81	0.00	0.00	141.81	
	EMPLOYEE GIFT SHOP PURC									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		M2621	MMC AUXILIARY GIFT SHOP				141.81	0.00	0.00	141.81
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	
FEBRUARY292016		03/15/20	02/29/20	02/29/20		18,641.13	0.00	0.00	18,641.13	✓
	EMPLOYEE MEDICAL CLAIMS									
MARCH072016		03/15/20	03/07/20	03/07/20		72,637.41	0.00	0.00	72,637.41	✓
	EMPOYEE MEDICAL CLAIMS									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10810	MMC EMPLOYEE BENEFIT PLAN				91,278.54	0.00	0.00	91,278.54
Vendor#	Vendor Name			Class	Pay Code					
C1279	MONICA CARR			✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
20783		03/14/20	02/23/20	02/23/20		29.16	0.00	0.00	29.16	
	TRAVEL EXPENSE OB									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		C1279	MONICA CARR				29.16	0.00	0.00	29.16
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	
8571883	✓	03/14/20	03/08/20	03/09/20		21.71	0.00	0.00	21.71	✓
	PHARMACY DRUGS									
8571884	✓	03/14/20	03/08/20	03/09/20		1,062.82	0.00	0.00	1,062.82	✓
	PHARMACY DRUGS									
8571886	✓	03/14/20	03/08/20	03/09/20		77.59	0.00	0.00	77.59	✓
	PHARMACY DRUGS									
8558617	✓	03/15/20	03/04/20	03/05/20		1,500.00	0.00	0.00	1,500.00	✓
	OUTSIDE SRV PHARMACY									
8583042	✓	03/15/20	03/10/20	03/11/20		246.08	0.00	0.00	246.08	✓
	PHARMACY DRUGS									
8582221	✓	03/15/20	03/10/20	03/11/20		283.51	0.00	0.00	283.51	✓
	PHARMACY DRUGS									
8583040	✓	03/15/20	03/10/20	03/11/20		311.97	0.00	0.00	311.97	✓
	PHARMACY DRUGS									
8579973	✓	03/15/20	03/10/20	03/11/20		419.15	0.00	0.00	419.15	✓

		PHARMACY DRUGS										
8583041	✓		03/15/20	03/10/20	03/11/20		691.42	0.00	0.00	691.42	✓	
		PHARMACY DRUGS										
8587523	✓		03/15/20	03/11/20	03/12/20		165.39	0.00	0.00	165.39	✓	
		PHARMACY DRUGS										
CM19828	✓		03/15/20	03/11/20	03/12/20		-248.10	0.00	0.00	-248.10	✓	
		PHARMACY CREDIT										
8587524	✓		03/15/20	03/11/20	03/12/20		525.76	0.00	0.00	525.76	✓	
		PHARMACY DRUGS										
8587526	✓		03/15/20	03/11/20	03/12/20		8.68	0.00	0.00	8.68	✓	
		PHARMACY DRUGS										
8587525	✓		03/15/20	03/11/20	03/12/20		131.79	0.00	0.00	131.79	✓	
		PHARMACY DRUGS										
8585731	✓		03/15/20	03/11/20	03/12/20		136.97	0.00	0.00	136.97	✓	
		PHARMACY DRUGS										
8585730	✓		03/15/20	03/11/20	03/12/20		273.94	0.00	0.00	273.94	✓	
		PHARMACY DRUGS										
8585729	✓		03/15/20	03/11/20	03/12/20		41.23	0.00	0.00	41.23	✓	
		PHARMACY DRUGS										
8596041	✓		03/15/20	03/14/20	03/15/20		814.74	0.00	0.00	814.74	✓	
		PHARMACY DRUGS										
8595339	✓		03/15/20	03/14/20	03/15/20		4.34	0.00	0.00	4.34	✓	
		PHARMACY DRUGS										
8596043	✓		03/15/20	03/14/20	03/15/20		861.89	0.00	0.00	861.89	✓	
		PHARMACY DRUGS										
8596042	✓		03/15/20	03/14/20	03/15/20		3,317.50	0.00	0.00	3,317.50	✓	
		PHARMACY DRUGS										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10536	MORRIS & DICKSON CO, LLC	10,648.38	0.00	0.00	10,648.38
Vendor#	Vendor Name					Class	Pay Code					
11168	MSEC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
508300	✓		02/29/20	02/24/20	03/25/20		336.25	0.00	0.00	336.25		
		SUPPLIES PT										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							11168	MSEC	336.25	0.00	0.00	336.25 ✓
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		
212476	✓		03/14/20	03/05/20	03/25/20		200.00	0.00	0.00	200.00	✓	
		OUTSIDE SRV PLANT OPS										
212310	✓		03/14/20	03/05/20	03/25/20		250.00	0.00	0.00	250.00	✓	
		OUTSIDE SRV PLANT OPS										
212311	✓		03/14/20	03/05/20	03/25/20		45.00	0.00	0.00	45.00	✓	
		OUTSIDE SRV PLANT OPS										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10777	OSCAR TORRES	495.00	0.00	0.00	495.00
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		
2014746868	✓		02/29/20	02/23/20	03/24/20		16.70	0.00	0.00	16.70	✓	

CS INVENTORY										
2014747244	✓		02/29/20	02/23/20	03/24/20		37.90	0.00	0.00	37.90 ✓
CS INVENTORY										
2014746849	✓		02/29/20	02/23/20	03/24/20		108.27	0.00	0.00	108.27 ✓
SUPPLIES SURGERY										
2014752134	✓		02/29/20	02/23/20	03/24/20		1,811.00	0.00	0.00	1,811.00 ✓
SUPPLIES VARIOUS DEPTS										
2014746478	✓		02/29/20	02/23/20	03/24/20		6.99	0.00	0.00	6.99 ✓
SUPPLIES CLINIC										
2014746308	✓		02/29/20	02/23/20	03/24/20		123.41	0.00	0.00	123.41 ✓
SUPPLIES CLINIC & SURGERY										
2014832941	✓		02/29/20	02/25/20	03/26/20		4.77	0.00	0.00	4.77 ✓
CS INVENTORY										
2014838263	✓		02/29/20	02/25/20	03/26/20		1,864.36	0.00	0.00	1,864.36 ✓
SUPPLIES VARIOUS DEPTS										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
OM425 OWENS & MINOR							3,973.40	0.00	0.00	3,973.40
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	
A1548115	✓		02/29/20	02/24/20	03/25/20	142.00	0.00	0.00	142.00	
PHARMACY DRUGS										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
10204 PHARMEDIUM SERVICES LLC							142.00	0.00	0.00	142.00 ✓
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	
932464837	✓		03/10/20	02/26/20	03/27/20	103.36	0.00	0.00	103.36	
SUPPLIES NURSERY										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
10032 PHILIPS HEALTHCARE							103.36	0.00	0.00	103.36 ✓
Vendor#	Vendor Name				Class	Pay Code				
P1475	PHILIPS MEDICAL SYSTEMS HSG ✓				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
932435633	✓		02/29/20	02/22/20	03/23/20	130.92	0.00	0.00	130.92	
CS INVENTORY										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
P1475 PHILIPS MEDICAL SYSTEMS HSG							130.92	0.00	0.00	130.92 ✓
Vendor#	Vendor Name				Class	Pay Code				
11125	PORT LAVACA RETAIL GROUP LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20793			03/15/20	03/15/20	03/15/20	11,001.20	0.00	0.00	11,001.20	
RENT FOR PT & BEHAVE HEA										
Vendor Totals Number Name							Gross	Discount	No-Pay	Net
11125 PORT LAVACA RETAIL GROUP LLC							11,001.20	0.00	0.00	11,001.20 ✓
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	
3297921	✓		03/10/20	02/24/20	03/25/20	59.35	0.00	0.00	59.35 ✓	
CS INVENTORY										
3299419	✓		03/10/20	02/25/20	03/26/20	321.66	0.00	0.00	321.66 ✓	
CS INVENTORY										

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10372	PRECISION DYNAMICS CORP (PDC)			381.01	0.00	0.00	381.01
Vendor#	Vendor Name			Class	Pay Code				
10896	QIAGEN INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
97229619 ✓		03/15/20	11/24/20	12/24/20		3,118.56	0.00	0.00	3,118.56
LAB SUPPLIES									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10896	QIAGEN INC			3,118.56	0.00	0.00	3,118.56 ✓
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
20794		03/15/20	03/13/20	03/13/20		1,310.10	0.00	0.00	1,310.10
OUTSIDE SRV TRANSCRIPTIC									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		K0536	SHIRLEY KARNEI			1,310.10	0.00	0.00	1,310.10 ✓
Vendor#	Vendor Name			Class	Pay Code				
S3960	STERICYCLE, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
4006174523 ✓		03/14/20	02/29/20	03/29/20		1,256.15	0.00	0.00	1,256.15
OUTSIDE SRV HOUSEKEEPIN									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		S3960	STERICYCLE, INC			1,256.15	0.00	0.00	1,256.15 ✓
Vendor#	Vendor Name			Class	Pay Code				
11075	SUMMIT MEDICAL ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
303459 ✓		02/24/20	02/24/20	03/25/20		642.24	0.00	0.00	642.24
SUPPLIES SURGERY									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11075	SUMMIT MEDICAL			642.24	0.00	0.00	642.24 ✓
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
TX0001557 ✓		03/14/20	02/29/20	03/29/20		1,200.00	0.00	0.00	1,200.00
PROF FEES ER									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10611	TELE-PHYSICIANS, P.A. (TX)			1,200.00	0.00	0.00	1,200.00 ✓
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
20785		03/14/20	03/04/20	03/04/20		116.28	0.00	0.00	116.28 ✓
20784 ✓	GARNISHMENT STUDENT LO/	03/14/20	03/04/20	03/04/20		126.76	0.00	0.00	126.76 ✓
GARNISHMENT FOR STUDEN									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		T2303	TG			243.04	0.00	0.00	243.04
Vendor#	Vendor Name			Class	Pay Code				
10941	THE UPS PRINT STORE ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
03012039 ✓		03/14/20	03/05/20	03/05/20		30.00	0.00	0.00	30.00 ✓
SUPPLIES CLINIC									

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10941	THE UPS PRINT STORE				30.00	0.00	0.00	30.00
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
100616387-0229 ✓		03/14/20	02/23/20	03/24/20			58.86	0.00	0.00	58.86
	ADVERTISING									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		V1050	THE VICTORIA ADVOCATE				58.86	0.00	0.00	58.86 ✓
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
3A3X031600 ✓		03/14/20	03/01/20	03/29/20			119.00	0.00	0.00	119.00 ✓
	OUTSIDE SRV SPEC CLINIC									
35FK031600 ✓		03/14/20	03/01/20	03/29/20			713.00	0.00	0.00	713.00 ✓
	OUTSIDE SRV CLINIC									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		11067	TRIZETTO PROVIDER SOLUTIONS				832.00	0.00	0.00	832.00
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
8150721935 ✓		02/24/20	02/23/20	03/24/20			46.60	0.00	0.00	46.60 ✓
	OUTSIDE SRV MAINT									
8150722034 ✓		02/24/20	02/23/20	03/24/20			28.50	0.00	0.00	28.50 ✓
	OUTSIDE SRV BIO MED									
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		U1054	UNIFIRST HOLDINGS				75.10	0.00	0.00	75.10
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
8400214242 ✓		02/24/20	02/23/20	03/24/20			104.21	0.00	0.00	104.21 ✓
	LAUNDRY OB									
8400214241 ✓		02/24/20	02/23/20	03/24/20			152.79	0.00	0.00	152.79 ✓
	LAUNDRY DIETARY									
8400214240 ✓		02/24/20	02/23/20	03/24/20			200.82	0.00	0.00	200.82 ✓
	LAUNDRY HOUSEKEEPING									
8400214243 ✓		02/24/20	02/23/20	03/24/20			92.51	0.00	0.00	92.51 ✓
	LAUNDRY HOUSEKEEPING									
8400214239 ✓		02/24/20	02/23/20	03/24/20			295.87	0.00	0.00	295.87 ✓
	LAUNDRY HOUSEKEEPING									
8400214278 ✓		02/24/20	02/23/20	03/24/20			150.60	0.00	0.00	150.60 ✓
	LAUNDRY HOUSEKEEPING									
8400214291 ✓		02/24/20	02/23/20	03/24/20			1,196.20	0.00	0.00	1,196.20 ✓
	LAUNDRY HOUSEKEEPING									
8400214600 ✓		02/29/20	02/26/20	03/27/20			1,069.10	0.00	0.00	1,069.10 ✓
	LAUNDRY HOUSEKEEPING									
8400214558 ✓		02/29/20	02/26/20	03/27/20			572.83	0.00	0.00	572.83 ✓
	LAUNDRY SURGERY									
8400213742 ✓		03/14/20	02/16/20	03/17/20			92.51	0.00	0.00	92.51 ✓
	LAUNDRY HOUSEKEEPING									
8400213741 ✓		03/14/20	02/16/20	03/17/20			104.21	0.00	0.00	104.21 ✓
	LAUNDRY OB									

8400213790	✓	03/14/20 02/16/20 03/17/20	943.02	0.00	0.00	943.02	✓				
LAUNDRY HOUSEKEEPING											
8400213738	✓	03/14/20 02/16/20 03/17/20	295.87	0.00	0.00	295.87	✓				
LAUNDRY HOUSEKEEPING											
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net			
			U1064	UNIFIRST HOLDINGS INC	5,270.54	0.00	0.00	5,270.54			
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	
20777		03/14/20	03/14/20	03/14/20			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						
V0552	VERATHON INC			✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
721766	✓	03/14/20	02/24/20	03/25/20			750.00	0.00	0.00	750.00	
REPAIRS INSTRUMENT MED											
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net			
			V0552	VERATHON INC	750.00	0.00	0.00	750.00	✓		
Vendor#	Vendor Name			Class	Pay Code						
10942	VICKIE BROOME			✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
20786		03/14/20	02/23/20	02/23/20			29.16	0.00	0.00	29.16	
TRAVEL EXP OB											
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net			
			10942	VICKIE BROOME	29.16	0.00	0.00	29.16	✓		
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	
16020242	✓	03/14/20	02/29/20	03/03/20			300.00	0.00	0.00	300.00	✓
ADVERTISING											
16020241	✓	03/14/20	02/29/20	03/29/20			210.00	0.00	0.00	210.00	✓
ADVERTISING											
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net			
			V1471	VICTORIA RADIOWORKS, LTD	510.00	0.00	0.00	510.00			
Vendor#	Vendor Name			Class	Pay Code						
10915	WAGEWORKS			✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
20787		03/14/20	03/04/20	03/04/20			2,231.20	0.00	0.00	2,231.20	
FUNDING OF FLEX SPENDING											
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net			
			10915	WAGEWORKS	2,231.20	0.00	0.00	2,231.20	✓		
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	
9110279562	✓	02/29/20	02/23/20	03/24/20			1,809.00	0.00	0.00	1,809.00	✓
SUPPLIES LAB											
9310014357	✓	02/29/20	02/25/20	03/26/20			-55.00	0.00	0.00	-55.00	✓
LAB SUPPLIES CREDIT											
Vendor Totals			Number	Name	Gross	Discount	No-Pay	Net			

I1110	WERFEN USA LLC	1,754.00	0.00	0.00	1,754.00
Vendor#	Vendor Name	Class	Pay Code		
10325	WHOLESALE ELECTRIC SUPPLY ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay
79-4083458 ✓		02/29/20	02/25/20	03/26/20	
					Gross
					273.60
					Discount
					0.00
					No-Pay
					0.00
					Net
					273.60
	SUPPLIES PLANT OPS				
Vendor Total:	Number Name	Gross	Discount	No-Pay	Net
	10325 WHOLESALE ELECTRIC SUPPLY	273.60	0.00	0.00	273.60 ✓

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	177,899.45	0.00	0.00	177,899.45

pg 7
correction

{ <984.14>
+ 964.16
\$ 177,879.45

177,899.45 +
984.16 -
964.16 +
177,879.45 *



Michael J. Pfeifer
Calhoun County Judge

Date: 3-21-16

APPROVED
ON

MAK 16 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CRS # 165399

to

165473

RUN DATE: 03/15/16
TIME: 13:02

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1
APCDEDIT

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
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		031416	101.03	2		REFUND FOR	
77979		031416	75.72	3		REFUND FOR	
77979		031416	71.69	2		REFUND FOR	
77982		031416	894.77	3		REFUND FOR	
77979		031416	71.74	2		REFUND FOR	
77979		031416	169.84	2		REFUND FOR	
77484		031416	205.89	2		REFUND FOR	
77979		031416	487.81	2		REFUND FOR	
77465		031416	149.00	2		REFUND FOR	
77979		031516	25.00	2		REFUND FOR	
77983		031416	107.11	2		REFUND FOR	
77979		031416	259.19	2		REFUND FOR	
77979		031516	8.78	2		REFUND FOR	
77979		031516	9868.49	2		REFUND FOR	
77389		031516	4733.25	2		REFUND FOR	
774781407		031516	1635.06	2		REFUND FOR	
		031516	13339.67	2		REFUND FOR	

770846108

Michael J. Pfeiffer
Calhoun County Judge
Date: 4-7-16

MJP

APPROVED
ON

ARID=0001 TOTAL

32204.04

CK# 165474 MAR 16 2016

TD

#165490

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

03/16/2016
14:23

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 03/29/2016

0
ap_open_invoice.template

Vendor# Vendor Name Class Pay Code

T2198 TEXAS STATE BOARD OF PHARMACY W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
20798		03/16/20	03/16/20	03/16/20		451.00	0.00	0.00	451.00		
RENEWAL OF PHARMACY LIC											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
T2198						TEXAS STATE BOARD OF PHARMACY	451.00	0.00	0.00	451.00	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	451.00	0.00	0.00	451.00

APPROVED
ON

MAR 16 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 165491

Michael J. Pfeifer

Michael J. Pfeifer
Calhoun County Judge
Date: 3-21-16

RUN DATE:03/16/16
TIME:14:28

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/16/16 THRU 03/16/16

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165399	03/16/16	103.36	PHILIPS HEALTHCARE
A/P	165400	03/16/16	142.00	PHARMEDIUM SERVICES LLC
A/P	165401	03/16/16	750.00	JAMES A DANIEL
A/P	165402	03/16/16	8,333.33	HITACHI MEDICAL SYSTEMS
A/P	165403	03/16/16	273.60	WHOLESALE ELECTRIC SUPPLY
A/P	165404	03/16/16	1,317.11	CENTURION MEDICAL PRODUCTS
A/P	165405	03/16/16	1,688.64	DEWITT POTH & SON
A/P	165406	03/16/16	381.01	PRECISION DYNAMICS CORP (PDC)
A/P	165407	03/16/16	118.63	AMBU INC
A/P	165408	03/16/16	.00	VOIDED
A/P	165409	03/16/16	10,648.38	MORRIS & DICKSON CO, LLC
A/P	165410	03/16/16	2,480.00	EMPLOYEE ACTIVITIES TEAM
A/P	165411	03/16/16	1,200.00	TELE-PHYSICIANS, P.A. (TX)
A/P	165412	03/16/16	107.50	GLOBAL EQUIPMENT CO. INC.
A/P	165413	03/16/16	4.31	CENTURYLINK
A/P	165414	03/16/16	495.00	OSCAR TORRES
A/P	165415	03/16/16	91,278.54	MMC EMPLOYEE BENEFIT PLAN
A/P	165416	03/16/16	3,118.56	QIAGEN INC
A/P	165417	03/16/16	2,231.20	WAGEWORKS
A/P	165418	03/16/16	30.00	THE UPS PRINT STORE
A/P	165419	03/16/16	29.16	VICKIE BROOME
A/P	165420	03/16/16	70.00	MEMORIAL MEDICAL CLINIC
A/P	165421	03/16/16	932.50	M G TRUST
A/P	165422	03/16/16	75.00	HENRY TROEMNER, LLC
A/P	165423	03/16/16	75.00	FIRST CLEARING
A/P	165424	03/16/16	832.00	TRIZETTO PROVIDER SOLUTIONS
A/P	165425	03/16/16	642.24	SUMMIT MEDICAL
A/P	165426	03/16/16	11,001.20	PORT LAVACA RETAIL GROUP LLC
A/P	165427	03/16/16	964.16	KELLY J COX
A/P	165428	03/16/16	500.00	LAMAR COMPANIES
A/P	165429	03/16/16	336.25	MSEC
A/P	165430	03/16/16	92.79	GULF COAST HARDWARE / ACE
A/P	165431	03/16/16	156.90	AMERISOURCEBERGEN DRUG CORP
A/P	165432	03/16/16	294.69	AIRGAS-SOUTHWEST
A/P	165433	03/16/16	1,590.00	ALCON LABORATORIES, INC.
A/F	165434	03/16/16	34.03	CAREFUSION
A/P	165435	03/16/16	2,850.00	ATD-AUSTIN
A/P	165436	03/16/16	2,053.17	BECKMAN COULTER INC
A/P	165437	03/16/16	25.00	CAL COM FEDERAL CREDIT UNION
A/P	165438	03/16/16	29.16	MONICA CARR
A/P	165439	03/16/16	255.00	CENTRAL DRUGS
A/P	165440	03/16/16	439.00	CYGNUS MEDICAL LLC
A/P	165441	03/16/16	89.25	CONMED CORPORATION
A/P	165442	03/16/16	330.60	C R BARD, INC
A/P	165443	03/16/16	25.90	DYNATRONICS CORPORATION
A/P	165444	03/16/16	48.09	CENTERPOINT ENERGY ENTEX
A/P	165445	03/16/16	99.02	FEDERAL EXPRESS CORP.
A/P	165446	03/16/16	5,696.83	FISHER HEALTHCARE
A/P	165447	03/16/16	57.31	GALLS,LLC
A/P	165448	03/16/16	582.56	GULF COAST PAPER COMPANY

RUN DATE:03/16/16
TIME:14:28

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/16/16 THRU 03/16/16

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165449	03/16/16	405.68	HOLOGIC INC
A/P	165450	03/16/16	767.25	HOSPIRA WORLDWIDE, INC
A/P	165451	03/16/16	24.93	INDEPENDENCE MEDICAL
A/P	165452	03/16/16	1,754.00	WERFEN USA LLC
A/P	165453	03/16/16	209.60	J & J HEALTH CARE SYSTEMS, INC
A/P	165454	03/16/16	1,310.10	SHIRLEY KARNEI
A/P	165455	03/16/16	725.13	LOWE'S HOME CENTERS INC
A/P	165456	03/16/16	209.98	MARTIN PRINTING CO
A/P	165457	03/16/16	355.31	MEDLINE INDUSTRIES INC
A/P	165458	03/16/16	516.72	BAYER HEALTHCARE
A/P	165459	03/16/16	141.81	MMC AUXILIARY GIFT SHOP
A/P	165460	03/16/16	2,428.56	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	165461	03/16/16	3,973.40	OWENS & MINOR
A/P	165462	03/16/16	130.92	PHILIPS MEDICAL SYSTEMS HSG
A/P	165463	03/16/16	624.60	CULLIGAN OF VICTORIA
A/P	165464	03/16/16	220.69	DANETTE BETHANY
A/P	165465	03/16/16	1,256.15	STERICYCLE, INC
A/P	165466	03/16/16	243.04	TG
A/P	165467	03/16/16	75.10	UNIFIRST HOLDINGS
A/P	165468	03/16/16	5,270.54	UNIFIRST HOLDINGS INC
A/P	165469	03/16/16	1,000.00	US POSTAL SERVICE
A/P	165470	03/16/16	750.00	VERATHON INC
A/P	165471	03/16/16	58.86	THE VICTORIA ADVOCATE
A/P	165472	03/16/16	510.00	VICTORIA RADIOWORKS, LTD
A/P	165473	03/16/16	9.10	GRAINGER
A/P	165474	03/16/16	101.03	
A/P	165475	03/16/16	75.72	
A/P	165476	03/16/16	71.69	
A/P	165477	03/16/16	894.77	
A/P	165478	03/16/16	71.74	
A/P	165479	03/16/16	169.84	
A/P	165480	03/16/16	205.89	
A/P	165481	03/16/16	487.81	
A/P	165482	03/16/16	149.00	
A/P	165483	03/16/16	25.00	
A/P	165484	03/16/16	107.11	
A/P	165485	03/16/16	259.19	
A/P	165486	03/16/16	8.78	
A/P	165487	03/16/16	9,868.49	
A/P	165488	03/16/16	4,733.25	
A/P	165489	03/16/16	1,635.06	
A/P	165490	03/16/16	13,339.67	
A/P	165491	03/16/16	451.00	TEXAS STATE BOARD OF PHARMACY
TOTALS:			210,534.49	

APPROVED
ON

MAR 16 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK #165399-165491

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
3/21/2016

Nursing Home	IBC Account Number	Previous Beginning 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	[REDACTED] 4553	59,455.58	229,915.94	-	59,355.58	-	-	230,015.94	<u>229,915.94</u>

Routing Information for Ashford Gardens:

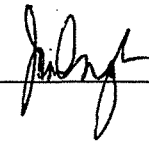
Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 111000614
Account [REDACTED] 4257

Nursing Home	IBC Account Number	Previous Beginning 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	[REDACTED] 4561	66,049.86	59,384.83	-	65,949.86	-	-	59,484.83	<u>59,384.83</u>
Crescent	[REDACTED] 4588	48,155.02	24,819.08	-	48,055.02	-	-	24,919.08	<u>24,819.08</u>
Broadmoor	[REDACTED] 4596	54,915.84	94,247.79	-	54,815.84	-	-	94,347.79	<u>94,247.79</u>
Fort Bend	[REDACTED] 4618	28,067.39	32,152.28	-	27,967.39	-	-	32,252.28	<u>32,152.28</u>
									<u>210,603.98</u>

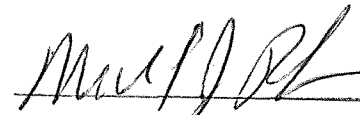
Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:

Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 111000614
Account [REDACTED] 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
MAR 21 2016
COUNTY AUDITOR


Michael J. Pfeifer
Calhoun County Judge
Date: 3-29-16

IBC Bank Activity
3/14/16 through 3/20/16

Ashford Gardens

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/14/2016	11310502	4553 142 ACH CREDIT RECEIVED		5,670.00	PN1326436189	Molina HC of TX Molina HC
3/14/2016	11310502	4553 142 ACH CREDIT RECEIVED		36,679.79	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/16/2016	11310502	4553 495 OUTGOING MONEY TRANSFER	59,355.58			ASHFORD HEALTH CARE CENTER LTD
3/16/2016	11310502	4553 142 ACH CREDIT RECEIVED		1,217.94	PN1326436189	Molina HC of TX Molina HC
3/17/2016	11310502	4553 142 ACH CREDIT RECEIVED		12,572.01	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/17/2016	11310502	4553 301 COMMERCIAL DEPOSIT		173,776.20	0	14039698
			<u>59,355.58</u>	<u>229,915.94</u>		

Solera at West Houston

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/15/2016	11310502	4561 142 ACH CREDIT RECEIVED		3,127.70	1.60311E+13	AMERIGROUP CORPO HCCLAIMPMT
3/16/2016	11310502	4561 495 OUTGOING MONEY TRANSFER	65,949.86			CANTEX HEALTH CARE CENTERS LLC
3/16/2016	11310502	4561 142 ACH CREDIT RECEIVED		14,888.31	676310	NOVITAS SOLUTION HCCLAIMPMT
3/16/2016	11310502	4561 142 ACH CREDIT RECEIVED		18,360.61	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/17/2016	11310502	4561 301 COMMERCIAL DEPOSIT		23,008.21	0	14039743
			<u>65,949.86</u>	<u>59,384.83</u>		

Crescent

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/16/2016	11310502	4588 142 ACH CREDIT RECEIVED		254.82	676323	NOVITAS SOLUTION HCCLAIMPMT
3/16/2016	11310502	4588 495 OUTGOING MONEY TRANSFER	48,055.02			CANTEX HEALTH CARE CENTERS III
3/17/2016	11310502	4588 301 COMMERCIAL DEPOSIT		24,564.26	0	14039731
			<u>48,055.02</u>	<u>24,819.08</u>		

Broadmoor

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/15/2016	11310502	4596 142 ACH CREDIT RECEIVED		5,624.08	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/16/2016	11310502	4596 495 OUTGOING MONEY TRANSFER	54,815.84			CANTEX HEALTH CARE CENTERS III
3/17/2016	11310502	4596 301 COMMERCIAL DEPOSIT		88,623.71	0	14039710
			<u>54,815.84</u>	<u>94,247.79</u>		

Fort Bend

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/14/2016	11310502	4618 142 ACH CREDIT RECEIVED		3,074.98	PN1730577503	Molina HC of TX Molina HC
3/15/2016	11310502	4618 142 ACH CREDIT RECEIVED		2,815.32	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/16/2016	11310502	4618 495 OUTGOING MONEY TRANSFER	27,967.39			CANTEX HEALTH CARE CENTERS III
3/17/2016	11310502	4618 301 COMMERCIAL DEPOSIT		26,259.59	0	14039739
3/18/2016	11310502	4618 142 ACH CREDIT RECEIVED		2.39	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
			<u>27,967.39</u>	<u>32,152.28</u>		

Account Portfolio as of 03/21/2016 9:45:24 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	\$25,069.79	\$25,069.79
Memorial Medical Center	4553	\$230,015.94	\$230,015.94
Memorial Medical Center	4561	\$59,484.83	\$59,484.83
Memorial Medical Center	4588	\$24,919.08	\$91,736.70
Memorial Medical Center	4596	\$94,347.79	\$432,253.28
Memorial Medical Center	4618	\$32,252.28	\$47,627.99
Memorial Medical Center Operat	0301	\$1,336,973.68	\$1,364,168.58
County of Calhoun Indigent	1101	\$3,344.61	\$3,344.61
Totals		\$1,806,408.00	\$2,253,701.72

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RUN DATE:03/21/16
TIME:10:42

MEMORIAL MEDICAL CENTER
CHECK REGISTER *and Payable List*
03/21/16 THRU 03/21/16

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

A/P	000744	03/21/16	618.81	MCKESSON
A/P	000745	03/21/16	236.08	MCKESSON
A/P	000746	03/21/16	1,251.23	MCKESSON
TOTALS:			2,106.12	

340 B Prescription Services

APPROVED
ON

MAR 21 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



Michael J. Pfeifer
Calhoun County Judge
Date: 3-29-16

MCKESSON**STATEMENT**

As of: 03/18/2016

Page: 001

Company: 8000

HEB PHCY 0434/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 190813
Date: 03/18/2016

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

As of: 03/18/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813
Date: 03/18/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
03/14/2016	03/22/2016	7736116773	1000782846	115Invoice	1.63	81.30		79.67 ✓		7736116773
03/14/2016	03/22/2016	7736116774	1000783437	115Invoice	0.01	0.40		0.39 ✓		7736116774
03/14/2016	03/22/2016	7736116775	1000783859	115Invoice	3.28	163.78		160.50 ✓		7736116775
03/15/2016	03/22/2016	7736327670	1000784264	115Invoice	1.59	79.51		77.92 ✓		7736327670
03/16/2016	03/22/2016	7736561927	1000784671	115Invoice	1.63	81.73		80.10 ✓		7736561927
03/18/2016	03/22/2016	7737040969	1000785542	115Invoice	4.49	224.72		220.23 ✓		7737040969

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

TOTAL:

Subtotals: 631.44 USD

Future Due: 0.00

If Paid By 03/22/2016,

Past Due: 0.00

Pay This Amount:

618.81 USD

Due If Paid On Time:

USD 618.81

Disc lost if paid late:

12.63

Last Payment 727.94

If Paid After 03/22/2016,

03/14/2016:

Pay this Amount:

631.44 USD

Due If Paid Late:

USD 631.44

[Handwritten Signature]
3-21-16

CHK 744

APPROVED
ON

MAR 21 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

As of: 03/18/2016

Page: 001

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

Company: 8000

DC: 8115

As of: 03/18/2016
Mail to:Page: 001
Comp: 8000WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 256342
Date: 03/18/2016AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 256342
Date: 03/18/2016PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
03/14/2016	03/22/2016	7736132948	3454581297	115Invoice	0.45	22.68		22.23	✓	7736132948	
03/17/2016	03/22/2016	7736758672	3454581306	115Invoice	3.83	191.43		187.60	✓	7736758672	
03/18/2016	03/22/2016	7737034395	3454581309	115Invoice	0.06	3.10		3.04	✓	7737034395	
03/18/2016	03/22/2016	7737034396	1089106	115Invoice	0.47	23.68		23.21	✓	7737034396	

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

TOTAL: Subtotals: 240.89 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 383.56
03/14/2016If Paid By 03/22/2016,
Pay This Amount:

236.08 USD

Due If Paid On Time:

USD 236.08

Disc lost if paid late:

4.81

If Paid After 03/22/2016,
Pay this Amount:

240.89 USD

Due If Paid Late:

USD 240.89

ck# 745

APPROVED
ON

MAR 21 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MCKESSON

STATEMENT

As of: 03/18/2016

Page: 001

Company: 8000

DC: 8115

Territory: 400

Customer: 262252

Date: 03/18/2016

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

As of: 03/18/2016
Mail to:

Page: 001
Comp: 8000

CVS PHCY 7006/MEMORIA PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252
Date: 03/18/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
03/14/2016	03/22/2016	7736128021	1000782848	115Invoice	4.68	234.10		229.42 ✓		7736128021
03/14/2016	03/22/2016	7736128023	1000783439	115Invoice	0.23	11.27		11.04 ✓		7736128023
03/14/2016	03/22/2016	7736128024	1000783862	115Invoice	8.71	435.42		426.71 ✓		7736128024
03/15/2016	03/22/2016	7736342412	1000784266	115Invoice	4.98	249.07		244.09 ✓		7736342412
03/16/2016	03/22/2016	7736553063	1000784673	115Invoice	4.74	236.90		232.16 ✓		7736553063
03/17/2016	03/22/2016	7736766167	1000785098	115Invoice	0.43	21.52		21.09 ✓		7736766167
03/18/2016	03/22/2016	7737041634	1000785545	115Invoice	1.77	88.49		86.72 ✓		7737041634

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

TOTAL:

Subtotals: 1,276.77 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 594.82
03/14/2016

If Paid By 03/22/2016,
Pay This Amount:

1,251.23 USD

Due If Paid On Time:
USD 1,251.23

Disc lost if paid late:
25.54

If Paid After 03/22/2016,
Pay this Amount:

1,276.77 USD

Due If Paid Late:
USD 1,276.77

[Handwritten signature]
3.21.16

ck #746

APPROVED
ON
MAR 21 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

APPROVED
ON

MAR 23 2016

03/22/2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
Vendor# Vendor Name

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Due Dates Through: 04/06/2016

ap_open_invoice.template

Class Pay Code

10950 ✓ ACUTE CARE INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
✓22354		03/22/20	03/20/20	03/30/20		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

A1680 AIRGAS-SOUTHWEST ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9048794990 ✓		03/14/20	02/29/20	03/30/20		1,864.97	0.00	0.00	1,864.97 ✓

OXYGEN RESP CARE

9046055959 ✓		03/18/20	12/02/20	01/01/20		69.28	0.00	0.00	69.28 ✓
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SUPPLIES PLANT OPS

9934031724 ✓		03/18/20	02/29/20	03/30/20		420.12	0.00	0.00	420.12 ✓
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SUPPLIES PLANT OPS

9934031723 ✓		03/18/20	02/29/20	03/30/20		388.11	0.00	0.00	388.11 ✓
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SUPPLIES PLANT OPS

9046242284 ✓		03/22/20	12/08/20	01/07/20		133.44	0.00	0.00	133.44 ✓
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SUPPLIES PLANT OPS

9046288539 ✓		03/22/20	12/09/20	01/08/20		38.00	0.00	0.00	38.00 ✓
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SUPPLIES PLANT OPS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS-SOUTHWEST	2,913.92	0.00	0.00	2,913.92	

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
686406 ✓		03/18/20	02/29/20	03/30/20		11.09	0.00	0.00	11.09

SUPPLIES LAB

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A2218	AQUA BEVERAGE COMPANY	11.09	0.00	0.00	11.09 ✓	

Vendor# Vendor Name Class Pay Code

A2600 AUTO PARTS & MACHINE CO. ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
788189 ✓		03/14/20	03/01/20	03/31/20		38.40	0.00	0.00	38.40

SUPPLIES BIO MED

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A2600	AUTO PARTS & MACHINE CO.	38.40	0.00	0.00	38.40 ✓	

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
3784951 ✓		03/22/20	03/14/20	04/01/20		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

B0435 BARD PERIPHERAL VASCULAR ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
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75207026	✓	03/09/20 02/29/20 03/30/20				54.38	0.00	0.00	54.38	✓
CS INVENTORY										
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
B0435 BARD PERIPHERAL VASCULAR						54.38	0.00	0.00	54.38	
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	
50210242	✓	03/09/20	02/29/20	03/30/20		340.05	0.00	0.00	340.05 ✓	
CS INVENTORY										
50223049	✓	03/14/20	03/01/20	03/31/20		2,767.00	0.00	0.00	2,767.00 ✓	
RENT IV PUMPS										
50225302	✓	03/14/20	03/01/20	03/31/20		190.50	0.00	0.00	190.50 ✓	
LEASE & RENTAL IV PUMPS										
50303566	✓	03/15/20	03/07/20	04/06/20		459.35	0.00	0.00	459.35 ✓	
CS INVENTORY & RECOVERY										
50269459	✓	03/18/20	03/03/20	04/02/20		192.61	0.00	0.00	192.61 ✓	
CS INVENTORY & RECOVERY										
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
B1075 BAXTER HEALTHCARE CORP						3,949.51	0.00	0.00	3,949.51	
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	
5346296	✓	03/18/20	02/12/20	03/13/20		4,233.46	0.00	0.00	4,233.46 ✓	
RENT & MAINT CONTR LAB										
5346275	✓	03/18/20	02/12/20	03/13/20		3,933.48	0.00	0.00	3,933.48 ✓	
RENT AND MAINT CONTR LAE										
105491043	✓	03/18/20	03/02/20	04/01/20		78.22	0.00	0.00	78.22 ✓	
LAB SUPPLIES										
105495267	✓	03/18/20	03/03/20	04/02/20		786.15	0.00	0.00	786.15 ✓	
LAB SUPPLIES										
105496261	✓	03/18/20	03/04/20	04/03/20		1,648.84	0.00	0.00	1,648.84 ✓	
LAB SUPPLIES										
105496968	✓	03/18/20	03/04/20	04/03/20		359.36	0.00	0.00	359.36 ✓	
LAB SUPPLIES										
105499528	✓	03/18/20	03/05/20	04/04/20		2,090.28	0.00	0.00	2,090.28 ✓	
LAB SUPPLIES										
105498914	✓	03/18/20	03/05/20	04/04/20		4,457.76	0.00	0.00	4,457.76 ✓	
LAB SUPPLIES										
105499005	✓	03/18/20	03/05/20	04/04/20		514.88	0.00	0.00	514.88 ✓	
LAB SUPPLIES										
105501147	✓	03/18/20	03/07/20	04/06/20		10,664.38	0.00	0.00	10,664.38 ✓	
LAB SUPPLIES										
105501360	✓	03/18/20	03/07/20	04/06/20		1,746.70	0.00	0.00	1,746.70 ✓	
LAB SUPPLIES										
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	
B1220 BECKMAN COULTER INC						30,513.51	0.00	0.00	30,513.51	
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	
9102005666	✓	03/18/20	03/03/20	04/02/20		2,352.61	0.00	0.00	2,352.61 ✓	
SUPPLIES LAB										
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net	

10024	BECTON, DICKINSON & CO (BD)						2,352.61	0.00	0.00	2,352.61
Vendor#	Vendor Name				Class	Pay Code				
10522	BIOMET INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
18-904922 ✓		03/09/20	03/02/20	04/01/20		777.42	0.00	0.00	777.42	
	SUPPLIES SURGERY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10522	BIOMET INC				777.42	0.00	0.00	777.42 ✓	
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	
20908357 ✓		03/22/20	03/16/20	04/01/20		1,159.75	0.00	0.00	1,159.75	
	TELEPHONE EXPENSE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11050	BIRCH COMMUNICATIONS				1,159.75	0.00	0.00	1,159.75 ✓	
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	
BK00559784 ✓		03/14/20	02/29/20	03/30/20		9,305.40	0.00	0.00	9,305.40	
	AUDITING FEES ADMIN									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10599	BKD, LLP				9,305.40	0.00	0.00	9,305.40 ✓	
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	
20816		03/22/20	03/21/20	03/30/20		635.35	0.00	0.00	635.35 ✓	
	OUTISE SER IT					42.22			42.22	
20815		03/22/20	03/21/20	03/30/20		45.69	0.00	0.00	45.69	
	OUTSIDE SRV CLINIC									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	C1010	CABLE ONE				681.04	0.00	0.00	681.04	
Vendor#	Vendor Name				Class	Pay Code				
A1730	CAREFUSION ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
9106502602 ✓		03/18/20	03/04/20	04/03/20		143.52	0.00	0.00	143.52 ✓	
	SUPPLIES SURGERY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	A1730	CAREFUSION				143.52	0.00	0.00	143.52	
Vendor#	Vendor Name				Class	Pay Code				
11172	CARING ANGELS PROFESSIONAL SER ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
0000022		03/18/20	12/17/20	01/16/20		1,500.00	0.00	0.00	1,500.00	
	OUTSIDE SRV BUS OFFICE									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11172	CARING ANGELS PROFESSIONAL SER				1,500.00	0.00	0.00	1,500.00 ✓	
Vendor#	Vendor Name				Class	Pay Code				
Z0850	CARMEN C. ZAPATA-ARROYO ✓				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
20806		03/18/20	02/26/20	02/26/20		495.00	0.00	0.00	495.00 ✓	
	OUTSIDE SRV OCC THERAPY									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	

	Z0850	CARMEN C. ZAPATA-ARROYO					495.00	0.00	0.00	495.00
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
	91965427 ✓		03/09/20	02/29/20	03/30/20		532.00	0.00	0.00	532.00 ✓
		CS INVENTORY								
	91967041 ✓		03/10/20	03/02/20	04/01/20		365.86	0.00	0.00	365.86 ✓
		CS INVENTORY								
	91970304 ✓		03/15/20	03/07/20	04/06/20		1,083.00	0.00	0.00	1,083.00 ✓
		CS INVENTORY & RECOVERY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10350	CENTURION MEDICAL PRODUCTS				1,980.86	0.00	0.00	1,980.86
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
	20801		03/18/20	02/29/20	03/30/20		8,166.37	0.00	0.00	8,166.37
		OUTSIDE SRV LAB								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10786	CLINICAL PATHOLOGY				8,166.37	0.00	0.00	8,166.37 ✓
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
	159852 ✓		03/15/20	03/07/20	04/06/20		230.00	0.00	0.00	230.00
		SUPPLIES SURGERY								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		C1970	CONMED CORPORATION				230.00	0.00	0.00	230.00 ✓
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
	19007 ✓		03/18/20	03/10/20	04/01/20		19,175.00	0.00	0.00	19,175.00
		OUTSIDE SRV WOUND CARE								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		10556	CPP WOUND CARE #28,LLC				19,175.00	0.00	0.00	19,175.00 ✓
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
	RT00120725 ✓		03/18/20	02/22/20	04/01/20		7,682.67	0.00	0.00	7,682.67
		LEASE & RENTAL MED SURG								
	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						
S2896	DANETTE BETHANY ✓		W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	20808		03/22/20	03/17/20	03/17/20		125.86	0.00	0.00	125.86 ✓
		SUPPLIES CLINIC								
	20809		03/22/20	03/17/20	03/17/20		277.20	0.00	0.00	277.20 ✓
		TRAVEL EXPENSE CLINIC								
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
		S2896	DANETTE BETHANY				403.06	0.00	0.00	403.06
Vendor#	Vendor Name		Class	Pay Code						
10368	DEWITT POTTH & SON ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

466225-0 ✓	03/09/20 02/29/20 03/30/20	332.31	0.00	0.00	332.31 ✓
CS INVENTORY					
466066-1 ✓	03/09/20 02/29/20 03/30/20	28.91	0.00	0.00	28.91 ✓
SUPPLIES DIETARY					
466455-0 ✓	03/09/20 03/02/20 04/01/20	160.62	0.00	0.00	160.62 ✓
CS INVENTORY					
466381-0 ✓	03/14/20 03/01/20 03/31/20	31.66	0.00	0.00	31.66 ✓
OFFICE SUPPLIES BUS OFFIC					
466481-0 ✓	03/18/20 03/02/20 04/01/20	13.30	0.00	0.00	13.30 ✓
OFFICE SUPPLIES CLINIC					
466710-0 ✓	03/18/20 03/03/20 04/02/20	12.08	0.00	0.00	12.08 ✓
SUPPLIES OB					
466848-0 ✓	03/18/20 03/04/20 04/03/20	92.76	0.00	0.00	92.76 ✓
OFFICE SUPPLIES LAB					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10368 DEWITT POTH & SON	671.64	0.00	0.00	671.64
Vendor#	Vendor Name	Class	Pay Code		
D1608	DIVERSIFIED BUSINESS SYSTEMS ✓	M			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
26434 ✓		03/18/20	03/03/20	04/02/20	59.20 0.00 0.00 59.20
OFFICE SUPPLIES INDIGENT					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	D1608 DIVERSIFIED BUSINESS SYSTEMS	59.20	0.00	0.00	59.20 ✓
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
20810		03/22/20	03/10/20	03/10/20	12.20 0.00 0.00 12.20
OUTSIDE SRV HOUSEKEEPIN					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	D1710 DOWNTOWN CLEANERS	12.20	0.00	0.00	12.20 ✓
Vendor#	Vendor Name	Class	Pay Code		
10175	DSHS CENTRAL LAB MC2004 ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
20800		03/18/20	03/02/20	04/01/20	336.00 0.00 0.00 336.00
SUPPLIES LAB					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10175 DSHS CENTRAL LAB MC2004	336.00	0.00	0.00	336.00 ✓
Vendor#	Vendor Name	Class	Pay Code		
10977	ECOLAB EQUIPMENT CARE ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
94122859 ✓		03/18/20	01/22/20	02/21/20	138.19 0.00 0.00 138.19
SUPPLIES DIETARY					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10977 ECOLAB EQUIPMENT CARE	138.19	0.00	0.00	138.19 ✓
Vendor#	Vendor Name	Class	Pay Code		
10558	EMPLOYEE ACTIVITIES TEAM				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
20807		03/22/20	03/20/20	03/20/20	60.00 0.00 0.00 60.00
PAYROLL DEDUCTS- EAT COI					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
	10558 EMPLOYEE ACTIVITIES TEAM	60.00	0.00	0.00	60.00 ✓

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	
361970 ✓		03/09/20	03/01/20	03/31/20			153.00	0.00	0.00	153.00	
	SUPPLIES SURGERY										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net	
	10042	ERBE USA INC SURGICAL SYSTEMS					153.00	0.00	0.00	153.00 ✓	
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	
T16020B1378 ✓		03/18/20	02/09/20	03/10/20			2,650.00	0.00	0.00	2,650.00 ✓	
	OUTSIDE SRV MED RECORDS										
916467 ✓		03/18/20	02/11/20	03/12/20			4,554.00	0.00	0.00	4,554.00 ✓	
	INTRFACE LAB EQUIPMENT										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net	
	C2510	EVIDENT					7,204.00	0.00	0.00	7,204.00	
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	
902539992 ✓		03/18/20	03/01/20	03/31/20			153.18	0.00	0.00	153.18	
	MAINT CONT LAB										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net	
	S0501	EVOQUA WATER TECHNOLOGIES LLC					153.18	0.00	0.00	153.18 ✓	
Vendor#	Vendor Name				Class	Pay Code					
F1050	FASTENAL COMPANY ✓				M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
TXPOT158912 ✓		03/14/20	03/01/20	03/31/20			77.22	0.00	0.00	77.22	
	SUPPLIES BIO MED										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net	
	F1050	FASTENAL COMPANY					77.22	0.00	0.00	77.22 ✓	
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	
03A16mmg ✓		03/14/20	03/01/20	03/31/20			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					
F1100	FEDERAL EXPRESS CORP. ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
5-346-44792 ✓		03/18/20	03/10/20	03/25/20			46.97	0.00	0.00	46.97	
	FREIGHT EXP DIETARY										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net	
	F1100	FEDERAL EXPRESS CORP.					46.97	0.00	0.00	46.97 ✓	
Vendor#	Vendor Name				Class	Pay Code					
10003	FILTER TECHNOLOGY CO, INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
87453 ✓		03/18/20	02/25/20	03/26/20			347.43	0.00	0.00	347.43	
	SUPPLIES PLANT OPS										
Vendor Totals	Number	Name					Gross	Discount	No-Pay	Net	
	10003	FILTER TECHNOLOGY CO, INC					347.43	0.00	0.00	347.43 ✓	
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	
8699944 ✓		03/18/20	03/01/20	03/31/20		3,118.38	0.00	0.00	3,118.38	✓
	LAB SUPPLIES									
8926524 ✓		03/18/20	03/02/20	04/01/20		193.51	0.00	0.00	193.51	✓
	LAB SUPPLIES									
9072205 ✓		03/18/20	03/03/20	04/02/20		115.50	0.00	0.00	115.50	✓
	LAB SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	F1400	FISHER HEALTHCARE				3,427.39	0.00	0.00	3,427.39	
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	
0201430-IN ✓		03/14/20	03/01/20	03/31/20		530.00	0.00	0.00	530.00	
	MAINT CONTR 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				
10488	GE HEALTHCARE IITS USA CORP ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
030352989		03/18/20	03/04/20	04/03/20		805.27	0.00	0.00	805.27	
	DUES & SUBCRPTIONS 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				
10901	GENESIS DIAGNOSTICS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
45566 ✓		03/18/20	02/23/20	03/24/20		489.32	0.00	0.00	489.32	
	LAB SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10901	GENESIS DIAGNOSTICS				489.32	0.00	0.00	489.32	✓
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	
109178443		03/18/20	02/27/20	03/28/20		1,115.55	0.00	0.00	1,115.55	
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10653	GLOBAL EQUIPMENT CO. INC.				1,115.55	0.00	0.00	1,115.55	✓
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	
9041584112 ✓		03/14/20	03/01/20	03/31/20		14.81	0.00	0.00	14.81	✓
	SUPPLIES CLINIC									
9040836786 ✓		03/14/20	03/01/20	03/31/20		43.00	0.00	0.00	43.00	✓
	SUPPLIES MAINT									
9044999267 ✓		03/18/20	03/04/20	04/03/20		92.46	0.00	0.00	92.46	✓
	SUPPLIES PLANT OPS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	W1300	GRAINGER				150.27	0.00	0.00	150.27	
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
99991 ✓		03/14/20	03/01/20	03/31/20		5.58	0.00	0.00	5.58 ✓
	SUPPLIES PLANT OPS								
99994 ✓		03/14/20	03/01/20	03/31/20		4.29	0.00	0.00	4.29 ✓
	SUPPLIES PLANT OPS								
100024 ✓		03/14/20	03/01/20	03/31/20		17.91	0.00	0.00	17.91 ✓
	SUPPLIES PLANT OPS								
100042 ✓		03/18/20	03/02/20	04/01/20		10.73	0.00	0.00	10.73 ✓
	SUPPLIES PLANT OPS								
100041 ✓		03/18/20	03/02/20	04/01/20		9.48	0.00	0.00	9.48 ✓
	SUPPLIES PLANT OPS								
100095 ✓		03/18/20	03/03/20	04/02/20		61.97	0.00	0.00	61.97 ✓
	SUPPLIES PLANT OPS								
100076 ✓		03/18/20	03/03/20	04/02/20		47.98	0.00	0.00	47.98 ✓
	PLANT OPS SUPPLIES								
100155 ✓		03/18/20	03/04/20	04/03/20		2.79	0.00	0.00	2.79 ✓
	SUPPLIES PLANT OPS								
100143 ✓		03/18/20	03/04/20	04/03/20		39.98	0.00	0.00	39.98 ✓
	SUPPLIES PLANT OPS								
100207 ✓		03/18/20	03/07/20	04/06/20		17.99	0.00	0.00	17.99 ✓
	SUPPLIES SURGERY CLINIC								
Vendor Totals						Gross	Discount	No-Pay	Net
	A1292 GULF COAST HARDWARE / ACE					218.70	0.00	0.00	218.70
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
1098456 ✓		03/09/20	03/01/20	03/31/20		192.72	0.00	0.00	192.72
	SUPPLIES HOUSEKEEPING								
Vendor Totals						Gross	Discount	No-Pay	Net
	G1210 GULF COAST PAPER COMPANY					192.72	0.00	0.00	192.72 ✓
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
313934 ✓		03/14/20	02/29/20	03/30/20		528.00	0.00	0.00	528.00
	LEASE & RENTAL ICU								
Vendor Totals						Gross	Discount	No-Pay	Net
	H1399 HILL-ROM COMPANY, INC					528.00	0.00	0.00	528.00 ✓
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
32444605 ✓		03/22/20	02/15/20	03/16/20		422.78	0.00	0.00	422.78
	REPAIRS DIETARY								
Vendor Totals						Gross	Discount	No-Pay	Net
	H1600 HOBART SALES & SERVICE					422.78	0.00	0.00	422.78 ✓
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
39196367 ✓		03/18/20	03/03/20	04/02/20		24.93	0.00	0.00	24.93
	CS INVENTORY								
Vendor Totals						Gross	Discount	No-Pay	Net
	I0415 INDEPENDENCE MEDICAL					24.93	0.00	0.00	24.93 ✓
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		
916115345	✓ SUPPLIES SURGERY	03/09/20	02/29/20	03/30/20		459.73	0.00	0.00	459.73 ✓		
916112045	✓ SUPPLIES SURGERY	03/15/20	02/29/20	03/30/20		732.62	0.00	0.00	732.62 ✓		
916094798	✓ LAB SUPPLIES	03/18/20	02/25/20	03/26/20		396.63	0.00	0.00	396.63 ✓		
916132911	✓ LAB SUPPLIES	03/18/20	03/03/20	04/02/20		870.71	0.00	0.00	870.71 ✓		
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						J0150	J & J HEALTH CARE SYSTEMS, INC	2,459.69	0.00	0.00	2,459.69

Vendor# Vendor Name Class Pay Code
J1300 JECKER FLOOR & GLASS ✓ W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
73369 ✓		03/18/20	03/07/20	04/06/20		68.94	0.00	0.00	68.94		
SUPPLIES SURGERY CLINIC											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						J1300	JECKER FLOOR & GLASS	68.94	0.00	0.00	68.94 ✓

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		
82045		03/22/20	03/21/20	03/21/20		275.00	0.00	0.00	275.00		
ADVERTISING											
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						11122	K & M SPORTS	275.00	0.00	0.00	275.00

Vendor# Vendor Name Class Pay Code

K1231 KONICA MINOLTA MEDICAL IMAGING ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
130710 ✓		03/18/20	12/07/20	01/06/20		1,435.76	0.00	0.00	1,435.76		
	REPAIRS XRAY										
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
	K1231	KONICA MINOLTA MEDICAL IMAGING				1,435.76	0.00	0.00	1,435.76		

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		
3775280 ✓		03/14/20	02/29/20	03/30/20		7.20	0.00	0.00	7.20		
OUTSIDE SRV ADMIN											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						L1288	LANGUAGE LINE SERVICES	7.20	0.00	0.00	7.20

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		
16007 ✓		03/22/20	03/02/20	03/16/20		780.00	0.00	0.00	780.00 ✓		
	CONT EDUCATION										
16008 ✓		03/22/20	03/11/20	03/28/20		420.00	0.00	0.00	420.00 ✓		
	CONT EDUCATION OB										
16009 ✓		03/22/20	03/14/20	03/28/20		780.00	0.00	0.00	780.00 ✓		
	CONT EDUCATION										
Vendor Totals:						Number	Name	Gross	Discount	No-Pay	Net
						10720	LIFESOURCE EDUCATIONAL SRV LLC	1,980.00	0.00	0.00	1,980.00

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		
13961272 ✓		03/22/20	03/14/20	04/05/20		662.27	0.00	0.00	662.27		
	LEASE & RENTAL IT										
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								
M2178	MCKESSON MEDICAL SURGICAL INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
74008466 ✓		03/18/20	02/25/20	03/15/20		201.25	0.00	0.00	201.25 ✓		
	LAB SUPPLIES										
7419681		03/18/20	02/26/20	03/15/20		360.00	0.00	0.00	360.00 ✓		
	SUPPLIES LAB										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	M2178 MCKESSON MEDICAL SURGICAL INC					561.25	0.00	0.00	561.25		
Vendor#	Vendor Name	Class	Pay Code								
11141	MEDICAL DATA SYSTEMS, INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
97030 ✓		03/14/20	02/29/20	03/30/20		803.43	0.00	0.00	803.43		
	COLLECTION FEES BUS OFFI										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	11141 MEDICAL DATA SYSTEMS, INC.					803.43	0.00	0.00	803.43 ✓		
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		
2299188 ✓		03/15/20	03/07/20	04/06/20		248.08	0.00	0.00	248.08		
	SUPPLIES SURGERY										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	M2827 MEDIVATORS					248.08	0.00	0.00	248.08 ✓		
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		
1813665 ✓		03/18/20	03/02/20	04/01/20		471.94	0.00	0.00	471.94		
	SUPPLIES LAB										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	10182 MERCEDES MEDICAL					471.94	0.00	0.00	471.94 ✓		
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		
30094205648 ✓		03/09/20	02/29/20	03/30/20		159.31	0.00	0.00	159.31 ✓		
	SUPPLIES SURGERY										
30094208574 ✓		03/15/20	03/04/20	04/03/20		103.14	0.00	0.00	103.14 ✓		
	MAMMO SUPPLIES										
30094209169 ✓		03/15/20	03/07/20	04/06/20		360.15	0.00	0.00	360.15 ✓		
	SUPPLIES XRAY										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	M2659 MERRY X-RAY/SOURCEONE HEALTHCA					622.60	0.00	0.00	622.60		
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		
651361 ✓		03/22/20	03/16/20	04/05/20		7,321.11	0.00	0.00	7,321.11 ✓		

8614844 ✓	03/22/20 03/18/20 03/19/20	422.21	0.00	0.00	422.21 ✓				
PHARMACY DRUGS									
8614843 ✓	03/22/20 03/18/20 03/19/20	218.09	0.00	0.00	218.09 ✓				
PHARMACY DRUGS									
8614845 ✓	03/22/20 03/18/20 03/19/20	57.71	0.00	0.00	57.71 ✓				
PHARMACY DRUGS									
8621537 ✓	03/22/20 03/21/20 03/22/20	82.51	0.00	0.00	82.51 ✓				
PHARMACY DRUGS									
8621728 ✓	03/22/20 03/21/20 03/22/20	283.03	0.00	0.00	283.03 ✓				
PHARMACY DRUGS									
8621726 ✓	03/22/20 03/21/20 03/22/20	6.91	0.00	0.00	6.91 ✓				
PHARMACY DRUGS									
8621727 ✓	03/22/20 03/21/20 03/22/20	939.90	0.00	0.00	939.90 ✓				
PHARMACY DRUGS									
8621725 ✓	03/22/20 03/21/20 03/22/20	1,491.78	0.00	0.00	1,491.78 ✓				
PHARMACY DRUGS									
8621729 ✓	03/22/20 03/21/20 03/22/20	8.02	0.00	0.00	8.02 ✓				
PHARMACY DRUGS									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		10536	MORRIS & DICKSON CO, LLC	10,069.44	0.00	0.00	10,069.44		
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
20811		03/22/20	03/17/20	03/17/20		3,750.00	0.00	0.00	3,750.00
OUTSIDE SRV DIETITIAN									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net	<i>Put this one back on. look off per truck</i>	
		N1225	NUTRITION OPTIONS	3,750.00	0.00	0.00	3,750.00		
<i>Invoice corrected invoice not correct</i>									
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
827373536001 ✓		03/15/20	03/02/20	04/02/20		142.49	0.00	0.00	142.49
OFFICE SUPPLIES LAB									
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		O0920	OFFICE DEPOT	142.49	0.00	0.00	142.49 ✓		
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
2014971869 ✓		03/09/20	03/01/20	03/31/20		166.23	0.00	0.00	166.23 ✓
SUPPLIES DIETARY & SURGE									
2014971525 ✓		03/09/20	03/01/20	03/31/20		161.98	0.00	0.00	161.98 ✓
SUPPLIES SURGERY									
2014971168 ✓		03/09/20	03/01/20	03/31/20		56.99	0.00	0.00	56.99 ✓
CS INVENTORY									
2014944174 ✓		03/10/20	02/29/20	03/30/20		2,299.88	0.00	0.00	2,299.88 ✓
CS INVENTORY									
2014977900 ✓		03/10/20	03/01/20	03/31/20		3,529.58	0.00	0.00	3,529.58 ✓
CS INVENTORY									
2014977209 ✓		03/10/20	03/01/20	03/31/20		919.61	0.00	0.00	919.61 ✓
SUPPLIES VARIOUS DEPTS									
2014971932 ✓		03/10/20	03/01/20	03/31/20		57.07	0.00	0.00	57.07 ✓
CS INVENTORY									
2015059336 ✓		03/10/20	03/03/20	04/02/20		14.79	0.00	0.00	14.79 ✓

LEASE & RENTAL ER

Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11109	MINDRAY CAPITAL	7,321.11	0.00	0.00	7,321.11
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		
MARCH142016		03/18/20	03/14/20	03/14/20		37,968.45	0.00	0.00	37,968.45		
EMPLOYEE MEDICAL CLAIMS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10810	MMC EMPLOYEE BENEFIT PLAN	37,968.45	0.00	0.00	37,968.45 ✓
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		
8601218 ✓		03/18/20	03/15/20	03/16/20		11.09	0.00	0.00	11.09 ✓		
PHARMACY DRUGS											
8601216 ✓		03/18/20	03/15/20	03/16/20		1,715.49	0.00	0.00	1,715.49 ✓		
PHARMACY DRUGS											
8601217 ✓		03/18/20	03/15/20	03/16/20		67.55	0.00	0.00	67.55 ✓		
PHARMACY DRUGS											
8600894 ✓		03/18/20	03/15/20	03/16/20		292.40	0.00	0.00	292.40 ✓		
PHARMACY DRUGS											
8601215 ✓		03/18/20	03/15/20	03/16/20		197.41	0.00	0.00	197.41 ✓		
PHARMACY DRUGS											
8607075 ✓		03/18/20	03/16/20	03/17/20		26.06	0.00	0.00	26.06 ✓		
PHARMACY DRUGS											
8607077 ✓		03/18/20	03/16/20	03/17/20		537.31	0.00	0.00	537.31 ✓		
PHARMACY DRUGS											
8607072 ✓		03/18/20	03/16/20	03/17/20		69.09	0.00	0.00	69.09 ✓		
PHARMACY DRUGS											
8607074 ✓		03/18/20	03/16/20	03/17/20		272.46	0.00	0.00	272.46 ✓		
PHARMACY DRUGS											
8607076 ✓		03/18/20	03/16/20	03/17/20		44.39	0.00	0.00	44.39 ✓		
PHARMACY DRUGS											
8607071 ✓		03/18/20	03/16/20	03/17/20		1,599.14	0.00	0.00	1,599.14 ✓		
PHARMACY DRUGS											
8607073 ✓		03/18/20	03/16/20	03/17/20		173.85	0.00	0.00	173.85 ✓		
PHARMACY DRUGS											
8611350 ✓		03/22/20	03/17/20	03/18/20		268.66	0.00	0.00	268.66 ✓		
PHARMACY DRUGS											
8611672 ✓		03/22/20	03/17/20	03/18/20		306.21	0.00	0.00	306.21 ✓		
PHARMACY DRUGS											
8611673 ✓		03/22/20	03/17/20	03/18/20		66.37	0.00	0.00	66.37 ✓		
PHARMACY DRUGS											
8611670 ✓		03/22/20	03/17/20	03/18/20		278.52	0.00	0.00	278.52 ✓		
PHARMACY DRUGS											
8611671 ✓		03/22/20	03/17/20	03/18/20		73.77	0.00	0.00	73.77 ✓		
PHARMACY DRUGS											
8611674 ✓		03/22/20	03/17/20	03/18/20		22.20	0.00	0.00	22.20 ✓		
PHARMACY DRUGS											
8611351 ✓		03/22/20	03/17/20	03/18/20		537.31	0.00	0.00	537.31 ✓		
PHARMACY DRUGS											

CS INVENTORY											
2015058421	✓		03/10/20	03/03/20	04/02/20		22.73	0.00	0.00	22.73	✓
SUPPLIES CLINIC											
2015058780	✓		03/10/20	03/03/20	04/02/20		9.83	0.00	0.00	9.83	✓
CS INVENTORY											
2015063212	✓		03/10/20	03/03/20	04/02/20		1,138.01	0.00	0.00	1,138.01	✓
SUPPLIES VARIOUS DEPTS											
2014541997	✓		03/15/20	02/16/20	03/30/20		178.28	0.00	0.00	178.28	✓
SUPPLIES PT											
2014754218	✓		03/15/20	02/23/20	03/30/20		4,259.26	0.00	0.00	4,259.26	✓
CS INVENTORY											
2014972734	✓		03/15/20	03/01/20	03/31/20		-1,150.76	0.00	0.00	-1,150.76	✓
CREDIT CS INVENTORY											
2014972664	✓		03/15/20	03/01/20	03/31/20		71.02	0.00	0.00	71.02	✓
SUPPLIES LAB											
Vendor Totals Number Name							Gross	Discount	No-Pay	Net	
OM425 OWENS & MINOR							11,734.50	0.00	0.00	11,734.50	
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	
20803		03/18/20	03/15/20	03/15/20			1,140.00	0.00	0.00	1,140.00	
OUTSIDE SRV CLINIC											
Vendor Totals Number Name							Gross	Discount	No-Pay	Net	
11069 PABLO GARZA							1,140.00	0.00	0.00	1,140.00 ✓	
Vendor#	Vendor Name					Class	Pay Code				
11155	PARA ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
1319		03/14/20	03/01/20	03/31/20			2,000.00	0.00	0.00	2,000.00	
OUTSIDE SRV ADMIN											
Vendor Totals Number Name							Gross	Discount	No-Pay	Net	
11155 PARA							2,000.00	0.00	0.00	2,000.00 ✓	
Vendor#	Vendor Name					Class	Pay Code				
P1360	PETROLEUM SOLUTIONS,INC. ✓					M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
542078	✓	03/18/20	02/29/20	04/01/20			575.00	0.00	0.00	575.00	
OUTSIDE SRV MAINT											
Vendor Totals Number Name							Gross	Discount	No-Pay	Net	
P1360 PETROLEUM SOLUTIONS,INC.							575.00	0.00	0.00	575.00 ✓	
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	
A1551161	✓	03/14/20	02/29/20	03/30/20			393.90	0.00	0.00	393.90	
PHARMACY DRUGS											
Vendor Totals Number Name							Gross	Discount	No-Pay	Net	
10204 PHARMEDIUM SERVICES LLC							393.90	0.00	0.00	393.90 ✓	
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	
932501938	✓	03/18/20	03/03/20	04/02/20			101.40	0.00	0.00	101.40 ✓	
REPAIRS SURGERY											
Vendor Totals Number Name							Gross	Discount	No-Pay	Net	

	10032	PHILIPS HEALTHCARE					101.40	0.00	0.00	101.40
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
	049226 ✓		03/15/20	03/07/20	04/06/20		214.88	0.00	0.00	214.88
	SUPPLIES LAB									
	Vendor Total#	Number	Name				Gross	Discount	No-Pay	Net
		10541	PLATINUM CODE				214.88	0.00	0.00	214.88 ✓
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
	20812		03/22/20	02/29/20	03/30/20		731.00	0.00	0.00	731.00
	ADVERTISING									
	Vendor Total#	Number	Name				Gross	Discount	No-Pay	Net
		P2100	PORT LAVACA WAVE				731.00	0.00	0.00	731.00 ✓
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
	B19965 ✓		03/14/20	03/01/20	03/31/20		0.59	0.00	0.00	0.59 ✓
	SUPPLIES PLANT OPS									
	A19235 ✓		03/14/20	03/01/20	03/31/20		5.28	0.00	0.00	5.28 ✓
	SUPPLIES BIO MED									
	Vendor Total#	Number	Name				Gross	Discount	No-Pay	Net
		P2200	POWER ELECTRIC				5.87	0.00	0.00	5.87
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
	20813		03/22/20	02/29/20	03/30/20		3,975.00	0.00	0.00	3,975.00
	OUTSIDE SRV RESP CARE									
	Vendor Total#	Number	Name				Gross	Discount	No-Pay	Net
		P1725	PREMIER SLEEP DISORDERS CENTER				3,975.00	0.00	0.00	3,975.00 ✓
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
	20814		03/22/20	03/17/20	04/01/20		1,958.42	0.00	0.00	1,958.42
	EMPLOYEE PERSONAL INS									
	Vendor Total#	Number	Name				Gross	Discount	No-Pay	Net
		10326	PRINCIPAL LIFE				1,958.42	0.00	0.00	1,958.42 ✓
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
	20804		03/18/20	11/30/20	12/30/20		600.00	0.00	0.00	600.00 ✓
	PROF FEES XRAY									
	20805		03/18/20	02/10/20	03/11/20		120.00	0.00	0.00	120.00 ✓
	PROF FEES XRAY									
	Vendor Total#	Number	Name				Gross	Discount	No-Pay	Net
		R1268	RADIOLOGY UNLIMITED, PA				720.00	0.00	0.00	720.00
Vendor#	Vendor Name		Class		Pay Code					
10844	RECALL SECURE DESTRUCTION SRV ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
	4586020215 ✓		03/22/20	02/20/20	03/21/20		239.40	0.00	0.00	239.40 ✓
	OUTSIDE SRV ADMIN									

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10844	RECALL SECURE DESTRUCTION SRV				239.40	0.00	0.00	239.40
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-08953 ✓		03/14/20	03/01/20	03/31/20			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				4,050.00	0.00	0.00	4,050.00 ✓
Vendor#	Vendor Name			Class	Pay Code					
R1200	RED HAWK ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
228285 ✓		03/14/20	03/01/20	03/31/20			37.50	0.00	0.00	37.50
OUTSIDE SRV PLANT OPS										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		R1200	RED HAWK				37.50	0.00	0.00	37.50 ✓
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-10559 ✓		03/14/20	02/29/20	03/30/20			2,047.30	0.00	0.00	2,047.30
OUTSIDE SRV HIM										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10987	REVCYCLE+, INC.				2,047.30	0.00	0.00	2,047.30 ✓
Vendor#	Vendor Name			Class	Pay Code					
G0425	ROBERTS, ROBERTS & ODEFY, LLP ✓			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
145		03/14/20	02/29/20	03/30/20			4,070.00	0.00	0.00	4,070.00 ✓
LEGAL FEES ADMIN										
43		03/14/20	02/29/20	03/30/20			687.50	0.00	0.00	687.50 ✓
LEGAL FEES ADMIN										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		G0425	ROBERTS, ROBERTS & ODEFY, LLP				4,757.50	0.00	0.00	4,757.50
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
20817		03/22/20	03/21/20	03/22/20			81.76	0.00	0.00	81.76
TRAVEL EXPENSE ADMIN										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10927	ROSHANDA GRAY				81.76	0.00	0.00	81.76 ✓
Vendor#	Vendor Name			Class	Pay Code					
10746	RR DONNELLEY ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
239527567 ✓		03/18/20	03/02/20	04/01/20			1,237.21	0.00	0.00	1,237.21
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10746	RR DONNELLEY				1,237.21	0.00	0.00	1,237.21 ✓
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
6574-8 ✓		03/14/20	02/29/20	03/30/20			3.78	0.00	0.00	3.78
SUPPLIES PLANT OPS							3.49			3.49

6697-7	✓		03/18/20	03/03/20	04/02/20		50.99	0.00	0.00	50.99	✓		
SUPPLIES PLANT OPS													
6724-9	✓		03/18/20	03/04/20	04/03/20		152.97	0.00	0.00	152.97	✓		
SUPPLIES PLANT OPS													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							S1800	SHERWIN WILLIAMS	207.74	0.00	0.00	207.74	
Vendor#	Vendor Name					Class	Pay Code	207.45			207.45		
10995	SHIFTHOUND					✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
1610827	✓		03/14/20	02/29/20	03/30/20		425.00	0.00	0.00	425.00			
DUES & SUBSCRIPTIONS NURS													
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						
S2362	SMITH & NEPHEW					✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
92862020	✓		03/15/20	03/07/20	04/06/20		1,270.22	0.00	0.00	1,270.22			
SUPPLIES SURGERY													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							S2362	SMITH & NEPHEW	1,270.22	0.00	0.00	1,270.22	✓
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			
90018308	✓		02/29/20	02/29/20	03/30/20		-2,025.00	0.00	0.00	-2,025.00	✓		
BLOOD BANK CREDIT													
90018377	✓		02/29/20	02/29/20	03/30/20		4,848.00	0.00	0.00	4,848.00	✓		
BLOOD BANK SUPPLIES													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							S2400	SO TEX BLOOD & TISSUE CENTER	2,823.00	0.00	0.00	2,823.00	
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			
25622	✓		03/14/20	03/01/20	03/31/20		1,000.00	0.00	0.00	1,000.00			
DUES & SUBSCRIPTIONS ADMI													
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						
T2539	T-SYSTEM, INC					✓	W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
205EV-9819	✓		03/14/20	02/29/20	03/30/20		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						
U1460	THE UNIFORM CONNECTION					✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
191438	✓		03/22/20	01/05/20	02/05/20		102.00	0.00	0.00	102.00			
SUPPLIES CLINIC													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							U1460	THE UNIFORM CONNECTION	102.00	0.00	0.00	102.00	✓
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
20802		03/18/20	03/06/20	03/06/20		24.80	0.00	0.00	24.80
DUES & SUBSCRIPTIONS ADMI									
Vendor#	Vendor Name	Number	Name			Gross	Discount	No-Pay	Net
		V1050	THE VICTORIA ADVOCATE			24.80	0.00	0.00	24.80 ✓
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
141444084-301 ✓		02/24/20	02/04/20	04/04/20		2,140.32	0.00	0.00	2,140.32
PHARMACY DRUGS									
Vendor#	Vendor Name	Number	Name			Gross	Discount	No-Pay	Net
		10732	THERACOM, LLC			2,140.32	0.00	0.00	2,140.32 ✓
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
20266 ✓		03/18/20	03/07/20			520.40	0.00	0.00	520.40
CONTRACT NURSING MED SL									
Vendor#	Vendor Name	Number	Name			Gross	Discount	No-Pay	Net
		T0801	TLC STAFFING			520.40	0.00	0.00	520.40 ✓
Vendor#	Vendor Name			Class	Pay Code				
T3130	TRI-ANIM HEALTH SERVICES INC ✓				M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
62163544 ✓		03/18/20	03/03/20	04/02/20		168.00	0.00	0.00	168.00
SUPPLIES RESP CARE									
Vendor#	Vendor Name	Number	Name			Gross	Discount	No-Pay	Net
		T3130	TRI-ANIM HEALTH SERVICES INC			168.00	0.00	0.00	168.00 ✓
Vendor#	Vendor Name			Class	Pay Code				
11171	TRI-TECH FORENSICS, INC. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
124650 ✓		03/18/20	10/21/20	11/21/20		99.70	0.00	0.00	99.70
SUPPLIES ER									
Vendor#	Vendor Name	Number	Name			Gross	Discount	No-Pay	Net
		11171	TRI-TECH FORENSICS, INC.			99.70	0.00	0.00	99.70 ✓
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
8150722748 ✓		03/14/20	03/01/20	03/31/20		31.92	0.00	0.00	31.92 ✓
OUTSIDE SRR BIOMED									
8150722651 ✓		03/14/20	03/01/20	03/31/20		54.20	0.00	0.00	54.20 ✓
OUTSIDE SRV MAINT									
Vendor#	Vendor Name	Number	Name			Gross	Discount	No-Pay	Net
		U1054	UNIFIRST HOLDINGS			86.12	0.00	0.00	86.12
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
8400214722 ✓		03/14/20	03/01/20	03/31/20		165.55	0.00	0.00	165.55 ✓
LAUNDRY DIETARY									
8400214775 ✓		03/14/20	03/01/20	03/31/20		1,108.96	0.00	0.00	1,108.96 ✓
LAUNDRY HOUSEKEEPING									
8400214720 ✓		03/14/20	03/01/20	03/31/20		318.38	0.00	0.00	318.38 ✓
LAUNDRY HOUSEKEEPING									

8400214723	✓	03/14/20	03/01/20	03/31/20			153.69	0.00	0.00	153.69	✓		
LAUNDRY OB													
8400214724	✓	03/14/20	03/01/20	03/31/20			121.73	0.00	0.00	121.73	✓		
LAUNDRY HOUSEKEEPING													
8400214764	✓	03/14/20	03/01/20	03/31/20			175.27	0.00	0.00	175.27	✓		
LAUNDRY HOUSEKEEPING													
8400214721	✓	03/14/20	03/01/20	03/31/20			217.92	0.00	0.00	217.92	✓		
LAUNDRY HOUSEKEEPING													
8400215063	✓	03/18/20	03/04/20	04/03/20			531.23	0.00	0.00	531.23	✓		
LAUNDRY SURGERY													
8400215110	✓	03/18/20	03/04/20	04/03/20			1,011.19	0.00	0.00	1,011.19	✓		
LAUNDRY HOUSEKEEPING													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							U1064	UNIFIRST HOLDINGS INC	3,803.92	0.00	0.00	3,803.92	
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			
6767317	✓	03/14/20	03/01/20	03/31/20			69.95	0.00	0.00	69.95			
EMPLOYEE UNIFORMS													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							U1056	UNIFORM ADVANTAGE	69.95	0.00	0.00	69.95	✓
Vendor#	Vendor Name				Class	Pay Code							
10450	UNIT DRUG CO, LLC				✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
20375	✓	03/10/20	03/01/20	03/31/20			42.95	0.00	0.00	42.95			
SUPPLIES NURSERY													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10450	UNIT DRUG CO, LLC	42.95	0.00	0.00	42.95	✓
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			
9	✓	03/18/20	03/07/20	03/07/20			650.00	0.00	0.00	650.00	✓		
DUES & SUBCRIPTIONS CLINI													
20	✓	03/18/20	03/07/20	03/07/20			650.00	0.00	0.00	650.00	✓		
DUES & SUBCRIPTION HOSPI													
31	✓	03/18/20	03/08/20	03/08/20			650.00	0.00	0.00	650.00	✓		
DUES & SUBCRIPTIONS CLINI													
115	✓	03/18/20	03/08/20	03/08/20			650.00	0.00	0.00	650.00	✓		
DUES & SUBCRIPTIONS SURC													
128	✓	03/18/20	03/08/20	03/08/20			650.00	0.00	0.00	650.00	✓		
DUES & SUBCRIPTIONS CLINI													
35	✓	03/18/20	03/08/20	03/08/20			650.00	0.00	0.00	650.00	✓		
DUES & SUBCRIPTIONS CLINI													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10768	VICTORIA MEDICAL FOUNDATION	3,900.00	0.00	0.00	3,900.00	
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			
101922MBX		03/22/20	02/15/20	03/16/20			13.18	0.00	0.00	13.18	✓		
SUPPLIES XRAY													
2019BYQ14		03/22/20	02/16/20	03/17/20			53.02	0.00	0.00	53.02	✓		
SUIPLIES CLINIC & LAB													

4019MWM9Z	03/22/20 02/17/20 03/18/20	107.00	0.00	0.00	107.00	✓
SUPPLIES GOUNDS						
B01BY2AHK	03/22/20 02/24/20 03/25/20	187.76	0.00	0.00	187.76	✓
SUPPLIES MED/SURG & IV TH						
B01Q854SS	03/22/20 02/25/20 03/26/20	160.00	0.00	0.00	160.00	✓
SUPPLIES PLANT OPS						
G01DWGFWD	03/22/20 03/01/20 03/31/20	25.88	0.00	0.00	25.88	✓
SUPPLIES LAB						
P01G76W14	03/22/20 03/08/20 04/01/20	73.64	0.00	0.00	73.64	✓
SUPPLIES VARIOUS DEPTS						
S01H7QAHG	03/22/20 03/11/20 04/01/20	42.30	0.00	0.00	42.30	✓
SUPPLIES CLINIC						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	W1005 WALMART COMMUNITY	662.78	0.00	0.00	662.78	
Vendor#	Vendor Name	Class	Pay Code			
W1040	WATERMARK GRAPHICS INC ✓	M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross
109344 ✓		03/14/20	02/29/20	03/30/20		59.50
OUTSIDE SRV CLINIC						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	W1040 WATERMARK GRAPHICS INC	59.50	0.00	0.00	59.50	✓
Vendor#	Vendor Name	Class	Pay Code			
I1110	WERFEN USA LLC ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross
9110283285 ✓		03/18/20	03/07/20	04/06/20		40.00
LAB SUPPLIES						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	I1110 WERFEN USA LLC	40.00	0.00	0.00	40.00	✓
Vendor#	Vendor Name	Class	Pay Code			
Z1005	ZIMMER US, INC. ✓	W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross
302726-K01836 ✓		03/15/20	01/26/20	04/01/20		85.34
SUPPLIES SURGERY						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	Z1005 ZIMMER US, INC.	85.34	0.00	0.00	85.34	✓

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	243,672.87	0.00	0.00	243,672.87

Michael J. Pfeifer

Michael J. Pfeifer
Calhoun County Judge
Date: 3-27-16

APPROVED
ON

MAR 23 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK# 165609

to

#165713

pg 3 correction { <45.69>
+ 42.22

pg 12 correction { <3,750.00>

pg 15 correction { <3.78>
+ 3.49

239,919.11

pg 12
Add Back - { + 3,750.00
Invoice was corrected
243,669.11

8

RUN DATE:03/23/16
TIME:17:32

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/23/16 THRU 03/23/16

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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE

A/P	165609	03/23/16	347.43	FILTER TECHNOLOGY CO, INC
A/P	165610	03/23/16	2,352.61	BECTON, DICKINSON & CO (BD)
A/P	165611	03/23/16	101.40	PHILIPS HEALTHCARE
A/P	165612	03/23/16	153.00	ERBE USA INC SURGICAL SYSTEMS
A/P	165613	03/23/16	336.00	DSHS CENTRAL LAB MC2004
A/P	165614	03/23/16	471.94	MERCEDES MEDICAL
A/P	165615	03/23/16	393.90	PHARMEDIUM SERVICES LLC
A/P	165616	03/23/16	1,958.42	PRINCIPAL LIFE
A/P	165617	03/23/16	1,980.86	CENTURION MEDICAL PRODUCTS
A/P	165618	03/23/16	671.64	DEWITT POTH & SON
A/P	165619	03/23/16	42.95	UNIT DRUG CO, LLC
A/P	165620	03/23/16	805.27	GE HEALTHCARE IITS USA CORP
A/P	165621	03/23/16	777.42	BIOMET INC
A/P	165622	03/23/16	.00	VOIDED
A/P	165623	03/23/16	10,069.44	MORRIS & DICKSON CO, LLC
A/P	165624	03/23/16	214.88	PLATINUM CODE
A/P	165625	03/23/16	19,175.00	CPP WOUND CARE #28,LLC
A/P	165626	03/23/16	60.00	EMPLOYEE ACTIVITIES TEAM
A/P	165627	03/23/16	9,305.40	BKD, LLP
A/P	165628	03/23/16	1,115.55	GLOBAL EQUIPMENT CO. INC.
A/P	165629	03/23/16	495.00	FASTHEALTH CORPORATION
A/P	165630	03/23/16	1,980.00	LIFESOURCE EDUCATIONAL SRV LLC
A/P	165631	03/23/16	2,140.32	THERACOM, LLC
A/P	165632	03/23/16	1,237.21	RR DONNELLEY
A/P	165633	03/23/16	3,900.00	VICTORIA MEDICAL FOUNDATION
A/P	165634	03/23/16	8,166.37	CLINICAL PATHOLOGY
A/P	165635	03/23/16	37,968.45	MMC EMPLOYEE BENEFIT PLAN
A/P	165636	03/23/16	239.40	RECALL SECURE DESTRUCTION SRV
A/P	165637	03/23/16	489.32	GENESIS DIAGNOSTICS
A/P	165638	03/23/16	81.76	ROSHANDA GRAY
A/P	165639	03/23/16	6,145.37	BANK OF THE WEST
A/P	165640	03/23/16	1,400.00	ACUTE CARE INC
A/P	165641	03/23/16	138.19	ECOLAB EQUIPMENT CARE
A/P	165642	03/23/16	2,047.30	REVCYCLE+, INC.
A/P	165643	03/23/16	425.00	SHIFTHOUND
A/P	165644	03/23/16	7,682.67	CSI LEASING INC
A/P	165645	03/23/16	4,050.00	RECONDO
A/P	165646	03/23/16	1,159.75	BIRCH COMMUNICATIONS
A/P	165647	03/23/16	1,140.00	PABLO GARZA
A/P	165648	03/23/16	662.27	MARLIN BUSINESS BANK
A/P	165649	03/23/16	7,321.11	MINDRAY CAPITAL
A/P	165650	03/23/16	275.00	K & M SPORTS
A/P	165651	03/23/16	803.43	MEDICAL DATA SYSTEMS, INC.
A/P	165652	03/23/16	2,000.00	PARA
A/P	165653	03/23/16	99.70	TRI-TECH FORENSICS, INC.
A/P	165654	03/23/16	1,500.00	CARING ANGELS PROFESSIONAL SER
A/P	165655	03/23/16	218.70	GULF COAST HARDWARE / ACE
A/P	165656	03/23/16	2,913.92	AIRGAS-SOUTHWEST
A/P	165657	03/23/16	143.52	CAREFUSION
A/P	165658	03/23/16	11.09	AQUA BEVERAGE COMPANY

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MEMORIAL MEDICAL CENTER
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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165659	03/23/16	38.40	AUTO PARTS & MACHINE CO.
A/P	165660	03/23/16	54.38	BARD PERIPHERAL VASCULAR
A/P	165661	03/23/16	3,949.51	BAXTER HEALTHCARE CORP
A/P	165662	03/23/16	30,513.51	BECKMAN COULTER INC
A/P	165663	03/23/16	677.57	CABLE ONE
A/P	165664	03/23/16	230.00	CONMED CORPORATION
A/P	165665	03/23/16	7,204.00	EVIDENT
A/P	165666	03/23/16	59.20	DIVERSIFIED BUSINESS SYSTEMS
A/P	165667	03/23/16	12.20	DOWNTOWN CLEANERS
A/P	165668	03/23/16	77.22	FASTENAL COMPANY
A/P	165669	03/23/16	46.97	FEDERAL EXPRESS CORP.
A/P	165670	03/23/16	3,427.39	FISHER HEALTHCARE
A/P	165671	03/23/16	530.00	FORT BEND SERVICES, INC
A/P	165672	03/23/16	4,757.50	ROBERTS, ROBERTS & ODEFEY, LLP
A/P	165673	03/23/16	192.72	GULF COAST PAPER COMPANY
A/P	165674	03/23/16	528.00	HILL-ROM COMPANY, INC
A/P	165675	03/23/16	422.78	HOBART SALES & SERVICE
A/P	165676	03/23/16	24.93	INDEPENDENCE MEDICAL
A/P	165677	03/23/16	40.00	WERFEN USA LLC
A/P	165678	03/23/16	2,459.69	J & J HEALTH CARE SYSTEMS, INC
A/P	165679	03/23/16	68.94	JECKER FLOOR & GLASS
A/P	165680	03/23/16	1,435.76	KONICA MINOLTA MEDICAL IMAGING
A/P	165681	03/23/16	7.20	LANGUAGE LINE SERVICES
A/P	165682	03/23/16	561.25	MCKESSON MEDICAL SURGICAL INC
A/P	165683	03/23/16	622.60	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	165684	03/23/16	248.08	MEDIVATORS
A/P	165685	03/23/16	3,750.00	NUTRITION OPTIONS
A/P	165686	03/23/16	142.49	OFFICE DEPOT
A/P	165687	03/23/16	.00	VOIDED
A/P	165688	03/23/16	11,734.50	OWENS & MINOR
A/P	165689	03/23/16	575.00	PETROLEUM SOLUTIONS, INC.
A/P	165690	03/23/16	3,975.00	PREMIER SLEEP DISORDERS CENTER
A/P	165691	03/23/16	731.00	PORT LAVACA WAVE
A/P	165692	03/23/16	5.87	POWER ELECTRIC
A/P	165693	03/23/16	37.50	RED HAWK
A/P	165694	03/23/16	720.00	RADIOLOGY UNLIMITED, PA
A/P	165695	03/23/16	153.18	EVOQUA WATER TECHNOLOGIES LLC
A/P	165696	03/23/16	207.45	SHERWIN WILLIAMS
A/P	165697	03/23/16	1,000.00	SOUTHEAST TEXAS HEALTH SYS
A/P	165698	03/23/16	1,270.22	SMITH & NEPHEW
A/P	165699	03/23/16	2,823.00	SO TEX BLOOD & TISSUE CENTER
A/P	165700	03/23/16	403.06	DANETTE BETHANY
A/P	165701	03/23/16	520.40	TLC STAFFING
A/P	165702	03/23/16	4,555.00	T-SYSTEM, INC
A/P	165703	03/23/16	168.00	TRI-ANIM HEALTH SERVICES INC
A/P	165704	03/23/16	86.12	UNIFIRST HOLDINGS
A/P	165705	03/23/16	69.95	UNIFORM ADVANTAGE
A/P	165706	03/23/16	3,803.92	UNIFIRST HOLDINGS INC
A/P	165707	03/23/16	102.00	THE UNIFORM CONNECTION
A/P	165708	03/23/16	24.80	THE VICTORIA ADVOCATE
A/P	165709	03/23/16	662.78	WALMART COMMUNITY

RUN DATE:03/23/16
TIME:17:32

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/23/16 THRU 03/23/16

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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165710	03/23/16	59.50	WATERMARK GRAPHICS INC
A/P	165711	03/23/16	150.27	GRAINGER
A/P	165712	03/23/16	495.00	CARMEN C. ZAPATA-ARROYO
A/P	165713	03/23/16	85.34	ZIMMER US, INC.
TOTALS:			243,669.11	

PH



March 2016 Statement

Open Date: 02/04/2016 Closing Date: 03/04/2016

Visa® Business Card
MEMORIAL MEDICAL CNT
JERRY L PICKETT

New Balance \$4,276.44
Minimum Payment Due \$43.00
Payment Due Date 04/01/2016

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%.

Cardmember Service

BUS 30 ELN 68 3

Activity Summary

Previous Balance	+	\$3,054.08
Payments	-	\$3,054.08 ^{CR}
Other Credits		\$0.00
Purchases	+	\$4,276.44
Balance Transfers		\$0.00
Advances		\$0.00
Other Debits		\$0.00
Fees Charged		\$0.00
Interest Charged		\$0.00

New Balance = **\$4,276.44**

Past Due \$0.00

Minimum Payment Due \$43.00

Credit Line \$10,000.00

Available Credit \$5,723.56

Days in Billing Period 30

*Michelle JPK
4-7-16*

*MMC
will pay
By phone*

APPROVED
ON

MAR 24 2016

4,276.44

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Payment Options:



Mail payment coupon
with a check



Pay online at

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



24-Hour Cardmember Service:

- to pay by phone
- to change your address

Account Number	
Payment Due Date	4/01/2016
New Balance	\$4,276.44
Minimum Payment Due	\$43.00

Amount Enclosed \$ _____

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



March 2016 Statement 02/04/2016 - 03/04/2016

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.

An Easy Way to Monitor Your Spending. Now there's a more convenient way to view and monitor your credit card spending history. With ScoreBoard, you can securely view your transaction and spending information online. It's a valuable cardmember tool that will help you manage your expenses from the convenience of your computer! See enclosed insert for more details.

Imagine yourself cheering on the best athletes in the world at the Rio 2016 Olympic Games and Opening Ceremony, courtesy of Visa. Learn more about the Visa Rio 2016 Olympic Games-Themed Sweepstakes by visiting Visa.com/RioSweeps through April 30, 2016.

Pay taxes instantly with your credit card. It's a fast, easy and secure way to pay your federal and state taxes. You will receive an electronic receipt so you will know your payment was received on time. Learn more at officialpayments.com.

Now you can manage your personal credit card on the go. Download the new mobile app and put your personal account in the palm of your hand. You can; Check your balance, Pay your bill and Review recent activity! It's an easy way to keep your credit card account close at hand.

Transactions

Payments and Other Credits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
03/01	03/01		PAYMENT THANK YOU	\$3,054.08CR	
TOTAL THIS PERIOD				\$3,054.08CR	

Purchases and Other Debits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
02/04	02/02	5154	THE US CONSULTING GRP 856-692-8100 NJ	\$4,276.44	
TOTAL THIS PERIOD				\$4,276.44	

2016 Totals Year-to-Date

Total Fees Charged in 2016	\$0.00
Total Interest Charged in 2016	\$0.00

Company Approval

(This area for use by your company)

Signature/Approval: _____

Accounting Code: _____

Continued on Next Page

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
3/28/2016

Nursing Home	IBC Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	IGT Transfer-In	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	230,015.94	229,915.94	177,302.71	-	-	-	177,402.71	<u>177,302.71</u>

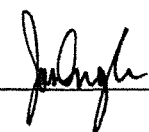
Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 10614
Account: 4257

Nursing Home	IBC Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	IGT Transfer-In	MMC Portion of IGT	Cantex Portion of IGT	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	59,484.83	59,384.83	301,421.14	-	-	-	301,521.14	<u>301,421.14</u>
Crescent	4588	24,919.08	24,819.08	241,119.68	-	-	-	241,219.68	<u>241,119.68</u>
Broodmoor	4596	94,347.79	94,247.79	1,097,550.81	-	-	-	1,097,650.81	<u>1,097,550.81</u>
Fort Bend	4618	32,252.28	32,152.28	60,160.19	-	-	-	60,260.19	<u>60,160.19</u>
									<u>1,700,251.82</u>

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

Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 10614
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.

Mud J Pfc
4-7-16

APPROVED
MAR 28 2016
COUNTY AUDITOR

BC Bank Activity
3/21/16 through 3/27/16

Ashford Gardens

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/22/2016	113105025	4553 142 ACH CREDIT RECEIVED		2,320.84	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/22/2016	113105025	4553 142 ACH CREDIT RECEIVED		23,392.51	675423	NOVITAS SOLUTION HCCLAIMPMT
3/22/2016	113105025	4553 142 ACH CREDIT RECEIVED		10,193.43	PN1326436189	Molina HC of TX Molina HC
3/23/2016	113105025	4553 142 ACH CREDIT RECEIVED		3,501.61	PN1326436189	Molina HC of TX Molina HC
3/23/2016	113105025	4553 495 OUTGOING MONEY TRANSFER	229,915.94			ASHFORD HEALTH CARE CENTER LTD
3/24/2016	113105025	4553 142 ACH CREDIT RECEIVED		6,274.93	675423	NOVITAS SOLUTION HCCLAIMPMT
3/24/2016	113105025	4553 142 ACH CREDIT RECEIVED		735.00	1.60322E+13	AMERIGROUP CORPO HCCLAIMPMT
3/25/2016	113105025	4553 301 COMMERCIAL DEPOSIT		119,413.51	0 14000118	
3/25/2016	113105025	4553 142 ACH CREDIT RECEIVED		11,470.88	675423	NOVITAS SOLUTION HCCLAIMPMT
			229,915.94	177,302.71		

iolera at West Houston

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/22/2016	113105025	4561 142 ACH CREDIT RECEIVED		517.05	1.60318E+13	AMERIGROUP CORPO HCCLAIMPMT
3/22/2016	113105025	4561 142 ACH CREDIT RECEIVED		253,735.10	676310	NOVITAS SOLUTION HCCLAIMPMT
3/23/2016	113105025	4561 495 OUTGOING MONEY TRANSFER	59,384.83			CANTEX HEALTH CARE CENTERS LLC
3/24/2016	113105025	4561 142 ACH CREDIT RECEIVED		17,754.47	676310	NOVITAS SOLUTION HCCLAIMPMT
3/24/2016	113105025	4561 142 ACH CREDIT RECEIVED		2,126.49	1.60322E+13	AMERIGROUP CORPO HCCLAIMPMT
3/25/2016	113105025	4561 301 COMMERCIAL DEPOSIT		27,288.03	0 14000155	
			59,384.83	301,421.14		

rescent

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/21/2016	113105025	4588 142 ACH CREDIT RECEIVED		64,726.23	676323	NOVITAS SOLUTION HCCLAIMPMT
3/21/2016	113105025	4588 142 ACH CREDIT RECEIVED		2,091.39	PN1669860425	Molina HC of TX Molina HC
3/22/2016	113105025	4588 142 ACH CREDIT RECEIVED		57,549.76	676323	NOVITAS SOLUTION HCCLAIMPMT
3/22/2016	113105025	4588 142 ACH CREDIT RECEIVED		12,182.44	PN1669860425	Molina HC of TX Molina HC
3/22/2016	113105025	4588 142 ACH CREDIT RECEIVED		10,131.83	1.60318E+13	AMERIGROUP CORPO HCCLAIMPMT
3/22/2016	113105025	4588 142 ACH CREDIT RECEIVED		2,302.58	1.60318E+13	AMERIGROUP CORPO HCCLAIMPMT
3/22/2016	113105025	4588 142 ACH CREDIT RECEIVED		2,801.96	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/23/2016	113105025	4588 495 OUTGOING MONEY TRANSFER	24,819.08			CANTEX HEALTH CARE CENTERS III
3/23/2016	113105025	4588 142 ACH CREDIT RECEIVED		14,163.38	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/23/2016	113105025	4588 142 ACH CREDIT RECEIVED		26,618.10	676323	NOVITAS SOLUTION HCCLAIMPMT
3/23/2016	113105025	4588 142 ACH CREDIT RECEIVED		5,686.29	1.60319E+13	AMERIGROUP CORPO HCCLAIMPMT
3/24/2016	113105025	4588 142 ACH CREDIT RECEIVED		8,394.68	676323	NOVITAS SOLUTION HCCLAIMPMT
3/24/2016	113105025	4588 142 ACH CREDIT RECEIVED		3,158.88	1.60322E+13	AMERIGROUP CORPO HCCLAIMPMT
3/25/2016	113105025	4588 142 ACH CREDIT RECEIVED		4,486.44	1.60323E+13	AMERIGROUP CORPO HCCLAIMPMT
3/25/2016	113105025	4588 301 COMMERCIAL DEPOSIT		23,909.75	0 14000148	
3/25/2016	113105025	4588 142 ACH CREDIT RECEIVED		2,915.97	676323	NOVITAS SOLUTION HCCLAIMPMT
			24,819.08	241,119.68		

roadmoor

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/21/2016	113105025	4596 142 ACH CREDIT RECEIVED		337,905.49	676357	NOVITAS SOLUTION HCCLAIMPMT
3/22/2016	113105025	4596 195 INCOMING MONEY TRANSFER		652,691.19		CANTEX HEALTH CARE CENTERS III
3/22/2016	113105025	4596 142 ACH CREDIT RECEIVED		1,220.99	PN1669860433	Molina HC of TX Molina HC
3/22/2016	113105025	4596 142 ACH CREDIT RECEIVED		3,272.49	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/22/2016	113105025	4596 142 ACH CREDIT RECEIVED		820.60	PN1669860433	Molina HC of TX Molina HC
3/23/2016	113105025	4596 142 ACH CREDIT RECEIVED		618.55	PN1669860433	Molina HC of TX Molina HC
3/23/2016	113105025	4596 495 OUTGOING MONEY TRANSFER	94,247.79			CANTEX HEALTH CARE CENTERS III
3/24/2016	113105025	4596 142 ACH CREDIT RECEIVED		43,614.42	676357	NOVITAS SOLUTION HCCLAIMPMT
3/25/2016	113105025	4596 142 ACH CREDIT RECEIVED		4,149.67	676357	NOVITAS SOLUTION HCCLAIMPMT
3/25/2016	113105025	4596 301 COMMERCIAL DEPOSIT		53,257.41	0 14000131	
			94,247.79	1,097,550.81		

ort Bend

			<u>Transfer-Out</u>	<u>Transfer-In</u>		
3/21/2016	113105025	4618 142 ACH CREDIT RECEIVED		13,712.31	PN1730577503	Molina HC of TX Molina HC
3/21/2016	113105025	4618 142 ACH CREDIT RECEIVED		1,663.40	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
3/22/2016	113105025	4618 142 ACH CREDIT RECEIVED		5,962.84	1.60318E+13	AMERIGROUP CORPO HCCLAIMPMT
3/23/2016	113105025	4618 142 ACH CREDIT RECEIVED		38,297.14	675663	NOVITAS SOLUTION HCCLAIMPMT
3/23/2016	113105025	4618 495 OUTGOING MONEY TRANSFER	32,152.28			CANTEX HEALTH CARE CENTERS III
3/25/2016	113105025	4618 142 ACH CREDIT RECEIVED		524.50	1.746E+13	AGING DISAB SVCS HCCLAIMPMT
			32,152.28	60,160.19		

Account Portfolio as of 03/28/2016 8:40:45 AM

Account Display
☐ Display By Account Type ☐ Display By Asset/Liability

Commercial Checking Accounts

Account Name	Account Number	Today's Beginning Balance	Available Balance
<u>Memorial Medical Center</u>	3387	\$25,069.79	\$25,069.79
<u>Memorial Medical Center</u>	4553	\$177,402.71	\$180,984.03
<u>Memorial Medical Center</u>	4561	\$301,521.14	\$301,521.14
<u>Memorial Medical Center</u>	4588	\$241,219.68	\$242,705.57
<u>Memorial Medical Center</u>	4596	\$1,097,650.81	\$1,097,650.81
<u>Memorial Medical Center</u>	4618	\$60,260.19	\$75,572.93
<u>Memorial Medical Center Operat</u>	0301	\$1,499,636.39	\$1,497,466.44
<u>County of Calhoun Indigent</u>	1101	\$3,131.38	\$2,997.35
Totals		\$3,405,892.09	\$3,423,968.06

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RUN DATE:03/28/16
TIME:13:29

MEMORIAL MEDICAL CENTER
CHECK REGISTER *and Payable List*
03/28/16 THRU 03/28/16

PAGE 1
GLCKREG

BANK--CHECK-----
CODE NUMBER DATE AMOUNT PAYEE

A/P	000747	03/28/16	2,046.16	MCKESSON
A/P	000748	03/28/16	497.85	MCKESSON
A/P	000749	03/28/16	1,192.28	MCKESSON
TOTALS:			3,736.29	

340 B Prescription Services

APPROVED
ON

MAR 28 2016

BY
CALHOUN COUNTY AUDITOR

Mural J RL
4-7-16

McKESSON

STATEMENT

As of: 03/25/2016

Page: 001

Company: 8000

HEB PHCY 0434/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 190813
Date: 03/25/2016

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

As of: 03/25/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813
Date: 03/25/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
03/21/2016	03/29/2016	7737250847 ✓	1000786172	115Invoice	4.32	215.81	✓	211.49	✓	7737250847	
03/21/2016	03/29/2016	7737250848 ✓	1000786798	115Invoice	3.38	169.07	✓	165.69	✓	7737250848	
03/21/2016	03/29/2016	7737250849 ✓	1000787224	115Invoice	21.21	1,060.41	✓	1,039.20	✓	7737250849	
03/22/2016	03/29/2016	7737478840 ✓	1000787632	115Invoice	3.51	175.33	✓	171.82	✓	7737478840	
03/23/2016	03/29/2016	7737700028 ✓	1000788327	115Invoice	0.21	10.27	✓	10.06	✓	7737700028	
03/23/2016	03/29/2016	7737700029 ✓	1000788327	115Invoice		0.08	✓	0.08	✓	7737700029	
03/24/2016	03/29/2016	7737916235 ✓	1000788932	115Invoice	2.71	135.71	✓	133.00	✓	7737916235	
03/25/2016	03/29/2016	7738119377 ✓	1000789543	115Invoice	1.48	73.97	✓	72.49	✓	7738119377	
03/25/2016	03/29/2016	7738119378 ✓	1000789543	115Invoice	4.95	247.28	✓	242.33	✓	7738119378	

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

TOTAL: Subtotals: 2,087.93 USD

Future Due: 0.00
If Paid By 03/29/2016,
Pay This Amount: 2,046.16 USD
Due If Paid On Time: USD 2,046.16
Disc lost if paid late: 41.77
Last Payment 618.81
If Paid After 03/29/2016,
Pay this Amount: 2,087.93 USD
Due If Paid Late: USD 2,087.93

APPROVED ON
MAR 28 2016
BY CT
CALHOUN COUNTY AUDITOR

McKESSON

STATEMENT

As of: 03/25/2016

Page: 001

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 256342
Date: 03/25/2016

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

As of: 03/25/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342
Date: 03/25/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
03/21/2016	03/29/2016	7737258890 ✓	3454581313	115Invoice	5.67	283.46		277.79 ✓		7737258890	
03/22/2016	03/29/2016	7737464133 ✓	3454581316	115Invoice	3.56	177.86		174.30 ✓		7737464133	
03/25/2016	03/29/2016	7738113944 ✓	3454581325	115Invoice	0.93	46.69		45.76 ✓		7738113944	

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

TOTAL:

Subtotals: 508.01 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 236.08
03/21/2016

If Paid By 03/29/2016,
Pay This Amount:

497.85 USD

Due If Paid On Time:

USD 497.85

Disc lost if paid late:

10.16

If Paid After 03/29/2016,
Pay this Amount:

508.01 USD

Due If Paid Late:

USD 508.01

[Handwritten signature]
3-28-16

ck# 748

APPROVED
ON

MAR 28 2016

BY *[Signature]*
CALHOUN COUNTY AUDITOR

McKESSON

STATEMENT

As of: 03/25/2016

Page: 001

Company: 8000

CVS PHCY 7006/MEMORIA PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 262252
Date: 03/25/2016

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

As of: 03/25/2016
Mail to:

Page: 001
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252
Date: 03/25/2016

PLEASE CHECK ANY
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
03/21/2016	03/29/2016	7737272691	1000786174	115Invoice	3.94	196.82		192.88	✓	7737272691	
03/21/2016	03/29/2016	7737272693	1000786800	115Invoice	8.47	423.69		415.22	✓	7737272693	
03/21/2016	03/29/2016	7737272695	1000787226	115Invoice	0.02	0.86		0.84	✓	7737272695	
03/21/2016	03/29/2016	7737272696	1000787226	115Invoice	5.49	274.68		269.19	✓	7737272696	
03/22/2016	03/29/2016	7737488257	1000787634	115Invoice	0.11	5.57		5.46	✓	7737488257	
03/23/2016	03/29/2016	7737702551	1000788329	115Invoice	0.72	35.81		35.09	✓	7737702551	
03/24/2016	03/29/2016	7737933492	1000788934	115Invoice	0.42	21.01		20.59	✓	7737933492	
03/25/2016	03/29/2016	7738126808	1000789545	115Invoice	5.16	258.17		253.01	✓	7738126808	

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

TOTAL:

Subtotals: 1,216.61 USD

Future Due: 0.00

Due If Paid On Time:

Past Due: 0.00

If Paid By 03/29/2016,
Pay This Amount:

1,192.28 USD

USD

1,192.28

Disc lost if paid late:

24.33

Last Payment 1,251.23
03/24/2016

If Paid After 03/29/2016,
Pay this Amount:

1,216.61 USD

Due If Paid Late:

USD

1,216.61

APPROVED
ON
MAR 28 2016
BY
CALHOUN COUNTY AUDITOR

APPROVED
ON

MAR 30 2016

03/29/2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Due Dates Through: 04/14/2016

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

A1100 ABBOTT LABORATORIES ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
605455367 ✓		03/15/20	03/08/20	04/07/20		153.28	0.00	0.00	153.28

SUPPLIES DIETARY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1100	ABBOTT LABORATORIES	153.28	0.00	0.00	153.28 ✓	

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
008663 ✓		03/25/20	03/22/20	03/22/20		32.95	0.00	0.00	32.95

SUPPLIES LAB

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1350	ACTION LUMBER	32.95	0.00	0.00	32.95 ✓	

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
9049143209 ✓		03/24/20	03/09/20	04/08/20		9.19	0.00	0.00	9.19 ✓

SUPPLIES CLINIC

9049233125 ✓		03/25/20	03/10/20	04/09/20		47.18	0.00	0.00	47.18 ✓
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SUPPLIES PLANT OPS

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS-SOUTHWEST	56.37	0.00	0.00	56.37	

Vendor# Vendor Name

Class Pay Code

A1690 ALCON LABORATORIES, INC. ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
20821860 ✓		03/24/20	03/14/20	04/13/20		1,564.50	0.00	0.00	1,564.50

SUPPLIES SURGERY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1690	ALCON LABORATORIES, INC.	1,564.50	0.00	0.00	1,564.50 ✓	

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-00040368 ✓		03/25/20	03/08/20	04/07/20		226.10	0.00	0.00	226.10

LAB SUPPLIES

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1746	ALPHA TEC SYSTEMS INC	226.10	0.00	0.00	226.10 ✓	

Vendor# Vendor Name

Class Pay Code

10419 AMBU INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
216055933 ✓		03/18/20	03/09/20	04/08/20		109.42	0.00	0.00	109.42

CS INVENTORY

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
10419	AMBU INC	109.42	0.00	0.00	109.42 ✓	

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
423296 ✓		03/25/20	03/14/20	04/13/20		570.00	0.00	0.00	570.00 ✓

DUES & SUBSCRIPTIONS LAB

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		10592	AMERICAN PROFICIENCY INSTITUTE				570.00	0.00	0.00	570.00
Vendor#	Vendor Name			Class	Pay Code					
A2600	AUTO PARTS & MACHINE CO. ✓			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
788860 ✓		03/25/20	03/08/20	04/07/20			43.80	0.00	0.00	43.80
SUPPLIES PLANT OPS										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		A2600	AUTO PARTS & MACHINE CO.				43.80	0.00	0.00	43.80 ✓
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
50335911 ✓		03/24/20	03/10/20	04/09/20			174.13	0.00	0.00	174.13 ✓
CS INVENTORY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1075	BAXTER HEALTHCARE CORP				174.13	0.00	0.00	174.13
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
6003796961 ✓		03/24/20	03/10/20	04/09/20			1,033.44	0.00	0.00	1,033.44 ✓
SUPPLIES CT SCAN										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		M2485	BAYER HEALTHCARE				1,033.44	0.00	0.00	1,033.44
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
105504029 ✓		03/28/20	03/08/20	04/07/20			5,155.82	0.00	0.00	5,155.82 ✓
LAB SUPPLIES										
105503604 ✓		03/28/20	03/08/20	04/07/20			171.22	0.00	0.00	171.22 ✓
SUPPLIES LAB										
5347910 ✓		03/28/20	03/12/20	04/11/20			3,933.48	0.00	0.00	3,933.48 ✓
LEASE & MAINT CONTR LAB										
5347929 ✓		03/28/20	03/12/20	04/11/20			4,233.46	0.00	0.00	4,233.46 ✓
LEASE & MAINT CONTR LAB										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC				13,493.98	0.00	0.00	13,493.98
Vendor#	Vendor Name			Class	Pay Code					
B1655	BOSTON SCIENTIFIC CORPORATION ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
948959360 ✓		03/24/20	03/14/20	04/13/20			218.00	0.00	0.00	218.00 ✓
SUPPLIES SURGERY										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1655	BOSTON SCIENTIFIC CORPORATION				218.00	0.00	0.00	218.00
Vendor#	Vendor Name			Class	Pay Code					
C0400	C-D ELECTRIC ✓			M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
CIT20615 ✓		03/24/20	03/15/20	04/14/20			675.00	0.00	0.00	675.00
SUPPLIES PLANT OPS										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		C0400	C-D ELECTRIC				675.00	0.00	0.00	675.00 ✓
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		
20829		03/28/20	03/20/20	03/20/20		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					
C1992	CDW GOVERNMENT, INC. ✓				M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
CHZ2439 ✓		03/18/20	03/08/20	04/07/20		155.62	0.00	0.00	155.62	✓	
	SUPPLIES NURS ADMIN										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	C1992 CDW GOVERNMENT, INC.					155.62	0.00	0.00	155.62		
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		
91971934 ✓		03/15/20	03/09/20	04/08/20		312.80	0.00	0.00	312.80	✓	
	CS INVENTORY & XRAY SUPP										
91971933 ✓		03/15/20	03/09/20	04/08/20		212.49	0.00	0.00	212.49	✓	
	CS INVENTORY										
91973355 ✓		03/18/20	03/09/20	04/08/20		26.85	0.00	0.00	26.85	✓	
	CS INVENTORY										
91975061 ✓		03/24/20	03/14/20	04/13/20		235.00	0.00	0.00	235.00	✓	
	SUPPLIES RECOVERY										
91839557 ✓		03/29/20	08/24/20	09/23/20		374.72	0.00	0.00	374.72	✓	
	CS INVENTORY										
91881105 ✓		03/29/20	10/23/20	11/22/20		-191.84	0.00	0.00	-191.84	✓	
	CREDIT TO CS INVENTORY										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	10350 CENTURION MEDICAL PRODUCTS					970.02	0.00	0.00	970.02		
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		
2210205 ✓		03/25/20	02/11/20	02/21/20		283.50	0.00	0.00	283.50	✓	
	SUPPLIES DIETARY										
2243274 ✓		03/25/20	03/11/20	04/10/20		146.78	0.00	0.00	146.78	✓	
	SUPPLIES PLANT OPS										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	C1410 CERTIFIED LABORATORIES					430.28	0.00	0.00	430.28		
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		
20820		03/25/20	03/17/20	04/05/20		525.93	0.00	0.00	525.93	✓	
	WATER & SEWER CLINIC										
20822		03/25/20	03/17/20	04/05/20		3,694.92	0.00	0.00	3,694.92	✓	
	WATER & SEWER PLANT OPS										
20821		03/25/20	03/17/20	04/05/20		299.54	0.00	0.00	299.54	✓	
	WATER & SEWER PLANT OPS										
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net		
	C1730 CITY OF PORT LAVACA					4,520.39	0.00	0.00	4,520.39		
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		
467148-0 ✓		03/15/20	03/09/20	04/08/20		215.77	0.00	0.00	215.77 ✓		
	CS INVENTORY										
467087-0 ✓		03/18/20	03/08/20	04/07/20		40.02	0.00	0.00	40.02 ✓		
	OFFICE SUPPLIES SURGERY										
467023-0 ✓		03/18/20	03/08/20	04/07/20		51.98	0.00	0.00	51.98 ✓		
	OFFICE SUPPLIES HR										
467481-0 ✓		03/18/20	03/14/20	04/13/20		305.98	0.00	0.00	305.98 ✓		
	CS INVENTORY & DIETARY SI										
467337-0 ✓		03/24/20	03/10/20	04/09/20		13.72	0.00	0.00	13.72 ✓		
	SUPPLIES DIETARY										
467451-0 ✓		03/24/20	03/11/20	04/10/20		13.00	0.00	0.00	13.00 ✓		
	OFFICE SUPPLIES MED SURG										
467424-0 ✓		03/24/20	03/11/20	04/10/20		75.69	0.00	0.00	75.69 ✓		
	OFFICE SUPPLIES HIM										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10368	DEWITT POTH & SON	716.16	0.00	0.00	716.16
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		
8570 ✓		03/15/20	03/10/20	04/09/20		281.46	0.00	0.00	281.46		
	FORM SUPPLIES & DIETARY S										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						D1752	DLE PAPER & PACKAGING	281.46	0.00	0.00	281.46 ✓
Vendor#	Vendor Name				Class	Pay Code					
10842	DOOR CONTROL SERVICES, INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
SMINV82150 ✓		03/25/20	03/09/20	04/08/20		3,121.28	0.00	0.00	3,121.28		
	FRONT DOOR REPAIRS										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10842	DOOR CONTROL SERVICES, INC	3,121.28	0.00	0.00	3,121.28 ✓
Vendor#	Vendor Name				Class	Pay Code					
E0500	EAGLE FIRE & SAFETY INC ✓				M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
58938 ✓		03/29/20	02/26/20	03/27/20		956.25	0.00	0.00	956.25		
	OUTSIDE SRV PLANT OPS										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						E0500	EAGLE FIRE & SAFETY INC	956.25	0.00	0.00	956.25 ✓
Vendor#	Vendor Name				Class	Pay Code					
10977	ECOLAB EQUIPMENT CARE ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
94184024 ✓		03/18/20	03/08/20	04/07/20		536.65	0.00	0.00	536.65		
	REPAIR TO MEALS ON WHEEL										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10977	ECOLAB EQUIPMENT CARE	536.65	0.00	0.00	536.65 ✓
Vendor#	Vendor Name				Class	Pay Code					
E1268	ENTERPRISE RENT-A-CAR ✓				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
8857706 ✓		03/22/20	03/15/20	04/14/20		178.61	0.00	0.00	178.61 ✓		
	TRAVEL EXPENSE CLINIC										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net

	E1268	ENTERPRISE RENT-A-CAR					178.61	0.00	0.00	178.61
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
	A1603071378	✓	03/18/20	03/07/20	04/07/20		16,094.00	0.00	0.00	16,094.00 ✓
	SOFTWARE MAINT									
	T1603091378	✓	03/24/20	03/09/20	04/08/20		14,009.86	0.00	0.00	14,009.86 ✓
	OUTSIDE SRV SOFTWARE EX									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C2510	EVIDENT					30,103.86	0.00	0.00	30,103.86
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
	20828		03/28/20	03/20/20	03/20/20		75.00	0.00	0.00	75.00 ✓
	EMPLOYEES PERSONAL INVE									
	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
	9725291	✓	03/25/20	03/11/20	04/10/20		1,303.40	0.00	0.00	1,303.40 ✓
	LAB SUPPLIES									
	9885232	✓	03/25/20	03/15/20	04/14/20		137.62	0.00	0.00	137.62 ✓
	LAB SUPPLIES									
	9337023	✓	03/25/20	03/07/20	04/06/20		137.56	0.00	0.00	137.56 ✓
	LAB SUPPLIES									
	9442944	✓	03/25/20	03/08/20	04/07/20		407.35	0.00	0.00	407.35 ✓
	LAB SUPPLIES									
	9549566	✓	03/25/20	03/09/20	04/08/20		2,049.66	0.00	0.00	2,049.66 ✓
	LAB SUPPLIES									
	9637727	✓	03/25/20	03/10/20	04/09/20		201.84	0.00	0.00	201.84 ✓
	LAB SUPPLIES									
	9885240	✓	03/25/20	03/15/20	04/14/20		354.04	0.00	0.00	354.04 ✓
	LAB SUPPLIES									
	9967536	✓	03/25/20	03/16/20	04/14/20		320.64	0.00	0.00	320.64 ✓
	LAB SUPPLIES									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	F1400	FISHER HEALTHCARE					4,912.11	0.00	0.00	4,912.11
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
	4393	✓	03/25/20	03/13/20	04/12/20		106.93	0.00	0.00	106.93 ✓
	REPAIRS TO INSTRUMENT SL									
	Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10678	FIVE STAR STERILIZER SERVICES					106.93	0.00	0.00	106.93
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
	76877	✓	03/29/20	02/26/20	03/27/20		3,932.00	0.00	0.00	3,932.00 ✓
	PROF FEES PT									
	78429	✓	03/29/20	03/11/20	04/10/20		4,289.38	0.00	0.00	4,289.38 ✓

		PROF FEES PT							
78439 ✓		03/29/20	03/11/20	04/10/20		4,527.13	0.00	0.00	4,527.13 ✓
		PROF FEES PT							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11078	FUSION MEDICAL STAFFING, LLC			12,748.51	0.00	0.00	12,748.51
Vendor#	Vendor Name			Class	Pay Code				
G0321	GALLS, LLC ✓			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
004991693 ✓		03/28/20	03/02/20	04/01/20		45.98	0.00	0.00	45.98 ✓
		EMPLOYEE UNIFORMS							
005025819 ✓		03/28/20	03/09/20	04/08/20		103.98	0.00	0.00	103.98 ✓
		EMPLOYEE UNIFORMS							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		G0321	GALLS, LLC			149.96	0.00	0.00	149.96
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
100232 ✓		03/18/20	03/08/20	04/07/20		20.97	0.00	0.00	20.97 ✓
		SUPPLIES PLANT OPS							
100233 ✓		03/18/20	03/08/20	04/07/20		209.98	0.00	0.00	209.98 ✓
		SUPPLIES PT							
100322 ✓		03/18/20	03/11/20	04/10/20		-44.99	0.00	0.00	-44.99 ✓
		CREDIT LAB SUPPLIES							
100248 ✓		03/24/20	03/09/20	04/08/20		6.98	0.00	0.00	6.98 ✓
		SUPPLIES PLANT OPS							
100356 ✓		03/24/20	03/14/20	04/13/20		6.99	0.00	0.00	6.99 ✓
		SUPPLIES PLANT OPS							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		A1292	GULF COAST HARDWARE / ACE			199.93	0.00	0.00	199.93
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
1102530 ✓		03/15/20	03/08/20	04/07/20		413.60	0.00	0.00	413.60 ✓
		HOUSEKEEPING & DIETARY S							
1102512 ✓		03/18/20	03/08/20	04/07/20		27.75	0.00	0.00	27.75 ✓
		SUPPLIES HOUSEKEEPING							
1102513 ✓		03/18/20	03/08/20	04/07/20		46.15	0.00	0.00	46.15 ✓
		SUPPLIES HOUSEKEEPING							
1106106 ✓		03/18/20	03/15/20	04/14/20		95.46	0.00	0.00	95.46 ✓
		SUPPLIS HOUSEKEEPING							
1106119 ✓		03/18/20	03/15/20	04/14/20		231.54	0.00	0.00	231.54 ✓
		SUPPLIES HOUSEKEEPING							
1106108 ✓		03/24/20	03/15/20	04/14/20		65.20	0.00	0.00	65.20 ✓
		SUPPLIES HOUSEKEEPING							
1106104 ✓		03/24/20	03/15/20	04/14/20		184.98	0.00	0.00	184.98 ✓
		SUPPLIES MED SURG							
1102521 ✓		03/25/20	03/08/20	04/07/20		735.94	0.00	0.00	735.94 ✓
		SUPPLIES HOUSEKEEPING							
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		G1210	GULF COAST PAPER COMPANY			1,800.62	0.00	0.00	1,800.62
Vendor#	Vendor Name			Class	Pay Code				
11095	GULF COAST SCIENTIFIC ✓								

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
72098 ✓		03/25/20	03/10/20	04/09/20			269.71	0.00	0.00	269.71 ✓		
LAB SUPPLIES												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							11095	GULF COAST SCIENTIFIC	269.71	0.00	0.00	269.71
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		
568714 ✓		03/25/20	02/19/20	03/10/20			11.88	0.00	0.00	11.88 ✓		
FOOD SUPPLIES DIETARY												
577407 ✓		03/25/20	02/24/20	03/15/20			38.70	0.00	0.00	38.70 ✓		
FOOD SUPPLIES DIETARY												
578985 ✓		03/25/20	02/25/20	03/16/20			70.27	0.00	0.00	70.27 ✓		
FOOD SUPPLIES DIETARY												
589435 ✓		03/25/20	03/02/20	03/22/20			39.17	0.00	0.00	39.17 ✓		
FOOD SUPPLIES DIETARY												
592612 ✓		03/25/20	03/04/20	03/24/20			78.02	0.00	0.00	78.02 ✓		
FOOD SUPPLIES DIETARY												
596236 ✓		03/25/20	03/06/20	03/26/20			26.00	0.00	0.00	26.00 ✓		
FOOD SUPPLIES DIETARY												
601607 ✓		03/25/20	03/09/20	03/29/20			32.43	0.00	0.00	32.43 ✓		
FOOD SUPPLIES DIETARY												
601624 ✓		03/25/20	03/09/20	03/29/20			11.80	0.00	0.00	11.80 ✓		
FOOD SUPPLIES DIETARY												
604895 ✓		03/25/20	03/11/20	03/31/20			72.85	0.00	0.00	72.85 ✓		
FOOD SUPPLIES DIETARY												
615735 ✓		03/25/20	03/17/20	04/06/20			48.08	0.00	0.00	48.08 ✓		
FOOD SUPPLIES DIETARY												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							H0030	H E BUTT GROCERY	429.20	0.00	0.00	429.20
Vendor#	Vendor Name				Class	Pay Code						
H1661	HFMA ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
20818		03/25/20	03/22/20	03/22/20			315.00	0.00	0.00	315.00 ✓		
DUES & SUBCRIPTIONS ADMI												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							H1661	HFMA	315.00	0.00	0.00	315.00
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		
7791987 ✓		03/24/20	03/11/20	04/10/20			663.62	0.00	0.00	663.62 ✓		
SUPPLIES MAMMO												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							H0416	HOLOGIC INC	663.62	0.00	0.00	663.62
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		
1529 ✓		03/29/20	02/29/20	03/30/20			13,851.23	0.00	0.00	13,851.23 ✓		
OUTSIDE SRV PHARMACY												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10922	HUNTER PHARMACY SERVICES	13,851.23	0.00	0.00	13,851.23

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	
39275626 ✓		03/15/20	03/09/20	04/08/20		121.73	0.00	0.00	121.73	✓
	CS INVENTORY & PT SUPPLY									
39338965 ✓		03/24/20	03/14/20	04/13/20		26.30	0.00	0.00	26.30	✓
	CS INVENTORY									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	I0415 INDEPENDENCE MEDICAL					148.03	0.00	0.00	148.03	
Vendor#	Vendor Name	Class	Pay Code							
11173	INDUSTRIAL CHEM LABS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
194602 ✓		03/29/20	03/10/20	04/09/20		149.54	0.00	0.00	149.54	
	SUPPLIES PLANT OPS									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11173 INDUSTRIAL CHEM LABS					149.54	0.00	0.00	149.54	✓
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	
1261797 ✓		03/24/20	03/10/20	04/09/20		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	
916166921 ✓		03/18/20	03/09/20	04/08/20		42.00	0.00	0.00	42.00	✓
	SUPPLIES SURGERY									
916154695 ✓		03/25/20	03/08/20	04/07/20		866.57	0.00	0.00	866.57	✓
	BLOOD BANK SUPPLIES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	J0150 J & J HEALTH CARE SYSTEMS, INC					908.57	0.00	0.00	908.57	
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	
20819		03/25/20	03/07/20	03/07/20		122.82	0.00	0.00	122.82	
	FOOD SUPPLIES DIETARY									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	11098 JERI DAVIS					122.82	0.00	0.00	122.82	✓
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	
20829		03/28/20	03/20/20	03/20/20		932.50	0.00	0.00	932.50	
	EMPLOYEE PERSONAL INVES									
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
	10972 M G TRUST					932.50	0.00	0.00	932.50	✓
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	
M0036253 ✓		03/25/20	02/18/20	03/17/20		913.95	0.00	0.00	913.95	✓
	SUPPLIES ER									
M0045687 ✓		03/25/20	03/15/20	04/14/20		166.14	0.00	0.00	166.14	✓

LAB SUPPLIES

Vendor#	Vendor Name	Class	Pay Code	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
Vendor Totals														
	M1511	MARKETLAB, INC									1,080.09	0.00	0.00	1,080.09
M1500	MARKS PLUMBING PARTS	M												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
	INV001500442	✓	03/24/20	03/10/20	04/09/20			38.20	0.00	0.00	38.20			
SUPPLIES PLANT OPS														
Vendor Totals														
	M1500	MARKS PLUMBING PARTS						38.20	0.00	0.00	38.20			✓
M1950	MARTIN PRINTING CO	W												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
	68432	✓	03/25/20	03/04/20	04/03/20			41.33	0.00	0.00	41.33			✓
SUPPLIES CLINIC														
Vendor Totals														
	M1950	MARTIN PRINTING CO						41.33	0.00	0.00	41.33			
M2178	MCKESSON MEDICAL SURGICAL INC													
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
	74729511	✓	03/25/20	03/08/20	04/07/20			622.67	0.00	0.00	622.67			✓
LAB SUPPLIES														
	74806803	✓	03/25/20	03/09/20	04/08/20			132.45	0.00	0.00	132.45			✓
LAB SUPPLIES														
	75061502	✓	03/25/20	03/15/20	04/14/20			153.15	0.00	0.00	153.15			✓
LAB & BLOOD BANK SUPPLIES														
Vendor Totals														
	M2178	MCKESSON MEDICAL SURGICAL INC						908.27	0.00	0.00	908.27			
M2470	MEDLINE INDUSTRIES INC	M												
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
	1095546296	✓	03/24/20	03/11/20	04/10/20			23.85	0.00	0.00	23.85			
SUPPLIES SURGERY														
Vendor Totals														
	M2470	MEDLINE INDUSTRIES INC						23.85	0.00	0.00	23.85			✓
10963	MEMORIAL MEDICAL CLINIC													
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
	20827		03/28/20	03/20/20	03/20/20			80.00	0.00	0.00	80.00			✓
EMPLOYEE CLINIC CO PAYS														
Vendor Totals														
	10963	MEMORIAL MEDICAL CLINIC						80.00	0.00	0.00	80.00			✓
10182	MERCEDES MEDICAL													
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
	1815193	✓	03/25/20	03/08/20	04/07/20			471.94	0.00	0.00	471.94			✓
LAB SUPPLIES														
Vendor Totals														
	10182	MERCEDES MEDICAL						471.94	0.00	0.00	471.94			
M2659	MERRY X-RAY/SOURCEONE HEALTHCA	M												

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
30094210697	✓	03/15/20	03/09/20	04/08/20		1,636.81	0.00	0.00	1,636.81		
SUPPLIES XRAY											
30094213943	✓	03/24/20	03/15/20	04/14/20		159.26	0.00	0.00	159.26		
SUPPLIES SURGERY											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						M2659	MERRY X-RAY/SOURCEONE HEALTHCA	1,796.07	0.00	0.00	1,796.07
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		
20844		03/29/20	03/28/20	04/01/20		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					
M2621	MMC AUXILIARY GIFT SHOP				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
20830		03/28/20	03/20/20	03/20/20		160.21	0.00	0.00	160.21		
EMPLOYEES GIFT SHOP PUR											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						M2621	MMC AUXILIARY GIFT SHOP	160.21	0.00	0.00	160.21
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		
MARCH212016		03/25/20	03/21/20	03/21/20		21,290.72	0.00	0.00	21,290.72		
EMPLOYEE MEDICAL CLAIMS											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						10810	MMC EMPLOYEE BENEFIT PLAN	21,290.72	0.00	0.00	21,290.72
Vendor#	Vendor Name				Class	Pay Code					
M3331	MOORE MEDICAL LLC				W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
989951251		03/18/20	03/09/20	03/18/20		47.80	0.00	0.00	47.80		
SUPPLIES SPECIALTY CLINIC											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						M3331	MOORE MEDICAL LLC	47.80	0.00	0.00	47.80
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		
8630671		03/28/20	03/23/20	03/24/20		268.16	0.00	0.00	268.16		
PHARMACY DRUGS											
8632701		03/28/20	03/23/20	03/24/20		1.90	0.00	0.00	1.90		
PHARMACY DRUGS											
8632700		03/28/20	03/23/20	03/24/20		1,158.71	0.00	0.00	1,158.71		
PHARMACY DRUGS											
8633074		03/28/20	03/23/20	03/24/20		3,951.39	0.00	0.00	3,951.39		
PHARMACY DRUGS											
8633075		03/28/20	03/23/20	03/24/20		100.98	0.00	0.00	100.98		
PHARMACY DRUGS											
8637809		03/29/20	03/24/20	03/25/20		3,059.43	0.00	0.00	3,059.43		
PHARMACY DRUGS											
7508		03/29/20	03/24/20	03/25/20		-43.53	0.00	0.00	-43.53		
PHARMACY CREDIT											

8640306	✓	03/29/20	03/24/20	03/25/20			1,022.90	0.00	0.00	1,022.90	✓
		PHARMACY DRUGS									
8637810	✓	03/29/20	03/24/20	03/25/20			58.55	0.00	0.00	58.55	✓
		PHARMACY DRUGS									
7643	✓	03/29/20	03/24/20	03/25/20			-316.91	0.00	0.00	-316.91	✓
		PHARMACY DRUGS									
8637807	✓	03/29/20	03/24/20	03/25/20			121.66	0.00	0.00	121.66	✓
		PHARMACY DRUGS									
8637808	✓	03/29/20	03/24/20	03/25/20			230.82	0.00	0.00	230.82	✓
		PHARMACY DRUGS									
8642651	✓	03/29/20	03/25/20	03/26/20			171.17	0.00	0.00	171.17	✓
		PHARMACY DRUGS									
8642550	✓	03/29/20	03/25/20	03/26/20			14.14	0.00	0.00	14.14	✓
		PHARMACY DRUGS									
8642650	✓	03/29/20	03/25/20	03/26/20			3,923.99	0.00	0.00	3,923.99	✓
		PHARMACY DRUGS									
8642649	✓	03/29/20	03/25/20	03/26/20			152.45	0.00	0.00	152.45	✓
		PHARMACY DRUGS									
8641062	✓	03/29/20	03/25/20	03/26/20			3,274.46	0.00	0.00	3,274.46	✓
		PHARMACY DRUGS									
Vendor Totals							Gross	Discount	No-Pay	Net	
		10536	MORRIS & DICKSON CO, LLC				17,150.27	0.00	0.00	17,150.27	
Vendor#	Vendor Name		Class		Pay Code						
11064	MSDSOONLINE, INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
137534	✓	03/25/20	03/11/20	04/10/20			3,849.00	0.00	0.00	3,849.00	✓
	DUES & SUBSCRIPTIONS ADMI										
Vendor Totals							Gross	Discount	No-Pay	Net	
		11064	MSDSOONLINE, INC				3,849.00	0.00	0.00	3,849.00	
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	
828680743001	✓	03/18/20	03/09/20	04/08/20			61.74	0.00	0.00	61.74	✓
	SUPPLIES XRAY										
827984801001	✓	03/28/20	03/07/20	04/10/20			149.14	0.00	0.00	149.14	✓
	LAB TONER										
82798480001	✓	03/28/20	03/16/20	03/16/20			-142.49	0.00	0.00	-142.49	✓
	LAB SUPPLY CREDIT										
Vendor Totals							Gross	Discount	No-Pay	Net	
		O0920	OFFICE DEPOT				68.39	0.00	0.00	68.39	
Vendor#	Vendor Name		Class		Pay Code						
O1660	ORIENTAL TRADING CO INC ✓		M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
676647632-01	✓	03/24/20	03/09/20	04/08/20			82.95	0.00	0.00	82.95	✓
	SUPPLIES FOR RECOVERY										
Vendor Totals							Gross	Discount	No-Pay	Net	
		O1660	ORIENTAL TRADING CO INC				82.95	0.00	0.00	82.95	
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	
2015184957	✓	03/15/20	03/08/20	04/07/20			11.76	0.00	0.00	11.76	✓

CS INVENTORY												
2015183189	✓		03/15/20	03/08/20	04/07/20		293.99	0.00	0.00	293.99	✓	
SUPPLIES SURGERY												
2015189860	✓		03/15/20	03/08/20	04/07/20		987.17	0.00	0.00	987.17	✓	
SUPPLIES VARIOUS DEPTS												
2015188759	✓		03/15/20	03/08/20	04/07/20		1,624.75	0.00	0.00	1,624.75	✓	
SUPPLIES VARIOUS DEPTS												
2015190714	✓		03/15/20	03/08/20	04/07/20		1,896.23	0.00	0.00	1,896.23	✓	
SUPPLIES VARIOUS DEPTS												
50215184372	✓		03/15/20	03/08/20	04/07/20		98.45	0.00	0.00	98.45	✓	
CS INVENTORY												
2015276694	✓		03/15/20	03/10/20	04/09/20		778.97	0.00	0.00	778.97	✓	
SUPPLIES VARIOUS DEPTS												
2015271559	✓		03/15/20	03/10/20	04/09/20		90.57	0.00	0.00	90.57	✓	
SUPPLIES OB												
215269108	✓		03/15/20	03/10/20	04/09/20		40.23	0.00	0.00	40.23	✓	
CS INVENTORY												
2015269070	✓		03/15/20	03/10/20	04/09/20		18.58	0.00	0.00	18.58	✓	
SUPPLIES SURGERY												
2015271689	✓		03/15/20	03/10/20	04/09/20		5.03	0.00	0.00	5.03	✓	
CS INVENTORY												
2015275894	✓		03/15/20	03/10/20	04/09/20		1,234.88	0.00	0.00	1,234.88	✓	
CS INVENTORY												
2015407420	✓		03/18/20	03/15/20	04/14/20		1,007.53	0.00	0.00	1,007.53	✓	
SUPPLIES VARIOUS DEPTS												
2015402336	✓		03/18/20	03/15/20	04/14/20		80.32	0.00	0.00	80.32	✓	
CS INVENTORY												
2015408622	✓		03/18/20	03/15/20	04/14/20		1,409.94	0.00	0.00	1,409.94	✓	
CS INVENTORY & LAB SUPPLI												
2015403361	✓		03/18/20	03/15/20	04/14/20		16.30	0.00	0.00	16.30	✓	
SUPPLIES DIETARY												
201497216	✓		03/25/20	03/01/20	03/31/20		389.70	0.00	0.00	389.70	✓	
SUPPLIES PLANT OPS												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							OM425	OWENS & MINOR	9,984.40	0.00	0.00	9,984.40
Vendor#	Vendor Name					Class	Pay Code					
11142	PAETEC					✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
59273183	✓		03/29/20	03/22/20	04/10/20		7,938.82	0.00	0.00	7,938.82	✓	
TELEPHONE EXPENSE												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							11142	PAETEC	7,938.82	0.00	0.00	7,938.82
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		
929126845	✓		03/25/20	02/03/20	03/05/20		190.08	0.00	0.00	190.08	✓	
SUPPLIES ICU												
929210591	✓		03/25/20	02/19/20	03/21/20		190.08	0.00	0.00	190.08	✓	
SUPPLIES ICU												
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10032	PHILIPS HEALTHCARE	380.16	0.00	0.00	380.16
Vendor#	Vendor Name					Class	Pay Code					

11135	PIONEER PRODUCTS, INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
SI-85144 ✓		03/29/20	12/17/20	01/17/20		916.16	0.00	0.00	916.16	✓
SUPPLIES DIETARY										
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11135	PIONEER PRODUCTS, INC				916.16	0.00	0.00	916.16	
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	
049878 ✓		03/18/20	03/11/20	04/10/20		653.66	0.00	0.00	653.66	✓
CS INVENTORY										
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10541	PLATINUM CODE				653.66	0.00	0.00	653.66	
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	
20845		03/29/20	01/31/20	03/01/20		973.50	0.00	0.00	973.50	✓
ADVERTISING										
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	P2100	PORT LAVACA WAVE				973.50	0.00	0.00	973.50	
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	
A19726 ✓		03/24/20	03/15/20	04/14/20		3.89	0.00	0.00	3.89	✓
SUPPLIES PLANT OPS										
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	P2200	POWER ELECTRIC				3.89	0.00	0.00	3.89	
Vendor#	Vendor Name				Class	Pay Code				
Q0572	QUILL CORPORATION ✓				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
4134494 ✓		03/25/20	03/14/20	04/13/20		158.99	0.00	0.00	158.99	✓
OFFICE SUPPLIES LAB										
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	Q0572	QUILL CORPORATION				158.99	0.00	0.00	158.99	
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	
20846		03/29/20	03/27/20	03/27/20		988.80	0.00	0.00	988.80	
OUTSIDE SRV TRANSCRIPTIC										
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	K0536	SHIRLEY KARNEI				988.80	0.00	0.00	988.80	✓
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	
4542377 ✓		03/28/20	03/03/20	03/24/20		1,333.33	0.00	0.00	1,333.33	✓
LEASE & RENTAL LAB										
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				
10681	SIMMLER, INC. ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	

179566	✓	03/25/20	03/09/20	04/08/20			155.00	0.00	0.00	155.00	✓
BLOOD BANK SUPPLIES											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
10681 SIMMLER, INC.							155.00	0.00	0.00	155.00	
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-7383	✓	03/25/20	03/01/20	03/31/20			487.50	0.00	0.00	487.50	✓
OUTSIDE SRV ADMIN											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
11083 STRATUS VIDEO INTERPRETING							487.50	0.00	0.00	487.50	
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	
779919A	✓	03/15/20	03/08/20	04/07/20			471.35	0.00	0.00	471.35	✓
SUPPLIES SURGERY											
788945A	✓	03/18/20	03/10/20	04/09/20			361.31	0.00	0.00	361.31	✓
SUPPLIES PT											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
S2830 STRYKER SALES CORP							832.66	0.00	0.00	832.66	
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	
071212	✓	03/18/20	03/07/20	04/07/20			17,500.00	0.00	0.00	17,500.00	✓
OUTSIDE SRV LEADERSHIP											
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	
603032545	✓	03/25/20	03/03/20	03/23/20			645.91	0.00	0.00	645.91	✓
FOOD SUPPLIES DIETARY											
603102387	✓	03/25/20	03/10/20	03/30/20			530.73	0.00	0.00	530.73	✓
FOOD SUPPLIES DIETARY											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
S2951 SYSCO FOOD SERVICES OF							1,176.64	0.00	0.00	1,176.64	
Vendor#	Vendor Name				Class	Pay Code					
11140	TEXAS ADVANTAGE COMMUNITY BANK					✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net	
20831		03/28/20	03/21/20	03/31/20			3,690.52	0.00	0.00	3,690.52	✓
LEASE & RENTAL XRAY											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
11140 TEXAS ADVANTAGE COMMUNITY BANK							3,690.52	0.00	0.00	3,690.52	
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	
20843		03/29/20	03/29/20	04/10/20			4,682.00	0.00	0.00	4,682.00	✓
WORK COMP INS											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
T2204 TEXAS MUTUAL INSURANCE CO							4,682.00	0.00	0.00	4,682.00	
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
20824		03/28/20	03/25/20	03/25/20		128.80	0.00	0.00	128.80 ✓
	STUDENT LOAN GARNISHME								
20825		03/28/20	03/25/20	03/25/20		109.45	0.00	0.00	109.45 ✓
	STUDENT LOAN GARNISHME								
Vendor Totals									
	Number Name					Gross	Discount	No-Pay	Net
	T2303 TG					238.25	0.00	0.00	238.25
Vendor#	Vendor Name				Class	Pay Code			
11100	THE US CONSULTING GROUP ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
340361071	✓	03/25/20	03/01/20	03/31/20		179.75	0.00	0.00	179.75 ✓
	OUTSIDE SRV PLANT OPS								
34031072	✓	03/25/20	03/01/20	03/31/20		1,060.36	0.00	0.00	1,060.36 ✓
	OUTSIDE SRV PLANT OPS								
Vendor Totals									
	11100 THE US CONSULTING GROUP					1,240.11	0.00	0.00	1,240.11
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
8150723373	✓	03/18/20	03/08/20	04/07/20		54.20	0.00	0.00	54.20 ✓
	OUTSIDE SRV MAINT								
8150723473	✓	03/18/20	03/08/20	04/07/20		31.92	0.00	0.00	31.92 ✓
	OUTSIDE SRV BIO MED								
8150724197	✓	03/24/20	03/15/20	04/14/20		31.92	0.00	0.00	31.92 ✓
	OUTSIDE SRV BIO MED								
8150724099	✓	03/24/20	03/15/20	04/14/20		54.20	0.00	0.00	54.20 ✓
	OUTSIDE SRV MAINT								
Vendor Totals									
	U1054 UNIFIRST HOLDINGS					172.24	0.00	0.00	172.24
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
8400215241	✓	03/18/20	03/08/20	04/07/20		153.69	0.00	0.00	153.69 ✓
	LAUNDRY OB								
8400215279	✓	03/18/20	03/08/20	04/07/20		175.27	0.00	0.00	175.27 ✓
	LAUNDRY HOUSEKEEPING								
8400215242	✓	03/18/20	03/08/20	04/07/20		121.73	0.00	0.00	121.73 ✓
	LAUNDRY HOUSEKEEPING								
8400215238	✓	03/18/20	03/08/20	04/07/20		318.38	0.00	0.00	318.38 ✓
	LAUNDRY HOUSEKEEPING								
8400215292	✓	03/18/20	03/08/20	04/07/20		1,114.37	0.00	0.00	1,114.37 ✓
	LAUNDRY HOUSEKEEPING								
8400215240	✓	03/18/20	03/08/20	04/07/20		165.55	0.00	0.00	165.55 ✓
	LAUNDRY DIETARY								
8400215239	✓	03/18/20	03/08/20	04/07/20		219.68	0.00	0.00	219.68 ✓
	LAUNDRY HOUSEKEEPING								
8400215570	✓	03/24/20	03/11/20	04/10/20		373.69	0.00	0.00	373.69 ✓
	LAUNDRY SURGERY								
8400215615	✓	03/24/20	03/11/20	04/10/20		1,214.40	0.00	0.00	1,214.40 ✓
	LAUNDRY HOUSEKEEPING								
8400215783	✓	03/24/20	03/15/20	04/14/20		155.32	0.00	0.00	155.32 ✓

LAUNDRY HOUSEKEEPING													
8400215744	✓		03/24/20	03/15/20	04/14/20		106.23	0.00	0.00	106.23	✓		
LAUNDRY HOUSEKEEPING													
8400215741	✓		03/24/20	03/15/20	04/14/20		318.38	0.00	0.00	318.38	✓		
LAUNDRY HOUSEKEEPING													
8400215745	✓		03/24/20	03/15/20	04/14/20		94.28	0.00	0.00	94.28	✓		
LAUNDRY HOUSEKEEPING													
8400215743	✓		03/24/20	03/15/20	04/14/20		165.55	0.00	0.00	165.55	✓		
LAUNDRY DIETARY													
8400215742	✓		03/24/20	03/15/20	04/14/20		242.66	0.00	0.00	242.66	✓		
LAUNDRY HOUSEKEEPING													
8400215794	✓		03/24/20	03/15/20	04/14/20		1,183.62	0.00	0.00	1,183.62	✓		
LAUNDRY HOUSEKEEPING													
8400212275	✓		03/25/20	01/26/20	02/25/20		152.79	0.00	0.00	152.79	✓		
LAUNDRY DIETARY													
8400213740	✓		03/25/20	02/16/20	03/17/20		152.79	0.00	0.00	152.79	✓		
LAUNDRY DIETARY													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							U1064	UNIFIRST HOLDINGS INC	6,428.38	0.00	0.00	6,428.38	
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			
6767302	✓		03/24/20	03/01/20	03/31/20		137.94	0.00	0.00	137.94			
EMPLOYEE UNIFORMS													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							U1056	UNIFORM ADVANTAGE	137.94	0.00	0.00	137.94	✓
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			
5576842	✓		03/25/20	02/25/20	03/16/20		2,562.04	0.00	0.00	2,562.04	✓		
FOOD SUPPLIES DIETARY													
5642838	✓		03/25/20	02/29/20	03/20/20		2,207.45	0.00	0.00	2,207.45	✓		
FOOD SUPPLIES DIETARY													
5706264	✓		03/25/20	03/03/20	03/23/20		2,006.07	0.00	0.00	2,006.07	✓		
FOOD SUPPLIES DIETARY													
5767666	✓		03/25/20	03/07/20	03/27/20		1,656.91	0.00	0.00	1,656.91	✓		
FOOD SUPPLIES DIETARY													
5837015	✓		03/25/20	03/10/20	03/30/20		3,606.13	0.00	0.00	3,606.13	✓		
FOOD SUPPLIES DIETARY													
5899161	✓		03/25/20	03/14/20	04/03/20		2,757.36	0.00	0.00	2,757.36	✓		
FOOD SUPPLIES DIETARY													
3066762	✓		03/25/20	03/17/20	04/06/20		2,404.72	0.00	0.00	2,404.72	✓		
FOOD SUPPLIES DIETARY													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10172	US FOOD SERVICE	17,200.68	0.00	0.00	17,200.68	
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			
9762242362	✓		03/28/20	03/16/20	04/11/20		238.70	0.00	0.00	238.70	✓		
TELEPHONE EXPENSE													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							V0559	VERIZON WIRELESS	238.70	0.00	0.00	238.70	

Vendor#	Vendor Name	Class	Pay Code
10793	WAGeworks ✓		
Invoice#	Comment	Tran Dt	Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
125A10452770 ✓		03/25/20	03/11/20 04/10/20 181.25 0.00 0.00 181.25 ✓
FLEX SPENDING ADMIN FEES			
Vendor Totals	Number Name	Gross	Discount No-Pay Net
	10793 WAGeworks	181.25	0.00 0.00 181.25

Vendor#	Vendor Name	Class	Pay Code
10915	WAGeworks ✓		
Invoice#	Comment	Tran Dt	Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
20826		03/28/20	03/20/20 03/20/20 2,326.43 0.00 0.00 2,326.43
MONEY TO FUND FLEX SPENI			
Vendor Totals	Number Name	Gross	Discount No-Pay Net
	10915 WAGeworks	2,326.43	0.00 0.00 2,326.43 ✓

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
109502 ✓		03/18/20	03/10/20 04/09/20 1,223.51 0.00 0.00 1,223.51 ✓
EMPLOYEE SHRITS			
109503 ✓		03/18/20	03/10/20 04/09/20 30.00 0.00 0.00 30.00 ✓
EMPLOYEE SHIRTS			
Vendor Totals	Number Name	Gross	Discount No-Pay Net
	W1040 WATERMARK GRAPHICS INC	1,253.51	0.00 0.00 1,253.51

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
9110285558 ✓		03/25/20	03/15/20 04/14/20 1,571.67 0.00 0.00 1,571.67 ✓
LEASE & RENTAL 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
11166	WEST INTERACTIVE SERVICES CORP ✓		
Invoice#	Comment	Tran Dt	Inv Dt Due Dt Check D Pay Gross Discount No-Pay Net
INV001613093 ✓		03/25/20	02/29/20 03/30/20 307.40 0.00 0.00 307.40 ✓
OUTSIDE SRV CLINIC			
Vendor Totals	Number Name	Gross	Discount No-Pay Net
	11166 WEST INTERACTIVE SERVICES CORP	307.40	0.00 0.00 307.40

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	228,671.28	0.00	0.00	228,671.28

APPROVED
ON

MAR 30 2016 CKSH 165714

to

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

165806

Hills Lawn:
Tree Service
Irrigation installation
Phase 1 & 2
+
\$ 244,351.28

+ 15,680.00

RUN DATE: 03/29/16

TIME: 15:56

MEMORIAL MEDICAL CENTER

EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1

APCDEDIT

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
-------------------	------------	------	--------	-------------	-------------	-------------	--------

		032916	283.20		2		
	TX 372410836	032916	2693.97		3		
	TX 372410834	032916	540.54		2		
	GA 303740809						

ARID=0001 TOTAL

3517.71

TOTAL

3517.71

APPROVED
ON

MAR 30 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CKS # 165807
+0
165809

WAL
4-7-16

8

RUN DATE:03/30/16
TIME:15:00

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/30/16 THRU 03/30/16

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165714	03/30/16	380.16	PHILIPS HEALTHCARE
A/P	165715	03/30/16	17,200.68	US FOOD SERVICE
A/P	165716	03/30/16	471.94	MERCEDES MEDICAL
A/P	165717	03/30/16	970.02	CENTURION MEDICAL PRODUCTS
A/P	165718	03/30/16	716.16	DEWITT POTH & SON
A/P	165719	03/30/16	109.42	AMBU INC
A/P	165720	03/30/16	.00	VOIDED
A/P	165721	03/30/16	17,150.27	MORRIS & DICKSON CO, LLC
A/P	165722	03/30/16	653.66	PLATINUM CODE
A/P	165723	03/30/16	570.00	AMERICAN PROFICIENCY INSTITUTE
A/P	165724	03/30/16	106.93	FIVE STAR STERILIZER SERVICES
A/P	165725	03/30/16	155.00	SIMMLER, INC.
A/P	165726	03/30/16	181.25	WAGeworks
A/P	165727	03/30/16	21,290.72	MMC EMPLOYEE BENEFIT PLAN
A/P	165728	03/30/16	3,121.28	DOOR CONTROL SERVICES, INC
A/P	165729	03/30/16	2,326.43	WAGeworks
A/P	165730	03/30/16	13,851.23	HUNTER PHARMACY SERVICES
A/P	165731	03/30/16	1,333.33	SIEMENS FINANCIAL SERVICES
A/P	165732	03/30/16	80.00	MEMORIAL MEDICAL CLINIC
A/P	165733	03/30/16	932.50	M G TRUST
A/P	165734	03/30/16	536.65	ECOLAB EQUIPMENT CARE
A/P	165735	03/30/16	75.00	FIRST CLEARING
A/P	165736	03/30/16	3,849.00	MSDSOnline, INC
A/P	165737	03/30/16	12,748.51	FUSION MEDICAL STAFFING, LLC
A/P	165738	03/30/16	487.50	STRATUS VIDEO INTERPRETING
A/P	165739	03/30/16	269.71	GULF COAST SCIENTIFIC
A/P	165740	03/30/16	122.82	JERI DAVIS
A/P	165741	03/30/16	1,240.11	THE US CONSULTING GROUP
A/P	165742	03/30/16	17,500.00	STUDER GROUP, LLC
A/P	165743	03/30/16	916.16	PIONEER PRODUCTS, INC
A/P	165744	03/30/16	3,690.52	TEXAS ADVANTAGE COMMUNITY BANK
A/P	165745	03/30/16	7,938.82	PAETEC
A/P	165746	03/30/16	307.40	WEST INTERACTIVE SERVICES CORP
A/P	165747	03/30/16	149.54	INDUSTRIAL CHEM LABS
A/P	165748	03/30/16	15,680.00	HILL'S LAWN & TREE SERVICES
A/P	165749	03/30/16	153.28	ABBOTT LABORATORIES
A/P	165750	03/30/16	199.93	GULF COAST HARDWARE / ACE
A/P	165751	03/30/16	32.95	ACTION LUMBER
A/P	165752	03/30/16	56.37	AIRGAS-SOUTHWEST
A/P	165753	03/30/16	1,564.50	ALCON LABORATORIES, INC.
A/P	165754	03/30/16	226.10	ALPHA TEC SYSTEMS INC
A/P	165755	03/30/16	43.80	AUTO PARTS & MACHINE CO.
A/P	165756	03/30/16	174.13	BAXTER HEALTHCARE CORP
A/P	165757	03/30/16	13,493.98	BECKMAN COULTER INC
A/P	165758	03/30/16	218.00	BOSTON SCIENTIFIC CORPORATION
A/P	165759	03/30/16	675.00	C-D ELECTRIC
A/P	165760	03/30/16	25.00	CAL COM FEDERAL CREDIT UNION
A/P	165761	03/30/16	430.28	CERTIFIED LABORATORIES
A/P	165762	03/30/16	4,520.39	CITY OF PORT LAVACA
A/P	165763	03/30/16	155.62	CDW GOVERNMENT, INC.

RUN DATE:03/30/16
TIME:15:00

MEMORIAL MEDICAL CENTER
CHECK REGISTER
03/30/16 THRU 03/30/16

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	165764	03/30/16	30,103.86	EVIDENT
A/P	165765	03/30/16	281.46	DLE PAPER & PACKAGING
A/P	165766	03/30/16	956.25	EAGLE FIRE & SAFETY INC
A/P	165767	03/30/16	178.61	ENTERPRISE RENT-A-CAR
A/P	165768	03/30/16	4,912.11	FISHER HEALTHCARE
A/P	165769	03/30/16	149.96	GALLS,LLC
A/P	165770	03/30/16	1,800.62	GULF COAST PAPER COMPANY
A/P	165771	03/30/16	429.20	H E BUTT GROCERY
A/P	165772	03/30/16	663.62	HOLOGIC INC
A/P	165773	03/30/16	315.00	HFMA
A/P	165774	03/30/16	148.03	INDEPENDENCE MEDICAL
A/P	165775	03/30/16	1,571.67	WERFEN USA LLC
A/P	165776	03/30/16	41.25	INTEGRATED MEDICAL SYSTEMS
A/P	165777	03/30/16	908.57	J & J HEALTH CARE SYSTEMS, INC
A/P	165778	03/30/16	988.80	SHIRLEY KARNEI
A/P	165779	03/30/16	38.20	MARKS PLUMBING PARTS
A/P	165780	03/30/16	1,080.09	MARKETLAB, INC
A/P	165781	03/30/16	41.33	MARTIN PRINTING CO
A/P	165782	03/30/16	908.27	MCKESSON MEDICAL SURGICAL INC
A/P	165783	03/30/16	23.85	MEDLINE INDUSTRIES INC
A/P	165784	03/30/16	1,033.44	BAYER HEALTHCARE
A/P	165785	03/30/16	160.21	MMC AUXILIARY GIFT SHOP
A/P	165786	03/30/16	258.52	METLIFE
A/P	165787	03/30/16	1,796.07	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	165788	03/30/16	47.80	MOORE MEDICAL LLC
A/P	165789	03/30/16	68.39	OFFICE DEPOT
A/P	165790	03/30/16	82.95	ORIENTAL TRADING CO INC
A/P	165791	03/30/16	.00	VOIDED
A/P	165792	03/30/16	.00	VOIDED
A/P	165793	03/30/16	9,984.40	OWENS & MINOR
A/P	165794	03/30/16	973.50	PORT LAVACA WAVE
A/P	165795	03/30/16	3.89	POWER ELECTRIC
A/P	165796	03/30/16	158.99	QUILL CORPORATION
A/P	165797	03/30/16	832.66	STRYKER SALES CORP
A/P	165798	03/30/16	1,176.64	SYSCO FOOD SERVICES OF
A/P	165799	03/30/16	4,682.00	TEXAS MUTUAL INSURANCE CO
A/P	165800	03/30/16	238.25	TG
A/P	165801	03/30/16	172.24	UNIFIRST HOLDINGS
A/P	165802	03/30/16	137.94	UNIFORM ADVANTAGE
A/P	165803	03/30/16	.00	VOIDED
A/P	165804	03/30/16	6,428.38	UNIFIRST HOLDINGS INC
A/P	165805	03/30/16	238.70	VERIZON WIRELESS
A/P	165806	03/30/16	1,253.51	WATERMARK GRAPHICS INC
A/P	165807	03/30/16	283.20	MSC 410836
A/P	165808	03/30/16	2,693.97	MSC 410834
A/P	165809	03/30/16	540.54	SAN ANTONIO SERVICE CEN
TOTALS:			247,868.99	

APPROVED
ON

MAR 30 2016

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



March 2016 Statement

Open Date: 02/04/2016 Closing Date: 03/04/2016

Visa® Business Card
MEMORIAL MEDICAL CNT
JASON W ANGLIN

Cardmember Service
BUS 30 ELN 68 3

New Balance \$4,415.80
Minimum Payment Due \$45.00
Payment Due Date 04/01/2016

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	+	\$2,348.71
Payments	-	\$2,348.71 CR
Other Credits	-	\$50.00 CR
Purchases	+	\$4,465.80
Balance Transfers		\$0.00
Advances		\$0.00
Other Debits		\$0.00
Fees Charged		\$0.00
Interest Charged		\$0.00

New Balance	=	\$4,415.80
Past Due		\$0.00
Minimum Payment Due		\$45.00
Credit Line		\$10,000.00
Available Credit		\$5,584.20
Days in Billing Period		30

Michael J. H. 4-7-16

APPROVED ON **\$4,415.80**
M MC will pay By **MAR 30 2016**
Phone COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Payment Options:



Mail payment coupon
with a check

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



- to pay by phone
- to change your address

Account Number	
Payment Due Date	4/01/2016
New Balance	\$4,415.80
Minimum Payment Due	\$45.00

Amount Enclosed \$ _____

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

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



March 2016 Statement 02/04/2016 - 03/04/2016

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.

An Easy Way to Monitor Your Spending. Now there's a more convenient way to view and monitor your credit card spending history. With ScoreBoard, you can securely view your transaction and spending information online. It's a valuable cardmember tool that will help you manage your expenses from the convenience of your computer! See enclosed insert for more details.

Imagine yourself cheering on the best athletes in the world at the Rio 2016 Olympic Games and Opening Ceremony, courtesy of Visa. Learn more about the Visa Rio 2016 Olympic Games-Themed Sweepstakes by visiting Visa.com/RioSweeps through April 30, 2016.

Pay taxes instantly with your credit card. It's a fast, easy and secure way to pay your federal and state taxes. You will receive an electronic receipt so you will know your payment was received on time. Learn more at officialpayments.com.

Now you can manage your personal credit card on the go. Download the new mobile app and put your personal account in the palm of your hand. You can; Check your balance, Pay your bill and Review recent activity! It's an easy way to keep your credit card account close at hand.

Transactions

Payments and Other Credits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
02/05	02/04	1677	PAYPAL *TEXASORGANI 4029357733 TX MERCHANDISE/SERVICE RETURN	\$50.00CR	✓
02/25	02/25		PAYMENT THANK YOU	\$2,348.71CR	
TOTAL THIS PERIOD				\$2,398.71CR	

Purchases and Other Debits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
02/04	02/03	0431	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$6.00	✓
02/04	02/03	0506	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$15.00	✓
02/04	02/03	0688	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$3.00	✓
02/04	02/03	0761	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$3.00	✓
02/04	02/03	0845	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$3.00	✓
02/04	02/04	2491	AMA*CREDENTIALING 800-621-8335 IL	\$126.00	✓
02/05	02/03	8515	SOUTHWES 5260683017543 800-435-9792 TX BETHANY/DANETT 02/03/16 DALLAS LOVE TO DALLAS LOVE DALLAS LOVE TO HOUSTN HOBBY	\$331.96	✓
02/05	02/04	6780	ACT*Eide Bailly LLP 877-551-5560 TX	\$325.00	✓
02/05	02/04	2113	PAYPAL *TEXASORGANI 402-935-7733 TX	\$250.00	✓
02/05	02/04	5936	PAYPAL *TEXASORGANI 402-935-7733 TX	\$250.00	✓
02/08	02/04	0029	TEXAS HOSPITAL ASSOC 512-465-1000 TX	\$495.00	✓ EH

Continued on Next Page



March 2016 Statement 02/04/2016 - 03/04/2016

MEMORIAL MEDICAL CNT
JASON W ANGLIN

Cardmember Service

Transactions

Purchases and Other Debits

Post Date	Trans Date	Ref #	Transaction Description	Amount	Notation
02/08	02/05	8749	PAYPAL *DATAMARKETI 402-935-7733 CA	\$199.99 ✓	✓
02/11	02/09	0563	WYNDHAM AUSTIN & WOODW AUSTIN TX 02/09/16 FOR 01 NIGHTS FOLIO: 6384532	\$136.85 ✓	✓
02/16	02/15	2495	SAFETYPRODUCTS 760-944-1048 CA	\$177.20 ✓	✓
02/17	02/16	0335	TEXAS SOCIETY OF INFEC 512-263-2480 TX	\$100.00 ✓	✓
02/19	02/18	0243	BATTERY MART OF WINCHE BATTERYMART.C VA	\$264.95 ✓	✓
02/22	02/18	0033	MICHAEL BUFFALO CONSUL JAMAICA BEACH TX	\$650.00 ✓	✓
02/29	02/25	9814	DRURY HOUSTON WOOD THE WOODLANDS TX 02/24/16 FOLIO: 87016501	\$159.85 ✓	✓
02/29	02/26	9961	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$18.00 ✓	✓
02/29	02/26	0027	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$3.00 ✓	✓
02/29	02/26	0100	NPDB NPDB.HRSA.GOV 800-767-6732 VA	\$3.00 ✓	✓
02/29	02/27	3897	AMA*CREDENTIALING 800-621-8335 IL	\$84.00 ✓	✓
03/01	02/29	0022	THE SOUTHWELL COMPANY 210-223-1831 TX	\$673.00 ✓	✓
03/03	03/02	0081	HEART SMART TECHNOLOGY 800-4228129 CT	\$89.00 ✓	✓
03/04	03/03	2501	FREDPRYOR CAREERTRACK 800-5563012 KS	\$99.00 ✓	✓
TOTAL THIS PERIOD				\$4,465.80	

2016 Totals Year-to-Date

Total Fees Charged in 2016	\$0.00
Total Interest Charged in 2016	\$0.00

Company Approval

(This area for use by your company)

Signature/Approval: _____

Accounting Code: _____

Interest Charge Calculation

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

**APR for current and future transactions.

Balance Type	Balance By Type	Balance Subject to Interest Rate	Variable	Interest Charge	Annual Percentage Rate	Expires with Statement
**BALANCE TRANSFER	\$0.00	\$0.00	YES	\$0.00	10.24%	
**PURCHASES	\$4,415.80	\$0.00	YES	\$0.00	10.24%	
**ADVANCES	\$0.00	\$0.00	YES	\$0.00	24.24%	

Continued on Next Page

MEMORIAL MEDICAL CENTER
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- APRIL 2016

Monthly Electronic Transfers for Operating Expenses

3/1/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	204.47
3/1/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	393.74
3/1/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,176.82
3/2/2016 IBC Merch Bank Discount	- Credit Card Processing Fee	19.95
3/2/2016 IBC Merch Bank Fee	- Credit Card Processing Fee	29.95
3/2/2016 Cardmember Service	- IBC Credit Card Invoice	3,054.08
3/2/2016 IRS USATAXPYMT	- Payroll Taxes	95,100.60
3/3/2016 IBC Merch Bank Fee	- Credit Card Processing Fee	13.85
3/3/2016 IBC Merch Bank Discount	- Credit Card Processing Fee	20.82
3/3/2016 IBC Merch Bank Fee	- Credit Card Processing Fee	49.18
3/3/2016 IBC Merch Bank Fee	- Credit Card Processing Fee	57.12
3/3/2016 IBC Merch Bank Fee	- Credit Card Processing Fee	75.45
3/3/2016 IBC Merch Bank Interchng	- Credit Card Processing Fee	75.88
3/3/2016 IBC Merch Bank Interchng	- Credit Card Processing Fee	89.04
3/3/2016 IBC Merch Bank Fee	- Credit Card Processing Fee	124.18
3/3/2016 IBC Merch Bank Discount	- Credit Card Processing Fee	126.22
3/3/2016 IBC Merch Bank Discount	- Credit Card Processing Fee	147.81
3/3/2016 IBC Merch Bank Interchng	- Credit Card Processing Fee	246.24
3/3/2016 IBC Merch Bank Interchng	- Credit Card Processing Fee	262.78
3/3/2016 IBC Merch Bank Discount	- Credit Card Processing Fee	349.98
3/3/2016 IBC Merch Bank Interchng	- Credit Card Processing Fee	1,086.71
3/3/2016 IBC Merch Bank Discount	- Credit Card Processing Fee	2,126.24
3/7/2016 FDGL Lease Payment	- Credit Card Machine Lease Expense	30.25
3/7/2016 FDGL Lease Payment	- Credit Card Machine Lease Expense	59.25
3/7/2016 FDGL Lease Payment	- Credit Card Machine Lease Expense	59.25
3/7/2016 FDGL Lease Payment	- Credit Card Machine Lease Expense	86.30
3/8/2016 Vivonet Acquisit Payment	- Credit Card Machine Lease Expense	99.00
3/8/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	132.45
3/8/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	395.29
3/8/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,293.51
3/9/2016 DLX For Business Bus Prod	- Business Office Expense	107.30
3/10/2016 FDGL Lease Payment	- Credit Card Machine Lease Expense	30.17
3/10/2016 Memorial Medical Payroll	- Payroll	255,258.53
3/11/2016 Webfile Tax Portal	- Sales Tax	1,031.75
3/11/2016 State Comprlr Texnet	- IGT DISPRO FY16 Pool 2	97,860.70
3/15/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	383.56
3/15/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	594.82
3/15/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	727.94
3/15/2016 Texas County DRS	- Retirement Funding	113,182.46
3/16/2016 IRS USATAXPYMT	- Payroll Taxes	95,878.11
3/21/2016 Telecheck	- Credit Card Processing Fee	5.00
3/21/2016 FDGL Lease Payment	- Credit Card Machine Lease Expense	151.23
3/22/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	236.08
3/22/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	618.81
3/22/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,251.23
3/24/2016 AC5 SL5 Expertpay	- Child Support	362.31
3/24/2016 Memorial Medical Payroll	- Payroll	257,774.06
3/25/2016 Cardmember Service	- IBC Credit Card Invoice	4,276.44
3/29/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	497.85
3/29/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	1,192.28
3/29/2016 Mckesson Drug Auto ACH	- 340B Drug Program Expense	2,046.16
3/30/2016 IRS USATAXPYMT	- Payroll Taxes	97,043.44
3/31/2016 Cardmember Service	- IBC Credit Card Invoice	4,415.80
		<u>\$ 1,041,912.44</u>

APPROVED
ON

APR 12 2016

BY
CALHOUN COUNTY AUDITOR

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.



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

STATEMENT

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CUSTOMER NO.

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03/01/2016 to 03/31/2016

STATEMENT PERIOD

8/NE/131/019/2393
MEMORIAL MEDICAL CENTER OPERATING
COUNTY OF CALHOUN
201 W AUSTIN STREET
PORT LAVACA TX 77979

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	
1,754,634.18	385	1,942,754.04	549	2,198,901.38	1,498,486.84	
Deposits (Credits)						
Date	Deposit#	Amount	Date	Deposit#	Amount	Date
03/01		29,681.48	03/10		320.00	03/21
03/01		259.00	03/10		76.55	03/21
03/01		5.00	03/11		18,061.92	03/22
03/02		3,500.56	03/11		488.00	03/22
03/02		382.00	03/11		39.45	03/23
03/02		63.00	03/14		43,472.19	03/23
03/03		28,141.76	03/14		474.00	03/23
03/03		273.00	03/14		70.00	03/24
03/03		25.00	03/14		40.00	03/24
03/03		22.70	03/15		12,698.63	03/24
03/04		5,420.08	03/15		2,643.76	03/25
03/04		384.00	03/15		2,011.27	03/25
03/04		102.57	03/15		476.00	03/25
03/07		107,817.09	03/16		4,225.06	03/25
03/07		290.00	03/16		491.00	03/28
03/07		125.00	03/16		43.46	03/28
03/07		40.00	03/17		9,050.98	03/28
03/08		5,832.18	03/17		263.00	03/28
03/08		494.00	03/17		100.00	03/28
03/08		280.00	03/18		17,603.12	03/29
03/08		30.00	03/18		556.00	03/29
03/09		3,938.07	03/18		389.34	03/29
03/09		477.00	03/18		46.54	03/30
03/09		153.73	03/21		47,688.25	03/30
03/09		20.00	03/21		335.00	03/31
03/10		8,300.42	03/21		296.00	03/31
Checks (Debits)						
Date	Check #	Amount	Date	Check #	Amount	Date
03/10	61786	1,369.90	03/03 *	165007	114.50	03/01
03/14	61787	181.92	03/03 *	165013	155.80	03/02
03/02 *	164473	460.00	03/01 *	165058	294.82	03/01
03/11 *	164596	95.62	03/01	165059	212.28	03/22
03/04 *	164652	795.00	03/02	165060	153.00	03/01
03/04 *	164679	595.00	03/01 *	165062	93.69	03/01
03/07 *	164705	92.44	03/02	165063	406.90	03/04
03/15 *	164714	10.05	03/02	165064	750.00	03/04 *
03/28 *	164719	59.02	03/01	165065	8,333.33	03/01
03/02 *	164735	50.87	03/01	165066	1,870.32	03/01
03/04 *	164878	23.50	03/02	165067	149.23	03/01
03/01 *	164949	106.85	03/02 *	165069	679.31	03/02
03/03 *	164967	3,171.99	03/03	165070	124.35	03/02
03/04 *	164979	374.90	03/02	165071	131.82	03/02
03/01 *	164994	967.96	03/01 *	165073	9,110.70	03/08
						165089
						1,027.18
						307.51
						600.00
						30.78
						6.54
						495.00
						390.00
						452.70
						7,375.00
						125.00
						20,326.47
						14,180.26
						1,333.33
						6,145.37
						8,963.25

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311 North Virginia
Port Lavaca, Texas 77979

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8/NE/131/019/2403
MEMORIAL MEDICAL CENTER OPERATING
COUNTY OF CALHOUN
201 W AUSTIN STREET
PORT LAVACA TX 77979

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.

03/31	Electronic Deposit	36 TREAS 310 MISC PAY 746003411360012	12,311.23
03/31	Electronic Deposit	BCBS TEXAS HCCLAIMPMT C16089E54034390	10,199.54
03/31	Electronic Deposit	TMHP HCCLAIMPMT xxxxx9111	9,926.26
03/31	Electronic Deposit	Driscoll Childre Driscoll C MEMORIAL MEDICA	5,463.96
03/31	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160910883	1,818.84
03/31	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160915882	688.28
03/31	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160911881	627.20
03/31	Electronic Deposit	36 TREAS 310 MISC PAY 746003411360012	488.08
03/31	Electronic Deposit	36 TREAS 310 MISC PAY 746003411360012	415.16
03/31	Electronic Deposit	IBC MERCH BNKCD DEPOSIT 971160913887	207.26
Debits			
03/01	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02750611	204.47
03/01	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02750528	393.74
03/01	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02750620	1,176.82
03/02	Electronic Payment	IBC MERCH BNKCD DISCOUNT 674200009993	19.95
03/02	Electronic Payment	IBC MERCH BNKCD FEE 674200009993	29.95
03/02	Electronic Payment	CARDMEMBER SERV ELECT PYMT	3,054.08
03/02	Electronic Payment	IRS USATAXPYMT 220646254635240	95,100.60
03/03	Electronic Payment	IBC MERCH BNKCD FEE 971160912889	13.85
03/03	Electronic Payment	IBC MERCH BNKCD DISCOUNT 971160912889	20.82
03/03	Electronic Payment	IBC MERCH BNKCD FEE 971160914885	49.18
03/03	Electronic Payment	IBC MERCH BNKCD FEE 971160911881	57.12
03/03	Electronic Payment	IBC MERCH BNKCD FEE 971160910883	75.45
03/03	Electronic Payment	IBC MERCH BNKCD INTERCHNG 971160912889	75.88
03/03	Electronic Payment	IBC MERCH BNKCD INTERCHNG 971160914885	89.04
03/03	Electronic Payment	IBC MERCH BNKCD FEE 971160913887	124.18
03/03	Electronic Payment	IBC MERCH BNKCD DISCOUNT 971160913887	126.22
03/03	Electronic Payment	IBC MERCH BNKCD DISCOUNT 971160914885	147.81
03/03	Electronic Payment	IBC MERCH BNKCD INTERCHNG 971160911881	246.24
03/03	Electronic Payment	IBC MERCH BNKCD INTERCHNG 971160913887	262.78
03/03	Electronic Payment	IBC MERCH BNKCD DISCOUNT 971160911881	349.98
03/03	Electronic Payment	IBC MERCH BNKCD INTERCHNG 971160910883	1,086.71
03/03	Electronic Payment	IBC MERCH BNKCD DISCOUNT 971160910883	2,126.24
03/07	Electronic Payment	FDGL LEASE PYMT	30.25
03/07	Electronic Payment	FDGL LEASE PYMT	59.25
03/07	Electronic Payment	FDGL LEASE PYMT	59.25
03/07	Electronic Payment	FDGL LEASE PYMT	86.30
03/08	Electronic Payment	VIVONET ACQUISIT PAYMENT 1136	99.00
03/08	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02754019	132.45
03/08	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02754088	395.29
03/08	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02754099	1,293.51
03/09	Electronic Payment	DLX For Business BUS PROD 2036448798128	107.30
03/10	Electronic Payment	FDGL LEASE PYMT	30.17
03/10	Electronic Payment	MEMORIAL MEDICAL PAYROLL	255,258.53
03/11	Electronic Payment	WEBFILE TAX PYMT DD 902/23396588	1,031.75
03/11	Electronic Payment	STATE COMPTLR TEXNET 23356014/60310	97,860.70
03/15	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02762784	383.56
03/15	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02762826	594.82



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

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8/NE/131/019/2404
MEMORIAL MEDICAL CENTER OPERATING
COUNTY OF CALHOUN
201 W AUSTIN STREET
PORT LAVACA TX 77979

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.

03/15	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02762624	727.94
03/15	Electronic Payment	TEXAS COUNTY DRS RECEIVABLE 419	113,182.46
03/16	Electronic Payment	IRS USATAXPYMT 220647683144872	95,878.11
03/21	Electronic Payment	Telecheck INV032016D xxxxx9736	5.00
03/21	Electronic Payment	FDGL LEASE PYMT	151.23
03/22	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02766447	236.08
03/22	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02766351	618.81
03/22	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02766458	1,251.23
03/24	Electronic Payment	ACS SLS EXPERTPAY xxxxx3411	362.31
03/24	Electronic Payment	MEMORIAL MEDICAL PAYROLL	257,774.06
03/25	Electronic Payment	CARDMEMBER SERV ELECT PYMT	4,276.44
03/29	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02774948	497.85
03/29	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02774959	1,192.28
03/29	Electronic Payment	MCKESSON DRUG AUTO ACH ACH02774873	2,046.16
03/30	Electronic Payment	IRS USATAXPYMT 220649064930317	97,043.44
03/31	Electronic Payment	CARDMEMBER SERV ELECT PYMT	4,415.80

Daily Ending Balance

03/01	1,674,847.95	03/11	1,510,788.35	03/23	1,701,069.13
03/02	1,591,433.17	03/14	1,557,158.74	03/24	1,483,564.21
03/03	1,643,811.27	03/15	1,420,326.76	03/25	1,499,636.39
03/04	1,741,025.30	03/16	1,339,358.61	03/28	1,542,417.84
03/07	1,815,857.18	03/17	1,268,463.03	03/29	1,517,203.73
03/08	1,778,823.37	03/18	1,336,973.68	03/30	1,414,300.98
03/09	1,720,492.81	03/21	1,412,662.94	03/31	1,498,486.84
03/10	1,545,736.14	03/22	1,430,189.17		

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.

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311 North Virginia
Port Lavaca, Texas 77979

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8/NE/131/019/2023

MEMORIAL MEDICAL CENTER CONSTRUCTION COU
CLINIC SERIES 2014
202 S ANN STE A
PORT LAVACA TX 77979

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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
653,356.84	0	0.00	1	277,982.90	375,373.94
Checks (Debits)					
Date	Check #	Amount			
03/18	3626	277,982.90			
Daily Ending Balance					
03/18	375,373.94				

Notice to Customers: A CTR Reference Guide

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

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

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8/NE/131/019/1982

MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
PRIVATE WAIVER CLEARING FUND
202 S ANN ST STE A
PORT LAVACA TX 77979

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
25,069.79	0	0.00 ✓	0	0.00 ✓	25,069.79

Notice to Customers: A CTR Reference Guide

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

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BANK

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

STATEMENT

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CUSTOMER NO.

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03/01/2016 to 03/31/2016

STATEMENT PERIOD

8/NE/131/019/2063
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH ASHFORD
202 S ANN ST STE A
PORT LAVACA TX 77979

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			
247,319.70	31	651,387.12	5	810,027.69	88,679.13			
Deposits (Credits)								
Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#	Amount
03/02		91,183.69	03/17		173,776.20	03/31		70,515.76
03/10		30,843.21	03/25		119,413.51			
Electronic Activity								
Credits								
03/02	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						1,785.14
03/03	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675423						3,264.93
03/07	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675423						898.55
03/08	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005						7,345.61
03/09	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						14,698.55
03/09	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						4,663.88
03/09	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005						895.76
03/11	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						10.02
03/14	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005						36,679.79
03/14	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						5,670.00
03/16	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						1,217.94
03/17	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005						12,572.01
03/22	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675423						23,392.51
03/22	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						10,193.43
03/22	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005						2,320.84
03/23	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						3,501.61
03/24	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675423						6,274.93
03/24	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032218400021						735.00
03/25	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675423						11,470.88
03/28	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						3,581.32
03/29	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						1,685.43
03/29	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675423						1,433.74
03/29	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113005						1,224.02
03/30	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						512.60
03/31	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675423						9,539.71
03/31	Electronic Deposit	Molina HC of TX Molina HC PN1326436189						86.55
Debits								
03/01	Outgoing Wire	0433 ASHFORD HEALTH CARE CENTER LTD	2/23/16 - 2/26/16	218,302.10				218,302.10
03/09	Outgoing Wire	0002 ASHFORD HEALTH CARE CENTER LTD	2/29/16	125,151.36				125,151.36
03/16	Outgoing Wire	0008 ASHFORD HEALTH CARE CENTER LTD		59,355.58				59,355.58
03/23	Outgoing Wire	0024 ASHFORD HEALTH CARE CENTER LTD		229,915.94				229,915.94
03/30	Outgoing Wire	0009 ASHFORD HEALTH CARE CENTER LTD		177,302.71				177,302.71



BANK

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

STATEMENT

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STATEMENT PERIOD

MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH BROADMOOR
202 S ANN ST STE A
PORT LAVACA TX 77979

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
497,686.43	24	1,353,563.01	5	1,778,610.38	72,639.06
Deposits (Credits)					
Date	Deposit#	Amount	Date	Deposit#	Amount
03/02		30,661.63	03/17		88,623.71
03/10		41,557.22	03/25		53,257.41
					18,542.70
Electronic Activity					
Credits					
03/02	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004			3,747.88
03/07	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676357			9,341.97
03/08	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004			1,737.60
03/09	Electronic Deposit	Molina HC of TX Molina HC PN1669860433			1,221.57
03/09	Electronic Deposit	Molina HC of TX Molina HC PN1669860433			957.48
03/15	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004			5,624.08
03/21	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676357			337,905.49
03/22	Incoming Wire	0535 CANTEX HEALTH CARE CENTERS III			652,691.19
03/22	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004			3,272.49
03/22	Electronic Deposit	Molina HC of TX Molina HC PN1669860433			1,220.99
03/22	Electronic Deposit	Molina HC of TX Molina HC PN1669860433			820.60
03/23	Electronic Deposit	Molina HC of TX Molina HC PN1669860433			618.55
03/24	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676357			43,614.42
03/25	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676357			4,149.67
03/29	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676357			35,315.81
03/29	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113004			1,733.44
03/29	Electronic Deposit	Molina HC of TX Molina HC PN1669860433			717.18
03/29	Electronic Deposit	Molina HC of TX Molina HC PN1669860433			610.50
03/30	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676357			15,619.43
Debits					
03/01	Outgoing Wire	0438 CANTEX HEALTH CARE CENTERS III	2/22/16 2/24/16		495,273.19
03/09	Outgoing Wire	0005 CANTEX HEALTH CARE CENTERS III	2/29/16 2/29/16		36,722.75
03/16	Outgoing Wire	0011 CANTEX HEALTH CARE CENTERS III			54,815.84
03/23	Outgoing Wire	0029 CANTEX HEALTH CARE CENTERS III			94,247.79
03/30	Outgoing Wire	0012 CANTEX HEALTH CARE CENTERS III			1,097,550.81
Daily Ending Balance					
03/01		2,413.24	03/15		60,539.92
03/02		36,822.75	03/16		5,724.08
03/07		46,164.72	03/17		94,347.79
03/08		47,902.32	03/21		432,253.28
03/09		13,358.62	03/22		1,090,258.55
03/10		54,915.84	03/23		996,629.31
			03/24		1,040,243.73
			03/25		1,097,650.81
			03/29		1,136,027.74
			03/30		54,096.36
			03/31		72,639.06



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

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STATEMENT PERIOD

8/NE/131/019/2067
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH CRESCENT
202 S ANN ST STE A
PORT LAVACA TX 77979

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)	Balance
234,840.63	35	446,707.77	5	590,558.73	90,989.67
Deposits (Credits)					
Date	Deposit#	Amount	Date	Deposit#	Amount
03/02		30,455.37	03/17		24,564.26
03/10		32,242.52	03/25		23,909.75
Electronic Activity					
Credits					
03/01	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16022719500277			11,368.95
03/08	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16030518300337			11,362.12
03/08	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113008			1,200.84
03/09	Electronic Deposit	Molina HC of TX Molina HC PN1669860425			3,006.32
03/10	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			243.22
03/16	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			254.82
03/21	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			64,726.23
03/21	Electronic Deposit	Molina HC of TX Molina HC PN1669860425			2,091.39
03/22	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			57,549.76
03/22	Electronic Deposit	Molina HC of TX Molina HC PN1669860425			12,182.44
03/22	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16031816900029			10,131.83
03/22	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113008			2,801.96
03/22	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16031815000602			2,302.58
03/23	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			26,618.10
03/23	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113008			14,163.38
03/23	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16031910601973			5,686.29
03/24	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			8,394.68
03/24	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032210800003			3,158.88
03/25	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032317700922			4,486.44
03/25	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			2,915.97
03/28	Electronic Deposit	Molina HC of TX Molina HC PN1669860425			1,192.56
03/28	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			293.33
03/29	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032514100382			5,922.90
03/29	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032515800008			4,156.63
03/29	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113008			2,550.74
03/29	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032513500666			1,151.29
03/30	Electronic Deposit	Molina HC of TX Molina HC PN1669860425			5,218.56
03/31	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032910600933			13,979.95
03/31	Electronic Deposit	Molina HC of TX Molina HC PN1669860425			5,280.54
03/31	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676323			4,681.43
Debits					
03/01	Outgoing Wire	0436 CANTEX HEALTH CARE CENTERS III	2/22/16 - 2/26/16		227,464.34
03/09	Outgoing Wire	0004 CANTEX HEALTH CARE CENTERS III	2/29/16 - 3/2/16		49,100.61
03/16	Outgoing Wire	0010 CANTEX HEALTH CARE CENTERS III			48,055.02
03/23	Outgoing Wire	0027 CANTEX HEALTH CARE CENTERS III			24,819.08

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8/NE/131/019/2068

MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH CRESCENT
202 S ANN ST STE A
PORT LAVACA TX 77979

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03/30	Outgoing Wire	0011 CANTEX HEALTH CARE CENTERS III			241,119.68
Daily Ending Balance					
03/01	18,745.24	03/17	24,919.08	03/25	241,219.68
03/02	49,200.61	03/21	91,736.70	03/28	242,705.57
03/08	61,763.57	03/22	176,705.27	03/29	256,487.13
03/09	15,669.28	03/23	198,353.96	03/30	20,586.01
03/10	48,155.02	03/24	209,907.52	03/31	90,989.67
03/16	354.82				

Notice to Customers: A CTR Reference Guide

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

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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.

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MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH FORT HEND
202 S ANN ST STE A
PORT LAVACA TX 77979

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)	Ending Balance
199,884.42	22	177,602.31	5	338,827.08	38,659.65

Deposits (Credits)							
Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#
03/02		11,265.29	03/17		26,259.59	03/31	
03/10		598.97					
							20,358.23

Electronic Activity							
Credits							
03/01	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675663					524.40
03/03	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675663					2,433.76
03/04	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675663					4,539.35
03/08	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006					8,020.54
03/08	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16030413900313					5,038.40
03/09	Electronic Deposit	Molina HC of TX Molina HC PNI730577503					14,309.48
03/14	Electronic Deposit	Molina HC of TX Molina HC PNI730577503					3,074.98
03/15	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006					2,815.32
03/18	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006					2.39
03/21	Electronic Deposit	Molina HC of TX Molina HC PNI730577503					13,712.31
03/21	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006					1,663.40
03/22	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16031816900030					5,962.84
03/23	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675663					38,297.14
03/25	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006					524.50
03/28	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675663					12,362.72
03/28	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032413500100					2,118.32
03/28	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113006					831.70
03/30	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 675663					2,888.68
Debits							
03/01	Outgoing Wire	0442 CANTEX HEALTH CARE CENTERS III	2/22/16 - 2/26/16				198,900.11
03/09	Outgoing Wire	0006 CANTEX HEALTH CARE CENTERS III	2/29/16				19,647.11
03/16	Outgoing Wire	0012 CANTEX HEALTH CARE CENTERS III					27,967.39
03/23	Outgoing Wire	0031 CANTEX HEALTH CARE CENTERS III					32,152.28
03/30	Outgoing Wire	0013 CANTEX HEALTH CARE CENTERS III					60,160.19

Daily Ending Balance					
03/01	1,508.71	03/14	31,142.37	03/22	53,590.83
03/02	12,774.00	03/15	33,957.69	03/23	59,735.69
03/03	15,207.76	03/16	5,990.30	03/25	60,260.19
03/04	19,747.11	03/17	32,249.89	03/28	75,572.93
03/08	32,806.05	03/18	32,252.28	03/30	18,301.42
03/09	27,468.42	03/21	47,627.99	03/31	38,659.65
03/10	28,067.39				

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MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH SOLERA
202 S ANN ST STE A
PORT LAVACA TX 77979

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
392,885.93	25	658,114.93	5	883,107.65	167,893.21

Deposits (Credits)							
Date	Deposit#	Amount	Date	Deposit#	Amount	Date	Deposit#
03/02		40,686.98	03/17		23,008.21	03/31	
03/10		52,059.67	03/25		27,288.03		

Electronic Activity							
Credits							
03/01	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676310					19,046.90
03/04	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676310					3,832.00
03/04	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113007					0.01
03/08	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16030518300339					6,365.57
03/10	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113007					3,220.00
03/10	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16030812300307					2,547.27
03/11	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16030915400028					1,757.01
03/11	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113007					0.34
03/15	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16031115500190					3,127.70
03/16	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113007					18,360.61
03/16	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676310					14,888.31
03/22	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676310					253,735.10
03/22	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16031811500619					517.05
03/24	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676310					17,754.47
03/24	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032210800007					2,126.49
03/29	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032515800012					4,936.79
03/29	Electronic Deposit	AGING DISAB SVCS HCCLAIMPMT 17460034113007					2,326.05
03/30	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676310					103,756.36
03/31	Electronic Deposit	NOVITAS SOLUTION HCCLAIMPMT 676310					13,536.98
03/31	Electronic Deposit	AMERIGROUP CORPO HCCLAIMPMT 16032914700047					1,865.24

Debits							
03/01	Outgoing Wire	0434 CANTEX HEALTH CARE CENTERS LLC	2/22/16 - 2/25/16				346,612.86
03/09	Outgoing Wire	0003 CANTEX HEALTH CARE CENTERS LLC	2/29/16 - 4/17/16				109,738.96
03/16	Outgoing Wire	0009 CANTEX HEALTH CARE CENTERS LLC					65,949.86
03/23	Outgoing Wire	0026 CANTEX HEALTH CARE CENTERS LLC					59,384.83
03/30	Outgoing Wire	0010 CANTEX HEALTH CARE CENTERS LLC					301,421.14

Daily Ending Balance							
03/01	65,319.97	03/11	66,049.86	03/24			274,233.11
03/02	106,006.95	03/15	69,177.56	03/25			301,521.14
03/04	109,838.96	03/16	36,476.62	03/29			308,783.98
03/08	116,204.53	03/17	59,484.83	03/30			111,119.20
03/09	6,465.57	03/22	313,736.98	03/31			167,893.21
03/10	64,292.51	03/23	254,352.15				



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

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MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH SOLERA
202 S ANN ST STE A
PORT LAVACA TX 77979

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.

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MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH GREEN ACRES OF BAYTOWN
202 S ANN ST STE A
PORT LAVACA TX 77979

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	Number of	Deposits	Number of	Withdrawals	Closing
Balance	Credits	(Credits)	Debits	(Debits)	Balance
0.00	1	100.00	1	14.45	85.55
Account Maintenance					
Account Maintenance		13.50	Average Investable Balance		80.80
Debits Posted (0 @ 0.00)		0.00	Earnings Credit Rate		0.0000%
Credits Posted (1 @ 0.50)		0.50	Earnings Credit		0.00
IBC Items Deposited (0 @ 0.00)		0.00			
Non-IBC Items Deposited (0 @ 0.00)		0.00			
Postage (1 Item)		0.45			
Total Charges		14.45			
Less Earnings Credit		0.00			
Net Service Charge		14.45			
Deposits (Credits)					
Date	Deposit#	Amount			
02/22		100.00			
Electronic Activity					
	Debits				
02/29	Analysis Charge	Analysis Charge			14.45
Daily Ending Balance					
02/22	100.00	02/29	85.55		



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8/RG/31/019/990
MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH HUMBLE HEALTHCARE CENTER
202 S ANN ST STE A
PORT LAVACA TX 77979

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
85.55	1	14.45	1	14.45	85.55
Account Maintenance					
Account Maintenance		13.50	Average Investable Balance		79.67
Debits Posted (0 @ 0.00)		0.00	Earnings Credit Rate		0.0000%
Credits Posted (1 @ 0.50)		0.50	Earnings Credit		0.00
IBC Items Deposited (0 @ 0.00)		0.00			
Non-IBC Items Deposited (0 @ 0.00)		0.00			
Postage (1 Item)		0.45			
Total Charges		14.45			
Less Earnings Credit		0.00			
Net Service Charge		14.45			
Deposits (Credits)					
Date	Deposit#	Amount			
03/04		14.45			
Electronic Activity					
	Debits				
03/31	Analysis Charge	Analysis Charge			14.45
Daily Ending Balance					
03/04	100.00	03/31	85.55		

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MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH ALLENBROOK HEALTHCARE CENTER
202 S ANN ST STE A
PORT LAVACA TX 77979

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
85.55	1	14.45	1	14.45	85.55
Account Maintenance					
Account Maintenance		13.50		Average Investable Balance	79.67
Debits Posted (0 @ 0.00)		0.00		Earnings Credit Rate	0.0000%
Credits Posted (1 @ 0.50)		0.50		Earnings Credit	0.00
IBC Items Deposited (0 @ 0.00)		0.00			
Non-IBC Items Deposited (0 @ 0.00)		0.00			
Postage (1 Item)		0.45			
Total Charges		14.45			
Less Earnings Credit		0.00			
Net Service Charge		14.45			
Deposits (Credits)					
Date	Deposit#	Amount			
03/04		14.45			
Electronic Activity					
	Debits				
03/31	Analysis Charge	Analysis Charge			14.45
Daily Ending Balance					
03/04	100.00	03/31	85.55		

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MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
HN BEECHMUT MANOR
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PORT LAVACA TX 77979

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	Number of	Deposits	Number of	Withdrawals	Closing
Balance	Credits	(Credits)	Debits	(Debits)	Balance
85.55	1	14.45	1	14.45	85.55
Account Maintenance					
Account Maintenance		13.50	Average Investable Balance		79.67
Debits Posted (0 @ 0.00)		0.00	Earnings Credit Rate		0.0000%
Credits Posted (1 @ 0.50)		0.50	Earnings Credit		0.00
IBC Items Deposited (0 @ 0.00)		0.00			
Non-IBC Items Deposited (0 @ 0.00)		0.00			
Postage (1 Item)		0.45			
Total Charges		14.45			
Less Earnings Credit		0.00			
Net Service Charge		14.45			
Deposits (Credits)					
Date	Deposit#	Amount			
03/04		14.45			
Electronic Activity					
03/31	Debits				
	Analysis Charge	Analysis Charge			14.45
Daily Ending Balance					
03/04	100.00	03/31	85.55		

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

STATEMENT

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CUSTOMER NO. PAGE NO.

1 of 2

03/01/2016 to 03/31/2016

STATEMENT PERIOD

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MEMORIAL MEDICAL CENTER COUNTY OF CALHOU
NH GOLDEN CREEK HEALTHCARE & REHAB
202 S ANN ST STE A
PORT LAVACA TX 77979

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Debits					
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Daily Ending Balance					
03/04	100.00	03/31	85.55		