

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR -- May 09, 2018

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 561,569.14
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TOTAL TRANSFERS BETWEEN FUNDS	\$ -
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TOTAL NURSING HOME UPL EXPENSES	\$ 539,510.66
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TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
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GRAND TOTAL DISBURSEMENTS APPROVED May 09, 2018	\$ 1,101,079.80
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MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---May 09, 2018

PAYABLES AND PAYROLL

5/3/2018 Weekly Payables	412,880.47
5/7/2018 McKesson-340B Prescription Expense	28,540.94
5/7/2018 Payroll Liabilities (Payroll Taxes)	416.05
5/7/2018 Payroll	1,551.90

Electronic Bank Payments

5/3/2018 IBC Electronic Payments (Credit Card & Lease Fees)	99.00
Prosperity Electronics Payments	
5/4/2018 Credit Card & Lease Fees	756.71
5/15/2018 TCDRS - April Retirement	117,324.07

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 561,569.14
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TOTAL TRANSFERS BETWEEN FUNDS	\$ -
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NURSING HOME UPL EXPENSES

5/7/2018 Nursing Home UPI	351,536.65
5/7/2018 Nursing Home UPI	132,965.19
5/7/2018 Nursing Home UPI	55,008.82

TOTAL NURSING HOME UPL EXPENSES	\$ 539,510.66
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TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
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GRAND TOTAL DISBURSEMENTS APPROVED May 09, 2018	\$ 1,101,079.80
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MAY 03 2018

Calhoun County Auditor

05/03/2018

10:49

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 05/16/2018

0

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

11283 ACE HARDWARE 15521 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
122026 ✓		04/25/20	04/14/20	05/10/20		18.72	0.00	0.00	18.72 ✓
122028 ✓	REPAIRS (Kitchen)	04/25/20	04/14/20	05/10/20		21.17	0.00	0.00	21.17 ✓
122027 ✓	REPAIRS	04/25/20	04/14/20	05/10/20		11.76	0.00	0.00	11.76 ✓
122118 ✓	REPAIRS (Kitchen)	05/02/20	04/18/20	05/08/20		4.98	0.00	0.00	4.98 ✓
122223 ✓	SUPPLIES (Maint.)	05/02/20	04/21/20	05/11/20		65.98	0.00	0.00	65.98 ✓
122221 ✓	SUPPLIES (New clinic)	05/02/20	04/21/20	05/11/20		15.87	0.00	0.00	15.87 ✓
122276 ✓	SUPPLIES (New clinic)	05/02/20	04/23/20	05/13/20		50.65	0.00	0.00	50.65 ✓
122275 ✓	SUPPLIES (New clinic)	05/02/20	04/23/20	05/13/20		23.94	0.00	0.00	23.94 ✓
122296 ✓	SUPPLIES (New clinic)	05/02/20	04/24/20	05/14/20		20.36	0.00	0.00	20.36 ✓
	SUPPLIES (Maint. chiller)								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11283	ACE HARDWARE 15521	233.43	0.00	0.00	233.43

Vendor# Vendor Name

Class Pay Code

A1680 AIRGAS USA, LLC - CENTRAL DIV ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
9952663320 ✓		05/02/20	04/01/20	04/26/20		113.07	0.00	0.00	113.07 ✓
	INVENTORY								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A1680	AIRGAS USA, LLC - CENTRAL DIV	113.07	0.00	0.00	113.07

Vendor# Vendor Name

Class Pay Code

10814 ALLIED BENEFIT SYSTEMS ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
000411183		04/24/20	04/13/20	05/15/20		34,173.63	0.00	0.00	34,173.63 ✓
	INS								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10814	ALLIED BENEFIT SYSTEMS	34,173.63	0.00	0.00	34,173.63

Vendor# Vendor Name

Class Pay Code

A2600 AUTO PARTS & MACHINE CO. ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
861868 ✓		05/02/20	04/17/20	05/02/20		18.98	0.00	0.00	18.98 ✓

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	A2600	AUTO PARTS & MACHINE CO.	18.98	0.00	0.00	18.98

Vendor# Vendor Name

Class Pay Code

B1150 BAXTER HEALTHCARE ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
58991532 ✓		04/23/20	04/16/20	05/11/20		337.66	0.00	0.00	337.66 ✓

SUPPLIES

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		B1150	BAXTER HEALTHCARE			337.66	0.00	0.00	337.66
Vendor#	Vendor Name			Class	Pay Code				
B1075	BAXTER HEALTHCARE CORP ✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
58296179 ✓		04/16/20	02/21/20	05/10/20		2,367.50	0.00	0.00	2,367.50 ✓
	LEASE								
58296201 ✓		04/16/20	02/21/20	05/10/20		629.50	0.00	0.00	629.50 ✓
	SOFTWARE								
58927796 ✓		04/25/20	04/10/20	05/10/20		120.91	0.00	0.00	120.91 ✓
	INVENTORY								
58960921 ✓		04/25/20	04/12/20	05/12/20		129.82	0.00	0.00	129.82 ✓
	INVENTORY								
58961852 ✓		04/25/20	04/12/20	05/12/20		129.82	0.00	0.00	129.82 ✓
	INVENTORY								
58988420 ✓		04/25/20	04/16/20	05/16/20		53.42	0.00	0.00	53.42 ✓
	INVENTORY								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		B1075	BAXTER HEALTHCARE CORP			3,430.97	0.00	0.00	3,430.97
Vendor#	Vendor Name			Class	Pay Code				
B1220	BECKMAN COULTER INC ✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
107002141 ✓		04/25/20	04/17/20	05/12/20		2,003.86	0.00	0.00	2,003.86 ✓
	SUPPLIES								
107002140 ✓		04/25/20	04/17/20	05/12/20		313.29	0.00	0.00	313.29 ✓
	SUPPLIES								
107002746 ✓		04/25/20	04/17/20	05/12/20		202.41	0.00	0.00	202.41 ✓
	SUPPLIES								
107002145 ✓		04/25/20	04/17/20	05/12/20		1,021.38	0.00	0.00	1,021.38 ✓
	SUPPLIES								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC			3,540.94	0.00	0.00	3,540.94
Vendor#	Vendor Name			Class	Pay Code				
11072	BIO-RAD LABORATORIES, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
902737290 ✓		04/25/20	04/10/20	05/10/20		3,041.39	0.00	0.00	3,041.39 ✓
	Lab supplies								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11072	BIO-RAD LABORATORIES, INC			3,041.39	0.00	0.00	3,041.39
Vendor#	Vendor Name			Class	Pay Code				
11928	BOYD'S BOUNCE HOUSE RENTALS ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
041618		05/02/20	04/16/20	05/09/20		100.00	0.00	0.00	100.00 ✓
	BOUNCE HOUSE FRO HEALTH (MMC Health Fair)								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11928	BOYD'S BOUNCE HOUSE RENTALS			100.00	0.00	0.00	100.00
Vendor#	Vendor Name			Class	Pay Code				
11832	BROADMOOR AT CREEKSIDE PARK ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
042318		05/02/20	04/23/20	04/23/20		217.40	0.00	0.00	217.40
	TRANSFER Payment sent to MMC in error.								

042518A	05/02/20 04/25/20 04/25/20	12,225.00	0.00	0.00	12,225.00	✓
TRANSFER	Payment sent to MMC in error.					
042518	05/02/20 04/25/20 05/05/20	3,750.00	0.00	0.00	3,750.00	✓
TRANSFER	Payment sent to MMC in error					
042718	05/02/20 04/27/20 04/27/20	2,505.00	0.00	0.00	2,505.00	✓
TRANSFER	Payment sent to MMC in error					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	11832 BROADMOOR AT CREEKSIDE PARK	18,697.40	0.00	0.00	18,697.40	
Vendor#	Vendor Name	Class	Pay Code			
A1825	CARDINAL HEALTH 414,LLC ✓	M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
8001619198 ✓		05/01/20	04/07/20	05/07/20	434.40	0.00 0.00 434.40 ✓
	SUPPLIES					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	A1825 CARDINAL HEALTH 414,LLC	434.40	0.00	0.00	434.40	
Vendor#	Vendor Name	Class	Pay Code			
E1270	CENTERPOINT ENERGY ✓	W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
042718		05/02/20	04/25/20	04/27/20	55.67	0.00 0.00 55.67 ✓
	GAS					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	E1270 CENTERPOINT ENERGY	55.67	0.00	0.00	55.67	
Vendor#	Vendor Name	Class	Pay Code			
10350	CENTURION MEDICAL PRODUCTS ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
0092488573 ✓		04/23/20	04/11/20	05/11/20	404.16	0.00 0.00 404.16 ✓
	SUPPLIES					
0092491444 ✓		04/24/20	04/16/20	05/16/20	1,408.64	0.00 0.00 1,408.64 ✓
	SUPPLIES					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	10350 CENTURION MEDICAL PRODUCTS	1,812.80	0.00	0.00	1,812.80	
Vendor#	Vendor Name	Class	Pay Code			
C1610	CITIZENS MEDICAL CENTER ✓	W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
74769997 ✓		05/02/20	01/31/20		10.62	0.00 0.00 10.62 ✓
	INVENTORY (Pharmacy)					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	C1610 CITIZENS MEDICAL CENTER	10.62	0.00	0.00	10.62	
Vendor#	Vendor Name	Class	Pay Code			
11030	COMBINED INSURANCE ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
050118		05/01/20	05/01/20	05/01/20	2,007.70	0.00 0.00 2,007.70 ✓
	INSURANCE					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	11030 COMBINED INSURANCE	2,007.70	0.00	0.00	2,007.70	
Vendor#	Vendor Name	Class	Pay Code			
11900	COMPHEALTH ASSOCIATES, INC. ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
2958018RP ✓		05/02/20	04/19/20	05/09/20	11,562.50	0.00 0.00 11,562.50 ✓
	PLACEMENT Fee For Chetchawat-PT					
3006817RP ✓		05/02/20	04/30/20	05/09/20	12,187.50	0.00 0.00 12,187.50 ✓

PLACEMENT *Ful for Newbaum - OT*

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11900	COMPHEALTH ASSOCIATES, INC.			23,750.00	0.00	0.00	23,750.00
Vendor#	Vendor Name			Class	Pay Code				
C1970	CONMED CORPORATION ✓			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
614983		04/23/20	04/16/20	05/10/20		125.52	0.00	0.00	125.52 ✓
574476	SUPPLIES								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		C1970	CONMED CORPORATION			125.52	0.00	0.00	125.52
Vendor#	Vendor Name			Class	Pay Code				
10368	DEWITT POTH & SON ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
5348880 ✓		04/25/20	04/16/20	05/11/20		43.75	0.00	0.00	43.75 ✓
	OFFICE SUPP								
5348650 ✓		04/25/20	04/16/20	05/11/20		11.99	0.00	0.00	11.99 ✓
	OFFICE SUPP								
5350290 ✓		04/25/20	04/17/20	05/12/20		65.97	0.00	0.00	65.97 ✓
	OFFICE SUPP								
5351470 ✓		04/25/20	04/18/20	05/13/20		178.85	0.00	0.00	178.85 ✓
	OFFICE SUPP								
5347740 ✓		04/30/20	04/16/20	05/11/20		58.48	0.00	0.00	58.48 ✓
	SUPPLIES								
5351330 ✓		04/30/20	04/18/20	05/13/20		524.85	0.00	0.00	524.85 ✓
	SUPPLIES								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10368	DEWITT POTH & SON			883.89	0.00	0.00	883.89
Vendor#	Vendor Name			Class	Pay Code				
10789	DISCOVERY MEDICAL NETWORK INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
MMC043018		05/02/20	04/30/20	05/01/20		143,459.90	0.00	0.00	143,459.90 ✓
	PRO FEES								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10789	DISCOVERY MEDICAL NETWORK INC			143,459.90	0.00	0.00	143,459.90
Vendor#	Vendor Name			Class	Pay Code				
D1785	DYNATRONICS CORPORATION ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
1007526 ✓		04/23/20	04/10/20	05/11/20		15.80	0.00	0.00	15.80 ✓
	SUPPLIES								
1002602 ✓		05/01/20	03/12/20	04/12/20		60.71	0.00	0.00	60.71 ✓
	SUPPLIES								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		D1785	DYNATRONICS CORPORATION			76.51	0.00	0.00	76.51
Vendor#	Vendor Name			Class	Pay Code				
10292	ECPTOTE ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
050118		05/02/20	05/01/20	05/01/20		30.00	0.00	0.00	30.00 ✓
	REG FOR ADDRESS CHG <i>PT</i>								
050118A		05/02/20	05/01/20	05/01/20		30.00	0.00	0.00	30.00 ✓
	REG FOR ADDRESS CHG <i>OT</i>								
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10292	ECPTOTE			60.00	0.00	0.00	60.00

Vendor#	Vendor Name				Class	Pay Code				
E3400	EMERGENCY MEDICAL PRODUCTS ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
1980177 ✓		04/24/20	04/10/20	05/10/20		27.45	0.00	0.00	27.45	✓
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	E3400	EMERGENCY MEDICAL PRODUCTS				27.45	0.00	0.00	27.45	
Vendor#	Vendor Name				Class	Pay Code				
11284	EMERGENCY STAFFING SOLUTIONS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
36368 ✓		05/02/20	04/30/20	04/30/20		40,062.50	0.00	0.00	40,062.50	✓
	STAFFING SOLUTIONS									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11284	EMERGENCY STAFFING SOLUTIONS				40,062.50	0.00	0.00	40,062.50	
Vendor#	Vendor Name				Class	Pay Code				
11924	FAREN CAMPOS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
042518		05/02/20	04/25/20	04/25/20		47.00	0.00	0.00	47.00	✓
	MEALS FOR TRAVEL <i>1st Customer Advisory Conference 4/12/18-4/13/18</i>									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11924	FAREN CAMPOS				47.00	0.00	0.00	47.00	
Vendor#	Vendor Name				Class	Pay Code				
F1100	FEDERAL EXPRESS CORP. ✓				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
614083047		05/02/20	04/05/20	04/30/20		24.51	0.00	0.00	24.51	✓
	SHIPPING									
614854720		05/02/20	04/12/20	05/07/20		31.37	0.00	0.00	31.37	✓
	SHIPPING									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	F1100	FEDERAL EXPRESS CORP.				55.88	0.00	0.00	55.88	
Vendor#	Vendor Name				Class	Pay Code				
F1400	FISHER HEALTHCARE ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
0456596 ✓		04/24/20	04/11/20	05/06/20		91.71	0.00	0.00	91.71	✓
	SUPPLIES									
0180949 ✓		04/30/20	04/10/20	05/05/20		3,498.38	0.00	0.00	3,498.38	✓
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	F1400	FISHER HEALTHCARE				3,590.09	0.00	0.00	3,590.09	
Vendor#	Vendor Name				Class	Pay Code				
11836	GOLDENCREEK HEALTHCARE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
043018		05/02/20	04/30/20	05/10/20		13,991.01	0.00	0.00	13,991.01	✓
	TRANSFER <i>Pymt sent to MMC in error.</i>									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11836	GOLDENCREEK HEALTHCARE				13,991.01	0.00	0.00	13,991.01	
Vendor#	Vendor Name				Class	Pay Code				
W1300	GRAINGER ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
9759282636 ✓		04/25/20	04/16/20	05/11/20		429.28	0.00	0.00	429.28	✓
	REPAIRS <i>Pressure switch for chiller</i>									

9759315519	04/25/20 04/16/20 05/11/20	19.36	0.00	0.00	19.36	✓
REPAIRS <i>Relay For Miller</i>						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	W1300 GRAINGER	448.64	0.00	0.00	448.64	
Vendor#	Vendor Name	Class	Pay Code			
G1210	GULF COAST PAPER COMPANY ✓	M				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
1482066 ✓		04/25/20	04/10/20	05/10/20	368.58	0.00 0.00 368.58 ✓
SUPPLIES						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	G1210 GULF COAST PAPER COMPANY	368.58	0.00	0.00	368.58	
Vendor#	Vendor Name	Class	Pay Code			
J1415	JOHNSTONE SUPPLY ✓	W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
6014740 ✓		05/02/20	04/25/20	05/05/20	587.52	0.00 0.00 587.52 ✓
SUPPLIES						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	J1415 JOHNSTONE SUPPLY	587.52	0.00	0.00	587.52	
Vendor#	Vendor Name	Class	Pay Code			
11167	LAMAR COMPANIES ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
109051543 ✓		04/24/20	04/13/20	05/13/20	400.00	0.00 0.00 400.00 ✓
AD						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	11167 LAMAR COMPANIES	400.00	0.00	0.00	400.00	
Vendor#	Vendor Name	Class	Pay Code			
R1452	MARISSA SUTHERLAND ✓	W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
043018		05/01/20	04/30/20	04/30/20	225.42	0.00 0.00 225.42 ✓
SUPPLIES <i>HIPPA conference 4124-4127/18</i>						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	R1452 MARISSA SUTHERLAND	225.42	0.00	0.00	225.42	
Vendor#	Vendor Name	Class	Pay Code			
11760	MARVELOUS GARDENS, INC ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
325 ✓		04/25/20	04/15/20	05/10/20	205.83	0.00 0.00 205.83 ✓
<i>Lawn Care (701 N. Virginia)</i>						
341 ✓		04/25/20	04/15/20	05/10/20	433.33	0.00 0.00 433.33 ✓
<i>LAWN CARE (1016 N. Virginia)</i>						
340 ✓		04/25/20	04/15/20	05/15/20	379.17	0.00 0.00 379.17 ✓
<i>LAWN CARE (815 N. Virginia St)</i>						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	11760 MARVELOUS GARDENS, INC	1,018.33	0.00	0.00	1,018.33	
Vendor#	Vendor Name	Class	Pay Code			
11612	MASA					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount No-Pay Net
574961MKMMC ✓		05/02/20	03/18/20	03/18/20	1,085.00	0.00 0.00 1,085.00 ✓
INSURANCE <i>3-18</i>						
574962MKMMC ✓		05/02/20	04/25/20	04/25/20	1,085.00	0.00 0.00 1,085.00 ✓
INSURANCE <i>4-18</i>						
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net	
	11612 MASA	2,170.00	0.00	0.00	2,170.00	

Vendor#	Vendor Name				Class	Pay Code					
M2178	MCKESSON MEDICAL SURGICAL INC ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
	24903032 ✓		04/24/20	04/10/20	05/10/20		79.86	0.00	0.00	79.86 ✓	
		SUPPLIES									
	24901871 ✓		04/25/20	04/10/20	05/10/20		201.61	0.00	0.00	201.61 ✓	
		SUPPLIES									
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
		M2178 MCKESSON MEDICAL SURGICAL INC					281.47	0.00	0.00	281.47	
Vendor#	Vendor Name				Class	Pay Code					
11203	MEDI-DOSE, INC ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
	0684252 ✓		04/24/20	04/12/20	05/12/20		62.40	0.00	0.00	62.40 ✓	
		SUPPLIES									
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
		11203 MEDI-DOSE, INC					62.40	0.00	0.00	62.40	
Vendor#	Vendor Name				Class	Pay Code					
M2470	MEDLINE INDUSTRIES INC ✓				M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
	1848345241 ✓		04/24/20	04/12/20	05/07/20		54.97	0.00	0.00	54.97 ✓	
		SUPPLIES									
	1848157537 ✓		04/30/20	04/10/20	05/05/20		708.16	0.00	0.00	708.16 ✓	
		SUPPLIES									
	1848157538 ✓		04/30/20	04/10/20	05/05/20		120.68	0.00	0.00	120.68 ✓	
		SUPPLIE									
	1848157535 ✓		04/30/20	04/10/20	05/05/20		1,013.35	0.00	0.00	1,013.35 ✓	
	⁵⁷ 1848148528 ✓	SUPPLIES									
		SUPPLIES									
	1848157540 ✓		04/30/20	04/10/20	05/05/20		256.09	0.00	0.00	256.09 ✓	
		SUPPLIES									
	1848157539 ✓		04/30/20	04/10/20	05/05/20		36.87	0.00	0.00	36.87 ✓	
		SUPPLIES									
	1848345252 ✓		04/30/20	04/12/20	05/07/20		371.01	0.00	0.00	371.01 ✓	
	⁴ 1848384889 ✓	SUPPLIES									
		SUPPLIES									
	1848384890 ✓		04/30/20	04/13/20	05/08/20		60.24	0.00	0.00	60.24 ✓	
		SUPPLIES									
	⁴ 1848385888 ✓		04/30/20	04/13/20	05/08/20		243.71	0.00	0.00	243.71 ✓	
		SUPPLIES									
	1848384886 ✓		04/30/20	04/13/20	05/08/20		20.79	0.00	0.00	20.79 ✓	
		SUPPLIES									
	1848384885 ✓		04/30/20	04/13/20	05/08/20		4.09	0.00	0.00	4.09 ✓	
		SUPPLIES									
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net	
		M2470 MEDLINE INDUSTRIES INC					3,088.90	0.00	0.00	3,088.90	
Vendor#	Vendor Name				Class	Pay Code					
M2685	MICROTEK MEDICAL INC ✓				M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
	4261191 ✓		04/24/20	10/10/20	05/10/20		293.06	0.00	0.00	293.06 ✓	

SUPPLIES

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		M2685	MICROTEK MEDICAL INC			293.06	0.00	0.00	293.06
Vendor#	Vendor Name			Class	Pay Code				
10810	MMC EMPLOYEE BENEFIT PLAN ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
043018		05/02/20	04/30/20	04/30/20		31,407.66	0.00	0.00	31,407.66 ✓
INSURANCE									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10810	MMC EMPLOYEE BENEFIT PLAN			31,407.66	0.00	0.00	31,407.66
Vendor#	Vendor Name			Class	Pay Code				
10536	MORRIS & DICKSON CO, LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2704911 ✓		05/01/20	04/25/20	05/05/20		395.07	0.00	0.00	395.07 ✓
INVENTORY									
2704912 ✓		05/01/20	04/25/20	05/05/20		8.04	0.00	0.00	8.04 ✓
INVENTORY									
2701091 ✓		05/01/20	04/25/20	05/05/20		65.47	0.00	0.00	65.47 ✓
INVENTORY									
2704910 ✓		05/01/20	04/25/20	05/05/20		21.17	0.00	0.00	21.17 ✓
INVENTORY									
2701090 ✓		05/01/20	04/25/20	05/05/20		9.88	0.00	0.00	9.88 ✓
INVENTORY									
2701607 ✓		05/01/20	04/25/20	05/05/20		10.75	0.00	0.00	10.75 ✓
INVENTORY									
2704583 ✓		05/01/20	04/25/20	05/05/20		344.40	0.00	0.00	344.40 ✓
INVENTORY									
2709049 ✓		05/01/20	04/26/20	05/06/20		3,624.34	0.00	0.00	3,624.34 ✓
INVENTORY									
2708893 ✓		05/01/20	04/26/20	05/06/20		56.64	0.00	0.00	56.64 ✓
INVENTORY									
2709050 ✓		05/01/20	04/26/20	05/06/20		2,077.30	0.00	0.00	2,077.30 ✓
INVENTORY									
2722260 ✓		05/01/20	04/30/20	05/10/20		427.80	0.00	0.00	427.80 ✓
INVENTORY									
CM32314 ✓		05/01/20	04/30/20	05/10/20		-45.48	0.00	0.00	-45.48 ✓
INVENTORY									
2719340 ✓		05/01/20	04/30/20	05/10/20		10.75	0.00	0.00	10.75 ✓
INVENTORY									
2722261 ✓		05/01/20	04/30/20	05/10/20		19.18	0.00	0.00	19.18 ✓
INVENTORY									
2722262 ✓		05/01/20	04/30/20	05/10/20		2,118.23	0.00	0.00	2,118.23 ✓
INVENTORY									
2709051 ✓		05/02/20	04/26/20	05/06/20		552.32	0.00	0.00	552.32 ✓
INVENTORY									
SC8630 ✓		05/02/20	04/26/20	05/06/20		47.14	0.00	0.00	47.14 ✓
SERVICE CHARGE									
8746 ✓		05/02/20	04/30/20	05/10/20		-225.01	0.00	0.00	-225.01 ✓
CREDIT									
2726639 ✓		05/02/20	05/01/20	05/11/20		22.20	0.00	0.00	22.20 ✓
INVENTORY									
2726637 ✓		05/02/20	05/01/20	05/11/20		424.98	0.00	0.00	424.98 ✓

2726176	✓	INVENTORY	05/02/20	05/01/20	05/11/20	10.75	0.00	0.00	10.75	✓
2726636	✓	INVENTORY	05/02/20	05/01/20	05/11/20	0.10	0.00	0.00	0.10	✓
CM32568	✓	INVENTORY	05/02/20	05/01/20	05/11/20	-115.90	0.00	0.00	-115.90	✓
2726638	✓	INVENTORY	05/02/20	05/01/20	05/11/20	288.83	0.00	0.00	288.83	✓
Vendor Totals										
10536		MORRIS & DICKSON CO, LLC				Gross	Discount	No-Pay	Net	
10536		MORRIS & DICKSON CO, LLC				10,148.95	0.00	0.00	10,148.95	
Vendor#	Vendor Name		Class		Pay Code					
A2252	NADINE GARNER ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
043018		05/02/20	04/30/20	04/30/20		35.10	0.00	0.00	35.10	✓
TRAVEL Area Infection Prevention Nurse Meeting 4/27/19										
Vendor Totals										
A2252		NADINE GARNER				Gross	Discount	No-Pay	Net	
A2252		NADINE GARNER				35.10	0.00	0.00	35.10	
Vendor#	Vendor Name		Class		Pay Code					
O1500	OLYMPUS AMERICA INC ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
95585345	✓	04/30/20	04/16/20	05/11/20		94.75	0.00	0.00	94.75	✓
SUPPLIES										
Vendor Totals										
O1500		OLYMPUS AMERICA INC				Gross	Discount	No-Pay	Net	
O1500		OLYMPUS AMERICA INC				94.75	0.00	0.00	94.75	
Vendor#	Vendor Name		Class		Pay Code					
OM425	OWENS & MINOR ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2036681888	✓	04/24/20	04/10/20	05/10/20		757.36	0.00	0.00	757.36	✓
SUPPLIES										
236675017	✓	04/24/20	04/10/20	05/10/20		206.34	0.00	0.00	206.34	✓
SUPPLIES										
2036674898	✓	04/24/20	04/10/20	05/10/20		53.76	0.00	0.00	53.76	✓
SUPPLIES										
2036793843	✓	04/25/20	04/13/20	05/13/20		-18.74	0.00	0.00	-18.74	✓
CREDIT										
Vendor Totals										
OM425		OWENS & MINOR				Gross	Discount	No-Pay	Net	
OM425		OWENS & MINOR				998.72	0.00	0.00	998.72	
Vendor#	Vendor Name		Class		Pay Code					
11069	PABLO GARZA ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
043118		05/02/20	04/26/20			345.00	0.00	0.00	345.00	✓
CONTRACT EMPLOYEE 4/27/19-4/30/19										
Vendor Totals										
11069		PABLO GARZA				Gross	Discount	No-Pay	Net	
11069		PABLO GARZA				345.00	0.00	0.00	345.00	
Vendor#	Vendor Name		Class		Pay Code					
P1800	PITNEY BOWES INC ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
1006927690	✓	04/25/20	04/16/20	05/16/20		207.00	0.00	0.00	207.00	✓
PURCH SERV Postage										
Vendor Totals										
						Gross	Discount	No-Pay	Net	

	P1800	PITNEY BOWES INC				207.00	0.00	0.00	207.00
Vendor#	Vendor Name		Class	Pay Code					
11480	PORT LAVACA PLUMBING ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	7932 ✓		05/02/20	04/06/20	05/06/20	375.00	0.00	0.00	375.00 ✓
	PLUMBING								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		11480	PORT LAVACA PLUMBING			375.00	0.00	0.00	375.00
Vendor#	Vendor Name		Class	Pay Code					
10315	REXEL ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	S121128317002 ✓		04/25/20	04/20/20	05/15/20	141.98	0.00	0.00	141.98 ✓
	SUPPLIES								
	S121128317001 ✓		04/25/20	04/20/20	05/15/20	153.39	0.00	0.00	153.39 ✓
	SUPPLIES								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10315	REXEL			295.37	0.00	0.00	295.37
Vendor#	Vendor Name		Class	Pay Code					
10927	ROSHANDA THOMAS Day Travel								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	050218		05/02/20	05/02/20	05/02/20	13.18	0.00	0.00	13.18
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
			10927	ROSHANDA THOMAS		13.18	0.00	0.00	13.18
Vendor#	Vendor Name		Class	Pay Code					
S0900	SAM'S CLUB DIRECT ✓		W						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	008366		05/01/20	04/11/20	05/08/20	25.90	0.00	0.00	25.90
	SUPPLIES								
	002900		05/01/20	04/14/20	05/08/20	68.04 ✓	0.00	0.00	68.04 ✓
	SUPPLIES								
	003852		05/01/20	04/18/20	05/08/20	65.47 ✓	0.00	0.00	65.47 ✓
	SUPPLIES								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		S0900	SAM'S CLUB DIRECT			159.41	0.00	0.00	159.41
Vendor#	Vendor Name		Class	Pay Code					
10625	SARA RUBIO ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	042018		05/02/20	04/20/20	04/20/20	28.34	0.00	0.00	28.34 ✓
	TRAVEL Mid Coast Hurricane Disaster Conference w/ 4/19/18								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10625	SARA RUBIO			28.34	0.00	0.00	28.34
Vendor#	Vendor Name		Class	Pay Code					
S1800	SHERWIN WILLIAMS ✓		W						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	62927		05/02/20	04/18/20	05/03/20	55.87	0.00	0.00	55.87
	SUPPLIES								
	63248 ✓		05/02/20	04/19/20	05/04/20	118.35	0.00	0.00	118.35 ✓
	SUPPLIES								
	66126 ✓		05/02/20	04/24/20	05/09/20	55.87	0.00	0.00	55.87 ✓
	SUPPLIES								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net

	S1800	SHERWIN WILLIAMS				230.09	0.00	0.00	230.09
Vendor#	Vendor Name				Class	Pay Code			
K0536	SHIRLEY KARNEI ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	050118		05/02/20	05/01/20	05/01/20	650.54	0.00	0.00	650.54 ✓
	CONTRACT EMPLOYEE								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		K0536	SHIRLEY KARNEI			650.54	0.00	0.00	650.54
Vendor#	Vendor Name				Class	Pay Code			
S2001	SIEMENS MEDICAL SOLUTIONS INC ✓				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	115589894 ✓		05/01/20	04/18/20	05/13/20	751.58	0.00	0.00	751.58 ✓
	SUPPLIES								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		S2001	SIEMENS MEDICAL SOLUTIONS INC			751.58	0.00	0.00	751.58
Vendor#	Vendor Name				Class	Pay Code			
11296	SOUTH TEXAS BLOOD & TISSUE CEN ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	90034943 ✓		04/25/20	04/17/20	05/12/20	-690.00	0.00	0.00	-690.00 ✓
	CREDIT								
	90035052 ✓		04/25/20	04/17/20	05/12/20	3,450.00	0.00	0.00	3,450.00 ✓
	BLOOD								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		11296	SOUTH TEXAS BLOOD & TISSUE CEN			2,760.00	0.00	0.00	2,760.00
Vendor#	Vendor Name				Class	Pay Code			
S2830	STRYKER SALES CORP ✓				M				
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	230748A ✓		04/24/20	04/10/20	05/10/20	361.31	0.00	0.00	361.31 ✓
	SUPPLIES								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		S2830	STRYKER SALES CORP			361.31	0.00	0.00	361.31
Vendor#	Vendor Name				Class	Pay Code			
10735	STRYKER SUSTAINABILITY ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	3323346 3319932		04/24/20	04/12/20	05/12/20	360.30	0.00	0.00	360.30 ✓
	SUPPLIES								
	3323911 ✓		04/25/20	04/13/20	05/13/20	-15.00	0.00	0.00	-15.00 ✓
	CREDIT								
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		10735	STRYKER SUSTAINABILITY			345.30	0.00	0.00	345.30
Vendor#	Vendor Name				Class	Pay Code			
11140	TEXAS ADVANTAGE COMMUNITY BANK ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	043018		05/01/20	04/30/20	04/30/20	3,690.52	0.00	0.00	3,690.52 ✓
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		11140	TEXAS ADVANTAGE COMMUNITY BANK			3,690.52	0.00	0.00	3,690.52
Vendor#	Vendor Name				Class	Pay Code			
11824	THE CRESCENT ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	042418		05/02/20	04/24/20	04/24/20	4,875.00	0.00	0.00	4,875.00

TRANSFER *Payment to MML in error*

Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11824	THE CRESCENT			4,875.00	0.00	0.00	4,875.00
Vendor#	Vendor Name			Class	Pay Code				
11100	THE US CONSULTING GROUP ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
340371433 ✓		04/25/20	04/18/20	05/13/20		237.08	0.00	0.00	237.08 ✓
PURCHASED SERVICE									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11100	THE US CONSULTING GROUP			237.08	0.00	0.00	237.08
Vendor#	Vendor Name			Class	Pay Code				
10732	THERACOM, LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
192925556301 ✓		05/02/20	02/21/20	03/21/20		1,173.06	0.00	0.00	1,173.06 ✓
INVENTORY									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		10732	THERACOM, LLC			1,173.06	0.00	0.00	1,173.06
Vendor#	Vendor Name			Class	Pay Code				
11169	TXU ENERGY ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
052002803254 ✓		05/02/20	04/25/20	05/15/20		29,443.61	0.00	0.00	29,443.61 ✓
ELEC									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net
		11169	TXU ENERGY			29,443.61	0.00	0.00	29,443.61
Vendor#	Vendor Name			Class	Pay Code				
U1064	UNIFIRST HOLDINGS INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
8400272199 ✓		04/25/20	04/17/20	05/12/20		51.96	0.00	0.00	51.96 ✓
LAUNDRY									
8400272236 ✓		04/25/20	04/17/20	05/12/20		754.46	0.00	0.00	754.46 ✓
LAUNDRY									
8400272196 ✓		04/25/20	04/17/20	05/12/20		124.68	0.00	0.00	124.68 ✓
LAUNDRY									
8400272197 ✓		04/25/20	04/17/20	05/12/20		137.36	0.00	0.00	137.36 ✓
LAUNDRY									
8400272230 ✓		04/25/20	04/17/20	05/12/20		71.95	0.00	0.00	71.95 ✓
SUPPLIES									
8400272198 ✓		04/25/20	04/17/20	05/12/20		47.15	0.00	0.00	47.15 ✓
LAUNDRY									
8400272195 ✓		04/25/20	04/17/20	05/12/20		94.29	0.00	0.00	94.29 ✓
LAUNDRY									
8400272270 ✓		04/25/20	04/17/20	05/12/20		112.25	0.00	0.00	112.25 ✓
LAUNDRY									
8400272513 ✓		04/25/20	04/20/20	05/15/20		910.25	0.00	0.00	910.25 ✓
LAUNDRY									
8400272508 ✓		04/25/20	04/20/20	05/15/20		21.25	0.00	0.00	21.25 ✓
LAUNDRY									
8400272487 ✓		04/25/20	04/20/20	05/15/20		153.50	0.00	0.00	153.50 ✓
LAUNDRY									
8400272486 ✓		04/25/20	04/20/20	05/15/20		53.48	0.00	0.00	53.48 ✓
LAUNDRY									
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net

	U1064	UNIFIRST HOLDINGS INC				2,532.58	0.00	0.00	2,532.58
Vendor#	Vendor Name			Class	Pay Code				
U1056	UNIFORM ADVANTAGE ✓			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	8639344 ✓		05/02/20	04/17/20	05/02/20	109.96	0.00	0.00	109.96 ✓
	8647858 ✓	UNIFORMS	05/02/20	04/19/20	05/04/20	179.93	0.00	0.00	179.93 ✓
		UNIFORM							
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
	U1056 UNIFORM ADVANTAGE					289.89	0.00	0.00	289.89
Vendor#	Vendor Name			Class	Pay Code				
W1005	WALMART COMMUNITY ✓			W					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	06409		05/01/20	02/15/20	03/15/20	8.71	0.00	0.00	8.71 ✓
	06408	SUPPLIES	05/01/20	02/15/20	03/15/20	1.88	0.00	0.00	1.88 ✓
	09507	SUPPLIES	05/01/20	02/22/20	03/22/20	6.34	0.00	0.00	6.34 ✓
	05957	SUPPLIES	05/01/20	02/23/20	03/23/20	56.20	0.00	0.00	56.20 ✓
	03539	SUPPLIES	05/01/20	03/01/20	04/01/20	19.96	0.00	0.00	19.96 ✓
	00028	SUPPLIES	05/01/20	03/01/20	04/01/20	48.63	0.00	0.00	48.63 ✓
	08391	SUPPLIES	05/01/20	03/05/20	04/05/20	23.36	0.00	0.00	23.36 ✓
	04013	SUPPLIES	05/01/20	03/08/20	04/08/20	52.04	0.00	0.00	52.04 ✓
	04014	SUPPLIES	05/01/20	03/08/20	04/08/20	8.64	0.00	0.00	8.64 ✓
	01783	SUPPLIES	05/01/20	03/22/20	05/10/20	2.46	0.00	0.00	2.46 ✓
	01782	SUPPLIES	05/01/20	03/22/20	05/12/20	23.04	0.00	0.00	23.04 ✓
	01781	SUPPLIES	05/01/20	03/22/20	05/12/20	7.44	0.00	0.00	7.44 ✓
	04456	SUPPLIES	05/01/20	03/22/20	05/12/20	11.96	0.00	0.00	11.96 ✓
	041618	SUPPLIES	05/01/20	04/16/20	05/12/20	1.84	0.00	0.00	1.84 ✓
		LATE CHARGE							
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net
	W1005 WALMART COMMUNITY					272.50	0.00	0.00	272.50
Vendor#	Vendor Name			Class	Pay Code				
I1110	WERFEN USA LLC ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	9110507927 ✓		04/25/20	04/16/20	05/11/20	1,571.67	0.00	0.00	1,571.67 ✓
	9110508466 ✓	LEASE	04/30/20	04/16/20	05/11/20	217.71	0.00	0.00	217.71 ✓
		SUPPLIES							
	Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net

I1110	WERFEN USA LLC					1,789.38	0.00	0.00	1,789.38
Vendor#	Vendor Name			Class	Pay Code				
10556	WOUND CARE SPECIALISTS ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
WCS00001932 ✓		05/02/20	04/01/20	05/01/20		16,300.00	0.00	0.00	16,300.00 ✓
	WOUND CARE								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	10556	WOUND CARE SPECIALISTS				16,300.00	0.00	0.00	16,300.00
Report Summary									
Grand Totals:		Gross		Discount		No-Pay		Net	
		412,895.79		0.00		0.00		412,895.79	

pg 10 corrections

{ <13.18>
 { <28.04>
 { +25.90

412,895.79 +
 13.18 -
 28.04 -
 25.90 +
 412,880.47 *

\$ 412,880.47

APPROVED
ON

MAY 03 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

As of: 05/04/2018 Page: 002
Mail to: Comp: 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: 05/05/2018

Cust: 632536 PLEASE CHECK ANY
Date: 05/05/2018 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
--------------	----------	-------------------	----------------------------------	-------------	---------------	----------------	-----	--------------	-----	-------------------

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 29,124.58 USD

Future Due:	0.00			Due If Paid On Time:	28,540.94
Past Due:	58.00-			USD	
				Disc lost if paid late:	583.64
Last Payment 08/07/2017	2,451.97			Due If Paid Late:	29,124.58
				USD	

APPROVED

ON

MAY 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

1,503.67 +
13.25 +
1,020.44 +
26,003.58 +
28,540.94 *

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

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: 05/05/2018

As of: 05/04/2018
Mail to:
AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Page: 001
Comp: 8000

Cust: 262252
Date: 05/05/2018
PLEASE CHECK ANY 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								
14/30/2018	05/08/2018	7868472816	1001215965	115Invoice	6.11	305.52	✓	299.41	✓	7868472816
14/30/2018	05/08/2018	7868476219	1001216681	115Invoice	7.95	397.68	✓	389.73	✓	7868476219
14/30/2018	05/08/2018	7868476220	1001216681	115Invoice	0.22	11.06	✓	10.84	✓	7868476220
14/30/2018	05/08/2018	7868476221	1001217068	115Invoice	5.34	267.12	✓	261.78	✓	7868476221
14/30/2018	05/08/2018	7868476224	1001217068	115Invoice	0.02	1.14	✓	1.12	✓	7868476224
15/01/2018	05/08/2018	7868694229	1001217408	115Invoice	0.09	4.53	✓	4.44	✓	7868694229
15/02/2018	05/08/2018	7868910639	1001218073	115Invoice	0.16	7.94	✓	7.78	✓	7868910639
15/03/2018	05/08/2018	7869128241	1001218716	115Invoice	4.01	200.47	✓	196.46	✓	7869128241
15/04/2018	05/08/2018	7869348229	1001219380	115Invoice	6.78	338.89	✓	332.11	✓	7869348229

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals:

1,534.35 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 14/30/2018 3,178.45

If Paid By 05/08/2018,
Pay This Amount:

If Paid After 05/08/2018,
Pay this Amount:

1,503.67 USD

1,534.35 USD

Due If Paid On Time:
USD 1,503.67

Disc lost if paid late:
30.68

Due If Paid Late:
USD 1,534.35

APPROVED
ON

MAY 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Company: 8000

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

DC: 8115
Territory: 400
Customer: 190813
Date: 05/05/2018

As of: 05/04/2018 Page: 001
Mail to: Comp: 8000
AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 05/05/2018 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									
15/02/2018	05/08/2018	7868883134	2017004712	115Invoice	0.01	0.33		0.32 ✓		7868883134
15/04/2018	05/08/2018	7869315626	2017004740	115Invoice	0.26	13.19		12.93 ✓		7869315626

IF 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: 13.52 USD

Future Due: 0.00
Past Due: 0.00
Last Payment 14/30/2018 3,178.45

If Paid By 05/08/2018, Pay This Amount: 13.25 USD
If Paid After 05/08/2018, Pay this Amount: 13.52 USD

Due If Paid On Time: 13.25 USD
Disc lost if paid late: 0.27
Due If Paid Late: 13.52 USD

APPROVED ON

MAY 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Company: 8000

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

DC: 8115
Territory: 400
Customer: 256342
Date: 05/05/2018

As of: 05/04/2018
Mail to:
AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Page: 001
Comp: 8000

Cust: 256342
Date: 05/05/2018
PLEASE CHECK ANY
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										
14/30/2018	05/08/2018	7868466541	0429181108-00	115Invoice	4.13	206.74		202.61	✓	7868466541
14/30/2018	05/08/2018	7868466542	1507910357	115Invoice	1.09	54.71		53.62	✓	7868466542
15/02/2018	05/08/2018	7868909101	1507918215	115Invoice	2.12	105.82		103.70	✓	7868909101
15/02/2018	05/08/2018	7868909102	0501180337-00	115Invoice	0.01	0.63		0.62	✓	7868909102
15/03/2018	05/08/2018	7869134621	4307914173	115Invoice	8.63	431.65		423.02	✓	7869134621
15/03/2018	05/08/2018	7869134622	0502180328-00	115Invoice	0.66	32.79		32.13	✓	7869134622
15/04/2018	05/08/2018	7869335412	4307915767	115Invoice	4.18	208.92		204.74	✓	7869335412

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS
Subtotals: 1,041.26 USD

Future Due: 0.00
Past Due: 0.00
Last Payment 14/30/2018 3,178.45

If Paid By 05/08/2018, Pay This Amount: 1,020.44 USD
If Paid After 05/08/2018, Pay this Amount: 1,041.26 USD

Due If Paid On Time: 1,020.44
Disc lost if paid late: 20.82
Due If Paid Late: 1,041.26

APPROVED
ON

MAY 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

Company: 8000

DC: 8115

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

Territory: 81

Customer: 464450
Date: 05/05/2018

As of: 05/04/2018
Mail to:
AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Page: 001
Comp: 8000

Cust: 464450
Date: 05/05/2018
PLEASE CHECK ANY
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										
15/02/2018	05/08/2018	7868805602	55x421030	115Invoice	160.74	8,036.81		7,876.07	✓	7868805602
15/02/2018	05/08/2018	7868805605	55x421052	115Invoice	7.02	350.95		343.93	✓	7868805605
15/02/2018	05/08/2018	7868805608	55x421069	115Invoice	104.68	5,234.19		5,129.51	✓	7868805608
15/02/2018	05/08/2018	7868805609	55x421072	115Invoice	29.57	1,478.32		1,448.75	✓	7868805609
15/02/2018	05/08/2018	7868805611	55x421083	115Invoice	76.45	3,822.49		3,746.04	✓	7868805611
15/02/2018	05/08/2018	7868805612	55x421085	115Invoice	0.40	20.05		19.65	✓	7868805612
15/02/2018	05/08/2018	7868805613	55x421089	115Invoice	0.64	31.79		31.15	✓	7868805613
15/02/2018	05/08/2018	7868805614	55x421097	115Invoice	57.78	2,888.93		2,831.15	✓	7868805614
15/02/2018	05/08/2018	7868805615	55x421098	115Invoice	40.13	2,006.47		1,966.34	✓	7868805615
15/02/2018	05/08/2018	7868805616	55x421109	115Invoice	35.60	1,780.22		1,744.62	✓	7868805616
15/02/2018	05/08/2018	7868810417	55x421124	115Invoice	0.30	15.22		14.92	✓	7868810417
15/02/2018	05/08/2018	7868810418	55x421131	115Invoice	0.42	20.96		20.54	✓	7868810418
15/02/2018	05/08/2018	7868810419	55x421132	115Invoice	8.06	402.88		394.82	✓	7868810419
15/02/2018	05/08/2018	7868810420	55x421141	115Invoice	3.31	165.35		162.04	✓	7868810420
15/02/2018	05/08/2018	7868810421	55x421163	115Invoice	5.59	279.64		274.05	✓	7868810421
15/03/2018	05/03/2018	7869185216	55x421132	115Credit		58.00- P		58.00- P	✓	7869185216
15/03/2018	05/08/2018	7869187517	55x423384	115Invoice	1.18	59.18		58.00	✓	7869187517

PF 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:

26,535.45 USD

Future Due:

0.00

Past Due:

58.00-

Last Payment

0.00

If Paid By 05/08/2018,
Pay This Amount:

26,003.58 USD

Due If Paid On Time:
USD

26,003.58

Disc lost if paid late:

531.87

If Paid After 05/08/2018,
Pay this Amount:

26,535.45 USD

Due If Paid Late:
USD

26,535.45

APPROVED
ON

MAY 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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

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

☐ "ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	#### ENTER: ###
☐ "ENTER YOUR 4-DIGIT PIN"	
☐ "MAKE A PAYMENT, PRESS 1"	1
☐ "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★ 941 #
☐ "IF FEDERAL TAX DEPOSIT ENTER 1"	1
☐ "ENTER 2-DIGIT TAX FILING YEAR"	★ 18
☐ "ENTER 2-DIGIT TAX FILING ENDING MONTH"	★ 3
1ST QTR - 03 (MARCH) - Jan, Feb, Mar 2ND QTR - 06 (JUNE) - Apr, May, June 3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept 4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec	
☐ "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★ \$ 416.05 #
"1 TO CONFIRM"	1
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0 \$ 226.68 #
"ENTER W/CENTS AMOUNT OF MEDICARE"	\$ 53.02 #
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"	\$ 136.35 #
	CHECK \$ -
☐ "6-DIGIT SETTLEMENT DATE"	★
"1 TO CONFIRM"	1
☐ ACKNOWLEDGEMENT NUMBER	

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

Run Date: 05/07/18
Time: 13:26

MEMORIAL MEDICAL CENTER
Payroll Register (Bi-Weekly)
Pay Period 04/13/18 - 04/26/18 Run# 2

Page 5
P2RREG

Final Summary

-- Pay Code Summary -----							*-- Deductions Summary -----*						
PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross	Code	Amount			
P		178.95	N		N	N	N	1828.10	A/R		A/R2		A/R3
									ADVANC		AWARDS		BOOTS
									CAFE H		CAFE-1		CAFE-2
									CAFE-3		CAFE-4		CAFE-5
									CAFE-C		CAFE-D		CAFE-F
									CAFE-H		CAFE-I		CAFE-L
									CAFE-P		CANCER		CHILD
									CLINIC		COMBIN		CREDUN
									DD ADV		DENTAL		DEP-LF
									DIS-LF		EAT		EATCSH
									FEDTAX	136.35	FICA-M	26.51	FICA-O
									FIRSTC		FLEX S		FLX FE
									FORT D		FUTA		GIFT S
									GRANT		GRP-IN		GTL
									HOSP-I		ID TFT		LEAF
									LEGAL		MASA		MEALS
									MISC		MISC/		MMCSHR
									OTHER		PHI		PHI***
									PR FIN		RELAY		REPAY
									SAMS		SCRUBS		SIGNON
									ST-TX		STONDF		STONE
									STONE2		STUDEN		TSA-1
									TSA-2		TSA-C		TSA-P
									TSA-R		TUTION		UNIFOR
									UW/HOS				

*----- Grand Totals: 178.95 ----- (Gross: 1828.10 Deductions: 276.20 Net: 1551.90)
| Checks Count:- FT 2 PT Other Female 2 Male Credit OverAmt ZeroNet Term Total: 2 |

Pay Date
05/11/18


5/7/18


MEMORIAL MEDICAL CENTER

I B C

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- Apr 28th, 2018 - May 4th, 2018

Date	Bank Description	MMC Notes	Amount
5/3/2018	ACH Payment - VIVONET ACQUISIT PAYMENT	- Credit Card Machine Lease Expense	99.00

Total Electronic Payments: 99.00



Jason Anglin, CEO
Memorial Medical Center

May 7th, 2018

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK**

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- April 28th, 2018 - May 4th, 2018

Date	Bank Description	MMMC Notes	Amount	
5/1/2018	ACH Payment MCKESSON DRUG AUTO ACH ACH03448397 910000138	- 340B Drug Program Expense	3,178.45 *	261,282.24 +
5/4/2018	ACH Payment MERCH BNKCD DISCOUNT 971160910883 1149025200	- Credit Card Processing Fee	19.95	3,178.45 -
5/4/2018	ACH Payment MERCH BNKCD DISCOUNT 971160913887 1149025200	- Credit Card Processing Fee	195.60	257,347.08 -
5/4/2018	ACH Payment MERCH BNKCD DISCOUNT 971160914885 1149025200	- Credit Card Processing Fee	73.89	756.71 *
5/4/2018	ACH Payment MERCH BNKCD DISCOUNT 971160915882 1149025200	- Credit Card Processing Fee	64.90	
5/4/2018	ACH Payment MERCH BNKCD FEE 971160910883 114902520001002	- Credit Card Processing Fee	9.95	
5/4/2018	ACH Payment MERCH BNKCD FEE 971160911881 114902520001003	- Credit Card Processing Fee	29.90	
5/4/2018	ACH Payment MERCH BNKCD FEE 971160912889 114902520001004	- Credit Card Processing Fee	9.95	
5/4/2018	ACH Payment MERCH BNKCD FEE 971160913887 114902520001005	- Credit Card Processing Fee	156.58	
5/4/2018	ACH Payment MERCH BNKCD FEE 971160914885 114902520001006	- Credit Card Processing Fee	48.07	
5/4/2018	ACH Payment MERCH BNKCD INTERCHNG 971160913887 114902520	- Credit Card Processing Fee	83.18	
5/4/2018	ACH Payment MERCH BNKCD INTERCHNG 971160914885 114902520	- Credit Card Processing Fee	64.74	
5/4/2018	ACH Payment PAYROLL ONLINE TRF PAYROLL 113122655032423	- Payroll	257,347.08 *	
Total Electronic Payments:			261,282.24	

Credit
Card
Fees

May 7th, 2018

Jason Anglin, CEO
Memorial Medical Center

PROSPERITY BANK

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACH DATE May 15th

5/15/20218	TCDRS Retirement Payment	April Retirement	117,324.07
Total Electronic Payments:			117,324.07

May 7th, 2018

Jason Anglin, CEO
Memorial Medical Center

* Approved 05/02/18 CC

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
5/7/2018

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	QIS Cleared	ACH Transfer-In	Pending Ck to MMC for QIPP	YTD Interest Earned	IGT Transfer-In	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	381	458,124.38 ✓	322,376.25 ✓	145,648.13 ✓	61,969.54							62,069.54 ✓	61,969.54 ✓

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 0514
Account # 1257

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	QIS Cleared	ACH Transfer-In	Pending Ck to MMC for QIPP	YTD Interest Earned	IGT Transfer-In	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at W Hston	438	423,665.70 ✓	395,115.41 ✓	28,450.29 ✓	95,567.10							95,667.10 ✓	95,567.10 ✓

Crescent

411	77,001.54 ✓	56,092.25 ✓	10,809.29 ✓	64,155.13								95,567.10	64,155.13 ✓
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Broadmoor

1403	167,911.51 ✓	167,811.51 ✓		110,762.31								110,862.31 ✓	110,762.31 ✓
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Fort Bend

4446	149,524.48 ✓	113,125.06 ✓	36,299.42 ✓	19,082.57								19,182.57 ✓	19,082.57
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Routing Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 0514
Account # 2522

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.

L:\NH Weekly Transfers\NH UPL Transfer Summary\2018\May 2018\NH UPL Transfer Summary 5-7-18.xlsx

APPROVED
ON

MAY 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Approved:

TOTAL TRANSFERS 351,536.65

61,969.54 +
95,567.10 +
64,155.13 +
110,762.31 +
19,082.57 +
351,536.65 *

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
IBC Accounts
5/7/2018

Nursing Home	IBC Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Out	Pending Transfer	Pending Deposits	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens	4553	83,611.07 ✓	83,511.07 ✓	16,144.07			37.84				16,281.91 ✓	16,181.91
Bank Balance variance												

Routine Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank
ABA 614
Account # 4257

Nursing Home	IBC Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Out	Pending Transfer	Pending Deposits	MMC Portion - Return of IGT	MMC Portion - Federal Match	Cantex Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Solera at West Houston	4561	106,429.91 ✓		37,338.50			6,793.92				150,562.33 ✓	44,132.42 ✓
Bank Balance												
Pending Wire out												
Adjust Balance/Transfer Amt												
Crescent	4588	47,738.69 ✓	47,638.69 ✓	12,982.43			10,439.96				23,522.39 ✓	23,422.39 ✓
Bank Balance variance												
Broadmoor	4596	21,654.75 ✓	21,554.75 ✓	34,219.96			8,027.11				42,347.07 ✓	42,247.07 ✓
Bank Balance Variance												
Fort Bend	4618	14,471.58 ✓	14,371.58 ✓	6,981.40							7,081.40 ✓	6,981.40 ✓
Bank Balance Variance												
Total IBC Transfers												132,965.19

Routine Information for Crescent / Solera at West Houston / Fort Bend / Broadmoor:
Cantex Health Care Centers III LLC
JP Morgan Chase Bank
ABA 1614
Account # 12922

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.

16,181.91 +
44,132.42 +
23,422.39 +
42,247.07 +
6,981.40 +
132,965.19 *

Approved:
Jason Anglin, CEO
APPROVED
ON



MAY 07 2018

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
 Nursing Home UPL
 Weekly Nexion Transfer
 Prosperity Accounts
 5/7/2018

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	CLS Cleared	Pending Ck to MMC for QPPP	IGT Transfer-In	MMC Portion - Return of IGT	MMC Portion - Federal Match	Nexion Portion - Federal Match	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek	4454	364,657.04	305,592.38	55,008.82	58,964.66						55,108.82	55,008.82
<u>Routing Information for Golden Creek:</u>												
Nexion Health at Golden Creek												
Wells Fargo Bank, N.A.												
ABA 7248												
Account # 1323												
Bank Balance												
Variance												
Less:												
Less:												
Less:												
Leave in Balance												
Adjust Balance/Transfer Amt												
100.00												
55,008.82												
Approved: 												

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

APPROVED
 ON

MAY 07 2018

COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS