

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---October 21, 2020

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 359,474.17
TOTAL TRANSFERS BETWEEN FUNDS	\$ 221,242.12
TOTAL NURSING HOME UPL EXPENSES	\$ 869,447.32
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED October 21, 2020	\$ 1,450,163.61

APPROVED

OCT 21 2020

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---October 21, 2020

PAYABLES AND PAYROLL

10/15/2020 Weekly Payables	350,680.80
10/19/2020 McKesson-340B Prescription Expense	8,295.64
10/19/2020 Amerisource Bergen-340B Prescription Expense	400.34

Prosperity Electronic Bank Payments

10/13-10/16/20 Pay Plus-Patient Claims Processing Fee	97.39
---	-------

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 359,474.17
---	----------------------

TRANSFER BETWEEN FUNDS-NURSING HOMES

10/15/2020 MMC Operating to Golden Creek Healthcare-correction of NH insurance payment deposited into MMC Operating	55,593.23
10/15/2020 MMC Operating to Gulf Pointe Plaza-correction of NH insurance payment deposited into MMC Operating and (1) medicare recoup	22,290.83
10/15/2020 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	51,895.26
10/15/2020 MMC Operating to Bethany Senior Living- correction of NH insurance payment deposited into MMC Operating and (1) medicare recoup	91,462.80

TOTAL TRANSFERS BETWEEN FUNDS	\$ 221,242.12
--------------------------------------	----------------------

NURSING HOME UPL EXPENSES

10/19/2020 Nursing Home UPL-Cantex Transfer	375,209.52
10/19/2020 Nursing Home UPL-Nexion Transfer	45,342.96
10/19/2020 Nursing Home UPL-HMG Transfer	26,839.26
10/19/2020 Nursing Home UPL-Tuscany Transfer	41,128.09
10/19/2020 Nursing Home UPL-HSL Transfer	177,588.48

CREDIT CARD & LEASE FEES

10/14/2020 Tuscany-Enhanced analysis/Check order	224.41
10/14/2020 Bethany-Harland check order	139.08

QIPP/INTEREST/RECOUP CHECKS TO MMC

10/19/2020 Ashford-MMC recoup of IGT funds deposited into NH account	122,962.94
10/19/2020 Golden Creek-MMC recoup of IGT funds deposited into NH account	80,012.58

TOTAL NURSING HOME UPL EXPENSES	\$ 869,447.32
--	----------------------

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

GRAND TOTAL DISBURSEMENTS APPROVED October 21, 2020	\$ 1,450,163.61
--	------------------------

10/15/2020
10:43
RECEIVED
OCT 15 2020

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Due Dates Through: 11/04/2020

Vendor#	Vendor Name	Class	Pay Code								
10995	ABILITY NETWORK (SHIFTHOUND)	✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
20M0151595	✓ 10/14/2020	10/05/2020	11/04/2020				586.52	0.00	0.00	586.52	✓
	SCHEDULING SERVICES										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net		
10995		ABILITY NETWORK				586.52	0.00	0.00	586.52		
Vendor#	Vendor Name	Class	Pay Code								
11283	ACE HARDWARE 15521	✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
147553	✓ 09/30/2020	08/31/2020	10/29/2020				88.94	0.00	0.00	88.94	✓
	SUPPLIES										
147594	✓ 09/30/2020	09/01/2020	10/29/2020				8.59	0.00	0.00	8.59	✓
	SUPPLIES										
147680	✓ 09/30/2020	09/03/2020	10/29/2020				28.77	0.00	0.00	28.77	✓
	SUPPLIES										
147690	✓ 09/30/2020	09/03/2020	10/29/2020				22.17	0.00	0.00	22.17	✓
	SUPPLIES										
147719	✓ 09/30/2020	09/04/2020	10/29/2020				65.08	0.00	0.00	65.08	✓
	SUPPLIES										
147750	✓ 09/30/2020	09/08/2020	10/29/2020				22.43	0.00	0.00	22.43	✓
	SUPPLIES										
147990	✓ 09/30/2020	09/16/2020	10/29/2020				33.99	0.00	0.00	33.99	✓
	SUPPLIES										
148115	✓ 09/30/2020	09/21/2020	10/29/2020				36.57	0.00	0.00	36.57	✓
	SUPPLIES										
148129	✓ 09/30/2020	09/22/2020	10/29/2020				51.98	0.00	0.00	51.98	✓
	SUPPLIES										
148268	✓ 09/30/2020	09/28/2020	10/29/2020				19.98	0.00	0.00	19.98	✓
	SUPPLIES										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net		
11283		ACE HARDWARE 15				378.50	0.00	0.00	378.50		
Vendor#	Vendor Name	Class	Pay Code								
A1680	AIRGAS USA, LLC - CENTRAL DIV M	✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
9105631173	✓ 10/14/2020	09/30/2020	10/25/2020				2,248.76	0.00	0.00	2,248.76	✓
	OXYGEN										
9974264257	✓ 10/14/2020	09/30/2020	10/25/2020				59.02	0.00	0.00	59.02	✓
	OXYGEN										
9974264256	✓ 10/14/2020	09/30/2020	10/25/2020				719.22	0.00	0.00	719.22	✓
	OXYGEN										
9974264255	✓ 10/14/2020	09/30/2020	10/25/2020				486.55	0.00	0.00	486.55	✓
	OXYGEN										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net		
A1680		AIRGAS USA, LLC -				3,513.55	0.00	0.00	3,513.55		
Vendor#	Vendor Name	Class	Pay Code								
10958	ALLYSON SWOPE	✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
101420	✓ 10/14/2020	10/14/2020	10/14/2020				2,463.75	0.00	0.00	2,463.75	✓
	CONTRACT EMPLOYEE (9125-1018170)										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net		
10958		ALLYSON SWOPE				2,463.75	0.00	0.00	2,463.75		
Vendor#	Vendor Name	Class	Pay Code								
10419	AMBU INC	✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
220123479	✓ 10/13/2020	09/17/2020	10/13/2020				114.04	0.00	0.00	114.04	✓
	SUPPLIES										

	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net		
	10419		AMBU INC			114.04	0.00	0.00	114.04		
Vendor#		Vendor Name			Class		Pay Code				
10592		AMERICAN PROFICIENCY INSTITL									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	564860	✓ 09/30/2020	09/21/2020	10/16/2020				13,643.00	0.00	0.00	13,643.00 ✓
		SUPPLEIS									
	564861	✓ 09/30/2020	09/21/2020	10/16/2020				985.83	0.00	0.00	985.83 ✓
		SUPPLIES									
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net		
	10592		AMERICAN PROFIC			14,628.83	0.00	0.00	14,628.83		
Vendor#		Vendor Name			Class		Pay Code				
A2150		ANNOUNCEMENTS PLUS TOO AG.W									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	547	✓ 10/14/2020	09/28/2020	10/08/2020				18.00	0.00	0.00	18.00 ✓
		NAME PLAQUE									
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net		
	A2150		ANNOUNCEMENTS			18.00	0.00	0.00	18.00		
Vendor#		Vendor Name			Class		Pay Code				
B1150		BAXTER HEALTHCARE			W						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	68258595	✓ 09/30/2020	09/21/2020	10/16/2020				2,367.50	0.00	0.00	2,367.50 ✓
		LEASE									
	68258346	✓ 09/30/2020	09/21/2020	10/16/2020				629.50	0.00	0.00	629.50 ✓
		LEASE									
	68264463	✓ 10/13/2020	09/22/2020	10/17/2020				358.39	0.00	0.00	358.39 ✓
		SUPPLIES									
	68291346	✓ 10/13/2020	09/24/2020	10/19/2020				411.38	0.00	0.00	411.38 ✓
		SUPPLIES									
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net		
	B1150		BAXTER HEALTHC/			3,766.77	0.00	0.00	3,766.77		
Vendor#		Vendor Name			Class		Pay Code				
M2485		BAYER HEALTHCARE			M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	6008863979	✓ 10/13/2020	09/23/2020	09/22/2020				1,151.80	0.00	0.00	1,151.80 ✓
		SUPPLIES									
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net		
	M2485		BAYER HEALTHCAI			1,151.80	0.00	0.00	1,151.80		
Vendor#		Vendor Name			Class		Pay Code				
B1220		BECKMAN COULTER INC			M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	108527338	07/29/2020	07/19/2020	11/01/2020				-62,494.20	0.00	0.00	-62,494.20
		CREDIT DOUBLE CHARGE MUTI IN									
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net		
	B1220		BECKMAN COULTE			-62,494.20	0.00	0.00	-62,494.20		
Vendor#		Vendor Name			Class		Pay Code				
B1650		BOSART LOCK & KEY INC			M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	119879	✓ 10/09/2020	10/02/2020	11/01/2020				470.00	0.00	0.00	470.00 ✓
		INSTALL									
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net		
	B1650		BOSART LOCK & Kt			470.00	0.00	0.00	470.00		
Vendor#		Vendor Name			Class		Pay Code				
12740		BUILDING KID STEPS									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	SEPTEMBER	10/14/2020	10/13/2020	10/13/2020				1,039.00	0.00	0.00	1,039.00 ✓
		SPEECH THERAPY									
	SEPTEMBER	10/14/2020	10/13/2020	10/13/2020				1,026.00	0.00	0.00	1,026.00 ✓
		SPEECH THERAPY									
	SEPTEMBER	10/14/2020	10/13/2020	10/13/2020				1,039.00	0.00	0.00	1,039.00 ✓
		SPEECH THERAPY									

		SEPTEMBER	10/14/2020	10/13/2020	10/13/2020			300.00	0.00	0.00	300.00	✓
SPEECH THERAPY												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
C0400		12740			BUILDING KID STEF		3,404.00	0.00	0.00	3,404.00		
		Vendor Name		C-D ELECTRIC ✓			Class	Pay Code				
							M					
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
CIT30582		✓ 10/14/2020	10/06/2020	10/31/2020				975.00	0.00	0.00	975.00	✓
SUPPLIES												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
C0400		C-D ELECTRIC					975.00	0.00	0.00	975.00		
		Vendor Name		CABLES AND SENSORS ✓			Class	Pay Code				
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
97986		✓ 09/30/2020	08/25/2020	08/25/2020				175.00	0.00	0.00	175.00	✓
SUPPLIES												
100040		✓ 10/14/2020	10/02/2020	11/02/2020				89.00	0.00	0.00	89.00	✓
SUPPLIES												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
C1048		11224			CABLES AND SENS		264.00	0.00	0.00	264.00		
		Vendor Name		CALHOUN COUNTY ✓			Class	Pay Code				
							W					
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
092420		10/15/2020	09/24/2020	09/24/2020				103.45	0.00	0.00	103.45	✓
FUEL												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
C1048		11224			CALHOUN COUNTY		103.45	0.00	0.00	103.45		
		Vendor Name		CALHOUN COUNTY INDIGENT AC ✓			Class	Pay Code				
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
100820		10/08/2020	10/08/2020	10/29/2020				90.00	0.00	0.00	90.00	✓
TRANSFER												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
C1325		11295			CALHOUN COUNTY		90.00	0.00	0.00	90.00		
		Vendor Name		CARDINAL HEALTH 414, INC. ✓			Class	Pay Code				
							W					
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
8002327411		✓ 10/13/2020	09/12/2020	10/07/2020				641.64	0.00	0.00	641.64	✓
SUPPLIES												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
A1730		C1325			CARDINAL HEALTH		641.64	0.00	0.00	641.64		
		Vendor Name		CAREFUSION ✓			Class	Pay Code				
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
SC733311		✓ 09/30/2020	09/16/2020	10/16/2020				5,203.00	0.00	0.00	5,203.00	✓
SERVICE AGREEMENT												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
13264		A1730			CAREFUSION		5,203.00	0.00	0.00	5,203.00		
		Vendor Name		CERVEY, LLC ✓			Class	Pay Code				
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
1424		✓ 10/08/2020	10/08/2020	11/02/2020				1,699.00	0.00	0.00	1,699.00	✓
MONTHLY LICENSING FEE												
Vendor#		Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
L1629		13264			CERVEY, LLC		1,699.00	0.00	0.00	1,699.00		
		Vendor Name		CHRISTINA ZAPATA-ARROYO			Class	Pay Code				
Invoice#		Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
JULY2020C		10/14/2020	10/13/2020	10/13/2020				165.00	0.00	0.00	165.00	✓
SPEECH THERAPY												
SEPTEMBER		10/14/2020	10/13/2020	10/13/2020				1,127.50	0.00	0.00	1,127.50	✓

SPEECH THERAPY											
Vendor Totals:		Number	Name		Gross		Discount	No-Pay		Net	
L1629			CHRISTINA ZAPATA		1,292.50		0.00	0.00		1,292.50	
Vendor#		Vendor Name		Class		Pay Code					
10212		CLINICAL PATHOLOGY LABS		ICP							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
2020090	09/30/2020	09/30/2020	09/30/2020				31,052.71	0.00	0.00	31,052.71	
LAB SERVICES											
Vendor Totals:		Number	Name		Gross		Discount	No-Pay		Net	
10212			CLINICAL PATHOLC		31,052.71		0.00	0.00		31,052.71	
Vendor#		Vendor Name		Class		Pay Code					
11030		COMBINED INSURANCE									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
093020	09/30/2020	09/30/2020	10/01/2020				877.94	0.00	0.00	877.94	
INSURANCE											
Vendor Totals:		Number	Name		Gross		Discount	No-Pay		Net	
11030			COMBINED INSURA		877.94		0.00	0.00		877.94	
Vendor#		Vendor Name		Class		Pay Code					
C1970		CONMED CORPORATION		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
362527	10/13/2020	09/29/2020	10/13/2020				572.89	0.00	0.00	572.89	
SUPPLIES											
Vendor Totals:		Number	Name		Gross		Discount	No-Pay		Net	
C1970			CONMED CORPOR		572.89		0.00	0.00		572.89	
Vendor#		Vendor Name		Class		Pay Code					
10646		COVIDIEN									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
5861772169	09/30/2020	08/14/2020	08/24/2020				2,011.13	0.00	0.00	2,011.13	
SUPPLIES											
Vendor Totals:		Number	Name		Gross		Discount	No-Pay		Net	
10646			COVIDIEN		2,011.13		0.00	0.00		2,011.13	
Vendor#		Vendor Name		Class		Pay Code					
11368		CYRACOM LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
1217522	09/30/2020	09/30/2020	10/30/2020				195.21	0.00	0.00	195.21	
INTERPERTATION SERVICES											
Vendor Totals:		Number	Name		Gross		Discount	No-Pay		Net	
11368			CYRACOM LLC		195.21		0.00	0.00		195.21	
Vendor#		Vendor Name		Class		Pay Code					
13196		CYTO SUPPLIES									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
1166	10/13/2020	09/22/2020	10/13/2020				184.50	0.00	0.00	184.50	
SUPPLIES											
Vendor Totals:		Number	Name		Gross		Discount	No-Pay		Net	
13196			CYTO SUPPLIES		184.50		0.00	0.00		184.50	
Vendor#		Vendor Name		Class		Pay Code					
10368		DEWITT POTHS & SON									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
6208320	10/09/2020	10/02/2020	10/27/2020				17.26	0.00	0.00	17.26	
SUPPLIES											
6211350	10/09/2020	10/05/2020	10/30/2020				382.90	0.00	0.00	382.90	
SUPPLIES											
6217050	10/13/2020	10/08/2020	11/02/2020				427.15	0.00	0.00	427.15	
SUPPLIES											
6218640	10/13/2020	10/09/2020	11/03/2020				5.45	0.00	0.00	5.45	
SUPPLIES											
6213180	10/14/2020	10/06/2020	10/31/2020				125.33	0.00	0.00	125.33	
SUPPLIES											
6186561	10/14/2020	10/07/2020	11/01/2020				73.66	0.00	0.00	73.66	
SUPPLIES											
6215550	10/14/2020	10/07/2020	11/01/2020				22.86	0.00	0.00	22.86	

SUPPLIES

6215540 ✓ 10/14/2020 10/07/2020 11/01/2020 93.30 0.00 0.00 93.30 ✓

SUPPLIES

Vendor Totals: Number Name Gross Discount No-Pay Net
10368 DEWITT POTH & SC 1,147.91 0.00 0.00 1,147.91

Vendor#
11011

Vendor Name Class Pay Code
DIAMOND HEALTHCARE CORP ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
IN20054130 ✓ 10/14/2020 09/30/2020 10/25/2020 31,144.58 0.00 0.00 31,144.58 ✓

BEV HEALTH

IN20054131 ✓ 10/14/2020 09/30/2020 10/25/2020 19,166.67 0.00 0.00 19,166.67 ✓

CPR

Vendor Totals: Number Name Gross Discount No-Pay Net
11011 DIAMOND HEALTHC 50,311.25 0.00 0.00 50,311.25

Vendor#
11139

Vendor Name Class Pay Code
DIANNE ATKINSON ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
101420 10/14/2020 10/14/2020 14.24 28.52 0.00 0.00 14.24 28.52 ✓

TRAVEL FLU SHOTS - Seadiff & Coke

Vendor Totals: Number Name Gross Discount No-Pay Net
11139 DIANNE ATKINSON 28.52 14.24 0.00 0.00 14.24 28.52 ✓

Vendor#
11960

Vendor Name Class Pay Code
DILON TECHNOLOGIES ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
00034059 ✓ 09/30/2020 07/23/2020 10/09/2020 78.00 0.00 0.00 78.00 ✓

SUPPLIES

Vendor Totals: Number Name Gross Discount No-Pay Net
11960 DILON TECHNOLOC 78.00 0.00 0.00 78.00

Vendor#
12040

Vendor Name Class Pay Code
DRIESSEN WATER INC. ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
1430270309 ✓ 10/15/2020 09/30/2020 10/22/2020 3,106.30 0.00 0.00 3,106.30 ✓

SUPPLIES

Vendor Totals: Number Name Gross Discount No-Pay Net
12040 DRIESSEN WATER 3,106.30 0.00 0.00 3,106.30

Vendor#
D1785

Vendor Name Class Pay Code
DYNATRONICS CORPORATION ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
IN2108908 ✓ 10/13/2020 09/29/2020 10/13/2020 67.11 0.00 0.00 67.11 ✓

SUPPLIES

Vendor Totals: Number Name Gross Discount No-Pay Net
D1785 DYNATRONICS COI 67.11 0.00 0.00 67.11

Vendor#
E0500

Vendor Name Class Pay Code
EAGLE FIRE & SAFETY INC ✓ M

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
80392 ✓ 10/14/2020 10/07/2020 10/07/2020 280.00 0.00 0.00 280.00 ✓

VENT CLEANING

Vendor Totals: Number Name Gross Discount No-Pay Net
E0500 EAGLE FIRE & SAFI 280.00 0.00 0.00 280.00

Vendor#
E1070

Vendor Name Class Pay Code
EDWARDS PLUMBING INC ✓ W

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
62895 ✓ 10/14/2020 10/05/2020 10/05/2020 461.50 0.00 0.00 461.50 ✓

BACK FLOW AND PRESSURE TES

Vendor Totals: Number Name Gross Discount No-Pay Net
E1070 EDWARDS PLUMBII 461.50 0.00 0.00 461.50

Vendor#
11284

Vendor Name Class Pay Code
EMERGENCY STAFFING SOLUTIO ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
39625 ✓ 10/14/2020 10/15/2020 10/25/2020 40,062.50 0.00 0.00 40,062.50 ✓

ER STAFFING (1-15th)

Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
11284			EMERGENCY STAF		40,062.50	0.00	0.00		40,062.50	
Vendor#		Vendor Name		Class	Pay Code					
13512		EXCEL CONTRACTING								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
101220	10/14/2020	10/12/2020	10/12/2020				160.00	0.00	0.00	160.00
		PATIENT REFUND								
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
13512			EXCEL CONTRACTI		160.00	0.00	0.00		160.00	
Vendor#		Vendor Name		Class	Pay Code					
F1050		FASTENAL COMPANY		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
TXPOT2286	10/14/2020	09/24/2020	10/24/2020				52.10	0.00	0.00	52.10
		SUPPLIES								
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
F1050			FASTENAL COMPAI		52.10	0.00	0.00		52.10	
Vendor#		Vendor Name		Class	Pay Code					
F1100		FEDERAL EXPRESS CORP.		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
713866543	10/08/2020	10/01/2020	10/29/2020				49.01	0.00	0.00	49.01
		SHIPPING								
714473147	10/14/2020	10/08/2020	11/02/2020				194.24	0.00	0.00	194.24
		SHIPPING								
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
F1100			FEDERAL EXPRES		243.25	0.00	0.00		243.25	
Vendor#		Vendor Name		Class	Pay Code					
F1400		FISHER HEALTHCARE		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7734739	09/30/2020	09/09/2020	10/04/2020				116.86	0.00	0.00	116.86
		SUPPLIES								
7966513	09/30/2020	09/11/2020	10/06/2020				-378.25	0.00	0.00	-378.25
		CREDIT								
8939373	09/30/2020	09/21/2020	10/16/2020				568.07	0.00	0.00	568.07
		SUPPLIES								
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
F1400			FISHER HEALTHCA		306.68	0.00	0.00		306.68	
Vendor#		Vendor Name		Class	Pay Code					
12404		GE PRECISION HEALTHCARE, LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6001677425	10/05/2020	10/01/2020	10/30/2020				1,281.96	0.00	0.00	1,281.96
		MAINT CONTRACT								
6001677426	10/05/2020	10/01/2020	10/30/2020				572.33	0.00	0.00	572.33
		MAINT CONTRACT								
6001677549	10/05/2020	10/01/2020	10/30/2020				5,665.83	0.00	0.00	5,665.83
6001677492	10/05/2020	10/01/2020	10/31/2020				3,588.58	0.00	0.00	3,588.58
		MAINT CONTRACT								
6001677493	10/05/2020	10/01/2020	10/31/2020				86.67	0.00	0.00	86.67
		MAINT CONTRACT								
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
12404			GE PRECISION HEA		11,195.37	0.00	0.00		11,195.37	
Vendor#		Vendor Name		Class	Pay Code					
13060		GENZYME CORPORATION								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7030077397	08/11/2020	07/27/2020	11/04/2020				535.41	0.00	0.00	535.41
		INVENTORY								
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
13060			GENZYME CORPOF		535.41	0.00	0.00		535.41	
Vendor#		Vendor Name		Class	Pay Code					
10642		GLAXOSMITHKLINE PHARMACUE								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

	8253253862	09/29/2020	08/31/2020	10/31/2020		9,892.27	0.00	0.00	9,892.27	
	INVENTORY									
Vendor#	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
W1300	10642		GLAXOSMITHKLINE		9,892.27	0.00	0.00	9,892.27		
			Vendor Name		Class		Pay Code			
			GRAINGER		M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9665536398	10/14/2020	09/25/2020	10/20/2020				58.00	0.00	0.00	58.00
	SUPPLIES									
9670126086	10/14/2020	09/30/2020	10/25/2020				39.60	0.00	0.00	39.60
	SUPPLIES									
9672731628	10/14/2020	10/02/2020	10/27/2020				96.50	0.00	0.00	96.50
	SUPPLIES									
Vendor#	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
12948	W1300		GRAINGER		194.10	0.00	0.00	194.10		
			Vendor Name		Class		Pay Code			
			GREAT AMERICAN FINANCIAL SV							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
27944968	10/09/2020	10/06/2020	10/31/2020				10,028.68	0.00	0.00	10,028.68
	COPIER/PRINTER LEASE									
Vendor#	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
G1210	12948		GREAT AMERICAN		10,028.68	0.00	0.00	10,028.68		
			Vendor Name		Class		Pay Code			
			GULF COAST PAPER COMPANY		M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1907118	09/23/2020	08/11/2020	09/10/2020				595.73	0.00	0.00	595.73
	SUPPLIES									
1934301	09/23/2020	09/29/2020	10/29/2020				913.80	0.00	0.00	913.80
	SUPPLIES									
1907996	09/30/2020	08/12/2020	09/11/2020				-38.50	0.00	0.00	-38.50
	CREDIT									
Vendor#	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
10334	G1210		GULF COAST PAPE		1,471.03	0.00	0.00	1,471.03		
			Vendor Name		Class		Pay Code			
			HEALTH CARE LOGISTICS INC							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
307649293	10/08/2020	07/15/2020	10/29/2020				90.48	0.00	0.00	90.48
	SUPPLIES									
Vendor#	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
10804	10334		HEALTH CARE LOG		90.48	0.00	0.00	90.48		
			Vendor Name		Class		Pay Code			
			HEALTHCARE CODING & CONSUL							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10110	10/14/2020	09/30/2020	10/30/2020				831.50	0.00	0.00	831.50
	CODING SERVICES									
Vendor#	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
11552	10804		HEALTHCARE COD		831.50	0.00	0.00	831.50		
			Vendor Name		Class		Pay Code			
			HEALTHCARE FINANCIAL SERVI							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100366982	09/30/2020	09/27/2020	11/01/2020				4,610.52	0.00	0.00	4,610.52
	PHONE/STERILIZER/GEM PREM 4k									
100372430	10/14/2020	10/08/2020	11/01/2020				1,797.44	0.00	0.00	1,797.44
	LEASE									
1003724828	10/14/2020	10/08/2020	11/01/2020				7,154.17	0.00	0.00	7,154.17
	LEASE									
100372429	10/14/2020	10/08/2020	11/01/2020				7,447.86	0.00	0.00	7,447.86
	LEASE									
100372427	10/14/2020	10/08/2020	11/01/2020				4,919.41	0.00	0.00	4,919.41
	LEASE									
Vendor#	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		

11552	HEALTHCARE FINA	25,929.40	0.00	0.00	25,929.40
Vendor#	Vendor Name	Class	Pay Code		
H0031	HEB CREDIT RECEIVABLES DEPT:				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt
892430	✓ 10/15/2020	08/29/2020	10/25/2020		
	SUPPLIES				
897035	✓ 10/15/2020	08/30/2020	10/25/2020		
	SUPPLIES				
792189	✓ 10/15/2020	09/01/2020	10/25/2020		
	SUPPLIES				
799647	✓ 10/15/2020	09/06/2020	10/25/2020		
	SUPPLIES				
664409	✓ 10/15/2020	09/08/2020	10/25/2020		
	SUPPLIES				
731711	✓ 10/15/2020	09/13/2020	10/25/2020		
	SUPPLIES				
666544	✓ 10/15/2020	09/13/2020	10/25/2020		
	SUPPLIES				
732030	✓ 10/15/2020	09/14/2020	10/25/2020		
	SUPPLIES				
732483	✓ 10/15/2020	09/15/2020	10/25/2020		
	SUPPLIES				
734061	✓ 10/15/2020	09/17/2020	10/25/2020		
	SUPPLIES				
735167	✓ 10/15/2020	09/19/2020	10/25/2020		
	SUPPLIES				
735436	✓ 10/15/2020	09/20/2020	10/25/2020		
	SUPPLIES				
739033	✓ 10/15/2020	09/26/2020	10/25/2020		
	SUPPLIES				
OC48437	✓ 10/15/2020	09/28/2020	10/25/2020		
	FINANCE CHARGE				
OC48436	✓ 10/15/2020	09/28/2020	10/25/2020		
	FINANCE CHARGE				
Vendor Totals:	Number	Name	Gross	Discount	No-Pay
H0031	HEB CREDIT RECEI	605.49	0.00	0.00	605.49
Vendor#	Vendor Name	Class	Pay Code		
H0416	HOLOGIC INC				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt
9467606	✓ 10/13/2020	09/24/2020	10/13/2020		
	SUPPLIES				
9473525	✓ 10/13/2020	09/30/2020	10/13/2020		
	SUPPLIES				
Vendor Totals:	Number	Name	Gross	Discount	No-Pay
H0416	HOLOGIC INC	300.71	0.00	0.00	300.71
Vendor#	Vendor Name	Class	Pay Code		
10922	HUNTER PHARMACY SERVICES				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt
4075	✓ 09/30/2020	09/30/2020	10/20/2020		
	PRO FEES				
Vendor Totals:	Number	Name	Gross	Discount	No-Pay
10922	HUNTER PHARMAC	14,668.35	0.00	0.00	14,668.35
Vendor#	Vendor Name	Class	Pay Code		
I1260	INTOXIMETERS INC	M			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt
664606	✓ 09/30/2020	09/24/2020	10/19/2020		
	SUPPLIES				
Vendor Totals:	Number	Name	Gross	Discount	No-Pay
I1260	INTOXIMETERS INC	240.00	0.00	0.00	240.00
Vendor#	Vendor Name	Class	Pay Code		
11200	IRON MOUNTAIN				

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
CZDT114	✓ 09/30/2020	09/29/2020	10/29/2020				504.71	0.00	0.00	504.71 ✓
SHRED SERVICE										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		11200	IRON MOUNTAIN			504.71	0.00	0.00	504.71	
Vendor#	Vendor Name		Class		Pay Code					
J0150	J & J HEALTH CARE SYSTEMS, INC ✓		✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
923289923	✓ 10/13/2020	09/20/2020	10/20/2020				1,555.00	0.00	0.00	1,555.00 ✓
SUPPLIES										
923346347	✓ 10/13/2020	09/29/2020	10/29/2020				762.46	0.00	0.00	762.46 ✓
SUPPLIES										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		J0150	J & J HEALTH CARE ✓			2,317.46	0.00	0.00	2,317.46	
Vendor#	Vendor Name		Class		Pay Code					
L0700	LABCORP OF AMERICA HOLDINGSM									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
67329505	09/30/2020	09/26/2020	10/21/2020				26.29	0.00	0.00	26.29 ✓
LAB SERVICES										
67304748	09/30/2020	09/26/2020	10/21/2020				79.25	0.00	0.00	79.25 ✓
SUPPLIES										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		L0700	LABCORP OF AMEF			105.54	0.00	0.00	105.54	
Vendor#	Vendor Name		Class		Pay Code					
L1640	LOWE'S HOME CENTERS INC ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
79763	10/14/2020	09/24/2020	10/28/2020				341.30	0.00	0.00	341.30 ✓
SALT ✓										
092820	10/14/2020	09/28/2020	10/28/2020				38.00	0.00	0.00	38.00 ✓
LATE FEE										
100220	10/14/2020	10/02/2020	10/28/2020				0.81	0.00	0.00	0.81 ✓
INTERST CHARGE										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		L1640	LOWE'S HOME CEN			380.11	0.00	0.00	380.11	
Vendor#	Vendor Name		Class		Pay Code					
11796	LUBY'S FUDDRUCKERS RESTAUR ✓		✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV00002735	10/14/2020	09/30/2020	09/30/2020				20,748.62	0.00	0.00	20,748.62 ✓
FOOD										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		11796	LUBY'S FUDDRUCK			20,748.62	0.00	0.00	20,748.62	
Vendor#	Vendor Name		Class		Pay Code					
10972	M G TRUST ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
101220	10/14/2020	10/12/2020	10/12/2020				840.86	0.00	0.00	840.86 ✓
PAYROLL DED										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		10972	M G TRUST			840.86	0.00	0.00	840.86	
Vendor#	Vendor Name		Class		Pay Code					
M2178	MCKESSON MEDICAL SURGICAL I ✓		✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
09164876	07/29/2020	07/07/2020	10/30/2020				208.57	0.00	0.00	208.57
REAGENT										
12487874	✓ 09/23/2020	08/25/2020	09/09/2020				99.52	0.00	0.00	99.52 ✓
SUPPLIES										
13042930	✓ 09/23/2020	09/09/2020	09/24/2020				560.62	0.00	0.00	560.62 ✓
SUPPLIES										
13036161	✓ 09/23/2020	09/09/2020	09/24/2020				1,213.24	0.00	0.00	1,213.24 ✓
SUPPLIES										
11422708	✓ 09/30/2020	07/28/2020	08/12/2020				957.71	0.00	0.00	957.71 ✓
SUPPLIES										

13560427	✓	10/13/2020	09/22/2020	10/07/2020		3,359.59	0.00	0.00	3,359.59	✓
					SUPPLIES					
13771918	✓	10/13/2020	09/28/2020	10/13/2020		43.35	0.00	0.00	43.35	✓
					SUPPLIES					
13851264	✓	10/13/2020	09/29/2020	10/14/2020		109.05	0.00	0.00	109.05	✓
					SUPPLIES					
13846998	✓	10/13/2020	09/29/2020	10/14/2020		74.38	0.00	0.00	74.38	✓
					SUPPLIES					
13860008	✓	10/13/2020	09/29/2020	10/14/2020		91.14	0.00	0.00	91.14	✓
					SUPPLIES					
13849853	✓	10/13/2020	09/29/2020	10/14/2020		9.33	0.00	0.00	9.33	✓
					SUPPLIES					
13849709	✓	10/13/2020	09/29/2020	10/14/2020		504.90	0.00	0.00	504.90	✓
					SUPPLIES					
13925016	✓	10/13/2020	09/30/2020	10/15/2020		1,980.68	0.00	0.00	1,980.68	✓
					SUPPLIES					

Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
M2178			MCKESSON MEDIC		9,212.08	0.00	0.00		9,212.08	
Vendor#	Vendor Name		Class		Pay Code					
M2310	MEDELA INC		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7000301270	✓	10/13/2020	09/29/2020	10/13/2020			284.80	0.00	0.00	284.80
		SUPPLIES								

	Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
	M2310			MEDELA INC		284.80	0.00	0.00		284.80	
Vendor#			Vendor Name			Class	Pay Code				
11141			MEDICAL DATA SYSTEMS, INC.								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	153208	✓ 10/14/2020	09/30/2020	10/25/2020				2,925.93	0.00	0.00	2,925.93 ✓
	COLLECTION FEES										
	153207	✓ 10/14/2020	09/30/2020	10/25/2020				772.44	0.00	0.00	772.44 ✓
	COLLECTIONS										

Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
11141			MEDICAL DATA SY		3,698.37	0.00	0.00		3,698.37	
Vendor#	Vendor Name		Class		Pay Code					
12588	MEDICAL TECHNOLOGY ASSOCIA		✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV174781	✓	10/14/2020	08/22/2020	09/16/2020			1,200.00	0.00	0.00	1,200.00
ELVAL ON VENTILATION SYS					✓					

	Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
			12588	MEDICAL TECHNOI		1,200.00	0.00	0.00		1,200.00	
Vendor#			Vendor Name		Class	Pay Code					
M2470			MEDLINE INDUSTRIES INC ✓		M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	1924582159	✓ 09/30/2020	09/18/2020	10/13/2020				-56.49	0.00	0.00	-56.49 ✓
			CREDIT 192111398								
	1842361995	✓ 10/09/2020	01/11/2018	02/05/2018				551.50	0.00	0.00	551.50 ✓
			SUPPLIS								
	1924229851	✓ 10/09/2020	09/16/2020	10/11/2020				56.49	0.00	0.00	56.49 ✓
			SUPPLIES								
	1924229850	✓ 10/09/2020	09/16/2020	10/11/2020				57.20	0.00	0.00	57.20 ✓
			SUPPLIES								

	Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
	M2470			MEDLINE INDUSTR		608.70	0.00	0.00		608.70	
Vendor#			Vendor Name		Class	Pay Code					
10963			MEMORIAL MEDICAL CLINIC								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	101220	10/14/2020	10/12/2020	10/12/2020				165.00	0.00	0.00	165.00
			PAYROLL DED								

Vendor Totals:	Number	Name		Gross	Discount	No-Pay		Net
10963		MEMORIAL MEDICA		165.00	0.00	0.00		165.00

Vendor#
11976Vendor Name
MID-COAST ELECTRIC SUPPLY, INClass
✓

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
191517200	✓ 10/14/2020	07/08/2020	08/07/2020				262.00	0.00	0.00	262.00 ✓
										SUPPLIES
191517201	✓ 10/14/2020	07/09/2020	08/08/2020				41.20	0.00	0.00	41.20 ✓
										SUPPLIES
191725300	✓ 10/14/2020	07/21/2020	08/20/2020				54.90	0.00	0.00	54.90 ✓
										SUPPLIES
191827700	✓ 10/14/2020	07/30/2020	08/29/2020				75.00	0.00	0.00	75.00 ✓
										SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11976		MID-COAST ELECTRIC	433.10	0.00	0.00	433.10

Vendor#
10791Vendor Name
MINDRAY DS USA, INC. ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0600805670	✓ 10/14/2020	09/29/2020	10/19/2020				2,080.00	0.00	0.00	2,080.00 ✓
										SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10791		MINDRAY DS USA,	2,080.00	0.00	0.00	2,080.00

Vendor#
M2621Vendor Name
MMC AUXILIARY GIFT SHOP ✓Class
W

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100820	✓ 10/08/2020	10/08/2020	10/29/2020				314.55	0.00	0.00	314.55 ✓
										PAYROLL DED

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
M2621		MMC AUXILIARY GI	314.55	0.00	0.00	314.55

Vendor#
10536Vendor Name
MORRIS & DICKSON CO, LLC ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0797	✓ 10/08/2020	10/07/2020	10/29/2020				-0.32	0.00	0.00	-0.32 ✓
										CREDIT
6144774	✓ 10/08/2020	10/07/2020	10/29/2020				428.78	0.00	0.00	428.78 ✓
										INVENTORY
6144775	✓ 10/08/2020	10/07/2020	10/29/2020				209.85	0.00	0.00	209.85 ✓
										INVENTORY
6144773	✓ 10/08/2020	10/07/2020	10/29/2020				107.31	0.00	0.00	107.31 ✓
										INVENTORY
6141810	✓ 10/08/2020	10/07/2020	10/29/2020				1.85	0.00	0.00	1.85 ✓
										INVENTORY
6139957	✓ 10/09/2020	10/06/2020	10/16/2020				14.48	0.00	0.00	14.48 ✓
										INVENTORY
6139599	✓ 10/09/2020	10/06/2020	10/16/2020				578.01	0.00	0.00	578.01 ✓
										INVENTORY
6139600	✓ 10/09/2020	10/06/2020	10/16/2020				257.03	0.00	0.00	257.03 ✓
										INVENTORY
6136276	✓ 10/09/2020	10/06/2020	10/16/2020				1,586.16	0.00	0.00	1,586.16 ✓
										INVENTORY
6139598	✓ 10/09/2020	10/06/2020	10/16/2020				95.99	0.00	0.00	95.99 ✓
										INVENTORY
6136277	✓ 10/15/2020	10/06/2020	10/16/2020				0.22	0.00	0.00	0.22 ✓
										INVENTORY

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10536		MORRIS & DICKSON	3,279.36	0.00	0.00	3,279.36

Vendor#
M2659Vendor Name
MXR IMAGING, INC. ✓Class
M

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8800670744	✓ 10/13/2020	09/29/2020	10/29/2020				141.72	0.00	0.00	141.72 ✓
										SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
M2659		MXR IMAGING, INC	141.72	0.00	0.00	141.72

10/15/2020

tmp_cw5report8955316020179084736.html

Vendor#
A2252Vendor Name
NADINE GARNER ✓Class
W

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
101320	10/14/2020	10/13/2020	10/13/2020				14.26	0.00	0.00	14.26
TRAVEL FLU SHOTS <i>Sendin Ft COKE</i>										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
A2252		NADINE GARNER	14.26	0.00	0.00	14.26

Vendor#
10352Vendor Name
NUANCE COMMUNICATIONS, INC ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10327250 ✓	10/14/2020	11/05/2020	11/04/2020				79.80	0.00	0.00	79.80
ESCRPTION										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10352		NUANCE COMMUNI	79.80	0.00	0.00	79.80

Vendor#
11472Vendor Name
OCCUPRO LLC ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
18805 ✓	10/13/2020	09/07/2020	10/07/2020				473.28	0.00	0.00	473.28
PROVIDER/MONTHLY SUPPORT										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11472		OCCUPRO LLC	473.28	0.00	0.00	473.28

Vendor#
O1500Vendor Name
OLYMPUS AMERICA INC ✓Class
M

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
99773633 ✓	10/13/2020	09/22/2020	10/17/2020				203.33	0.00	0.00	203.33
SUPPLIES										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
O1500		OLYMPUS AMERICA	203.33	0.00	0.00	203.33

Vendor#
11069Vendor Name
PABLO GARZA ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
101420	10/14/2020	10/14/2020	10/14/2020				2,453.75	0.00	0.00	2,453.75
CONTRACT EMPLOYEE <i>9/12/20 - 10/12/20</i>										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11069		PABLO GARZA	2,453.75	0.00	0.00	2,453.75

Vendor#
11155Vendor Name
PARA ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6885 ✓	10/05/2020	10/01/2020	10/31/2020				3,084.00	0.00	0.00	3,084.00
REVENUE INTEGRITY PROGRAM										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11155		PARA	3,084.00	0.00	0.00	3,084.00

Vendor#
10152Vendor Name
PARTSSOURCE, LLC ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
03605186 ✓	10/14/2020	09/30/2020	09/30/2020				119.04	0.00	0.00	119.04
ICU BED REPAIR										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10152		PARTSSOURCE, LL	119.04	0.00	0.00	119.04

Vendor#
P2100Vendor Name
PORT LAVACA WAVE ✓Class
W

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
093020	10/14/2020	09/30/2020	10/25/2020				1,780.00	0.00	0.00	1,780.00
AD										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
P2100		PORT LAVACA WAVE	1,780.00	0.00	0.00	1,780.00

Vendor#
P2200Vendor Name
POWER HARDWARE ✓Class
W

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
A65472 ✓	09/30/2020	08/31/2020	10/29/2020				22.99	0.00	0.00	22.99
SUPPLIES										

13/16

254802 ✓ 10/14/2020 10/01/2020 10/11/2020 790.00 0.00 0.00 790.00 ✓

AD

Vendor Totals: Number Name Gross Discount No-Pay Net
10699 SIGN AD, LTD. 790.00 0.00 0.00 790.00

Vendor#
S2353

Vendor Name
SMITHS MEDICAL ASD INC ✓

Class Pay Code

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
15980479 ✓ 10/13/2020 09/12/2020 10/13/2020 265.12 0.00 0.00 265.12 ✓

SUPPLIES

15989342 ✓ 10/13/2020 09/22/2020 10/13/2020 66.82 0.00 0.00 66.82 ✓

SUPPLIES

Vendor Totals: Number Name Gross Discount No-Pay Net
S2353 SMITHS MEDICAL A 331.94 0.00 0.00 331.94

Vendor#
S2345

Vendor Name
SOUTHEAST TEXAS HEALTH SYS W ✓

Class Pay Code

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
26428 ✓ 10/14/2020 10/01/2020 10/31/2020 5,000.00 0.00 0.00 5,000.00 ✓

QRTL DUES

Vendor Totals: Number Name Gross Discount No-Pay Net
S2345 SOUTHEAST TEXAS 5,000.00 0.00 0.00 5,000.00

Vendor#
S3960

Vendor Name
STERICYCLE, INC ✓

Class Pay Code

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
4009610884 ✓ 09/16/2020 10/01/2020 10/31/2020 2,415.00 0.00 0.00 2,415.00 ✓

DISPOSAL SERVICE

Vendor Totals: Number Name Gross Discount No-Pay Net
S3960 STERICYCLE, INC 2,415.00 0.00 0.00 2,415.00

Vendor#
S2833

Vendor Name
STRYKER ENDOSCOPY ✓

Class Pay Code

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
9877404E ✓ 10/13/2020 09/28/2020 10/13/2020 660.09 0.00 0.00 660.09 ✓

SUPPLIES

Vendor Totals: Number Name Gross Discount No-Pay Net
S2833 STRYKER ENDOSC 660.09 0.00 0.00 660.09

Vendor#
S2830

Vendor Name
STRYKER SALES CORP ✓

Class Pay Code

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
900610972 ✓ 10/13/2020 11/18/2019 10/13/2020 47.40 0.00 0.00 47.40 ✓

SUPPLIES

900685974 ✓ 10/13/2020 12/10/2019 10/13/2020 1,460.72 0.00 0.00 1,460.72 ✓

SUPPLIES

900811379 ✓ 10/13/2020 01/20/2020 10/13/2020 730.36 0.00 0.00 730.36 ✓

SUPPLIES

900886719 ✓ 10/13/2020 02/10/2020 10/13/2020 730.36 0.00 0.00 730.36 ✓

SUPPLIES

9200003669 ✓ 10/13/2020 02/17/2020 09/21/2020 125.28 0.00 0.00 125.28 ✓

SUPPLIES

Vendor Totals: Number Name Gross Discount No-Pay Net
S2830 STRYKER SALES C 3,094.12 0.00 0.00 3,094.12

Vendor#
12440

Vendor Name
SUN LIFE ASSURANCE COMPANY ✓

Class Pay Code

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
091720 09/30/2020 09/17/2020 10/01/2020 2,405.09 0.00 0.00 2,405.09 ✓

INSURANCE

Vendor Totals: Number Name Gross Discount No-Pay Net
12440 SUN LIFE ASSURAN 2,405.09 0.00 0.00 2,405.09

Vendor#
12476

Vendor Name
SUN LIFE FINANCIAL ✓

Class Pay Code

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
092420 09/30/2020 09/24/2020 10/01/2020 10,348.20 0.00 0.00 10,348.20 ✓

INSURANCE

	Vendor Totals:		Number		Name		Gross		Discount		No-Pay		Net	
	12476				SUN LIFE FINANCIAL		10,348.20		0.00		0.00		10,348.20	
Vendor#					Vendor Name		Class		Pay Code					
T1915					TEXAS GLASS & TINTING		M							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net			
	116077	✓ 10/14/2020	09/18/2020	09/18/2020				1,795.00	0.00	0.00	1,795.00	✓		
					FIX BROKEN WINDOW									
	Vendor Totals:		Number		Name		Gross		Discount		No-Pay		Net	
	T1915				TEXAS GLASS & TINTING		1,795.00		0.00		0.00		1,795.00	
Vendor#					Vendor Name		Class		Pay Code					
11100					THE US CONSULTING GROUP									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net			
	340380291	✓ 10/14/2020	10/07/2020	11/01/2020				2,194.93	0.00	0.00	2,194.93	✓		
					TRASH SERVICE									
	Vendor Totals:		Number		Name		Gross		Discount		No-Pay		Net	
	11100				THE US CONSULTING GROUP		2,194.93		0.00		0.00		2,194.93	
Vendor#					Vendor Name		Class		Pay Code					
12168					TRANSCAT, INC.									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net			
	11803245	✓ 09/30/2020	09/17/2020	10/17/2020				1,049.00	0.00	0.00	1,049.00	✓		
					CALIBRATION ONSITE SERVICE									
	3077617	✓ 10/14/2020	09/29/2020	10/17/2020				468.00	0.00	0.00	468.00	✓		
					CALIBRATION									
	Vendor Totals:		Number		Name		Gross		Discount		No-Pay		Net	
	12168				TRANSCAT, INC.		1,517.00		0.00		0.00		1,517.00	
Vendor#					Vendor Name		Class		Pay Code					
U1054					UNIFIRST HOLDINGS		W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net			
	8400343955	✓ 10/09/2020	10/01/2020	10/26/2020				148.53	0.00	0.00	148.53	✓		
					LAUNDRY									
	8400343934	✓ 10/09/2020	10/01/2020	10/26/2020				1,047.82	0.00	0.00	1,047.82	✓		
					LAUNDRY									
	8400343903	✓ 10/09/2020	10/01/2020	10/26/2020				25.25	0.00	0.00	25.25	✓		
					LAUNDRY									
	8400343907	✓ 10/09/2020	10/01/2020	10/26/2020				169.44	0.00	0.00	169.44	✓		
					LAUNDRY									
	8400343908	✓ 10/09/2020	10/01/2020	10/26/2020				173.83	0.00	0.00	173.83	✓		
					LAUNDRY									
	8400343906	✓ 10/09/2020	10/01/2020	10/26/2020				142.77	0.00	0.00	142.77	✓		
					LAUNDRY									
	8400343920	✓ 10/09/2020	10/01/2020	10/26/2020				85.45	0.00	0.00	85.45	✓		
					LAUNDRY									
	8400343905	✓ 10/09/2020	10/01/2020	10/26/2020				131.55	0.00	0.00	131.55	✓		
					LAUNDRY									
	8400344151	✓ 10/09/2020	10/05/2020	10/30/2020				42.18	0.00	0.00	42.18	✓		
					LAUNDRY									
	8400344150	✓ 10/09/2020	10/05/2020	10/30/2020				45.15	0.00	0.00	45.15	✓		
					LAUNDRY									
	8400344174	✓ 10/09/2020	10/05/2020	10/30/2020				1,474.14	0.00	0.00	1,474.14	✓		
					LAUNDRY									
	8400344525	✓ 10/09/2020	10/08/2020	11/02/2020				155.04	0.00	0.00	155.04	✓		
					LAUNDRY									
	8400344521	✓ 10/09/2020	10/08/2020	11/02/2020				37.28	0.00	0.00	37.28	✓		
					LAUNDRY									
	8400344537	✓ 10/09/2020	10/08/2020	11/02/2020				80.20	0.00	0.00	80.20	✓		
					LAUNDRY									
	8400344550	✓ 10/09/2020	10/08/2020	11/02/2020				1,628.90	0.00	0.00	1,628.90	✓		
					LAUNDRY									
	8400344523	✓ 10/09/2020	10/08/2020	11/02/2020				131.55	0.00	0.00	131.55	✓		
					LAUNDRY									
	8400344526	✓ 10/09/2020	10/08/2020	11/02/2020				173.83	0.00	0.00	173.83	✓		

LAUNDRY

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8400344570	10/14/2020	10/08/2020	11/02/2020				134.79	0.00	0.00	134.79

LAUNDRY

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8400344524	10/14/2020	10/08/2020	11/02/2020				172.17	0.00	0.00	172.17

LAUNDRY

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
U1054	UNIFIRST HOLDING	5,999.87	0.00	0.00	5,999.87	

Vendor#
U1056

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
11707255	10/14/2020	10/06/2020	10/21/2020				136.96	0.00	0.00	136.96

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
U1056	UNIFORM ADVANT/	136.96	0.00	0.00	136.96	

Vendor#
U1350

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
778941380	10/14/2020	09/19/2020	09/19/2020				338.38	0.00	0.00	338.38

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
U1350	UPS	338.38	0.00	0.00	338.38	

Vendor#
V1471

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
20090177	10/14/2020	09/30/2020	09/30/2020				280.00	0.00	0.00	280.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
V1471	VICTORIA RADIOWORKS, LTD	720.00	0.00	0.00	720.00	

Vendor#
12548

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
20090176	10/14/2020	09/30/2020	09/30/2020				280.00	0.00	0.00	280.00
20090179	10/14/2020	09/30/2020	09/30/2020				160.00	0.00	0.00	160.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
V1471	VICTORIA RADIOWORKS, LTD	720.00	0.00	0.00	720.00	

Vendor#
12548

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0920DR4677	09/30/2020	09/30/2020	09/30/2020				129.60	0.00	0.00	129.60

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12548	WAGEWORKS, INC	129.60	0.00	0.00	129.60	

Vendor#
10793

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
101220	10/14/2020	10/12/2020	10/12/2020				4,216.37	0.00	0.00	4,216.37

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10793	WAGEWORKS, INC.	4,216.37	0.00	0.00	4,216.37	

Vendor#
W1270

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
648737	09/30/2020	09/30/2020	09/30/2020				80.00	0.00	0.00	80.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
W1270	WISCONSIN STATE	80.00	0.00	0.00	80.00	

288 + 128.60 =

62 + 454.20 =

28 + 52 =

14 + 26 =

14 + 26 =

28 + 52 =

350 + 84.20 =

OCT 15 2020
COUNTY AUDITOR
CALHOUN COUNTY, ALAck#
187622-
187724

Report Summary

Gross	Discount	No-Pay	Net
288,186.60	0.00	0.00	288,186.60

pg 2 correction
pg 5 correction
pg 12 correction

{ + 62,494.20
 { < 2852
 { + 14.26
 { < 14.26
 { + 2852
 { 2852, 1.07, 0.00

McKESSON

STATEMENT

As of: 10/16/2020

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory:

Customer: 632536

Date: 10/17/2020

As of: 10/16/2020 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 10/17/2020 ITEMS NOT PAID (✓)

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 8,481.38 USD

Future Due: 0.00

Past Due: 805.39

Last Payment 2,451.97
10/07/2017

If Paid By 10/20/2020,
Pay This Amount:

8,295.64 USD

If Paid After 10/20/2020,
Pay this Amount:

8,481.38 USD

Due If Paid On Time:
USD
Disc lost if paid late:

8,295.64

185.74

Due If Paid Late:
USD

8,481.38

59.08 +
3,993.72 +
291.50 +
3,527.89 +
94.40 +
329.04 +
8,295.64 =

CK # 500143

APPROVED
ON

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

As of: 10/16/2020

Page: 001

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

Company: 8000

HEB PHCY 0434/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 190813

Date: 10/17/2020

As of: 10/16/2020
Mail to:Page: 001
Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 190813 PLEASE CHECK ANY
Date: 10/17/2020 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 190813 HEB PHCY 0434/MEM MED PHS											
0/14/2020	10/20/2020	7229390970	2017020185	115Invoice	1.12	55.98		54.86 ✓		7229390970	
0/16/2020	10/20/2020	7229914042	2017020417	115Invoice	0.09	4.31		4.22 ✓		7229914042	

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

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

Subtotals: 60.29 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 22,926.71
0/12/2020If Paid By 10/20/2020,
Pay This Amount:

59.08 USD

If Paid After 10/20/2020,
Pay this Amount:

60.29 USD

Due If Paid On Time:
USD

59.08

Disc lost if paid late:

1.21

Due If Paid Late:
USD

60.29

APPROVED
ON
OCT 19 2020
COUNTY AUDITOR
GALVESTON COUNTY, TEXAS

MCKESSON

STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 10/16/2020

Page: 001

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

DC: 8115

Territory: 400

Customer: 256342
Date: 10/17/2020

As of: 10/16/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/17/2020 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS											
0/12/2020	10/20/2020	7228853258	2670115672	115Invoice	0.01	0.32		0.31 ✓		7228853258	
0/12/2020	10/20/2020	7228853259	1011200203-00	115Invoice	38.47	1,923.45		1,884.98 ✓		7228853259	
0/12/2020	10/20/2020	7229048477	837001210	195Invoice	3.05	152.72		149.67 ✓		7229048477	
0/13/2020	10/20/2020	7229317221	837336543	195Invoice	7.16	358.01		350.85 ✓		7229317221	
0/13/2020	10/20/2020	7229350444	00010122020TM	115Invoice	0.81	40.55		39.74 ✓		7229350444	
0/14/2020	10/20/2020	7229583710	837562581	195Invoice	4.45	222.58		218.13 ✓		7229583710	
0/15/2020	10/20/2020	7229669873	9870130051	115Invoice	1.37	68.35		66.98 ✓		7229669873	
0/15/2020	10/20/2020	7229669875	9870131161	115Invoice	16.91	845.48		828.57 ✓		7229669875	
0/15/2020	10/20/2020	7229669876	1014200248-00	115Invoice	5.38	269.04		263.66 ✓		7229669876	
0/15/2020	10/20/2020	7229838677	837816184	195Invoice	1.06	52.80		51.74 ✓		7229838677	
0/16/2020	10/20/2020	7230088988	838036857	195Invoice	2.84	141.94		139.10 ✓		7230088988	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 4,075.24 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 22,926.71
0/12/2020

If Paid By 10/20/2020,
Pay This Amount:

3,993.73 USD

If Paid After 10/20/2020,
Pay this Amount:

4,075.24 USD

Due If Paid On Time:

USD 3,993.73

Disc lost if paid late:

81.51

Due If Paid Late:

USD 4,075.24

CK # 500143

APPROVED
COT

OCT 19 2020

COUNTY ATTORNEY
GALVEZ COUNTY, TEXAS

McKESSON

STATEMENT

As of: 10/16/2020

Page: 001

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

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: 10/17/2020

As of: 10/16/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 262252 PLEASE CHECK ANY
Date: 10/17/2020 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 262252 CVS PHCY 7006/MEMORIA PHS											
0/15/2020	10/20/2020	7229670336	918734	115Invoice	0.02	1.24		1.22 ✓		7229670336	
0/15/2020	10/20/2020	7229670337	918734	115Invoice	5.92	296.20		290.28 ✓		7229670337	

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals: 297.44 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 33,115.38
0/05/2020

If Paid By 10/20/2020,
Pay This Amount:

291.50 USD

If Paid After 10/20/2020,
Pay this Amount:

297.44 USD

Due If Paid On Time:
USD

291.50 ✓

Disc lost if paid late:

5.94

Due If Paid Late:
USD

297.44

APPROVED
OK

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

Company: 8000

HEB PHY FC 490/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 10/16/2020

Page: 001

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

DC: 8115

Territory: 400

Customer: 464450
Date: 10/17/2020

As of: 10/16/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 464450 PLEASE CHECK ANY
Date: 10/17/2020 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 464450 HEB PHY FC 490/MEM MC PHS											
0/13/2020	10/20/2020	7229139580	55x599288	115Invoice	56.95	2,847.59		2,790.64 ✓		7229139580	
0/14/2020	10/20/2020	7229385246	55x601635	115Invoice	18.64	931.89		913.25 ✓		7229385246	
0/14/2020	10/20/2020	7229623096	55x594531	115Invoice	12.41	620.27		607.86 ✓		7229623096	
0/14/2020	10/14/2020	7229623375	55X592325	115Credit		607.86- P		607.86- P ✓		7229623375	
0/15/2020	10/15/2020	7229898902	MFC PR CORR CR	Pricing Cor		197.53- P		197.53- P ✓		7229898902	
0/15/2020	10/20/2020	7229898903	MFC PR CORR IN	Pricing Cor	0.40	20.07		19.67 ✓		7229898903	
0/16/2020	10/20/2020	7229909452	55x606754	115Invoice	0.04	1.90		1.86 ✓		7229909452	

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

TOTAL: Customer Number 464450 HEB PHY FC 490/MEM MC PHS

Subtotals: 3,616.33 USD

Future Due: 0.00

Past Due: 805.39-

Last Payment 0/12/2020 22,926.71

If Paid By 10/20/2020,
Pay This Amount:

3,527.89 USD

If Paid After 10/20/2020,
Pay this Amount:

3,616.33 USD

Due If Paid On Time:
USD

3,527.89

Disc lost if paid late:

88.44

Due If Paid Late:
USD

3,616.33

APPROVED
OR

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 10/16/2020

Page: 001

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

DC: 8115

Territory: 400

Customer: 835434
Date: 10/17/2020

As of: 10/16/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835434 PLEASE CHECK ANY
Date: 10/17/2020 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835434	CVS PHCY 8923/MEM MC PHS										
0/15/2020	10/20/2020	7229666577	918733	115Invoice	1.93	96.33		94.40 ✓		7229666577	

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

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

96.33 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 33,115.38
0/05/2020

If Paid By 10/20/2020,
Pay This Amount:

94.40 USD

If Paid After 10/20/2020,
Pay this Amount:

96.33 USD

Due If Paid On Time:

USD 94.40

Disc lost if paid late:

1.93

Due If Paid Late:

USD 96.33

APPROVED
COT

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

As of: 10/16/2020

Page: 001

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

Company: 8000

CVS PHCY 7475/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 835438
Date: 10/17/2020As of: 10/16/2020 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 835438 PLEASE CHECK ANY
Date: 10/17/2020 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835438	CVS PHCY 7475/MEM MC PHS										
0/16/2020	10/20/2020	7230115085	919457	115Invoice	6.71	335.75		329.04	✓	7230115085	

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

TOTAL: Customer Number 835438 CVS PHCY 7475/MEM MC PHS
Subtotals:

335.75 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 22,926.71
0/12/2020If Paid By 10/20/2020,
Pay This Amount:

329.04 USD

If Paid After 10/20/2020,
Pay this Amount:

335.75 USD

Due If Paid On Time:

USD 329.04

Disc lost if paid late:

6.71

Due If Paid Late:

USD 335.75

APPROVED
ON

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Sold By:

AMERISOURCEBERGEN DRUG
CORPORATION
1300 MORRIS DRIVE
CHESTERBROOK PA 19087

Customer:

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

Remit To:

AMERISOURCEBERGEN
P.O. Box 905223
CHARLOTTE NC 28290-5223

Customer Number

0100135284 / 037028186

Terms

Monday - Friday due in 7 days

Summary

Not Yet Due:	0.00
Current:	400.34
Past Due:	0.00
Total Due:	400.34
Account Balance:	400.34

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
10-12-2020	10-23-2020	3043429097	158464	Invoice	52.51		0.00	52.51
10-12-2020	10-23-2020	3043429098	158466	Invoice	176.72		0.00	176.72
10-13-2020	10-23-2020	3043481968	158518	Invoice	141.23		0.00	141.23
10-14-2020	10-23-2020	3043526082	158527	Invoice	14.21		0.00	14.21
10-15-2020	10-23-2020	3043586430	158541	Invoice	5.66		0.00	5.66
10-16-2020	10-23-2020	3043628176	158544	Invoice	10.01		0.00	10.01

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
400.34	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
10-16-2020	(21.65)

Reminders

Due Date	Amount
10-23-2020	400.34
Total Due:	400.34

CK # 500144

APPROVED
OK

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- October 12, 2020 - October 18, 2020**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>	
10/13/2020	PAY PLUS ACHTRANS 452579291 101000691344134	- 3rd Party Payor Fee	6.01	
10/13/2020	MCKESSON DRUG AUTO ACH ACH04341649 910000165	- 340B Drug Program Expense	22926.71	
10/14/2020	PAY PLUS ACHTRANS 452579291 101000691932540	- 3rd Party Payor Fee	10.28	
10/15/2020	PAY PLUS ACHTRANS 452579291 101000693539583	- 3rd Party Payor Fee	77.78	
10/15/2020	TEXAS COUNTY DRS RECEIVABLE 0419 21000025109	- Retirement Funding	142439.6	
10/16/2020	PAY PLUS ACHTRANS 452579291 101000694323460	- 3rd Party Payor Fee	3.32	
10/16/2020	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	21.65	
10/16/2020	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	296775.45	
10/16/2020	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	-CitiBank Corporate Card Payment	3036.78	
			465,297.58	

Pay 6.01 +
Plus 10.28 +
77.78 +
3.32 +
97.39

465,297.58
22,926.71 -
142,439.60 -
21.65 -
3,036.78 -
97.39 +
97.39 =
0.00 =



Jason Anglin, CEO
Memorial Medical Center

10/19/2020
* Approved 10.14.20 CC
** Approved 10.05.20 CC

**PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS**

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>	<u>Amount</u>

Jason Anglin, CEO
Memorial Medical Center

**APPROVED
ON
OCT 19 2020
COUNTY AUDITOR
GALVESTON COUNTY, TEXAS**

RECEIVED

10/15/2020

OCT 15 2020

Coffman County Auditor

Vendor#
11836

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor Name

Class

Pay Code

GOLDENCREEK HEALTHCARE ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100820B	10/08/2020	10/08/2020	11/05/2020				704.00	0.00	0.00	704.00 ✓
	TRANSFER									
100820A	10/08/2020	10/08/2020	11/05/2020				1,614.91	0.00	0.00	1,614.91 ✓
	TRANSFER									
100820	10/08/2020	10/08/2020	11/05/2020				1,401.13	0.00	0.00	1,401.13 ✓
	TRANSFER									
100920	10/13/2020	10/09/2020	11/05/2020				29,738.61	0.00	0.00	29,738.61 ✓
	TRANSFER									
101220	10/13/2020	10/12/2020	11/05/2020				22,134.58	0.00	0.00	22,134.58 ✓
	TRANSFER									
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
11836			GOLDENCREEK HE		55,593.23		0.00	0.00	55,593.23	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	55,593.23	0.00	0.00	55,593.23

APPROVED
OK

OCT 15 2020

CK#
187726

Coffman County Auditor

RECEIVED

10/15/2020

10:53

OCT 15 2020

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor# 12696
Calhoun County Auditor

Vendor Name

Class

Pay Code

GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
093020B		09/30/2020	09/30/2020	11/05/2020			2,288.32	0.00	0.00	2,288.32 ✓
	TRANSFER									
100820A		10/08/2020	10/08/2020	11/05/2020			5,204.36	0.00	0.00	5,204.36 ✓
	TRANSFER									
100820		10/08/2020	10/08/2020	11/05/2020			449.98	0.00	0.00	449.98 ✓
	TRANSFER									
100820C		10/08/2020	10/08/2020	11/05/2020			2,459.64	0.00	0.00	2,459.64 ✓
	TRANSFER									
100820B		10/08/2020	10/08/2020	11/05/2020			8,370.18	0.00	0.00	8,370.18 ✓
	TRANSFER									
100920		10/13/2020	10/09/2020	11/05/2020			1,936.90	0.00	0.00	1,936.90 ✓
	TRANSFER									
101420		10/14/2020	10/14/2020	11/05/2020			881.71	0.00	0.00	881.71 ✓
	RECOUP - Medicare									
100820D		10/15/2020	10/08/2020	11/05/2020			699.74	0.00	0.00	699.74 ✓
	TRANSFER									
Vendor Totals:	Number	Name		Gross		Discount	No-Pay	Net		
12696		GULF POINTE PLAZ		22,290.83		0.00	0.00	22,290.83		

Report Summary

Grand Totals:

Gross	Discount	No-Pay	Net
22,290.83	0.00	0.00	22,290.83

APPROVED
ON
OCT 15 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK#
187727

RECEIVED

10/15/2020

10:54

OCT 15 2020**Calhoun County Auditor**

Vendor#

13004

Vendor Name

TUSCANY VILLAGE

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

Pay Code

ap_open_invoice.template

0

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100820A	10/08/2020	10/08/2020	11/05/2020				14,687.67	0.00	0.00	14,687.67
	TRANSFER									
100820	10/08/2020	10/08/2020	11/05/2020				16,099.89	0.00	0.00	16,099.89
	TRANSFER									
100920	10/13/2020	10/09/2020	11/05/2020				5,643.18	0.00	0.00	5,643.18
	TRANSFER									
101220	10/13/2020	10/12/2020	11/05/2020				15,464.52	0.00	0.00	15,464.52
	TRANSFER									
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
13004			TUSCANY VILLAGE			51,895.26	0.00	0.00		51,895.26

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	51,895.26	0.00	0.00	51,895.26

APPROVED
CA**OCT 15 2020****COUNTY AUDITOR**
CALHOUN COUNTY, TEXAS

CK#

187728

RECEIVED

10/15/2020

10:46

OCT 15 2020**Calhoun County Auditor**

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Vendor#

Vendor Name

Class

Pay Code

12792

BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100820A	10/08/2020	10/08/2020	11/05/2020				650.27	0.00	0.00	650.27 ✓
	TRANSFER									
100820	10/08/2020	10/08/2020	11/05/2020				14,909.56	0.00	0.00	14,909.56 ✓
	TRANSFER									
10820	10/08/2020	10/08/2020	11/05/2020				14,256.00	0.00	0.00	14,256.00 ✓
	TRANSFER									
100820B	10/13/2020	10/08/2020	11/05/2020				282.92	0.00	0.00	282.92 ✓
	TRANSFER									
100920	10/13/2020	10/09/2020	11/05/2020				20,717.53	0.00	0.00	20,717.53 ✓
	TRANSFER									
100920A	10/13/2020	10/09/2020	11/05/2020				27,357.03	0.00	0.00	27,357.03 ✓
	TRANSFER									
101220	10/13/2020	10/12/2020	11/05/2020				9,994.20	0.00	0.00	9,994.20 ✓
	TRANSFER									
101220A	10/13/2020	10/12/2020	11/05/2020				704.00	0.00	0.00	704.00 ✓
	TRANSFER									
100820C	10/14/2020	10/08/2020	11/05/2020				2,591.29	0.00	0.00	2,591.29 ✓

RECoup - Medicare

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12792		BETHANY SENIOR I	91,462.80	0.00	0.00	91,462.80

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	91,462.80	0.00	0.00	91,462.80

APPROVED
OK**OCT 15 2020**

ck#

187725

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

8

RUN DATE:10/19/20

TIME:10:44

MEMORIAL MEDICAL CENTER

CHECK REGISTER

10/21/20 THRU 10/21/20

PAGE 1

GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	187622	10/21/20	586.52	ABILITY NETWORK (SHIFTHOUND)
A/P	187623	10/21/20	378.50	ACE HARDWARE 15521
A/P	187624	10/21/20	3,513.55	AIRGAS USA, LLC - CENTRAL DIV
A/P	187625	10/21/20	2,463.75	ALLYSON SNOPE
A/P	187626	10/21/20	114.04	AMBU INC
A/P	187627	10/21/20	14,628.83	AMERICAN PROFICIENCY INSTITUTE
A/P	187628	10/21/20	18.00	ANNOUNCEMENTS PLUS TOO AGAIN
A/P	187629	10/21/20	3,766.77	BAXTER HEALTHCARE
A/P	187630	10/21/20	1,151.80	BAYER HEALTHCARE
A/P	187631	10/21/20	470.00	BOSART LOCK & KEY INC
A/P	187632	10/21/20	3,404.00	BUILDING KID STEPS
A/P	187633	10/21/20	975.00	C-D ELECTRIC
A/P	187634	10/21/20	264.00	CABLES AND SENSORS
A/P	187635	10/21/20	103.45	CALHOUN COUNTY
A/P	187636	10/21/20	90.00	CALHOUN COUNTY INDIGENT ACCOUN
A/P	187637	10/21/20	641.64	CARDINAL HEALTH 414, INC.
A/P	187638	10/21/20	5,203.00	CAREFUSION
A/P	187639	10/21/20	1,699.00	CERVEY, LLC
A/P	187640	10/21/20	1,292.50	CHRISTINA ZAPATA-ARROYO
A/P	187641	10/21/20	31,052.71	CLINICAL PATHOLOGY LABS
A/P	187642	10/21/20	877.94	COMBINED INSURANCE
A/P	187643	10/21/20	572.89	CONMED CORPORATION
A/P	187644	10/21/20	2,011.13	COVIDIEN
A/P	187645	10/21/20	195.21	CYRACOM LLC
A/P	187646	10/21/20	184.50	CYTO SUPPLIES
A/P	187647	10/21/20	1,147.91	DEWITT POTH & SON
A/P	187648	10/21/20	50,311.25	DIAMOND HEALTHCARE CORP
A/P	187649	10/21/20	14.26	DIANNE ATKINSON
A/P	187650	10/21/20	78.00	DILON TECHNOLOGIES
A/P	187651	10/21/20	3,106.30	DRIESSEN WATER INC.
A/P	187652	10/21/20	67.11	DYNATRONICS CORPORATION
A/P	187653	10/21/20	280.00	EAGLE FIRE & SAFETY INC
A/P	187654	10/21/20	461.50	EDWARDS PLUMBING INC
A/P	187655	10/21/20	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	187656	10/21/20	160.00	EXCEL CONTRACTING
A/P	187657	10/21/20	52.10	FASTENAL COMPANY
A/P	187658	10/21/20	243.25	FEDERAL EXPRESS CORP.
A/P	187659	10/21/20	306.68	FISHER HEALTHCARE
A/P	187660	10/21/20	11,195.37	GE PRECISION HEALTHCARE, LLC
A/P	187661	10/21/20	535.41	GENZYME CORPORATION
A/P	187662	10/21/20	9,892.27	GLAXOSMITHKLINE PHARMACUETICAL
A/P	187663	10/21/20	194.10	GRAINGER
A/P	187664	10/21/20	10,028.68	GREAT AMERICAN FINANCIAL SVCS
A/P	187665	10/21/20	1,471.03	GULF COAST PAPER COMPANY
A/P	187666	10/21/20	90.48	HEALTH CARE LOGISTICS INC
A/P	187667	10/21/20	831.50	HEALTHCARE CODING & CONSULTING
A/P	187668	10/21/20	25,929.40	HEALTHCARE FINANCIAL SERVICES
A/P	187669	10/21/20	605.49	HEB CREDIT RECEIVABLES DEPT308
A/P	187670	10/21/20	300.71	HOLOGIC INC
A/P	187671	10/21/20	14,668.35	HUNTER PHARMACY SERVICES

RUN DATE:10/19/20
TIME:10:44

MEMORIAL MEDICAL CENTER
CHECK REGISTER
10/21/20 THRU 10/21/20

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	187672	10/21/20	240.00	INTOXIMETERS INC
A/P	187673	10/21/20	504.71	IRON MOUNTAIN
A/P	187674	10/21/20	2,317.46	J & J HEALTH CARE SYSTEMS, INC
A/P	187675	10/21/20	105.54	LABCORP OF AMERICA HOLDINGS
A/P	187676	10/21/20	380.11	LOWE'S HOME CENTERS INC
A/P	187677	10/21/20	20,748.62	LUBY'S FUDDRUCKERS RESTAURANTS
A/P	187678	10/21/20	840.86	M G TRUST
A/P	187679	10/21/20	.00	VOIDED
A/P	187680	10/21/20	9,212.08	MCKESSON MEDICAL SURGICAL INC
A/P	187681	10/21/20	284.80	MEDELA INC
A/P	187682	10/21/20	3,698.37	MEDICAL DATA SYSTEMS, INC.
A/P	187683	10/21/20	1,200.00	MEDICAL TECHNOLOGY ASSOCIATES
A/P	187684	10/21/20	608.70	MEDLINE INDUSTRIES INC
A/P	187685	10/21/20	165.00	MEMORIAL MEDICAL CLINIC
A/P	187686	10/21/20	433.10	MID-COAST ELECTRIC SUPPLY, INC
A/P	187687	10/21/20	2,080.00	MINDRAY DS USA, INC.
A/P	187688	10/21/20	314.55	MMC AUXILIARY GIFT SHOP
A/P	187689	10/21/20	3,279.36	MORRIS & DICKSON CO, LLC
A/P	187690	10/21/20	141.72	MXR IMAGING, INC
A/P	187691	10/21/20	28.52	NADINE GARNER
A/P	187692	10/21/20	79.80	NUANCE COMMUNICATIONS, INC
A/P	187693	10/21/20	473.28	OCCUPRO LLC
A/P	187694	10/21/20	203.33	OLYMPUS AMERICA INC
A/P	187695	10/21/20	2,453.75	PABLO GARZA
A/P	187696	10/21/20	3,084.00	PARA
A/P	187697	10/21/20	119.04	PARTSSOURCE, LLC
A/P	187698	10/21/20	1,780.00	PORT LAVACA WAVE
A/P	187699	10/21/20	127.38	POWER HARDWARE
A/P	187700	10/21/20	2,109.12	PRESS GANEY ASSOCIATES, INC.
A/P	187701	10/21/20	124.50	REED, CLAYMON, MEBKER & HARGET
A/P	187702	10/21/20	1,861.45	REVCYCLE+, INC.
A/P	187703	10/21/20	72.32	SHARN INC
A/P	187704	10/21/20	411.07	SHIRLEY KARNEI
A/P	187705	10/21/20	1,333.33	SIEMENS FINANCIAL SERVICES
A/P	187706	10/21/20	790.00	SIGN AD, LTD.
A/P	187707	10/21/20	331.94	SMITHS MEDICAL ASD INC
A/P	187708	10/21/20	5,000.00	SOUTHEAST TEXAS HEALTH SYS
A/P	187709	10/21/20	2,415.00	STERICYCLE, INC
A/P	187710	10/21/20	660.09	STRYKER ENDOSCOPY
A/P	187711	10/21/20	3,094.12	STRYKER SALES CORP
A/P	187712	10/21/20	2,405.09	SUN LIFE ASSURANCE COMPANY
A/P	187713	10/21/20	10,348.20	SUN LIFE FINANCIAL
A/P	187714	10/21/20	1,795.00	TEXAS GLASS & TINTING
A/P	187715	10/21/20	2,194.93	THE US CONSULTING GROUP
A/P	187716	10/21/20	1,517.00	TRANSCAT, INC.
A/P	187717	10/21/20	.00	VOIDED
A/P	187718	10/21/20	5,999.87	UNIFIRST HOLDINGS
A/P	187719	10/21/20	136.96	UNIFORM ADVANTAGE
A/P	187720	10/21/20	338.38	UPS
A/P	187721	10/21/20	720.00	VICTORIA RADIOWORKS, LTD
A/P	187722	10/21/20	129.60	WAGeworks, INC

RUN DATE:10/19/20
TIME:10:44

MEMORIAL MEDICAL CENTER
CHECK REGISTER
10/21/20 THRU 10/21/20

PAGE 3
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
------	--------	------	--------	-------

A/P	187723	10/21/20	4,216.37	WAGeworks, INC.
A/P	187724	10/21/20	80.00	WISCONSIN STATE LABORATORY
A/P	187725	10/21/20	91,462.80	BETHANY SENIOR LIVING
A/P	187726	10/21/20	55,593.23	GOLDENCREEK HEALTHCARE
A/P	187727	10/21/20	22,290.83	GULF POINTE PLAZA
A/P	187728	10/21/20	51,895.26	TUSCANY VILLAGE
TOTALS:			571,922.92	

APPROVED
GM

OCT 21 2020

COUNCIL ALBERTA
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
10/19/2020

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens		38,742.91		217,469.49		256,212.40	133,149.46

Routing Information for Ashford Gardens:
Ashford Health Care Center Ltd Co

Broadmoor		50,331.62	50,231.62	22,790.91		22,890.91	22,790.91
------------------	--	-----------	-----------	-----------	--	-----------	-----------

Crescent		79,932.24	79,832.24	84,023.79		84,123.79	84,023.79
-----------------	--	-----------	-----------	-----------	--	-----------	-----------

Fort Bend		6,306.01		3,288.80		9,594.81	(40,667.22) NO TRANSFER
------------------	--	----------	--	----------	--	----------	----------------------------

Solera at W Houston		91,780.68	91,680.68	135,245.36		135,345.36	135,245.36
----------------------------	--	-----------	-----------	------------	--	------------	------------

Routing Information for Crescent / Solera at West Houston:
Cantex Health Care Centers III LLC

133,149.46 +
22,790.91 +
84,023.79 +
135,245.36 +
375,209.52

TOTAL TRANSFERS 375,209.52

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:

Jason Anglin, CEO

10/19/2020

APPROVED
OCT 19 2020
COUNTY ATTORNEY
CALHOUN COUNTY, TEXAS

Ashford Gardens

10/14/2020 HUMANA CHA DISB HCCLAIMPMT 390860 4200001674 TRN*1*014840101770589*1611013183\

10/14/2020 Amerigroup TXSC HCCLAIMPMT 3134414124 111000 TRN*1*3134414124*1752603231\

10/14/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101015800392*1912008361*0000TEX01\

10/14/2020 HEALTH HUMAN SVC HCCLAIMPMT 17460034113009 2 TRN*1*05G155461326436189*1746000156\

10/15/2020 HUMANA CHA DISB HCCLAIMPMT 390860 4200001856 TRN*1*014840101776427*1611013183\

10/15/2020 Amerigroup TXSC HCCLAIMPMT 3134524873 111000 TRN*1*3134524873*1752603231\

10/15/2020 UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1572215529*1411289245*000087726\

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101411900461*1912008361*0000TEX01\

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101114400082*1912008361*0000TEX01\

10/16/2020 UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1572215529*1411289245*000087726\

10/16/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101514600202*1912008361*0000TEX01\

10/16/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010151700708*1912008361*0000TEX01\

10/16/2020 UHC Community PI HCCLAIMPMT 746003411 910000 TRN*1*2020101516000530*1912008361*0000TEX01\

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	440.59	-	-	-	-	-	440.59
-	98,963.13	-	-	-	-	-	98,963.13
-	615.96	-	-	-	-	-	615.96
-	2,486.00	-	-	-	-	-	2,486.00
-	3,317.50	-	-	-	-	-	3,317.50
-	4,141.07	-	-	-	-	-	4,141.07
-	5,210.00	-	-	-	-	-	5,210.00
-	40,306.47	-	-	-	-	-	40,306.47
-	115.39	-	-	-	-	-	115.39
-	4,920.00	-	-	-	-	-	4,920.00
-	4,723.04	-	-	-	-	-	4,723.04
-	51,970.34	-	-	-	-	-	51,970.34
-	260.00	-	-	-	-	-	260.00
-	217,469.49	-	-	-	-	-	217,469.49

Broadmoor

10/13/2020 NOVITAS SOLUTION HCCLAIMPMT 676357 420000141 TRN*1*EFT5720738*1205296137*000004011\

10/14/2020 WIRE OUT CANTEX HEALTH CARE CENTERS III

10/15/2020 Deposit

10/15/2020 HUMANA CHA DISB HCCLAIMPMT 390861 4200001856 TRN*1*014840101776428*1611013183\

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101415900597*1912008361*0000TEX01\

10/15/2020 UHC Community PI HCCLAIMPMT 746003411 910000 TRN*1*2020101415600442*1912008361*0000TEX01\

10/16/2020 CK 71

10/16/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101514600357*1912008361*0000TEX01\

10/16/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101510900085*1912008361*0000TEX01\

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	835.99	-	-	-	-	-	835.99
5,978.24	-	-	-	-	-	-	-
-	3,872.00	-	-	-	-	-	3,872.00
-	1,104.40	-	-	-	-	-	1,104.40
-	1,244.83	-	-	-	-	-	1,244.83
-	6,702.00	-	-	-	-	-	6,702.00
44,253.38	-	-	-	-	-	-	-
-	2,615.18	-	-	-	-	-	2,615.18
-	6,416.51	-	-	-	-	-	6,416.51
50,231.62	22,790.91	-	-	-	-	-	22,790.91

Crescent

10/13/2020 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2 TRN*1*05G147641669860425*1746000156\

10/13/2020 UHC Community PI HCCLAIMPMT 746003411 910000 TRN*1*2020100915000139*1912008361*0000TEX01\

10/14/2020 WIRE OUT CANTEX HEALTH CARE CENTERS III

10/14/2020 AARP Supplementa HCCLAIMPMT 746003411 124384 TRN*1*1571731342*1362739571*000016273\

10/15/2020 Deposit

10/15/2020 MANAGEANDNET1718 MNS PMNT 000000000000268 41 0256183

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101415900340*1912008361*0000TEX01\

10/15/2020 UHC Community PI HCCLAIMPMT 746003411 910000 TRN*1*2020101415600222*1912008361*0000TEX01\

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010111600143*1912008361*0000TEX01\

10/15/2020 NOVITAS SOLUTION HCCLAIMPMT 676323 420000193 TRN*1*EFT5723712*1205296137*000004011\

10/16/2020 CK 103

10/16/2020 AARP Supplementa HCCLAIMPMT 746003411 124384 TRN*1*1572894443*1362739571*000016273\

10/16/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101514600357*1912008361*0000TEX01\

10/16/2020 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2 TRN*1*05G173721669860425*1746000156\

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	1,940.19	-	-	-	-	-	1,940.19
-	370.00	-	-	-	-	-	370.00
43,675.59	-	-	-	-	-	-	-
-	5,808.00	-	-	-	-	-	5,808.00
-	3,252.89	-	-	-	-	-	3,252.89
-	235.00	-	-	-	-	-	235.00
-	15,892.62	-	-	-	-	-	15,892.62
-	8,952.00	-	-	-	-	-	8,952.00
-	16,820.79	-	-	-	-	-	16,820.79
-	15,726.04	-	-	-	-	-	15,726.04
36,156.65	-	-	-	-	-	-	-
-	352.00	-	-	-	-	-	352.00
-	1,870.96	-	-	-	-	-	1,870.96
-	12,803.30	-	-	-	-	-	12,803.30
79,832.24	84,023.79	-	-	-	-	-	84,023.79

Fort Bend

10/13/2020 AARP Supplementa HCCLAIMPMT 746003411 124384 TRN*1*1571400584*1362739571*000016273\

10/16/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101510500176*1912008361*0000TEX01\

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	48.42	-	-	-	-	-	48.42
-	3,240.38	-	-	-	-	-	3,240.38
-	3,288.80	-	-	-	-	-	3,288.80

Solera at West Houston

10/13/2020 HUMANA INS CO HCCLAIMPMT 390862 830000573920 TRN*1*001290052963653*191263473\

10/14/2020 WIRE OUT CANTEX HEALTH CARE CENTERS III

10/14/2020 HUMANA CHA DISB HCCLAIMPMT 390862 4200001674 TRN*1*014840101770590*1611013183\

10/14/2020 Amerigroup TXSC HCCLAIMPMT 3134414125 111000 TRN*1*3134414125*1752603231\

10/14/2020 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2 TRN*1*05G155481497143259*1746000156\

10/15/2020 MANAGEANDNET1718 MNS PMNT 0000000000002482 41 0256180

10/15/2020 HUMANA INS CO HCCLAIMPMT 390862 830000587269 TRN*1*001290053079998*191263473\

10/15/2020 HUMANA INS CO HCCLAIMPMT 390862 830000586065 TRN*1*001290052993905*191263473\

10/15/2020 HUMANA INS CO HCCLAIMPMT 390862 830000560383 TRN*1*001290052982022*191263473\

10/15/2020 HUMANA INS CO HCCLAIMPMT 390862 830000561058 TRN*1*001290053018098*191263473\

10/15/2020 HUMANA INS CO HCCLAIMPMT 390862 830000561544 TRN*1*001290053042421*191263473\

10/15/2020 CARITEN HP HCCLAIMPMT 390862 42000018541544 TRN*1*010560011819487*1621579044\

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101412100607*1912008361*0000TEX01\

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101413000194*1912008361*0000TEX01\

10/15/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202010111600064*1912008361*0000TEX01\

10/16/2020 CK 1103

10/16/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020101515300337*1912008361*0000TEX01\

10/16/2020 UHC Community PI HCCLAIMPMT 746003411 910000 TRN*1*2020101511100751*1912008361*0000TEX01\

10/16/2020 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2 TRN*1*05G173731497143259*1746000156\

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	8,495.77	-	-	-	-	-	8,495.77
48,255.00	-	-	-	-	-	-	-
-	386.48	-	-	-	-	-	386.48
-	4,602.09	-	-	-	-	-	4,602.09
-	17,152.32	-	-	-	-	-	17,152.32
-	100.00	-	-	-	-	-	100.00
-	1,459.03	-	-	-	-	-	1,459.03
-	20,973.71	-	-	-	-	-	20,973.71
-	8,997.29	-	-	-	-	-	8,997.29
-	15,787.91	-	-	-	-	-	15,787.91
-	1,211.92	-	-	-	-	-	1,211.92
-	7,297.74	-	-	-	-	-	7,297.74
-	5,419.80	-	-	-	-	-	5,419.80
-	19,304.96	-	-	-	-	-	19,304.96
-	6,089.11	-	-	-	-	-	6,089.11
43,425.68	-	-	-	-	-	-	-
-	6,654.73	-	-	-	-	-	6,654.73
-	1,495.00	-	-	-	-	-	1,495.00
-	9,817.50	-	-	-	-	-	9,817.50
91,680.68	135,245.36	-	-	-	-	-	135,245.36
221,744.54	462,818.35	-	-	-	-	-	462,818.35

TOTALS

Quick View

Select Quick View Accounts

Account Number / Name

--

Account Type

Search

All

Select Group

Groups

Add Group

DDA

Data reported as of Oct 19, 2020 8

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
----------------	-----------------	-------------------	-------------------	-------------------

<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$256,212.40	\$268,845.17	\$256,212.40	\$194,339.02
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$22,890.91	\$49,140.33	\$22,890.91	\$58,112.60
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$84,123.79	\$90,612.91	\$84,123.79	\$105,254.18
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$9,594.81	\$35,418.66	\$9,594.81	\$6,354.43
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$135,345.36	\$152,184.56	\$135,345.36	\$160,803.81

* indicates *tc*

Page generated on 10/19/2020 at 8

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
10/19/2020

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek		18,832.26	71.85	86,695.13	-	125,455.54	45,342.96
					Bank Balance Variance	125,455.54	
					Leave in Balance	100.00	
					RETURN OF IGT	80,012.58	
					October Interest	-	
					November Interest	-	
					December Interest	-	
					Adjust Balance/Transfer Amt	45,342.96	

Routing Information for Golden Creek:
Nexion Health at Golden Creek

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:
Jason Anglin, CEO

10/19/2020

APPROVED
ON
OCT 19 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek

10/14/2020 ACH SETTLEMENT SERVICE 4105523439 9601693307
10/15/2020 Deposit
10/16/2020 CK 65

MMC PORTION							NH PORTION
Transfer-Out	Transfer-In	QJPP/Comp 1	QJPP/Comp 2	QJPP/Comp 3	QJPP/Comp 4&L aple	QJPP TI	
-	3,742.60					-	3,742.60
-	82,952.53					-	82,952.53
71.85	-					-	-
71.85	86,695.13	-	-	-	-	-	86,695.13

10/19/2020

Treasury Center

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

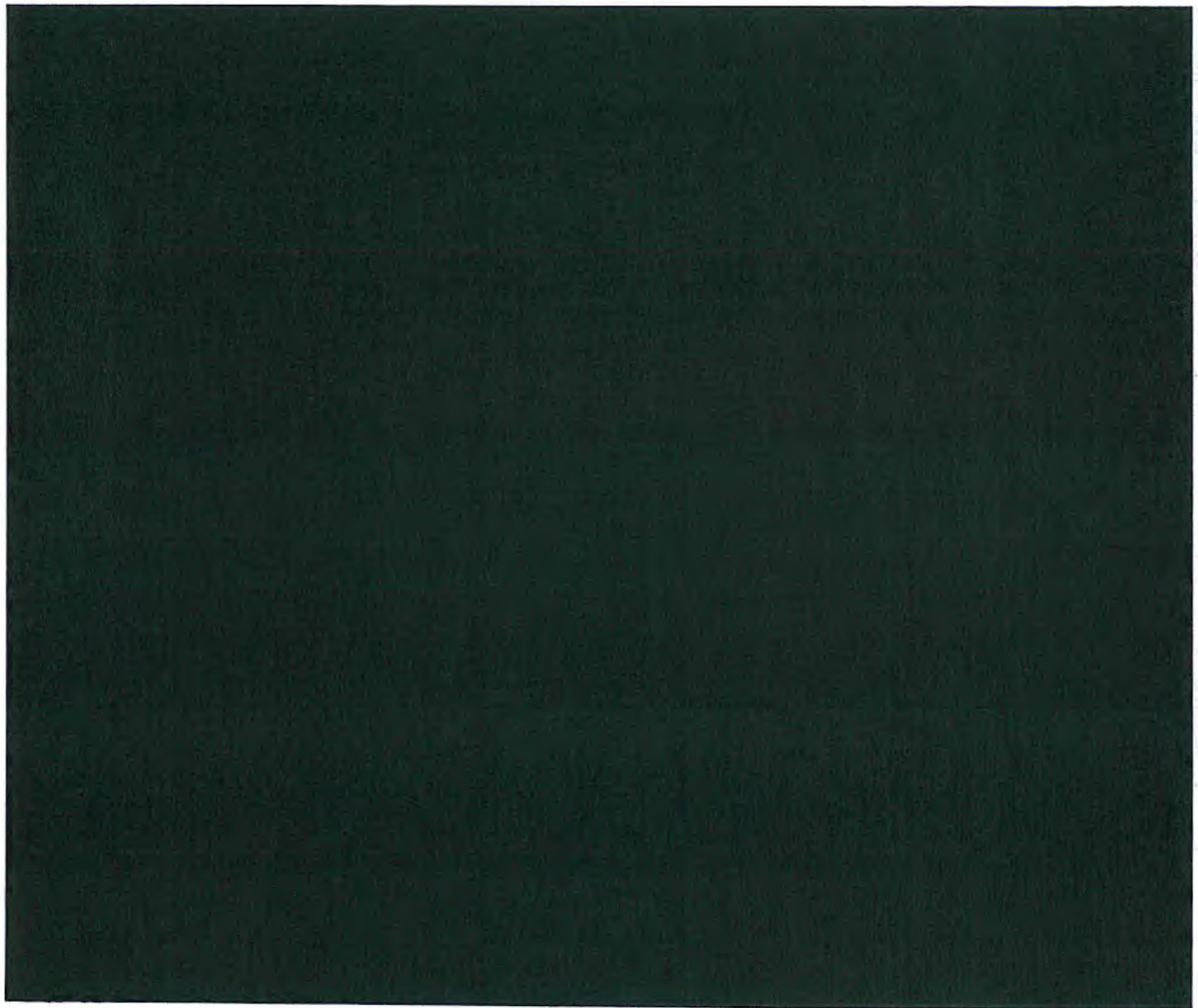
Add Group

DDA

Data reported as of Oct 19, 2020 8

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance

*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$125,455.54	\$125,455.54	\$125,455.54	\$125,527.39
--	--------------	--------------	--------------	--------------



* indicates re
Page generated on 10/19/2020 at 8

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
10/19/2020

C312

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
~~Gulf Pointe Plaza Private Pay~~	217715433			2,464.25			5,409.69	5,309.69
						Bank Balance	5,409.69	
						Variance		
						Leave in Balance	100.00	

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
~~Gulf Pointe Plaza Medicare/Medicaid~~	217715441		34,961.94	21,529.57			21,629.57	21,529.57
						Bank Balance	21,629.57	
						Variance		
						Leave in Balance	100.00	
						October Interest		
						November Interest		
						December Interest		
						Adjust Balance/Transfer Amt	5,309.69	
						check order	139.08	
						October Interest		
						November Interest		
						December Interest		
						Adjust Balance/Transfer Amt	21,529.57	
						TOTAL TRANSFERS	26,819.26	21,390.49

Routing Information for Gulf Pointe Plaza:

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:
Jason Anglin, CEO

10/19/2020

APPROVED
CN
OCT 19 2020
COURT ALBERT
CALHOUN COUNTY, TEXAS

debit for cks hit
this am - remaining
balance 21,490.49 -
wire did not go through
rejected.

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
10/19/2020

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza- Private Pay		2,945.44		2,464.25			5,409.69	5,309.69
						Bank Balance	5,409.69	
						Variance		
						Leave in Balance	100.00	
						October Interest	-	
						November Interest	-	
						December Interest	-	
						Adjust Balance/Transfer Amt	5,309.69	
Gulf Pointe Plaza-Medicare/Medicaid		35,061.94	34,961.94	21,529.57			21,629.57	21,529.57
						Bank Balance	21,629.57	
						Variance		
						Leave in Balance	100.00	
						October Interest	-	
						November Interest	-	
						December Interest	-	
						Adjust Balance/Transfer Amt	21,529.57	
TOTAL TRANSFERS							26,839.26	

Routing Information for Gulf Pointe Plaza:

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:
Jason Anglin, CEO

10/19/2020

APPROVED
ON
OCT 19 2020
COUNTY ALBUQUERQUE
OALMOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

10/14/2020 HUMANA CHA DISB HCCLAIMPMT 624982 4200001674 TRN*1*014840101767953*1611013183\

MMC PORTION						NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	
-	2,464.25	-	-	-	-	2,464.25
-	2,464.25	-	-	-	-	2,464.25

Gulf Pointe Plaza-Medicare/Medicaid

10/14/2020 WIRE OUT HMG SERVICES, LLC

10/15/2020 Deposit

MMC PORTION						NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	
34,961.94	-	-	-	-	-	-
-	21,529.57	-	-	-	-	21,529.57
34,961.94	21,529.57	-	-	-	-	21,529.57
34,961.94	23,993.82	-	-	-	-	23,993.82

10/19/2020

Treasury Center

Select Quick View Accounts

Account Number / Name

Account Type

Select Group

Groups

Add Group

All

DDA

Data reported as of Oct 19, 2020 8

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
*5441				
MMC -NH GULF POINTE				
PLAZA -	\$21,629.57	\$21,629.57	\$21,629.57	\$21,629.57
MEDICARE/MEDICAID				
*5433				
MMC -NH GULF POINTE	\$5,409.69	\$10,924.24	\$5,409.69	\$5,409.69
PLAZA - PRIVATE PAY				

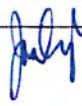
* indicates re
Page generated on 10/19/2020 at 8

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 10/19/2020

	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home	Test
Nursing Home		83,308.56	83,432.96	41,352.49			41,228.09	41,128.09	41,128.09
Tuscany Senior Living									100.00
						Bank Balance	41,228.09		
						Variance			
						Leave in Balance	100.00		

October Interest	-
November Interest	-
December Interest	-
Adjust Balance/Transfer Amt	41,128.09

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: 
 Jason Anglin, CEO 10/19/2020

APPROVED
ON
OCT 19 2020
COUNTY AUDITOR
GALVESTON COUNTY, TEXAS

MMC PORTION

Tuscany Senior Living

	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
10/14/2020 WIRE OUT LINBAR ENTERPRISES, LLC	83,208.56	-					-	-
10/14/2020 HARLAND CLARKE CHK ORDERS 1QRW071012452R5 91	139.08	-					-	-
10/14/2020 HARLAND CLARKE CHK ORDERS 1QRS691702212R5 91	35.32	-					-	-
10/14/2020 Molina HC of TX HCCLAIMPMT PN1275717894 4200 TRN*1*EFT	-	1,516.50					-	1,516.50
10/15/2020 Enhanced Analysis Ch	50.00	-					-	-
10/15/2020 Deposit	-	31,035.99					-	31,035.99
10/16/2020 K5 PLAN ADMINIST HCCLAIMPMT 179 111000024208 TRN*1*OK	-	8,800.00					-	8,800.00
	83,432.96	41,352.49	-	-	-	-	-	41,352.49

10/19/2020

Treasury Center

Select Quick View Accounts

Account Number / Name

Account Type

Select Group

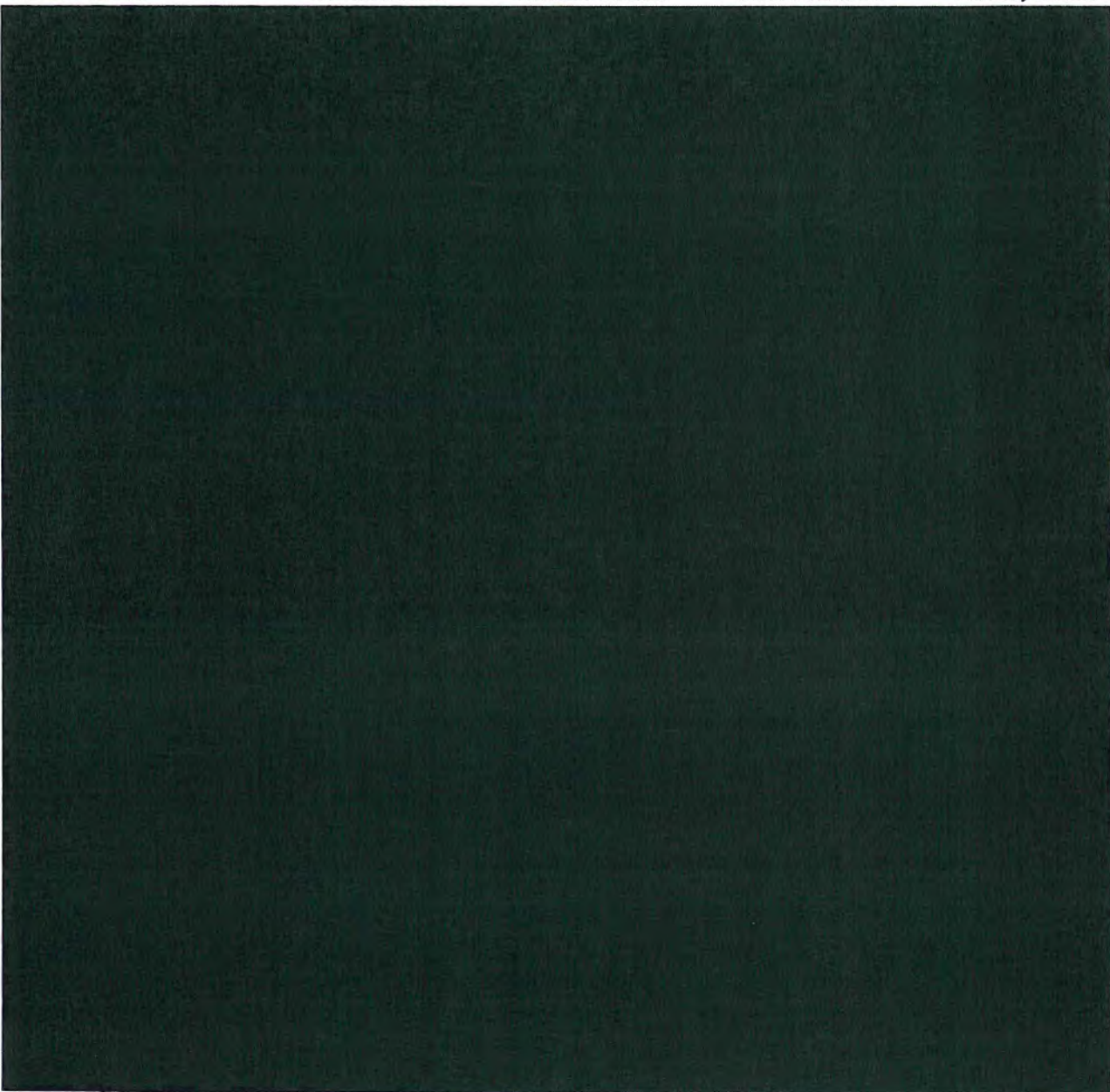
Groups

Add Group

DDA

Data reported as of Oct 19, 2020 8

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
----------------	-----------------	-------------------	-------------------	-------------------



*3407

MMC -NH TUSCANY
VILLAGE

\$41,228.09

\$41,228.09

\$41,228.09

\$32,428.09

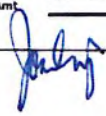
* indicates re
Page generated on 10/19/2020 at 8

Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 10/19/2020

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	CKs Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Bethany Senior Living		170,120.63	✓ 170,159.71	✓ 177,727.56	✓		177,688.48	✓ 177,588.48
						Bank Balance	177,688.48	
						Variance	-	
						Leave in Balance	100.00	

October Interest -
 November Interest -
 December Interest -
 Adjust Balance/Transfer Amt 177,588.48 ✓

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: 
 Jason Anglin, CEO 10/19/2020

APPROVED
 OK
 OCT 19 2020
 COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Bethany Senior Living

MMC PORTION

	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	NH PORTION
10/13/2020 Deposit	-	2,822.30					-	2,822.30
10/13/2020 Deposit	-	2,403.25					-	2,403.25
10/14/2020 WIRE OUT BETHANY SENIOR LIVING, LTD	170,020.63	-					-	-
10/14/2020 HARLAND CLARKE CHK ORDERS 1QRW096512452R5 91	139.08	-					-	-
10/15/2020 Deposit	-	2,123.98					-	2,123.98
10/15/2020 Deposit	-	2,381.70					-	2,381.70
10/15/2020 Deposit	-	63,658.61					-	63,658.61
10/15/2020 NOVITAS SOLUTION HCCLAIMPMT 676481 420000193 TF	-	15,258.17					-	15,258.17
10/15/2020 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2 1	-	85,162.50					-	85,162.50
10/16/2020 Deposit	-	2,648.25					-	2,648.25
10/16/2020 HOSPICE OF SO TX VENDORS NF 91000010864535	-	1,268.80					-	1,268.80
							-	-
	170,159.71	177,727.56	-	-	-	-	-	177,727.56

10/19/2020

Treasury Center

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

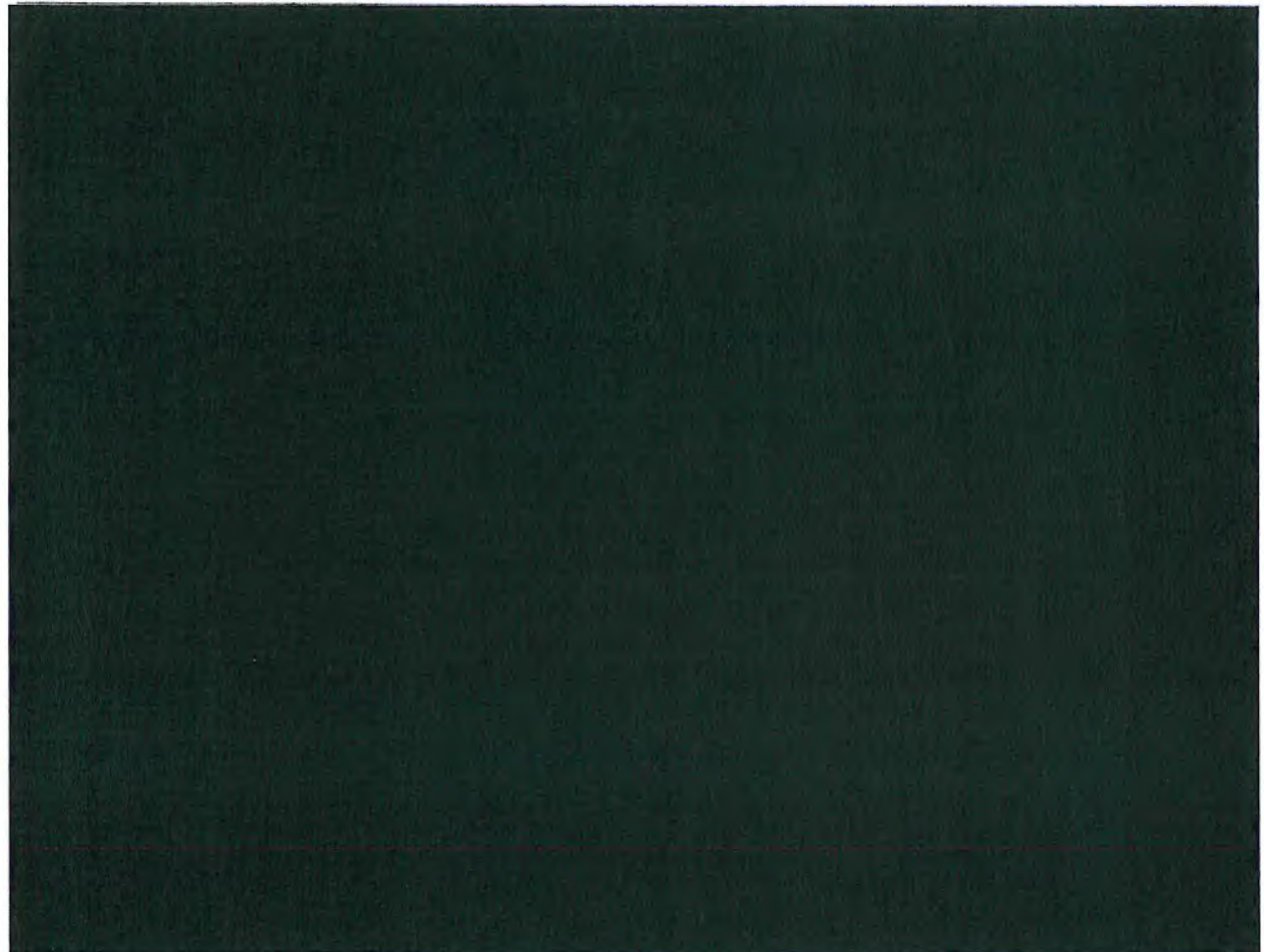
Add Group

Search All

DDA

Data reported as of Oct 19, 2020 8

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
----------------	-----------------	-------------------	-------------------	-------------------



*5506 MMC -NH BETHANY SENIOR LIVING	\$177,688.48	\$182,735.31	\$177,688.48	\$173,771.43
---	--------------	--------------	--------------	--------------



* indicates re
Page generated on 10/19/2020 at 8

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MMC Operating

Date Requested: 10/19/20

A

Y

E

E

FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept.

APPROVED
ON

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TENN.

AMOUNT 122,962.94

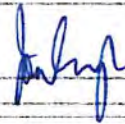
G/L NUMBER: 11000012

ck# 00110

EXPLANATION: IGT Deposited into NH account, owed to MMC - Ashford

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY:



8

RUN DATE:10/22/20
TIME:09:44

MEMORIAL MEDICAL CENTER
CHECK REGISTER
10/22/20 THRU 10/22/20

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHA 001110 10/22/20 122,962.94 MMC OPERATING *Ashford*
TOTALS: 122,962.94

APPROVED
BY

OCT 21 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MMC Operating
A
Y
E
E

Date Requested: 10/19/20

FOR ACCT. USE ONLY

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

APPROVED
OK

OCT 19 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#000066

G/L NUMBER: 11000013

AMOUNT 80,012.58

EXPLANATION: IGT Deposited into NH account, owed to MMC - golden creek

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: 

RUN DATE:10/22/20
TIME:09:44

MEMORIAL MEDICAL CENTER
CHECK REGISTER
10/22/20 THRU 10/22/20

PAGE 2
GLCKREG

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

NHG 000066 10/22/20 80,012.58 MMC OPERATING *golden creek*
TOTALS: 80,012.58

APPROVED
OK

OCT 21 2020

COUNTY CLERK
CALHOUN COUNTY, TEXAS

QIPP Payment to MMC from Nursing Facilities

Commissioner's Court

10/21/20

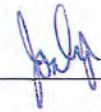
NH Name	From Bank Acct #	Ck #	Payee	GL #	IGTs for MMC				TOTAL	Date
Ashford	10000018 - Prosperity	1110	MMC -Prosperity Operating #10000001	11000012	122,962.94	-			122,962.94	10/21/20
Broadmoor	10000019 - Prosperity		MMC -Prosperity Operating #10000001		-	-			-	10/21/20
Crescent	10000020 - Prosperity		MMC -Prosperity Operating #10000001		-	-			-	10/21/20
Fort Bend	10000021 - Prosperity		MMC -Prosperity Operating #10000001		-	-			-	10/21/20
Solera	10000022 - Prosperity		MMC -Prosperity Operating #10000001		-	-			-	10/21/20
Golden Creek	10000023 - Prosperity	66	MMC -Prosperity Operating #10000001	11000013	80,012.58	-			80,012.58	10/21/20
Gulf Pointe-PP	10000114 - Prosperity		MMC -Prosperity Operating #10000001		-	-			-	10/21/20
Gulf Pointe-MM	10000025 - Prosperity		MMC -Prosperity Operating #10000001		-	-			-	10/21/20
Bethany										10/21/20
Tuscany										10/21/20
			Total:		202,975.52	-	-	-	202,975.52	

Note:

Approved:

Jason Anglin, CEO

10/19/2020



122,962.94 +
80,012.58 =
202,975.52

APPROVED
ON

OCT 21 2020

COURT CLERK
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
NH ASHFORD
202 S ANN ST STE A
PORT LAVACA TX 77979

1110

88-2265/1131-87

10-22-2020

Date

CHECK ARMOR
FRAUD PROTECTION

Pay to the

Order of

MMC Prosperity Operating

\$ 122,962.44

One hundred Twenty two thousand Nine hundred Sixty two $\frac{44}{100}$

Dollars



Photo
Safe
Deposit
Details on back



PROSPERITY BANK®

PORT LAVACA BANKING CENTER
1107 N. HIGHWAY 35 • PORT LAVACA, TX 77979-5102
361-552-7411 www.prosperitybankusa.com

For 16T

County Treasurer

MEMORIAL MEDICAL CENTER

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

000066

88-2265/1131

Date 10-22-2020

PAY

TO THE

ORDER OF

MMC - Prosperity Operating

\$ 80,012.58

Eighty thousand twelve and $\frac{58}{100}$

DOLLARS



PROSPERITY
BANK®

FOR 16T

County Treasurer

County Treasurer

8

RUN DATE:10/19/20
TIME:16:07

MEMORIAL MEDICAL CENTER
CHECK REGISTER
10/19/20 THRU 10/19/20

PAGE 1
GLCKREG

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

A/P *	187601	10/19/20	500.00	CR TEXAS DEPT OF ST HEALTH SERVS
A/P	187729	10/19/20	250.00	TEXAS DEPT OF ST HEALTH SERVS
A/P	187730	10/19/20	250.00	TEXAS DEPT OF ST HEALTH SERVS
TOTALS:			.00	

> VOID CK# 187601

187729 > CK# 187601 should have
187730 > been separate checks.

187729

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
100220	10/02/20	250.00			250.00
CHECK NO. 187729 10/19/20		TOTALS		TOTALS	
		250.00			250.00

MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

187729

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
100220	10/02/20	250.00			250.00
CHECK NO. 187729		TOTALS		TOTALS	
		250.00			250.00

MEMORIAL
MEDICAL  **CENTER**

Operating
815 N. Virginia St.
Port Lavaca, TX 77979

PROSPERITY BANK

88-2265
1131

187729

11303 187729
DATE AMOUNT
10/19/20 \$250.00

Two Hundred Fifty Dollars and No Cents

PAY
TO THE
ORDER
OF

TEXAS DEPT OF ST HEALTH SERVS
CASH RECEIPT BRANCH, MC2003
OFF OF EMS/TRAUMA SYSTEM COORDINATION
P O BOX 149347
AUSTIN, TX 78714

Guica Perez
CALHOUN COUNTY AUDITOR

CALHOUN COUNTY TREASURER

187730

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
102020A	10/02/20	250.00			250.00
CHECK NO. 187730 10/19/20		TOTALS 250.00	TOTALS		250.00

MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

187730

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
102020A	10/02/20	250.00			250.00
CHECK NO. 187730		TOTALS 250.00	TOTALS		250.00

MEMORIAL
MEDICAL CENTER

Operating
 815 N. Virginia St.
 Port Lavaca, TX 77979

PROSPERITY BANK

88-2265
 1131

187730

11303 187730
 DATE AMOUNT
 10/19/20 \$250.00

Two Hundred Fifty Dollars and No Cents

PAY
 TO THE
 ORDER
 OF

TEXAS DEPT OF ST HEALTH SERVS
 CASH RECEIPT BRANCH, MC2003
 OFF OF EMS/TRAUMA SYSTEM COORDINATION
 P O BOX 149347
 AUSTIN, TX 78714

Cynthia P. [Signature]
 CALHOUN COUNTY AUDITOR

CALHOUN COUNTY TREASURER