

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---August 05, 2020

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 619,607.51
TOTAL TRANSFERS BETWEEN FUNDS	\$ 208,667.81
TOTAL NURSING HOME UPL EXPENSES	\$ 804,612.79
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED August 05, 2020	\$ 1,632,888.11

APPROVED

AUG 05 2020

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---August 05, 2020

PAYABLES AND PAYROLL

7/31/2020 Weekly Payables	197,825.54
8/3/2020 McKesson-340B Prescription Expense	9,726.20
8/3/2020 Amerisource Bergen-340B Prescription Expense	747.31
8/3/2020 Payroll Liabilities -Payroll Taxes	102,069.22
8/3/2020 Payroll	309,167.05

Prosperity Electronic Bank Payments

7/27-7/31/20 Pay Plus-Patient Claims Processing Fee	72.19
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TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$	619,607.51
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TRANSFER BETWEEN FUNDS-NURSING HOMES

7/31/2020 MMC Operating to Ashford-correction of NH insurance payment and NH portion of QIPP payment deposited into MMC Operating	34,877.02
7/31/2020 MMC Operating to Solera-NH portion of QIPP payment	12,328.51
7/31/2020 MMC Operating to Fortbend-correction of NH insurance payment and NH portion of QIPP payment deposited into MMC Operating	14,609.19
7/31/2020 MMC Operating to Broadmoor-NH portion of QIPP payment	12,580.97
7/31/2020 MMC Operating to The Crescent-correction of NH insurance payment and NH portion of QIPP payment deposited into MMC Operating	12,760.57
7/31/2020 MMC Operating to Golden Creek Healthcare-correction of NH insurance payment and NH portion of QIPP payment deposited into MMC Operating	25,650.94
7/31/2020 MMC Operating to Gulf Pointe Plaza-correction of NH insurance payment deposited into MMC Operating	52,598.98
7/31/2020 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	43,261.63

TOTAL TRANSFERS BETWEEN FUNDS	\$	208,667.81
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NURSING HOME UPL EXPENSES

8/3/2020 Nursing Home UPL-Cantex Transfer	580,209.79
8/3/2020 Nursing Home UPL-Nexion Transfer	30,011.36
8/3/2020 Nursing Home UPL-HMG Transfer	21,100.49
8/3/2020 Nursing Home UPL-Tuscany Transfer	63,525.08

QIPP/INTEREST/RECOUP CHECKS TO MMC

8/3/2020 Ashford	14,736.53
8/3/2020 Broadmoor	5,307.59
8/3/2020 Crescent	4,359.99
8/3/2020 Fort Bend	6,049.66
8/3/2020 Solera	5,150.68
8/3/2020 Golden Creek	44,533.21
8/3/2020 Gulf Pointe	29,628.41

TOTAL NURSING HOME UPL EXPENSES	\$	804,612.79
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TOTAL INTER-GOVERNMENT TRANSFERS	\$	-
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GRAND TOTAL DISBURSEMENTS APPROVED August 05, 2020	\$	1,632,888.11
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JUL 30 2020

07/30/2020

10:23 Calhoun County Auditor

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 08/12/2020

ap_open_invoice.template

Vendor#

Vendor Name

Class

Pay Code

B0435

BARD PERIPHERAL VASCULAR

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
81298206	✓ 07/28/2020	07/22/2020	07/28/2020			

Gross	Discount	No-Pay	Net
109.32	0.00	0.00	109.32 ✓

SUPPLIES

Vendor Totals:

B0435

BARD PERIPHERAL

109.32

Gross

Discount

No-Pay

Net

Vendor#

B1150

Vendor Name

BAXTER HEALTHCARE

Class

W

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
67535379	✓ 07/21/2020	07/13/2020	08/07/2020			

Gross	Discount	No-Pay	Net
657.44	0.00	0.00	657.44 ✓

SUPPLIES

Vendor Totals:

B1150

BAXTER HEALTHCARE

657.44

Gross

Discount

No-Pay

Net

Vendor#

B1220

Vendor Name

BECKMAN COULTER INC

Class

M

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
5426473	✓ 07/22/2020	07/13/2020	08/07/2020			

Gross	Discount	No-Pay	Net
5,016.58	0.00	0.00	5,016.58 ✓

MAINT CONTRACT/LEASE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
7275518	✓ 07/22/2020	07/14/2020	08/08/2020			

Gross	Discount	No-Pay	Net
6,748.96	0.00	0.00	6,748.96 ✓

SUPPLIES

Vendor Totals:

B1220

BECKMAN COULTE

11,765.54

Gross

Discount

No-Pay

Net

Vendor#

12324

Vendor Name

BLUE CROSS BLUE SHIELD

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
071720A	07/29/2020	07/17/2020	08/01/2020			

Gross	Discount	No-Pay	Net
1,240.12	0.00	0.00	1,240.12 ✓

COBRA COVERAGE FOR D. MOOF

Vendor Totals:

12324

BLUE CROSS BLUE

1,240.12

Gross

Discount

No-Pay

Net

Vendor#

12740

Vendor Name

BUILDING KID STEPS

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
JUNE2020A	07/29/2020	07/29/2020	07/29/2020			

Gross	Discount	No-Pay	Net
1,126.00	0.00	0.00	1,126.00 ✓

SPEECH THERAPY

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
JUNE2020	07/29/2020	07/29/2020	07/29/2020			

Gross	Discount	No-Pay	Net
1,039.00	0.00	0.00	1,039.00 ✓

SPEECH THERAPY

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
JUNE2020B	07/29/2020	07/29/2020	07/29/2020			

Gross	Discount	No-Pay	Net
713.00	0.00	0.00	713.00 ✓

SPEECH THERAPY

Vendor Totals:

12740

BUILDING KID STEF

2,878.00

Gross

Discount

No-Pay

Net

Vendor#

C1048

Vendor Name

CALHOUN COUNTY

Class

W

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
072420	07/28/2020	07/24/2020	08/12/2020			

Gross	Discount	No-Pay	Net
67.89	0.00	0.00	67.89 ✓

FUEL

Vendor Totals:

C1048

CALHOUN COUNTY

67.89

Gross

Discount

No-Pay

Net

Vendor#

A1730

Vendor Name

CAREFUSION

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
9109393131	✓ 07/21/2020	07/07/2020	08/06/2020			

Gross	Discount	No-Pay	Net
157.94	0.00	0.00	157.94 ✓

SUPPLIES

Vendor Totals:

A1730

CAREFUSION

157.94

Gross

Discount

No-Pay

Net

Vendor#

12768

Vendor Name

CHEMAQUA

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
7024337	07/29/2020	07/10/2020	07/20/2020				500.00	0.00	0.00	500.00
WATER TREATMENT										
Vendor# 11030	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
	12768	CHEMAQUA	✓		500.00		0.00	0.00	500.00	✓
	Vendor Name	Class	COMBINED INSURANCE	✓		Pay Code				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072820	07/29/2020	07/28/2020	08/01/2020				877.94	0.00	0.00	877.94
INSURANCE										
Vendor# 10368	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
	11030	COMBINED INSURA			877.94		0.00	0.00	877.94	
	Vendor Name	Class	DEWITT POTH & SON	✓		Pay Code				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6125610	✓ 07/15/2020	07/13/2020	08/07/2020				206.73	0.00	0.00	206.73
SUPPLIES										
6126340	✓ 07/15/2020	07/13/2020	08/07/2020				38.90	0.00	0.00	38.90
SUPPLIES										
6124820	✓ 07/22/2020	07/13/2020	08/07/2020				49.90	0.00	0.00	49.90
SUPPLIES										
6128540	✓ 07/22/2020	07/14/2020	08/08/2020				150.93	0.00	0.00	150.93
SUPPLIES										
6129230	✓ 07/22/2020	07/15/2020	08/09/2020				121.19	0.00	0.00	121.19
SUPPLIES										
Vendor# 10368	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
	10368	DEWITT POTH & SC			567.65		0.00	0.00	567.65	
	Vendor Name	Class	DILON TECHNOLOGIES	✓		Pay Code				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
00034045	✓ 07/28/2020	07/23/2020	07/28/2020				200.00	0.00	0.00	200.00
SUPPLIES										
Vendor# 11960	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
	11960	DILON TECHNOLOC			200.00		0.00	0.00	200.00	
	Vendor Name	Class	DON BROWN ELEVATOR INSPECT	✓		Pay Code				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4886	✓ 07/29/2020	07/22/2020	07/22/2020				900.00	0.00	0.00	900.00
ANNUAL SAFETY INSPECTION										
Vendor# 11196	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
	11196	DON BROWN ELEV.			900.00		0.00	0.00	900.00	
	Vendor Name	Class	EMERGENCY STAFFING Solutio	✓		Pay Code				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
39397	✓ 07/29/2020	07/31/2020	07/31/2020				40,062.50	0.00	0.00	40,062.50
PRO FEES (16th - EOM)										
Vendor# F1400	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
	11284	EMERGENCY STAF			40,062.50		0.00	0.00	40,062.50	
	Vendor Name	Class	FISHER HEALTHCARE	✓	M	Pay Code				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
3112322	✓ 07/29/2020	07/07/2020	08/01/2020				203.40	0.00	0.00	203.40
SUPPLIES										
3292528	✓ 07/29/2020	07/10/2020	08/04/2020				807.12	0.00	0.00	807.12
SUPPLIES										
3351889	✓ 07/29/2020	07/13/2020	08/07/2020				345.35	0.00	0.00	345.35
SUPPLIES										
3421525	✓ 07/29/2020	07/14/2020	08/08/2020				23.42	0.00	0.00	23.42
SUPPLIES										
3489992	✓ 07/29/2020	07/15/2020	08/09/2020				1,512.00	0.00	0.00	1,512.00
SUPPLIES										

3558154	✓	07/29/2020	07/16/2020	08/10/2020			659.59	0.00	0.00	659.59	✓
3558155	✓	07/29/2020	07/16/2020	08/10/2020			9,719.76	0.00	0.00	9,719.76	✓
3622661	✓	07/29/2020	07/17/2020	08/11/2020			893.36	0.00	0.00	893.36	✓
Vendor#		Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
11183		F1400		FISHER HEALTHCA		14,164.00	0.00	0.00	14,164.00		
				Vendor Name		Class		Pay Code			
				FRONTIER	✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
071920	07/28/2020	07/19/2020	08/12/2020				65.40	0.00	0.00	65.40	✓
Vendor#		Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
12636		11183		FRONTIER		65.40	0.00	0.00	65.40		
				Vendor Name		Class		Pay Code			
				FUSION CLOUD SERVICES, LLC	✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
27825997	07/28/2020	07/16/2020	07/16/2020				1,114.19	0.00	0.00	1,114.19	✓
Vendor#		Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
W1300		12636		FUSION CLOUD SE		1,114.19	0.00	0.00	1,114.19		
				Vendor Name		Class		Pay Code			
				GRAINGER	✓	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
9591330536	07/29/2020	07/15/2020	08/09/2020				179.20	0.00	0.00	179.20	✓
Vendor#		Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
G1210		W1300		GRAINGER		179.20	0.00	0.00	179.20		
				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	
1891047	07/14/2020	07/07/2020	08/06/2020				795.06	0.00	0.00	795.06	✓
Vendor#		Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
10334		G1210		GULF COAST PAPE		795.06	0.00	0.00	795.06		
				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	
307646549	07/22/2020	07/13/2020	08/07/2020				394.00	0.00	0.00	394.00	✓
Vendor#		Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
12932		10334		HEALTH CARE LOG		394.00	0.00	0.00	394.00		
				Vendor Name		Class		Pay Code			
				INTRADO	✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
INV0022422	07/29/2020	06/30/2020	07/29/2020				468.16	0.00	0.00	468.16	✓
	35										
Vendor#		Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net		
M2178		12932		INTRADO		468.16	0.00	0.00	468.16		
				Vendor Name		Class		Pay Code			
				MCKESSON MEDICAL SURGICAL I	✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
09978268	07/21/2020	07/15/2020	07/30/2020				1,007.84	0.00	0.00	1,007.84	✓
09139185	07/29/2020	07/07/2020	07/22/2020				2,071.64	0.00	0.00	2,071.64	✓
09141935	07/29/2020	07/07/2020	07/22/2020				187.08	0.00	0.00	187.08	✓
09169261	07/29/2020	07/07/2020	07/22/2020				73.55	0.00	0.00	73.55	✓

Vendor Totals:		Number	Name	Gross	Discount	No-Pay	Net
M2178		MCKESSON MEDIC		3,340.11	0.00	0.00	3,340.11
Vendor#	Vendor Name	Class	Pay Code				
M2470	MEDLINE INDUSTRIES INC	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
1915490800	07/10/2020	06/30/2020	07/25/2020				
	SUPPLIES						
1915490816	07/10/2020	06/30/2020	07/25/2020				
	SUPPLIES						
1401536520	07/21/2020	07/17/2020	08/11/2020				
	CREDIT TAKEN TWICE						
1914113226	07/21/2020	07/17/2020	08/11/2020				
	TOOK CREDIT TWICE						
1916906710	07/22/2020	07/13/2020	08/07/2020				
	CREDIT INV 1915490800/PO 40445						
1916191696	07/29/2020	07/07/2020	08/01/2020				
	SUPPLIES						
1916191691	07/29/2020	07/07/2020	08/01/2020				
	SUPPLIES						
1916191692	07/29/2020	07/07/2020	08/01/2020				
	SUPPLIES						
1916191695	07/29/2020	07/07/2020	08/01/2020				
	SUPPLIES						
1916312794	07/29/2020	07/08/2020	08/02/2020				
	SUPPLIES						
1916312773	07/29/2020	07/08/2020	08/02/2020				
	SUPPLIES						
1916408489	07/29/2020	07/08/2020	08/02/2020				
	SUPPLIES						
1916312796	07/29/2020	07/08/2020	08/02/2020				
	SUPPLIES						
1916455440	07/29/2020	07/09/2020	08/03/2020				
	SUPPLIES						
1916455441	07/29/2020	07/09/2020	08/03/2020				
	SUPPLIES						
1916455438	07/29/2020	07/09/2020	08/03/2020				
	SUPPLIES						
1916662984	07/29/2020	07/10/2020	08/04/2020				
	SUPPLIES						
1917000844	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000848	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000854	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000853	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000851	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000839	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000841	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000847	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000845	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000849	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						
1917000842	07/29/2020	07/14/2020	08/08/2020				
	SUPPLIES						

1917000850	07/29/2020	07/14/2020	08/08/2020	37.26	0.00	0.00	37.26	✓
	✓		SUPPLIES					
1917000846	07/29/2020	07/14/2020	08/08/2020	37.08	0.00	0.00	37.08	✓
	✓		SUPPLIES					
1917000843	07/29/2020	07/14/2020	08/08/2020	96.19	0.00	0.00	96.19	✓
	✓		SUPPLIES					
1917157519	07/29/2020	07/15/2020	08/09/2020	18.83	0.00	0.00	18.83	✓
	✓		SUPPLIES					
1917255889	07/29/2020	07/16/2020	08/10/2020	116.27	0.00	0.00	116.27	✓
	✓		SUPPLIES					
1917255887	07/29/2020	07/16/2020	08/10/2020	9.52	0.00	0.00	9.52	✓
	✓		SUPPLIES					

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
M2470		MEDLINE INDUST	8,487.43	0.00	0.00	8,487.43

Vendor#
10182

Vendor Name					Class	Pay Code				
MERCEDES SCIENTIFIC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2335584		07/28/2020	07/02/2020	08/01/2020			43.66	0.00	0.00	43.66
SUPPLIES										
2337096		07/28/2020	07/07/2020	08/06/2020			44.59	0.00	0.00	44.59
SUPPLIES										

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10182		MERCEDES SCIENTIFIC	88.25	0.00	0.00	88.25

Vendor#
M2659

		Vendor Name		Class				Pay Code			
		MERRY X-RAY/SOURCEONE HEALTH		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
8800634753	07/14/2020	06/29/2020	07/29/2020				349.88	0.00	0.00	349.88	
SUPPLIES											

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
M2659		MERRY X-RAY/SOURCEONE	349.88	0.00	0.00	349.88

Vendor#
10536

Vendor Name					Class	Pay Code				
MORRIS & DICKSON CO, LLC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2290	✓	07/28/2020	07/20/2020	07/30/2020			-0.20	0.00	0.00	-0.20
			CREDIT							
2720	✓	07/28/2020	07/20/2020	07/30/2020			-7.59	0.00	0.00	-7.59
			CREDIT							
2183	✓	07/28/2020	07/20/2020	07/30/2020			-1,171.37	0.00	0.00	-1,171.37
			CREDIT							
2559	✓	07/28/2020	07/20/2020	07/30/2020			-8.18	0.00	0.00	-8.18
			CREDIT							
5862141	✓	07/28/2020	07/22/2020	08/01/2020			269.41	0.00	0.00	269.41
			INVENTORY							
5860903	✓	07/28/2020	07/22/2020	08/01/2020			1,778.98	0.00	0.00	1,778.98
			INVENTORY							
5861265	✓	07/28/2020	07/22/2020	08/01/2020			240.11	0.00	0.00	240.11
			INVENTORY							
5860902	✓	07/28/2020	07/22/2020	08/01/2020			538.84	0.00	0.00	538.84
			INVENTORY							
5861264	✓	07/28/2020	07/22/2020	08/01/2020			51.32	0.00	0.00	51.32
			INVENTORY							
5860904	✓	07/28/2020	07/22/2020	08/01/2020			291.82	0.00	0.00	291.82
			INVENTORY							
5866179	✓	07/28/2020	07/23/2020	08/02/2020			257.66	0.00	0.00	257.66
			INVENTORY							
5864105	✓	07/28/2020	07/23/2020	08/02/2020			56.31	0.00	0.00	56.31
			INVENTORY							
5864102	✓	07/28/2020	07/23/2020	08/02/2020			16.26	0.00	0.00	16.26
			INVENTORY							
5865495	✓	07/28/2020	07/23/2020	08/02/2020			705.40	0.00	0.00	705.40
			INVENTORY							

5864104	✓	07/28/2020	07/23/2020	08/02/2020		252.70	0.00	0.00	252.70	✓
				INVENTORY						
5864101	✓	07/28/2020	07/23/2020	08/02/2020		93.70	0.00	0.00	93.70	✓
				INVENTORY						
5865371	✓	07/28/2020	07/23/2020	08/02/2020		1,936.02	0.00	0.00	1,936.02	✓
				INVENTORY						
5865372	✓	07/28/2020	07/23/2020	08/02/2020		384.16	0.00	0.00	384.16	✓
				INVENTORY						
5865370	✓	07/28/2020	07/23/2020	08/02/2020		636.29	0.00	0.00	636.29	✓
				INVENTORY						
5864103	✓	07/28/2020	07/23/2020	08/02/2020		211.34	0.00	0.00	211.34	✓
				INVENTORY						
5869735	✓	07/28/2020	07/24/2020	08/03/2020		10.35	0.00	0.00	10.35	✓
				INVENTORY						
5869736	✓	07/28/2020	07/24/2020	08/03/2020		250.98	0.00	0.00	250.98	✓
				INVENTORY						
5869737	✓	07/28/2020	07/24/2020	08/03/2020		20.27	0.00	0.00	20.27	✓
				INVENTORY						
5877427	✓	07/28/2020	07/27/2020	08/06/2020		54.86	0.00	0.00	54.86	✓
				INVENTORY						
5877224	✓	07/28/2020	07/27/2020	08/06/2020		4.06	0.00	0.00	4.06	✓
				INVENTORY						
5877428	✓	07/28/2020	07/27/2020	08/06/2020		808.45	0.00	0.00	808.45	✓
				INVENTORY						
5877429	✓	07/28/2020	07/28/2020	08/07/2020		163.55	0.00	0.00	163.55	✓
				INVENTORY						
5881509	✓	07/29/2020	07/28/2020	08/07/2020		3,858.81	0.00	0.00	3,858.81	✓
				INVENTORY						
5881512	✓	07/29/2020	07/28/2020	08/07/2020		6,675.29	0.00	0.00	6,675.29	✓
				INVENTORY						
5881510	✓	07/29/2020	07/28/2020	08/07/2020		570.42	0.00	0.00	570.42	✓
				INVENTORY						
5881511	✓	07/29/2020	07/28/2020	08/07/2020		127.99	0.00	0.00	127.99	✓
				INVENTORY						
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		10536	MORRIS & DICKSOI			19,078.01	0.00	0.00	19,078.01	
Vendor#	10215	Vendor Name		Class		Pay Code				
		NATIONAL FIRE PROTECTION ASS		✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072820	07/29/2020	07/28/2020	07/28/2020				175.00	0.00	0.00	175.00
										✓
										1 YR MEMBERSHIP
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		10215	NATIONAL FIRE PR			175.00	0.00	0.00	175.00	
Vendor#	O1500	Vendor Name		Class		Pay Code				
		OLYMPUS AMERICA INC		✓	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
99438538	07/21/2020	07/20/2020	08/06/2020				1,137.51	0.00	0.00	1,137.51
										✓
										SERVICE CONTRACT
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		O1500	OLYMPUS AMERICA,			1,137.51	0.00	0.00	1,137.51	
Vendor#	O1416	Vendor Name		Class		Pay Code				
		ORTHO CLINICAL DIAGNOSTICS		✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1851492027	07/21/2020	07/09/2020	08/08/2020				224.02	0.00	0.00	224.02
										✓
										SUPPLIES
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		O1416	ORTHO CLINICAL D			224.02	0.00	0.00	224.02	
Vendor#	P1260	Vendor Name		Class		Pay Code				
		PENTAX MEDICAL COMPANY		✓	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
92191873	07/29/2020	07/15/2020	08/09/2020				397.24	0.00	0.00	397.24
										✓

1YR SRV CONTRACT BRONCHOS

Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
P1260			PENTAX MEDICAL C			397.24	0.00	0.00		397.24
Vendor#		Vendor Name			Class	Pay Code				
10372		PRECISION DYNAMICS CORP (PDI			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9343815041	✓ 07/21/2020	07/09/2020	08/08/2020				119.77	0.00	0.00	119.77 ✓
SUPPLIES										
4768337	✓ 07/29/2020	01/23/2020	02/22/2020				152.95	0.00	0.00	152.95 ✓
SUPPLIES										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
10372			PRECISION DYNAM			272.72	0.00	0.00		272.72
Vendor#		Vendor Name			Class	Pay Code				
11080		RADSOURCE			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
SC60986	✓ 07/14/2020	07/12/2020	08/06/2020				1,667.00	0.00	0.00	1,667.00 ✓
SERVICE CONTRACT										
SC1006	✓ 07/21/2020	07/16/2020	08/10/2020				1,625.00	0.00	0.00	1,625.00 ✓
MAINT CONTRACT										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
11080			RADSOURCE			3,292.00	0.00	0.00		3,292.00
Vendor#		Vendor Name			Class	Pay Code				
S1405		SERVICE SUPPLY OF VICTORIA IN W			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
701061695	✓ 07/14/2020	07/08/2020	08/07/2020				250.20	0.00	0.00	250.20 ✓
SUPPLIES										
701062789	✓ 07/22/2020	07/17/2020	08/10/2020				148.36	0.00	0.00	148.36 ✓
SUPPLIES										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
S1405			SERVICE SUPPLY C			398.56	0.00	0.00		398.56
Vendor#		Vendor Name			Class	Pay Code				
12436		SHANNA O'DONNELL, FNP			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072020	07/29/2020	07/20/2020	07/20/2020				129.00	0.00	0.00	129.00 ✓
RENEW RN LICENSE										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
12436			SHANNA O'DONNEI			129.00	0.00	0.00		129.00
Vendor#		Vendor Name			Class	Pay Code				
10195		SINGLETON ASSOCIATES PA			✓ ICP					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8638	✓ 07/28/2020	01/08/2020	07/28/2020				151.90	0.00	0.00	151.90 ✓
CONTRACT BILLING										
8637	✓ 07/28/2020	01/08/2020	07/28/2020				249.55	0.00	0.00	249.55 ✓
CONTRACT BILLING										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
10195			SINGLETON ASSOC			401.45	0.00	0.00		401.45
Vendor#		Vendor Name			Class	Pay Code				
11296		SOUTH TEXAS BLOOD & TISSUE C			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
107007449	✓ 07/21/2020	07/15/2020	08/09/2020				6,891.00	0.00	0.00	6,891.00 ✓
BLOOD										
CM2545	✓ 07/21/2020	07/15/2020	08/09/2020				-1,185.00	0.00	0.00	-1,185.00 ✓
CREDIT										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
11296			SOUTH TEXAS BLO			5,706.00	0.00	0.00		5,706.00
Vendor#		Vendor Name			Class	Pay Code				
C1010		SPARKLIGHT			✓ W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
128686862	07/28/2020	07/19/2020	07/19/2020				190.72	0.00	0.00	190.72 ✓
CABLE										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net

	C1010	SPARKLIGHT			190.72		0.00	0.00	190.72	
Vendor#		Vendor Name			Class			Pay Code		
12288		SPBS CLINICAL EQUIPMENT SRVC			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV008222	07/29/2020	06/01/2020	07/01/2020				12,375.00	0.00	0.00	12,375.00 ✓
		BIO MED SERVICES								
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
12288			SPBS CLINICAL EQ			12,375.00	0.00	0.00	12,375.00	
Vendor#		Vendor Name			Class			Pay Code		
11772		STERIS INSTRUMENT MANAGEM			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2098150	07/29/2020	07/14/2020	08/08/2020				1,069.00	0.00	0.00	1,069.00 ✓
		REPAIR								
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
11772			STERIS INSTRUMEI			1,069.00	0.00	0.00	1,069.00	
Vendor#		Vendor Name			Class			Pay Code		
12440		SUN LIFE ASSURANCE COMPANY			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071720	07/29/2020	07/17/2020	08/01/2020				2,526.92	0.00	0.00	2,526.92 ✓
		INSURANCE								
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
12440			SUN LIFE ASSURAN			2,526.92	0.00	0.00	2,526.92	
Vendor#		Vendor Name			Class			Pay Code		
13116		SYLVIA MENDOZA			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071520	07/29/2020	07/15/2020	07/15/2020				73.14	0.00	0.00	73.14 ✓
		TRAVEL								
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
13116			SYLVIA MENDOZA		✓	73.14	0.00	0.00	73.14	
Vendor#		Vendor Name			Class			Pay Code		
11944		TALX CORPORATION			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1001746591	07/22/2020	07/08/2020	08/07/2020				10.99	0.00	0.00	10.99 ✓
		EMPLOYEE VERIFICATION								
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
11944			TALX CORPORATIC			10.99	0.00	0.00	10.99	
Vendor#		Vendor Name			Class			Pay Code		
T1880		TEXAS DEPARTMENT OF LICENSII			A/P ✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072820	07/28/2020	07/28/2020	07/28/2020				60.00	0.00	0.00	60.00 ✓
		ELEVATOR INSPECTION CERTS								
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
T1880			TEXAS DEPARTMEI			60.00	0.00	0.00	60.00	
Vendor#		Vendor Name			Class			Pay Code		
11169		TXU ENERGY			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0552525173	07/29/2020	07/21/2020	08/10/2020				43,337.27	0.00	0.00	43,337.27 ✓
	24	ELECTRICTY								
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
11169			TXU ENERGY			43,337.27	0.00	0.00	43,337.27	
Vendor#		Vendor Name			Class			Pay Code		
U1054		UNIFIRST HOLDINGS			✓					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8400336551	07/15/2020	07/14/2020	08/08/2020				173.34	0.00	0.00	173.34 ✓
		LAUNDRY								
8400336815	07/21/2020	07/12/2020	08/06/2020				1,448.19	0.00	0.00	1,448.19 ✓
		LAUNDRY								
8400336790	07/21/2020	07/13/2020	08/07/2020				47.15	0.00	0.00	47.15 ✓
		LAUNDRY								
8400336791	07/21/2020	07/13/2020	08/07/2020				48.25	0.00	0.00	48.25 ✓
		LAUNDRY								

8400337216	07/21/2020	07/16/2020	08/10/2020	147.86	0.00	0.00	147.86	✓
	LAUNDRY							
8400337199	07/21/2020	07/16/2020	08/10/2020	1,557.77	0.00	0.00	1,557.77	✓
	LAUNDRY							
8400337191	07/21/2020	07/16/2020	08/10/2020	81.67	0.00	0.00	81.67	✓
	LAUNDRY							
8400337176	07/21/2020	07/16/2020	08/10/2020	168.24	0.00	0.00	168.24	✓
	LAUNDRY							
8400337172	07/21/2020	07/16/2020	08/10/2020	19.20	0.00	0.00	19.20	✓
	LAUNDRY							
8400337177	07/21/2020	07/16/2020	08/10/2020	175.83	0.00	0.00	175.83	✓
	LAUNDRY							
8400337175	07/21/2020	07/16/2020	08/10/2020	202.47	0.00	0.00	202.47	✓
	LAUNDRY							
8400337174	07/21/2020	07/16/2020	08/10/2020	131.55	0.00	0.00	131.55	✓
	LAUNDRY							

Vendor Totals:		Number	Name			Gross		Discount	No-Pay	Net
U1054			UNIFIRST HOLDING			4,201.52		0.00	0.00	4,201.52
Vendor#		Vendor Name			Class	Pay Code				
U1056		UNIFORM ADVANTAGE			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
11339820	07/29/2020	07/14/2020	07/29/2020				121.95	0.00	0.00	121.95
		UNIFORM ERIKA OSORNIA								
11363115	07/29/2020	07/20/2020	08/04/2020				267.90	0.00	0.00	267.90
		UNIFORM KELLI GOFF								
Vendor Totals:		Number	Name			Gross		Discount	No-Pay	Net
U1056			UNIFORM ADVANTAGE			389.85		0.00	0.00	389.85
Vendor#		Vendor Name			Class	Pay Code				
V1080		VICTORIA COMMUNICATION SVC			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6216	07/28/2020	06/19/2020	07/19/2020				4,240.00	0.00	0.00	4,240.00
		PORTABLE RADIOS								
Vendor Totals:		Number	Name			Gross		Discount	No-Pay	Net
V1080			VICTORIA COMMUNICATION			4,240.00		0.00	0.00	4,240.00
Vendor#		Vendor Name			Class	Pay Code				
11018		WEBPT, INC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV445911	07/29/2020	11/12/2018	07/29/2020				7,635.60	0.00	0.00	7,635.60
		PROVIDER SUB								
Vendor Totals:		Number	Name			Gross		Discount	No-Pay	Net
11018			WEBPT, INC			7,635.60		0.00	0.00	7,635.60
Vendor#		Vendor Name			Class	Pay Code				
11400		WEST COAST MEDICAL RESOURCES								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV059410	07/28/2020	07/20/2020	07/28/2020				1,074.00	0.00	0.00	1,074.00
		SUPPLIES								
Vendor Totals:		Number	Name			Gross		Discount	No-Pay	Net
11400			WEST COAST MEDICAL RESOURCES			1,074.00		0.00	0.00	1,074.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	197,825.54	0.00	0.00	197,825.54

APPROVED
ON
JUL 31 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK#
186633-
186682

McKESSON**STATEMENT**

As of: 07/31/2020

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 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory:

Customer: 632536

Date: 08/01/2020

As of: 07/31/2020 Page: 002
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 632536 PLEASE CHECK ANY
Date: 08/01/2020 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: 9,924.69 USD

Future Due: 0.00

If Paid By 08/04/2020,

Pay This Amount:

9,726.20 USD

Due If Paid On Time:

USD

9,726.20 ✓

Past Due: 0.00

Disc lost if paid late:

198.49

Last Payment 2,451.97
08/07/2017If Paid After 08/04/2020,
Pay this Amount:

9,924.69 USD

Due If Paid Late:

USD

9,924.69

CK # 500121

5,327.36 +
14.30 +
3,261.26 +
1,123.26 +
9,726.20 *

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

STATEMENT

As of: 07/31/2020

Page: 001

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 256342
Date: 08/01/2020

As of: 07/31/2020 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 08/01/2020 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											
17/27/2020	08/04/2020	7214159968	0724200358-00	115Invoice	27.91	1,395.47		1,367.56 ✓		7214159968	
17/27/2020	08/04/2020	7214159969	0725201259-00	115Invoice	20.47	1,023.71		1,003.24 ✓		7214159969	
17/27/2020	08/04/2020	7214159971	8619056409	115Invoice	5.12	255.93		250.81 ✓		7214159971	
17/27/2020	08/04/2020	7214159972	0726201233-00	115Invoice	0.01	0.63		0.62 ✓		7214159972	
17/27/2020	08/04/2020	7214352095	822998917	195Invoice	0.03	1.58		1.55 ✓		7214352095	
17/27/2020	08/04/2020	7214380661	00007242020TM	115Invoice	0.01	0.32		0.31 ✓		7214380661	
17/28/2020	08/04/2020	7214441450	4319080983	115Invoice	7.63	381.56		373.93 ✓		7214441450	
17/28/2020	08/04/2020	7214441451	1151567	115Invoice	3.48	174.21		170.73 ✓		7214441451	
17/29/2020	08/04/2020	7214711276	4319087251	115Invoice	13.94	697.02		683.08 ✓		7214711276	
17/29/2020	08/04/2020	7214711278	0728200207-00	115Invoice	7.39	369.32		361.93 ✓		7214711278	
17/29/2020	08/04/2020	7214881045	823582979	195Invoice	0.04	1.89		1.85 ✓		7214881045	
17/30/2020	08/04/2020	7214969069	6723881752	115Invoice	0.03	1.45		1.42 ✓		7214969069	
17/30/2020	08/04/2020	7214969070	0729200900-00	115Invoice	10.64	532.22		521.58 ✓		7214969070	
17/30/2020	08/04/2020	7215148387	0000007292020SS	115Invoice	6.62	330.80		324.18 ✓		7215148387	
17/31/2020	08/04/2020	7215208757	6723886352	115Invoice		0.16		0.16 ✓		7215208757	
17/31/2020	08/04/2020	7215388338	000007302020TM	115Invoice	5.40	269.81		264.41 ✓		7215388338	

*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: 5,436.08 USD

Future Due: 0.00

If Paid By 08/04/2020,
Pay This Amount:

5,327.36 USD

Due If Paid On Time:
USD

5,327.36 ✓

Past Due: 0.00

Disc lost if paid late:

108.72

Last Payment 4,813.90
17/27/2020

If Paid After 08/04/2020,
Pay this Amount:

5,436.08 USD

Due If Paid Late:
USD

5,436.08

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

As of: 07/31/2020

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 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 262252
Date: 08/01/2020As of: 07/31/2020 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 262252 PLEASE CHECK ANY
Date: 08/01/2020 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											
07/30/2020	08/04/2020	7214957273	832007	115Invoice	0.29	14.59		14.30	✓	7214957273	

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals: 14.59 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,813.90
07/27/2020If Paid By 08/04/2020,
Pay This Amount:

14.30 USD

If Paid After 08/04/2020,
Pay this Amount:

14.59 USD

Due If Paid On Time:

USD

14.30 ✓

Disc lost if paid late:

0.29

Due If Paid Late:

USD

14.59

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

As of: 07/31/2020

Page: 001

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

Company: 8000

HEB PHY FC 490/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: 464450

Date: 08/01/2020

As of: 07/31/2020
Mail to:Page: 001
Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 464450 PLEASE CHECK ANY
Date: 08/01/2020 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											
07/27/2020	08/04/2020	7214139601	55x459619	115Invoice	66.56	3,327.84		3,261.28 ✓		7214139601	

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: 3,327.84 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 9,831.42
07/13/2020If Paid By 08/04/2020,
Pay This Amount:

3,261.28 USD

If Paid After 08/04/2020,
Pay this Amount:

3,327.84 USD

Due If Paid On Time:

USD 3,261.28 ✓

Disc lost if paid late:

66.56

Due If Paid Late:

USD 3,327.84

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON**STATEMENT**

As of: 07/31/2020

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: 08/01/2020

As of: 07/31/2020
Mail to:Page: 001
Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 835438 PLEASE CHECK ANY
Date: 08/01/2020 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											
07/30/2020	08/04/2020	7215122670	832342	115Invoice	22.92	1,146.18		1,123.26	✓	7215122670	

*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: 1,146.18 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 4,813.90
07/27/2020If Paid By 08/04/2020,
Pay This Amount:

1,123.26 USD

If Paid After 08/04/2020,
Pay this Amount:

1,146.18 USD

Due If Paid On Time:

USD

1,123.26 ✓

Disc lost if paid late:

22.92

Due If Paid Late:

USD

1,146.18

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Division

AMERISOURCEBERGEN DRUG CORP
12727 WEST AIRPORT BLVD
SUGAR LAND TX 77478-6101
866-451-9655

Customer

WALGREENS #12494 340B
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2509
ACCOUNT: 100135284 / 037028186

Remit To

AMERISOURCEBERGEN DRUG CORP
PO Box 905223
CHARLOTTE NC 28290-5223

Summary

Not Yet Due:	0.00
Current:	747.31
Past Due:	0.00
Total Due:	747.31
Account Balance:	747.31

Account Activity

Activity Date	Due Date	Reference Number	Purchase Order Number	Activity Type	Amount
07-27-2020	08-07-2020	3040650597	157405	Invoice	✓ 111.51
07-27-2020	08-07-2020	3040668241	157454	Invoice	✓ 7.93
07-28-2020	08-07-2020	3040702552	157467	Invoice	✓ 330.28
07-29-2020	08-07-2020	3040752418	157476	Invoice	✓ 5.49
07-30-2020	08-07-2020	3040807798	157489	Invoice	✓ 291.79
07-31-2020	08-07-2020	3040857131	157500	Invoice	✓ 0.31

Thank You for Your Payment

Date	Payment Number	Amount
07-31-2020		(461.97)

Reminders

Due Date	Amount
08-07-2020	747.31
Total Due:	747.31

Terms:
Monday - Friday due in 7 days

APPROVED
ON

AUG 03 2020

**COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

CK # 500 122

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"	★ 20						
☐ "ENTER 2-DIGIT TAX FILING ENDING MONTH" 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	★ 09						
☐ "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN" "1 TO CONFIRM"	★ <table border="1"><tr><td>\$</td><td>102,069.22</td><td>#</td></tr><tr><td></td><td>1</td><td></td></tr></table>	\$	102,069.22	#		1	
\$	102,069.22	#					
	1						
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0 \$ 50,939.52 #						
"ENTER W/CENTS AMOUNT OF MEDICARE"	\$ 12,177.80 #						
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"	\$ 38,951.90 #						
☐ "6-DIGIT SETTLEMENT DATE" "1 TO CONFIRM"	CHECK ★ 1						
☐ ACKNOWLEDGEMENT NUMBER							

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

Run Date: 08/04/20
Time: 08:52

MEMORIAL MEDICAL CENTER
Payroll Register (Bi-Weekly)
Pay Period 07/17/20 - 07/30/20 Run# 1

Page 113
P2REG

Final Summary

*-- Pay Code Summary					*-- Deductions Summary				
PayCd	Description	Hrs	OT	SH WE HO CB	Gross	Code	Amount		
1	REGULAR PAY-S1	9521.50	N	N N	188297.70	A/R	770.00	A/R2	105.00 A/R3
1	REGULAR PAY-S1	1803.25	N	N N N	79146.66	ADVANC	AWARDS	BOOTS	
1	REGULAR PAY-S1	1.50	N	N Y N	68.51	CAFE H	CAFE-1	CAFE-2	
1	REGULAR PAY-S1	244.00	Y	N N	6254.38	CAFE-3	CAFE-4	CAFE-5	
1	REGULAR PAY-S1	25.75	Y	N N N	2013.14	CAFE-C	CAFE-D	1810.66 CAFE-F	
2	REGULAR PAY-S2	2655.25	N	N N	59798.70	CAFE-H	20437.47 CAFE-I	CAFE-L	
2	REGULAR PAY-S2	161.75	Y	N N	4940.38	CAFE-P	CANCER	CHILD	
3	REGULAR PAY-S3	1520.25	N	N N	40701.72	CLINIC	197.18 COMBIN	438.97 CREDUN	
3	REGULAR PAY-S3	202.25	Y	N N	8521.41	DD ADV	DENTAL	DEP-LF	
4	CALL BACK PAY	7.00	N	1 N N	213.15	DIS-LF	EAT	EATCSH	
C	CALL PAY	2340.25	N	1 N N	4680.50	FEDTAX	38951.90 FICA-M	6088.90 FICA-O	25469.76 ✓
E	EXTRA WAGES		N	N N N	293.04	FIRSTC	FLEX S	4790.93 FLX FE	
E	EXTRA WAGES		N	1 N N N	2206.25	FORT D	FUTA	GIFT S	68.70 ✓
F	FUNERAL LEAVE	32.00	N	1 N N	1093.36	GRANT	GRP-IN	GTL	
K	EXTENDED-ILLNESS-BANK	8.00	N	N N N	240.00	HOSP-I	ID TFT	LEAF	
K	EXTENDED-ILLNESS-BANK	410.50	N	1 N N	10335.49	LEGAL	391.08 MASA	827.50 MEALS	203.40 ✓
P	PAID-TIME-OFF	538.51	N	N N N	12849.96	MISC	MISC/	MMCSHR	
P	PAID-TIME-OFF	1194.77	N	1 N N	29862.41	NATFML	2200.42 OTHER	PHI	
X	CALL PAY 2	160.00	N	1 N N	320.00	PHI***	PR FIN	RELAY	
Z	CALL PAY 3	96.00	N	1 N N	288.00	REPAY	SAMS	SCRUBS	
t	PHONE & DATA		N	N N N	975.00	SIGNON	ST-TX	STONDF	840.86 ✓
						STONE	STONE2	STUDEN	
						SUNACC	963.27 SUNILL	1361.82 SUNLIF	1272.24 ✓
						SUNSTD	1714.41 SUNVIS	1263.94 SURCHG	785.00 ✓
						TSA-1	TSA-2	TSA-C	
						TSA-P	TSA-R	31638.10 TUTION	
						UNIFOR	1341.20 UN/HOS		
*----- Grand Totals: 20922.53 ----- (Gross: 453099.76					Deductions: 143932.71	Net: 309167.05			
Checks Count:- FT 205 PT 7 Other 41 Female 226 Male 25 Credit					OverAmt 7 ZeroNet	Term	Total: 251		

Pay Date
08.07.2020

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- July 27, 2020 August 2, 2020**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>
7/27/2020	PAY PLUS ACHTRANS 452579291 101000698375072	- 3rd Party Payor Fee
7/27/2020	IRS USATAXPYMT 220060905234490 6103601000518	- Payroll Taxes
7/28/2020	PAY PLUS ACHTRANS 452579291 101000699111409	- 3rd Party Payor Fee
7/28/2020	MCKESSON DRUG AUTO ACH ACH04255673 910000138	- 340B Drug Program Expense
7/29/2020	PAY PLUS ACHTRANS 452579291 101000699880999	- 3rd Party Payor Fee
7/30/2020	PAY PLUS ACHTRANS 452579291 101000690592407	- 3rd Party Payor Fee
7/31/2020	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense
7/31/2020	PAY PLUS ACHTRANS 452579291 101000691353656	- 3rd Party Payor Fee

<u>Amount</u>	<u>CI</u>
3.38	
102407.17	
22.88	
4813.9	
42.13	
1.16	
461.97	
2.64	
107,755.23	

Pay 3,388.41
 PLUS 22,888.00
 1,160.00
 2,640.00
 72,190.00
 107,755.23
 102,407.17
 4,813.90
 461.97
 72,190.00
 72,190.00
 0.00

 Jason Anglin, CEO
 Memorial Medical Center

August 3, 2020

* Approved 07-29-2020 CC
 * * Approved 07-22-2020 CC

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

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

Amount

 Jason Anglin, CEO
 Memorial Medical Center

August 3, 2020

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

7/30/2020
RECEIVED

07/30/2020

10:46

Collium County Auditor

Vendor#

11816

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

0
ap_open_invoice.template

Vendor Name

Class

Pay Code

ASHFORD GARDENS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
072720A	07/28/2020	07/27/2020	08/15/2020				25,076.39	0.00	0.00	25,076.39	✓
	TRANSFER	NH portion of QIPP deposited into MMC Operating									
072720	07/28/2020	07/27/2020	08/15/2020				9,800.63	0.00	0.00	9,800.63	✓
	TRANSFER	NH portion of QIPP deposited into MMC Operating									
Vendor Totals:	Number	Name				Gross	Discount		No-Pay	Net	
11816		ASHFORD GARDEN				34,877.02	0.00		0.00	34,877.02	

Vendor Totals:

Number

Name

Gross

Discount

No-Pay

Not

11816

ASHFORD GARDEN

34,877.02

0.00

0.00

34,877.02

Report Summary

Grand Totals:

Gross
34,877.02

Discount
0.00

No-Pay
0.00

Net
34,877.02

APPROVED
ON

JUL 31 2020

**COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

CHK#
180687

07/30/2020

MEMORIAL MEDICAL CENTER

0

10:50

AP Open Invoice List

ap_open_invoice.template

Vendor#

Vendor Name

Class

Pay Code

11828

SOLERA WEST HOUSTON

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072720A	07/28/2020	07/27/2020	08/15/2020				8,778.60	0.00	0.00	8,778.60 ✓
072720B	07/30/2020	07/27/2020	08/13/2020				3,549.91	0.00	0.00	3,549.91 ✓
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
11828			SOLERA WEST HOI			12,328.51	0.00	0.00		12,328.51

Report Summary

Grand Totals:

Gross	Discount	No-Pay	Net
12,328.51	0.00	0.00	12,328.51

APPROVED
ON

JUL 31 2020

CK #

186692

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED07/30/2020 **JUL 30 2020**

10:43

Calhoun County Auditor

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor#

Vendor Name

Class

Pay Code

11820

FORTBEND HEALTHCARE CENTE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071720	07/28/2020	07/17/2020	08/15/2020				25.77	0.00	0.00	25.77 ✓
	TRANSFER NH insurance pymt deposited into MMC Operating									
072020	07/28/2020	07/20/2020	08/15/2020				303.25	0.00	0.00	303.25 ✓
	TRANSFER NH insurance pymt deposited into MMC Operating									
072720	07/28/2020	07/27/2020	08/15/2020				3,991.82	0.00	0.00	3,991.82 ✓
	TRANSFER NH portion of QPP deposited into MMC Operating									
072720A	07/28/2020	07/27/2020	08/15/2020				10,288.35	0.00	0.00	10,288.35 ✓
	TRANSFER NH portion of QPP deposited into MMC Operating									
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
11820			FORTBEND HEALTH			14,609.19	0.00	0.00		14,609.19

Report Summary

Grand Totals:

Gross	Discount	No-Pay	Net
14,609.19	0.00	0.00	14,609.19

**APPROVED
ON****JUL 31 2020**CK#
186689**COUNTY AUDITOR
CALHOUN COUNTY, TEXAS**

RECEIVED

07/30/2020

10:44

30/2020
JUL 30 2020
44

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor#

Vendor#

11832

Vendor Name

Class

Pay Code

BROADMOOR AT CREEKSIDE PAF

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072720	07/28/2020	07/27/2020	08/15/2020				3,551.89	0.00	0.00	3,551.89 ✓
		TRANSFER	NH portion of QIPP deposited into MMC operating							
072720A	07/28/2020	07/27/2020	08/15/2020				9,029.08	0.00	0.00	9,029.08
		TRANSFER	NH portion of QIPP deposited into MMC operating							
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
11832		BROADMOOR AT C			12,580.97		0.00	0.00	12,580.97	

Grand Totals:

Gross

12,580.97

Discount

0.00

No-Pay

0.00

Net

12,580.97

APPROVED
ON

JUL 31 2020

CK#

186688

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

7/30/2020

tmp_cw5report8861271722195200324.html

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JUL 30 2020

10:44

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Calhoun County Auditor

Vendor#

Vendor Name

Class

Pay Code

11824

THE CRESCENT

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072720A	07/28/2020	07/27/2020	08/15/2020				7,413.55	0.00	0.00	7,413.55 ✓
	TRANSFER									
072720	07/28/2020	07/27/2020	08/15/2020				2,947.02	0.00	0.00	2,947.02 ✓
	TRANSFER									
072320	07/29/2020	07/23/2020	08/13/2020				2,400.00	0.00	0.00	2,400.00 ✓
	TRANSFER									
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
11824			THE CRESCENT			12,760.57	0.00	0.00		12,760.57

Grand Totals:

Gross
12,760.57Discount
0.00No-Pay
0.00Net
12,760.57

Report Summary

APPROVED
ON

JUL 31 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXASCHK#
186693

RECEIVED

07/30/2020

10:42 JUL 30 2020

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor#
11836

County Auditor

Vendor Name

Class

Pay Code

GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071520	07/28/2020	07/15/2020	08/15/2020				1,122.40	0.00	0.00	1,122.40 ✓
	TRANSFER									
072020	07/28/2020	07/20/2020	08/15/2020				210.70	0.00	0.00	210.70 ✓
	TRANSFER									
072120	07/28/2020	07/21/2020	08/15/2020				81.58	0.00	0.00	81.58 ✓
	TRANSFER									
072220	07/28/2020	07/22/2020	08/15/2020				1,673.16	0.00	0.00	1,673.16 ✓
	TRANSFER									
072720	07/28/2020	07/27/2020	08/15/2020				6,509.27	0.00	0.00	6,509.27 ✓
	TRANSFER									
072720A	07/28/2020	07/27/2020	08/15/2020				15,772.89	0.00	0.00	15,772.89 ✓
	TRANSFER									
072720B	07/29/2020	07/27/2020	08/13/2020				280.94	0.00	0.00	280.94 ✓
	TRANSFER									
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
11836			GOLDENCREEK HE			25,650.94	0.00	0.00	25,650.94	

Report Summary

Grand Totals:

Gross	Discount	No-Pay	Net
25,650.94	0.00	0.00	25,650.94

APPROVED
ON

JUL 31 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXASCKFF
186690

RECEIVED

07/30/2020

10:41

JUL 30 2020

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Calhoun County Auditor

Vendor#
12696

Vendor Name

Class

Pay Code

GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071720A	07/28/2020	07/17/2020	08/15/2020				2,460.04	0.00	0.00	2,460.04 ✓
	TRANSFER									
071720	07/28/2020	07/17/2020	08/15/2020				176.00	0.00	0.00	176.00 ✓
	TRANSFER									
072020	07/28/2020	07/20/2020	08/15/2020				5,776.22	0.00	0.00	5,776.22 ✓
	TRANSFER									
072120	07/28/2020	07/21/2020	08/15/2020				29,239.99	0.00	0.00	29,239.99 ✓
	TRANSFER									
072220	07/28/2020	07/22/2020	08/15/2020				1,262.88	0.00	0.00	1,262.88 ✓
	TRANSFER									
072720	07/28/2020	07/27/2020	08/15/2020				3,713.89	0.00	0.00	3,713.89 ✓
	TRANSFER									
072720A	07/28/2020	07/27/2020	08/15/2020				9,449.96	0.00	0.00	9,449.96 ✓
	TRANSFER									
072320	07/29/2020	07/23/2020	08/15/2020				520.00	0.00	0.00	520.00 ✓
	TRANSFER									
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
12696		GULF POINTE PLAZ			52,598.98	0.00	0.00	0.00	52,598.98	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	52,598.98	0.00	0.00	52,598.98

APPROVED
ON

JUL 31 2020 CK#

186691

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

7/30/2020

tmp__cw5report5814897905621154951.html

RECEIVED

07/30/2020

10:41

JUL 30 2020

Calhoun County Auditor

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor#

13004

Vendor Name

TUSCANY VILLAGE

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
072120A	07/28/2020	07/21/2020	08/15/2020				9,656.41	0.00	0.00	9,656.41 ✓
	TRANSFER									
072120	07/28/2020	07/21/2020	08/15/2020				2,329.95	0.00	0.00	2,329.95 ✓
	TRANSFER									
072220	07/28/2020	07/22/2020	08/15/2020				14,316.26	0.00	0.00	14,316.26 ✓
	TRANSFER									
072320	07/29/2020	07/23/2020	08/13/2020				16,959.01	0.00	0.00	16,959.01 ✓
	TRANSFER									
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
13004			TUSCANY VILLAGE			43,261.63	0.00	0.00		43,261.63

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	43,261.63	0.00	0.00	43,261.63

APPROVED
ON

JUL 31 2020

CHK#
182694COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

8

RUN DATE:08/04/20
TIME:09:43

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/05/20 THRU 08/05/20

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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	186463	08/05/20	398.00	3WON, LLC
A/P	186464	08/05/20	47.29	ADT COMMERCIAL
A/P	186465	08/05/20	21.68	ADVANCE MEDICAL DESIGNS INC
A/P	186466	08/05/20	695.31	AIRGAS USA, LLC - CENTRAL DIV
A/P	186467	08/05/20	242.64	ALCO SALES & SERVICE CO
A/P	186468	08/05/20	477.00	ALCON LABORATORIES, INC.
A/P	186469	08/05/20	1,829.25	ALLYSON SWOPE
A/P	186470	08/05/20	519.00	AMERICAN APPLIANCE
A/P	186471	08/05/20	21.99	AQUA BEVERAGE COMPANY
A/P	186472	08/05/20	59.88	AUTO PARTS & MACHINE CO.
A/P	186473	08/05/20	109.32	BARD PERIPHERAL VASCULAR
A/P	186474	08/05/20	1,128.55	BAXTER HEALTHCARE
A/P	186475	08/05/20	1,095.20	BAYER HEALTHCARE
A/P	186476	08/05/20	.00	VOIDED
A/P	186477	08/05/20	25,417.31	BECKMAN COULTER INC
A/P	186478	08/05/20	125.95	BEEKLEY CORPORATION
A/P	186479	08/05/20	209,226.82	BLUE CROSS BLUE SHIELD
A/P	186480	08/05/20	247.13	CDW GOVERNMENT, INC.
A/P	186481	08/05/20	1,699.00	CERVEY, LLC
A/P	186482	08/05/20	33,205.73	CLINICAL PATHOLOGY LABS
A/P	186483	08/05/20	594.00	CLSI LOCKBOX
A/P	186484	08/05/20	8,925.56	COASTAL REFRIGERATION
A/P	186485	08/05/20	827.17	DEWITT POTTH & SON
A/P	186486	08/05/20	140,390.88	DISCOVERY MEDICAL NETWORK INC
A/P	186487	08/05/20	38,870.52	EVIDENT
A/P	186488	08/05/20	59.31	FEDERAL EXPRESS CORP.
A/P	186489	08/05/20	2,966.72	FISHER HEALTHCARE
A/P	186490	08/05/20	2,236.76	FRASIER HEALTHCARE CONSULTING,
A/P	186491	08/05/20	7,520.12	GE PRECISION HEALTHCARE, LLC
A/P	186492	08/05/20	327.04	GRAINGER
A/P	186493	08/05/20	10,028.68	GREAT AMERICAN FINANCIAL SVCS
A/P	186494	08/05/20	1,391.32	GULF COAST PAPER COMPANY
A/P	186495	08/05/20	407.75	HEALTHCARE CODING & CONSULTING
A/P	186496	08/05/20	25,929.40	HEALTHCARE FINANCIAL SERVICES
A/P	186497	08/05/20	840.00	HILL-ROM COMPANY, INC
A/P	186498	08/05/20	807.83	IRON MOUNTAIN
A/P	186499	08/05/20	26,542.37	ITA RESOURCES INC
A/P	186500	08/05/20	781.70	LEGAL SHIELD
A/P	186501	08/05/20	970.24	LEGATO
A/P	186502	08/05/20	1,460.48	LOWE'S HOME CENTERS INC
A/P	186503	08/05/20	840.86	M G TRUST
A/P	186504	08/05/20	104.25	M.C. JOHNSON COMPANY INC
A/P	186505	08/05/20	1,627.00	MASA GLOBAL BUILDING
A/P	186506	08/05/20	510.59	MCKESSON MEDICAL SURGICAL INC
A/P	186507	08/05/20	8,390.91	MEDICAL TECHNOLOGY ASSOCIATES
A/P	186508	08/05/20	136.31	MEDLINE INDUSTRIES INC
A/P	186509	08/05/20	164.54	MEMORIAL MEDICAL CLINIC
A/P	186510	08/05/20	293.06	MICROTEK MEDICAL INC
A/P	186511	08/05/20	35.00	MONICA CARR
A/P	186512	08/05/20	.00	VOIDED

RUN DATE:08/04/20
TIME:09:43

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/05/20 THRU 08/05/20

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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	186513	08/05/20	9,398.54	MORRIS & DICKSON CO, LLC
A/P	186514	08/05/20	4,400.62	NATIONAL FARM LIFE INSURANCE
A/P	186515	08/05/20	146.28	OFFICE DEPOT
A/P	186516	08/05/20	2,600.00	PABLO GARZA
A/P	186517	08/05/20	187.50	PALACIOS BEACON
A/P	186518	08/05/20	2,000.00	PARA
A/P	186519	08/05/20	207.00	PITNEY BOWES INC
A/P	186520	08/05/20	81.43	PRECISION DYNAMICS CORP (PDC)
A/P	186521	08/05/20	1,949.95	REVCYCLE+, INC.
A/P	186522	08/05/20	262.50	REVISTA de VICTORIA
A/P	186523	08/05/20	3,690.30	SANOFI PASTEUR INC
A/P	186524	08/05/20	236.70	SERVICE SUPPLY OF VICTORIA INC
A/P	186525	08/05/20	320.54	SHIRLEY KARNEI
A/P	186526	08/05/20	4,038.24	SIEMENS FINANCIAL SERVICES
A/P	186527	08/05/20	400.00	SIGN AD, LTD.
A/P	186528	08/05/20	175.00	SIMMLER, INC.
A/P	186529	08/05/20	.00	VOIDED
A/P	186530	08/05/20	356.91	SINGLETON ASSOCIATES PA
A/P	186531	08/05/20	5,000.00	SOUTHEAST TEXAS HEALTH SYS
A/P	186532	08/05/20	2,528.27	SPARKLIGHT
A/P	186533	08/05/20	12,375.00	SPBS CLINICAL EQUIPMENT SRVC
A/P	186534	08/05/20	4,704.87	STRYKER SUSTAINABILITY
A/P	186535	08/05/20	6,843.00	T-SYSTEM, INC
A/P	186536	08/05/20	10.99	TALX CORPORATION
A/P	186537	08/05/20	3,690.52	TEXAS ADVANTAGE COMMUNITY BANK
A/P	186538	08/05/20	140.00	TEXAS DEPARTMENT OF LICENSING
A/P	186539	08/05/20	2,500.00	THE INLINE GROUP
A/P	186540	08/05/20	1,911.91	THE US CONSULTING GROUP
A/P	186541	08/05/20	1,329.82	TRIZETTO PROVIDER SOLUTIONS
A/P	186542	08/05/20	3,351.44	UNIFIRST HOLDINGS
A/P	186543	08/05/20	445.80	UNIFORM ADVANTAGE
A/P	186544	08/05/20	4,905.51	WAGeworks, INC.
A/P	186545	08/05/20	816.59	WATERMARK GRAPHICS INC
A/P	186546	08/05/20	895.00	WEST COAST MEDICAL RESOURCES
A/P *	186547	08/05/20	29,250.00	WOUND CARE SPECIALISTS
A/P	186633	08/05/20	109.32	BARD PERIPHERAL VASCULAR
A/P	186634	08/05/20	657.44	BAXTER HEALTHCARE
A/P	186635	08/05/20	11,765.54	BECKMAN COULTER INC
A/P	186636	08/05/20	1,240.12	BLUE CROSS BLUE SHIELD
A/P	186637	08/05/20	2,878.00	BUILDING KID STEPS
A/P	186638	08/05/20	67.89	CALHOUN COUNTY
A/P	186639	08/05/20	157.94	CAREFUSION
A/P	186640	08/05/20	500.00	CHEMAQUA
A/P	186641	08/05/20	877.94	COMBINED INSURANCE
A/P	186642	08/05/20	567.65	DEWITT POTH & SON
A/P	186643	08/05/20	200.00	DILON TECHNOLOGIES
A/P	186644	08/05/20	900.00	DON BROWN ELEVATOR INSPECTIONS
A/P	186645	08/05/20	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	186646	08/05/20	14,164.00	FISHER HEALTHCARE
A/P	186647	08/05/20	65.40	FRONTIER
A/P	186648	08/05/20	1,114.19	FUSION CLOUD SERVICES, LLC

Payables 197,825.54 +
34,877.02 +
12,328.51 +
14,609.19 +
12,580.97 +
12,760.57 +
25,650.94 +
52,598.98 +
43,261.62 +
406,493.35 *

Murkins
Homes

RUN DATE:08/04/20
TIME:09:43

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/05/20 THRU 08/05/20

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BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	186649	08/05/20	179.20	GRAINGER
A/P	186650	08/05/20	795.06	GULF COAST PAPER COMPANY
A/P	186651	08/05/20	394.00	HEALTH CARE LOGISTICS INC
A/P	186652	08/05/20	468.16	INTRADO
A/P	186653	08/05/20	3,340.11	MCKESSON MEDICAL SURGICAL INC
A/P	186654	08/05/20	.00	VOIDED
A/P	186655	08/05/20	.00	VOIDED
A/P	186656	08/05/20	.00	VOIDED
A/P	186657	08/05/20	.00	VOIDED
A/P	186658	08/05/20	8,487.43	MEDLINE INDUSTRIES INC
A/P	186659	08/05/20	88.25	MERCEDES SCIENTIFIC
A/P	186660	08/05/20	349.88	MERRY X-RAY/SOURCEONE HEALTHCA
A/P	186661	08/05/20	.00	VOIDED
A/P	186662	08/05/20	.00	VOIDED
A/P	186663	08/05/20	19,078.01	MORRIS & DICKSON CO, LLC
A/P	186664	08/05/20	175.00	NATIONAL FIRE PROTECTION ASSOC
A/P	186665	08/05/20	1,137.51	OLYMPUS AMERICA INC
A/P	186666	08/05/20	224.02	ORTHO CLINICAL DIAGNOSTICS
A/P	186667	08/05/20	397.24	PENTAX MEDICAL COMPANY
A/P	186668	08/05/20	272.72	PRECISION DYNAMICS CORP (PDC)
A/P	186669	08/05/20	3,292.00	RADSOURCE
A/P	186670	08/05/20	398.56	SERVICE SUPPLY OF VICTORIA INC
A/P	186671	08/05/20	129.00	SHANNA O'DONNELL, FNP
A/P	186672	08/05/20	401.45	SINGLETON ASSOCIATES PA
A/P	186673	08/05/20	5,706.00	SOUTH TEXAS BLOOD & TISSUE CEN
A/P	186674	08/05/20	190.72	SPARKLIGHT
A/P	186675	08/05/20	12,375.00	SPBS CLINICAL EQUIPMENT SRVC
A/P	186676	08/05/20	1,069.00	STERIS INSTRUMENT MANAGEMENT
A/P	186677	08/05/20	2,526.92	SUN LIFE ASSURANCE COMPANY
A/P	186678	08/05/20	73.14	SYLVIA MENDOZA
A/P	186679	08/05/20	10.99	TALX CORPORATION
A/P	186680	08/05/20	60.00	TEXAS DEPARTMENT OF LICENSING
A/P	186681	08/05/20	43,337.27	TXU ENERGY
A/P	186682	08/05/20	4,201.52	UNIFIRST HOLDINGS
A/P	186683	08/05/20	389.85	UNIFORM ADVANTAGE
A/P	186684	08/05/20	4,240.00	VICTORIA COMMUNICATION SVCS
A/P	186685	08/05/20	7,635.60	WEBPT, INC
A/P	186686	08/05/20	1,074.00	WEST COAST MEDICAL RESOURCES
A/P	186687	08/05/20	34,877.02	ASHFORD GARDENS
A/P	186688	08/05/20	12,580.97	BROADMOOR AT CREEKSIDE PARK
A/P	186689	08/05/20	14,609.19	FORTBEND HEALTHCARE CENTER
A/P	186690	08/05/20	25,650.94	GOLDENCREEK HEALTHCARE
A/P	186691	08/05/20	52,598.98	GULF POINTE PLAZA
A/P	186692	08/05/20	12,328.51	SOLERA WEST HOUSTON
A/P	186693	08/05/20	12,760.57	THE CRESCENT
A/P	186694	08/05/20	43,261.63	TUSCANY VILLAGE
TOTALS:			1,078,191.00	

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

1,078,191.00
671,697.55
406,493.35

VOIDED CHECKS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
8/3/2020

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		209,302.54 ✓	209,202.54 ✓	119,294.26 ✓		119,394.26 ✓	104,496.30
						Bank Balance	119,394.26 ✓
						Variance	-
						Leave In Balance	100.00
						Medicare Withholding owed to MMC	
						QIPP 1,2, & 3	
						QIPP 4 & LAPSE	14,736.53 ✓
						July Interest	61.43 ✓
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	104,496.30 ✓
Broadmoor		222,521.64 ✓	222,421.64 ✓	183,397.70 ✓		183,497.70 ✓	178,051.01
						Bank Balance	183,497.70 ✓
						Variance	-
						Leave In Balance	100.00
						QIPP 1,2, & 3	
						QIPP 4 & LAPSE	5,307.59 ✓
						July Interest	39.10 ✓
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	178,051.01 ✓
Crescent		232,762.46 ✓	232,662.46 ✓	74,248.97 ✓		74,348.97 ✓	69,854.96
						Bank Balance	74,348.97 ✓
						Variance	-
						Leave In Balance	100.00
						QIPP 1,2, & 3	
						QIPP 4 & LAPSE	4,359.99 ✓
						July Interest	34.02 ✓
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	69,854.96 ✓
Fort Bend		40,670.56 ✓	40,570.56 ✓	68,211.66 ✓		68,311.66 ✓	62,146.88
						Bank Balance	68,311.66 ✓
						Variance	-
						Leave In Balance	100.00
						QIPP 1,2, & 3	
						QIPP 4 & LAPSE	6,049.66 ✓
						July Interest	15.12 ✓
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	62,146.88 ✓
Solera at W Houston		101,081.50 ✓	100,981.50 ✓	170,845.88 ✓		170,945.88 ✓	165,660.64
						Bank Balance	170,945.88 ✓
						Variance	-
						Leave In Balance	100.00
						QIPP 1,2, & 3	
						QIPP 4 & LAPSE	5,150.68 ✓
						July Interest	34.56 ✓
						August Interest	
						September Interest	
						Adjust Balance/Transfer Amt	165,660.64 ✓
TOTAL TRANSFERS							580,209.79

Routing Information for Crescent / Solera at West Houston / F
Cantex Health Care Centers III LLC
JP Morgan Chase Bank

Note: Only balances of over \$5,000 will be transferred to the r
Note 2: Each account has a base balance of \$100 that MMC d

J:\NH Weekly Transfers\NH UPL Transfer Summary\2020\August\NH UPL Transfer Summary 8-3-20.xlsx

Approved:

Jason Anglin, CEO

8/3/2020

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Ashford Gardens

7/27/2020 CHECK #1100
 7/27/2020 AMERIGROUP CORPO E-PAYMENT EE52056618 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG
 7/27/2020 UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*9550147423*1411289245*000087726\
 7/27/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202007241200675*1912008361*0000TEX01\
 7/27/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*202007241200643*1912008361*0000TEX01\
 7/27/2020 NOVITAS SOLUTION HCCLAIMPMT 675423 420000174 TRN*1*EFT6965986*1205296137*000004911\
 7/28/2020 Amerigroup TXSC HCCLAIMPMT 3128904307 111000 TRN*1*3128904307*1752603231\
 7/29/2020 WIRE OUT ASHFORD HEALTH CARE CENTER LTD
 7/30/2020 Amerigroup TXSC HCCLAIMPMT 3129138563 111000 TRN*1*3129138563*1752603231\
 7/30/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072916300792*1912008361*0000TEX01\
 7/31/2020 Accr Earning Pymt
 7/31/2020 CHECK #1101
 7/31/2020 NOVITAS SOLUTION HCCLAIMPMT 675423 420000106 TRN*1*EFT6967954*1205296137*000004911\
 7/31/2020

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		Q1PP/Comp1	Q1PP/Comp2	Q1PP/Comp3	Q1PP/Comp4 &Lapse	Q1PP TI	
2,984.40	✓						-
-	29,473.06				29,473.06	14,736.53	14,736.53
-	7,790.00						7,790.00
-	357.58						357.58
-	47,807.85						47,807.85
-	30,335.31						30,335.31
153,292.52	✓						510.38
-	549.64						549.64
-	1,021.63						1,021.63
-	61.43						-
52,925.62	✓						-
-	1,387.38						1,387.38
209,202.54	✓				29,473.06	14,736.53	104,496.30

Broadmoor

7/27/2020 AMERIGROUP CORPO E-PAYMENT EE52056621 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG
 7/27/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072416800650*1912008361*0000TEX01\
 7/27/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072416800650*1912008361*0000TEX01\
 7/27/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072416800650*1912008361*0000TEX01\
 7/27/2020 HUMANA INS CO HCCLAIMPMT 390861 830000502205 TRN*1*001290051494455*1391263473\
 7/28/2020 HUMANA INS CO HCCLAIMPMT 390861 830000546356 TRN*1*001290051563119*1391263473\
 7/28/2020 HUMANA INS CO HCCLAIMPMT 390861 830000545934 TRN*1*001290051540720*1391263473\
 7/28/2020 HUMANA INS CO HCCLAIMPMT 390861 830000545479 TRN*1*001290051517168*1391263473\
 7/28/2020 HUMANA CHA DISB HCCLAIMPMT 390861 4200001950 TRN*1*014840101533161*1611013183\
 7/29/2020 WIRE OUT CANTEX HEALTH CARE CENTERS III
 7/30/2020 UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*9551367242*1411289245*000087726\
 7/30/2020 NOVITAS SOLUTION HCCLAIMPMT 676357 420000179 TRN*1*EFT5646726*1205296137*000004011\
 7/31/2020 Accr Earning Pymt
 7/31/2020 CHECK #63
 7/31/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020073010701044*1912008361*0000TEX01\
 7/31/2020 NOVITAS SOLUTION HCCLAIMPMT 676357 420000105 TRN*1*EFT5648110*1205296137*000004011\
 7/31/2020 HUMANA CHA DISB HCCLAIMPMT 390861 4200001997 TRN*1*014840101549138*1611013183\
 7/31/2020

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		Q1PP/Comp1	Q1PP/Comp2	Q1PP/Comp3	Q1PP/Comp4 &Lapse	Q1PP TI	
-	10,615.18				10,615.18	5,307.59	5,307.59
-	3,962.00						3,962.00
-	4,516.50						4,516.50
-	31,594.41						31,594.41
-	4,835.44						4,835.44
-	13,252.85						13,252.85
-	12,305.27						12,305.27
-	2,841.28						2,841.28
-	20,295.46						20,295.46
203,352.45	✓						-
-	9,640.00						9,640.00
-	49,169.00						49,169.00
-	39.10						-
19,069.19	✓						-
-	3,519.30						3,519.30
-	3,006.55						3,006.55
-	13,805.36						13,805.36
222,421.64	✓				10,615.18	5,307.59	178,051.01

Crescent

7/27/2020 AMERIGROUP CORPO E-PAYMENT EE52056620 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG
 7/27/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072416800650*1912008361*0000TEX01\
 7/28/2020 HUMANA INS CO HCCLAIMPMT 390861 830000546356 TRN*1*001290051563120*1391263473\
 7/28/2020 NOVITAS SOLUTION HCCLAIMPMT 676323 420000171 TRN*1*EFT5643672*1205296137*000004011\
 7/28/2020 HUMANA CHA DISB HCCLAIMPMT 390861 4200001951 TRN*1*014840101540540*1611013183\
 7/29/2020 WIRE OUT CANTEX HEALTH CARE CENTERS III
 7/29/2020 NOVITAS SOLUTION HCCLAIMPMT 676323 420000187 TRN*1*EFT5645122*1205296137*000004011\
 7/30/2020 MANAGEANDNET1718 MNS PMNT 00000000003268 41 0254240
 7/31/2020 Accr Earning Pymt
 7/31/2020 CHECK #93
 7/31/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020073013400553*1912008361*0000TEX01\
 7/31/2020 HUMANA INS CO HCCLAIMPMT 390861 830000556411 TRN*1*001290051619302*1391263473\
 7/31/2020

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		Q1PP/Comp1	Q1PP/Comp2	Q1PP/Comp3	Q1PP/Comp4 &Lapse	Q1PP TI	
-	8,719.97				8,719.97	4,359.99	4,359.99
-	2,616.69						2,616.69
-	16,550.05						16,550.05
-	13,093.64						13,093.64
-	12,285.34						12,285.34
217,026.58	✓						-
-	14,257.22						14,257.22
-	5,692.50						5,692.50
-	34.02						-
15,635.88	✓						-
-	286.84						286.84
-	712.70						712.70
232,662.46	✓				8,719.97	4,359.99	69,854.97

Fort Bend

7/27/2020 AMERIGROUP CORPO E-PAYMENT EE52056617 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG
 7/27/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072416900958*1912008361*0000TEX01\
 7/27/2020 NOVITAS SOLUTION HCCLAIMPMT 675663 420000173 TRN*1*EFT5641493*1205296137*000004011\
 7/27/2020 AARP Supplementa HCCLAIMPMT 746003411 124384 TRN*1*1549946995*1362739571*000036273\
 7/28/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072511600668*1912008361*0000TEX01\
 7/29/2020 WIRE OUT CANTEX HEALTH CARE CENTERS III
 7/29/2020 MANAGEANDNET1718 MNS PMNT 00000000004294 41 0254207
 7/30/2020 UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*1551328796*1411289245*000087726\
 7/31/2020 Added to Account
 7/31/2020 CHECK #90

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		Q1PP/Comp1	Q1PP/Comp2	Q1PP/Comp3	Q1PP/Comp4 &Lapse	Q1PP TI	
-	12,099.31				12,099.31	6,049.66	6,049.66
-	19,992.10						19,992.10
-	14,854.69						14,854.69
-	9.70						9.70
-	3,069.44						3,069.44
18,972.57	✓						-
-	18,041.30						18,041.30
-	130.00						130.00
-	15.12						-
21,597.99	✓						-
40,570.56	✓				12,099.31	6,049.66	62,146.89

Solera at West Houston

7/27/2020 AMERIGROUP CORPO E-PAYMENT EE52056619 111000 ISA*00* *00* *ZZ*BCCACP4010 *ZZ*BOFAORIG
 7/27/2020 UHC Community PI HCCLAIMPMT 746003411 910000 TRN*1*2020072410600836*1912008361*0000TEX01\
 7/27/2020 NOVITAS SOLUTION HCCLAIMPMT 676310 420000173 TRN*1*EFT5642010*1205296137*000004011\
 7/28/2020 UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*9550538631*1411289245*000087726\
 7/28/2020 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000 TRN*1*2020072516600687*1912008361*0000TEX01\
 7/28/2020 NOVITAS SOLUTION HCCLAIMPMT 676310 420000171 TRN*1*EFT5643669*1205296137*000004011\
 7/29/2020 WIRE OUT CANTEX HEALTH CARE CENTERS III
 7/31/2020 Accr Earning Pymt
 7/31/2020 CHECK #1094
 7/31/2020 MANAGEANDNET1718 MNS PMNT 000000000002482 41 0254305
 7/31/2020 UnitedHealthcare HCCLAIMPMT 746003411 124384 TRN*1*9551722063*1411289245*000087726\
 7/31/2020 HUMANA CHA DISB HCCLAIMPMT 390862 4200001997 TRN*1*014840101549139*1611013183\
 7/31/2020

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		Q1PP/Comp1	Q1PP/Comp2	Q1PP/Comp3	Q1PP/Comp4 &Lapse	Q1PP TI	
-	10,301.36				10,301.36	5,150.68	5,150.68
-	2,795.00						2,795.00
-	139,856.69						139,856.69
-	820.00						820.00
-	360.75						360.75
-	1,504.16						1,504.16
82,230.01	✓						-
-	34.56						-
18,751.49	✓						-
-	67.50						67.50
-	9,544.00						9,544.00
-	5,561.86						5,561.86
100,981.50	✓				10,301.36	5,150.68	165,660.64
805,838.70	✓				71,208.88	35,604.44	580,209.80

TOTALS

Quick View

Select Quick View Accounts
Account Number / NameSelect Group
Groups

Account Type

Add Group

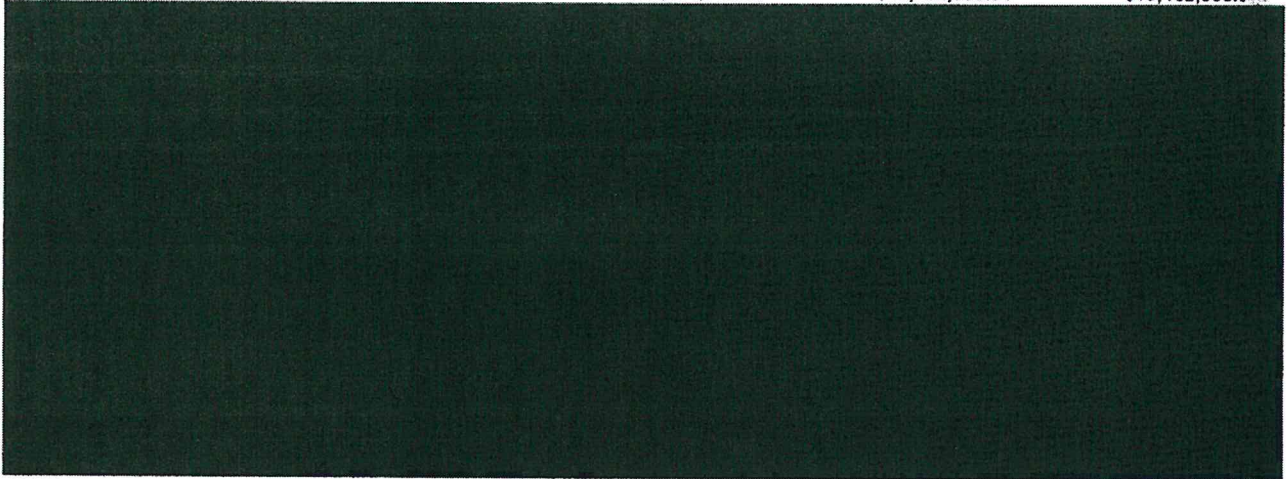
Search

All

DDA

Data reported as of Aug 3, 2020

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 14	\$10,152,533.91	\$10,211,792.60	\$10,152,533.91	\$10,152,533.91



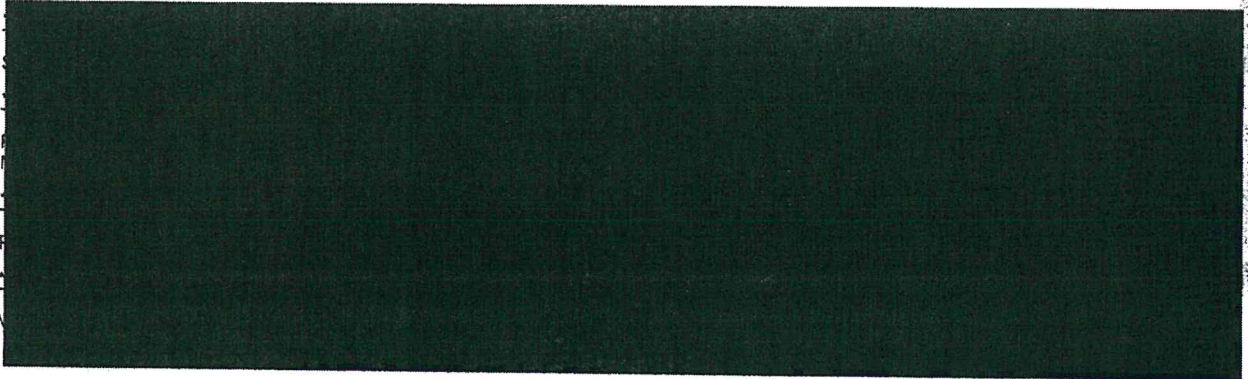
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$119,394.26	\$119,394.26	\$119,394.26	\$119,394.26
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*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$183,497.70	\$183,497.70	\$183,497.70	\$183,497.70
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*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$74,348.97	\$74,503.25	\$74,348.97	\$74,348.97
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*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$68,311.66	\$68,311.66	\$68,311.66	\$68,311.66
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*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$170,945.88	\$181,960.40	\$170,945.88	\$170,945.88
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Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
8/3/2020

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		242,550.92	242,450.92	74,582.14	-	74,682.14	30,011.36
					Bank Balance Variance	74,682.14	
					Leave in Balance	100.00	
					QIPP 1,2, & 3	30,094.34	
					QIPP 4 & LAPSE	14,438.87	
					July Interest	37.57	
					August Interest		
					September Interest		
					Adjust Balance/Transfer Amt	30,011.36	

Routing Information for Golden Creek:

Nexion Health at Golden Creek
Wells Fargo Bank, N.A.

A

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 8/3/2020

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek

7/27/2020 TSYS/TRANSFIRST BKCD STUMT 543684555876917 9 543684555876917 GOLDEN CREEK HEALTHCAR 072320
 7/27/2020 TSYS/TRANSFIRST BKCD STUMT 543684555876917 9 543684555876917 GOLDEN CREEK HEALTHCAR 072420
 7/29/2020 WIRE OUT NEXION HEALTH AT GOLDEN CREEK
 7/29/2020 TSYS/TRANSFIRST BKCD STUMT 543684555876917 9 543684555876917 GOLDEN CREEK HEALTHCAR 072720
 7/29/2020 Centene Manageme CCD+ 38888463 3110020595941 RMR*IV*2019-NF Facility**3648\
 7/29/2020 Centene Manageme CCD+ 38888463 3110020595782 RMR*IV*QIPP 7.23.20**36631.58\
 7/29/2020 Centene Manageme CCD+ 38888463 3110020595697 RMR*IV*QIPP Q3 7.23.20**28877.74\
 7/31/2020 Accr Earning Pymt

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&L apse	QIPP TI	
-	237.60					-	237.60
-	1,500.00					-	1,500.00
242,450.92	-					-	-
-	3,649.65					-	3,649.65
-	3,648.00					-	3,648.00
-	36,631.58	23,557.09	4,830.20	8,244.29		30,094.34	6,537.25
-	28,877.74				28,877.74	14,438.87	14,438.87
-	37.57					-	-
242,450.92	74,582.14	23,557.09	4,830.20	8,244.29	28,877.74	44,533.21	30,011.37

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Search

All

Select Group
Groups

Add Group

DDA

Data reported as of Aug 3, 2020

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 14	\$10,152,533.91	\$10,211,792.60	\$10,152,533.91	\$10,152,533.91
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$74,682.14	\$74,682.14	\$74,682.14	\$74,682.14

Gulf Pointe Plaza-Private Pay

7/29/2020 Centene Manageme CCD+ 38888463 3110020595933 RMR*IV*2019-NF Facility**4620\
 7/29/2020 Centene Manageme CCD+ 38888463 3110020595798 RMR*IV*QIPP 7.23.20**25013\
 7/29/2020 Centene Manageme CCD+ 38888463 3110020595712 RMR*IV*QIPP Q3 7.23.20**18879.36\
 7/31/2020 Accr Earning Pymt

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	QIPP TI	
-	4,620.00					-	4,620.00
-	25,013.00	15,364.45	4,270.66	5,377.89		20,188.73	4,824.28
-	18,879.36				18,879.36	9,439.68	9,439.68
-	4.68					-	-
-	48,517.04	15,364.45	4,270.66	5,377.89	18,879.36	29,628.41	18,883.96

Gulf Pointe Plaza-Medicare/Medicaid

7/29/2020 WIRE OUT HMG SERVICES, LLC
 7/31/2020 Accr Earning Pymt
 7/31/2020 HEALTH HUMAN SVC HCCLAIMPMT 17460034113013 2 TRN*1*0SF674541922092790*17460001:

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse	QIPP TI	
285,938.43	-					-	-
-	29.46					-	-
-	3,065.58					-	3,065.58
285,938.43	3,095.04	-	-	-	-	-	3,095.04
285,938.43	51,612.08	15,364.45	4,270.66	5,377.89	18,879.36	29,628.41	21,979.00

Quick View

Select Quick View Accounts
Account Number / Name

Select Group Groups

Account Type

Add Group

Search

All

DDA

Data reported as of Aug 3, 2020

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 14	\$10,152,533.91	\$10,211,792.60	\$10,152,533.91	\$10,152,533.91

010,101,00000
 010,102,00000
 010,102,00000

5441

MMC -NH GULF POINTE
PLAZA -
MEDICARE/MEDICAID

\$3,195.04

\$3,195.04

\$3,195.04

\$3,195.00

"5433

MMC -NH GULF POINTE
PLAZA - PRIVATE PAY

\$50,833.58

\$50,833.58

\$50,833.58

\$50,833.£

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 8/3/2020

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	Test
Tuscany Senior Living		162,771.68	✓ 162,671.68	✓ 63,528.95	✓		63,628.95	✓ 63,525.08	63,525.08 103.87
Bank Balance							63,628.95		
Variance							-		
Leave in Balance							100.00		
Pending Ck to MMC									
MMC Portion QIPP 1 & 2									
MMC Portion QIPP 3,4,Lapse									
July Interest							3.87		
August Interest							-		
September Interest							-		
Adjust Balance/Transfer Amt							63,525.08	✓	
Approved:									
Jason Anglin, CEO									8/3/2020

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
 AUG 03 2020
 COUNTY AUDITOR
 CALHOUN 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
7/27/2020 Molina HC of TX HCCLAIMPMT PN1275717894 4200 TRN	-	3,813.55				-	3,813.55
7/28/2020 NOVITAS SOLUTION HCCLAIMPMT 676201 420000171 TF	-	63.81				-	63.81
7/29/2020 WIRE OUT LINBAR ENTERPRISES, LLC	162,671.68	-				-	-
7/29/2020 NOVITAS SOLUTION HCCLAIMPMT 676201 420000187 TF	-	25,975.56				-	25,975.56
7/30/2020 NOVITAS SOLUTION HCCLAIMPMT 676201 420000179 TF	-	33,672.16				-	33,672.16
7/31/2020 Accr Earning Pymt	-	3.87				-	-
						-	-
162,671.68	63,528.95	-	-	-	-	-	63,525.08

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Search

All

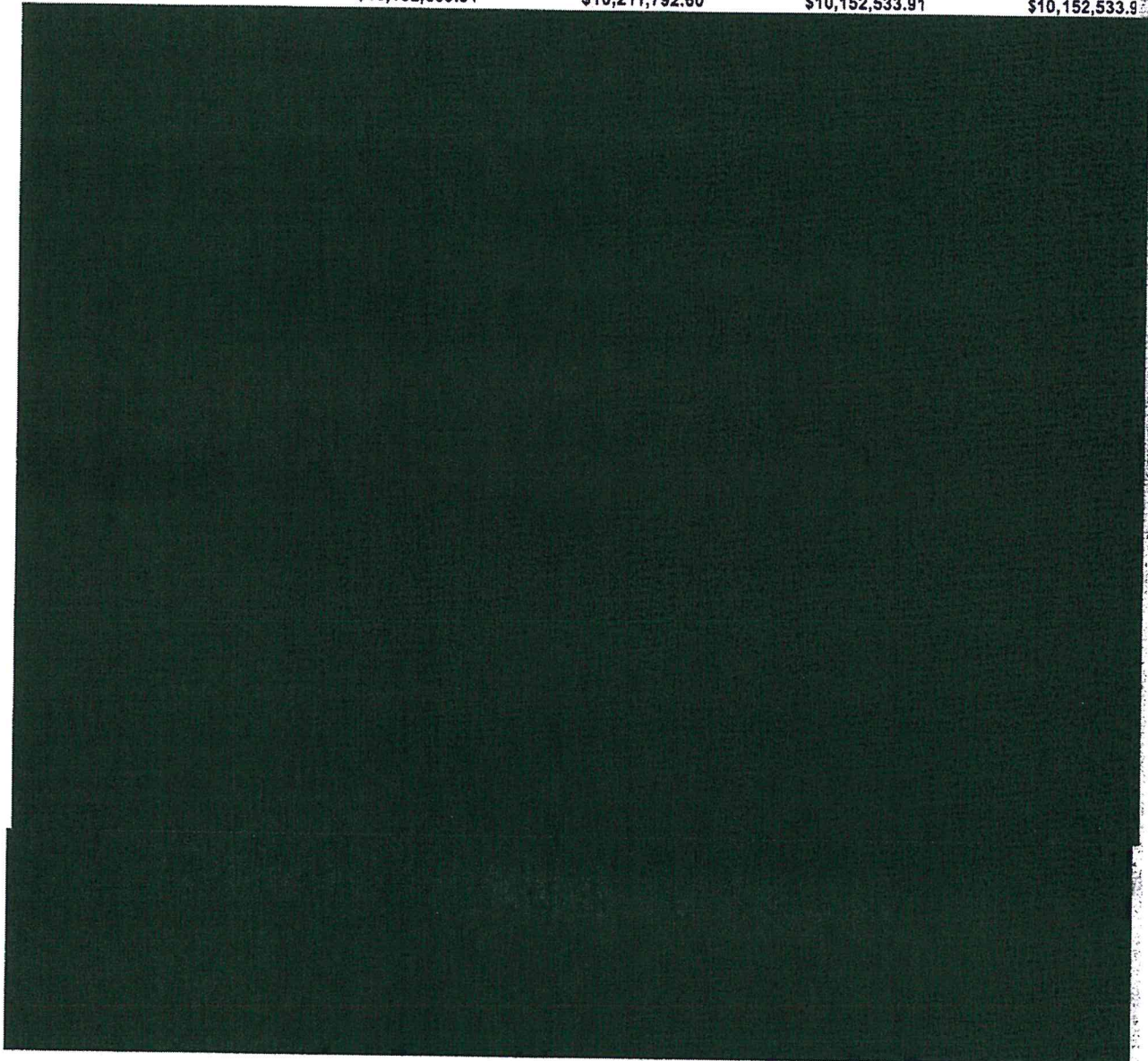
Select Group
Groups

Add Group

DDA

Data reported as of Aug 3, 2020

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 14	\$10,152,533.91	\$10,211,792.60	\$10,152,533.91	\$10,152,533.91



*3407
MMC -NH TUSCANY
VILLAGE

\$63,628.95

\$63,628.95

\$63,628.95

\$63,628.95

Memorial Medical Center
Nursing Home UPL
Weekly HSL Transfer
Prosperity Accounts
8/3/2020

Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home							
Bethany Senior Living	19,872.44	19,772.44	4.90			104.90	0.00
					Bank Balance	104.90	NO TRANSFER
					Variance	-	
					Leave in Balance	100.00	
QJPP 1,2 AND 3							
					July Interest	4.90	
					August Interest		
					September Interest		
					Adjust Balance/Transfer Amt	0.00	
Approved: 							
Jason Anglin, CEO							8/3/2020

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
AUG 03 2020
COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Bethany Senior Living

7/29/2020 WIRE OUT BETHANY SENIOR LIVING, LTD
7/31/2020 Accr Earning Pymt

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP T1	
19,772.44	-					-	-
-	4.90					-	-
19,772.44	4.90	-	-	-	-	-	-

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Search

All

Select Group
Groups

Add Group

DDA

Data reported as of Aug 3, 2020

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
Number of Accounts: 14	\$10,152,533.91	\$10,211,792.60	\$10,152,533.91	\$10,152,533.91

*5506

MMC -NH BETHANY
SENIOR LIVING

\$104.90

\$104.90

\$104.90

\$104.90

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 8/3/2020

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APPROVED
ON

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AUG 03 2020

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COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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CL#001102

FOR ACCT. USE ONLY

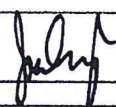
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT \$ 14,736.53

G/L NUMBER: 21000012

EXPLANATION: ASHFORD- TO TRANSFER MMC PORTION OF QIPP COMP 4 & LAPSE

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:08/06/20
TIME:13:45

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/06/20 THRU 08/06/20

PAGE 2
GLCKREG

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

NHA 001102 08/06/20 14,736.53 MMC OPERATING
TOTALS: 14,736.53

Ashford

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 8/3/2020

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APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

G/L NUMBER: 21000014

CL # 000015

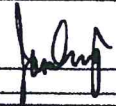
FOR ACCT. USE ONLY

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

AMOUNT \$ 29,628.41

EXPLANATION: GULF POINTE- TO TRANSFER MMC PORTION OF QIPP COMP 1,2,3,4 & LAPSE

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

8

RUN DATE:08/06/20
TIME:13:45

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/06/20 THRU 08/06/20

PAGE 1
GLCKREG

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

GPP 000015 08/06/20 29,628.41 MMC OPERATING
TOTALS: 29,628.41

Gulf Pointe

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 8/3/2020

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APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

ck # 000004

G/L NUMBER: 21000009

FOR ACCT. USE ONLY

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

AMOUNT \$ 5,307.59

EXPLANATION: BROADMOOR- TO TRANSFER MMC PORTION OF QIPP COMP 4 & LAPSE

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:



RUN DATE:08/06/20
TIME:13:45

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/06/20 THRU 08/06/20

PAGE 3
GLCKREG

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

NHB 000064 08/06/20 5,307.59 MMC OPERATING *Broadmoor*
TOTALS: 5,307.59

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 8/3/2020

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APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CHK # 000294

FOR ACCT. USE ONLY

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

AMOUNT \$ 4,359.99

G/L NUMBER: 21000010

EXPLANATION: CRESCENT- TO TRANSFER MMC PORTION OF QIPP COMP 4 & LAPSE

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:08/06/20
TIME:13:45

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/06/20 THRU 08/06/20

PAGE 4
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHC 000094 08/06/20 4,359.99 MMC OPERATING
TOTALS: 4,359.99

Crescent

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 8/3/2020

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APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CK # 000041

FOR ACCT. USE ONLY

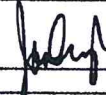
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT \$ 6,049.66

G/L NUMBER: 21000008

EXPLANATION: FORT BEND- TO TRANSFER MMC PORTION OF QIPP COMP 4 & LAPSE

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:08/06/20
TIME:13:45

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/06/20 THRU 08/06/20

PAGE 5
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHF 000091 08/06/20 6,049.66 MMC OPERATING
TOTALS: 6,049.66

Furt Blend

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 8/3/2020

A _____

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APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CL # 001095

G/L NUMBER: 21000011

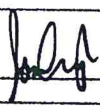
FOR ACCT. USE ONLY

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

AMOUNT \$ 5,150.68

EXPLANATION: SOLERA- TO TRANSFER MMC PORTION OF QIPP COMP 4 & LAPSE

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:08/06/20
TIME:13:45

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/06/20 THRU 08/06/20

PAGE 7
GLCKREG

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

NHS 001095 08/06/20 5,150.68 MMC OPERATING *Solem*
TOTALS: 5,150.68

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Memorial Medical Center Operating

Date Requested: 8/3/2020

A

Y

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E

FOR ACCT. USE ONLY

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

APPROVED
ON

AUG 03 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT \$ 44,533.21

G/L NUMBER: 21000013

CK #000000

EXPLANATION: GOLDEN CREEK- TO TRANSFER MMC PORTION OF QIPP COMP 1,2,3,4 & LAPSE

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY: 

RUN DATE:08/06/20
TIME:13:45

MEMORIAL MEDICAL CENTER
CHECK REGISTER
08/06/20 THRU 08/06/20

PAGE 6
GLCKREG

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

NHG 000060 08/06/20 44,533.21 MMC OPERATING
TOTALS: 44,533.21

golden creek

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

8/5/2020

Commissioner's Court

QJPP Payment to MMC from Nursing Facilities

NH Name	From Bank Acct #	Chk #	Payee	GL #	QJPP COMP 1, 2 & 3	QJPP COMP 4 & LAPSE	Yr 2 Adjustment Pmt	TOTAL	Date
shford	10000018 - Prosperity	1102	MMC-Prosperity Operating #100000001	21000012		14,736.53		14,736.53	8/5/2020
roadmoor	10000019 - Prosperity	64	MMC-Prosperity Operating #100000001	21000009		5,307.59		5,307.59	8/5/2020
rescent	10000020 - Prosperity	94	MMC-Prosperity Operating #100000001	21000010		4,359.99		4,359.99	8/5/2020
ort Bend	10000021 - Prosperity	91	MMC-Prosperity Operating #100000001	21000008		6,049.66		6,049.66	8/5/2020
olera	10000022 - Prosperity	1095	MMC-Prosperity Operating #100000001	21000011		5,150.68		5,150.68	8/5/2020
olden Creek	10000023 - Prosperity	60	MMC-Prosperity Operating #100000001	21000013	30,094.34	14,438.87		44,533.21	8/5/2020
ulf Pointe-PP	10000114 - Prosperity	15	MMC-Prosperity Operating #100000001	21000014	20,188.73	9,439.68		29,628.41	8/5/2020
ulf Pointe-MM	10000025 - Prosperity	-	MMC-Prosperity Operating #100000001	21000014	-	-		-	8/5/2020
ethany									8/5/2020
uscany									8/5/2020
				Total:	50,283.07	59,483.00	-	109,766.07	

Note:

Approved: 
Jason Anglin, CEO

8/3/2020

5,150.68 +
14,736.53 +
29,628.41 +
6,049.66 +
5,307.59 +
4,359.99 +
44,533.21 +
109,766.07 *

APPROVED
ON

AUG 05 2020

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
NH GULF POINTE PLAZA - PRIVATE PAY
815 N VIRGINIA ST
PORT LAVACA, TX 77979

8755

No 15

88-2265
1131

8-6-2020

PAY TO THE
ORDER OF

Memorial Medical Center Operating 29,628.41
twenty-nine thousand six hundred twenty-eight 41/100
DOLLARS



QIPP 1,2,3,4, Lapse

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

1102

88-2265/1131-87

8-6-20

Date



Pay to the
Order of

Memorial Medical Center Operating 14,736.53
fourteen thousand seven hundred thirty-six 53/100
Dollars



PROSPERITY BANK®

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

For QIPP 4 & Lapse

MEMORIAL MEDICAL CENTER
NH SOLERA AT WEST HOUSTON
202 S ANN ST STE A
PORT LAVACA TX 77979

1095

88-2265/1131-87

8-6-2020

Date



Pay to the
Order of

Memorial Medical Center Operating 5,150.68
five thousand one hundred fifty and 68/100
Dollars



Photo
Safe
Deposit®
Details on back



PROSPERITY BANK®

PORT LAVACA BANKING CENTER
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361-552-7411 www.prosperitybankusa.com

For QIPP 4 & Lapse

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

000060

Date 8-6-2020

88-2265/1131

**PAY
TO THE
ORDER OF**

Memorial Medical Center Operating \$ 44,533.21
forty four thousand five hundred thirty three 21/100 DOLLARS



FOR

QIPP 1,2,3,4, Lapse

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MEMORIAL MEDICAL CENTER

* NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

00009

Date 8-6-2020

88-2265/1

**PAY
TO THE
ORDER OF**

Memorial Medical Center Operating \$ 4,359.99
four thousand three hundred fifty-nine 99/100 DOLLARS



FOR

QIPP 4 Lapse

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MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000064

88-2265/1131

Date 8-6-2020

PAY

**TO THE
ORDER OF**

Memorial Medical Center operating
five thousand three hundred seven

\$ 5307.59

59/100

DOLLARS



**PROSPERITY
BANK**

FOR

QIPP 4th Lapse



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included. Details on back

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MEMORIAL MEDICAL CENTER

NH FORT BEND
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000091

88-2265/1131

Date 8-6-2020

PAY

**TO THE
ORDER OF**

Memorial Medical Center operating
six thousand forty-nine

\$ 6,049.00

00/100

DOLLARS



**PROSPERITY
BANK**

FOR

QIPP 4th Lapse



Security features are
included. Details on back