

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR ---April 14, 2021**

**TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES**

|                                                      |                 |
|------------------------------------------------------|-----------------|
| TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS | \$ 781,488.63   |
| TOTAL TRANSFERS BETWEEN FUNDS                        | \$ 433,412.86   |
| TOTAL NURSING HOME UPL EXPENSES                      | \$ 497,917.96   |
| TOTAL INTER-GOVERNMENT TRANSFERS                     | \$ -            |
| GRAND TOTAL DISBURSEMENTS APPROVED April 14, 2021    | \$ 1,712,819.45 |

**APPROVED**

**APR 14 2021**

**CALHOUN COUNTY  
COMMISSIONERS COURT**

**MEMORIAL MEDICAL CENTER**  
**COMMISSIONERS COURT APPROVAL LIST FOR ---April 14,2021**

**PAYABLES AND PAYROLL**

|                                                        |            |
|--------------------------------------------------------|------------|
| 4/8/2021 Weekly Payables                               | 362,614.63 |
| 4/8/2021 Health Solutions Dietetics-Dietician          | 3,000.00   |
| 4/8/2021 Patient Refunds                               | 1,643.34   |
| 4/12/2021 Citibank Credit Card-see attached            | 4,669.92   |
| 4/12/2021 McKesson-340B Prescription Expense           | 2,040.88   |
| 4/12/2021 Amerisource Bergen-340B Prescription Expense | 1,071.45   |
| 4/12/2021 Payroll Liabilities -Payroll Taxes           | 98,118.35  |
| 4/12/2021 Payroll                                      | 307,392.85 |

**Prosperity Electronic Bank Payments**

|                                                   |        |
|---------------------------------------------------|--------|
| 4/5/2021 Credit Card & Lease Fees                 | 755.74 |
| 4/5-4/9/21 Pay Plus-Patient Claims Processing Fee | 181.47 |

**TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS** **\$ 781,488.63**

**TRANSFER BETWEEN FUNDS-NURSING HOMES**

|                                                                                                                                               |            |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------|
| 4/8/2021 MMC Operating to Ashford- NH portion of QIPP payment deposit into MMC Operating                                                      | 12,797.12  |
| 4/8/2021 MMC Operating to Solera-correction of NH insurance payment and portion of QIPP payment deposited into MMC Operating                  | 10,855.68  |
| 4/8/2021 MMC Operating to Fortbend-NH portion of QIPP payment deposited into MMC Operating                                                    | 5,116.87   |
| 4/8/2021 MMC Operating to Broadmoor-correction of NH insurance payment and portion of QIPP payment deposited into MMC Operating               | 21,580.61  |
| 4/8/2021 MMC Operating to The Crescent- NH portion of QIPP payment deposited into MMC Operating                                               | 4,255.20   |
| 4/8/2021 MMC Operating to Golden Creek Healthcare-correction of NH insurance payment and portion of QIPP payment deposited into MMC Operating | 90,594.01  |
| 4/8/2021 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment and portion of QIPP deposited into MMC Operating              | 61,676.10  |
| 4/8/2021 MMC Operating to Tuscany Village-correction of NH insurance payment and portion of QIPP deposited into MMC Operating                 | 93,188.31  |
| 4/8/2021 MMC Operating to Bethany Senior Living- correction of NH insurance payment deposited into MMC Operating                              | 133,348.96 |

**TOTAL TRANSFERS BETWEEN FUNDS** **\$ 433,412.86**

**NURSING HOME UPL EXPENSES**

|                                             |            |
|---------------------------------------------|------------|
| 4/12/2021 Nursing Home UPL-Cantex Transfer  | 50,624.91  |
| 4/12/2021 Nursing Home UPL-Nexion Transfer  | 129,195.43 |
| 4/12/2021 Nursing Home UPL-HMG Transfer     | 51,080.52  |
| 4/12/2021 Nursing Home UPL-Tuscany Transfer | 90,910.57  |
| 4/12/2021 Nursing Home UPL-HSL Transfer     | 176,106.53 |

**TOTAL NURSING HOME UPL EXPENSES** **\$ 497,917.96**

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

**GRAND TOTAL DISBURSEMENTS APPROVED April 14, 2021** **\$ 1,712,819.45**

**RECEIVED**

04/08/2021

11:29

Calhoun County Auditor

Vendor#

11283

## MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 04/28/2021

0

ap\_open\_invoice.template

Vendor Name

Class

Pay Code

✓ ACE HARDWARE 15521

| Invoice# | Comment      | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross  | Discount | No-Pay | Net      |
|----------|--------------|------------|------------|--------|----------|-----|--------|----------|--------|----------|
| 151976   | ✓ 03/31/2021 | 02/25/2021 | 03/22/2021 |        |          |     | 72.98  | 0.00     | 0.00   | 72.98 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 151992   | ✓ 03/31/2021 | 02/25/2021 | 03/22/2021 |        |          |     | 30.15  | 0.00     | 0.00   | 30.15 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152209   | ✓ 03/31/2021 | 03/04/2021 | 03/29/2021 |        |          |     | 17.46  | 0.00     | 0.00   | 17.46 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152218   | ✓ 03/31/2021 | 03/04/2021 | 03/29/2021 |        |          |     | 12.98  | 0.00     | 0.00   | 12.98 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152198   | ✓ 03/31/2021 | 03/04/2021 | 03/29/2021 |        |          |     | 12.42  | 0.00     | 0.00   | 12.42 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152242   | ✓ 03/31/2021 | 03/05/2021 | 03/30/2021 |        |          |     | 120.95 | 0.00     | 0.00   | 120.95 ✓ |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152293   | ✓ 03/31/2021 | 03/08/2021 | 04/02/2021 |        |          |     | 7.99   | 0.00     | 0.00   | 7.99 ✓   |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152312   | ✓ 03/31/2021 | 03/08/2021 | 04/02/2021 |        |          |     | 2.10   | 0.00     | 0.00   | 2.10 ✓   |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152394   | ✓ 03/31/2021 | 03/10/2021 | 04/04/2021 |        |          |     | 156.98 | 0.00     | 0.00   | 156.98 ✓ |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152407   | ✓ 03/31/2021 | 03/11/2021 | 04/05/2021 |        |          |     | 52.76  | 0.00     | 0.00   | 52.76 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152879   | ✓ 03/31/2021 | 03/29/2021 | 04/23/2021 |        |          |     | 82.89  | 0.00     | 0.00   | 82.89 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |
| 152939   | ✓ 03/31/2021 | 03/30/2021 | 04/24/2021 |        |          |     | 65.90  | 0.00     | 0.00   | 65.90 ✓  |
|          | SUPPLIES     |            |            |        |          |     |        |          |        |          |

| Vendor Totals: | Number | Name               | Gross  | Discount | No-Pay | Net    |
|----------------|--------|--------------------|--------|----------|--------|--------|
| 11283          |        | ACE HARDWARE 15521 | 635.56 | 0.00     | 0.00   | 635.56 |

Vendor#

13868

Vendor Name

Class

Pay Code

AD ENVIRONMENTAL SERVICES, INC

| Invoice# | Comment                 | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross     | Discount | No-Pay | Net         |
|----------|-------------------------|------------|------------|--------|----------|-----|-----------|----------|--------|-------------|
| 3418     | ✓ 04/07/2021            | 04/01/2021 | 04/01/2021 |        |          |     | 10,482.00 | 0.00     | 0.00   | 10,482.00 ✓ |
|          | BAL DUE UG STORAGE TANK |            |            |        |          |     |           |          |        |             |

| Vendor Totals: | Number | Name                           | Gross     | Discount | No-Pay | Net       |
|----------------|--------|--------------------------------|-----------|----------|--------|-----------|
| 13868          |        | AD ENVIRONMENTAL SERVICES, INC | 10,482.00 | 0.00     | 0.00   | 10,482.00 |

Vendor#

A1360

Vendor Name

Class

Pay Code

AMERISOURCEBERGEN DRUG CCW

| Invoice#  | Comment        | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross  | Discount | No-Pay | Net      |
|-----------|----------------|------------|------------|--------|----------|-----|--------|----------|--------|----------|
| 80277394  | ✓ 03/31/2021   | 02/15/2021 | 02/21/2021 |        |          |     | 111.64 | 0.00     | 0.00   | 111.64 ✓ |
|           | SERVICE CHARGE |            |            |        |          |     |        |          |        |          |
| 802810347 | ✓ 03/31/2021   | 03/15/2021 | 03/21/2021 |        |          |     | 65.48  | 0.00     | 0.00   | 65.48 ✓  |
|           | SERVICE CHARGE |            |            |        |          |     |        |          |        |          |

| Vendor Totals: | Number | Name                       | Gross  | Discount | No-Pay | Net    |
|----------------|--------|----------------------------|--------|----------|--------|--------|
| A1360          |        | AMERISOURCEBERGEN DRUG CCW | 177.12 | 0.00     | 0.00   | 177.12 |

Vendor#

A0400

Vendor Name

Class

Pay Code

AUREUS RADIOLOGY LLC

| Invoice# | Comment      | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross    | Discount | No-Pay | Net        |
|----------|--------------|------------|------------|--------|----------|-----|----------|----------|--------|------------|
| 2179772  | ✓ 03/31/2021 | 03/29/2021 | 04/28/2021 |        |          |     | 2,680.00 | 0.00     | 0.00   | 2,680.00 ✓ |
|          | LAB STAFFING |            |            |        |          |     |          |          |        |            |

| Vendor Totals: | Number | Name                 | Gross    | Discount | No-Pay | Net      |
|----------------|--------|----------------------|----------|----------|--------|----------|
| A0400          |        | AUREUS RADIOLOGY LLC | 2,680.00 | 0.00     | 0.00   | 2,680.00 |

Vendor#

A2600

Vendor Name

Class

Pay Code

AUTO PARTS &amp; MACHINE CO.

| Invoice# | Comment      | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net     |
|----------|--------------|------------|------------|--------|----------|-----|-------|----------|--------|---------|
| 953634   | ✓ 04/07/2021 | 04/02/2021 | 04/17/2021 |        |          |     | 53.63 | 0.00     | 0.00   | 53.63 ✓ |
|          | SUPPLIES     |            |            |        |          |     |       |          |        |         |

|                |                         |                           |                   |        |          |          |          |          |          |          |
|----------------|-------------------------|---------------------------|-------------------|--------|----------|----------|----------|----------|----------|----------|
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| A2600          |                         |                           | AUTO PARTS & MAI  |        | 53.63    | 0.00     | 0.00     |          | 53.63    |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| B1150          | BAXTER HEALTHCARE       |                           | W                 |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| 69717593       | 03/31/2021              | 02/08/2021                | 03/05/2021        |        |          |          | 1,059.46 | 0.00     | 0.00     | 1,059.46 |
|                |                         | SUPPLIES                  |                   |        |          |          |          |          |          |          |
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| B1150          |                         |                           | BAXTER HEALTHCARE |        | 1,059.46 | 0.00     | 0.00     |          | 1,059.46 |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| B1220          | BECKMAN COULTER INC     |                           | M                 |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| 4416193        | 03/31/2021              | 03/25/2021                | 04/19/2021        |        |          |          | 880.00   | 0.00     | 0.00     | 880.00   |
|                |                         | SERVICE CONTRACT          |                   |        |          |          |          |          |          |          |
| 5438692        | 03/31/2021              | 03/30/2021                | 04/24/2021        |        |          |          | 3,507.27 | 0.00     | 0.00     | 3,507.27 |
|                |                         | LEASE                     |                   |        |          |          |          |          |          |          |
| 108987475      | 03/31/2021              | 03/31/2021                | 04/25/2021        |        |          |          | 31.23    | 0.00     | 0.00     | 31.23    |
|                |                         | SUPPLIES                  |                   |        |          |          |          |          |          |          |
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| B1220          |                         |                           | BECKMAN COULTE    |        | 4,418.50 | 0.00     | 0.00     |          | 4,418.50 |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| 12324          | BLUE CROSS BLUE SHIELD  |                           |                   |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| 031821A        | 03/31/2021              | 03/18/2021                | 04/01/2021        |        |          |          | 4,835.23 | 0.00     | 0.00     | 4,835.23 |
|                |                         | COBRA COVERAGE            |                   |        |          |          |          |          |          |          |
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| 12324          |                         |                           | BLUE CROSS BLUE   |        | 4,835.23 | 0.00     | 0.00     |          | 4,835.23 |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| 12740          | BUILDING KID STEPS      |                           |                   |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| MARCH2021      | 03/31/2021              | 03/31/2021                | 03/31/2021        |        |          |          | 276.00   | 0.00     | 0.00     | 276.00   |
|                |                         | SPEECH THERAPY            |                   |        |          |          |          |          |          |          |
| MARCH2021      | 03/31/2021              | 03/31/2021                | 03/31/2021        |        |          |          | 1,152.00 | 0.00     | 0.00     | 1,152.00 |
|                |                         | SPEECH THERAPY            |                   |        |          |          |          |          |          |          |
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| 12740          |                         |                           | BUILDING KID STEF |        | 1,428.00 | 0.00     | 0.00     |          | 1,428.00 |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| 10105          | CHRIS KOVAREK           |                           |                   |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| 48             | 04/05/2021              | 04/05/2021                | 04/05/2021        |        |          |          | 200.00   | 0.00     | 0.00     | 200.00   |
|                |                         | SWING BED (3/4 - 3/30/21) |                   |        |          |          |          |          |          |          |
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| 10105          |                         |                           | CHRIS KOVAREK     |        | 200.00   | 0.00     | 0.00     |          | 200.00   |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| L1629          | CHRISTINA ZAPATA-ARROYO |                           |                   |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| FEBRUARY2      | 03/31/2021              | 02/28/2021                | 04/07/2021        |        |          |          | 82.50    | 0.00     | 0.00     | 82.50    |
|                |                         | SPEECH THERAPY            |                   |        |          |          |          |          |          |          |
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| L1629          |                         |                           | CHRISTINA ZAPATA  |        | 82.50    | 0.00     | 0.00     |          | 82.50    |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| 13000          | CLEARFLY                |                           |                   |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| INV342931      | 04/06/2021              | 04/06/2021                | 04/06/2021        |        |          |          | 1,116.30 | 0.00     | 0.00     | 1,116.30 |
|                |                         | PHONES                    |                   |        |          |          |          |          |          |          |
| Vendor Totals: |                         | Number                    | Name              |        | Gross    | Discount | No-Pay   |          | Net      |          |
| 13000          |                         |                           | CLEARFLY          |        | 1,116.30 | 0.00     | 0.00     |          | 1,116.30 |          |
| Vendor#        | Vendor Name             |                           | Class             |        | Pay Code |          |          |          |          |          |
| 10723          | CLIA LABORATORY PROGRAM |                           |                   |        |          |          |          |          |          |          |
| Invoice#       | Comment                 | Tran Dt                   | Inv Dt            | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| 032321         | 03/31/2021              | 03/23/2021                | 03/23/2021        |        |          |          | 180.00   | 0.00     | 0.00     | 180.00   |

| CERTIFICATE FEE              |                |            |                             |        |           |          |           |           |        |           |  |  |
|------------------------------|----------------|------------|-----------------------------|--------|-----------|----------|-----------|-----------|--------|-----------|--|--|
| Vendor#                      | Vendor Totals: | Number     | Name                        |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |
|                              | 10723          |            | CLIA LABORATORY             |        | 180.00    | 0.00     | 0.00      | 180.00    |        |           |  |  |
| Vendor#                      |                |            | Vendor Name                 |        | Class     | Pay Code |           |           |        |           |  |  |
| 10212                        |                |            | CLINICAL PATHOLOGY LABS     |        | ICP       |          |           |           |        |           |  |  |
| Invoice#                     | Comment        | Tran Dt    | Inv Dt                      | Due Dt | Check Dt  | Pay      | Gross     | Discount  | No-Pay | Net       |  |  |
| 2021030                      | 03/31/2021     | 03/31/2021 | 03/31/2021                  |        |           |          | 22,997.87 | 0.00      | 0.00   | 22,997.87 |  |  |
| LAB SERVICES                 |                |            |                             |        |           |          |           |           |        |           |  |  |
| Vendor#                      | Vendor Totals: | Number     | Name                        |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |
|                              | 10212          |            | CLINICAL PATHOLC            |        | 22,997.87 | 0.00     | 0.00      | 22,997.87 |        |           |  |  |
| Vendor#                      |                |            | Vendor Name                 |        | Class     | Pay Code |           |           |        |           |  |  |
| 11029                        |                |            | COASTAL REFRIGERATION       |        |           |          |           |           |        |           |  |  |
| Invoice#                     | Comment        | Tran Dt    | Inv Dt                      | Due Dt | Check Dt  | Pay      | Gross     | Discount  | No-Pay | Net       |  |  |
| 5113757                      | 03/31/2021     | 02/22/2021 | 02/22/2021                  |        |           |          | 240.10    | 0.00      | 0.00   | 240.10    |  |  |
| LAB FRIG ADD REFRIGERANT 134 |                |            |                             |        |           |          |           |           |        |           |  |  |
| Vendor#                      | Vendor Totals: | Number     | Name                        |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |
|                              | 11029          |            | COASTAL REFRIGE             |        | 240.10    | 0.00     | 0.00      | 240.10    |        |           |  |  |
| Vendor#                      |                |            | Vendor Name                 |        | Class     | Pay Code |           |           |        |           |  |  |
| 11030                        |                |            | COMBINED INSURANCE          |        |           |          |           |           |        |           |  |  |
| Invoice#                     | Comment        | Tran Dt    | Inv Dt                      | Due Dt | Check Dt  | Pay      | Gross     | Discount  | No-Pay | Net       |  |  |
| 040121                       | 04/06/2021     | 04/01/2021 | 04/01/2021                  |        |           |          | 854.92    | 0.00      | 0.00   | 854.92    |  |  |
| INSURANCE                    |                |            |                             |        |           |          |           |           |        |           |  |  |
| Vendor#                      | Vendor Totals: | Number     | Name                        |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |
|                              | 11030          |            | COMBINED INSURA             |        | 854.92    | 0.00     | 0.00      | 854.92    |        |           |  |  |
| Vendor#                      |                |            | Vendor Name                 |        | Class     | Pay Code |           |           |        |           |  |  |
| 13572                        |                |            | COMMUNITY INFUSION SOLUTION |        |           |          |           |           |        |           |  |  |
| Invoice#                     | Comment        | Tran Dt    | Inv Dt                      | Due Dt | Check Dt  | Pay      | Gross     | Discount  | No-Pay | Net       |  |  |
| 040321                       | 04/08/2021     | 04/03/2021 | 04/13/2021                  |        |           |          | 6,185.60  | 0.00      | 0.00   | 6,185.60  |  |  |
| OP INFUSION CENTER           |                |            |                             |        |           |          |           |           |        |           |  |  |
| Vendor#                      | Vendor Totals: | Number     | Name                        |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |
|                              | 13572          |            | COMMUNITY INFUS             |        | 6,185.60  | 0.00     | 0.00      | 6,185.60  |        |           |  |  |
| Vendor#                      |                |            | Vendor Name                 |        | Class     | Pay Code |           |           |        |           |  |  |
| 11368                        |                |            | CYRACOM LLC                 |        |           |          |           |           |        |           |  |  |
| Invoice#                     | Comment        | Tran Dt    | Inv Dt                      | Due Dt | Check Dt  | Pay      | Gross     | Discount  | No-Pay | Net       |  |  |
| 1306017                      | 03/31/2021     | 03/31/2021 | 03/31/2021                  |        |           |          | 230.85    | 0.00      | 0.00   | 230.85    |  |  |
| INTERPERTATION SERVICES      |                |            |                             |        |           |          |           |           |        |           |  |  |
| Vendor#                      | Vendor Totals: | Number     | Name                        |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |
|                              | 11368          |            | CYRACOM LLC                 |        | 230.85    | 0.00     | 0.00      | 230.85    |        |           |  |  |
| Vendor#                      |                |            | Vendor Name                 |        | Class     | Pay Code |           |           |        |           |  |  |
| 12612                        |                |            | DASHBOARD MD                |        |           |          |           |           |        |           |  |  |
| Invoice#                     | Comment        | Tran Dt    | Inv Dt                      | Due Dt | Check Dt  | Pay      | Gross     | Discount  | No-Pay | Net       |  |  |
| 9117                         | 04/06/2021     | 04/01/2021 | 04/01/2021                  |        |           |          | 550.00    | 0.00      | 0.00   | 550.00    |  |  |
| PROCESSING AND SUPPORT FEE   |                |            |                             |        |           |          |           |           |        |           |  |  |
| Vendor#                      | Vendor Totals: | Number     | Name                        |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |
|                              | 12612          |            | DASHBOARD MD                |        | 550.00    | 0.00     | 0.00      | 550.00    |        |           |  |  |
| Vendor#                      |                |            | Vendor Name                 |        | Class     | Pay Code |           |           |        |           |  |  |
| 10368                        |                |            | DEWITT POTH & SON           |        |           |          |           |           |        |           |  |  |
| Invoice#                     | Comment        | Tran Dt    | Inv Dt                      | Due Dt | Check Dt  | Pay      | Gross     | Discount  | No-Pay | Net       |  |  |
| 6296740                      | 03/31/2021     | 12/30/2020 | 01/24/2021                  |        |           |          | 15.45     | 0.00      | 0.00   | 15.45     |  |  |
| SUPPLIES                     |                |            |                             |        |           |          |           |           |        |           |  |  |
| 6309340                      | 03/31/2021     | 01/12/2021 | 02/06/2021                  |        |           |          | 36.11     | 0.00      | 0.00   | 36.11     |  |  |
| SUPPLIES                     |                |            |                             |        |           |          |           |           |        |           |  |  |
| 6392390                      | 03/31/2021     | 03/29/2021 | 04/23/2021                  |        |           |          | 133.41    | 0.00      | 0.00   | 133.41    |  |  |
| SUPPLIES                     |                |            |                             |        |           |          |           |           |        |           |  |  |
| 6392570                      | 03/31/2021     | 03/29/2021 | 04/23/2021                  |        |           |          | 43.24     | 0.00      | 0.00   | 43.24     |  |  |
| SUPPLIES                     |                |            |                             |        |           |          |           |           |        |           |  |  |
| 6392360                      | 03/31/2021     | 03/29/2021 | 04/23/2021                  |        |           |          | 91.75     | 0.00      | 0.00   | 91.75     |  |  |
| SUPPLIES                     |                |            |                             |        |           |          |           |           |        |           |  |  |
| 6392640                      | 03/31/2021     | 03/30/2021 | 04/24/2021                  |        |           |          | 400.78    | 0.00      | 0.00   | 400.78    |  |  |
| SUPPLIES                     |                |            |                             |        |           |          |           |           |        |           |  |  |
| Vendor Totals:               | Number         | Name       |                             |        | Gross     | Discount | No-Pay    | Net       |        |           |  |  |

|                |            |                            |            |        |          |            |            |          |            |            |  |
|----------------|------------|----------------------------|------------|--------|----------|------------|------------|----------|------------|------------|--|
| Vendor#        | 10368      | DEWITT POTH & SC           | 720.74     | 0.00   | 0.00     | 720.74     |            |          |            |            |  |
| 10789          |            | Vendor Name                | Class      |        | Pay Code |            |            |          |            |            |  |
|                |            | DISCOVERY MEDICAL NETWORK  |            |        |          |            |            |          |            |            |  |
| Invoice#       | Comment    | Tran Dt                    | Inv Dt     | Due Dt | Check Dt | Pay        | Gross      | Discount | No-Pay     | Net        |  |
| MMC033121      | 03/31/2021 | 03/31/2021                 | 03/31/2021 |        |          |            | 144,187.77 | 0.00     | 0.00       | 144,187.77 |  |
|                |            | PRO FEES                   |            |        |          |            |            |          |            |            |  |
| Vendor Totals: | Number     | Name                       |            |        |          | Gross      | Discount   | No-Pay   | Net        |            |  |
| 10789          |            | DISCOVERY MEDIC            |            |        |          | 144,187.77 | 0.00       | 0.00     | 144,187.77 |            |  |
| Vendor#        | 10842      | Vendor Name                | Class      |        | Pay Code |            |            |          |            |            |  |
|                |            | DOOR CONTROL SERVICES, INC |            |        |          |            |            |          |            |            |  |
| Invoice#       | Comment    | Tran Dt                    | Inv Dt     | Due Dt | Check Dt | Pay        | Gross      | Discount | No-Pay     | Net        |  |
| SMINV27165     | 03/31/2021 | 02/26/2021                 | 03/28/2021 |        |          |            | 1,237.94   | 0.00     | 0.00       | 1,237.94   |  |
|                |            | MAIN ENTRY SLIDING DOORS   |            |        |          |            |            |          |            |            |  |
| Vendor Totals: | Number     | Name                       |            |        |          | Gross      | Discount   | No-Pay   | Net        |            |  |
| 10842          |            | DOOR CONTROL SI            |            |        |          | 1,237.94   | 0.00       | 0.00     | 1,237.94   |            |  |
| Vendor#        | 11291      | Vendor Name                | Class      |        | Pay Code |            |            |          |            |            |  |
|                |            | DOWELL PEST CONTROL        |            |        |          |            |            |          |            |            |  |
| Invoice#       | Comment    | Tran Dt                    | Inv Dt     | Due Dt | Check Dt | Pay        | Gross      | Discount | No-Pay     | Net        |  |
| 20633          | 03/31/2021 | 03/31/2021                 | 04/25/2021 |        |          |            | 260.00     | 0.00     | 0.00       | 260.00     |  |
|                |            | PEST CONTROL               |            |        |          |            |            |          |            |            |  |
| 20630          | 03/31/2021 | 03/31/2021                 | 04/25/2021 |        |          |            | 105.00     | 0.00     | 0.00       | 105.00     |  |
|                |            | PEST CONTROL               |            |        |          |            |            |          |            |            |  |
| 20631          | 03/31/2021 | 03/31/2021                 | 04/25/2021 |        |          |            | 160.00     | 0.00     | 0.00       | 160.00     |  |
|                |            | PEST CONTROL               |            |        |          |            |            |          |            |            |  |
| 20632          | 03/31/2021 | 03/31/2021                 | 04/25/2021 |        |          |            | 505.00     | 0.00     | 0.00       | 505.00     |  |
|                |            | PEST CONTROL               |            |        |          |            |            |          |            |            |  |
| Vendor Totals: | Number     | Name                       |            |        |          | Gross      | Discount   | No-Pay   | Net        |            |  |
| 11291          |            | DOWELL PEST CON            |            |        |          | 1,030.00   | 0.00       | 0.00     | 1,030.00   |            |  |
| Vendor#        | E1340      | Vendor Name                | Class      |        | Pay Code |            |            |          |            |            |  |
|                |            | ELSEVIER INC.              | W          |        |          |            |            |          |            |            |  |
| Invoice#       | Comment    | Tran Dt                    | Inv Dt     | Due Dt | Check Dt | Pay        | Gross      | Discount | No-Pay     | Net        |  |
| R050921        | 04/06/2021 | 12/31/2020                 | 01/30/2021 |        |          |            | 2,576.03   | 0.00     | 0.00       | 2,576.03   |  |
|                |            | PHARMACY SERVICES          |            |        |          |            |            |          |            |            |  |
| Vendor Totals: | Number     | Name                       |            |        |          | Gross      | Discount   | No-Pay   | Net        |            |  |
| E1340          |            | ELSEVIER INC,              |            |        |          | 2,576.03   | 0.00       | 0.00     | 2,576.03   |            |  |
| Vendor#        | S0501      | Vendor Name                | Class      |        | Pay Code |            |            |          |            |            |  |
|                |            | EVOQUA WATER TECHNOLOGIES  |            |        |          |            |            |          |            |            |  |
| Invoice#       | Comment    | Tran Dt                    | Inv Dt     | Due Dt | Check Dt | Pay        | Gross      | Discount | No-Pay     | Net        |  |
| 904796958      | 03/31/2021 | 02/17/2021                 | 03/14/2021 |        |          |            | 1,084.33   | 0.00     | 0.00       | 1,084.33   |  |
|                |            | LABOR BILLING PUMP         |            |        |          |            |            |          |            |            |  |
| Vendor Totals: | Number     | Name                       |            |        |          | Gross      | Discount   | No-Pay   | Net        |            |  |
| S0501          |            | EVOQUA WATER TI            |            |        |          | 1,084.33   | 0.00       | 0.00     | 1,084.33   |            |  |
| Vendor#        | F1050      | Vendor Name                | Class      |        | Pay Code |            |            |          |            |            |  |
|                |            | FASTENAL COMPANY           | M          |        |          |            |            |          |            |            |  |
| Invoice#       | Comment    | Tran Dt                    | Inv Dt     | Due Dt | Check Dt | Pay        | Gross      | Discount | No-Pay     | Net        |  |
| TXPOT2338      | 03/31/2021 | 02/22/2021                 | 03/24/2021 |        |          |            | 7.55       | 0.00     | 0.00       | 7.55       |  |
|                |            | SUPPLIES                   |            |        |          |            |            |          |            |            |  |
| Vendor Totals: | Number     | Name                       |            |        |          | Gross      | Discount   | No-Pay   | Net        |            |  |
| F1050          |            | FASTENAL COMPAI            |            |        |          | 7.55       | 0.00       | 0.00     | 7.55       |            |  |
| Vendor#        | F1400      | Vendor Name                | Class      |        | Pay Code |            |            |          |            |            |  |
|                |            | FISHER HEALTHCARE          | M          |        |          |            |            |          |            |            |  |
| Invoice#       | Comment    | Tran Dt                    | Inv Dt     | Due Dt | Check Dt | Pay        | Gross      | Discount | No-Pay     | Net        |  |
| 6339772        | 03/18/2021 | 03/10/2021                 | 04/04/2021 |        |          |            | 176.61     | 0.00     | 0.00       | 176.61     |  |
|                |            | SUPPLIES                   |            |        |          |            |            |          |            |            |  |
| 7361030        | 03/18/2021 | 03/18/2021                 | 04/12/2021 |        |          |            | 239.32     | 0.00     | 0.00       | 239.32     |  |
|                |            | SUPPLIES                   |            |        |          |            |            |          |            |            |  |
| 2170467        | 03/23/2021 | 02/01/2021                 | 02/26/2021 |        |          |            | 1,272.48   | 0.00     | 0.00       | 1,272.48   |  |
|                |            | SUPPLIES                   |            |        |          |            |            |          |            |            |  |
| 5721430        | 03/24/2021 | 03/04/2021                 | 03/29/2021 |        |          |            | 1,960.48   | 0.00     | 0.00       | 1,960.48   |  |
|                |            | SUPPLIES                   |            |        |          |            |            |          |            |            |  |
| 5189837        | 03/31/2021 | 02/26/2021                 | 03/23/2021 |        |          |            | 174.48     | 0.00     | 0.00       | 174.48     |  |

|          |   |            |            |            |  |          |      |      |            |
|----------|---|------------|------------|------------|--|----------|------|------|------------|
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 5576684  | ✓ | 03/31/2021 | 03/03/2021 | 03/28/2021 |  | 8,902.94 | 0.00 | 0.00 | 8,902.94 ✓ |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6339776  | ✓ | 03/31/2021 | 03/10/2021 | 04/04/2021 |  | 38.70    | 0.00 | 0.00 | 38.70 ✓    |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6339779  | ✓ | 03/31/2021 | 03/10/2021 | 04/04/2021 |  | 619.70   | 0.00 | 0.00 | 619.70 ✓   |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6339773  | ✓ | 03/31/2021 | 03/10/2021 | 04/04/2021 |  | 58.17    | 0.00 | 0.00 | 58.17 ✓    |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6339774  | ✓ | 03/31/2021 | 03/10/2021 | 04/04/2021 |  | 58.17    | 0.00 | 0.00 | 58.17 ✓    |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6505439  | ✓ | 03/31/2021 | 03/11/2021 | 04/05/2021 |  | 185.49   | 0.00 | 0.00 | 185.49 ✓   |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6505435  | ✓ | 03/31/2021 | 03/11/2021 | 04/05/2021 |  | 52.80    | 0.00 | 0.00 | 52.80 ✓    |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6649770  | ✓ | 03/31/2021 | 03/12/2021 | 04/06/2021 |  | 67.86    | 0.00 | 0.00 | 67.86 ✓    |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6649773  | ✓ | 03/31/2021 | 03/12/2021 | 04/06/2021 |  | 1,053.63 | 0.00 | 0.00 | 1,053.63 ✓ |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6649774  | ✓ | 03/31/2021 | 03/12/2021 | 04/06/2021 |  | 369.07   | 0.00 | 0.00 | 369.07 ✓   |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6815699  | ✓ | 03/31/2021 | 03/15/2021 | 04/09/2021 |  | 156.69   | 0.00 | 0.00 | 156.69 ✓   |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6815698  | ✓ | 03/31/2021 | 03/15/2021 | 04/09/2021 |  | 483.65   | 0.00 | 0.00 | 483.65 ✓   |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 6998078  | ✓ | 03/31/2021 | 03/16/2021 | 04/10/2021 |  | 1,234.76 | 0.00 | 0.00 | 1,234.76 ✓ |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 7199984  | ✓ | 03/31/2021 | 03/17/2021 | 04/11/2021 |  | 2,042.08 | 0.00 | 0.00 | 2,042.08 ✓ |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 7612429  | ✓ | 03/31/2021 | 03/22/2021 | 04/16/2021 |  | 1,212.00 | 0.00 | 0.00 | 1,212.00 ✓ |
| SUPPLIES |   |            |            |            |  |          |      |      |            |
| 7672428  | ✓ | 03/31/2021 | 03/22/2021 | 04/16/2021 |  | 1,297.58 | 0.00 | 0.00 | 1,297.58 ✓ |

|                |                            |            |                 |        |          |           |          |          |           |            |
|----------------|----------------------------|------------|-----------------|--------|----------|-----------|----------|----------|-----------|------------|
| Vendor Totals: |                            | Number     | Name            |        |          | Gross     | Discount | No-Pay   | Net       |            |
| F1400          |                            |            | FISHER HEALTHCA |        |          | 21,656.66 | 0.00     | 0.00     | 21,656.66 |            |
| Vendor#        | Vendor Name                |            | Class           |        | Pay Code |           |          |          |           |            |
| W1300          | GRAINGER ✓                 |            | M               |        |          |           |          |          |           |            |
| Invoice#       | Comment                    | Tran Dt    | Inv Dt          | Due Dt | Check Dt | Pay       | Gross    | Discount | No-Pay    | Net        |
| 9736833840 ✓   | 03/31/2021                 | 12/04/2020 | 12/29/2020      |        |          |           | 1,803.00 | 0.00     | 0.00      | 1,803.00 ✓ |
| SUPPLIES       |                            |            |                 |        |          |           |          |          |           |            |
| 9815085171 ✓   | 03/31/2021                 | 02/23/2021 | 03/20/2021      |        |          |           | 15.80    | 0.00     | 0.00      | 15.80 ✓    |
| SUPPLIES       |                            |            |                 |        |          |           |          |          |           |            |
| 9821398360 ✓   | 03/31/2021                 | 03/01/2021 | 03/26/2021      |        |          |           | 42.50    | 0.00     | 0.00      | 42.50 ✓    |
| SUPPLIES       |                            |            |                 |        |          |           |          |          |           |            |
| Vendor Totals: |                            | Number     | Name            |        |          | Gross     | Discount | No-Pay   | Net       |            |
| W1300          |                            |            | GRAINGER        |        |          | 1,861.30  | 0.00     | 0.00     | 1,861.30  |            |
| Vendor#        | Vendor Name                |            | Class           |        | Pay Code |           |          |          |           |            |
| G1210          | GULF COAST PAPER COMPANY ✓ |            | M               |        |          |           |          |          |           |            |
| Invoice#       | Comment                    | Tran Dt    | Inv Dt          | Due Dt | Check Dt | Pay       | Gross    | Discount | No-Pay    | Net        |
| 2001641 ✓      | 03/31/2021                 | 02/09/2021 | 03/11/2021      |        |          |           | 24.93    | 0.00     | 0.00      | 24.93 ✓    |
| SUPPLIES       |                            |            |                 |        |          |           |          |          |           |            |
| 2019840 ✓      | 03/31/2021                 | 03/23/2021 | 04/22/2021      |        |          |           | 409.21   | 0.00     | 0.00      | 409.21 ✓   |
| SUPPLIES       |                            |            |                 |        |          |           |          |          |           |            |
| 2023189 ✓      | 03/31/2021                 | 03/29/2021 | 04/28/2021      |        |          |           | 111.30   | 0.00     | 0.00      | 111.30 ✓   |
| SUPPLIES       |                            |            |                 |        |          |           |          |          |           |            |
| Vendor Totals: |                            | Number     | Name            |        |          | Gross     | Discount | No-Pay   | Net       |            |
| G1210          |                            |            | GULF COAST PAPE |        |          | 545.44    | 0.00     | 0.00     | 545.44    |            |
| Vendor#        | Vendor Name                |            | Class           |        | Pay Code |           |          |          |           |            |
| 12716          | HITACHI HEALTHCARE ✓       |            |                 |        |          |           |          |          |           |            |
| Invoice#       | Comment                    | Tran Dt    | Inv Dt          | Due Dt | Check Dt | Pay       | Gross    | Discount | No-Pay    | Net        |
| PJIN0169342 ✓  | 03/24/2021                 | 03/15/2021 | 04/25/2021      |        |          |           | 7,908.33 | 0.00     | 0.00      | 7,908.33 ✓ |

|         |                |                            |                  |            |        |          |          |          |          |        |          |         |
|---------|----------------|----------------------------|------------------|------------|--------|----------|----------|----------|----------|--------|----------|---------|
|         |                |                            |                  |            |        |          |          |          |          |        |          | SMA FEE |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |
|         | 12716          |                            | HITACHI HEALTHC/ |            |        | 7,908.33 | 0.00     | 0.00     | 7,908.33 |        |          |         |
| Vendor# |                | Vendor Name                |                  |            |        | Class    | Pay Code |          |          |        |          |         |
| I1260   |                | INTOXIMETERS INC           |                  |            |        | M        |          |          |          |        |          |         |
|         | Invoice#       | Comment                    | Tran Dt          | Inv Dt     | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay | Net      |         |
|         | 677268         | 03/31/2021                 | 03/25/2021       | 04/19/2021 |        |          |          | 489.00   | 0.00     | 0.00   | 489.00   |         |
|         |                | RECERTIFI LEGACY AS4/RBT4  |                  |            |        |          |          |          |          |        |          |         |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |
|         | I1260          |                            | INTOXIMETERS INC |            |        | 489.00   | 0.00     | 0.00     | 489.00   |        |          |         |
| Vendor# |                | Vendor Name                |                  |            |        | Class    | Pay Code |          |          |        |          |         |
| I2932   |                | INTRADO                    |                  |            |        |          |          |          |          |        |          |         |
|         | Invoice#       | Comment                    | Tran Dt          | Inv Dt     | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay | Net      |         |
|         | INV00228812    | 03/31/2021                 | 10/31/2020       | 10/31/2020 |        |          |          | 491.20   | 0.00     | 0.00   | 491.20   |         |
|         |                | HOUSE CALLS                |                  |            |        |          |          |          |          |        |          |         |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |
|         | I2932          |                            | INTRADO          |            |        | 491.20   | 0.00     | 0.00     | 491.20   |        |          |         |
| Vendor# |                | Vendor Name                |                  |            |        | Class    | Pay Code |          |          |        |          |         |
| L0700   |                | LABCORP OF AMERICA HOLDING |                  |            |        | M        |          |          |          |        |          |         |
|         | Invoice#       | Comment                    | Tran Dt          | Inv Dt     | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay | Net      |         |
|         | 69092241       | 03/31/2021                 | 03/27/2021       | 04/21/2021 |        |          |          | 915.00   | 0.00     | 0.00   | 915.00   |         |
|         |                | PURCHASED SERVICES         |                  |            |        |          |          |          |          |        |          |         |
|         | 69040778       | 03/31/2021                 | 03/27/2021       | 04/21/2021 |        |          |          | 38.43    | 0.00     | 0.00   | 38.43    |         |
|         |                | PURCHASED SERVICES         |                  |            |        |          |          |          |          |        |          |         |
|         | 68981910       | 03/31/2021                 | 03/27/2021       | 04/21/2021 |        |          |          | 158.50   | 0.00     | 0.00   | 158.50   |         |
|         |                | PURCHASED SERVICES         |                  |            |        |          |          |          |          |        |          |         |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |
|         | L0700          |                            | LABCORP OF AMEF  |            |        | 1,111.93 | 0.00     | 0.00     | 1,111.93 |        |          |         |
| Vendor# |                | Vendor Name                |                  |            |        | Class    | Pay Code |          |          |        |          |         |
| M1950   |                | MARTIN PRINTING CO         |                  |            |        | W        |          |          |          |        |          |         |
|         | Invoice#       | Comment                    | Tran Dt          | Inv Dt     | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay | Net      |         |
|         | 76831          | 03/31/2021                 | 03/25/2021       | 04/24/2021 |        |          |          | 149.00   | 0.00     | 0.00   | 149.00   |         |
|         |                | APPT CARDS                 |                  |            |        |          |          |          |          |        |          |         |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |
|         | M1950          |                            | MARTIN PRINTING  |            |        | 149.00   | 0.00     | 0.00     | 149.00   |        |          |         |
| Vendor# |                | Vendor Name                |                  |            |        | Class    | Pay Code |          |          |        |          |         |
| M2178   |                | MCKESSON MEDICAL SURGICAL  |                  |            |        |          |          |          |          |        |          |         |
|         | Invoice#       | Comment                    | Tran Dt          | Inv Dt     | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay | Net      |         |
|         | 21577771       | 03/31/2021                 | 02/25/2021       | 03/12/2021 |        |          |          | 245.92   | 0.00     | 0.00   | 245.92   |         |
|         |                | SUPPLIES                   |                  |            |        |          |          |          |          |        |          |         |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |
|         | M2178          |                            | MCKESSON MEDIC   |            |        | 245.92   | 0.00     | 0.00     | 245.92   |        |          |         |
| Vendor# |                | Vendor Name                |                  |            |        | Class    | Pay Code |          |          |        |          |         |
| I1141   |                | MEDICAL DATA SYSTEMS, INC. |                  |            |        |          |          |          |          |        |          |         |
|         | Invoice#       | Comment                    | Tran Dt          | Inv Dt     | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay | Net      |         |
|         | 158077         | 03/31/2021                 | 03/31/2021       | 04/25/2021 |        |          |          | 3,706.14 | 0.00     | 0.00   | 3,706.14 |         |
|         |                | COLLECTION FEES            |                  |            |        |          |          |          |          |        |          |         |
|         | 158078         | 03/31/2021                 | 03/31/2021       | 04/25/2021 |        |          |          | 1,317.07 | 0.00     | 0.00   | 1,317.07 |         |
|         |                | COLLECTIONS                |                  |            |        |          |          |          |          |        |          |         |
|         | 158076         | 03/31/2021                 | 03/31/2021       | 04/25/2021 |        |          |          | 2,570.53 | 0.00     | 0.00   | 2,570.53 |         |
|         |                | COLLECTIONS                |                  |            |        |          |          |          |          |        |          |         |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |
|         | I1141          |                            | MEDICAL DATA SY  |            |        | 7,593.74 | 0.00     | 0.00     | 7,593.74 |        |          |         |
| Vendor# |                | Vendor Name                |                  |            |        | Class    | Pay Code |          |          |        |          |         |
| M2827   |                | MEDIVATORS                 |                  |            |        | M        |          |          |          |        |          |         |
|         | Invoice#       | Comment                    | Tran Dt          | Inv Dt     | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay | Net      |         |
|         | 90846731       | 03/31/2021                 | 03/26/2021       | 04/07/2021 |        |          |          | 291.43   | 0.00     | 0.00   | 291.43   |         |
|         |                | SUPPLIES                   |                  |            |        |          |          |          |          |        |          |         |
|         | 90850561       | 03/31/2021                 | 03/30/2021       | 04/07/2021 |        |          |          | 400.00   | 0.00     | 0.00   | 400.00   |         |
|         |                | SUPPLIES                   |                  |            |        |          |          |          |          |        |          |         |
|         | Vendor Totals: | Number                     | Name             |            |        | Gross    | Discount | No-Pay   | Net      |        |          |         |

| Vendor#    | M2827                     | MEDIVATORS | 691.43     | 0.00   | 0.00     | 691.43   |
|------------|---------------------------|------------|------------|--------|----------|----------|
| M2470      | Vendor Name               | Class      | Pay Code   |        |          |          |
|            | MEDLINE INDUSTRIES INC    | M          |            |        |          |          |
| Invoice#   | Comment                   | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay      |
|            |                           |            |            |        |          | Gross    |
|            |                           |            |            |        |          | Discount |
|            |                           |            |            |        |          | No-Pay   |
|            |                           |            |            |        |          | Net      |
| 1944256265 | 03/09/2021                | 03/09/2021 | 04/03/2021 |        |          | 23.96    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1939674797 | 03/31/2021                | 01/28/2021 | 02/22/2021 |        |          | 133.41   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1940291223 | 03/31/2021                | 02/02/2021 | 02/27/2021 |        |          | 2,792.97 |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1940291214 | 03/31/2021                | 02/02/2021 | 02/27/2021 |        |          | 336.60   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1940527689 | 03/31/2021                | 02/03/2021 | 02/28/2021 |        |          | -30.43   |
|            | CREDIT INVOICE 1938640795 |            |            |        |          | 0.00     |
| 1940561904 | 03/31/2021                | 02/04/2021 | 03/01/2021 |        |          | 239.80   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1941358592 | 03/31/2021                | 02/10/2021 | 03/07/2021 |        |          | -63.44   |
|            | CREDIT INVOICE 1940291225 |            |            |        |          | 0.00     |
| 1942556995 | 03/31/2021                | 02/22/2021 | 03/19/2021 |        |          | -4.75    |
|            | CREDIT INVOICE 1935953274 |            |            |        |          | 0.00     |
| 1944256267 | 03/31/2021                | 03/09/2021 | 04/03/2021 |        |          | 82.89    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944404680 | 03/31/2021                | 03/10/2021 | 04/04/2021 |        |          | 47.15    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944451924 | 03/31/2021                | 03/10/2021 | 04/04/2021 |        |          | 120.72   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482235 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 124.99   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482226 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 64.04    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482225 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 50.80    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482234 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 290.39   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482231 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 628.05   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482236 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 14.24    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482219 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 75.39    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482227 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 1,831.15 |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482222 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 416.59   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944482230 | 03/31/2021                | 03/11/2021 | 04/05/2021 |        |          | 850.42   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944704076 | 03/31/2021                | 03/12/2021 | 04/06/2021 |        |          | 53.73    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944704079 | 03/31/2021                | 03/12/2021 | 04/06/2021 |        |          | 276.69   |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944704073 | 03/31/2021                | 03/12/2021 | 04/06/2021 |        |          | 14.27    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944704077 | 03/31/2021                | 03/12/2021 | 04/06/2021 |        |          | 29.25    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944704074 | 03/31/2021                | 03/12/2021 | 04/06/2021 |        |          | 25.05    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944704078 | 03/31/2021                | 03/12/2021 | 04/06/2021 |        |          | 2,535.74 |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944704075 | 03/31/2021                | 03/12/2021 | 04/06/2021 |        |          | 31.95    |
|            | SUPPLIES                  |            |            |        |          | 0.00     |
| 1944867157 | 03/31/2021                | 03/15/2021 | 04/09/2021 |        |          | 1,808.89 |
|            |                           |            |            |        |          | 0.00     |

| PAYROLL DED    |         |                          |                  |            |          |          |          |          |        |            |  |
|----------------|---------|--------------------------|------------------|------------|----------|----------|----------|----------|--------|------------|--|
| Vendor Totals: |         | Number                   | Name             |            |          |          | Gross    | Discount | No-Pay | Net        |  |
| M2621          |         |                          | MMC AUXILIARY GI | 262.76     |          |          |          | 0.00     | 0.00   | 262.76     |  |
| Vendor#        |         | Vendor Name              |                  |            | Class    | Pay Code |          |          |        |            |  |
| 10536          |         | MORRIS & DICKSON CO, LLC |                  |            |          |          |          |          |        |            |  |
| Invoice#       | Comment | Tran Dt                  | Inv Dt           | Due Dt     | Check Dt | Pay      | Gross    | Discount | No-Pay | Net        |  |
| SC7325         | ✓       | 03/31/2021               | 03/25/2021       | 04/04/2021 |          |          | 113.87   | 0.00     | 0.00   | 113.87 ✓   |  |
| SERVICE CHARGE |         |                          |                  |            |          |          |          |          |        |            |  |
| 6744819        | ✓       | 03/31/2021               | 03/30/2021       | 04/09/2021 |          |          | 31.07    | 0.00     | 0.00   | 31.07 ✓    |  |
| INVENTORY      |         |                          |                  |            |          |          |          |          |        |            |  |
| CM42056        | ✓       | 03/31/2021               | 03/30/2021       | 04/09/2021 |          |          | -20.86   | 0.00     | 0.00   | -20.86 ✓   |  |
| INVENTORY      |         |                          |                  |            |          |          |          |          |        |            |  |
| 6742983        | ✓       | 03/31/2021               | 03/30/2021       | 04/09/2021 |          |          | 12.07    | 0.00     | 0.00   | 12.07 ✓    |  |
| INVENTORY      |         |                          |                  |            |          |          |          |          |        |            |  |
| 6742987        | ✓       | 03/31/2021               | 03/30/2021       | 04/09/2021 |          |          | 1,108.66 | 0.00     | 0.00   | 1,108.66 ✓ |  |
| INVENTORY      |         |                          |                  |            |          |          |          |          |        |            |  |
| 6744817        | ✓       | 03/31/2021               | 03/30/2021       | 04/09/2021 |          |          | 42.12    | 0.00     | 0.00   | 42.12 ✓    |  |
| INVENTORY      |         |                          |                  |            |          |          |          |          |        |            |  |
| 6744816        | ✓       | 03/31/2021               | 03/30/2021       | 04/09/2021 |          |          | 1,057.08 | 0.00     | 0.00   | 1,057.08 ✓ |  |
| INVENTORY      |         |                          |                  |            |          |          |          |          |        |            |  |
| 0186           | ✓       | 03/31/2021               | 03/30/2021       | 04/09/2021 |          |          | -53.50   | 0.00     | 0.00   | -53.50 ✓   |  |
| INVENTORY      |         |                          |                  |            |          |          |          |          |        |            |  |

|          |   |            |            |            |          |      |      |          |   |
|----------|---|------------|------------|------------|----------|------|------|----------|---|
| 6744818  | ✓ | 03/31/2021 | 03/30/2021 | 04/09/2021 | 22.35    | 0.00 | 0.00 | 22.35    | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6742982  | ✓ | 03/31/2021 | 03/30/2021 | 04/09/2021 | 1,108.66 | 0.00 | 0.00 | 1,108.66 | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6744814  | ✓ | 03/31/2021 | 03/30/2021 | 04/09/2021 | 527.28   | 0.00 | 0.00 | 527.28   | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6744815  | ✓ | 03/31/2021 | 03/30/2021 | 04/09/2021 | 4.44     | 0.00 | 0.00 | 4.44     | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6747669  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | 17.40    | 0.00 | 0.00 | 17.40    | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6749665  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | 34.63    | 0.00 | 0.00 | 34.63    | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| CM42134  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | -2.61    | 0.00 | 0.00 | -2.61    | ✓ |
|          |   |            | CREDIT     |            |          |      |      |          |   |
| 6749666  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | 1,604.26 | 0.00 | 0.00 | 1,604.26 | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6747672  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | 163.63   | 0.00 | 0.00 | 163.63   | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6747670  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | 218.37   | 0.00 | 0.00 | 218.37   | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6749667  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | 22.43    | 0.00 | 0.00 | 22.43    | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| CM42133  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | -3.44    | 0.00 | 0.00 | -3.44    | ✓ |
|          |   |            | CREDIT     |            |          |      |      |          |   |
| 6747671  | ✓ | 03/31/2021 | 03/31/2021 | 04/10/2021 | 37.57    | 0.00 | 0.00 | 37.57    | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 67541181 | ✓ | 04/06/2021 | 04/01/2021 | 04/11/2021 | 1,447.50 | 0.00 | 0.00 | 1,447.50 | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6754119  | ✓ | 04/06/2021 | 04/01/2021 | 04/11/2021 | 10.24    | 0.00 | 0.00 | 10.24    | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6760090  | ✓ | 04/06/2021 | 04/04/2021 | 04/14/2021 | 407.01   | 0.00 | 0.00 | 407.01   | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6760092  | ✓ | 04/06/2021 | 04/04/2021 | 04/14/2021 | 386.96   | 0.00 | 0.00 | 386.96   | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |
| 6760091  | ✓ | 04/06/2021 | 04/04/2021 | 04/14/2021 | 7,828.23 | 0.00 | 0.00 | 7,828.23 | ✓ |
|          |   |            | INVENTORY  |            |          |      |      |          |   |

|                |        |                    |           |          |        |           |
|----------------|--------|--------------------|-----------|----------|--------|-----------|
| Vendor Totals: | Number | Name               | Gross     | Discount | No-Pay | Net       |
| 10536          |        | MORRIS & DICKSOI ✓ | 16,125.42 | 0.00     | 0.00   | 16,125.42 |

Vendor#  
12388

|  |  |                                |       |          |
|--|--|--------------------------------|-------|----------|
|  |  | Vendor Name                    | Class | Pay Code |
|  |  | NATIONAL FARM LIFE INSURANCE ✓ |       |          |

|          |         |            |            |            |          |     |          |          |        |          |
|----------|---------|------------|------------|------------|----------|-----|----------|----------|--------|----------|
| Invoice# | Comment | Tran Dt    | Inv Dt     | Due Dt     | Check Dt | Pay | Gross    | Discount | No-Pay | Net      |
| 3389121  | ✓       | 03/31/2021 | 03/15/2021 | 04/01/2021 |          |     | 3,903.25 | 0.00     | 0.00   | 3,903.25 |
|          |         |            | INSURANCE  |            |          |     |          |          |        |          |

|                |        |                  |          |          |        |          |
|----------------|--------|------------------|----------|----------|--------|----------|
| Vendor Totals: | Number | Name             | Gross    | Discount | No-Pay | Net      |
| 12388          |        | NATIONAL FARM LI | 3,903.25 | 0.00     | 0.00   | 3,903.25 |

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    |
| 1851794785 | ✓       | 03/31/2021 | 03/02/2021 | 04/01/2021 |          |     | 761.62 | 0.00     | 0.00   | 761.62 |
|            |         |            | SUPPLIES   |            |          |     |        |          |        |        |

|                |        |                  |        |          |        |        |
|----------------|--------|------------------|--------|----------|--------|--------|
| Vendor Totals: | Number | Name             | Gross  | Discount | No-Pay | Net    |
| O1416          |        | ORTHO CLINICAL D | 761.62 | 0.00     | 0.00   | 761.62 |

Vendor#  
12544

|  |  |                 |       |          |
|--|--|-----------------|-------|----------|
|  |  | Vendor Name     | Class | Pay Code |
|  |  | PATRICK OCHOA ✓ |       |          |

|          |         |            |               |            |          |     |        |          |        |        |
|----------|---------|------------|---------------|------------|----------|-----|--------|----------|--------|--------|
| Invoice# | Comment | Tran Dt    | Inv Dt        | Due Dt     | Check Dt | Pay | Gross  | Discount | No-Pay | Net    |
| 040521   |         | 04/07/2021 | 04/05/2021    | 04/05/2021 |          |     | 200.00 | 0.00     | 0.00   | 200.00 |
|          |         |            | REHAB LAWN    |            |          |     |        |          |        |        |
| 040521B  |         | 04/07/2021 | 04/05/2021    | 04/05/2021 |          |     | 520.00 | 0.00     | 0.00   | 520.00 |
|          |         |            | HOSPITAL LAWN |            |          |     |        |          |        |        |
| 040521A  |         | 04/07/2021 | 04/05/2021    | 04/05/2021 |          |     | 380.00 | 0.00     | 0.00   | 380.00 |
|          |         |            | CLINIC LAWN   |            |          |     |        |          |        |        |

|              |                |                                 |                  |        |          |          |          |          |          |          |
|--------------|----------------|---------------------------------|------------------|--------|----------|----------|----------|----------|----------|----------|
|              | Vendor Totals: | Number                          | Name             |        | Gross    | Discount | No-Pay   |          | Net      |          |
|              | 12544          |                                 | PATRICK OCHOA    |        | 1,100.00 | 0.00     | 0.00     |          | 1,100.00 |          |
| Vendor#      |                | Vendor Name                     |                  | Class  | Pay Code |          |          |          |          |          |
| P2200        |                | POWER HARDWARE                  |                  | W      |          |          |          |          |          |          |
| Invoice#     | Comment        | Tran Dt                         | Inv Dt           | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| A71519       | 03/31/2021     | 03/05/2021                      | 03/15/2021       |        |          |          | 2.89     | 0.00     | 0.00     | 2.89     |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
| A71627       | 03/31/2021     | 03/08/2021                      | 03/18/2021       |        |          |          | 89.05    | 0.00     | 0.00     | 89.05    |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
| B60754       | 03/31/2021     | 03/08/2021                      | 03/18/2021       |        |          |          | 2.29     | 0.00     | 0.00     | 2.29     |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
| B60753       | 03/31/2021     | 03/08/2021                      | 03/18/2021       |        |          |          | -10.99   | 0.00     | 0.00     | -10.99   |
|              |                | RETURN                          |                  |        |          |          |          |          |          |          |
| A71648       | 03/31/2021     | 03/08/2021                      | 03/18/2021       |        |          |          | 5.39     | 0.00     | 0.00     | 5.39     |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
| B60830       | 03/31/2021     | 03/10/2021                      | 03/20/2021       |        |          |          | 6.59     | 0.00     | 0.00     | 6.59     |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
| B60887       | 03/31/2021     | 03/11/2021                      | 03/21/2021       |        |          |          | 5.97     | 0.00     | 0.00     | 5.97     |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
| B61178       | 03/31/2021     | 03/24/2021                      | 04/03/2021       |        |          |          | 31.96    | 0.00     | 0.00     | 31.96    |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
| A72259       | 03/31/2021     | 03/24/2021                      | 04/03/2021       |        |          |          | 5.99     | 0.00     | 0.00     | 5.99     |
|              |                | SUPPLIES                        |                  |        |          |          |          |          |          |          |
|              | Vendor Totals: | Number                          | Name             |        | Gross    | Discount | No-Pay   |          | Net      |          |
|              | P2200          |                                 | POWER HARDWAR    |        | 139.14   | 0.00     | 0.00     |          | 139.14   |          |
| Vendor#      |                | Vendor Name                     |                  | Class  | Pay Code |          |          |          |          |          |
| P1725        |                | PREMIER SLEEP DISORDERS CEN     |                  |        |          |          |          |          |          |          |
| Invoice#     | Comment        | Tran Dt                         | Inv Dt           | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| 103          | 04/06/2021     | 04/01/2021                      | 04/16/2021       |        |          |          | 6,175.00 | 0.00     | 0.00     | 6,175.00 |
|              |                | SLEEP STUDY                     |                  |        |          |          |          |          |          |          |
|              | Vendor Totals: | Number                          | Name             |        | Gross    | Discount | No-Pay   |          | Net      |          |
|              | P1725          |                                 | PREMIER SLEEP DI |        | 6,175.00 | 0.00     | 0.00     |          | 6,175.00 |          |
| Vendor#      |                | Vendor Name                     |                  | Class  | Pay Code |          |          |          |          |          |
| R1250        |                | RANDY'S FLOOR COMPANY           |                  | W      |          |          |          |          |          |          |
| Invoice#     | Comment        | Tran Dt                         | Inv Dt           | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| MMCPTL2021   | 03/31/2021     | 03/30/2021                      | 03/30/2021       |        |          |          | 325.00   | 0.00     | 0.00     | 325.00   |
|              |                | REPAIR FLOOR MAIN ENT           |                  |        |          |          |          |          |          |          |
|              | Vendor Totals: | Number                          | Name             |        | Gross    | Discount | No-Pay   |          | Net      |          |
|              | R1250          |                                 | RANDY'S FLOOR C  |        | 325.00   | 0.00     | 0.00     |          | 325.00   |          |
| 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      |
| 701092718    | 03/31/2021     | 03/31/2021                      | 04/10/2021       |        |          |          | 2.84     | 0.00     | 0.00     | 2.84     |
|              |                | SERVICE CHARGE                  |                  |        |          |          |          |          |          |          |
|              | Vendor Totals: | Number                          | Name             |        | Gross    | Discount | No-Pay   |          | Net      |          |
|              | S1405          |                                 | SERVICE SUPPLY C |        | 2.84     | 0.00     | 0.00     |          | 2.84     |          |
| 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      |
| FCHRG1181003 | 03/31/2021     | 01/18/2021                      | 01/18/2021       |        |          |          | 185.63   | 0.00     | 0.00     | 185.63   |
|              |                | FINANCE CHARGE                  |                  |        |          |          |          |          |          |          |
|              | Vendor Totals: | Number                          | Name             |        | Gross    | Discount | No-Pay   |          | Net      |          |
|              | 12288          |                                 | SPBS CLINICAL EQ |        | 185.63   | 0.00     | 0.00     |          | 185.63   |          |
| Vendor#      |                | Vendor Name                     |                  | Class  | Pay Code |          |          |          |          |          |
| 10094        |                | ST DAVIDS HEALTHCARE            |                  |        |          |          |          |          |          |          |
| Invoice#     | Comment        | Tran Dt                         | Inv Dt           | Due Dt | Check Dt | Pay      | Gross    | Discount | No-Pay   | Net      |
| MMCPL2021    | 03/31/2021     | 03/31/2021                      | 03/31/2021       |        |          |          | 420.00   | 0.00     | 0.00     | 420.00   |
|              |                | CONNECTIVITY FEE                |                  |        |          |          |          |          |          |          |
| MMCPL2021    | 03/31/2021     | 03/31/2021                      | 03/31/2021       |        |          |          | 420.00   | 0.00     | 0.00     | 420.00   |
|              |                | CONNECTIVITY FEE                |                  |        |          |          |          |          |          |          |
|              | Vendor Totals: | Number                          | Name             |        | Gross    | Discount | No-Pay   |          | Net      |          |

|                |            |                             |            |          |          |        |           |          |           |           |  |
|----------------|------------|-----------------------------|------------|----------|----------|--------|-----------|----------|-----------|-----------|--|
| Vendor#        | 10094      | ST DAVIDS HEALTH            | 840.00     | 0.00     | 0.00     | 840.00 |           |          |           |           |  |
| T2539          |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |
|                |            | T-SYSTEM, INC               | W          |          |          |        |           |          |           |           |  |
| Invoice#       | Comment    | Tran Dt                     | Inv Dt     | Due Dt   | Check Dt | Pay    | Gross     | Discount | No-Pay    | Net       |  |
| 44142          | 03/31/2021 | 03/27/2021                  | 04/26/2021 |          |          |        | 431.42    | 0.00     | 0.00      | 431.42    |  |
|                |            | ERX LICENSE                 |            |          |          |        |           |          |           |           |  |
| Vendor Totals: | Number     | Name                        |            |          |          | Gross  | Discount  | No-Pay   | Net       |           |  |
| T2539          |            | T-SYSTEM, INC               | 431.42     |          |          |        | 0.00      | 0.00     | 431.42    |           |  |
| Vendor#        |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |
| 11097          |            | TEXAS A&M HEALTH SCIENCE CE |            |          |          |        |           |          |           |           |  |
| Invoice#       | Comment    | Tran Dt                     | Inv Dt     | Due Dt   | Check Dt | Pay    | Gross     | Discount | No-Pay    | Net       |  |
| 093020203      | 03/31/2021 | 09/30/2020                  | 03/31/2021 |          |          |        | 6,175.00  | 0.00     | 0.00      | 6,175.00  |  |
|                |            | UTILIZATION MGMT - 10/15/21 |            |          |          |        |           |          |           |           |  |
| Vendor Totals: | Number     | Name                        |            |          |          | Gross  | Discount  | No-Pay   | Net       |           |  |
| 11097          |            | TEXAS A&M HEALTH            | 6,175.00   |          |          |        | 0.00      | 0.00     | 6,175.00  |           |  |
| Vendor#        |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |
| T1450          |            | TEXAS ASSOCIATION OF COUNTI | W          |          |          |        |           |          |           |           |  |
| Invoice#       | Comment    | Tran Dt                     | Inv Dt     | Due Dt   | Check Dt | Pay    | Gross     | Discount | No-Pay    | Net       |  |
| 040121         | 04/05/2021 | 04/01/2021                  | 04/01/2021 |          |          |        | 4,231.72  | 0.00     | 0.00      | 4,231.72  |  |
|                |            | 1ST QRT 2021 UNEMPLOYMENT   |            |          |          |        |           |          |           |           |  |
| Vendor Totals: | Number     | Name                        |            |          |          | Gross  | Discount  | No-Pay   | Net       |           |  |
| T1450          |            | TEXAS ASSOCIATIC            | 4,231.72   |          |          |        | 0.00      | 0.00     | 4,231.72  |           |  |
| Vendor#        |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |
| 13632          |            | THRIVEFUEL LLC              |            |          |          |        |           |          |           |           |  |
| Invoice#       | Comment    | Tran Dt                     | Inv Dt     | Due Dt   | Check Dt | Pay    | Gross     | Discount | No-Pay    | Net       |  |
| 1095745010     | 03/31/2021 | 03/31/2021                  | 04/10/2021 |          |          |        | 2,650.00  | 0.00     | 0.00      | 2,650.00  |  |
|                |            | SOCIAL AD                   |            |          |          |        |           |          |           |           |  |
| Vendor Totals: | Number     | Name                        |            |          |          | Gross  | Discount  | No-Pay   | Net       |           |  |
| 13632          |            | THRIVEFUEL LLC              | 2,650.00   |          |          |        | 0.00      | 0.00     | 2,650.00  |           |  |
| Vendor#        |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |
| V1058          |            | VICTORIA ANESTHESIOLOGY     | W          |          |          |        |           |          |           |           |  |
| Invoice#       | Comment    | Tran Dt                     | Inv Dt     | Due Dt   | Check Dt | Pay    | Gross     | Discount | No-Pay    | Net       |  |
| 033121         | 03/31/2021 | 03/31/2021                  | 03/31/2021 |          |          |        | 31,462.37 | 0.00     | 0.00      | 31,462.37 |  |
|                |            | ANESTHESIA                  |            |          |          |        |           |          |           |           |  |
| Vendor Totals: | Number     | Name                        |            |          |          | Gross  | Discount  | No-Pay   | Net       |           |  |
| V1058          |            | VICTORIA ANESTHI            | 31,462.37  |          |          |        | 0.00      | 0.00     | 31,462.37 |           |  |
| Vendor#        |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |
| 13808          |            | VITA PERSONA LLC            |            |          |          |        |           |          |           |           |  |
| Invoice#       | Comment    | Tran Dt                     | Inv Dt     | Due Dt   | Check Dt | Pay    | Gross     | Discount | No-Pay    | Net       |  |
| VP20211746     | 03/31/2021 | 03/30/2021                  | 04/07/2021 |          |          |        | 1,999.00  | 0.00     | 0.00      | 1,999.00  |  |
|                |            | SUPPLIES                    |            |          |          |        |           |          |           |           |  |
| Vendor Totals: | Number     | Name                        |            |          |          | Gross  | Discount  | No-Pay   | Net       |           |  |
| 13808          |            | VITA PERSONA LLC            | 1,999.00   |          |          |        | 0.00      | 0.00     | 1,999.00  |           |  |
| Vendor#        |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |
| W1005          |            | WALMART COMMUNITY           | W          |          |          |        |           |          |           |           |  |
| Invoice#       | Comment    | Tran Dt                     | Inv Dt     | Due Dt   | Check Dt | Pay    | Gross     | Discount | No-Pay    | Net       |  |
| 021821         | 03/31/2021 | 02/18/2021                  | 04/11/2021 |          |          |        | 162.40    | 0.00     | 0.00      | 162.40    |  |
|                |            | SUPPLIES                    |            |          |          |        |           |          |           |           |  |
| 022421         | 03/31/2021 | 02/24/2021                  | 04/11/2021 |          |          |        | 11.76     | 0.00     | 0.00      | 11.76     |  |
|                |            | SUPPLIES                    |            |          |          |        |           |          |           |           |  |
| 031121A        | 03/31/2021 | 03/11/2021                  | 04/11/2021 |          |          |        | 143.72    | 0.00     | 0.00      | 143.72    |  |
|                |            | SUPPLIES                    |            |          |          |        |           |          |           |           |  |
| 031121         | 03/31/2021 | 03/11/2021                  | 04/11/2021 |          |          |        | 2.64      | 0.00     | 0.00      | 2.64      |  |
|                |            | SUPPLIES                    |            |          |          |        |           |          |           |           |  |
| 031421         | 03/31/2021 | 03/14/2021                  | 04/11/2021 |          |          |        | 137.33    | 0.00     | 0.00      | 137.33    |  |
|                |            | SUPPLIES COVID CLINIC       |            |          |          |        |           |          |           |           |  |
| 031621         | 03/31/2021 | 03/16/2021                  | 04/11/2021 |          |          |        | 8.78      | 0.00     | 0.00      | 8.78      |  |
|                |            | LATE CHARGE                 |            |          |          |        |           |          |           |           |  |
| Vendor Totals: | Number     | Name                        |            |          |          | Gross  | Discount  | No-Pay   | Net       |           |  |
| W1005          |            | WALMART COMMU               | 466.63     |          |          |        | 0.00      | 0.00     | 466.63    |           |  |
| Vendor#        |            | Vendor Name                 | Class      | Pay Code |          |        |           |          |           |           |  |

I1110

WERFEN USA LLC ✓

| Invoice#   | Comment      | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross     | Discount | No-Pay | Net         |
|------------|--------------|------------|------------|--------|----------|-----|-----------|----------|--------|-------------|
| 9110958697 | ✓ 03/31/2021 | 03/17/2021 | 04/11/2021 |        |          |     | 12,832.68 | 0.00     | 0.00   | 12,832.68 ✓ |
| SUPPLIES   |              |            |            |        |          |     |           |          |        |             |
| 9110962485 | ✓ 03/31/2021 | 03/30/2021 | 04/24/2021 |        |          |     | 1,571.67  | 0.00     | 0.00   | 1,571.67 ✓  |

LEASE

| Vendor Totals: | Number | Name           | Gross     | Discount | No-Pay | Net       |
|----------------|--------|----------------|-----------|----------|--------|-----------|
| I1110          |        | WERFEN USA LLC | 14,404.35 | 0.00     | 0.00   | 14,404.35 |

Vendor#

Y1000

Vendor Name

YOUNG PLUMBING CO ✓

Class

W

Pay Code

| Invoice# | Comment      | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross | Discount | No-Pay | Net     |
|----------|--------------|------------|------------|--------|----------|-----|-------|----------|--------|---------|
| QB3021   | ✓ 04/07/2021 | 04/06/2021 | 04/06/2021 |        |          |     | 15.95 | 0.00     | 0.00   | 15.95 ✓ |

SUPPLIES

| Vendor Totals: | Number | Name           | Gross | Discount | No-Pay | Net   |
|----------------|--------|----------------|-------|----------|--------|-------|
| Y1000          |        | YOUNG PLUMBING | 15.95 | 0.00     | 0.00   | 15.95 |

Report Summary

| Grand Totals: | Gross      | Discount | No-Pay | Net        |
|---------------|------------|----------|--------|------------|
|               | 362,614.63 | 0.00     | 0.00   | 362,614.63 |

APPROVED  
ON  
APR 08 2021  
COUNTY ANCHORAGE  
CALLEDON 03/20/21, TEXAS

OK#  
189948-  
190015

4/8/2021

tmp\_\_cw5report1367698590222124739.html

04/08/2021

MEMORIAL MEDICAL CENTER

0

13:50

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Vendor#

Vendor Name

Class

Pay Code

12380

HEALTH SOLUTIONS DIETETICS

| Invoice# | Comment    | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross    | Discount | No-Pay | Net      |
|----------|------------|------------|------------|--------|----------|-----|----------|----------|--------|----------|
| 033121   | 03/31/2021 | 03/31/2021 | 03/31/2021 |        |          |     | 3,000.00 | 0.00     | 0.00   | 3,000.00 |

DIETICIAN

Vendor Totals:

Number

Name

Gross

Discount

No-Pay

Net

12380

HEALTH SOLUTION

3,000.00

0.00

0.00

3,000.00

Report Summary

Grand Totals:

Gross

Discount

No-Pay

Net

3,000.00

0.00

0.00

3,000.00

APPROVED  
JH

APR 08 2021 CK#  
189979

CASH ON HAND  
CASH ON HAND, ITEMS

RECEIVED

RUN DATE: 04/08/21

TIME: 10:26

APR 08 2021

MEMORIAL MEDICAL CENTER

EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1

APCDEDIT

PATIENT  
NUMBER  
Calhoun County Auditor  
PAYEE NAME

PAY PAT  
DATE AMOUNT CODE TYPE DESCRIPTION

GL NUM

|     |        |        |   |   |            |   |
|-----|--------|--------|---|---|------------|---|
| ✓   | 040721 | 30.63  | ✓ | 3 | REFUND FOR |   |
| ✓   | 040721 | 375.00 | ✓ | 2 | REFUND FOR |   |
| 3 ✓ | 040721 | 84.70  | ✓ | 1 | REFUND FOR |   |
| 3 ✓ | 040721 | 14.00  | ✓ | 2 | REFUND FOR |   |
| ✓   | 040721 | 509.52 | ✓ | 3 | REFUND FOR | 7 |
| ✓   | 040721 | 40.39  | ✓ | 2 | REFUND FOR |   |
| ✓   | 040721 | 35.98  | ✓ | 3 | REFUND FOR |   |
| ✓   | 040721 | 239.05 | ✓ | 2 | REFUND FOR |   |
| ✓   | 040721 | 31.99  | ✓ | 5 | REFUND FOR |   |
| ✓   | 040721 | 20.00  | ✓ | 2 | REFUND FOR |   |
| ✓   | 040721 | 237.08 | ✓ | 2 | REFUND FOR |   |
| ✓   | 040721 | 25.00  | ✓ | 2 | REFUND FOR |   |

ARID=0001 TOTAL

1643.34

TOTAL

1643.34

APPROVED  
CK

APR 08 2021

CALHOUN COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK#

190026-

190037

## CITIBANK CORPORATE CARD



## Account Statement

 Commercial Card Account  
 JASON W ANGLIN

## Account Inquiries:

 Toll Free: 1-(800)-248-4553  
 International: 1-(904)-954-7314  
 TDD/TTY: 1-(877)-505-7276

Account Number: XXXX-XXXX-XXXX

## Summary of Account Activity

Total Activity \$4,669.92

 Send Notice of Billing Errors and Customer Service Inquiries to:  
 CITIBANK, N.A., PO BOX 6125, SIOUX FALLS SD 57117-6125

## Not an invoice. For your records only.

 Credit Limit \$20,000  
 Cash Advance Limit \$0  
 Statement Closing Date 04/03/2021  
 Days in Billing Period 31

## Transactions

| Post Date                                    | Trans Date | MCC  | Reference Number        | Description/Location                                        | Amount               |
|----------------------------------------------|------------|------|-------------------------|-------------------------------------------------------------|----------------------|
| ***** NOTICE MEMO ITEM(S) LISTED BELOW ***** |            |      |                         |                                                             |                      |
| 03/05                                        | 03/03      | 8062 | 55457371063200873100041 | 1 TEXAS HOSPITAL ASSOC 5124651000 TX 41150                  | 78701 USA ✓ 894.00 ✓ |
| 03/10                                        | 03/09      | 8398 | 55429501068852181736734 | 2 PAYPAL *TEXASORGANI 4029357733 TX 18173673                | 78759 USA ✓ 350.00 ✓ |
| 03/11                                        | 03/10      | 5942 | 55432861069200818971351 | 3 AMZN Mktp US*TM7B04UO3 Amzn.com/billWA 113-6008333-59170  | 98109 USA ✓ 68.87 ✓  |
| 03/11                                        | 03/10      | 9399 | 05134371070600031063600 | 4 NPDB NPDB.HRSA.GOV 800-767-6732 VA N74845300              | 22033 USA ✓ 2.00 ✓   |
| 03/11                                        | 03/10      | 9399 | 05134371070600031063782 | 5 NPDB NPDB.HRSA.GOV 800-767-6732 VA N74845706              | 22033 USA ✓ 2.00 ✓   |
| 03/11                                        | 03/11      | 8999 | 55432861070200907774028 | 6 AMA*CREDENTIALING 800-621-8335 IL                         | 60611 USA ✓ 93.62 ✓  |
| 03/11                                        | 03/11      | 8999 | 55432861070200907774069 | 7 AMA*CREDENTIALING 800-621-8335 IL                         | 60611 USA ✓ 38.30 ✓  |
| 03/12                                        | 03/12      | 7392 | 55432861071200147985987 | 8 LSVT GLOBAL INC 520-820-1592 AZ 0000000000000000          | 85719 USA ✓ 580.00 ✓ |
| 03/12                                        | 03/12      | 5942 | 55432861071200159124012 | 9 AMZN Mktp US*U80B190Q3 Amzn.com/billWA 113-6677703-88250  | 98109 USA ✓ 66.89 ✓  |
| 03/17                                        | 03/16      | 8699 | 82305091075000016752510 | 10 ONLINEWEBBCOURSE MIDDLETOWN DE                           | 19709 USA ✓ 220.00 ✓ |
| 03/22                                        | 03/20      | 5942 | 55432861079200639800746 | 11 AMZN Mktp US*JZ1T04IV3 Amzn.com/billWA 113-1420969-55098 | 98109 USA ✓ 67.96 ✓  |
| 03/24                                        | 03/23      | 8641 | 55429501082852961863932 | 12 NARHC 8663061961 MI 96186393                             | 49412 USA ✓ 300.00 ✓ |
| 03/24                                        | 03/23      | 5074 | 55432861082200405519772 | 13 SUPPLYHOUSE.COM 888-757-4774 NY 9038781                  | 11747 USA ✓ 288.67 ✓ |

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

Page 1 of 4

 citi CITIBANK, N.A.  
 PO BOX 6125  
 SIOUX FALLS SD 57117-6125

 Account Number XXXX-XXXX-XXXX-  
 Statement Closing Date April 03, 2021

 Not an invoice,  
 For your records only.

 JASON W ANGLIN  
 CALHOUN COUNTY  
 STE A  
 202 S ANN ST  
 PORT LAVACA TX 77979-4204

00006934502

Account: XXXX-XXXX-XXXX-

Transactions (con't)

| Post Date                           | Trans Date | MCC  | Reference Number        | Description/Location                            | Amount               |
|-------------------------------------|------------|------|-------------------------|-------------------------------------------------|----------------------|
| 03/24                               | 03/23      | 5074 | 55432861082200405519848 | 14 SUPPLYHOUSE.COM 888-757-4774 NY 9038781      | 11747 USA 1,443.35 ✓ |
| 04/01                               | 03/31      | 4899 | 55417341090280900059781 | 15 SPARKLIGHT 877-6922253 AZ 28090005898        | 85012 USA 226.26 ✓   |
| 04/02                               | 04/01      | 9399 | 05134371092600045749883 | 16 NPDB NPDB.HRSA.GOV 800-767-6732 VA N75286510 | 22033 USA 28.00 ✓    |
| ..... TOTAL AMOUNT OF MEMO ITEM(S): |            |      |                         |                                                 | \$4,669.92 ✓         |

APR 12 2021

APR 12 2021

COUNTY CLERK  
CANTON, OHIO, OHIO

## Important Information About Your Citi Corporate Card

- **Report a Lost or Stolen Card Immediately:** Our telephone lines are open every day, 24 hours a day. Call the Customer Service telephone number specified on the front of the statement to report a lost or stolen Citi Corporate Card.
- **Credit Reports:** The Bank may report Account information to credit bureaus. Late payments, missed payments, or other defaults on the Account may be reflected in your credit report.
- **Cardholder Credit Line:** Each Cardholder has an individual Credit Line (a portion of which may be used for Cash Advances), which is the maximum amount that the Cardholder can charge at any time. The size of each Cardholder's Credit Line (and Cash Limit, if any), is determined by the Company and is a portion of the total Company Credit Line.
- **To Increase or Reallocate a Company or Cardholder Credit Line:** The Company may request changes to credit lines by contacting Citi Corporate Card Customer Services. Our telephone lines are open every day, 24 hours a day at the telephone number specified on the front of the statement.
- **Additional Cardholders:** The Company may request applications for additional Cardholders by contacting Citi Corporate Card Service. Our telephone lines are open every day, 24 hours a day at the telephone number specified on the front of the statement. Limit one Citi Corporate Card per Cardholder.
- **CitiManager® Online Tool:** You can easily manage your Citi Corporate Card online using the CitiManager online tool. CitiManager enables you to manage business expenses from anywhere around the globe from your computer or mobile device; you can view statements online as well as confirm account balances. To register for CitiManager, please log on to [www.citimanager.com/login](http://www.citimanager.com/login) and click on the 'Self registration for Cardholders' link. From there, follow the prompts to establish your account.
- **Payments:** You may make a payment to your individually billed card account online using CitiManager. Please note that some organizations do not have the CitiManager online payment feature enabled for cardholders. If paying by mail, please allow sufficient mailing time. Please write your account number on the front of the check. For centrally billed accounts, please be sure to send on Company check as payment for all Cardholder balances. If we receive your mailed payment in proper form at our processing facility by 5:00 p.m. Eastern Time, it will be credited as of that day. Payments can also be made by electronic fund transfer, wire transfer, ACH transfer, direct debit, and other methods. Call the number on the front of this statement for details.
- **Company Ratification:** By its payment of any amounts charged to the Account, the Company: (i) ratifies its original Application for the Account and the authority of all persons at the time of their signing such Application, and (ii) authorizes the continued use of the Account under the terms of The Corporate Card Agreement by all Cardholders to whom Cards are issued.
- **Special Information on Cash Advances:** Cardholders may get a Cash Advance at over 160,000 locations worldwide.
  - The Cardholder's Cash Advance Limit is a part of the Cardholder's Total Credit Line. It is not an additional line of credit.
  - For Cash Advances from ATMs, a separate Personal Identification Number (PIN) is required for security purposes.
- **Delinquency Fee:** My Account will be delinquent unless the Bank receives the amount shown on the billing statement as the balance due, less any disputed charges, by the payment due date. The Bank will show any unpaid portion of the balance due as a past due balance on subsequent billing statements. If any portion of the past due balance appears on two consecutive billing statements (approximately 55-60 days after the billing cycle date), I agree to pay a delinquency fee monthly based on a percentage of the entire past due balance until my payment is received by the Bank. A late fee may also be imposed monthly until payment for the past due balance is received by the Bank.

## Account Disputes

- **In Case of Errors or Questions About Your Bill:** You are responsible for initiating the dispute resolution process if your Account Statement lists charges that you believe are unauthorized, incorrect, for merchandise that has not been received, or for returned merchandise. You should also initiate the process if your Account Statement incorrectly lists a credit as a charge or if a credit, for which you have been issued a credit slip, is not shown. To begin the dispute resolution process, visit [citimanager.com/login](http://citimanager.com/login).
- You may also dispute a transaction by visiting to Citi. You may write to us on a separate sheet at the address specified on the front of this statement as soon as possible. Please notify us no later than 60 days after the date of the bill on which the error or problem first appeared. In the letter please give us the following information:
  - Your name and account number. For centrally billed Company Accounts, the Company name and individual account number.
  - The dollar amount of the suspected error.
  - Describe the error and explain the reason for the error; if more information is needed about an item, please describe it to us.
  - **Merchant Disputes:** If the Company or Cardholder was unsuccessful in attempting to resolve a problem with a merchant concerning the quality of goods or services purchased with the Citi Corporate Card, we may be able to help if we are notified in writing within 60 days of the date of the charge. You will be responsible if we are not able to resolve the dispute or if the Bank finds you responsible for the disputed charge.
- In the letter to us, please explain in detail the dispute and the results of the attempt to resolve it with the merchant. The letter must include the amount involved, and must be signed by the individual Cardholder. We will notify you of the results of our efforts.
- If you returned merchandise and received a credit slip which has not yet been posted, please allow 30 days from the date it was issued. If it has not been posted to the Account by then, forward a copy of the credit slip to us at the billing dispute address specified on the front of the statement. Along with the copy of the credit slip please include a letter (signed by the individual Cardholder) stating that credit was not received. If a credit slip was not issued, please request one from the merchant. If the merchant refuses, please write to us and explain the details.
- On non-disputed matters or any matter shown by the Bank not to be in error, the Bank may charge the Company or Cardholder the fee specified in the Corporate Card Agreement for each copy of any document the Company or Cardholder requests, such as duplicate periodic statements, transaction slips, and the like.
- Please save your charge receipts.

Account: XXXX-XXXX-XXXX

---

# MEMORIAL MEDICAL CENTER

## PURCHASE ORDER

①

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

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

Vendor Name: Citibank

Date: 4/5/2021

Vendor Address: \_\_\_\_\_

P.O. # \_\_\_\_\_

Vendor Phone #: \_\_\_\_\_

Account # \_\_\_\_\_

Vendor Fax #: \_\_\_\_\_

Initiated By: \_\_\_\_\_

Form # 9401

| Date Required |      | Expense #      | Department                       | Deliver To   |            |               |
|---------------|------|----------------|----------------------------------|--------------|------------|---------------|
| Line No.      | Qty. | Catalog Number | Description                      | Unit Cost    | Unit Meas. | Extended Cost |
| 1             | —    |                | Texas Hospital Assoc. - Admin    |              |            | 894.00        |
| 2             |      |                | Webinar - The CMS Hospital       | (417-515121) |            |               |
| 3             |      |                | Conditions of Participation 2021 | Jason Anglin |            |               |
| 4             | —    |                | AnyPai - TORCH Conference        |              |            | 350.00        |
| 5             |      |                | Registration for Banette         |              |            |               |
| 6             |      |                | Bethany                          |              |            |               |
| 7             | —    |                | Ammon - Breathing Tubes          |              |            | 68.87         |
| 8             |      |                | for COVID-19                     |              |            |               |
| 9             | —    |                | NPDB - 1 Provider                |              |            | 2.00          |
| 10            | —    |                | NPDB - 1 Provider                |              |            | 2.00          |

NOTES: Est. Freight \_\_\_\_\_ Est. Total Cost \_\_\_\_\_ TOTAL COST \_\_\_\_\_

charges made to credit card

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

|                            |
|----------------------------|
| Dept. Director             |
| Dir. Nursing               |
| Adm. Dir. Clinical Service |
| CFO                        |
| Administrator              |

2

MEMORIAL MEDICAL CENTER  
PURCHASE ORDER

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

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

Vendor Name: Citibank

Date: 4/5/2021

Vendor Address: \_\_\_\_\_

P.O. # \_\_\_\_\_

Vendor Phone #: \_\_\_\_\_

Account # \_\_\_\_\_

Vendor Fax #: \_\_\_\_\_

Initiated By: \_\_\_\_\_

| Date Required |      | Expense #      | Department                       | Deliver To |           |            | Form # 9401   |
|---------------|------|----------------|----------------------------------|------------|-----------|------------|---------------|
| Line No.      | Qty. | Catalog Number | Description                      |            | Unit Cost | Unit Meas. | Extended Cost |
| 1             | —    |                | AMA Credentialing X 2            |            |           |            | 93.62         |
| 2             |      |                | Initial Appt + Cont Mon Profiles |            |           |            |               |
| 3             |      |                | - will credit taxes              |            |           |            |               |
| 4             | —    |                | AMA Credentialing X 2            |            |           |            | 38.30         |
| 5             |      |                | Reappt Profiles - will           |            |           |            |               |
| 6             |      |                | credit taxes                     |            |           |            |               |
| 7             | —    |                | LSVT Global - Registration       |            |           |            | 580.00        |
| 8             |      |                | Amanda Griggs, OT                |            |           |            |               |
| 9             | —    |                | Online webcourse - Registration  |            |           |            | 220.00        |
| 10            |      |                | Donn Stringo                     |            |           |            |               |

Est. Freight \_\_\_\_\_ Est. Total Cost \_\_\_\_\_ TOTAL COST \_\_\_\_\_

NOTES:

Charges made to Mr Anglin's credit card

|            |        |                            |
|------------|--------|----------------------------|
| Contact:   | Date:  | Dept. Director             |
| Quoted By: |        | Dir. Nursing               |
| Buyer:     | E.T.A. | Adm. Dir. Clinical Service |
|            |        | CFO                        |
|            |        | Administrator              |

# MEMORIAL MEDICAL CENTER PURCHASE ORDER

③

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

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

Vendor Name: Citibank

Date: 4/5/2021

Vendor Address: \_\_\_\_\_

P.O. # \_\_\_\_\_

Vendor Phone #: \_\_\_\_\_

Account # \_\_\_\_\_

Vendor Fax #: \_\_\_\_\_

Initiated By: \_\_\_\_\_

Form # 9401

| Date Required | Expense # | Department     | Deliver To                                                                                                   |           |            |               |
|---------------|-----------|----------------|--------------------------------------------------------------------------------------------------------------|-----------|------------|---------------|
| Line No.      | Qty       | Catalog Number | Description                                                                                                  | Unit Cost | Unit Meas. | Extended Cost |
| 1             |           | 894 * 00       | NARHC - Registration                                                                                         |           |            | 300.00        |
| 2             |           | 350 * 00       | Danette Bethany                                                                                              |           |            |               |
|               |           | 68 * 87        | 4/13 - 4/27/21                                                                                               |           |            |               |
| 3             |           | 2 * 00         | Sparklight - IT Services                                                                                     |           |            | 226.26        |
| 4             |           | 2 * 00         | for PT/Sleep Study                                                                                           |           |            |               |
| 5             |           | 93 * 62        | NPDB - 14 Renewals                                                                                           |           |            | 28.00         |
| 6             |           | 38 * 30        | Amazon - 3M Versaplo BT-WS Breathing Tube                                                                    |           |            | 116.89        |
| 7             |           | 580 * 00       | Amazon - Prince 180 Series 3 Lead Cable with 3 Port Connector for Heal Force 180, 180, B Heart Rate Monitors |           |            | 17.96         |
| 8             |           | 226 * 26       | Supply House - Two Position Actuator, Spring Return 120V - (1) @ 288.67                                      |           |            | 288.67        |
| 9             |           | 28 * 00        | Supply House - Two Position Actuator, Spring Return 120V - (5) @ 288.67                                      |           |            | 1443.35       |
| 10            |           | 66 * 89        |                                                                                                              |           |            |               |
|               |           | 67 * 96        |                                                                                                              |           |            |               |
|               |           | 288 * 67       |                                                                                                              |           |            |               |
|               |           | 1 * 443 * 35   |                                                                                                              |           |            |               |
|               |           | 4 * 669 * 92   |                                                                                                              |           |            |               |

NOTES: Est. Freight \_\_\_\_\_ Est. Total Cost \_\_\_\_\_ TOTAL COST \$4,669.92

*charges made to Mr Anglin's credit card*

|            |        |                                  |
|------------|--------|----------------------------------|
| Contact:   | Date:  | Dept. Director _____             |
| Quoted By: |        | Dir. Nursing _____               |
| Buyer:     | E.T.A. | Adm. Dir. Clinical Service _____ |
|            |        | CFO _____                        |
|            |        | Administrator <i>[Signature]</i> |

# Wire Transfer

UNTY OF CALHOUN TEXAS



## Wire Details

Transaction Number  
Recurring Frequency One-Time Payment  
Template Name CITI CARD PRGM - MMC  
Amount USD 4,669.92  
Debit Account \* CCA (MEMORIAL MEDICAL CENTER - OPERATING) - Prosperity Bank

Notify Initiator Options Pending Actions: Notify via EMAIL  
Pending Release: Notify via EMAIL  
System Events: Notify via EMAIL  
Complete - Unsuccessful: Notify via EMAIL  
Complete - Successful: Notify via EMAIL  
Early Action Taken: Notify via EMAIL  
Early Action Removed: Notify via EMAIL  
Expired: Notify via EMAIL

Payment Date 04/23/2021

## Originator Information

Originator Name COUNTY OF CALHOUN TEXAS  
Originator Address 1 202 S ANN STREET  
Originator Address 2 SUITE A  
Originator Address 3 PORT LAVACA, TX 77979

## Beneficiary / Payee Information

Name CBNA INCOMING SETTLEMENT  
ACCOUNT Beneficiary ID Type Account Number  
Beneficiary ID  
Address 1  
Address 2  
Address 3  
Beneficiary Country  
Contact Name  
Phone Number

## Beneficiary Bank Information

Name CITIBANK NA  
Beneficiary Bank ID Type Fed ABA  
Beneficiary Bank IC  
Address 1  
Address 2  
Address 3  
Intl Routing Number  
Beneficiary Bank Country

## Additional Reference Information

Purpose Of Payment CREDIT CARD PMT

Additional Information For  
Beneficiary

## Status History

| Timestamp                   | Status  | Initiator | Description   |
|-----------------------------|---------|-----------|---------------|
| Apr 16, 2021 9:48:02 AM CDT | Created | JA)       | Wire Created. |

**MCKESSON****STATEMENT**

As of: 04/09/2021

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: 04/10/2021As of: 04/09/2021 Page: 002  
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT  
Statement for information onlyCust: 632536 PLEASE CHECK ANY  
Date: 04/10/2021 ITEMS NOT PAID (✓)

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 2,082.52 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97  
08/07/2017If Paid By 04/13/2021,  
Pay This Amount:

2,040.88 USD

If Paid After 04/13/2021,  
Pay this Amount:

2,082.52 USD

Due If Paid On Time:  
USD

2,040.88

Disc lost if paid late:

41.64

Due If Paid Late:  
USD

2,082.52

19.31 +

700.32 +

889.07 +

432.18 +

2,040.88

CK # 500188

APPROVED

APR 12 2021

CASH ON HAND  
CASH ON HAND

For AR Inquiries please contact 800-867-0333

**MCKESSON****STATEMENT**

As of: 04/09/2021

Page: 001

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

Company: 8000

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

DC: 8115

Territory: 400

Customer: 190813  
Date: 04/10/2021As of: 04/09/2021 Page: 001  
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT  
Statement for information onlyCust: 190813 PLEASE CHECK ANY  
Date: 04/10/2021 ITEMS NOT PAID (✓)

| Billing<br>Date                                  | Due<br>Date | Receivable<br>Number | National Account<br>Order<br>Reference | Description | Cash<br>Discount | Amount<br>(gross) | P<br>F | Amount<br>(net) | P<br>F | Receivable<br>Number |  |
|--------------------------------------------------|-------------|----------------------|----------------------------------------|-------------|------------------|-------------------|--------|-----------------|--------|----------------------|--|
| Customer Number 190813 HEB PHCY 0434/MEM MED PHS |             |                      |                                        |             |                  |                   |        |                 |        |                      |  |
| 04/07/2021                                       | 04/13/2021  | 7262926056           | 2017028646                             | 115Invoice  | 0.39             | 19.70             |        | 19.31 ✓         |        | 7262926056           |  |

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

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

Subtotals: 19.70 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,004.55  
04/05/2021If Paid By 04/13/2021,  
Pay This Amount:

19.31 USD

If Paid After 04/13/2021,  
Pay this Amount:

19.70 USD

Due If Paid On Time:  
USD

19.31 ✓

Disc lost if paid late:

0.39

Due If Paid Late:  
USD

19.70

CK # 500188

APPROVED  
ON

APR 12 2021

COURTESY ADDRESS  
CALAMON COURT, TEXAS

For AR Inquiries please &lt;&gt; contact 800-867-0333

# McKESSON

# STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

As of: 04/09/2021

Page: 001

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

DC: 8115

Territory: 400

Customer: 256342

Date: 04/10/2021

As of: 04/09/2021  
Mail to:

Page: 001  
Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 256342  
Date: 04/10/2021

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 |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 14/05/2021                                      | 04/13/2021 | 7262440658        | 6521537                          | 115Invoice  | 3.48          | 174.09         |     | 170.61✓      |     | 7262440658        |  |
| 14/05/2021                                      | 04/13/2021 | 7262440661        | 6578543                          | 115Invoice  | 0.02          | 0.95           |     | 0.93✓        |     | 7262440661        |  |
| 14/05/2021                                      | 04/13/2021 | 7262440663        | 6631557                          | 115Invoice  | 0.97          | 48.74          |     | 47.77✓       |     | 7262440663        |  |
| 14/05/2021                                      | 04/13/2021 | 7262669261        | 00004022021TW                    | 115Invoice  | 0.98          | 49.06          |     | 48.08✓       |     | 7262669261        |  |
| 14/06/2021                                      | 04/13/2021 | 7262695897        | 6646709                          | 115Invoice  | 0.02          | 0.95           |     | 0.93✓        |     | 7262695897        |  |
| 14/06/2021                                      | 04/13/2021 | 7262874245        | 0004052021tw                     | 115Invoice  | 0.01          | 0.32           |     | 0.31✓        |     | 7262874245        |  |
| 14/07/2021                                      | 04/13/2021 | 7262924006        | 6736126                          | 115Invoice  | 1.06          | 53.18          |     | 52.12✓       |     | 7262924006        |  |
| 14/07/2021                                      | 04/13/2021 | 7262938103        | 0406210454-00                    | 115Invoice  |               | 0.12           |     | 0.12✓        |     | 7262938103        |  |
| 14/07/2021                                      | 04/13/2021 | 7263098385        | 859775749                        | 195Invoice  | 1.19          | 59.46          |     | 58.27✓       |     | 7263098385        |  |
| 14/08/2021                                      | 04/13/2021 | 7263158853        | 6755543                          | 115Invoice  | 1.42          | 70.93          |     | 69.51✓       |     | 7263158853        |  |
| 14/09/2021                                      | 04/13/2021 | 7263529922        | 860023827                        | 195Invoice  | 3.44          | 171.95         |     | 168.51✓      |     | 7263529922        |  |
| 14/09/2021                                      | 04/13/2021 | 7263543496        | 00004082021tw                    | 115Invoice  | 1.70          | 84.86          |     | 83.16✓       |     | 7263543496        |  |

\*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:

714.61 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,004.55  
14/05/2021

If Paid By 04/13/2021,  
Pay This Amount:

700.32 USD

If Paid After 04/13/2021,  
Pay this Amount:

714.61 USD

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

700.32

14.29

Due If Paid Late:  
USD

714.61

APPROVED  
BY

APR 12 2021

CHECK AMOUNT  
CALCULATED CORRECTLY

For AR Inquiries please <> contact 800-867-0333

**McKESSON****STATEMENT**

As of: 04/09/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 04/09/2021  
Mail to:Page: 001  
Comp: 8000CVS 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

Territory: 400

Customer: 835438  
Date: 04/10/2021AMT DUE REMITTED VIA ACH DEBIT  
Statement for information onlyCust: 835438 PLEASE CHECK ANY  
Date: 04/10/2021 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 |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 04/08/2021                                      | 04/13/2021 | 7263317029        | 1124081                          | 115Invoice  | 18.14         | 907.21         |     | 889.07 ✓     |     | 7263317029        |  |

PF 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: 907.21 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,004.55  
04/05/2021If Paid By 04/13/2021,  
Pay This Amount:

889.07 USD

If Paid After 04/13/2021,  
Pay this Amount:

907.21 USD

Due If Paid On Time:  
USD

889.07 ✓

Disc lost if paid late:

18.14

Due If Paid Late:  
USD

907.21

APPROVED  
BY

APR 12 2021

COMBANK AMERICA  
GARRESON COUNTY, TEXASFor AR Inquiries please <sup><></sup>contact 800-867-0333

**McKESSON****STATEMENT**

As of: 04/09/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 04/09/2021

Page: 001

Mail to:

Comp: 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

Territory: 400

Customer: 464450

Date: 04/10/2021

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 464450

PLEASE CHECK ANY

Date: 04/10/2021

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 |            |                   |                                  |             |               |                |     |              |     |                   |  |
| 04/07/2021                                       | 04/13/2021 | 7262918945        | 55x340998                        | 115Invoice  | 0.04          | 2.23           |     | 2.19 ✓       |     | 7262918945        |  |
| 04/08/2021                                       | 04/13/2021 | 7263150944        | 55x343185                        | 115Invoice  | 8.78          | 438.77         |     | 429.99 ✓     |     | 7263150944        |  |

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

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

Subtotals:

441.00 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 6,309.29  
03/29/2021If Paid By 04/13/2021,  
Pay This Amount:

432.18 USD

If Paid After 04/13/2021,  
Pay this Amount:

441.00 USD

Due If Paid On Time:

USD

432.18

Disc lost if paid late:

8.82

Due If Paid Late:

USD

441.00

APPROVED  
BY  
APR 12 2021  
COURTNEY ALLEN  
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

**Served By:**

ABC DC SUGARLAND  
12727 WEST AIRPORT BLVD  
SUGAR LAND TX 77478-6101

DEA: RA0289276  
866-451-9655

**Customer:**

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

**Remit To:**

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

**Customer Number**

0100135284 / 037028186

**Terms**

Monday - Friday Due in 7 days

**Summary**

|                  |        |
|------------------|--------|
| Not Yet Due:     | 0.00   |
| Current:         | 961.45 |
| Past Due:        | 0.00   |
| Total Due:       | 961.45 |
| Account Balance: | 961.45 |

**Account Activity**

| Document Date | Due Date   | Reference Number | Purchase Order Number | Document Type | Original Amount | Last Receipt | Amount Received | Balance  |
|---------------|------------|------------------|-----------------------|---------------|-----------------|--------------|-----------------|----------|
| 04-05-2021    | 04-16-2021 | 3051881653       | 160742                | Invoice       | 470.09          |              | 0.00            | 470.09 ✓ |
| 04-05-2021    | 04-16-2021 | 3051881654       | 160743                | Invoice       | 6.82            |              | 0.00            | 6.82 ✓   |
| 04-05-2021    | 04-16-2021 | 3051881655       | 160744                | Invoice       | 0.09            |              | 0.00            | 0.09 ✓   |
| 04-05-2021    | 04-16-2021 | 3051881656       | 160748                | Invoice       | 86.94           |              | 0.00            | 86.94 ✓  |
| 04-05-2021    | 04-16-2021 | 3051909426       | 160796                | Invoice       | 19.10           |              | 0.00            | 19.10 ✓  |
| 04-06-2021    | 04-16-2021 | 3052007151       | 160805                | Invoice       | 349.40          |              | 0.00            | 349.40 ✓ |
| 04-07-2021    | 04-16-2021 | 3052144216       | 160814                | Invoice       | 29.01           |              | 0.00            | 29.01 ✓  |

| Current | 1-15 Days | 16-30 Days | 31-60 Days | 61-90 Days | 91-120 Days | Over 120 Days |
|---------|-----------|------------|------------|------------|-------------|---------------|
| 961.45  | 0.00      | 0.00       | 0.00       | 0.00       | 0.00        | 0.00          |

**Thank You for Your Payment**

| Date       | Amount     |
|------------|------------|
| 04-09-2021 | (1,666.79) |

**Reminders**

| Due Date          | Amount        |
|-------------------|---------------|
| 04-16-2021        | 961.45 ✓      |
| <b>Total Due:</b> | <b>961.45</b> |

APPROVED

APR 12 2021

CREDIT ADVISORY  
CALIFORNIA SOCIETY, INC.

CK # 500189



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

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

|                                                                                                                                                                       | ####  | ENTER:                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------|
| <input type="checkbox"/> "ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"                                                                                               | ###   | <input type="text"/>                        |
| <input type="checkbox"/> "ENTER YOUR 4-DIGIT PIN"                                                                                                                     |       | <input type="text"/>                        |
| <input type="checkbox"/> "MAKE A PAYMENT, PRESS 1"                                                                                                                    |       | <input type="text" value="1"/>              |
| <input type="checkbox"/> "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"                                                                                           | ★     | <input type="text" value="941"/> #          |
| <input type="checkbox"/> "IF FEDERAL TAX DEPOSIT ENTER 1"                                                                                                             |       | <input type="text" value="1"/>              |
| <input type="checkbox"/> "ENTER 2-DIGIT TAX FILING YEAR"                                                                                                              | ★     | <input type="text" value="21"/>             |
| <input type="checkbox"/> "ENTER 2-DIGIT TAX FILING ENDING MONTH"                                                                                                      | ★     | <input type="text" value="06"/>             |
| 1ST QTR - 03 (MARCH) - Jan, Feb, Mar<br>2ND QTR - 06 (JUNE) - Apr, May, June<br>3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept<br>4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec |       |                                             |
| <input type="checkbox"/> "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"                                                                                           | ★     | <input type="text" value="\$ 98,118.35"/> # |
| "1 TO CONFIRM"                                                                                                                                                        |       | <input type="text" value="1"/>              |
| "ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"                                                                                                                             | 0     | <input type="text" value="\$ 51,232.74"/> # |
| "ENTER W/CENTS AMOUNT OF MEDICARE"                                                                                                                                    |       | <input type="text" value="\$ 11,982.10"/> # |
| "ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"                                                                                                                         |       | <input type="text" value="\$ 34,903.51"/> # |
|                                                                                                                                                                       | CHECK | <input type="text" value="\$ -"/>           |
| <input type="checkbox"/> "6-DIGIT SETTLEMENT DATE"                                                                                                                    | ★     | <input type="text"/>                        |
| "1 TO CONFIRM"                                                                                                                                                        |       | <input type="text" value="1"/>              |
| <input type="checkbox"/> ACKNOWLEDGEMENT NUMBER                                                                                                                       |       | <input type="text"/>                        |
| CALLED IN BY:                                                                                                                                                         |       | <input type="text"/>                        |
| CALLED IN DATE:                                                                                                                                                       |       | <input type="text"/>                        |
| CALLED IN TIME:                                                                                                                                                       |       | <input type="text"/>                        |

Run Date: 04/13/21  
Time: 13:21

MEMORIAL MEDICAL CENTER  
Payroll Register ( Bi-Weekly )  
Pay Period 03/26/21 - 04/08/21 Run# 1

Page 118  
P2REG

Final Summary

| Pay Code Summary |                           |         |    |    | Deductions Summary |    |    |           |                                                |
|------------------|---------------------------|---------|----|----|--------------------|----|----|-----------|------------------------------------------------|
| PayCd            | Description               | Hrs     | OT | SH | WE                 | HC | CB | Gross     | Code Amount                                    |
| 1                | REGULAR PAY-S1            | 9686.50 | N  | N  | N                  |    |    | 192733.93 | A/R 635.00 A/R2 50.00 A/R3                     |
| 1                | REGULAR PAY-S1            | 1848.75 | N  | N  | N                  | N  |    | 79567.27  | ADVANC AWARDS BOOTS                            |
| 1                | REGULAR PAY-S1            | 198.75  | N  | N  | Y                  |    |    | 6099.05   | CAFE H CAFE-1 CAFE-2                           |
| 1                | REGULAR PAY-S1            | 400.00  | Y  | N  | N                  |    |    | 11028.66  | CAFE-3 CAFE-4 CAFE-5                           |
| 1                | REGULAR PAY-S1            | 3.75    | Y  | N  | N                  | N  |    | 130.71    | CAFE-C CAFE-D 1736.11 CAFE-F                   |
| 2                | REGULAR PAY-S2            | 2378.75 | N  | N  | N                  |    |    | 55814.84  | CAFE-H 21074.63 CAFE-I CAFE-L                  |
| 2                | REGULAR PAY-S2            | 145.75  | N  | N  | Y                  |    |    | 5331.89   | CAFE-P CANCER CHILD 443.08                     |
| 2                | REGULAR PAY-S2            | 193.75  | Y  | N  | N                  |    |    | 6316.99   | CLINIC 170.00 COMBIN 434.57 CREDUN             |
| 2                | REGULAR PAY-S2            | 1.00    | Y  | N  | N                  | N  |    | 26.78     | DD ADV DENTAL DEP-LF                           |
| 3                | REGULAR PAY-S3            | 1333.00 | N  | N  | N                  |    |    | 35539.12  | DIS-LF EAT EATCSH                              |
| 3                | REGULAR PAY-S3            | 104.00  | N  | N  | Y                  |    |    | 3946.98   | FEDTAX 34903.51 FICA-M 5991.05 FICA-O 25616.37 |
| 3                | REGULAR PAY-S3            | 110.75  | Y  | N  | N                  |    |    | 3907.98   | FIRSTC FLEX S 3807.98 FLX FE                   |
| C                | CALL PAY                  | 2678.00 | N  | 1  | N                  | N  |    | 5356.00   | FORT D FUTA GIFT S 195.39                      |
| D                | DOUBLE TIME               | 20.50   | N  | 1  | N                  | N  |    | 1377.48   | GRANT GRP-IN GTL                               |
| D                | DOUBLE TIME               | 30.75   | N  | 2  | N                  | N  |    | 2118.43   | HOSP-I ID TFT LEAF                             |
| D                | DOUBLE TIME               | 1.00    | N  | 3  | N                  | N  |    | 81.20     | LEGAL 280.32 MASA 872.50 MEALS 106.48          |
| D                | DOUBLE TIME               | 6.75    | Y  | 3  | N                  | N  |    | 822.15    | METVIS 890.59 MISC MISC/                       |
| E                | EXTRA WAGES               |         | N  | N  | N                  | N  |    | 466.75    | MMCSHR NATFML 1804.31 OTHER                    |
| E                | EXTRA WAGES               |         | N  | 1  | N                  | N  | N  | 1617.25   | BHI BHI*** PR FIN                              |
| F                | FUNERAL LEAVE             | 16.00   | N  | 1  | N                  | N  |    | 331.04    | RELAY REPAY SAMS                               |
| I                | INSERVICE                 | 15.25   | N  | 1  | N                  | N  |    | 381.53    | SCRUBS SIGNON ST-TX                            |
| I                | INSERVICE                 | 5.75    | Y  | 1  | N                  | N  |    | 223.47    | STONDF 790.86 STONE STONE2                     |
| J                | JURY LEAVE                | 2.50    | N  | 1  | N                  | N  |    | 40.90     | STUDEN SUNACC 766.80 SUNILL 664.76             |
| K                | EXTENDED-ILLNESS-BANK     | 170.87  | N  | 1  | N                  | N  |    | 3420.11   | SUNIND 563.59 SUNLIF 742.12 SUNSTD 1179.36     |
| P                | PAID-TIME-OFF             | 1029.41 | N  | 1  | N                  | N  |    | 25974.75  | SUNVIS SURCHG 495.00 TSA-1                     |
| X                | CALL PAY 2                | 160.00  | N  | 1  | N                  | N  |    | 320.00    | TSA-2 TSA-C TSA-P                              |
| Y                | YMCA/CURVES               |         | N  | N  | N                  | N  |    | 90.00     | TSA-R 31065.58 TUITION UNIFOR 1385.49          |
| Z                | CALL PAY 3                | 48.00   | N  | 1  | N                  | N  |    | 144.00    | UW/HCS                                         |
| p                | PAID TIME OFF - PROBATION | 32.00   | N  | 1  | N                  | N  |    | 621.12    |                                                |
| v                | COVID-FFCRA               | 16.00   | N  | 1  | N                  | N  |    | 247.92    |                                                |

----- Grand Totals: 20637.53 ----- / Gross: 444078.30 Deductions: 136685.45 Net: 307392.85  
Checks Count:- FT 199 PT 10 Other 47 Female 224 Male 31 Credit OverAmt 6 ZeroNet Term Total: 255

*John*

Pay date:  
04/16/21

**MEMORIAL MEDICAL CENTER  
PROSPERITY BANK  
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- April 5, 2021 - April 11, 2021**

| <u>Date</u> | <u>Bank Description</u>                      | <u>MMC Notes</u>                    | <u>Amount</u>   | <u>CP</u>        |
|-------------|----------------------------------------------|-------------------------------------|-----------------|------------------|
| 4/5/2021    | PAY PLUS ACHTRANS 452579291 101000694276869  | - 3rd Party Payor Fee               | 14.47           | 14 * 47 +        |
| 4/5/2021    | MERCHANT BANKCD FEE 971160913887 91000018718 | - Credit Card Processing Fee        | 192.84          | 78 * 81 +        |
| 4/5/2021    | MERCHANT BANKCD FEE 971160910883 91000018718 | - Credit Card Processing Fee        | 9.95            | 38 * 63 +        |
| 4/5/2021    | MERCHANT BANKCD DISCOUNT 971160910883 910000 | - Credit Card Processing Fee        | 19.95           | 20 * 15 +        |
| 4/5/2021    | MERCHANT BANKCD DISCOUNT 971160913887 910000 | - Credit Card Processing Fee        | 219.83          | 29 * 41 +        |
| 4/5/2021    | MERCHANT BANKCD INTERCHNG 971160913887 91000 | - Credit Card Processing Fee        | 128.2           | 181 * 47 *       |
| 4/5/2021    | FDGL LEASE PYMT 052-1479214-000 410001268751 | - Credit Card Machine Lease Expense | 40.02           | Credit Card Fees |
| 4/5/2021    | FDGL LEASE PYMT 052-1479213-000 410001268751 | - Credit Card Machine Lease Expense | 43.26           | 192 * 84 +       |
| 4/5/2021    | FDGL LEASE PYMT 052-1479468-000 410001268752 | - Credit Card Machine Lease Expense | 69.24           | 9 * 95 +         |
| 4/5/2021    | FDGL LEASE PYMT 052-1601830-000 410001269048 | - Credit Card Machine Lease Expense | 32.45           | 19 * 95 +        |
| 4/6/2021    | PAY PLUS ACHTRANS 452579291 101000695305406  | - 3rd Party Payor Fee               | 78.81           | 219 * 83 +       |
| 4/6/2021    | MCKESSON DRUG AUTO ACH ACH04535002 910000167 | - 340B Drug Program Expense         | 2004.55 *       | 128 * 20 +       |
| 4/7/2021    | PAY PLUS ACHTRANS 452579291 101000696366594  | - 3rd Party Payor Fee               | 38.63           | 40 * 02 +        |
| 4/8/2021    | PAY PLUS ACHTRANS 452579291 101000697202468  | - 3rd Party Payor Fee               | 20.15           | 43 * 26 +        |
| 4/9/2021    | PAY PLUS ACHTRANS 452579291 101000697912488  | - 3rd Party Payor Fee               | 29.41           | 69 * 24 +        |
| 4/9/2021    | AMERISOURCE BERG PAYMENTS 0100007768 2100002 | - 340B Drug Program Expense         | 1666.79 *       | 32 * 45 +        |
|             |                                              |                                     | <u>4,608.55</u> | 755 * 74 *       |

*Jason Anglin*

Jason Anglin, CEO  
Memorial Medical Center

April 12, 2021

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

| <u>Date</u> | <u>Description</u> |
|-------------|--------------------|
|             | 4 * 608 * 55 +     |
|             | 2 * 004 * 55 -     |
|             | 1 * 688 * 79 -     |
|             | 937 * 21 *         |

Jason Anglin, CEO  
Memorial Medical Center

\* Approved 04-07-21 CC

\* Approved 1,556.79 on 04/07/21 CC.

MMC is unaware of what the 110.00 difference is. Could be a transaction that hit after the statement was produced. Will be

receiving a new statement on 4/19/21.

April 12, 2021

937 \* 21 +  
937 \* 21 -  
0 \* 00 \*

4/8/2021

tmp\_\_cw5report4877654443845814346.html

**RECEIVED**

04/08/2021

10:29

**APR 08 2021**

## MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Vendor#

11816

**Coffman County Auditor**

Vendor Name

ASHFORD GARDENS ✓

Class

Pay Code

| Invoice# | Comment    | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross     | Discount | No-Pay | Net         |
|----------|------------|------------|------------|--------|----------|-----|-----------|----------|--------|-------------|
| 040521   | 04/08/2021 | 04/05/2021 | 04/29/2021 |        |          |     | 12,797.12 | 0.00     | 0.00   | 12,797.12 ✓ |

UHC QUIPP 1,2,3

Vendor Totals:

11816

Number

Name

ASHFORD GARDEN

Gross

12,797.12

Discount

0.00

No-Pay

0.00

Net

12,797.12

## Report Summary

Grand Totals:

Gross

12,797.12

Discount

0.00

No-Pay

0.00

Net

12,797.12

**APPROVED****APR 08 2021**

ck#

190016

**COFFMAN COUNTY AUDITOR**  
**CARROLLTON, TEXAS**

**RECEIVED**04/08/2021 **APR 08 2021**

## MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap\_open\_invoice.template

10:31

Dates Through:

Calhoun County Auditor

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        |
|----------|---------------------------------------------------------|------------|------------|--------|----------|-----|----------|----------|--------|------------|
| 032921   | 03/31/2021                                              | 03/29/2021 | 04/29/2021 |        |          |     | 5,194.00 | 0.00     | 0.00   | 5,194.00 ✓ |
|          | TRANSFER Nt insurance pymt deposited into mme operating |            |            |        |          |     |          |          |        |            |
| 033121   | 03/31/2021                                              | 03/31/2021 | 04/29/2021 |        |          |     | 650.00   | 0.00     | 0.00   | 650.00 ✓   |
|          | TRANSFER Nt insurance pymt deposited into mme operating |            |            |        |          |     |          |          |        |            |
| 040521   | 04/08/2021                                              | 04/05/2021 | 04/29/2021 |        |          |     | 5,011.68 | 0.00     | 0.00   | 5,011.68 ✓ |
|          | UHC QUIPP 1,2,3                                         |            |            |        |          |     |          |          |        |            |

| Vendor Totals: | Number | Name            | Gross     | Discount | No-Pay | Net       |
|----------------|--------|-----------------|-----------|----------|--------|-----------|
| 11828          |        | SOLERA WEST HOI | 10,855.68 | 0.00     | 0.00   | 10,855.68 |

## Report Summary

| Grand Totals: | Gross     | Discount | No-Pay | Net       |
|---------------|-----------|----------|--------|-----------|
|               | 10,855.68 | 0.00     | 0.00   | 10,855.68 |

**APPROVED**  
KT**APR 08 2021**

CK#

190022

GORDON ANDERSON  
CALHOUN COUNTY, TEXAS

**RECEIVED**

04/08/2021

10:30

**APR 08 2021**

## MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Vendor#

Vendor Name

Class

Pay Code

11820

**Calhoun County Auditor**

FORTBEND HEALTHCARE CENTE

| Invoice# | Comment    | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross    | Discount | No-Pay | Net      |
|----------|------------|------------|------------|--------|----------|-----|----------|----------|--------|----------|
| 040521   | 04/08/2021 | 04/05/2021 | 04/29/2021 |        |          |     | 5,116.87 | 0.00     | 0.00   | 5,116.87 |

UHC QUIPP 1,2,3

| Vendor Totals: | Number | Name           | Gross    | Discount | No-Pay | Net      |
|----------------|--------|----------------|----------|----------|--------|----------|
| 11820          |        | FORTBEND HEALT | 5,116.87 | 0.00     | 0.00   | 5,116.87 |

## Report Summary

| Grand Totals: | Gross    | Discount | No-Pay | Net      |
|---------------|----------|----------|--------|----------|
|               | 5,116.87 | 0.00     | 0.00   | 5,116.87 |

**APPROVED****APR 08 2021**

CK#

190019

**COMPTON ASSOCIATES**  
**CALHOUN COUNTY, TEXAS**

**RECEIVED**

04/08/2021

10:30

**APR 08 2021****Calhoun County Auditor**

Vendor#

11832

Vendor Name

BROADMOOR AT CREEKSIDE PAF

Class

Pay Code

## MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap\_open\_invoice.template

Dates Through:

| Invoice# | Comment         | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross    | Discount | No-Pay | Net        |
|----------|-----------------|------------|------------|--------|----------|-----|----------|----------|--------|------------|
| 032921A  | 03/31/2021      | 03/29/2021 | 04/29/2021 |        |          |     | 5,194.00 | 0.00     | 0.00   | 5,194.00 ✓ |
|          | TRANSFER        |            |            |        |          |     |          |          |        |            |
| 032921   | 03/31/2021      | 03/29/2021 | 04/29/2021 |        |          |     | 5,008.50 | 0.00     | 0.00   | 5,008.50 ✓ |
|          | TRANSFER        |            |            |        |          |     |          |          |        |            |
| 033121   | 03/31/2021      | 03/31/2021 | 04/29/2021 |        |          |     | 3,010.00 | 0.00     | 0.00   | 3,010.00 ✓ |
|          | TRANSFER        |            |            |        |          |     |          |          |        |            |
| 033121A  | 03/31/2021      | 03/31/2021 | 04/29/2021 |        |          |     | 3,072.75 | 0.00     | 0.00   | 3,072.75 ✓ |
|          | TRANSFER        |            |            |        |          |     |          |          |        |            |
| 040521   | 04/08/2021      | 04/05/2021 | 04/29/2021 |        |          |     | 5,295.36 | 0.00     | 0.00   | 5,295.36 ✓ |
|          | UHC QUIPP 1,2,3 |            |            |        |          |     |          |          |        |            |

| Vendor Totals: | Number | Name           | Gross     | Discount | No-Pay | Net       |
|----------------|--------|----------------|-----------|----------|--------|-----------|
| 11832          |        | BROADMOOR AT C | 21,580.61 | 0.00     | 0.00   | 21,580.61 |

## Report Summary

| Grand Totals: | Gross     | Discount | No-Pay | Net       |
|---------------|-----------|----------|--------|-----------|
|               | 21,580.61 | 0.00     | 0.00   | 21,580.61 |

**APPROVED**

4/8

**APR 08 2021**

Ck#

190018

**COPIES AVAILABLE  
CALHOUN COUNTY, TEXAS**

04/08/2021

10:31

**RECEIVED****APR 08 2021**

Vendor#

11824

Vendor Name

THE CRESCENT

Class

Pay Code

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap\_open\_invoice.template

Dates Through:

| Invoice# | Comment    | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross    | Discount | No-Pay | Net      |
|----------|------------|------------|------------|--------|----------|-----|----------|----------|--------|----------|
| 040521   | 04/08/2021 | 04/05/2021 | 04/29/2021 |        |          |     | 4,255.20 | 0.00     | 0.00   | 4,255.20 |

UHC QUIPP 1,2,3

Vendor Totals:

11824

Number

Name

THE CRESCENT

Gross

4,255.20

Discount

0.00

No-Pay

0.00

Net

4,255.20

Report Summary

Grand Totals:

Gross

4,255.20

Discount

0.00

No-Pay

0.00

Net

4,255.20

**APPROVED****APR 08 2021****CORREY ATTORNEY**  
**CALHOUN COUNTY, TEXAS**

CK#

190023

04/08/2021 **APR 08 2021**

MEMORIAL MEDICAL CENTER

0

10:30

AP Open Invoice List

ap\_open\_invoice.template

**Calhoun County Auditor**

Dates Through:

Vendor#

Vendor Name

Class

Pay Code

11836

GOLDENCREEK HEALTHCARE

| Invoice# | Comment         | Tran Dt                                        | Inv Dt     | Due Dt | Check Dt | Pay | Gross     | Discount | No-Pay | Net         |
|----------|-----------------|------------------------------------------------|------------|--------|----------|-----|-----------|----------|--------|-------------|
| 031621A  | 03/31/2021      | 03/16/2021                                     | 04/29/2021 |        |          |     | 21,826.93 | 0.00     | 0.00   | 21,826.93 ✓ |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 031621   | 03/31/2021      | 03/16/2021                                     | 04/29/2021 |        |          |     | 4,336.64  | 0.00     | 0.00   | 4,336.64 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032621   | 03/31/2021      | 03/26/2021                                     | 04/29/2021 |        |          |     | 2,773.14  | 0.00     | 0.00   | 2,773.14 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032921   | 03/31/2021      | 03/29/2021                                     | 04/29/2021 |        |          |     | 5,641.02  | 0.00     | 0.00   | 5,641.02 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033021   | 03/31/2021      | 03/30/2021                                     | 04/29/2021 |        |          |     | 39,497.32 | 0.00     | 0.00   | 39,497.32 ✓ |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121   | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 4,277.14  | 0.00     | 0.00   | 4,277.14 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121A  | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 2,195.00  | 0.00     | 0.00   | 2,195.00 ✓  |
|          | TRANSFER        | belongs to Tuscany                             |            |        |          |     |           |          |        |             |
| 033121C  | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 381.28    | 0.00     | 0.00   | 381.28 ✓    |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121B  | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 3,344.00  | 0.00     | 0.00   | 3,344.00 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 040521   | 04/08/2021      | 04/05/2021                                     | 04/29/2021 |        |          |     | 8,516.54  | 0.00     | 0.00   | 8,516.54 ✓  |
|          | UHC QUIPP 1,2,3 |                                                |            |        |          |     |           |          |        |             |

| Vendor Totals: | Number | Name           | Gross     | Discount | No-Pay | Net       |
|----------------|--------|----------------|-----------|----------|--------|-----------|
| 11836          |        | GOLDENCREEK HE | 92,789.01 | 0.00     | 0.00   | 92,789.01 |

## Report Summary

| Grand Totals: | Gross     | Discount | No-Pay | Net       |
|---------------|-----------|----------|--------|-----------|
|               | 92,789.01 | 0.00     | 0.00   | 92,789.01 |

< 2195.00 >  
\$ 90,594.01

92,789.01

2,195.00

90,594.01

**APPROVED**  
4/8/21**APR 08 2021**

CK #

190020

**CLERK/ AUDITOR**  
CALHOUN COUNTY, TEXAS

04/08/2021

## MEMORIAL MEDICAL CENTER

0

10:30

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Vendor#

Vendor Name

Class

Pay Code

12696

GULF POINTE PLAZA

| Invoice# | Comment         | Tran Dt                                        | Inv Dt     | Due Dt | Check Dt | Pay | Gross     | Discount | No-Pay | Net         |
|----------|-----------------|------------------------------------------------|------------|--------|----------|-----|-----------|----------|--------|-------------|
| 031721   | 03/31/2021      | 03/17/2021                                     | 04/29/2021 |        |          |     | 1,059.36  | 0.00     | 0.00   | 1,059.36 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032421   | 03/31/2021      | 03/24/2021                                     | 04/29/2021 |        |          |     | 31.98     | 0.00     | 0.00   | 31.98 ✓     |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032421A  | 03/31/2021      | 03/24/2021                                     | 04/29/2021 |        |          |     | 4,080.00  | 0.00     | 0.00   | 4,080.00 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032521   | 03/31/2021      | 03/25/2021                                     | 04/29/2021 |        |          |     | 26.65     | 0.00     | 0.00   | 26.65 ✓     |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032521A  | 03/31/2021      | 03/25/2021                                     | 04/29/2021 |        |          |     | 2,040.50  | 0.00     | 0.00   | 2,040.50 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032621A  | 03/31/2021      | 03/26/2021                                     | 04/29/2021 |        |          |     | 389.85    | 0.00     | 0.00   | 389.85 ✓    |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032621   | 03/31/2021      | 03/26/2021                                     | 04/29/2021 |        |          |     | 786.87    | 0.00     | 0.00   | 786.87 ✓    |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 032921   | 03/31/2021      | 03/29/2021                                     | 04/29/2021 |        |          |     | 7,618.80  | 0.00     | 0.00   | 7,618.80 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033021   | 03/31/2021      | 03/30/2021                                     | 04/29/2021 |        |          |     | 23,189.55 | 0.00     | 0.00   | 23,189.55 ✓ |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121C  | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 421.20    | 0.00     | 0.00   | 421.20 ✓    |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121A  | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 11,424.00 | 0.00     | 0.00   | 11,424.00 ✓ |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121   | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 4,452.00  | 0.00     | 0.00   | 4,452.00 ✓  |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121B  | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 351.92    | 0.00     | 0.00   | 351.92 ✓    |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 033121D  | 03/31/2021      | 03/31/2021                                     | 04/29/2021 |        |          |     | 760.09    | 0.00     | 0.00   | 760.09 ✓    |
|          | TRANSFER        | NH insurance pymt deposited into mme operating |            |        |          |     |           |          |        |             |
| 040521   | 04/08/2021      | 04/05/2021                                     | 04/29/2021 |        |          |     | 5,043.33  | 0.00     | 0.00   | 5,043.33 ✓  |
|          | UHC QUIPP 1,2,3 |                                                |            |        |          |     |           |          |        |             |

| Vendor Totals: | Number | Name              | Gross     | Discount | No-Pay | Net       |
|----------------|--------|-------------------|-----------|----------|--------|-----------|
| 12696          |        | GULF POINTE PLAZA | 61,676.10 | 0.00     | 0.00   | 61,676.10 |

Report Summary:

| Grand Totals: | Gross     | Discount | No-Pay | Net       |
|---------------|-----------|----------|--------|-----------|
|               | 61,676.10 | 0.00     | 0.00   | 61,676.10 |

APPROVED

APR 08 2021

GULF POINTE PLAZA  
CALLAHAN BOBBY, JAMES

CKH

190021

**RECEIVED**

04/08/2021

## MEMORIAL MEDICAL CENTER

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10:31

APR 08 2021

AP Open Invoice List

ap\_open\_invoice.template

Dates Through:

Jefferson County Auditor

Vendor#

Vendor Name

Class

Pay Code

13004

TUSCANY VILLAGE ✓

| Invoice# | Comment    | Tran Dt    | Inv Dt     | Due Dt | Check Dt | Pay | Gross     | Discount | No-Pay | Net                                            |
|----------|------------|------------|------------|--------|----------|-----|-----------|----------|--------|------------------------------------------------|
| 031121   | 03/31/2021 | 03/11/2021 | 04/29/2021 |        |          |     | 4,390.00  | 0.00     | 0.00   | 4,390.00 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031221   | 03/31/2021 | 03/12/2021 | 04/29/2021 |        |          |     | 1,584.00  | 0.00     | 0.00   | 1,584.00 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031521A  | 03/31/2021 | 03/15/2021 | 04/29/2021 |        |          |     | 1,113.00  | 0.00     | 0.00   | 1,113.00 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031521   | 03/31/2021 | 03/15/2021 | 04/29/2021 |        |          |     | 1,342.62  | 0.00     | 0.00   | 1,342.62 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031621A  | 03/31/2021 | 03/16/2021 | 04/29/2021 |        |          |     | 10,621.52 | 0.00     | 0.00   | 10,621.52 ✓                                    |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031621   | 03/31/2021 | 03/16/2021 | 04/29/2021 |        |          |     | 3,436.20  | 0.00     | 0.00   | 3,436.20 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031721A  | 03/31/2021 | 03/17/2021 | 04/29/2021 |        |          |     | 6,132.18  | 0.00     | 0.00   | 6,132.18 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031721   | 03/31/2021 | 03/17/2021 | 04/29/2021 |        |          |     | 3,169.24  | 0.00     | 0.00   | 3,169.24 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031821   | 03/31/2021 | 03/18/2021 | 04/29/2021 |        |          |     | 1,516.13  | 0.00     | 0.00   | 1,516.13 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 031921   | 03/31/2021 | 03/19/2021 | 04/29/2021 |        |          |     | 82.31     | 0.00     | 0.00   | 82.31 ✓                                        |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 032221A  | 03/31/2021 | 03/22/2021 | 04/29/2021 |        |          |     | 2,459.36  | 0.00     | 0.00   | 2,459.36 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 032221   | 03/31/2021 | 03/22/2021 | 04/29/2021 |        |          |     | 369.82    | 0.00     | 0.00   | 369.82 ✓                                       |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 032321   | 03/31/2021 | 03/23/2021 | 04/29/2021 |        |          |     | 131.08    | 0.00     | 0.00   | 131.08 ✓                                       |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 032421   | 03/31/2021 | 03/24/2021 | 04/29/2021 |        |          |     | 1,111.53  | 0.00     | 0.00   | 1,111.53 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 032621   | 03/31/2021 | 03/26/2021 | 04/29/2021 |        |          |     | 17,649.00 | 0.00     | 0.00   | 17,649.00 ✓                                    |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 032921A  | 03/31/2021 | 03/29/2021 | 04/29/2021 |        |          |     | 3,208.77  | 0.00     | 0.00   | 3,208.77 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 032921   | 03/31/2021 | 03/29/2021 | 04/29/2021 |        |          |     | 1,484.00  | 0.00     | 0.00   | 1,484.00 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 033021A  | 03/31/2021 | 03/30/2021 | 04/29/2021 |        |          |     | 1,082.95  | 0.00     | 0.00   | 1,082.95 ✓                                     |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 033021   | 03/31/2021 | 03/30/2021 | 04/29/2021 |        |          |     | 10,811.43 | 0.00     | 0.00   | 10,811.43 ✓                                    |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 033121   | 03/31/2021 | 03/31/2021 | 04/29/2021 |        |          |     | 11,796.41 | 0.00     | 0.00   | 11,796.41 ✓                                    |
|          | TRANSFER   |            |            |        |          |     |           |          |        | NH insurance pymt deposited into mme operating |
| 040521   | 04/08/2021 | 04/05/2021 | 04/29/2021 |        |          |     | 7,501.76  | 0.00     | 0.00   | 7,501.76 ✓                                     |
|          |            |            |            |        |          |     |           |          |        | UHC QUIPP 1,2,3                                |

| Vendor Totals: | Number | Name            | Gross     | Discount | No-Pay | Net       |
|----------------|--------|-----------------|-----------|----------|--------|-----------|
| 13004          |        | TUSCANY VILLAGE | 90,993.31 | 0.00     | 0.00   | 90,993.31 |

## Report Summary

| Grand Totals: | Gross     | Discount              | No-Pay | Net              |
|---------------|-----------|-----------------------|--------|------------------|
|               | 90,993.31 | 0.00                  | 0.00   | 90,993.31        |
|               |           | + Add (i)             |        |                  |
|               |           | NH insurance transfer |        | + 2145.00        |
|               |           |                       |        | <u>93,138.31</u> |
|               | 90,993.31 |                       |        |                  |
|               | 2,145.00  |                       |        |                  |
|               | 93,138.31 |                       |        |                  |
|               |           | CK#                   |        |                  |
|               |           | 190025                |        |                  |

APR 08 2021

APR 08 2021

JEFFERSON COUNTY, MISSISSIPPI

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04/08/2021

10:29 APR 08 2021

## MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

ap\_open\_invoice.template

Vendor#

Vendor Name

Class

Pay Code

12792

Calhoun County Auditor

BETHANY SENIOR LIVING

| Invoice#       | Comment   | Tran Dt                                        | Inv Dt           | Due Dt     | Check Dt | Pay        | Gross     | Discount | No-Pay     | Net         |
|----------------|-----------|------------------------------------------------|------------------|------------|----------|------------|-----------|----------|------------|-------------|
| 031021A        |           | 03/31/2021                                     | 03/10/2021       | 04/29/2021 |          |            | 33,660.00 | 0.00     | 0.00       | 33,660.00 ✓ |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 031221         |           | 03/31/2021                                     | 03/12/2021       | 04/29/2021 |          |            | 8,870.18  | 0.00     | 0.00       | 8,870.18 ✓  |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 031621A        |           | 03/31/2021                                     | 03/16/2021       | 04/29/2021 |          |            | 16,957.00 | 0.00     | 0.00       | 16,957.00 ✓ |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 031821A        |           | 03/31/2021                                     | 03/18/2021       | 04/29/2021 |          |            | 209.00    | 0.00     | 0.00       | 209.00 ✓    |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 031821         |           | 03/31/2021                                     | 03/18/2021       | 04/29/2021 |          |            | 1,584.00  | 0.00     | 0.00       | 1,584.00 ✓  |
|                | TRANSFERS | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 031921         |           | 03/31/2021                                     | 03/19/2021       | 04/29/2021 |          |            | 142.50    | 0.00     | 0.00       | 142.50 ✓    |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 032221         |           | 03/31/2021                                     | 03/22/2021       | 04/29/2021 |          |            | 294.50    | 0.00     | 0.00       | 294.50 ✓    |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 032421         |           | 03/31/2021                                     | 03/24/2021       | 04/29/2021 |          |            | 670.54    | 0.00     | 0.00       | 670.54 ✓    |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 032621         |           | 03/31/2021                                     | 03/26/2021       | 04/29/2021 |          |            | 271.14    | 0.00     | 0.00       | 271.14 ✓    |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 032921         |           | 03/31/2021                                     | 03/29/2021       | 04/29/2021 |          |            | 5,081.25  | 0.00     | 0.00       | 5,081.25 ✓  |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 033021         |           | 03/31/2021                                     | 03/30/2021       | 04/29/2021 |          |            | 45,237.16 | 0.00     | 0.00       | 45,237.16 ✓ |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| 033121         |           | 03/31/2021                                     | 03/31/2021       | 04/29/2021 |          |            | 20,371.69 | 0.00     | 0.00       | 20,371.69 ✓ |
|                | TRANSFER  | NH insurance pymt deposited into mme operating |                  |            |          |            |           |          |            |             |
| Vendor Totals: |           | Number                                         | Name             |            |          | Gross      | Discount  | No-Pay   | Net        |             |
| 12792          |           |                                                | BETHANY SENIOR I |            |          | 133,348.96 | 0.00      | 0.00     | 133,348.96 |             |

## Report Summary

| Grand Totals: | Gross      | Discount | No-Pay | Net        |
|---------------|------------|----------|--------|------------|
|               | 133,348.96 | 0.00     | 0.00   | 133,348.96 |

APPROVED  
CIT

APR 08 2021

CKH

OFFICE AUDITOR  
CALHOUN COUNTY, TEXAS

190017

| Facility ID | Facility Name | Total UHC Deposits | MMC PORTION |             |            |                  |           | NH PORTION |           |
|-------------|---------------|--------------------|-------------|-------------|------------|------------------|-----------|------------|-----------|
|             |               |                    | QIPP/Comp1  | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4&Lapse | QIPP TI   |            |           |
| 4811        | Ashford       | 71,581.92          | 45,987.68   | 7,690.88    | 17,903.36  | -                | 58,784.80 | 12,797.12  | 71,581.92 |
| 105818      | Broadmoor     | 29,628.80          | 19,038.08   | 3,183.52    | 7,407.20   | -                | 24,333.44 | 5,295.36   | 29,628.80 |
| 105314      | Crescent      | 23,797.60          | 15,287.20   | 2,553.12    | 5,957.28   | -                | 19,542.40 | 4,255.20   | 23,797.60 |
| 4628        | Fort Bend     | 28,830.54          | 18,596.80   | 2,984.14    | 7,249.60   | -                | 23,713.67 | 5,116.87   | 28,830.54 |
| 105006      | Solera        | 28,052.80          | 18,029.44   | 2,994.40    | 7,028.96   | -                | 23,041.12 | 5,011.68   | 28,052.80 |
| 102540      | Golden Creek  | 47,679.42          | 30,646.35   | 5,094.92    | 11,938.15  | -                | 39,162.89 | 8,516.54   | 47,679.42 |
| 100806      | Gulf Pointe   | 28,215.25          | 18,128.60   | 3,026.80    | 7,059.85   | -                | 23,171.93 | 5,043.33   | 28,215.25 |
| 103462      | Tuscany       | 41,984.64          | 26,981.12   | 4,507.36    | 10,496.16  | -                | 34,482.88 | 7,501.76   | 41,984.64 |
|             | Bethany       | -                  |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
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|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  | -         | -          |           |
|             |               |                    |             |             |            |                  |           |            |           |

FUNDS DEPOSITED INTO MMC OPERATING. NEED TO ISSUE PAYMENTS TO NURSING HOME.  
MAKE CHECK REQUESTS FOR EACH NURSING HOME FOR HIGHLIGHTED YELLOW AMOUNTS



RUN DATE:04/12/21  
TIME:10:09

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
04/14/21 THRU 04/14/21

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BANK--CHECK-----

| CODE | NUMBER | DATE     | AMOUNT     | PAYEE                          |
|------|--------|----------|------------|--------------------------------|
| A/P  | 189947 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189948 | 04/14/21 | 635.56     | ACE HARDWARE 15521             |
| A/P  | 189949 | 04/14/21 | 10,482.00  | AD ENVIRONMENTAL SERVICES, LLC |
| A/P  | 189950 | 04/14/21 | 177.12     | AMERISOURCEBERGEN DRUG CORP    |
| A/P  | 189951 | 04/14/21 | 2,680.00   | AUREUS RADIOLOGY LLC           |
| A/P  | 189952 | 04/14/21 | 53.63      | AUTO PARTS & MACHINE CO.       |
| A/P  | 189953 | 04/14/21 | 1,059.46   | BAXTER HEALTHCARE              |
| A/P  | 189954 | 04/14/21 | 4,418.50   | BECKMAN COULTER INC            |
| A/P  | 189955 | 04/14/21 | 4,835.23   | BLUE CROSS BLUE SHIELD         |
| A/P  | 189956 | 04/14/21 | 1,428.00   | BUILDING KID STEPS             |
| A/P  | 189957 | 04/14/21 | 200.00     | CHRIS KOVAREK                  |
| A/P  | 189958 | 04/14/21 | 82.50      | CHRISTINA ZAPATA-ARROYO        |
| A/P  | 189959 | 04/14/21 | 1,116.30   | CLEARFLY                       |
| A/P  | 189960 | 04/14/21 | 180.00     | CLIA LABORATORY PROGRAM        |
| A/P  | 189961 | 04/14/21 | 22,997.87  | CLINICAL PATHOLOGY LABS        |
| A/P  | 189962 | 04/14/21 | 240.10     | COASTAL REFRIGERATION          |
| A/P  | 189963 | 04/14/21 | 854.92     | COMBINED INSURANCE             |
| A/P  | 189964 | 04/14/21 | 6,185.60   | COMMUNITY INFUSION SOLUTIONS   |
| A/P  | 189965 | 04/14/21 | 230.85     | CYRACOM LLC                    |
| A/P  | 189966 | 04/14/21 | 550.00     | DASHBOARD MD                   |
| A/P  | 189967 | 04/14/21 | 720.74     | DEWITT POTH & SON              |
| A/P  | 189968 | 04/14/21 | 144,187.77 | DISCOVERY MEDICAL NETWORK INC  |
| A/P  | 189969 | 04/14/21 | 1,237.94   | DOOR CONTROL SERVICES, INC     |
| A/P  | 189970 | 04/14/21 | 1,030.00   | DOWELL PEST CONTROL            |
| A/P  | 189971 | 04/14/21 | 2,576.03   | ELSEVIER INC.                  |
| A/P  | 189972 | 04/14/21 | 1,084.33   | EVOQUA WATER TECHNOLOGIES LLC  |
| A/P  | 189973 | 04/14/21 | 7.55       | FASTENAL COMPANY               |
| A/P  | 189974 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189975 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189976 | 04/14/21 | 21,656.66  | FISHER HEALTHCARE              |
| A/P  | 189977 | 04/14/21 | 1,861.30   | GRAINGER                       |
| A/P  | 189978 | 04/14/21 | 545.44     | GULF COAST PAPER COMPANY       |
| A/P  | 189979 | 04/14/21 | 3,000.00   | HEALTH SOLUTIONS DIETETICS     |
| A/P  | 189980 | 04/14/21 | 7,908.33   | HITACHI HEALTHCARE             |
| A/P  | 189981 | 04/14/21 | 489.00     | INTOXIMETERS INC               |
| A/P  | 189982 | 04/14/21 | 491.20     | INTRADO                        |
| A/P  | 189983 | 04/14/21 | 1,111.93   | LABCORP OF AMERICA HOLDINGS    |
| A/P  | 189984 | 04/14/21 | 149.00     | MARTIN PRINTING CO             |
| A/P  | 189985 | 04/14/21 | 245.92     | MCKESSON MEDICAL SURGICAL INC  |
| A/P  | 189986 | 04/14/21 | 7,593.74   | MEDICAL DATA SYSTEMS, INC.     |
| A/P  | 189987 | 04/14/21 | 691.43     | MEDIVATORS                     |
| A/P  | 189988 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189989 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189990 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189991 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189992 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189993 | 04/14/21 | 18,961.58  | MEDLINE INDUSTRIES INC         |
| A/P  | 189994 | 04/14/21 | 262.76     | MMC AUXILIARY GIFT SHOP        |
| A/P  | 189995 | 04/14/21 | .00        | VOIDED                         |
| A/P  | 189996 | 04/14/21 | 16,125.42  | MORRIS & DICKSON CO, LLC       |

RUN DATE:04/12/21  
TIME:10:09

MEMORIAL MEDICAL CENTER  
CHECK REGISTER  
04/14/21 THRU 04/14/21

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| CODE    | NUMBER | DATE     | AMOUNT     | PAYEE                          |
|---------|--------|----------|------------|--------------------------------|
| A/P     | 189997 | 04/14/21 | 3,903.25   | NATIONAL FARM LIFE INSURANCE   |
| A/P     | 189998 | 04/14/21 | 761.62     | ORTHO CLINICAL DIAGNOSTICS     |
| A/P     | 189999 | 04/14/21 | 1,100.00   | PATRICK OCHOA                  |
| A/P     | 190000 | 04/14/21 | .00        | VOIDED                         |
| A/P     | 190001 | 04/14/21 | 139.14     | POWER HARDWARE                 |
| A/P     | 190002 | 04/14/21 | 6,175.00   | PREMIER SLEEP DISORDERS CENTER |
| A/P     | 190003 | 04/14/21 | 325.00     | RANDY'S FLOOR COMPANY          |
| A/P     | 190004 | 04/14/21 | 2.84       | SERVICE SUPPLY OF VICTORIA INC |
| A/P     | 190005 | 04/14/21 | 185.63     | SPBS CLINICAL EQUIPMENT SRVC   |
| A/P     | 190006 | 04/14/21 | 840.00     | ST DAVIDS HEALTHCARE           |
| A/P     | 190007 | 04/14/21 | 431.42     | T-SYSTEM, INC                  |
| A/P     | 190008 | 04/14/21 | 6,175.00   | TEXAS A&M HEALTH SCIENCE CENT  |
| A/P     | 190009 | 04/14/21 | 4,231.72   | TEXAS ASSOCIATION OF COUNTIES  |
| A/P     | 190010 | 04/14/21 | 2,650.00   | THRIVEFUEL LLC                 |
| A/P     | 190011 | 04/14/21 | 31,462.37  | VICTORIA ANESTHESIOLOGY        |
| A/P     | 190012 | 04/14/21 | 1,999.00   | VITA PERSONA LLC               |
| A/P     | 190013 | 04/14/21 | 466.63     | WALMART COMMUNITY              |
| A/P     | 190014 | 04/14/21 | 14,404.35  | WERFEN USA LLC                 |
| A/P     | 190015 | 04/14/21 | 15.95      | YOUNG PLUMBING CO              |
| A/P     | 190016 | 04/14/21 | 12,797.12  | ASHFORD GARDENS                |
| A/P     | 190017 | 04/14/21 | 133,348.96 | BETHANY SENIOR LIVING          |
| A/P     | 190018 | 04/14/21 | 21,580.61  | BROADMOOR AT CREEKSIDE PARK    |
| A/P     | 190019 | 04/14/21 | 5,116.87   | FORTBEND HEALTHCARE CENTER     |
| A/P     | 190020 | 04/14/21 | 90,594.01  | GOLDENCREEK HEALTHCARE         |
| A/P     | 190021 | 04/14/21 | 61,676.10  | GULF POINTE PLAZA              |
| A/P     | 190022 | 04/14/21 | 10,855.68  | SOLERA WEST HOUSTON            |
| A/P     | 190023 | 04/14/21 | 4,255.20   | THE CRESCENT                   |
| A/P     | 190024 | 04/14/21 | .00        | VOIDED                         |
| A/P     | 190025 | 04/14/21 | 93,188.31  | TUSCANY VILLAGE                |
| A/P     | 190026 | 04/14/21 | 25.00      | AGUILAR EDNA MAE               |
| A/P     | 190027 | 04/14/21 | 40.39      | BAXTER CYNDI                   |
| A/P     | 190028 | 04/14/21 | 31.99      | BELL DORIS                     |
| A/P     | 190029 | 04/14/21 | 84.70      | MAHALITC JOE                   |
| A/P     | 190030 | 04/14/21 | 30.63      | MATSON JOSEPH                  |
| A/P     | 190031 | 04/14/21 | 14.00      | MATSON JOSEPH                  |
| A/P     | 190032 | 04/14/21 | 375.00     | NOVAK HERMAN                   |
| A/P     | 190033 | 04/14/21 | 239.05     | RODRIGUEZ DIANA E              |
| A/P     | 190034 | 04/14/21 | 20.00      | ROKYTA CAROLYN J               |
| A/P     | 190035 | 04/14/21 | 35.98      | WILSON DOROTHY                 |
| A/P     | 190036 | 04/14/21 | 237.08     | WILTSEY JODY                   |
| A/P     | 190037 | 04/14/21 | 509.52     | ZABODYN BRANDON                |
| TOTALS: |        |          | 800,670.83 |                                |

APR 14 2021

Memorial Medical Center  
Nursing Home UPL  
Weekly Cantex Transfer  
Prosperity Accounts  
4/12/2021

| 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 |
|----------------------------|----------------|----------------------------|--------------|-----------------|------------------|-----------------------------|------------------------------------------|
| <b>Ashford Gardens</b>     |                | 176,418.43 ✓               | 176,133.83 ✓ | 2,776.47 ✓      |                  | 3,061.07 ✓                  | -                                        |
|                            |                |                            |              |                 |                  | Bank Balance                | 3,061.07 ✓                               |
|                            |                |                            |              |                 |                  | Variance                    | 0.00                                     |
|                            |                |                            |              |                 |                  | Leave in Balance            | 100.00                                   |
|                            |                |                            |              |                 |                  | Januar Interest             | 46.15 ✓                                  |
|                            |                |                            |              |                 |                  | Feb Interest                | 91.84 ✓                                  |
|                            |                |                            |              |                 |                  | Mar Interest                | 46.61 ✓                                  |
|                            |                |                            |              |                 |                  | Adjust Balance/Transfer Amt | 2,776.47 ✓                               |
| <b>Broadmoor</b>           |                | 108,306.86 ✓               | 108,079.09 ✓ | 15,075.36 ✓     |                  | 15,303.13 ✓                 | 15,075.36                                |
|                            |                |                            |              |                 |                  | Bank Balance                | 15,303.13 ✓                              |
|                            |                |                            |              |                 |                  | Variance                    | -                                        |
|                            |                |                            |              |                 |                  | Leave in Balance            | 100.00                                   |
|                            |                |                            |              |                 |                  | Jan Interest                | 34.47 ✓                                  |
|                            |                |                            |              |                 |                  | Feb Interest                | 55.91 ✓                                  |
|                            |                |                            |              |                 |                  | Mar Interest                | 37.39 ✓                                  |
|                            |                |                            |              |                 |                  | Adjust Balance/Transfer Amt | 15,075.36 ✓                              |
| <b>Crescent</b>            |                | 77,697.31 ✓                | 77,487.64 ✓  | 14,967.75 ✓     |                  | 15,177.42 ✓                 | 14,967.75                                |
|                            |                |                            |              |                 |                  | Bank Balance                | 15,177.42 ✓                              |
|                            |                |                            |              |                 |                  | Variance                    | -                                        |
|                            |                |                            |              |                 |                  | Leave in Balance            | 100.00                                   |
|                            |                |                            |              |                 |                  | JAN INTEREST                | 30.40 ✓                                  |
|                            |                |                            |              |                 |                  | Feb Interest                | 45.26 ✓                                  |
|                            |                |                            |              |                 |                  | MAR INTEREST                | 34.01 ✓                                  |
|                            |                |                            |              |                 |                  | Adjust Balance/Transfer Amt | 14,967.75 ✓                              |
| <b>Fort Bend</b>           |                | 42,902.36 ✓                | 42,745.40 ✓  | 3,010.00 ✓      |                  | 3,166.96 ✓                  | <del>3,010.00</del><br>No Transfer       |
|                            |                |                            |              |                 |                  | Bank Balance                | 3,166.96 ✓                               |
|                            |                |                            |              |                 |                  | Variance                    | -                                        |
|                            |                |                            |              |                 |                  | Leave in Balance            | 100.00                                   |
|                            |                |                            |              |                 |                  | JAN INTEREST                | 18.96 ✓                                  |
|                            |                |                            |              |                 |                  | Feb Interest                | 26.00 ✓                                  |
|                            |                |                            |              |                 |                  | MAR INTEREST                | 12.00 ✓                                  |
|                            |                |                            |              |                 |                  | Adjust Balance/Transfer Amt | 3,010.00 ✓                               |
| <b>Solera at W Houston</b> |                | 3,228.73 ✓                 | 182,905.94 ✓ | 20,581.80 ✓     |                  | 20,904.59 ✓                 | 20,581.80                                |
|                            |                |                            |              |                 |                  | Bank Balance                | 20,904.59 ✓                              |
|                            |                |                            |              |                 |                  | Variance                    | -                                        |
|                            |                |                            |              |                 |                  | Leave in Balance            | 100.00                                   |
|                            |                |                            |              |                 |                  | JAN INTEREST                | 53.20 ✓                                  |
|                            |                |                            |              |                 |                  | FEB INTEREST                | 86.93 ✓                                  |
|                            |                |                            |              |                 |                  | MAR INTEREST                | 82.66 ✓                                  |
|                            |                |                            |              |                 |                  | Adjust Balance/Transfer Amt | 20,581.80 ✓                              |
| <b>TOTAL TRANSFERS</b>     |                |                            |              |                 |                  |                             | <del>59,634.91</del><br>60,624.91        |

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

Approved:  
Jason Anglin, CEO

4/12/2021

**Ashford Gardens**

4/5/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  
 4/6/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2  
 4/7/2021 CK 1120  
 4/7/2021 WIRE OUT ASHFORD HEALTH CARE CENTER LTD

| Transfer-Out | Transfer-In | MMC PORTION |             |            |                      |         | NH PORTION |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|------------|
|              |             | QJPP/Comp1  | QJPP/Comp 2 | QJPP/Comp3 | QJPP/Comp4<br>&Lapse | QJPP TI |            |
| -            | 2,117.39    | -           | -           | -          | -                    | -       | 2,117.39   |
| -            | 659.08      | -           | -           | -          | -                    | -       | 659.08     |
| 19,806.30    | -           | -           | -           | -          | -                    | -       | -          |
| 156,327.53   | -           | -           | -           | -          | -                    | -       | -          |
| 176,133.83   | 2,776.47    | -           | -           | -          | -                    | -       | 2,776.47   |

**Broadmoor**

4/5/2021 Deposit  
 4/5/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384  
 4/5/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  
 4/5/2021 HUMANA INS CO HCCLAIMPMT 390861 830000567097  
 4/7/2021 CK 82  
 4/7/2021 WIRE OUT CANTEX HEALTH CARE CENTERS III  
 4/8/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  
 4/9/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000

| Transfer-Out | Transfer-In | MMC PORTION |             |            |                      |         | NH PORTION |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|------------|
|              |             | QJPP/Comp1  | QJPP/Comp 2 | QJPP/Comp3 | QJPP/Comp4<br>&Lapse | QJPP TI |            |
| -            | 1,855.00    | -           | -           | -          | -                    | -       | 1,855.00   |
| -            | 416.00      | -           | -           | -          | -                    | -       | 416.00     |
| -            | 5,770.00    | -           | -           | -          | -                    | -       | 5,770.00   |
| -            | 2,053.95    | -           | -           | -          | -                    | -       | 2,053.95   |
| 8,198.64     | -           | -           | -           | -          | -                    | -       | -          |
| 99,880.45    | -           | -           | -           | -          | -                    | -       | -          |
| -            | 2,818.83    | -           | -           | -          | -                    | -       | 2,818.83   |
| -            | 2,161.58    | -           | -           | -          | -                    | -       | 2,161.58   |
| 108,079.09   | 15,075.36   | -           | -           | -          | -                    | -       | 15,075.36  |

**Crescent**

4/5/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384  
 4/7/2021 CK 115  
 4/7/2021 WIRE OUT CANTEX HEALTH CARE CENTERS III  
 4/8/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384  
 4/8/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  
 4/8/2021 NOVITAS SOLUTION HCCLAIMPMT 676323 420000105  
 4/9/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384

| Transfer-Out | Transfer-In | MMC PORTION |             |            |                      |         | NH PORTION |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|------------|
|              |             | QJPP/Comp1  | QJPP/Comp 2 | QJPP/Comp3 | QJPP/Comp4<br>&Lapse | QJPP TI |            |
| -            | 370.00      | -           | -           | -          | -                    | -       | 370.00     |
| 6,584.40     | -           | -           | -           | -          | -                    | -       | -          |
| 70,903.24    | -           | -           | -           | -          | -                    | -       | -          |
| -            | 9,180.00    | -           | -           | -          | -                    | -       | 9,180.00   |
| -            | 481.96      | -           | -           | -          | -                    | -       | 481.96     |
| -            | 275.79      | -           | -           | -          | -                    | -       | 275.79     |
| -            | 4,660.00    | -           | -           | -          | -                    | -       | 4,660.00   |
| 77,487.64    | 14,967.75   | -           | -           | -          | -                    | -       | 14,967.75  |

**Fort Bend**

4/7/2021 CK 112  
 4/7/2021 WIRE OUT CANTEX HEALTH CARE CENTERS III  
 4/8/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384

| Transfer-Out | Transfer-In | MMC PORTION |             |            |                      |         | NH PORTION |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|------------|
|              |             | QJPP/Comp1  | QJPP/Comp 2 | QJPP/Comp3 | QJPP/Comp4<br>&Lapse | QJPP TI |            |
| 7,990.30     | -           | -           | -           | -          | -                    | -       | -          |
| 34,755.10    | -           | -           | -           | -          | -                    | -       | -          |
| -            | 3,010.00    | -           | -           | -          | -                    | -       | 3,010.00   |
| 42,745.40    | 3,010.00    | -           | -           | -          | -                    | -       | 3,010.00   |

**Solera at West Houston**

4/5/2021 Deposit  
 4/5/2021 MANAGEANDNET1718 MNS PMNT 00000000002482 41  
 4/5/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  
 4/6/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000  
 4/7/2021 CK 1114  
 4/7/2021 WIRE OUT CANTEX HEALTH CARE CENTERS III  
 4/8/2021 MANAGEANDNET1718 MNS PMNT 00000000002482 41  
 4/8/2021 AARP Supplementa HCCLAIMPMT 746003411 124384  
 4/9/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384  
 4/9/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2  
 4/9/2021 AARP Supplementa HCCLAIMPMT 746003411 124384

| Transfer-Out | Transfer-In | MMC PORTION |             |            |                      |         | NH PORTION |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|------------|
|              |             | QJPP/Comp1  | QJPP/Comp 2 | QJPP/Comp3 | QJPP/Comp4<br>&Lapse | QJPP TI |            |
| -            | 4,302.00    | -           | -           | -          | -                    | -       | 4,302.00   |
| -            | 945.00      | -           | -           | -          | -                    | -       | 945.00     |
| -            | 2,430.67    | -           | -           | -          | -                    | -       | 2,430.67   |
| -            | 344.13      | -           | -           | -          | -                    | -       | 344.13     |
| 7,763.22     | -           | -           | -           | -          | -                    | -       | -          |
| 175,142.72   | -           | -           | -           | -          | -                    | -       | -          |
| -            | 315.00      | -           | -           | -          | -                    | -       | 315.00     |
| -            | 176.00      | -           | -           | -          | -                    | -       | 176.00     |
| -            | 6,970.00    | -           | -           | -          | -                    | -       | 6,970.00   |
| -            | 3,339.00    | -           | -           | -          | -                    | -       | 3,339.00   |
| -            | 1,760.00    | -           | -           | -          | -                    | -       | 1,760.00   |
| 182,905.94   | 20,581.80   | -           | -           | -          | -                    | -       | 20,581.80  |
| 587,351.90   | 56,411.38   | -           | -           | -          | -                    | -       | 56,411.38  |

TOTALS

## Quick View

Select Quick View Accounts

Account Number / Name

Account Type

Select Group

Groups

DDA

Data reported as of Apr 12, 2021 9

|                                                        |             |             |             |             |
|--------------------------------------------------------|-------------|-------------|-------------|-------------|
| <u>*4381</u>                                           |             |             |             |             |
| MEMORIAL MEDICAL<br>CENTER / NH ASHFORD                | \$3,061.07  | \$46,394.54 | \$3,061.07  | \$3,061.07  |
| <u>*4403</u>                                           |             |             |             |             |
| MEMORIAL MEDICAL<br>CENTER / NH<br>BROADMOOR           | \$15,303.13 | \$15,303.13 | \$15,303.13 | \$13,141.55 |
| <u>*4411</u>                                           |             |             |             |             |
| MEMORIAL MEDICAL<br>CENTER / NH CRESCENT               | \$15,177.42 | \$19,834.41 | \$15,177.42 | \$10,517.42 |
| <u>*4446</u>                                           |             |             |             |             |
| MEMORIAL MEDICAL<br>CENTER / NH FORT BEND              | \$3,166.96  | \$3,166.96  | \$3,166.96  | \$3,166.96  |
| <u>*4438</u>                                           |             |             |             |             |
| MEMORIAL MEDICAL<br>CENTER / SOLERA AT<br>WEST HOUSTON | \$20,904.59 | \$29,227.59 | \$20,904.59 | \$8,835.59  |

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Nexion Transfer  
 Prosperity Accounts  
 4/12/2021

| 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 |                | 48,033.81                  | ✓ 12,964.92  | ✓ 129,195.43 | ✓ -              | 164,264.32                  | 129,195.43                               |
|              |                |                            |              |              |                  | Bank Balance                | 164,264.32                               |
|              |                |                            |              |              |                  | Variance                    | ✓ -                                      |
|              |                |                            |              |              |                  | Leave in Balance            | 100.00                                   |
|              |                |                            |              |              |                  | Pending QIPP CK             | ✓ 34,832.34                              |
|              |                |                            |              |              |                  | JAN INTEREST                | ✓ 27.25                                  |
|              |                |                            |              |              |                  | FEB INTEREST                | ✓ 78.06                                  |
|              |                |                            |              |              |                  | MAR INTEREST                | ✓ 31.24                                  |
|              |                |                            |              |              |                  | Adjust Balance/Transfer Amt | 129,195.43                               |

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 4/12/2021

APPROVED  
 APR 12 2021  
 COURTNEY ANDERSON  
 CLERK OF COURT, TEXAS

**Golden Creek**

4/5/2021 Deposit  
 4/5/2021 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9  
 4/5/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2  
 4/6/2021 NOVITAS SOLUTION HCCLAIMPMT 676097 420000181  
 4/7/2021 WIRE OUT NEXION HEALTH AT GOLDEN CREEK  
 4/7/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2  
 4/7/2021 CIGNA HCCLAIMPMT 1588075964 91000010727975  
 4/9/2021 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9

|              |             | MMC PORTION |             |            |                      |         | NH      |            |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|---------|------------|
| Transfer-Out | Transfer-In | QIPP/Comp1  | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4&L<br>apse | QIPP TI | PORTION |            |
| -            | 81,702.47   |             |             |            |                      |         | -       | 81,702.47  |
| -            | 7,710.00    |             |             |            |                      |         | -       | 7,710.00   |
| -            | 3,491.01    |             |             |            |                      |         | -       | 3,491.01   |
| -            | 30,744.44   |             |             |            |                      |         | -       | 30,744.44  |
| 12,964.92    | -           |             |             |            |                      |         | -       | -          |
| -            | 4,574.60    |             |             |            |                      |         | -       | 4,574.60   |
| -            | 686.93      |             |             |            |                      |         | -       | 686.93     |
| -            | 285.98      |             |             |            |                      |         | -       | 285.98     |
| 12,964.92    | 129,195.43  | -           | -           | -          | -                    | -       | -       | 129,195.43 |

## Quick View

Select Quick View Accounts

Account Number / Name

Account Type

Search

All

Select Group

Groups

Add Group

DDA

Data reported as of Apr 12, 2021 9

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

|                                                             |              |              |              |              |
|-------------------------------------------------------------|--------------|--------------|--------------|--------------|
| 1454<br>MEMORIAL MEDICAL /<br>NH GOLDEN CREEK<br>HEALTHCARE | \$164,264.32 | \$171,066.38 | \$164,264.32 | \$163,978.34 |
|-------------------------------------------------------------|--------------|--------------|--------------|--------------|

Memorial Medical Center  
Nursing Home UPL  
Weekly HMG Transfer  
Prosperity Accounts  
4/12/2021

| Nursing Home                        | Account | Previous<br>Beginning<br>Balance | Transfer-Out | Transfer-In | Cks Cleared | Pending<br>Deposits         | Today's Beginning Balance | Amount to Be<br>Transferred to<br>Nursing Home |
|-------------------------------------|---------|----------------------------------|--------------|-------------|-------------|-----------------------------|---------------------------|------------------------------------------------|
| Gulf Pointe Plaza- Private Pay      |         | 25,566.74 ✓                      | -            | -           | -           | -                           | 25,566.74 ✓               | -                                              |
|                                     |         |                                  |              |             |             | Bank Balance                | 25,566.74 ✓               |                                                |
|                                     |         |                                  |              |             |             | Variance                    | -                         | NO TRANSFER                                    |
|                                     |         |                                  |              |             |             | Leave in Balance            | 100.00                    |                                                |
|                                     |         |                                  |              |             |             | SUPERIOR QIPP 1,2,3         | 20,610.06                 |                                                |
|                                     |         |                                  |              |             |             | JAN INTEREST                | 6.84 ✓                    |                                                |
|                                     |         |                                  |              |             |             | Feb Interest                | 28.55 ✓                   |                                                |
|                                     |         |                                  |              |             |             | MAR INTEREST                | 7.29 ✓                    |                                                |
|                                     |         |                                  |              |             |             | Adjust Balance/Transfer Amt | 4,814.00 ✓                |                                                |
| Gulf Pointe Plaza-Medicare/Medicaid |         | 7,122.37 ✓                       | 6,950.40 ✓   | 51,080.52 ✓ | -           | -                           | 51,252.49 ✓               | 51,080.52                                      |
|                                     |         |                                  |              |             |             | Bank Balance                | 51,252.49 ✓               |                                                |
|                                     |         |                                  |              |             |             | Variance                    | -                         |                                                |
|                                     |         |                                  |              |             |             | Leave in Balance            | 100.00                    |                                                |
|                                     |         |                                  |              |             |             | JAN INTEREST                | 12.66 ✓                   |                                                |
|                                     |         |                                  |              |             |             | Feb Interest                | 32.29 ✓                   |                                                |
|                                     |         |                                  |              |             |             | MAR INTEREST                | 27.02 ✓                   |                                                |
|                                     |         |                                  |              |             |             | Adjust Balance/Transfer Amt | 51,080.52                 |                                                |
|                                     |         |                                  |              |             |             | TOTAL TRANSFERS             | 51,080.52 ✓               |                                                |

Routing Information for Gulf Pointe Plaza:

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

Approved:  
Jason Anglin, CEO

4/12/2021

APPROVED  
BY  
APR 12 2021  
COUNTY ADMINISTRATOR  
GARRETT COUNTY, TEXAS

**Gulf Pointe Plaza-Private Pay**  
NO ACTIVITY

| Transfer-Out | Transfer-In | MMC PORTION |             |            |                      |         | NH<br>PORTION |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|---------------|
|              |             | QIPP/Comp1  | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4&<br>Lapse | QIPP TI |               |
| -            | -           | -           | -           | -          | -                    | -       | -             |

**Gulf Pointe Plaza-Medicare/Medicaid**

4/5/2021 Deposit  
4/7/2021 WIRE OUT HMG SERVICES, LLC  
4/7/2021 NORIDIAN J3A HCCLAIMPMT 675892 4200001996508

| Transfer-Out | Transfer-In | MMC PORTION |             |            |                      |         | NH<br>PORTION |
|--------------|-------------|-------------|-------------|------------|----------------------|---------|---------------|
|              |             | QIPP/Comp1  | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4&<br>Lapse | QIPP TI |               |
| -            | 39,564.24   | -           | -           | -          | -                    | -       | 39,564.24     |
| 6,950.40     | -           | -           | -           | -          | -                    | -       | -             |
| -            | 11,516.28   | -           | -           | -          | -                    | -       | 11,516.28     |
| 6,950.40     | 51,080.52   | -           | -           | -          | -                    | -       | 51,080.52     |
| 6,950.40     | 51,080.52   | -           | -           | -          | -                    | -       | 51,080.52     |

## Quick View

Select Quick View Accounts  
Account Number / Name

Account Type

Search

All

Select Group  
Groups

Add Group

DDA

Data reported as of Apr 12, 2021 9

| Account Number                                                | Current Balance | Available Balance | Collected Balance | Prior Day Balance |
|---------------------------------------------------------------|-----------------|-------------------|-------------------|-------------------|
|                                                               |                 |                   |                   |                   |
| *5441<br>MMC -NH- GULF POINTE<br>PLAZA -<br>MEDICARE/MEDICAID | \$51,252.49     | \$51,252.49       | \$51,252.49       | \$51,252.49       |
| *5433<br>MMC -NH- GULF POINTE<br>PLAZA - PRIVATE PAY          | \$25,566.74     | \$25,566.74       | \$25,566.74       | \$25,566.74       |

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Tuscany Transfer  
 Prosperity Accounts  
 4/12/2021

| 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 |
|-----------------------|----------------|----------------------------|--------------|-------------|-------------|-----------------------------|---------------------------|------------------------------------------|
| Tuscany Senior Living |                | 67,593.15                  | 67,493.15    | 90,910.57   | -           | -                           | 91,010.57                 | 90,910.57                                |
|                       |                |                            |              |             |             | Bank Balance                | 91,010.57                 |                                          |
|                       |                |                            |              |             |             | Variance                    | -                         |                                          |
|                       |                |                            |              |             |             | Leave in Balance            | 100.00                    |                                          |
|                       |                |                            |              |             |             | Pending QJPP Ck             | -                         |                                          |
|                       |                |                            |              |             |             | Adjust Balance/Transfer Amt | 90,910.57                 |                                          |

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 4/12/2021

APPROVED  
 ON

APR 12 2021

COUNTY ADDRESS  
 CALLEJON 393412, TEXAS

**Tuscany Senior Living**

4/5/2021 Deposit  
 4/7/2021 WIRE OUT LINBAR ENTERPRISES, LLC  
 4/7/2021 NOVITAS SOLUTION HCCLAIMPMT 676201 420000193

| <u>Transfer-Out</u> | <u>Transfer-In</u> | MMC PORTION |             |            |                      |         | NH PORTION |
|---------------------|--------------------|-------------|-------------|------------|----------------------|---------|------------|
|                     |                    | QIPP/Comp1  | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4<br>&Lapse | QIPP TI |            |
| -                   | 71,681.98          |             |             |            |                      | -       | 71,681.98  |
| 67,493.15           | -                  |             |             |            |                      | -       | -          |
| -                   | 19,228.59          |             |             |            |                      | -       | 19,228.59  |
|                     |                    |             |             |            |                      | -       | -          |
|                     |                    |             |             |            |                      | -       | -          |
| 67,493.15 ✓         | 90,910.57 ✓        | -           | -           | -          | -                    | -       | 90,910.57  |

Quick View

Select Quick View Accounts  
Account Number / Name

Account Type

Select Group  
Groups

DDA

Data reported as of Apr 12, 2021 9

| Account Number               | Current Balance | Available Balance | Collected Balance | Prior Day Balance |
|------------------------------|-----------------|-------------------|-------------------|-------------------|
| [REDACTED]                   |                 |                   |                   |                   |
| 3407 MMC -NH TUSCANY VILLAGE | \$91,010.57     | \$91,010.57       | \$91,010.57       | \$91,010.57       |

Memorial Medical Center  
 Nursing Home UPL  
 Weekly HSLTransfer  
 Prosperity Accounts  
 4/12/2021

| Nursing Home          | Account Number | Previous Beginning Balance | Transfer-Out | Transfer-In  | Cks Cleared | Pending Deposits | Today's Beginning Balance | Amount to Be Transferred to Nursing Home |
|-----------------------|----------------|----------------------------|--------------|--------------|-------------|------------------|---------------------------|------------------------------------------|
| Bethany Senior Living |                | 88,067.56 ✓                | 87,754.88 ✓  | 176,106.53 ✓ |             | -                | 176,419.21                | 176,106.53 ✓                             |
|                       |                |                            |              |              |             | Bank Balance     | 176,419.21                |                                          |
|                       |                |                            |              |              |             | Variance         | -                         |                                          |
|                       |                |                            |              |              |             | Leave in Balance | 100.00                    |                                          |

|                             |              |
|-----------------------------|--------------|
| JAN INTEREST                | 47.38 ✓      |
| Feb Interest                | 80.47 ✓      |
| MAR INTEREST                | 84.83 ✓      |
| Adjust Balance/Transfer Amt | 176,106.53 ✓ |

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 4/12/2021

APPROVED  
 BY

APR 12 2021

JOSEPH ANGLIN  
 CLERK OF COURT, TEXAS

**Bethany Senior Living**

|                                                       | Transfer-Out | Transfer-In | MMC PORTION |             |            |                       |         | NH PORTION |
|-------------------------------------------------------|--------------|-------------|-------------|-------------|------------|-----------------------|---------|------------|
|                                                       |              |             | QIPP/Comp1  | QIPP/Comp 2 | QIPP/Comp3 | QIPP/Comp4<br>& Lapse | QIPP TI |            |
| 4/5/2021 Deposit                                      | -            | 26,306.15   |             |             |            |                       | -       | 26,306.15  |
| 4/5/2021 Deposit                                      | -            | 2,086.63    |             |             |            |                       | -       | 2,086.63   |
| 4/5/2021 Deposit                                      | -            | 117,136.12  |             |             |            |                       | -       | 117,136.12 |
| 4/5/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2 | -            | 8,398.09    |             |             |            |                       | -       | 8,398.09   |
| 4/7/2021 WIRE OUT BETHANY SENIOR LIVING, LTD          | 87,754.88    | -           |             |             |            |                       | -       | -          |
| 4/7/2021 Deposit                                      | -            | 11,897.78   |             |             |            |                       | -       | 11,897.78  |
| 4/8/2021 Deposit                                      | -            | 3,315.39    |             |             |            |                       | -       | 3,315.39   |
| 4/9/2021 Deposit                                      | -            | 5,033.00    |             |             |            |                       | -       | 5,033.00   |
| 4/9/2021 HOSPICE OF SO TX VENDORS NF 91000018117104   | -            | 1,933.37    |             |             |            |                       | -       | 1,933.37   |
|                                                       | 87,754.88    | 176,106.53  | -           | -           | -          | -                     | -       | 176,106.53 |

## Quick View

Select Quick View Accounts

Account Number / Name

Account Type



Select Group

Groups

DDA

Data reported as of Apr 12, 2021 9

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

|                                           |              |              |              |              |
|-------------------------------------------|--------------|--------------|--------------|--------------|
| *5505<br>MMC -NH BETHANY<br>SENIOR LIVING | \$176,419.21 | \$176,419.21 | \$176,419.21 | \$169,452.84 |
|-------------------------------------------|--------------|--------------|--------------|--------------|