

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---April 21, 2021

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 425,948.35
TOTAL TRANSFERS BETWEEN FUNDS	\$ 66,166.94
TOTAL NURSING HOME UPL EXPENSES	\$ 921,566.78
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED April 21, 2021	\$ 1,413,682.07

APPROVED

APR 21 2021

**CALHOUN COUNTY
COMMISSIONERS COURT**

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---April 21,2021

PAYABLES AND PAYROLL

4/19/2021 Weekly Payables	276,164.21
4/15/2021 Patient Refunds	95.86
4/19/2021 McKesson-340B Prescription Expense	1,411.45
4/19/2021 Amerisource Bergen-340B Prescription Expense	637.92

Prosperity Electronic Bank Payments

4/12/2021 Credit Card & Lease Fees	7,452.28
4/19/2021 Sales Tax for March 2021	1,600.46
4/16/2021 TCDRS March Retirement	137,857.13
4/13/2021 Cleargage-Patient Financing Service	79.01
4/12-4/16/21 Pay Plus-Patient Claims Processing Fee	203.95
4/16/2021 ExpertPay- child support	446.08

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **425,948.35**

TRANSFER BETWEEN FUNDS-NURSING HOMES

4/15/2021 MMC Operating to Broadmoor-correction of NH insurance payment deposited into MMC Operating	11,193.00
4/15/2021 MMC Operating to Bethany Senior Living- correction of NH insurance payment deposited into MMC Operating	54,973.94

TOTAL TRANSFERS BETWEEN FUNDS \$ **66,166.94**

NURSING HOME UPL EXPENSES

4/19/2021 Nursing Home UPL-Cantex Transfer	361,806.76
4/19/2021 Nursing Home UPL-Nexion Transfer	100,319.79
4/19/2021 Nursing Home UPL-HMG Transfer	137,744.92
4/19/2021 Nursing Home UPL-Tuscany Transfer	98,794.90
4/19/2021 Nursing Home UPL-HSL Transfer	203,882.74

QIPP/INTEREST/RECOUP CHECKS TO MMC

4/19/2021 Ashford	7,389.49
4/19/2021 Broadmoor	2,655.42
4/19/2021 Crescent	2,178.33
4/19/2021 Fort Bend	3,018.64
4/19/2021 Solera	2,610.12

TRANSFER BETWEEN FUNDS TO MMC OPERATING

4/19/2021 Ashford-Interest Earned	184.60
4/19/2021 Broadmoor-Interest Earned	127.77
4/19/2021 Crescent-Interest Earned	109.67
4/19/2021 Fort Bend-Interest Earned	56.96
4/19/2021 Solera-Interest Earned	222.79
4/19/2021 Golden Creek-Interest Earned	136.55
4/19/2021 Gulf Pointe MM-Interest Earned	71.97
4/19/2021 Gulf Pointe PP-Interest Earned	42.68
4/19/2021 Bethany-Interest Earned	212.68

TOTAL NURSING HOME UPL EXPENSES \$ **921,566.78**

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

GRAND TOTAL DISBURSEMENTS APPROVED April 21, 2021 \$ **1,413,682.07**

RECEIVED

04/15/2021

13:39 APR 15 2021

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 05/05/2021

0
ap_open_invoice.templateVendor#
10950
*Lincoln County Auditor*Vendor Name
ACUTE CARE INC ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV145 ✓	03/31/2021	04/20/2021	04/30/2021				1,400.00	0.00	0.00	1,400.00 ✓

RFID

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10950		ACUTE CARE INC	1,400.00	0.00	0.00	1,400.00

Vendor#
R1200Vendor Name
ADT COMMERCIAL ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
139109991 ✓	04/13/2021	03/08/2021	04/02/2021				49.18	0.00	0.00	49.18 ✓

FIRE MONITORING

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
R1200		ADT COMMERCIAL	49.18	0.00	0.00	49.18

Vendor#
12532Vendor Name
ADVANCED PLUMBING ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4702 ✓	04/13/2021	01/29/2021	01/29/2021				244.00	0.00	0.00	244.00 ✓

WORK ON WATER HEATER

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
12532		ADVANCED PLUMB	244.00	0.00	0.00	244.00

Vendor#
A1680Vendor Name
AIRGAS USA, LLC - CENTRAL DIV M ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9978704057 ✓	04/14/2021	03/31/2021	04/25/2021				726.53	0.00	0.00	726.53 ✓

OXYGEN

9978706178 ✓	04/14/2021	03/31/2021	04/25/2021				48.33	0.00	0.00	48.33 ✓
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OXYGEN

9978704056 ✓	04/14/2021	03/31/2021	04/25/2021				510.42	0.00	0.00	510.42 ✓
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OXYGEN

9111502938 ✓	04/15/2021	03/29/2021	04/23/2021				265.92	0.00	0.00	265.92 ✓
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OXYGEN

9111606291 ✓	04/15/2021	03/31/2021	04/25/2021				2,316.23	0.00	0.00	2,316.23 ✓
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OXYGEN

9978933899 ✓	04/15/2021	04/01/2021	04/26/2021				113.07	0.00	0.00	113.07 ✓
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OXYGEN

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
A1680		AIRGAS USA, LLC -	3,980.50	0.00	0.00	3,980.50

Vendor#
10958Vendor Name
ALLYSON SWOPE ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
041321	04/13/2021	04/13/2021	04/13/2021				2,758.50	0.00	0.00	2,758.50 ✓

CONTRACT EMPLOYEE

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10958		ALLYSON SWOPE	2,758.50	0.00	0.00	2,758.50

Vendor#
A2218Vendor Name
AQUA BEVERAGE COMPANY ✓

Class

Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
125051 ✓	04/15/2021	02/28/2021	03/25/2021				40.99	0.00	0.00	40.99 ✓

SUPPLIES

130252 ✓	04/15/2021	03/31/2021	04/25/2021				12.49	0.00	0.00	12.49 ✓
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LAB

130255 ✓	04/15/2021	03/31/2021	04/25/2021				65.92	0.00	0.00	65.92 ✓
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SUPPLIES

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
A2218		AQUA BEVERAGE C	119.40	0.00	0.00	119.40

Vendor#

Vendor Name

Class

Pay Code

A2271

ARTHREX, INC ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
911468884	✓ 04/13/2021	01/26/2021	02/26/2021				1,757.00	0.00	0.00	1,757.00 ✓
	SUPPLIES									
911481005	✓ 04/13/2021	01/27/2021	02/27/2021				28,650.00	0.00	0.00	28,650.00 ✓
	ARTHREX400DRILLSAW&600DRILL									
911575367	✓ 04/13/2021	02/12/2021	03/12/2021				360.00	0.00	0.00	360.00 ✓
	SUPPLIES									
911482542	✓ 04/14/2021	01/27/2021	04/14/2021				475.00	0.00	0.00	475.00 ✓
911594498	✓ 04/14/2021	02/16/2021	03/03/2021				1,819.00	0.00	0.00	1,819.00 ✓
	SUPPLIES									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
A2271		ARTHREX, INC	33,061.00	0.00	0.00	33,061.00

Vendor#
B0435

Vendor Name

Class

Pay Code

BARD PERIPHERAL VASCULAR ✓ M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
82365490	✓ 04/14/2021	04/06/2021	04/14/2021				344.62	0.00	0.00	344.62 ✓
	SUPPLIES									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
B0435		BARD PERIPHERAL	344.62	0.00	0.00	344.62

Vendor#
B1150

Vendor Name

Class

Pay Code

BAXTER HEALTHCARE ✓ W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
70045545	✓ 04/13/2021	03/10/2021	04/04/2021				542.41	0.00	0.00	542.41 ✓
	INVENTORY									
70153582	✓ 04/13/2021	03/22/2021	04/16/2021				629.50	0.00	0.00	629.50 ✓
	LEASE									
70153395	✓ 04/13/2021	03/22/2021	04/16/2021				2,367.50	0.00	0.00	2,367.50 ✓
	LEASE									
70125217	✓ 04/14/2021	03/18/2021	04/12/2021				587.22	0.00	0.00	587.22 ✓
	SUPPLIES									
70150820	✓ 04/14/2021	03/22/2021	04/16/2021				41.43	0.00	0.00	41.43 ✓
	SUPPLIES									
70325967	✓ 04/14/2021	04/05/2021	04/30/2021				937.13	0.00	0.00	937.13 ✓
	SUPPLIES									
12246495	✓ 04/15/2021	03/27/2021	04/21/2021				8.88	0.00	0.00	8.88 ✓
	LATE FEE									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
B1150		BAXTER HEALTHCARE	5,114.07	0.00	0.00	5,114.07

Vendor#
13028

Vendor Name

Class

Pay Code

CAVALLO ENERGY TEXAS LLC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2108400147	✓ 04/13/2021	03/25/2021	04/26/2021				7.66	0.00	0.00	7.66 ✓
	5707	ENERGY BILL 167662								
2107800146	✓ 04/14/2021	03/19/2021	04/19/2021				17.31	0.00	0.00	17.31 ✓
	37710	ENERGY BILL 167653								
2107800146	✓ 04/14/2021	03/19/2021	04/19/2021				2,285.94	0.00	0.00	2,285.94 ✓
	37709	ENERGY BILL 167636								
2108100146	✓ 04/14/2021	03/22/2021	04/22/2021				1,063.97	0.00	0.00	1,063.97 ✓
	85972	ENERGY BILL 167647								

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
13028		CAVALLO ENERGY	3,374.88	0.00	0.00	3,374.88

Vendor#
C1992

Vendor Name

Class

Pay Code

CDW GOVERNMENT, INC. ✓ M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9734917	✓ 04/14/2021	03/23/2021	04/22/2021				80.12	0.00	0.00	80.12 ✓
	IMAGE UNIT LEXMARK									
9787535	✓ 04/14/2021	03/24/2021	04/23/2021				1,869.70	0.00	0.00	1,869.70 ✓
	SOFTWARE (Acrobat Pro / Adobe Photoshop)									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
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Vendor# 13264	C1992	CDW GOVERNMENT					1,949.82	0.00	0.00	1,949.82		
		Vendor Name					Class	Pay Code				
		CERVEY, LLC ✓										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	9827 ✓	04/14/2021	04/09/2021	05/04/2021				1,699.00	0.00	0.00	1,699.00 ✓	
		SPLIT BILL MONTHLY LICENSING										
	Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net		
	13264			CERVEY, LLC			1,699.00	0.00	0.00	1,699.00		
Vendor# 12768		Vendor Name					Class	Pay Code				
		CHEMAQUA ✓										
		Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	7291420 ✓	04/13/2021	03/10/2021	03/20/2021				500.00	0.00	0.00	500.00 ✓	
		WATER TREATMENT										
	Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net		
	12768			CHEMAQUA			500.00	0.00	0.00	500.00		
Vendor# C1600		Vendor Name					Class	Pay Code				
		CITIZENS MEDICAL CENTER ✓					W					
		Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
		030921	04/13/2021	03/09/2021	03/09/2021				15.00	0.00	0.00	15.00 ✓
			3 BLS CARDS									
		030921C	04/13/2021	03/09/2021	03/09/2021				20.00	0.00	0.00	20.00 ✓
			4 BLS CARDS									
		030921B	04/13/2021	03/09/2021	03/09/2021				25.00	0.00	0.00	25.00 ✓
			5 BLS CARDS									
		030921D	04/13/2021	03/09/2021	03/09/2021				25.00	0.00	0.00	25.00 ✓
			5 BLS CARDS									
		030921A	04/13/2021	03/09/2021	03/09/2021				20.00	0.00	0.00	20.00 ✓
			4 BLS CARDS									
		031021	04/13/2021	03/10/2021	03/10/2021				30.00	0.00	0.00	30.00 ✓
			6 BLS CARDS									
		031021A	04/13/2021	03/10/2021	03/10/2021				35.00	0.00	0.00	35.00 ✓
			7 BLS CARDS									
		031621	04/13/2021	03/16/2021	03/16/2021				30.00	0.00	0.00	30.00 ✓
			6 BLS CARDS									
		031921	04/13/2021	03/19/2021	03/19/2021				55.00	0.00	0.00	55.00 ✓
		6 BLS CARDS										
	Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net		
	C1600			CITIZENS MEDICAL			255.00	0.00	0.00	255.00		
Vendor# C1730		Vendor Name					Class	Pay Code				
		CITY OF PORT LAVACA ✓					W					
		Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	031821A	04/13/2021	03/18/2021	04/05/2021				53.78	0.00	0.00	53.78 ✓	
		WATER 121260.02										
	031821B	04/13/2021	03/18/2021	04/05/2021				2,975.09	0.00	0.00	2,975.09 ✓	
		WATER 12132000										
	031821	04/13/2021	03/18/2021	04/05/2021				25.68	0.00	0.00	25.68 ✓	
		WATER 12131500										
	Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net		
	C1730			CITY OF PORT LAV.			3,054.55	0.00	0.00	3,054.55		
Vendor# 11029		Vendor Name					Class	Pay Code				
		COASTAL REFRIGERATION ✓										
		Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	5113723 ✓	04/14/2021	02/01/2021	02/01/2021				453.50	0.00	0.00	453.50 ✓	
		ICE MACHINE KITCHEN REPAIR										
	Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net		
	11029			COASTAL REFRIGE ✓			453.50	0.00	0.00	453.50		
Vendor# 11126		Vendor Name					Class	Pay Code				
		COLA RESOURCES, INC. ✓										
		Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	1257 ✓	04/15/2021	04/08/2021	04/08/2021				249.00	0.00	0.00	249.00 ✓	
		RENEWAL										

Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
11126		COLA RESOURCES			249.00	0.00	0.00		249.00	
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
6392641 ✓	04/07/2021	04/06/2021	05/01/2021				10.90	0.00	0.00	10.90 ✓
SUPPLIES										
6392300 ✓	04/13/2021	03/29/2021	04/23/2021				327.03	0.00	0.00	327.03 ✓
SUPPLIES										
6397120 ✓	04/13/2021	03/29/2021	04/23/2021				371.20	0.00	0.00	371.20 ✓
SUPPLIES										
6393600 ✓	04/13/2021	03/31/2021	04/25/2021				182.37	0.00	0.00	182.37 ✓
SUPPLIES										
6393601 ✓	04/13/2021	04/01/2021	04/26/2021				5.18	0.00	0.00	5.18 ✓
SUPPLIES										
6399720 ✓	04/13/2021	04/06/2021	05/01/2021				24.95	0.00	0.00	24.95 ✓
SUPPLIES										
6399740 ✓	04/13/2021	04/06/2021	05/01/2021				91.06	0.00	0.00	91.06 ✓
SUPPLIES										
6400610 ✓	04/13/2021	04/07/2021	05/02/2021				30.05	0.00	0.00	30.05 ✓
SUPPLIES										
6403230 ✓	04/13/2021	04/08/2021	05/03/2021				44.28	0.00	0.00	44.28 ✓
SUPPLIES										
63697090 ✓	04/14/2021	04/05/2021	04/30/2021				68.91	0.00	0.00	68.91 ✓
SUPPLIES										
6400950 ✓	04/14/2021	04/07/2021	05/02/2021				407.52	0.00	0.00	407.52 ✓
SUPPLIES										
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
10368		DEWITT POTH & SC			1,563.45	0.00	0.00		1,563.45	
Vendor#	Vendor Name				Class	Pay Code				
11011	DIAMOND HEALTHCARE CORP ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
IN20054530 ✓	04/15/2021	04/01/2021	04/26/2021				31,144.58	0.00	0.00	31,144.58 ✓
BEV HEALTH										
IN20054531 ✓	04/15/2021	04/01/2021	04/26/2021				19,166.67	0.00	0.00	19,166.67 ✓
CPR										
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
11011		DIAMOND HEALTHC			50,311.25	0.00	0.00		50,311.25	
Vendor#	Vendor Name				Class	Pay Code				
C2510	EVIDENT ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
A2104051376 ✓	04/14/2021	04/05/2021	04/30/2021				17,863.00	0.00	0.00	17,863.00 ✓
SUPPORT										
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
C2510		EVIDENT			17,863.00	0.00	0.00		17,863.00	
Vendor#	Vendor Name				Class	Pay Code				
F1050	FASTENAL COMPANY ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
TX90T23443 ✓	04/13/2021	03/08/2021	04/07/2021				41.07	0.00	0.00	41.07 ✓
SUPPLIES										
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
F1050		FASTENAL COMPAI			41.07	0.00	0.00		41.07	
Vendor#	Vendor Name				Class	Pay Code				
F1400	FISHER HEALTHCARE ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6505436 ✓	04/15/2021	03/11/2021	04/05/2021				593.77	0.00	0.00	593.77 ✓
SUPPLIES										
6998080 ✓	04/15/2021	03/16/2021	04/10/2021				661.63	0.00	0.00	661.63 ✓
SUPPLIES										
Vendor Totals:		Number	Name		Gross	Discount	No-Pay		Net	
F1400		FISHER HEALTHCA			1,255.40	0.00	0.00		1,255.40	

Vendor#	Vendor Name	Class	Pay Code							
11183	FRONTIER ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
040221	04/14/2021	04/02/2021	04/26/2021				1,180.39	0.00	0.00	1,180.39 ✓
PHONES 1222165										
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
11183		FRONTIER					1,180.39	0.00	0.00	1,180.39
Vendor#	Vendor Name	Class	Pay Code							
12636	FUSION CLOUD SERVICES, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
28112772	04/15/2021 ✓	03/16/2021	04/15/2021				1,102.83	0.00	0.00	1,102.83 ✓
PHONES										
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
12636		FUSION CLOUD SE					1,102.83	0.00	0.00	1,102.83
Vendor#	Vendor Name	Class	Pay Code							
12404	GE PRECISION HEALTHCARE, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6001816114	04/06/2021 ✓	04/01/2021	05/01/2021				86.67	0.00	0.00	86.67 ✓
MAINT CONTRACT										
6001816113	04/06/2021 ✓	04/01/2021	05/01/2021				3,588.58	0.00	0.00	3,588.58 ✓
MAINT CONTRACT										
6001816335	04/06/2021 ✓	04/01/2021	05/01/2021				868.16	0.00	0.00	868.16 ✓
MAINT CONTRACT										
6001816034	04/06/2021 ✓	04/01/2021	05/01/2021				680.00	0.00	0.00	680.00 ✓
MAINT CONTRACT										
6001816035	04/06/2021 ✓	04/01/2021	05/01/2021				572.33	0.00	0.00	572.33 ✓
MAINT CONTRACT										
6001816158	04/06/2021 ✓	04/01/2021	05/01/2021				5,665.83	0.00	0.00	5,665.83 ✓
MAINT CONTRACT										
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
12404		GE PRECISION HEA					11,461.57	0.00	0.00	11,461.57
Vendor#	Vendor Name	Class	Pay Code							
G1001	GETINGE USA ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6950026639	01/18/2020 ✓	06/23/2019	05/01/2021				-130.81	0.00	0.00	-130.81 ✓
CREDIT										
6991551519	04/14/2021 ✓	03/01/2021	03/01/2021				2,051.73	0.00	0.00	2,051.73 ✓
SUPPLIES										
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
G1001		GETINGE USA					1,920.92	0.00	0.00	1,920.92
Vendor#	Vendor Name	Class	Pay Code							
G1210	GULF COAST PAPER COMPANY ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2005438	03/17/2021 ✓	02/22/2021	05/01/2021				-2,232.00	0.00	0.00	-2,232.00 ✓
CREDIT										
2023368	03/31/2021 ✓	03/30/2021	04/29/2021				1,137.34	0.00	0.00	1,137.34 ✓
SUPPLIES										
2024254	03/31/2021 ✓	03/31/2021	04/30/2021				830.84	0.00	0.00	830.84 ✓
SUPPLIES										
2026572	04/14/2021 ✓	04/06/2021	05/05/2021				555.10	0.00	0.00	555.10 ✓
SUPPLIES										
2026490	04/14/2021 ✓	04/14/2021	05/05/2021				52.12	0.00	0.00	52.12 ✓
SUPPLIES										
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
G1210		GULF COAST PAPE					343.40	0.00	0.00	343.40
Vendor#	Vendor Name	Class	Pay Code							
10334	HEALTH CARE LOGISTICS INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
307954022	04/14/2021 ✓	03/26/2021	04/20/2021				112.54	0.00	0.00	112.54 ✓
SUPPLIES										
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net

	10334	HEALTH CARE LOG	112.54	0.00	0.00	112.54
Vendor#		Vendor Name	Class		Pay Code	
10804		HEALTHCARE CODING & CONSUL	✓			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
10768	✓ 04/14/2021	03/31/2021	04/30/2021			
		CODING SERVICES				
Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
10804		HEALTHCARE COD	210.30	0.00	0.00	210.30
Vendor#		Vendor Name	Class		Pay Code	
11552		HEALTHCARE FINANCIAL SERVI	✓			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
100444816	✓ 03/31/2021	03/27/2021	05/01/2021			
		PHONE STERLIZER GEM PREM 4K				
Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11552		HEALTHCARE FINA	4,610.52	0.00	0.00	4,610.52
Vendor#		Vendor Name	Class		Pay Code	
H0031		HEB CREDIT RECEIVABLES DEPT:	✓			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
711061	✓ 04/15/2021	02/25/2021	04/25/2021			
		SUPPLIES				
046193	✓ 04/15/2021	02/28/2021	04/25/2021			
		SUPPLIES				
461698	✓ 04/15/2021	03/01/2021	04/25/2021			
		SUPPLIES				
022319	✓ 04/15/2021	03/02/2021	04/25/2021			
		SUPPLIES				
254405	✓ 04/15/2021	03/03/2021	04/25/2021			
		SUPPLIES				
231654	✓ 04/15/2021	03/06/2021	04/25/2021			
		SUPPLIES				
548877	✓ 04/15/2021	03/07/2021	04/25/2021			
		SUPPLIES				
150281	✓ 04/15/2021	03/08/2021	04/25/2021			
		SUPPLIES				
545208	✓ 04/15/2021	03/09/2021	04/25/2021			
		SUPPLIES				
393691	✓ 04/15/2021	03/10/2021	04/25/2021			
		SUPPLIES				
926410	✓ 04/15/2021	03/11/2021	04/25/2021			
		SUPPLIES				
018497	✓ 04/15/2021	03/12/2021	04/25/2021			
		SUPPLIES				
256008	✓ 04/15/2021	03/13/2021	04/25/2021			
		SUPPLIES				
876855	✓ 04/15/2021	03/18/2021	04/25/2021			
		SUPPLIES				
197111	✓ 04/15/2021	03/20/2021	04/25/2021			
		SUPPLIES				
572411	✓ 04/15/2021	03/20/2021	04/25/2021			
		SUPPLIES				
476438	✓ 04/15/2021	03/22/2021	04/25/2021			
		SUPPLIES				
155992	✓ 04/15/2021	03/22/2021	04/25/2021			
		SUPPLIES				
515172	✓ 04/15/2021	03/23/2021	04/25/2021			
		SUPPLIES				
596068	✓ 04/15/2021	03/23/2021	04/25/2021			
		SUPPLIES				
327732	✓ 04/15/2021	03/24/2021	04/25/2021			
		SUPPLIES				
973750	✓ 04/15/2021	03/24/2021	04/25/2021			

SUPPLIES										
151952	✓	04/15/2021	03/26/2021	04/25/2021			27.32	0.00	0.00	27.32 ✓
SUPPLIES										
194136	✓	04/15/2021	03/28/2021	04/25/2021			23.22	0.00	0.00	23.22 ✓
SUPPLIES										
900001	✓	04/15/2021	03/28/2021	04/25/2021			65.20	0.00	0.00	65.20 ✓
SUPPLIES										
974886	✓	04/15/2021	03/29/2021	04/25/2021			42.24	0.00	0.00	42.24 ✓
SUPPLIES										
894586	✓	04/15/2021	03/30/2021	04/25/2021			45.93	0.00	0.00	45.93 ✓
SUPPLIES										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
H0416	H0031		HEB CREDIT RECEI			935.29	0.00	0.00	935.29	
		Vendor Name	HOLOGIC INC ✓		Class		Pay Code			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9664355	✓	04/14/2021	04/02/2021	04/14/2021			472.50	0.00	0.00	472.50 ✓
SUPPLIES										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
10922	H0416		HOLOGIC INC			472.50	0.00	0.00	472.50	
		Vendor Name	HUNTER PHARMACY SERVICES ✓		Class		Pay Code			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4337	✓	03/31/2021	03/31/2021	04/20/2021			15,013.66	0.00	0.00	15,013.66 ✓
PRO FEES										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
12932	10922		HUNTER PHARMAC			15,013.66	0.00	0.00	15,013.66	
		Vendor Name	INTRADO ✓		Class		Pay Code			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV0023418	✓	04/14/2021	03/31/2021	04/30/2021			602.84	0.00	0.00	602.84 ✓
HOUSE CALLS										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
11200	12932		INTRADO			602.84	0.00	0.00	602.84	
		Vendor Name	IRON MOUNTAIN ✓		Class		Pay Code			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
DMMV833	✓	03/29/2021	03/31/2021	04/30/2021			3,397.96	0.00	0.00	3,397.96 ✓
SHRED SERVICE										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
11108	11200		IRON MOUNTAIN			3,397.96	0.00	0.00	3,397.96	
		Vendor Name	ITERSOURCE CORPORATION ✓		Class		Pay Code			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
711329	✓	04/13/2021	04/01/2021	04/01/2021			250.00	0.00	0.00	250.00 ✓
SUPPORT SERVICES										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
K1049	11108		ITERSOURCE CORI			250.00	0.00	0.00	250.00	
		Vendor Name	KENTEC MEDICAL INC ✓		Class		Pay Code			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1102614	✓	04/14/2021	03/17/2021	04/14/2021			37.10	0.00	0.00	37.10 ✓
SUPPLIES										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	
12832	K1049		KENTEC MEDICAL I			37.10	0.00	0.00	37.10	
		Vendor Name	KRISTI BOYD - sales tax included		Class		Pay Code			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
041221		04/13/2021	04/12/2021	04/12/2021		559.10	589.19	0.00	0.00	589.19 559.10
CONTINUING ED										
Vendor#	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net	

	12832	KRISTI BOYD		589.19	559.00	0.00	0.00	599.19	559.00	
Vendor#	11600	Vendor Name		Class		Pay Code				
		LEGAL SHIELD - remove per Melissa								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
041521	04/14/2021	04/15/2021	04/15/2021				575.25	0.00	0.00	575.25
PAYROLL DED										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
11600		LEGAL SHIELD				575.25	0.00	0.00	575.25	
Vendor#	11796	Vendor Name		Class		Pay Code				
		LUBY'S FUDDRUCKERS RESTAUR								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV0000372	03/31/2021	03/31/2021	04/30/2021				20,836.60	0.00	0.00	20,836.60
FOOD SUPPLIES										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
11796		LUBY'S FUDDRUCK				20,836.60	0.00	0.00	20,836.60	
Vendor#	10972	Vendor Name		Class		Pay Code				
		M G TRUST								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
401221	04/13/2021	04/12/2021	04/12/2021				790.86	0.00	0.00	790.86
PAYROLL DED										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
10972		M G TRUST				790.86	0.00	0.00	790.86	
Vendor#	M1950	Vendor Name		Class		Pay Code				
		MARTIN PRINTING CO		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
76925	04/06/2021	04/01/2021	05/01/2021				51.25	0.00	0.00	51.25
APPT CARDS										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
M1950		MARTIN PRINTING				51.25	0.00	0.00	51.25	
Vendor#	11612	Vendor Name		Class		Pay Code				
		MASA GLOBAL BUILDING - remove per Melissa								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
895666MKM	04/14/2021	02/01/2021	02/01/2021				1,656.00	0.00	0.00	1,656.00
INSURANCE										
908430MKM	04/14/2021	03/01/2021	03/01/2021				1,777.00	0.00	0.00	1,777.00
INSURANCE										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
11612		MASA GLOBAL BUI				3,433.00	0.00	0.00	3,433.00	
Vendor#	10613	Vendor Name		Class		Pay Code				
		MEDIMPACT HEALTHCARE SYS, II A/P								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
041321	04/14/2021	04/13/2021	04/13/2021				24.54	0.00	0.00	24.54
INDIGENT										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
10613		MEDIMPACT HEALT				24.54	0.00	0.00	24.54	
Vendor#	10963	Vendor Name		Class		Pay Code				
		MEMORIAL MEDICAL CLINIC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
041221	04/13/2021	04/12/2021	04/12/2021				170.00	0.00	0.00	170.00
PAYROLL DED										
Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net	
10963		MEMORIAL MEDICA				170.00	0.00	0.00	170.00	
Vendor#	10536	Vendor Name		Class		Pay Code				
		MORRIS & DICKSON CO, LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6764029	04/13/2021	04/05/2021	04/15/2021				475.45	0.00	0.00	475.45
INVENTORY										
6761288	04/13/2021	04/05/2021	04/15/2021				4,741.89	0.00	0.00	4,741.89
INVENTORY										
6764027	04/13/2021	04/05/2021	04/15/2021				42.70	0.00	0.00	42.70
INVENTORY										

6764028	✓	04/13/2021	04/05/2021	04/15/2021		372.26	0.00	0.00	372.26	✓
			INVENTORY							
CM43558	✓	04/13/2021	04/06/2021	04/16/2021		-2.20	0.00	0.00	-2.20	✓
			CREDIT							
6767901	✓	04/13/2021	04/06/2021	04/16/2021		156.40	0.00	0.00	156.40	✓
			INVENTORY							
6767903	✓	04/13/2021	04/06/2021	04/16/2021		169.72	0.00	0.00	169.72	✓
			INVENTORY							
6765408	✓	04/13/2021	04/06/2021	04/16/2021		1,376.81	0.00	0.00	1,376.81	✓
			INVENTORY							
6767902	✓	04/13/2021	04/06/2021	04/16/2021		22.35	0.00	0.00	22.35	✓
			INVENTORY							
CM43557	✓	04/13/2021	04/06/2021	04/16/2021		-32.69	0.00	0.00	-32.69	✓
			CREDIT							
6772451	✓	04/13/2021	04/07/2021	04/17/2021		5,632.03	0.00	0.00	5,632.03	✓
			INVENTORY							
6772452	✓	04/13/2021	04/07/2021	04/17/2021		2,253.80	0.00	0.00	2,253.80	✓
			INVENTORY							
6772658	✓	04/13/2021	04/07/2021	04/17/2021		173.92	0.00	0.00	173.92	✓
			INVENTORY							
6772450	✓	04/13/2021	04/07/2021	04/17/2021		37.42	0.00	0.00	37.42	✓
			INVENTORY							
6777220	✓	04/13/2021	04/08/2021	04/18/2021		1,340.70	0.00	0.00	1,340.70	✓
			INVENTORY							
6777217	✓	04/13/2021	04/08/2021	04/18/2021		9.22	0.00	0.00	9.22	✓
			INVENTORY							
6775108	✓	04/13/2021	04/08/2021	04/18/2021		17.87	0.00	0.00	17.87	✓
			INVENTORY							
CM44360	✓	04/13/2021	04/08/2021	04/18/2021		-0.52	0.00	0.00	-0.52	✓
			CREDIT							
6777221	✓	04/13/2021	04/08/2021	04/18/2021		24.29	0.00	0.00	24.29	✓
			INVENTORY							
6777218	✓	04/13/2021	04/08/2021	04/18/2021		297.41	0.00	0.00	297.41	✓
			INVENTORY							
6777219	✓	04/13/2021	04/08/2021	04/18/2021		186.13	0.00	0.00	186.13	✓
			INVENTORY							
6782990	✓	04/13/2021	04/11/2021	04/21/2021		779.59	0.00	0.00	779.59	✓
			INVENTORY							
6781866	✓	04/13/2021	04/11/2021	04/21/2021		1,813.73	0.00	0.00	1,813.73	✓
			INVENTORY							
6782989	✓	04/13/2021	04/11/2021	04/21/2021		39.22	0.00	0.00	39.22	✓
			INVENTORY							
6782991	✓	04/13/2021	04/11/2021	04/21/2021		667.69	0.00	0.00	667.69	✓
			INVENTORY							
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		10536	MORRIS & DICKSOI			20,595.19	0.00	0.00	20,595.19	
Vendor# 11472		Vendor Name			Class	Pay Code				
		OCCUPRO LLC		✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
20457	✓	04/14/2021	02/07/2021	03/07/2021			473.28	0.00	0.00	473.28
			PROVIDER LICENSES							
20797	✓	04/14/2021	03/07/2021	04/07/2021			473.28	0.00	0.00	473.28
			PROVIDER LICENSES							
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
		11472	OCCUPRO LLC			946.56	0.00	0.00	946.56	
Vendor# O1500		Vendor Name			Class	Pay Code				
		OLYMPUS AMERICA INC		✓	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
30421123	✓	03/24/2021	01/30/2021	05/01/2021			-150.46	0.00	0.00	-150.46
			CREDIT							
30619018	✓	04/13/2021	03/11/2021	04/05/2021			672.40	0.00	0.00	672.40

REPLACE BULB FOR LAB SCOPES

Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	O1500		OLYMPUS AMERIC	521.94	0.00	0.00	521.94
Vendor# 11069			Vendor Name PABLO GARZA	Class	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
041321	04/13/2021	04/13/2021	04/13/2021				
			CONTRACT EMPLOYEE				
			(3/30 - 4/14/21)				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11069		PABLO GARZA	2,494.38	0.00	0.00	2,494.38
Vendor# P0706			Vendor Name PALACIOS BEACON	Class W	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
33057958	04/15/2021	04/01/2021	05/01/2021				
			AD				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	P0706		PALACIOS BEACON	250.00	0.00	0.00	250.00
Vendor# 11155			Vendor Name PARA	Class	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
8215	04/06/2021	04/01/2021	05/01/2021				
			REVENUE INTEGRITY PROGRAM				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11155		PARA	3,084.00	0.00	0.00	3,084.00
Vendor# 10152			Vendor Name PARTSSOURCE, LLC	Class	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
03756461	04/13/2021	03/03/2021	04/02/2021				
			SUPPLIES				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10152		PARTSSOURCE, LL	72.81	0.00	0.00	72.81
Vendor# P2100			Vendor Name PORT LAVACA WAVE	Class W	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
033121	04/15/2021	03/31/2021	04/25/2021				
			AD				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	P2100		PORT LAVACA WAVE	445.00	0.00	0.00	445.00
Vendor# 11932			Vendor Name PRESS GANEY ASSOCIATES, INC.	Class	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
IN000473862	03/31/2021	03/31/2021	04/30/2021				
			PT SURVEY				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11932		PRESS GANEY ASS	2,426.75	0.00	0.00	2,426.75
Vendor# 11195			Vendor Name PSYCHEMEDICS CORPORATION	Class	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
611333	04/15/2021	03/30/2021	04/30/2021				
			LAB SERVICES				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11195		PSYCHEMEDICS CO	50.00	0.00	0.00	50.00
Vendor# 13460			Vendor Name RELIANT, DEPT 0954	Class	Pay Code		
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
1130103458	04/14/2021	03/31/2021	04/30/2021				
			ENERGY BILL				
Vendor#	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	13460		RELIANT, DEPT 095	18,574.83	0.00	0.00	18,574.83
Vendor# 10936			Vendor Name SIEMENS FINANCIAL SERVICES	Class	Pay Code		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
5638210003	04/15/2021	03/30/2021	04/24/2021				1,333.33	0.00	0.00	1,333.33
3328 LEASE										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
10936			SIEMENS FINANCI			1,333.33	0.00	0.00	1,333.33	
Vendor#	Vendor Name		Class		Pay Code					
10699	SIGN AD, LTD.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
260528	04/15/2021	04/01/2021	04/11/2021				400.00	0.00	0.00	400.00
AD										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
10699			SIGN AD, LTD.			400.00	0.00	0.00	400.00	
Vendor#	Vendor Name		Class		Pay Code					
S2345	SOUTHEAST TEXAS HEALTH SYS W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
26499	04/15/2021	04/01/2021	05/01/2021				5,000.00	0.00	0.00	5,000.00
CREDENTIALING										
26517	04/15/2021	04/01/2021	05/01/2021				375.00	0.00	0.00	375.00
CREDENTIALING										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
S2345			SOUTHEAST TEXA:			5,375.00	0.00	0.00	5,375.00	
Vendor#	Vendor Name		Class		Pay Code					
S3960	STERICYCLE, INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
4010010431	04/13/2021	04/01/2021	05/01/2021				2,571.99	0.00	0.00	2,571.99
DISPOSAL SERVICES										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
S3960			STERICYCLE, INC			2,571.99	0.00	0.00	2,571.99	
Vendor#	Vendor Name		Class		Pay Code					
13528	STRYKER FLEX FINANCIAL									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
203304	03/30/2021	03/09/2021	05/01/2021				1,294.26	0.00	0.00	1,294.26
RFA MACHINE										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
13528			STRYKER FLEX FIN			1,294.26	0.00	0.00	1,294.26	
Vendor#	Vendor Name		Class		Pay Code					
T1880	TEXAS DEPARTMENT OF LICENSI A/P									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10123592	04/13/2021	03/23/2021	04/22/2021				100.00	0.00	0.00	100.00
TEMP OPERATING CERT										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
T1880			TEXAS DEPARTMEI			100.00	0.00	0.00	100.00	
Vendor#	Vendor Name		Class		Pay Code					
11100	THE US CONSULTING GROUP									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
340381935	04/14/2021	03/15/2021	04/09/2021				248.47	0.00	0.00	248.47
TRASH SERVICE										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net	
11100			THE US CONSULTII			248.47	0.00	0.00	248.47	
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
033121	04/15/2021	03/31/2021	04/10/2021				2,650.00	0.00	0.00	2,650.00
10957450-1023 SOCAIL 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					
T2250	THYSSENKRUPP ELEVATOR COR M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
3005745481	04/14/2021	03/15/2021	03/15/2021				1,354.38	0.00	0.00	1,354.38
OIL AND GREASE										

Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
T2250			THYSSENKRUPP EI			1,354.38	0.00	0.00		1,354.38
Vendor# 13616	Vendor Name					Class	Pay Code			
	TRIOSE, INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
TRI084380	04/13/2021	04/06/2021	04/06/2021				551.51	0.00	0.00	551.51
SHIPPING										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
13616			TRIOSE, INC			551.51	0.00	0.00		551.51
Vendor# 11067	Vendor Name					Class	Pay Code			
	TRIZETTO PROVIDER SOLUTIONS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
35FK042100	04/13/2021	04/01/2021	04/26/2021				1,783.34	0.00	0.00	1,783.34
PT STATEMENTS										
Vendor Totals:		Number	Name			Gross	Discount	No-Pay		Net
11067			TRIZETTO PROVIDI			1,783.34	0.00	0.00		1,783.34
Vendor# U1054	Vendor Name					Class	Pay Code			
	UNIFIRST HOLDINGS					W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8400356241	04/14/2021	02/18/2021	03/15/2021				181.57	0.00	0.00	181.57
LAUNDRY										
8400359714	04/14/2021	03/29/2021	04/23/2021				1,864.15	0.00	0.00	1,864.15
LAUNDRY										
8400359690	04/14/2021	03/29/2021	04/23/2021				70.14	0.00	0.00	70.14
LAUNDRY										
8400359689	04/14/2021	03/29/2021	04/23/2021				45.15	0.00	0.00	45.15
LAUNDRY										
8400360068	04/14/2021	04/01/2021	04/26/2021				111.65	0.00	0.00	111.65
LAUNDRY										
8400360071	04/14/2021	04/01/2021	04/26/2021				189.18	0.00	0.00	189.18
LAUNDRY										
8400360104	04/14/2021	04/01/2021	04/26/2021				1,516.11	0.00	0.00	1,516.11
LAUNDRY										
8400360066	04/14/2021	04/01/2021	04/26/2021				19.56	0.00	0.00	19.56
LAUNDRY										
8400360069	04/14/2021	04/01/2021	04/26/2021				211.10	0.00	0.00	211.10
LAUNDRY										
8400360091	04/14/2021	04/01/2021	04/26/2021				95.88	0.00	0.00	95.88
LAUNDRY										
8400360124	04/14/2021	04/01/2021	04/26/2021				142.45	0.00	0.00	142.45
LAUNDRY										
8400360340	04/14/2021	04/05/2021	04/30/2021				70.14	0.00	0.00	70.14
LAUNDRY										
8400360362	04/14/2021	04/05/2021	04/30/2021				1,879.03	0.00	0.00	1,879.03
LAUNDRY										
8400360339	04/14/2021	04/05/2021	04/30/2021				45.15	0.00	0.00	45.15
LAUNDRY										
8400360723	04/14/2021	04/08/2021	05/03/2021				198.14	0.00	0.00	198.14
LAUNDRY										
8400360725	04/14/2021	04/08/2021	05/03/2021				189.18	0.00	0.00	189.18
LAUNDRY										
8400360724	04/14/2021	04/08/2021	05/03/2021				163.17	0.00	0.00	163.17
LAUNDRY										
8400360744	04/14/2021	04/08/2021	05/03/2021				79.43	0.00	0.00	79.43
LAUNDRY										
8400360757	04/14/2021	04/08/2021	05/03/2021				1,657.87	0.00	0.00	1,657.87
LAUNDRY										
8400360720	04/14/2021	04/08/2021	05/03/2021				19.56	0.00	0.00	19.56
LAUNDRY										
8400360722	04/14/2021	04/08/2021	05/03/2021				121.55	0.00	0.00	121.55
LAUNDRY										

8400360777 04/14/2021 04/08/2021 05/03/2021 119.55 0.00 0.00 119.55 ✓

LAUNDRY

Vendor Totals: Number Name Gross Discount No-Pay Net
U1054 UNIFIRST HOLDING 8,989.71 0.00 0.00 8,989.71

Vendor#
V1471

Vendor Name Class Pay Code
VICTORIA RADIOWORKS, LTD ✓ W

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
21030175 ✓ 04/15/2021 03/31/2021 03/31/2021 280.00 0.00 0.00 280.00 ✓

SUPPLIES

21030176 ✓ 04/15/2021 03/31/2021 03/31/2021 280.00 0.00 0.00 280.00 ✓

AD

Vendor Totals: Number Name Gross Discount No-Pay Net
V1471 VICTORIA RADIOWO 560.00 0.00 0.00 560.00

Vendor#
12548

Vendor Name Class Pay Code
WAGEWORKS, INC ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
0221DR467704/13/2021 03/01/2021 03/01/2021 155.52 0.00 0.00 155.52 ✓

COBRA

Vendor Totals: Number Name Gross Discount No-Pay Net
12548 WAGEWORKS, INC 155.52 0.00 0.00 155.52

Vendor#
10793

Vendor Name Class Pay Code
WAGEWORKS, INC. ✓

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
041221 04/13/2021 04/12/2021 04/12/2021 3,807.98 0.00 0.00 3,807.98 ✓

PAYROLL DED

Vendor Totals: Number Name Gross Discount No-Pay Net
10793 WAGEWORKS, INC. 3,807.98 0.00 0.00 3,807.98

Report Summary

Grand Totals:

Gross Discount No-Pay Net
278,400.65 0.00 0.00 278,400.65

$$278,400.65 - 589.19 = 277,811.46$$

$$589.19 - 559.00 = 30.19$$

$$30.19 - 575.25 = -545.06$$

$$-545.06 - 1,656.00 = -2,201.06$$

$$-2,201.06 - 1,656.00 = -3,857.06$$

$$-3,857.06 - 1,777.04 = -5,634.10$$

$$-5,634.10 - 1,802.00 = -7,436.10$$

$$-7,436.10 + 278,400.65 = 270,964.55$$

pg 7 correction

remove per Melissa
pg 8

pg 8 correction

$$\begin{cases} < 589.19 > \\ + 559.00 \end{cases}$$

$$\begin{cases} < 575.25 > \\ < 1,656.00 \end{cases}$$

$$\begin{cases} < 1777.00 > \\ + 1802.00 \end{cases}$$

$$278,400.65 - 7,436.10 = 270,964.55$$

APR 19 2021

CK#

APR 19 2021

190038-

190111

RECEIVED

APR 15 2021

RUN DATE: 04/15/21

TIME: 12:21

Calhoun County Auditor

MEMORIAL MEDICAL CENTER

EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1

APCDEDIT

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
1475333	01	041421	95.86	✓ 2		REFUND FOR	
ARID=0001 TOTAL			95.86				
TOTAL			95.86				

APR 15 2021

ck#
190114

CALHOUN COUNTY AUDITOR

McKESSON**STATEMENT**

As of: 04/16/2021

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: 04/17/2021As of: 04/16/2021 Page: 002
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 632536 PLEASE CHECK ANY
Date: 04/17/2021 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	
-----------------	-------------	----------------------	--	-------------	------------------	-------------------	--------	-----------------	--------	----------------------	--

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 1,440.27 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017If Paid By 04/20/2021,
Pay This Amount:

1,411.45 USD

If Paid After 04/20/2021,
Pay this Amount:

1,440.27 USD

Due If Paid On Time:

USD

1,411.45

Disc lost if paid late:

28.82

Due If Paid Late:

USD

1,440.27

f

670.38 +

524.90 +

324.00 +

495.17 +

1,411.45 *

APPROVED
BY

APR 19 2021

CK # 500190

For AR Inquiries please contact 800-867-0333

McKESSON**STATEMENT**

As of: 04/16/2021

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: 04/17/2021

As of: 04/16/2021 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 190813 PLEASE CHECK ANY
Date: 04/17/2021 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 190813 HEB PHCY 0434/MEM MED PHS											
04/14/2021	04/20/2021	7264121861	2017028869	115Invoice	1.14	56.90		55.76 ✓		7264121861	
04/16/2021	04/20/2021	7264610875	2017028956	115Invoice	0.24	11.86		11.62 ✓		7264610875	

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: 68.76 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,040.88
04/12/2021If Paid By 04/20/2021,
Pay This Amount:

67.38 USD

If Paid After 04/20/2021,
Pay this Amount:

68.76 USD

Due If Paid On Time:
USD

67.38 ✓

Disc lost if paid late:

1.38

Due If Paid Late:
USD

68.76

APR 19 2021

CK # 500190

For AR Inquiries please contact 800-867-0333

McKESSON**STATEMENT**

As of: 04/16/2021

Page: 001

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

Company: 8000

DC: 8115

As of: 04/16/2021 Page: 001
Mail to: Comp: 8000WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Territory: 400

Customer: 256342
Date: 04/17/2021AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 256342 PLEASE CHECK ANY
Date: 04/17/2021 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 256342 WALMART 1098/MEM MED PHS											
04/12/2021	04/20/2021	7263608060	6886309	115Invoice	1.95	97.49		95.54 ✓		7263608060	
04/12/2021	04/20/2021	7263608061	6905654	115Invoice	2.92	146.23		143.31 ✓		7263608061	
04/12/2021	04/20/2021	7263608062	0411210320-00	115Invoice	0.01	0.30		0.29 ✓		7263608062	
04/13/2021	04/20/2021	7263889051	6994868	115Invoice	2.76	138.05		135.29 ✓		7263889051	
04/13/2021	04/20/2021	7264080633	00004122021	115Invoice	1.52	75.76		74.24 ✓		7264080633	
04/14/2021	04/20/2021	7264309984	860455970	195Invoice	0.02	0.96		0.94 ✓		7264309984	
04/15/2021	04/20/2021	7264375175	7148822	115Invoice	0.01	0.56		0.55 ✓		7264375175	
04/15/2021	04/20/2021	7264574359	00004142021tw	115Invoice	0.09	4.43		4.34 ✓		7264574359	
04/16/2021	04/20/2021	7264795873	860699314	195Invoice	0.66	32.78		32.12 ✓		7264795873	
04/16/2021	04/20/2021	7264824189	00004152021tw	115Invoice	0.78	39.06		38.28 ✓		7264824189	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 535.62 USD

Future Due: 0.00

If Paid By 04/20/2021,
Pay This Amount:

524.90 USD

Past Due: 0.00

If Paid After 04/20/2021,
Pay this Amount:

535.62 USD

Last Payment 2,040.88
04/12/2021

Due If Paid On Time:

USD 524.90

Disc lost if paid late:

10.72

Due If Paid Late:

USD 535.62

APR 19 2021

For AR Inquiries please contact 800-867-0333

McKESSON**STATEMENT**

As of: 04/16/2021

Page: 001

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

Company: 8000

CVS PHCY 7006/MEMORIA PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115

Territory: 400

Customer: 262252
Date: 04/17/2021As of: 04/16/2021 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 262252 PLEASE CHECK ANY
Date: 04/17/2021 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 262252 CVS PHCY 7006/MEMORIA PHS											
04/15/2021	04/20/2021	7264390028	1132645	115Invoice	6.61	330.61		324.00 ✓		7264390028	

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

TOTAL: Customer Number 262252 CVS PHCY 7006/MEMORIA PHS

Subtotals: 330.61 USD

Future Due: 0.00

If Paid By 04/20/2021,
Pay This Amount:

324.00 USD

Past Due: 0.00

If Paid After 04/20/2021,
Pay this Amount:

330.61 USD

Last Payment 2,004.55
04/05/2021

Due If Paid On Time:

USD 324.00

Disc lost if paid late:

6.61

Due If Paid Late:

USD 330.61

APPROVED

APR 19 2021

CREDIT ADVISORY
CALL CENTER, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON**STATEMENT**

As of: 04/16/2021

Page: 001

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

Company: 8000

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

DC: 8115

Territory: 400

Customer: 835438
Date: 04/17/2021As of: 04/16/2021 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 835438 PLEASE CHECK ANY
Date: 04/17/2021 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											
04/15/2021	04/20/2021	7264564915	1133011	115Invoice	10.11	505.28		495.17 ✓		7264564915	

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: 505.28 USD

Future Due: 0.00

If Paid By 04/20/2021,
Pay This Amount:

495.17 USD

Past Due: 0.00

If Paid After 04/20/2021,
Pay this Amount:

505.28 USD

Last Payment 2,040.88
04/12/2021

Due If Paid On Time:

USD

495.17 ✓

Disc lost if paid late:

10.11

Due If Paid Late:

USD

505.28

APR 19 2021

For AR Inquiries please contact 800-867-0333



STATEMENT

Statement Number: 60719063
Date: 04-16-2021

1 of 1

Served By:

ABC DC SUGARLAND
12727 WEST AIRPORT BLVD
SUGAR LAND TX 77478-6101DEA: 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:	637.92
Past Due:	0.00
Total Due:	637.92
Account Balance:	637.92

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
04-11-2021	04-23-2021	3052421007	160838	Invoice	134.14		0.00	134.14
04-12-2021	04-23-2021	3052536721	160841	Invoice	0.91		0.00	0.91
04-12-2021	04-23-2021	3052536722	160842	Invoice	33.07		0.00	33.07
04-12-2021	04-23-2021	3052536723	160844	Invoice	0.09		0.00	0.09
04-12-2021	04-23-2021	3052536724	160843	Invoice	1.08		0.00	1.08
04-12-2021	04-23-2021	3052564780	160890	Invoice	10.25		0.00	10.25
04-13-2021	04-23-2021	3052678418	160896	Invoice	66.39		0.00	66.39
04-14-2021	04-23-2021	3052811638	160903	Invoice	226.22		0.00	226.22
04-15-2021	04-23-2021	3052944034	160914	Invoice	37.84		0.00	37.84
04-15-2021	04-23-2021	3052944035	160915	Invoice	5.83		0.00	5.83
04-16-2021	04-23-2021	3053074123	160923	Invoice	122.10		0.00	122.10

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
637.92	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
04-16-2021	(961.45)

Reminders

Due Date	Amount
04-23-2021	637.92
Total Due:	637.92

CK # 500191

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- April 12, 2021 - April 18, 2021**

Date	Bank Description
4/12/2021	PAY PLUS ACHTRANS 452579291 101000698677226
4/12/2021	TSYS/TRANSFIRST DISCOUNT 39300982541616 6110
4/12/2021	TSYS/TRANSFIRST DISCOUNT 41399801332401 6110
4/12/2021	TSYS/TRANSFIRST DISCOUNT 41399801391837 6110
4/12/2021	TSYS/TRANSFIRST DISCOUNT 41399801368397 6110
4/12/2021	TSYS/TRANSFIRST DISCOUNT 41399801332393 6110
4/12/2021	TSYS/TRANSFIRST DISCOUNT 41399801332385 6110
4/12/2021	TSYS/TRANSFIRST DISCOUNT 41399801332419 6110
4/12/2021	TSYS/TRANSFIRST DISCOUNT 39300982589946 6110
4/13/2021	PAY PLUS ACHTRANS 452579291 101000699494221
4/13/2021	MCKESSON DRUG AUTO ACH ACH04547797 910000137
4/13/2021	CLEARGAGE LLC CLEARGAGE, 6YINOKQB319JR63 242
4/14/2021	PAY PLUS ACHTRANS 452579291 101000690377989
4/15/2021	PAY PLUS ACHTRANS 452579291 101000691262189
4/15/2021	TEXAS COUNTY DRS RECEIVABLE 0419 21000029930
4/16/2021	PAY PLUS ACHTRANS 452579291 101000692030186
4/16/2021	EXPERTPAY EXPERTPAY 746003411 91000013580694
4/16/2021	AMERISOURCE BERG PAYMENTS 0100007768 2100002
4/16/2021	MEMORIAL MEDICAL PAYROLL 746003411 113122650

MMC Notes
- 3rd Party Payor Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- 3rd Party Payor Fee
- 340B Drug Program Expense
- Patient Financing Service
- 3rd Party Payor Fee
- 3rd Party Payor Fee
- Retirement Funding
- 3rd Party Payor Fee
- Child Support Payment -Payroll Ending
- 340B Drug Program Expense
- Payroll

Amount	CPSI
76.69	203.95 *
570.84	CC Fees
645.9	570.84 +
155.43	645.90 +
839.14	155.43 +
4540.99	839.14 +
61.74	4,540.99 +
509.24	61.74 +
129	509.24 +
8.77	129.00 +
2040.88*	7,452.28 *
79.01	Cleargag
33.66	79.01 +
19.24	TX County Ref.
137857.13	137,857.13 +
65.59	137,857.13 +
446.08	ExpertPay
961.45*	446.08 +
304177.74	446.08
453,218.52	

Jason Anglin, CEO
Memorial Medical Center

**PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ES**

Date	Description
3/20/2021	ACH Payment WEBFILE TAX PYMT DD
4/15/2021	ACH Payment TEXAS COUNTY DRS RECEIVABLE 0419 21000029930

MMC Notes
- Sales Tax
- Retirement Funding
-
-

Amount
1,600.46
137,857.13
1,600.46

Jason Anglin, CEO
Memorial Medical Center

203.95 +
7,452.28 + ril 19, 2021
79.01 +
137,857.13 +
446.08 +
146,038.49 =
453,218.52 +
2,040.88
961.45
304,177.74
146,038.49
146,038.49 +
146,038.49 -
0.00 *

* Approved 04/14/21 CC

was Added above
on 4/15/21

Sales Tax
3/20/21

IMPORTANT: To avoid losing data you have entered, Please do NOT use your browser's back button.

Sales and Use Tax

Period Ending 03/31/2021 (2103)

☒ Confirmation: You Have Filed Successfully

Reference Number: *

Date and Time of Filing: 04/14/2021, 03:53:44 PM

Taxpayer ID:

Taxpayer Name: MEMORIAL MEDICAL CENTER

Taxpayer Address: 815 N VIRGINIA ST PORT LAVACA, TX 77979-3025

Entered by:

Email Address:

Telephone Number:

IP Address:

CREDITS TAKEN

Credits Taken

Are you taking credit to reduce taxes due on this return?

No

Licensed Customs Broker Exported Sales

Did you refund sales tax for this filing period on items exported outside the United States based on a Texas Licensed Customs Broker Export Certifications?

No

LOCATION SUMMARY

Loc #	Total Texas Sales	Taxable Sales	Taxable Purchases	Subject to State Tax (Rate .0625)	State Tax Due	Subject to Local Tax	Local Tax Rate	Local Tax Due
00004	19497	19497	0	19497	1218.56	19497	0.02	389.94
SubTotal	19497	19497	0	19497	1218.56	19497		389.94

Total Tax for Locations

\$1,608.50

Total Tax Due: \$1,608.50

Timely Filing Discount: - \$8.04

Balance Due: \$1,600.46

Pending Payments: - \$0.00

Total Amount Due and Payable: \$1,600.46

(State amount due is \$1,212.47)

(Local amount due is \$387.99)

PAYMENT SUMMARY

Electronic Check

State Amount: \$1,212.47

Local Amount: \$387.99

Amount to Pay: \$1,600.46

Retirement

4/15/2021

Date/Time 04-06-2021 / 01:32 PM
Submitted By

Pay Date 03-31-2021

Employee Deposits	\$60,274.85
Employer Contributions	\$77,582.28
Group Term Life Premiums	\$0.00
Total	\$137,857.13



Comments

Payroll File March 2021 Retirement Upload.xlsx

CLOSE

PRINT

4/15/2021

tmp__cw5report6244650238517597224.html

RECEIVED04/15/2021
12:24

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

ap_open_invoice.template

Dates Through:

Calhoun County Auditor

Vendor#
11832

Vendor Name

Class

Pay Code

BROADMOOR AT CREEKSIDE PAF ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
033121B	03/31/2021	03/31/2021	05/06/2021				3,023.00	0.00	0.00	3,023.00 ✓

TRANSFER NH insurance pymt deposited into mmc operating

033121C	03/31/2021	03/31/2021	05/06/2021				8,170.00	0.00	0.00	8,170.00 ✓
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TRANSFER NH insurance pymt deposited into mmc operating

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
11832	BROADMOOR AT C		11,193.00	0.00	0.00	11,193.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	11,193.00	0.00	0.00	11,193.00

APR 15 2021

ck #

190113

RECEIVED

04/15/2021

12:23

Coffman County Auditor

Vendor#

12792

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap_open_invoice.template

Dates Through:

Class

Pay Code

Vendor Name

BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
030121B	03/31/2021	03/01/2021	05/06/2021				5,456.00	0.00	0.00	5,456.00 ✓

TRANSFER NH insurance

pymt deposited into MMC operating

033121A	03/31/2021	03/31/2021	05/06/2021				49,517.94	0.00	0.00	49,517.94 ✓
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TRANSFER

NH insurance

pymt deposited into MMC operating

Vendor Totals:

Number

Name

Gross

Discount

No-Pay

Net

12792

BETHANY SENIOR I

54,973.94

0.00

0.00

54,973.94

Report Summary

Grand Totals:

Gross

Discount

No-Pay

Net

54,973.94

0.00

0.00

54,973.94

APR 15 2021

CHK#

190112

CASH ON HAND

8

RUN DATE:04/20/21
TIME:12:38

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

PAGE 1
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	190038	04/21/21	1,400.00	ACUTE CARE INC
A/P	190039	04/21/21	49.18	ADT COMMERCIAL
A/P	190040	04/21/21	244.00	ADVANCED PLUMBING
A/P	190041	04/21/21	3,980.50	AIRGAS USA, LLC - CENTRAL DIV
A/P	190042	04/21/21	2,758.50	ALLYSON SWOPE
A/P	190043	04/21/21	119.40	AQUA BEVERAGE COMPANY
A/P	190044	04/21/21	33,061.00	ARTHREX, INC
A/P	190045	04/21/21	344.62	BARD PERIPHERAL VASCULAR
A/P	190046	04/21/21	5,114.07	BAXTER HEALTHCARE
A/P	190047	04/21/21	3,374.88	CAVALLO ENERGY TEXAS LLC
A/P	190048	04/21/21	1,949.82	CDW GOVERNMENT, INC.
A/P	190049	04/21/21	1,699.00	CERVEY, LLC
A/P	190050	04/21/21	500.00	CHEMAQUA
A/P	190051	04/21/21	255.00	CITIZENS MEDICAL CENTER
A/P	190052	04/21/21	3,054.55	CITY OF PORT LAVACA
A/P	190053	04/21/21	453.50	COASTAL REFRIGERATION
A/P	190054	04/21/21	249.00	COLA RESOURCES, INC.
A/P	190055	04/21/21	.00	VOIDED
A/P	190056	04/21/21	1,563.45	DEWITT POTTH & SON
A/P	190057	04/21/21	50,311.25	DIAMOND HEALTHCARE CORP
A/P	190058	04/21/21	17,863.00	EVIDENT
A/P	190059	04/21/21	41.07	FASTENAL COMPANY
A/P	190060	04/21/21	1,255.40	FISHER HEALTHCARE
A/P	190061	04/21/21	1,180.39	FRONTIER
A/P	190062	04/21/21	1,102.83	FUSION CLOUD SERVICES, LLC
A/P	190063	04/21/21	11,461.57	GE PRECISION HEALTHCARE, LLC
A/P	190064	04/21/21	1,920.92	GETTING USA
A/P	190065	04/21/21	343.40	GULF COAST PAPER COMPANY
A/P	190066	04/21/21	112.54	HEALTH CARE LOGISTICS INC
A/P	190067	04/21/21	210.30	HEALTHCARE CODING & CONSULTING
A/P	190068	04/21/21	4,610.52	HEALTHCARE FINANCIAL SERVICES
A/P	190069	04/21/21	.00	VOIDED
A/P	190070	04/21/21	935.29	HEB CREDIT RECEIVABLES DEPT308
A/P	190071	04/21/21	472.50	HOLOGIC INC
A/P	190072	04/21/21	15,013.66	HUNTER PHARMACY SERVICES
A/P	190073	04/21/21	602.84	INTRADO
A/P	190074	04/21/21	3,397.96	IRON MOUNTAIN
A/P	190075	04/21/21	250.00	ITERSOURCE CORPORATION
A/P	190076	04/21/21	37.10	KENTEC MEDICAL INC
A/P	190077	04/21/21	559.00	KRISTI BOYD
A/P	190078	04/21/21	20,836.60	LUBY'S FUDDRUCKERS RESTAURANTS
A/P	190079	04/21/21	790.86	M G TRUST
A/P	190080	04/21/21	51.25	MARTIN PRINTING CO
A/P	190081	04/21/21	1,802.00	MASA GLOBAL BUILDING
A/P	190082	04/21/21	24.54	MEDIMPACT HEALTHCARE SYS, INC.
A/P	190083	04/21/21	170.00	MEMORIAL MEDICAL CLINIC
A/P	190084	04/21/21	.00	VOIDED
A/P	190085	04/21/21	20,595.19	MORRIS & DICKSON CO, LLC
A/P	190086	04/21/21	946.56	OCCUPRO LLC
A/P	190087	04/21/21	521.94	OLYMPUS AMERICA INC

RUN DATE:04/20/21
TIME:12:38

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

PAGE 2
GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	190088	04/21/21	2,494.38	PABLO GARZA
A/P	190089	04/21/21	250.00	PALACIOS BEACON
A/P	190090	04/21/21	3,084.00	PARA
A/P	190091	04/21/21	72.81	PARTSSOURCE, LLC
A/P	190092	04/21/21	445.00	PORT LAVACA WAVE
A/P	190093	04/21/21	2,426.75	PRESS GANEY ASSOCIATES, INC.
A/P	190094	04/21/21	50.00	PSYCHEMEDICS CORPORATION
A/P	190095	04/21/21	18,574.83	RELIANT, DEPT 0954
A/P	190096	04/21/21	1,333.33	SIEMENS FINANCIAL SERVICES
A/P	190097	04/21/21	400.00	SIGN AD, LTD.
A/P	190098	04/21/21	5,375.00	SOUTHEAST TEXAS HEALTH SYS
A/P	190099	04/21/21	2,571.99	STERICYCLE, INC
A/P	190100	04/21/21	1,294.26	STRYKER FLEX FINANCIAL
A/P	190101	04/21/21	100.00	TEXAS DEPARTMENT OF LICENSING
A/P	190102	04/21/21	248.47	THE US CONSULTING GROUP
A/P	190103	04/21/21	2,650.00	THRIVEFUEL LLC
A/P	190104	04/21/21	1,354.38	THYSSENKRUPP ELEVATOR CORP
A/P	190105	04/21/21	551.51	TRIOSE, INC
A/P	190106	04/21/21	1,783.34	TRIZETTO PROVIDER SOLUTIONS
A/P	190107	04/21/21	.00	VOIDED
A/P	190108	04/21/21	8,989.71	UNIFIRST HOLDINGS
A/P	190109	04/21/21	560.00	VICTORIA RADIOWORKS, LTD
A/P	190110	04/21/21	155.52	WAGEWORKS, INC
A/P	190111	04/21/21	3,807.98	WAGEWORKS, INC.
A/P	190112	04/21/21	54,973.94	BETHANY SENIOR LIVING
A/P	190113	04/21/21	11,193.00	BROADMOOR AT CREEKSIDE PARK
A/P	190114	04/21/21	95.86	
TOTALS:			342,427.01	

Payables 276,164.21 +
Patient returns 95,86 +
NH 11,193.00 +
Transfers 54,973.94 +
342,427.01 =

APR 21 2021

SECRETARY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
4/19/2021

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
Ashford Gardens		3,061.07	✓	163,918.17	✓	166,979.24	159,305.15
						Bank Balance	166,979.24
						Variance	-
						Leave in Balance	100.00
						Withhold October checks	7,389.49
						Januar Interest	46.15
						Feb Interest	91.84
						Mar Interest	46.61
						Adjust Balance/Transfer Amt	159,305.15
Broadmoor		15,303.13	✓	15,075.36	✓	76,729.99	73,846.80
						Bank Balance	76,729.99
						Variance	-
						Leave in Balance	100.00
						Withhold October checks	2,655.42
						Jan Interest	34.47
						Feb Interest	55.91
						Mar Interest	37.39
						Adjust Balance/Transfer Amt	73,846.80
Crescent		15,177.42	✓	14,967.75	✓	40,702.48	38,314.48
						Bank Balance	40,702.48
						Variance	-
						Leave in Balance	100.00
						Withhold October checks	2,178.33
						JAN INTEREST	30.40
						Feb Interest	45.26
						MAR INTEREST	34.01
						Adjust Balance/Transfer Amt	38,314.48
Fort Bend		3,166.96	✓	16,957.21	✓	20,124.17	16,948.57
						Bank Balance	20,124.17
						Variance	-
						Leave in Balance	100.00
						Withhold October checks	3,018.64
						JAN INTEREST	18.96
						Feb Interest	26.00
						MAR INTEREST	12.00
						Adjust Balance/Transfer Amt	16,948.57
Solera at W Houston		20,904.59	✓	20,581.80	✓	76,324.67	73,391.76
						Bank Balance	76,324.67
						Variance	-
						Leave in Balance	100.00
						Withhold October checks	2,610.12
						JAN INTEREST	53.20
						FEB INTEREST	86.93
						MAR INTEREST	82.66
						Adjust Balance/Transfer Amt	73,391.76
TOTAL TRANSFERS							-378,755.33
							\$341,806.74

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

4/19/2021

Ashford Gardens

4/12/2021	Amerigroup	TXSC	HCCCLAIMPMT	3147871402	111000	-	-	43,333.47	-	43,333.47
4/13/2021	UHC	COMMUNITY PL	HCCCLAIMPMT	746003411	910000	-	-	25,906.44	-	25,906.44
4/13/2021	HUMANA	CHA DISB	HCCCLAIMPMT	390860	4200001209	-	-	237.47	-	237.47
4/14/2021	Amerigroup	TXSC	HCCCLAIMPMT	3148150614	111000	-	-	4,306.64	-	4,306.64
4/14/2021	UHC	COMMUNITY PL	HCCCLAIMPMT	746003411	910000	-	-	41,970.44	-	41,970.44
4/14/2021	HEALTH HUMAN SVC	HCCCLAIMPMT	1746003411	13005	2	-	-	11,673.02	-	11,673.02
4/16/2021	Deposit					-	-	12,797.12	-	12,797.12
4/16/2021	Amerigroup	TXSC	HCCCLAIMPMT	3148342752	111000	-	-	5,212.42	-	5,212.42
4/16/2021	UHC	COMMUNITY PL	HCCCLAIMPMT	746003411	910000	-	-	2,383.06	-	2,383.06
4/16/2021	UHC	COMMUNITY PL	HCCCLAIMPMT	746003411	910000	-	-	3,379.59	-	3,379.59
4/16/2021	UHC	COMMUNITY PL	HCCCLAIMPMT	746003411	910000	-	-	10,565.44	-	10,565.44
4/16/2021	UHC	COMMUNITY PL	HCCCLAIMPMT	746003411	910000	-	-	3,053.06	-	3,053.06
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Broadmoor[illegible]

Crescent

4/12/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	4,656.99	-	4,656.99
4/13/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	7,030.00	-	7,030.00
4/13/2021	MANAGEANDNET1718 MNS PMNT 0000000000003268 41	-	267.77	-	267.77
4/13/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,098.08	-	2,098.08
4/14/2021	WIRE OUT CANTEX HEALTH CARE CENTERS III	14,967.75	-	-	-
4/14/2021	UnitedHealthcare HCCLAIMPMT 746003411 124384	-	740.00	-	740.00
4/14/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	14,414.53	-	14,414.53
4/16/2021	Deposit	-	4,255.20	-	4,255.20
4/16/2021	UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	0.24	-	0.24
4/16/2021	UHC Benefits Pla HCCLAIMPMT 746003411 124384	-	7,030.00	-	7,030.00
		14,967.75	40,492.81	-	40,492.81

Fort Bend

4/15/2021	AARP Supplementa	HCCLAIMPMT 746003411	124384		352.00					352.00
4/16/2021	Deposit				5,116.87					5,116.87
4/15/2021	UHC COMMUNITY PL	HCCLAIMPMT 746003411	910000		2,528.40					2,528.40
4/16/2021	UHC COMMUNITY PL	HCCLAIMPMT 746003411	910000		8,959.94					8,959.94
					16,957.21					16,957.21

Solera at West Houston

	Transfer-in	Transfer-out	QPPY Comp A	QPPY Comp B	QPPY Comp C	Accruals	QPPY II	NH PORTION
4/12/2021 NOVITAS SOLUTION HCCLAIMPMT 676310 420000109	-	3,571.00	-	-	-	-	-	3,571.00
4/12/2021 AARP Supplementa HCCLAIMPMT 746003411 124384	-	4,752.00	-	-	-	-	-	4,752.00
4/13/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	3,280.00	-	-	-	-	-	3,280.00
4/13/2021 Amerigroup TXSC HCCLAIMPMT 3147995940 111000	-	9,384.73	-	-	-	-	-	9,384.73
4/13/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	8,888.16	-	-	-	-	-	8,888.16
4/13/2021 HUMANA CHA DISB HCCLAIMPMT 390862 4200001209	-	1,449.48	-	-	-	-	-	1,449.48
4/14/2021 WIRE OUT CANTEX HEALTH CARE CENTERS III	20,581.88	-	-	-	-	-	-	-
4/14/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	2,870.00	-	-	-	-	-	2,870.00
4/14/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	15,060.72	-	-	-	-	-	15,060.72
4/15/2021 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	7,380.00	-	-	-	-	-	7,380.00
4/16/2021 Deposit	-	10,855.68	-	-	-	-	-	10,855.68
4/16/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	6,144.97	-	-	-	-	-	6,144.97
4/16/2021 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,365.14	-	-	-	-	-	2,365.14
TOTALS	20,581.88	76,001.88	-	-	-	-	-	76,001.88
TOTALS	50,624.91	373,872.29	-	-	-	-	-	373,872.29

TOTALS

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Select Group
Groups

Add Group

Search

All

DDA

Data reported as of Apr 19, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
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*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$166,979.24	\$172,427.11	\$166,979.24	\$129,588.5
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$76,729.99	\$76,884.90	\$76,729.99	\$21,467.0
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$40,702.48	\$40,702.48	\$40,702.48	\$29,417.0
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$20,124.17	\$22,248.34	\$20,124.17	\$3,518.5
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$76,324.67	\$76,324.67	\$76,324.67	\$56,958.8

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
4/19/2021

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		164,264.32	✓ 129,195.43	✓ 100,319.79	✓	135,388.68	100,319.79
					Bank Balance Variance	135,388.68	
					Leave in Balance	100.00	
					SUPERIOR QIPP 1,2,3	34,832.34	
					JAN INTEREST	27.25	
					FEB INTEREST	78.06	
					MAR INTEREST	31.24	
					Adjust Balance/Transfer Amt	100,319.79	

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 4/19/2021

APR 19 2021

Quick View

Select Quick View Accounts

Account Number / Name

Account Type



Search

All

Select Group

Groups

Add Group

DDA

Data reported as of Apr 19, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
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*4454MEMORIAL MEDICAL /
NH GOLDEN CREEK
HEALTHCARE

\$135,388.68

\$135,491.30

\$135,388.68

\$44,794.6

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
4/19/2021

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
Gulf Pointe Plaza- Private Pay		25,566.74	✓	8,512.62	✓		34,079.36	13,326.62
						Bank Balance	34,079.36	✓
						Variance		
						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	13,326.62	✓
Gulf Pointe Plaza-Medicare/Medicaid		51,252.49	✓	1,080.52	✓		124,590.27	124,418.30
						Bank Balance	124,590.27	✓
						Variance		
						Leave in Balance	100.00	
						JAN INTEREST	12.66	✓
						Feb Interest	32.29	✓
						MAR INTEREST	27.02	✓
						Adjust Balance/Transfer Amt	124,418.30	✓
TOTAL TRANSFERS							224,418.30	
							137,744.92	

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

4/19/2021

APPROVED
APR 19 2021
CASHIER ACCOUNTS
CASHIER ACCOUNTS

Gulf Pointe Plaza-Private Pay

4/13/2021 HUMANA INS CO HCCLAIMPMT 624982 830000592933
 4/13/2021 AETNA H09 HCCLAIMPMT 1922092790 311002089735
 4/14/2021 HUMANA CHA DISB HCCLAIMPMT 624982 4200001102
 4/15/2021 HUMANA CHA DISB HCCLAIMPMT 624982 4200001172

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
-	3,671.40	-	-	-	-	-	3,671.40
-	700.00	-	-	-	-	-	700.00
-	2,401.14	-	-	-	-	-	2,401.14
-	1,740.08	-	-	-	-	-	1,740.08
-	8,512.62	-	-	-	-	-	8,512.62

Gulf Pointe Plaza-Medicare/Medicaid

4/14/2021 WIRE OUT HMG SERVICES, LLC
 4/16/2021 Deposit
 4/16/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113013 2

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
1,080.52	-	-	-	-	-	-	-
-	61,676.10	-	-	-	-	-	61,676.10
-	12,742.20	-	-	-	-	-	12,742.20
1,080.52	74,418.30	-	-	-	-	-	74,418.30
1,080.52	82,930.92	-	-	-	-	-	82,930.92

↑
 Wire should have
 been for 51,080.52.
 Amount sent was
 1,080.52.

Quick View

Select Quick View Accounts
Account Number / Name

Account Type

Search

All

Select Group
Groups

Add Group

DDA

Data reported as of Apr 19, 2021

Account Number

Current Balance

Available Balance

Collected Balance

Prior Day Balance

*5441MMC -NH GULF POINTE
PLAZA -
MEDICARE/MEDICAID

\$124,590.27

\$130,983.82

\$124,590.27

\$50,171.9

*5433MMC -NH GULF POINTE
PLAZA - PRIVATE PAY

\$34,079.36

\$34,079.36

\$34,079.36

\$34,079.3

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 4/19/2021

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		91,010.57 ✓	90,910.57 ✓	98,794.90 ✓			98,894.90 ✓	98,794.90
						Bank Balance	98,894.90 ✓	
						Variance	.	
						Leave in Balance	100.00 ✓	

Pending QIPP Ck

Adjust Balance/Transfer Amt 98,794.90 ✓

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 4/19/2021

APR 19 2021

SOUTH AMERICA
 CASHIER, TEXAS

Tuscany Senior Living

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
4/14/2021 WIRE OUT LINBAR ENTERPRISES, LLC	90,910.57	-					-	-
4/14/2021 NOVITAS SOLUTION HCCLAIMPMT 676201 420000112	-	79.45					-	79.45
4/16/2021 Deposit	-	93,188.31					-	93,188.31
4/16/2021 KS PLAN ADMINIST HCCLAIMPMT 179 111000025002	-	5,527.14					-	5,527.14
							-	-
	90,910.57	98,794.90	-	-	-	-	-	98,794.90

Quick View

Select Quick View Accounts
Account Number / Name

Account Type



Search

All

Select Group
Groups

Add Group

DDA

Data reported as of Apr 19, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
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[Redacted Table Content]				
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*3407 MMC -NH TUSCANY VILLAGE	\$98,894.90	\$98,894.90	\$98,894.90	\$179.4
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Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 4/19/2021

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		176,419.21	✓ 176,106.53	✓ 203,882.74	✓		204,195.42	✓ 203,882.74
						Bank Balance	204,195.42	
						Variance	204,195.42	
						Leave In Balance	100.00	

JAN INTEREST 47.38 ✓
 Feb Interest 80.47 ✓
 MAR INTEREST 84.83 ✓
 Adjust Balance/Transfer Amt 203,882.74

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 4/19/2021

APPROVED
 APR 19 2021
 JASON ANGLIN
 CEO

Bethany Senior Living

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
4/12/2021 Deposit	-	7,271.60					-	7,271.60
4/12/2021 Deposit	-	53,624.24					-	53,624.24
4/14/2021 WIRE OUT BETHANY SENIOR LIVING, LTD	176,106.53	-					-	-
4/14/2021 Deposit	-	1,644.10					-	1,644.10
4/14/2021 Deposit	-	644.40					-	644.40
4/15/2021 Deposit	-	754.80					-	754.80
4/16/2021 Deposit	-	133,348.96					-	133,348.96
4/16/2021 HOSPICE OF SO TX VENDORS NF 91000017219855	-	2,049.64					-	2,049.64
4/16/2021 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2	-	4,545.00					-	4,545.00
	176,106.53	203,882.74	-	-	-	-	-	203,882.74

Quick View

Select Quick View Accounts
Account Number / Name

Account Type



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Select Group
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DDA

Data reported as of Apr 19, 2021

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance

*5506

MMC -NH BETHANY
SENIOR LIVING

\$204,195.42

\$208,461.92

\$204,195.42

\$64,251.6

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Ashford

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

AMOUNT \$184.60

G/L NUMBER: 21400012

ck# 00121

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

[Signature]

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Date Requested: 4/19/21

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FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

APR 19 2021

CL# 001122

AMOUNT 7,389.49

G/L NUMBER: 10255040

EXPLANATION: QIPP quarterly payment received in October, MMC Portion - Penford

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: 

RUN DATE:04/21/21
TIME:09:52

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

PAGE 6
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHA	001121	04/21/21	184.60	MEMORIAL MEDICAL CENTER	Ashtford Interest
NHA	001122	04/21/21	7,389.49	MEMORIAL MEDICAL CENTER	Ashtford QRP
TOTALS:			7,574.09		

APR 21 2021
COUNTY AUDITOR
GARRETT COUNTY, MARYLAND

Broadmoor

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

CL # 000083

G/L NUMBER: 21400009

AMOUNT \$127.77

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MMC Operating
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Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

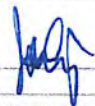
AMOUNT 2,655.42

G/L NUMBER: 10255040

CL #000084

EXPLANATION: QIPP quarterly payment received in October, MMC Portion -- Broadmoor

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: 

RUN DATE:04/21/21
TIME:09:52

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

PAGE 7
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHB 000083 04/21/21 127.77 MEMORIAL MEDICAL CENTER *Broadmoor Interest*
NHB 000084 04/21/21 2,655.42 MEMORIAL MEDICAL CENTER *Broadmoor QIPP*
TOTALS: 2,783.19

APPROVED
OK

APR 21 2021

GOVERNMENT AUDITOR
CLARENCE B. GIBSON, JR., KANSAS

Crescent

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

AMOUNT \$109.67

CALCULATOR
C/L NUMBER: 21400010

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MMC Operating

Date Requested: 4/19/21

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FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

APR 19 2021

CK# 0017

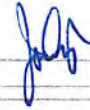
AMOUNT 2,178.33

G/L NUMBER: 10255040

EXPLANATION: QIPP quarterly payment received in October, MMC Portion - Crescent

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY:



RUN DATE:04/21/21
TIME:09:52

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

PAGE 8
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHC	000116	04/21/21	109.67	MEMORIAL MEDICAL CENTER	Crescent Interest
NHC	000117	04/21/21	2,178.33	MEMORIAL MEDICAL CENTER	Crescent QIPP
TOTALS:			2,288.00		

APPROVED
BY

APR 21 2021

GALEON B. BOCALAN, MD
GALEON B. BOCALAN, MD

Fort Bend

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

CK # 000114
G/L NUMBER: 21400008

AMOUNT \$56.96

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MMC Operating

Date Requested: 4/19/21

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APR 19 2021

ck # 000115

FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

AMOUNT 3,018.64

G/L NUMBER: 10255040

EXPLANATION: QIPP quarterly payment received in October, MMC Portion - Fort Bend

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: 

RUN DATE:04/21/21
TIME:09:52

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

PAGE 9
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHF	000114	04/21/21	56.96	MEMORIAL MEDICAL CENTER	Fort Bend Interest
NHF	000115	04/21/21	3,018.64	MEMORIAL MEDICAL CENTER	Fort Bend QAPP
TOTALS:			3,075.60		

APR 21 2021

COUNTY CLERK
GALVESTON COUNTY, TEXAS

Solera

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

AMOUNT \$222.79

ck# 001115
G/L NUMBER: 21400011

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MMC Operating

Date Requested: 4/19/21

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FOR ACCT. USE ONLY

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

APR 19 2021

ck # 001116

AMOUNT 2,610.12

G/L NUMBER: 10255040

EXPLANATION: QIPP quarterly payment received in October, MMC Portion - *Solem*

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: *[Signature]*

Ashford Gardens

10/19/2020 Amerigroup TX SC HCLCLAIMPMT 3134681940 111000 TRN*1*1314681940*1752601231*
 10/19/2020 UNITEDHEALTHCARE HCLCLAIMPMT 746003411 124384 TRN*1*1746003411*1205296137*000004011*
 10/19/2020 HUMANA CHA DISB HCLCLAIMPMT 390864 4200001892 TRN*1*01484010177896*1610113183*
 10/20/2020 Amerigroup TX SC HCLCLAIMPMT 3134781722 111000 TRN*1*1314781722*1752601231*
 10/20/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101711900217*1912008161*0000TEK01*
 10/20/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101711900217*1912008161*0000TEK01*
 10/21/2020 WIRE OUT ASHFORD HEALTH CARE CENTER LTD
 10/21/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101810800204*1912008161*0000TEK01*
 10/21/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000107 TRN*1*1746003411*1205296137*000004011*
 10/22/2020 Amerigroup TX SC HCLCLAIMPMT 3135021943 111000 TRN*1*1315021943*1752601231*
 10/22/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/22/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102114501819*1912008161*0000TEK01*
 10/22/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102114501819*1912008161*0000TEK01*
 10/23/2020 MOLINA HEALTHCARE MOLINAACH 00891731 4200001215A* * * * * "ZZ" "ZZ" "201022*092 4"
 10/23/2020 Amerigroup TX SC HCLCLAIMPMT 3135099251 111000 TRN*1*1315099251*1752601231*
 10/23/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102212901110*1912008161*0000TEK01*
 10/23/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102212901110*1912008161*0000TEK01*
 10/23/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000199 TRN*1*1746003411*1205296137*000004011*
 10/23/2020 HEALTH HUMAN SVC HCLCLAIMPMT 1746003411 130002 TRN*1*050227251326436189*1746000156*

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QPP/Comp1	QPP/Comp 2	QPP/Comp3	QPP/Comp4 Elapse	QPP TI	
-	177.44	-	-	-	-	-	177.44
-	3,250.00	-	-	-	-	-	3,250.00
-	9,182.77	-	-	-	-	-	9,182.77
-	1,919.20	-	-	-	-	-	1,919.20
-	8,519.44	-	-	-	-	-	8,519.44
-	185.90	-	-	-	-	-	185.90
131,149.44	-	-	-	-	-	-	-
-	28,590.01	-	-	-	-	-	28,590.01
-	1,186.45	-	-	-	-	-	1,186.45
-	335.91	-	-	-	-	-	335.91
-	1,230.00	-	-	-	-	-	1,230.00
-	9,060.83	-	-	-	-	-	9,060.83
-	24,008.89	-	-	-	-	-	24,008.89
-	14,778.97	-	-	-	-	-	14,778.97
-	57,491.58	-	-	-	-	-	57,491.58
-	1,789.17	-	-	-	-	-	1,789.17
-	19,242.21	-	-	-	-	-	19,242.21
-	45,116.17	-	-	-	-	-	45,116.17
-	12,764.41	-	-	-	-	-	12,764.41
135,149.44	254,109.45	-	-	-	14,778.97	7,389.49	348,720.17

Brookmead

10/19/2020 MANAGEDNET1718 MHS PMNT 00000000000293 41 0256265
 10/19/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101611900381*1912008161*0000TEK01*
 10/19/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101611200091*1912008161*0000TEK01*
 10/19/2020 HUMANA INS CO HCLCLAIMPMT 390864 420000542058 TRN*1*001290053096790*1912634731*
 10/20/2020 HUMANA CHA DISB HCLCLAIMPMT 390864 4200001295 TRN*1*01484010177896*1610113183*
 10/20/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/20/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101711900217*1912008161*0000TEK01*
 10/21/2020 WIRE OUT CANTER HEALTH CARE CENTERS IN
 10/21/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000105 TRN*1*1746003411*1205296137*000004011*
 10/22/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/22/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000194 TRN*1*1746003411*1205296137*000004011*
 10/23/2020 MOLINA HEALTHCARE MOLINAACH 00892046 4200001215A* * * * * "ZZ" "ZZ" "201022*092 4"
 10/23/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/23/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000198 TRN*1*1746003411*1205296137*000004011*

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QPP/Comp1	QPP/Comp 2	QPP/Comp3	QPP/Comp4 Elapse	QPP TI	
-	4,147.50	-	-	-	-	-	4,147.50
-	2,407.20	-	-	-	-	-	2,407.20
-	19,874.54	-	-	-	-	-	19,874.54
-	1,967.68	-	-	-	-	-	1,967.68
-	786.62	-	-	-	-	-	786.62
-	4,300.00	-	-	-	-	-	4,300.00
-	2,532.00	-	-	-	-	-	2,532.00
22,790.91	-	-	-	-	-	-	-
-	158,714.30	-	-	-	-	-	158,714.30
-	6,880.00	-	-	-	-	-	6,880.00
-	3,789.28	-	-	-	-	-	3,789.28
-	5,110.84	-	-	-	-	-	5,110.84
-	12,900.00	-	-	-	-	-	12,900.00
-	16,979.28	-	-	-	-	-	16,979.28
22,790.91	242,779.24	-	-	-	5,110.84	2,655.42	240,129.81

Crescent

10/19/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/19/2020 UNITEDHEALTHCARE HCLCLAIMPMT 746003411 124384 TRN*1*1746003411*1205296137*000004011*
 10/19/2020 HUMANA INS CO HCLCLAIMPMT 390864 420000542058 TRN*1*001290053096790*1912634731*
 10/19/2020 HUMANA CHA DISB HCLCLAIMPMT 390864 4200001892 TRN*1*01484010177896*1610113183*
 10/20/2020 MANAGEDNET1718 MHS PMNT 000000000003168 41 0256310
 10/20/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/20/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101711900217*1912008161*0000TEK01*
 10/20/2020 HUMANA INS CO HCLCLAIMPMT 390864 420000542058 TRN*1*001290053096790*1912634731*
 10/20/2020 HUMANA CHA DISB HCLCLAIMPMT 390864 4200001892 TRN*1*01484010177896*1610113183*
 10/21/2020 WIRE OUT CANTER HEALTH CARE CENTERS IN
 10/21/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/21/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101810800204*1912008161*0000TEK01*
 10/21/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101810800204*1912008161*0000TEK01*
 10/21/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101810800204*1912008161*0000TEK01*
 10/21/2020 HEALTH HUMAN SVC HCLCLAIMPMT 1746003411 130002 TRN*1*050227251326436189*1746000156*
 10/22/2020 MANAGEDNET1718 MHS PMNT 000000000003168 41 0256362
 10/22/2020 UnitedHealthcare HCLCLAIMPMT 746003411 124384 TRN*1*1574596738*1411289245*000087726*
 10/22/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102114501819*1912008161*0000TEK01*
 10/22/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000194 TRN*1*1746003411*1205296137*000004011*
 10/23/2020 MOLINA HEALTHCARE MOLINAACH 00891731 4200001215A* * * * * "ZZ" "ZZ" "201022*092 4"
 10/23/2020 MANAGEDNET1718 MHS PMNT 000000000003168 41 0256445
 10/23/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102212901110*1912008161*0000TEK01*
 10/23/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000198 TRN*1*1746003411*1205296137*000004011*
 10/23/2020 HEALTH HUMAN SVC HCLCLAIMPMT 1746003411 130002 TRN*1*050227251326436189*1746000156*

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QPP/Comp1	QPP/Comp 2	QPP/Comp3	QPP/Comp4 Elapse	QPP TI	
-	5,518.00	-	-	-	-	-	5,518.00
-	592.00	-	-	-	-	-	592.00
-	76.39	-	-	-	-	-	76.39
-	302.73	-	-	-	-	-	302.73
-	202.50	-	-	-	-	-	202.50
-	5,820.00	-	-	-	-	-	5,820.00
-	11,872.98	-	-	-	-	-	11,872.98
-	15,137.82	-	-	-	-	-	15,137.82
-	1,367.54	-	-	-	-	-	1,367.54
84,023.79	-	-	-	-	-	-	-
-	1,850.00	-	-	-	-	-	1,850.00
-	3,508.05	-	-	-	-	-	3,508.05
-	2,929.35	-	-	-	-	-	2,929.35
-	130.00	-	-	-	-	-	130.00
-	8,624.00	-	-	-	-	-	8,624.00
-	3,472.50	-	-	-	-	-	3,472.50
-	8,350.00	-	-	-	-	-	8,350.00
-	11,003.14	-	-	-	-	-	11,003.14
-	139,732.61	-	-	-	-	-	139,732.61
-	4,356.65	-	-	-	-	-	4,356.65
-	5,850.00	-	-	-	-	-	5,850.00
-	2,590.00	-	-	-	-	-	2,590.00
-	15,423.41	-	-	-	-	-	15,423.41
-	655.11	-	-	-	-	-	655.11
84,023.79	251,785.08	-	-	-	4,356.65	2,176.33	249,569.76

Fort Bend

10/19/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101614700441*1912008161*0000TEK01*
 10/22/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102114501819*1912008161*0000TEK01*
 10/22/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000184 TRN*1*1746003411*1205296137*000004011*
 10/23/2020 MOLINA HEALTHCARE MOLINAACH 00891731 4200001215A* * * * * "ZZ" "ZZ" "201022*092 4"
 10/23/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000198 TRN*1*1746003411*1205296137*000004011*

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QPP/Comp1	QPP/Comp 2	QPP/Comp3	QPP/Comp4 Elapse	QPP TI	
-	25,823.85	-	-	-	-	-	25,823.85
-	8,854.00	-	-	-	-	-	8,854.00
-	5,349.28	-	-	-	-	-	5,349.28
-	6,037.28	-	-	-	-	-	6,037.28
-	17,463.31	-	-	-	-	-	17,463.31
81,727.74	-	-	-	-	6,037.28	3,018.64	80,709.10

Solera at West Houston

10/19/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101614700441*1912008161*0000TEK01*
 10/19/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000190 TRN*1*1746003411*1205296137*000004011*
 10/20/2020 HEALTH HUMAN SVC HCLCLAIMPMT 1746003411 130002 TRN*1*050227251326436189*1746000156*
 10/20/2020 MANAGEDNET1718 MHS PMNT 00000000000482 41 0256309
 10/20/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000105 TRN*1*1746003411*1205296137*000004011*
 10/21/2020 WIRE OUT CANTER HEALTH CARE CENTERS IN
 10/21/2020 MANAGEDNET1718 MHS PMNT 00000000000482 41 0256333
 10/21/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101810800204*1912008161*0000TEK01*
 10/21/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101810800204*1912008161*0000TEK01*
 10/21/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020101810800204*1912008161*0000TEK01*
 10/22/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102114501819*1912008161*0000TEK01*
 10/22/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000198 TRN*1*1746003411*1205296137*000004011*
 10/23/2020 MOLINA HEALTHCARE MOLINAACH 00891731 4200001215A* * * * * "ZZ" "ZZ" "201022*092 4"
 10/23/2020 Amerigroup TX SC HCLCLAIMPMT 3135099251 111000 TRN*1*1315099251*1752601231*
 10/23/2020 UHC COMMUNITY PL HCLCLAIMPMT 746003411 910000 TRN*1*2020102212901110*1912008161*0000TEK01*
 10/23/2020 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000198 TRN*1*1746003411*1205296137*000004011*
 10/23/2020 HEALTH HUMAN SVC HCLCLAIMPMT 1746003411 130002 TRN*1*050227251326436189*1746000156*

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QPP/Comp1	QPP/Comp 2	QPP/Comp3	QPP/Comp4 Elapse	QPP TI	
-	7,693.14	-	-	-	-	-	7,693.14
-	3,571.00	-	-	-	-	-	3,571.00
-	5,575.06	-	-	-	-	-	5,575.06
-	70.00	-	-	-	-	-	70.00
-	5,629.23	-	-	-	-	-	5,629.23
195,245.36	-	-	-	-	-	-	-
-	845.00	-	-	-	-	-	845.00
-	3,572.83	-	-	-	-	-	3,572.83
-	3,388.00	-	-	-	-	-	3,388.00
-	14,760.00	-	-	-	-	-	14,760.00
-	176.00	-	-	-	-	-	176.00
-	1,490.82	-	-	-	-	-	1,490.82
-	5,220.24	-	-	-	5,220.24	2,610.12	2,610.12
-	5,760.78	-	-	-	-	-	5,760.78
-	1,806.00	-	-	-	-	-	1,806.00
-	218,815.71	-	-	-	-	-	218,815.71
-	1,076.06	-	-	-	-	-	1,076.06
195,245.36	286,648.64	-	-	-	5,220.24	2,610.12	288,838.57
375,209.52	1,120,890.40	-	-	-	95,709.98	17,851.99	1,102,979.41

Caitlin Clevenger

From: Caitlin Clevenger
Sent: Monday, April 19, 2021 9:53 AM
To: 'Miller, Sara'
Subject: RE: Cantex Transfer 10.28.20

Sara,

I'm looking back through and I actually don't see that any checks were written out of any of the Cantex facilities to pay MMC for their portion of the QIPP payment. I am going to check all bank accounts and transfer information to confirm. I will most likely write those checks this week. Thank you for pointing that out.

Respectfully,
Caitlin Clevenger

Memorial Medical Center
Accountant
815 N Virginia. St
Port Lavaca, TX 77979
Ph: 361.552.0272 Fax: 361.551.4504

From: Miller, Sara <smiller@cantexcc.com>
Sent: Sunday, April 18, 2021 10:13 AM
To: Caitlin Clevenger <cclevenger@mmcportlavaca.com>
Subject: RE: Cantex Transfer 10.28.20

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Caitlin –

For Fort Bend, I don't see where you transferred out of the account, MMC's portion of the Molina qipp payment. 10/23 \$6,037.28 : \$3,018.64 to MMC and \$3,018.64 to NH. Do you show that \$3,018.64 being paid out to MMC?

Thanks,
Sara

Sara Miller, CPA
Director of Finance
Cantex Continuing Care Network, *Where we are Committed to Excellence*
2537 Golden Bear Drive
Carrollton, TX 75006
Tel: 214-954-4114 x120
Fax: 214-871-3057
smiller@cantexcc.com

From: Caitlin Clevenger <cclevenger@mmcportlavaca.com>
Sent: Wednesday, October 28, 2020 1:10 PM

To: Miller, Sara <smiller@cantexcc.com>

Subject: Cantex Transfer 10.28.20

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. If this is believed to be SPAM or Phishing, forward email as an attachment to junk@office365.com.

Good afternoon,

Please see attached support for wire transfer on 10.28.20. Please let me know if you have any questions. Thanks!

Respectfully,
Caitlin Clevenger

Memorial Medical Center

Accountant

815 N Virginia. St

Port Lavaca, TX 77979

Ph: 361.552.0272 Fax: 361.551.4504

RUN DATE:04/21/21
TIME:09:52

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

PAGE 11
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

NHS 001115 04/21/21 222.79 MEMORIAL MEDICAL CENTER *Solem Intrest*
NHS 001116 04/21/21 2,610.12 MEMORIAL MEDICAL CENTER *Solem QIPP*
TOTALS: 2,832.91

APR 21 2021
COUNTY AUDITOR
CARROLL COUNTY, TEXAS

Golden Creek

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APPROVED
ON
APR 19 2021

AMOUNT \$136.55

CK # 000075
G/L NUMBER: 21400013

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

[Signature]

RUN DATE:04/21/21
TIME:09:52

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

PAGE 10
GLCKREG

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

NHG 000075 04/21/21 136.55 MEMORIAL MEDICAL CENTER
TOTALS: 136.55

golden creek

APPROVED
OK

APR 21 2021

RECEIVED
CALIFORNIA

Gulf Pointe - MM

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
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Y
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E

MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

CL# 001001
G/L NUMBER: 21400014

AMOUNT \$71.97

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:



RUN DATE:04/21/21
TIME:09:52

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

PAGE 4
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

GPM 001001 04/21/21 71.97 MEMORIAL MEDICAL CENTER
TOTALS: 71.97

GuLF Point - mm - Interest

APR 21 2021

APR 21 2021

**CASH ON HAND
GALVESTON COUNTY, TEXAS**

Gulf Pointe - PP

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
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Y
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E

MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APR 19 2021

CX#001003

AMOUNT \$42.68

G/L NUMBER: 21400014

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY:

[Signature]

RUN DATE:04/21/21
TIME:09:52

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

PAGE 5
GLCKREG

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

GPP 001003 04/21/21 42.68 MEMORIAL MEDICAL CENTER
TOTALS: 42.68

gulf Pointe - PP Interest

APR 21 2021

APR 21 2021

**CLERK AMERICAN
CALLED IN 04/21/21, 2021**

Bethany

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
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E

MMC OPERATING

Date Requested: 4/19/21

FOR ACCT. USE ONLY

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

APPROVED
APR 19 2021

CK# 001004

AMOUNT \$212.68

G/L NUMBER: 21400015

EXPLANATION: January- March Interest

REQUESTED BY: Mayra Martinez

AUTHORIZED BY: 

RUN DATE:04/21/21
TIME:09:52

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

PAGE 3
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

BSL 001004 04/21/21 212.68 MEMORIAL MEDICAL CENTER
TOTALS: 212.68

Bethany Interest

APPROVED
JKT

APR 21 2021

CASH ON HAND
CASH ON HAND, BILLS

QIPP Payment to MMC from Nursing Facilities

Commissioner's Court

4/21/2021

NH Name	From Bank Acct #	Ck #	Payee	GL #	QIPP 1,2,3	QIPP 4 & LAPSE			TOTAL	Date
Ashford	10000018 - Prosperity		MMC - Prosperity Operating #10000001	10255040		7,389.49			7,389.49	4/21/2021
Broadmoor	10000019 - Prosperity		MMC - Prosperity Operating #10000001	10255040		2,655.42			2,655.42	4/21/2021
Crescent	10000020 - Prosperity		MMC - Prosperity Operating #10000001	10255040		2,178.33			2,178.33	4/21/2021
Fort Bend	10000021 - Prosperity		MMC - Prosperity Operating #10000001	10255040		3,018.64			3,018.64	4/21/2021
Solera	10000022 - Prosperity		MMC - Prosperity Operating #10000001	10255040		2,610.12			2,610.12	4/21/2021
Golden Creek	10000023 - Prosperity		MMC - Prosperity Operating #10000001	10255040					-	4/21/2021
Gulf Pointe-PP	10000114 - Prosperity		MMC - Prosperity Operating #10000001	10255040					-	4/21/2021
Gulf Pointe-MM	10000025 - Prosperity		MMC - Prosperity Operating #10000001						-	4/21/2021
Bethany			MMC - Prosperity Operating #10000001						-	4/21/2021
Tuscany			MMC - Prosperity Operating #10000001	10255040					-	4/21/2021
			Total:		-	17,852.00	-	-	17,852.00	

Note:

This check request register consists of QIPP Payments owed to MMC from October 2020. These check requests were not processed. Please see attached email for support.

Approved:

Jason Anglin, CEO, CFO



4/19/2021

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

1122

88-2265/1131-87

4-21-21

Date

 CHECK ARMOR
Photo Safe Deposit Details on back

Pay to the

Order of Memorial Medical Center Operating\$ 7,389. ⁴⁹/₁₀₀Seven thousand, three hundred eighty-nine dollars ⁴⁹/₁₀₀

Dollars

 Photo Safe Deposit Details on back**PROSPERITY BANK®**PORT LAVACA BANKING CENTER
1107 N. HIGHWAY 35 • PORT LAVACA, TX 77979-5102
361-552-7411 www.prosperitybankusa.com_____
County AuditorFor ~~Jan-Mar 2021~~ 1/3 Q4 QIPP_____
County Treasurer

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

MEMORIAL MEDICAL CENTER

NH BROADMOOR

815 N VIRGINIA ST

PORT LAVACA, TX 77979

000084

88-2265/1131

Date

4-21-21

PAYTO THE
ORDER OFMemorial Medical Center Operating\$ 2655. ⁴²/₁₀₀Two thousand, six hundred fifty-five dollars ⁴²/₁₀₀

DOLLARS

**PROSPERITY BANK®**_____
County Auditor

FOR

1/3 Q4 QIPP pymt (43 lapse)_____
County Treasurer

WARNING Do not accept this document unless you can see a true watermark and visible fibers from both sides.

MEMORIAL MEDICAL CENTER

NH CRESCENT

815 N VIRGINIA ST

PORT LAVACA, TX 77979

000117

88-2265/1131

Date

4-21-21

PAYTO THE
ORDER OFMemorial Medical Center Operating\$ 2178. ³³/₁₀₀Two thousand, one hundred seventy-eight dollars ³³/₁₀₀

DOLLARS

**PROSPERITY BANK®**_____
County Auditor

FOR

1/3 Q4 QIPP pymt, Molina_____
County Treasurer

**MEMORIAL MEDICAL CENTER
NH ASHFORD**

202 S ANN ST STE A
PORT LAVACA TX 77979

1121

88-2265/1131-87

4-21-21

Date

CHECK ARMOR

Pay to the

Order of Memorial Medical Center

\$ 184.⁰⁰/₁₀₀

One hundred eighty-four dollars & ⁰⁰/₁₀₀

Dollars



Photo
Safe
Deposit
Details on back



PROSPERITY BANK®

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

For Jan-Mar 2021 Interest

County Auditor

County Treasurer

MEMORIAL MEDICAL CENTER

NH BROADMOOR
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000083

88-2265/1131

Date

4-21-21

PAY

TO THE
ORDER OF

Memorial Medical Center Operating

\$ 127.⁷⁷/₁₀₀

One hundred twenty-seven dollars & ⁷⁷/₁₀₀

DOLLARS



**PROSPERITY
BANK®**

County Auditor

County Treasurer

FOR Jan-Mar 2021 Interest

MEMORIAL MEDICAL CENTER

NH CRESCENT
815 N VIRGINIA ST
PORT LAVACA, TX 77979

000116

88-2265/1131

Date

4-21-21

PAY

TO THE
ORDER OF

Memorial Medical Center Operating

\$ 109.⁴⁷/₁₀₀

One hundred nine dollars & ⁴⁷/₁₀₀

DOLLARS



**PROSPERITY
BANK®**

County Auditor

County Treasurer

FOR Jan-Mar 2021 Interest

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

1115

88-2265/1131-87

4-21-21

Date

CHECK ARMOR

Pay to the

Order of Memorial Medical Center Operating

\$ 222.79

Two hundred twenty-two dollars & 79/100

Dollars



Photo
Safe
Deposit
(See site on back)



PROSPERITY BANK

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

county auditor

county treasurer

For Jan-Mar 2021 Interest

MEMORIAL MEDICAL CENTER

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

000114

88-2265/1131

Date

4-21-21

PAY

TO THE

ORDER OF MMC Operating

Fifty-six dollars & 96/100

\$ 56.96

DOLLARS



PROSPERITY
BANK

county auditor

county treasurer

FOR Jan-Mar 2021 Interest

MEMORIAL MEDICAL CENTER

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

000075

88-2265/1131

Date

4-21-21

PAY

TO THE

ORDER OF Memorial Medical Center Operating

One hundred thirty-six dollars & 55/100

\$ 136.55

DOLLARS



PROSPERITY
BANK

county auditor

county treasurer

FOR Jan-Mar 2021 Interest

MEMORIAL MEDICAL CENTER 102019
NH BETHANY SENIOR LIVING

PH 361-553-4618
815 N VIRGINIA ST
PORT LAVACA, TX 77979

1004

88-2265/1131-87

DATE 4-21-21

CHECK ARIZON

PAY TO THE ORDER OF Memorial Medical Center Operating

\$ 212 ⁶⁴/₁₀₀

Two hundred twelve ⁶⁴/₁₀₀ dollars

DOLLARS

Photo Safe Deposit Details on Back



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

FOR Jan-Mar 2021 Interest

County Auditor

County Treasurer

MEMORIAL MEDICAL CENTER
NH GULF POINTE PLAZA
MEDICARE/MEDICAID 361-553-4618
1815 N VIRGINIA ST
PORT LAVACA, TX 77979

1001

88-2265/1131-87

DATE 4-21-21

CHECK ARIZON

PAY TO THE ORDER OF Memorial Medical Center Operating

\$ 71 ⁹⁷/₁₀₀

Seventy-one dollars ⁹⁷/₁₀₀

DOLLARS

Photo Safe Deposit Details on Back



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PORT LAVACA BANKING CENTER
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FOR Jan-Mar 2021 Interest

County Auditor

County Treasurer

MEMORIAL MEDICAL CENTER
NH GULF POINTE - PRIVATE PAY
361-553-4618
1815 N VIRGINIA ST
PORT LAVACA, TX 77979

1003

88-2265/1131-87

DATE 4-21-21

CHECK ARIZON

PAY TO THE ORDER OF Memorial Medical Center Operating

\$ 42 ⁶⁰/₁₀₀

Forty-two dollars ⁶⁰/₁₀₀

DOLLARS

Photo Safe Deposit Details on Back



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PORT LAVACA BANKING CENTER
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FOR Jan-Mar 2021 Interest

County Auditor

County Treasurer

MEMORIAL MEDICAL CENTER

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

000115

88-2265/1131

Date 4-21-21

PAY

TO THE
ORDER OF

Memorial Medical Center Operating

\$ 3018. ⁴⁴/₁₀₀

Three thousand, eighteen dollars & ⁴⁴/₁₀₀

DOLLARS



PROSPERITY
BANK

county auditor

MP

FOR

43 Q4 QIPP maling

county treasurer

Security features are included. Details on back.

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

1117

88-2265/1131-87

4/23/2021

Date

CHECK ARMOR

Pay to the
Order of

MMC operating

\$ 2,610.¹²/₁₀₀

Two thousand six hundred ten and 12/100

Dollars



Photo
Safe
Deposit®
Details on back



PROSPERITY BANK®

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

County Auditor

For October QIPP payment.

County Treasurer

Interest To MMC From NH

NH Name	From CPSI Bank Acct #	CK#	Payee	GL #		Amt	Date
Ashford	10000018 - Prosperity		MMC -Prosperity Operating #10000001	21400012	January-March 2021 Interest Earned	184.60	4/19/2021
Broadmoor	10000019 - Prosperity		MMC -Prosperity Operating #10000001	21400009	January-March 2021 Interest Earned	127.77	4/19/2021
Crescent	10000020 - Prosperity		MMC -Prosperity Operating #10000001	21400010	January-March 2021 Interest Earned	109.67	4/19/2021
Fort Bend	10000021 - Prosperity		MMC -Prosperity Operating #10000001	21400008	January-March 2021 Interest Earned	56.96	4/19/2021
Solera	10000022 - Prosperity		MMC -Prosperity Operating #10000001	21400011	January-March 2021 Interest Earned	222.79	4/19/2021
Golden Creek	10000023 - Prosperity		MMC -Prosperity Operating #10000001	21400013	January-March 2021 Interest Earned	136.55	4/19/2021
Gulf Pointe-PP	10000025 - Prosperity		MMC -Prosperity Operating #10000001	21400014	January-March 2021 Interest Earned	42.68	4/19/2021
Gulf Pointe-MM	10000025 - Prosperity		MMC -Prosperity Operating #10000001	21400014	January-March 2021 Interest Earned	71.97	4/19/2021
Bethany	10000026 - Prosperity		MMC -Prosperity Operating #10000001	21400015	January-March 2021 Interest Earned	212.68	4/19/2021
Tuscany			MMC -Prosperity Operating #10000001	21400016	January-March 2021 Interest Earned		
						1,165.67	

Note:

J

8

RUN DATE:04/20/21
TIME:16:15

MEMORIAL MEDICAL CENTER
CHECK REGISTER
04/20/21 THRU 04/20/21

PAGE 1
GLCKREG

BANK--CHECK-----

CODE NUMBER DATE AMOUNT PAYEE

A/P * 189701 04/20/21 46,055.53CR VICTORIA ANESTHESIOLOGY
A/P 190115 04/20/21 46,055.53 VICTORIA ANESTHESIOLOGY
TOTALS: .00

Stop Payment Details

Transaction Number

Check 189701

Action Stop

Date Written 03/17/2021

Account DDA (MEMORIAL MEDICAL CENTER -
OPERATING)

Amount \$46,055.53

Reason Lost

Written to VICTORIA ANESTHESIOLOGY

Company Name COUNTY OF CALHOUN TEXAS

Requested Apr 20, 2021 2:26 PM CDT

Contact Name CLARRI ATKINSON

Expiration Date 10/20/2021

Phone Number

Status History

Timestamp	Status	Initiator	Description
Apr 20, 2021 2:26:56 PM CDT	Stopped	SYSTEM	Request successfully placed.
Apr 20, 2021 2:26:55 PM CDT	Pending		Request entered into system.

Close

Print

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
030428	03/04/21	46,055.53			46,055.53
CHECK NO. 190115 04/20/21		TOTALS 46,055.53	TOTALS		46,055.53

MEMORIAL MEDICAL CENTER • PORT LAVACA, TEXAS 77979

190115

REFERENCE NO.	DATE	GROSS AMOUNT	DISCOUNT %	DISCOUNT AMOUNT	NET PAYABLE
030428	03/04/21	46,055.53			46,055.53
CHECK NO. 190115		TOTALS 46,055.53	TOTALS		46,055.53

MEMORIAL
MEDICAL  CENTER

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

PROSPERITY BANK

88-2265
1131

190115

V1058	190115
DATE	AMOUNT
04/20/21	\$46,055.53

Forty-Six Thousand Fifty-Five Dollars and Fifty-Three Cents

PAY
TO THE
ORDER
OF
VICTORIA ANESTHESIOLOGY
ASSOCIATES, L.L.P.
1501 E MOCKINGBIRD SUITE 101
VICTORIA, TX 77904

