

THE FOLLOWING MEMBERS WERE PRESENT:

Vern L. Lyssy
County Judge

(ABSENT) David Hall, Commissioner Precinct 1
Ronald Best, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

MEETING MINUTES

The Commissioners Court of Calhoun County, Texas will meet on Wednesday, October 15, 2025 at 10:00 AM in the Commissioners' Courtroom in the County Courthouse at 211 S. Ann Street, Suite 104, Port Lavaca, Calhoun County, Texas 77979.

AGENDA

1. Call Meeting to Order.

Meeting was called to order by Judge Vern Lyssy at 10am.

2. Invocation.

Commissioner Ronald Best

3. Pledge of Allegiance.

US Flag: Commissioner Reese

Texas Flag: Commissioner Behrens

4. Discussion of Public Matters and Public Participation.

Gary Jackson requested the Commissioners Court have a meeting with CCISD over allowing a book titled "Where Did the Towers Go" in School Libraries. Shelley Menefee, Mike Menefee, Pat McCormack, Tim Duffey and Juanita Orsak expressed concerns with Improper Issuance of Development Permit, Undisclosed Sewer Line Crossing AE Flood Zone, Placement of Doublewide Trailer without Compliance, and use of Common Area Drill Site.

5. Approve Commissioner Court Minutes.

RESULT:	Approved
MOVER:	County Commissioner Pct 4 Gary Reese
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

6. Consider and take necessary action to approve the EMS Training Course fees as set forth in the "Training Course Price List" and to authorize estimated revenues of \$2,000 for Fiscal Year 2025 and \$25,000 for Fiscal Year 2026.

RESULT:	Approved
MOVER:	County Judge Vern Lyssy
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

8. Consider and take necessary action to approve Calhoun County EMS to apply and set up an account with Certified Payments to accept Credit Card Payments in the CCEMS Training Program and allow EMS Director to sign/complete application.

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 4 Gary Reese
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

7. Consider and take necessary action to transfer salary funds that will not be utilized in 2025 to capital outlay line item

RESULT:	Approved
MOVER:	County Commissioner Pct 4 Gary Reese
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

9. Public Hearing regarding amending the 2025 and 2026 Calhoun County budgets.

Public Hearing opened at 10:35am
Erica Perez read budget amendments.
Public Hearing closed at 10:46

10. Consider and take necessary action to amend the 2025 and 2026 Calhoun County budgets.

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

11. To Accept the renewal of the 2026 Transamerica Life Insurance Retiree Plan. This supplemental plan for retirees is at no cost to the County.

RESULT:	Approved
MOVER:	County Commissioner Pct 4 Gary Reese
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

12. Consider and take necessary action on a Resolution of Calhoun County Commissioners Court as the taxing unit to nominate candidates for the Board of Directors of the Calhoun County Appraisal District for term beginning January 1, 2026 through December 31, 2027.

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 4 Gary Reese
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

13. Consider and take necessary action to adopt the FY 2025 TIDC Formula Grant Resolution.

RESULT:	Approved
MOVER:	County Judge Vern Lyssy
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

14. Consider and take necessary action to accept the resignation of Constable Pct. 4 Kevin Koliba.

RESULT:	Approved
MOVER:	County Commissioner Pct 4 Gary Reese
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

15. Consider and take necessary action on insurance proceeds check from TAC in the amount of \$8,133.92 for damages to a Sheriff's Office vehicle on 8/24/25.

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

16. Consider and take necessary action to accept anonymous donation to the Sheriffs Office to be deposited into the Motivation account (2697-001-49082-679) in the amount of \$75.00

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

17. Consider and take necessary action to accept a proposal from KSBR, LLC to prepare a grant application to the Matagorda Bay Mitigation Trust to update the playground equipment & picnic tables at Six Mile Pier Park; preparation fee of \$1000, to be paid with GOMESA funds

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 4 Gary Reese
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

18. Consider and take necessary action to accept a donation to the Sheriff's Office from the Law Enforcement Partners to be deposited into the Motivation account (2697-001-49082-679) in the amount of \$1513.00

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

19. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust grant for Swan Point Playground Addition project and authorize necessary signatures.

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

20. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust grant for King Fisher Beach Restroom project and authorize necessary signatures.

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

21. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust – Specific Call grant for Green Lake Breach Repair and authorize necessary signatures.

RESULT:	Approved
MOVER:	County Commissioner Pct 4 Gary Reese
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

22. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust for Precinct 1 – Little Chocolate Bayou Bridge project and authorize necessary signatures.

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

23. Consider and take necessary action to accept a Maintenance Agreement with Victoria Air Conditioning, Ltd for (2) Mini Splits Heat Pump and (1) DX Split System Electric Heat at an annual cost of \$1,876.00, to be billed quarterly at \$469.00 and authorize Commissioner Gary Reese to sign agreement.

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

24. Consider and take the necessary action to accept a donation for Calhoun County Precinct 1 in the amount of \$500 in the form of a check and place into the 2697 Donation Fund.

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 4 Gary Reese
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

25. Consider and take necessary action to declare the attached list of Non-Inventory items from the District Clerks Office as Surplus/Salvage.

RESULT:	Approved
MOVER:	County Commissioner Pct 4 Gary Reese
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

26. Consider and take necessary action to declare the attached list of Non-Inventory from the District Clerks Office as Waste.

RESULT:	Approved
MOVER:	County Judge Vern Lyssy
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

27. Consider and take necessary action to allow Calhoun County Museum to change prices of items in the Museum Gift Shop.

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

28. Reports.

- a. Floodplain - September, 2025
- b. Sheriff Department - September, 2025
- c. Justice of the Peace Pct 1 - September, 2025
- d. Justice of the Peace Pct 2 - September, 2025.
- h. Justice of the Peace Pct 3 - September, 2025
- e. Justice of the Peace Pct 4 - September, 2025
- f. Justice of the Pct 5 -September, 2025
- g. Texas Agrilife Extension Service - August - September, 2025
 - 4-H and Youth Development
 - Agriculture and Nature Resources
 - Family and Community Health
 - Coastal and Marine

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 4 Gary Reese
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

29. Consider and take necessary action on budget adjustments.

RESULT:	Approved
MOVER:	County Commissioner Pct 4 Gary Reese
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

30. Approval of Bills and Payroll

a. MMC Bills:

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 4 Gary Reese
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

b. County Bills:

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 3 Joel Behrens
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

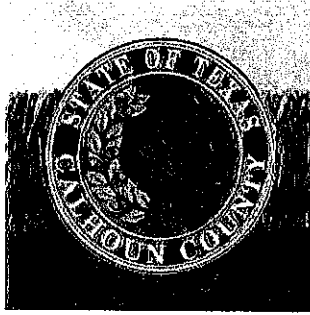
c. Indigent Health Care:

RESULT:	Approved
MOVER:	County Commissioner Pct 2 Ronald Best
SECONDER:	County Commissioner Pct 4 Gary Reese
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese

31. Adjourn.

11:07am

RESULT:	Approved
MOVER:	County Commissioner Pct 3 Joel Behrens
SECONDER:	County Commissioner Pct 2 Ronald Best
AYES:	County Judge Lyssy, County Commissioner Pct 2 Best, County Commissioner Pct 3 Behrens, County Commissioner Pct 4 Reese



CALHOUN COUNTY COMMISSIONERS' COURT PACKET COMPLETION SHEET

-
- ✓ All Agenda Items Properly Numbered
- ✓ Contracts Completed and Signed
- ✓ All 1295's Accepted
- ✓ All Documents for Clerk Signature Flagged
(All documents needing to be attested to need to be signed day of Commissioner's Court.)

On this 15th day of October 2025, the packet
for the 15th day of October 2025 Commissioners'
Special Regular Session was submitted from the Calhoun County Judge's
office to the Calhoun County Clerk's Office.

Debbie Vickery
Calhoun County Judge/Assistant

AGENDA



Vern L. Lyssy
County Judge

David Hall, Commissioner, Precinct 1
Ronald Best, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

NOTICE OF MEETING

The Commissioners' Court of Calhoun County, Texas will meet on
Wednesday, October 15, 2025 at 10:00 a.m. in the
Commissioners' Courtroom at the County Courthouse located at 211 S. Ann Street, Suite
104, Port Lavaca, Calhoun County, Texas.

AGENDA

The subject matter of such meeting is as follows:

1. Call meeting to order.
2. Invocation.
3. Pledges of Allegiance.
4. General Discussion of Public Matters and Public Participation.
5. Approve October 1, 2025 Commissioners' Court Meeting Minutes. (VLL)
6. Consider and take necessary action to approve the EMS Training Course fees as set forth in the "Training Course Price List" and to authorize estimated revenues of \$2,000 for Fiscal Year 2025 and \$25,000 for Fiscal Year 2026. (VLL)
7. Consider and take necessary action to approve Calhoun County EMS to apply and set up an account with Certified Payments to accept Credit Card Payments in the CCEMS Training Program and allow EMS Director to sign/complete application. (VLL)
8. Consider and take necessary action to transfer salary funds that will not be utilized in 2025 to capital outlay line item. (VLL)
9. Public Hearing regarding amending the 2025 and 2026 Calhoun County budgets. (VLL)

FILED
AT 1:55 O'CLOCK P.M.

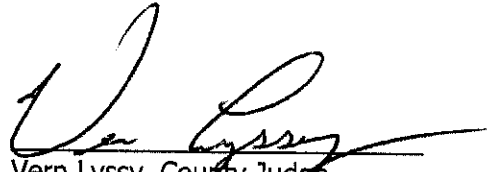
OCT 09 2025

ANNA GOODMAN
COUNTY CLERK, CALHOUN COUNTY, TEXAS
DEPUTY:

Kaddie Smith

10. Consider and take necessary action to amend the 2025 and 2026 Calhoun County budgets. (VLL)
11. To Accept the renewal of the 2026 Transamerica Life Insurance Retiree Plan. This supplemental plan for retirees is at no cost to the County. (VLL)
12. Consider and take necessary action on a Resolution of Calhoun County Commissioners Court as the taxing unit to nominate candidates for the Board of Directors of the Calhoun County Appraisal District for term beginning January 1, 2026 through December 31, 2027. (VLL)
13. Consider and take necessary action to adopt the FY 2025 TIDC Formula Grant Resolution. (VLL)
14. Consider and take necessary action to accept the resignation of Constable Pct. 4 Kevin Koliba. (VLL)
15. Consider and take necessary action on insurance proceeds check from TAC in the amount of \$8,133.92 for damages to a Sheriff's Office vehicle on 8/24/25. (VLL)
16. Consider and take necessary action to accept anonymous donation to the Sheriffs Office to be deposited into the Motivation account (2697-001-49082-679) in the amount of \$75.00. (VLL)
17. Consider and take necessary action to accept a proposal from KSBR, LLC to prepare a grant application to the Matagorda Bay Mitigation Trust to update the playground equipment & picnic tables at Six Mile Pier Park; preparation fee of \$1000, to be paid with GOMESA funds. (RB)
18. Consider and take necessary action to accept donation to the Sheriffs Office from the Law Enforcement Partners to be deposited into the Motivation account (2697-001-49082-679) in the amount of \$1513.00. (VLL)
19. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust grant for Swan Point Playground Addition project and authorize necessary signatures. (GDR)
20. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust grant for King Fisher Beach Restroom project and authorize necessary signatures. (GDR)
21. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust – Specific Call grant for Green Lake Breach Repair and authorize necessary signatures (GDR)

22. Consider and take necessary action to authorize Commissioner Reese to apply for a Matagorda Bay Mitigation Trust for Precinct 1 – Little Chocolate Bayou Bridge project and authorize necessary signatures. (GDR)
23. Consider and take necessary action to accept Maintenance Agreement with Victoria Air Conditioning, Ltd for (2) Mini Splits Heat Pump and (1) DX Split System Electric Heat at an annual cost of \$1,876.00 to be billed quarterly at \$469.00 and authorize Commissioner Gary Reese to sign agreement. (GDR)
24. Consider and take the necessary action to accept a donation for Calhoun County Precinct 1 in the amount of \$500 in the form of a check and place into the 2697 Donation Fund. (VLL)
25. Consider and take necessary action to declare the attached list of Non-Inventory from the District Clerks Office as Surplus/Salvage. (VLL)
26. Consider and take necessary action to declare the attached list of Non-Inventory from the District Clerks Office as Waste. (VLL)
27. Consider and take necessary action to allow Calhoun County Museum to change prices of items in the Museum Gift Shop. (VLL)
28. Accept Reports from the following County Offices:
 - a) Floodplain – September, 2025
 - b) Sheriff Department – September, 2025
 - c) Justice of the Peace Pct 1 – September, 2025
 - d) Justice of the Peace Pct 2 – September, 2025
 - e) Justice of the Peace Pct 3 – September, 2025
 - f) Justice of the Peace Pct 4 – September, 2025
 - g) Justice of the Peace Pct 5 – September, 2025
 - h) Texas Agrilife Extension Service – August - September, 2025
 - 4-H and Youth Development
 - Agriculture and Nature Resources
 - Family and Community Health
 - Coastal and Marine
29. Consider and take necessary action on 2025 budget adjustments. (VLL)
30. Approval of bills and payroll. (VLL)
31. Adjourn.



Vern Lyssy, County Judge
Calhoun County, Texas

A copy of this Notice has been placed on the inside bulletin board of the Calhoun County Courthouse, 211 South Ann Street, Port Lavaca, Texas, which is readily accessible to the general public during regular business hours. This Notice shall remain posted continuously for at least 3 business days preceding the scheduled meeting time. For your convenience, you may visit the county's website at www.calhouncourt.org under "Commissioners' Court Agenda" for any official court postings.

04

#4-1

Calhoun County Commissioners Court Public Participation Form

1. Review Rules of Procedure, Conduct and Decorum.
2. Fill out Public Participation Form completely and submit to the Clerk.
3. When agenda item is called, clearly state your name into the microphone.
3 minutes will begin once you approach the podium.

(Please print)

Name: Gerhardt John Jackson

Do you represent any particular group or organization? YES ☒ NO (Circle One)

Please provide the name: _____

Which agenda item do you wish to address? School Board Request

NOTE: By submitting this request to address the Calhoun County Commissioners Court (the "Commissioners Court"), I agree to state my name for the Commissioners Court's record and to comply with the Rules of Procedure, Conduct and Decorum. I understand the Commissioners Court is not a proper forum to publicly demean any group or individual and that the use of any profane, insulting, demeaning or threatening language directed toward the Commissioners Court and/or any group or individual and/or the use of any slurs or epithets relating to race, religion, disability, ethnic origin, sexual orientation or any other protected class of individuals will not be tolerated. I also understand that in order to prevent distractions and interruptions to the orderly business being conducted by the Commissioners Court, I shall not display or bring into the Commissioners Courtroom items including, but not limited to signs; placards; posters; photographs; flags; personal property structures or personal property items other than personal effects, notebooks, laptops and personal devices; or other related items unless such items are requested by the Commissioners Court for demonstration purposes in relation to a specific Agenda Item being considered by the Commissioners Court. I acknowledge and agree that, if I fail to conduct myself according to the Rules, the remainder of my speaking time may be cancelled; I may be removed from the meeting; receive a Contempt of Court citation pursuant to Chapter 81 of the Texas Local Government Code; be charged under Texas Penal Code Section 42.05 (Disrupting Meeting or Procession); be charged under Texas Penal Code Section 38.13 (Hindering Proceedings By Disorderly Conduct); lose my speaking privileges; and/or receive any such other civil and/or criminal sanctions as may be authorized under the Constitution, Statutes, and Codes of the State of Texas.

I have read and agree to abide by the Calhoun County Rules of Procedure, Conduct and Decorum at Meetings of the Calhoun County Commissioners Court.

Signature: Dary Jackson Date: Oct. 15, 2025

24 years later the world is waking up
#fblifestyle #neverforget

WTC 1
North Tower'
on 9/11.

**WHICH SECTION WILL
HIT THE GROUND FIRST?**
A. or B.?

B.

A.

On 9/11 we were told that the section on the right (A) fell through the path of greatest resistance at nearly the same rate it would have taken to fall through the air.

This is physically impossible and violates Newton's laws of motion.

contact
floors,
around
80.

COLLAPSE VS. DEMOLITION - 9/11 EXPERIMENTS

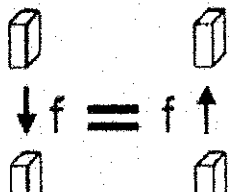
STARTS TO FALL STRAIGHT DOWN

STOPS

STARTS TO FALL STRAIGHT DOWN

STOPS

Newton's Third Law



At the next meeting I would like to submit a request to the CCISD a joint meeting with the County Commissioners Court board

October XX, 2024

County Commissioner's Court

Calhoun County, Texas

Here is an example of my request letter:

School Board Members

Calhoun County School District

Dear School Board Members,

We are writing to request a joint hearing or meeting to discuss a matter of mutual interest concerning the availability of educational resources for our students. A book titled *Where Did the Towers Go* by Doctor Judy Wood is currently available in our county public library. We believe that making this book accessible to students in school libraries would provide them with a broader range of perspectives and information on important topics.

Given the relevance of this book to educational discussions, we kindly request that you consider including it in your school libraries. We would appreciate the opportunity to discuss this matter further in a joint hearing, as outlined in

Section 33.022 of the Texas Education Code for collaborative efforts, though our primary aim here is to support enhanced access to educational materials.

We look forward to your response and to the possibility of working together to enrich the educational experience for our students.

Sincerely,
County Commissioner's Court.

Reference note:

Sec. 33.022. CONTRACT WITH COUNTY OR MUNICIPALITY.

(a) A

school district may enter into contracts with a county or municipality in which the district is located to provide joint library facilities.

(b) The board of trustees of the school district and the commissioners court of the county or governing body of the municipality must conduct public hearings before entering into a

contract under this section. The hearings may be held jointly.

Added by Acts 1995, 74th Leg., ch. 260, Sec. 1, eff. May 30, 1995

Senate Bill 13 (SB 13), a 2025 law that changes how Texas public schools select and manage library materials, effective for the 2025-26 school year. Key provisions include requiring school board approval for all new library materials, banning books with "indecent" or "profane" content based on FCC guidelines, increasing parental oversight, and mandating the creation of a School Library Advisory Council (SLAC) or a similar parent-driven committee.

Key changes from SB 13

- **School board approval:**

School boards must now approve all library materials before they can be purchased or made available.

- **Public review:**

Before a board can approve new library materials, a list of the proposed books must be publicly posted for at least 30 days for public comment.

- **Content restrictions:**

The law prohibits library materials with "profane" or "indecent" content, defining these terms based on the Federal Communications Commission's broadcast guidelines.

- **Parental control:**

Parents are given increased transparency and control over their child's access to library materials and can challenge books they find inappropriate.

- **School Library Advisory Council (SLAC):**

Districts are required to create a SLAC, or a similar parent-led committee, to review library materials.

- **Challenge process:**

The law establishes a process for challenging library materials and creates new requirements for challenge committees.

- **Broader application:**

The law applies to all materials in school library catalogs, including those in classroom libraries, online catalogs, and mobile applications.

#4-2

Calhoun County Commissioners Court Public Participation Form

1. Review Rules of Procedure, Conduct and Decorum.
2. Fill out Public Participation Form completely and submit to the Clerk.
3. When agenda item is called, clearly state your name into the microphone.
3 minutes will begin once you approach the podium.

(Please print)

Name: Shelley McNettie

Do you represent any particular group or organization? YES ☒ NO ☐ (Circle One)

Please provide the name: Smilandings Subdivision

Which agenda item do you wish to address? Public

NOTE: By submitting this request to address the Calhoun County Commissioners Court (the "Commissioners Court"), I agree to state my name for the Commissioners Court's record and to comply with the Rules of Procedure, Conduct and Decorum. I understand the Commissioners Court is not a proper forum to publicly demean any group or individual and that the use of any profane, insulting, demeaning or threatening language directed toward the Commissioners Court and/or any group or individual and/or the use of any slurs or epithets relating to race, religion, disability, ethnic origin, sexual orientation or any other protected class of individuals will not be tolerated. I also understand that in order to prevent distractions and interruptions to the orderly business being conducted by the Commissioners Court, I shall not display or bring into the Commissioners Courtroom items including, but not limited to signs; placards; posters; photographs; flags; personal property structures or personal property items other than personal effects, notebooks, laptops and personal devices; or other related items unless such items are requested by the Commissioners Court for demonstration purposes in relation to a specific Agenda Item being considered by the Commissioners Court. I acknowledge and agree that, if I fail to conduct myself according to the Rules, the remainder of my speaking time may be cancelled; I may be removed from the meeting; receive a Contempt of Court citation pursuant to Chapter 81 of the Texas Local Government Code; be charged under Texas Penal Code Section 42.05 (Disrupting Meeting or Procession); be charged under Texas Penal Code Section 38.13 (Hindering Proceedings By Disorderly Conduct); lose my speaking privileges; and/or receive any such other civil and/or criminal sanctions as may be authorized under the Constitution, Statutes, and Codes of the State of Texas.

I have read and agree to abide by the Calhoun County Rules of Procedure, Conduct and Decorum at Meetings of the Calhoun County Commissioners Court.

Signature: [Signature] Date: 10/16/2025

#4-3

Calhoun County Commissioners Court

Public Participation Form

1. Review Rules of Procedure, Conduct and Decorum.
2. Fill out Public Participation Form completely and submit to the Clerk.
3. When agenda item is called, clearly state your name into the microphone.
3 minutes will begin once you approach the podium.

(Please print)

Name: Mike Mewefree

Do you represent any particular group or organization? YES ☒ NO (Circle One)

Please provide the name: Sanilanding

Which agenda item do you wish to address? Port Alto Permitting on Reserve B.

NOTE: By submitting this request to address the Calhoun County Commissioners Court (the "Commissioners Court"), I agree to state my name for the Commissioners Court's record and to comply with the Rules of Procedure, Conduct and Decorum. I understand the Commissioners Court is not a proper forum to publicly demean any group or individual and that the use of any profane, insulting, demeaning or threatening language directed toward the Commissioners Court and/or any group or individual and/or the use of any slurs or epithets relating to race, religion, disability, ethnic origin, sexual orientation or any other protected class of individuals will not be tolerated. I also understand that in order to prevent distractions and interruptions to the orderly business being conducted by the Commissioners Court, I shall not display or bring into the Commissioners Courtroom items including, but not limited to signs; placards; posters; photographs; flags; personal property structures or personal property items other than personal effects, notebooks, laptops and personal devices; or other related items unless such items are requested by the Commissioners Court for demonstration purposes in relation to a specific Agenda Item being considered by the Commissioners Court. I acknowledge and agree that, if I fail to conduct myself according to the Rules, the remainder of my speaking time may be cancelled; I may be removed from the meeting; receive a Contempt of Court citation pursuant to Chapter 81 of the Texas Local Government Code; be charged under Texas Penal Code Section 42.05 (Disrupting Meeting or Procession); be charged under Texas Penal Code Section 38.13 (Hindering Proceedings By Disorderly Conduct); lose my speaking privileges; and/or receive any such other civil and/or criminal sanctions as may be authorized under the Constitution, Statutes, and Codes of the State of Texas.

I have read and agree to abide by the Calhoun County Rules of Procedure, Conduct and Decorum at Meetings of the Calhoun County Commissioners Court.

Signature: Michael A. Mewefree Date: 10/15/2025

#4-4

Calhoun County Commissioners Court Public Participation Form

1. Review Rules of Procedure, Conduct and Decorum.
2. Fill out Public Participation Form completely and submit to the Clerk.
3. When agenda item is called, clearly state your name into the microphone.
3 minutes will begin once you approach the podium.

(Please print)

Name: B + McCormick

Do you represent any particular group or organization? YES ☒ NO (Circle One)

Please provide the name: Sunlandings

Which agenda item do you wish to address? Reserve B Permitting

NOTE: By submitting this request to address the Calhoun County Commissioners Court (the "Commissioners Court"), I agree to state my name for the Commissioners Court's record and to comply with the Rules of Procedure, Conduct and Decorum. I understand the Commissioners Court is not a proper forum to publicly demean any group or individual and that the use of any profane, insulting, demeaning or threatening language directed toward the Commissioners Court and/or any group or individual and/or the use of any slurs or epithets relating to race, religion, disability, ethnic origin, sexual orientation or any other protected class of individuals will not be tolerated. I also understand that in order to prevent distractions and interruptions to the orderly business being conducted by the Commissioners Court, I shall not display or bring into the Commissioners Courtroom items including, but not limited to signs; placards; posters; photographs; flags; personal property structures or personal property items other than personal effects, notebooks, laptops and personal devices; or other related items unless such items are requested by the Commissioners Court for demonstration purposes in relation to a specific Agenda Item being considered by the Commissioners Court. I acknowledge and agree that, if I fail to conduct myself according to the Rules, the remainder of my speaking time may be cancelled; I may be removed from the meeting; receive a Contempt of Court citation pursuant to Chapter 81 of the Texas Local Government Code; be charged under Texas Penal Code Section 42.05 (Disrupting Meeting or Procession); be charged under Texas Penal Code Section 38.13 (Hindering Proceedings By Disorderly Conduct); lose my speaking privileges; and/or receive any such other civil and/or criminal sanctions as may be authorized under the Constitution, Statutes, and Codes of the State of Texas.

I have read and agree to abide by the Calhoun County Rules of Procedure, Conduct and Decorum at Meetings of the Calhoun County Commissioners Court.

Signature: [Signature] Date: 10-15-25

#4-5

Calhoun County Commissioners Court Public Participation Form

1. Review Rules of Procedure, Conduct and Decorum.
2. Fill out Public Participation Form completely and submit to the Clerk.
3. When agenda item is called, clearly state your name into the microphone.
3 minutes will begin once you approach the podium.

(Please print)

Name: Tim P. Duffy

Do you represent any particular group or organization? YES ☒ NO (Circle One)

Please provide the name: _____

Which agenda item do you wish to address? South Landing

NOTE: By submitting this request to address the Calhoun County Commissioners Court (the "Commissioners Court"), I agree to state my name for the Commissioners Court's record and to comply with the Rules of Procedure, Conduct and Decorum. I understand the Commissioners Court is not a proper forum to publicly demean any group or individual and that the use of any profane, insulting, demeaning or threatening language directed toward the Commissioners Court and/or any group or individual and/or the use of any slurs or epithets relating to race, religion, disability, ethnic origin, sexual orientation or any other protected class of individuals will not be tolerated. I also understand that in order to prevent distractions and interruptions to the orderly business being conducted by the Commissioners Court, I shall not display or bring into the Commissioners Courtroom items including, but not limited to signs; placards; posters; photographs; flags; personal property structures or personal property items other than personal effects, notebooks, laptops and personal devices; or other related items unless such items are requested by the Commissioners Court for demonstration purposes in relation to a specific Agenda Item being considered by the Commissioners Court. I acknowledge and agree that, if I fail to conduct myself according to the Rules, the remainder of my speaking time may be cancelled; I may be removed from the meeting; receive a Contempt of Court citation pursuant to Chapter 81 of the Texas Local Government Code; be charged under Texas Penal Code Section 42.05 (Disrupting Meeting or Procession); be charged under Texas Penal Code Section 38.13 (Hindering Proceedings By Disorderly Conduct); lose my speaking privileges; and/or receive any such other civil and/or criminal sanctions as may be authorized under the Constitution, Statutes, and Codes of the State of Texas.

I have read and agree to abide by the Calhoun County Rules of Procedure, Conduct and Decorum at Meetings of the Calhoun County Commissioners Court.

Signature: Tim P. Duffy Date: 10-15-25

#4-11

Calhoun County Commissioners Court

Public Participation Form

1. Review Rules of Procedure, Conduct and Decorum.
2. Fill out Public Participation Form completely and submit to the Clerk.
3. When agenda item is called, clearly state your name into the microphone.
3 minutes will begin once you approach the podium.

(Please print)

Name: Juanita Orsak

Do you represent any particular group or organization? YES ☒ NO (Circle One)

Please provide the name: _____

Which agenda item do you wish to address? N/A

NOTE: By submitting this request to address the Calhoun County Commissioners Court (the "Commissioners Court"), I agree to state my name for the Commissioners Court's record and to comply with the Rules of Procedure, Conduct and Decorum. I understand the Commissioners Court is not a proper forum to publicly demean any group or individual and that the use of any profane, insulting, demeaning or threatening language directed toward the Commissioners Court and/or any group or individual and/or the use of any slurs or epithets relating to race, religion, disability, ethnic origin, sexual orientation or any other protected class of individuals will not be tolerated. I also understand that in order to prevent distractions and interruptions to the orderly business being conducted by the Commissioners Court, I shall not display or bring into the Commissioners Courtroom items including, but not limited to signs; placards; posters; photographs; flags; personal property structures or personal property items other than personal effects, notebooks, laptops and personal devices; or other related items unless such items are requested by the Commissioners Court for demonstration purposes in relation to a specific Agenda Item being considered by the Commissioners Court. I acknowledge and agree that, if I fail to conduct myself according to the Rules, the remainder of my speaking time may be cancelled; I may be removed from the meeting; receive a Contempt of Court citation pursuant to Chapter 81 of the Texas Local Government Code; be charged under Texas Penal Code Section 42.05 (Disrupting Meeting or Procession); be charged under Texas Penal Code Section 38.13 (Hindering Proceedings By Disorderly Conduct); lose my speaking privileges; and/or receive any such other civil and/or criminal sanctions as may be authorized under the Constitution, Statutes, and Codes of the State of Texas.

I have read and agree to abide by the Calhoun County Rules of Procedure, Conduct and Decorum at Meetings of the Calhoun County Commissioners Court.

Signature: Juanita Orsak Date: 10/15/25

Homeowners of Sunilandings Subdivision
P.O. Box 69
Port Lavaca, Texas 77979

October 13, 2025

Vern Lyssy
Calhoun County Judge
211 S. Ann Street
Port Lavaca, TX 77979

Cc: Commissioners and Floodplain Administrator for Calhoun County, Texas

Subject: Formal Complaint – Improper Issuance of Development Permit, Undisclosed Sewer Line Crossing AE Flood Zone, Placement of Double-Wide Trailer Without Compliance, and Use of Common Area Drill Site (Reserve B, Sunilandings Subdivision)

Dear Judge Lyssy,

We, the undersigned residents and property owners of Sunilandings Subdivision, are submitting this formal complaint regarding development permit #6843 issued for the placement of a manufactured home and associated sewer infrastructure on Reserve B, Sunilandings Subdivision.

Our concern is that the permit was approved without proper disclosure or review of the sewer line's crossing within the AE flood zone. Additionally, a double-wide trailer was moved onto the property and set in place without compliance with the issued permit or the requirements of the Calhoun County Flood Damage Prevention Order. The structure appears to have been installed before engineering review, elevation certification, or floodplain approval was completed.

Texas courts and county platting authorities consistently interpret a Reserve as a non-residential tract that is set aside for common use, utilities, drainage, recreational purposes, or oil and gas activities, depending on the recorded plat notation. A Reserve is not a private residential lot and cannot be used for habitation unless the property is formally replatted and approved by the County Commissioners' Court.

Reserve B in Sunilandings Subdivision is labeled on the recorded Sunilandings Phase I Plat (Volume Z, Page 527, Calhoun County Records) as a Common Area and Oil & Gas Drill Site. Therefore, it is legally a non-residential tract dedicated for common use, utility and drilling use. Issuing a permit for a residential structure or double-wide trailer on Reserve B violates both the recorded plat dedication and Texas subdivision law.

Section 5 of the Calhoun County Flood Damage Prevention Order (effective March 30, 2022) requires that a development permit be obtained before any construction or development begins within areas of special flood hazard, including utilities such as sewer and undermines FEMA's National Flood Insurance Program (NFIP) compliance.

We request a written review of this permit's validity, an immediate compliance investigation, and corrective measures to ensure all AE zone development and reserve use restrictions are properly enforced.

Respectfully submitted,

Gene and Veda Spencer
Kay Wesson
Michael & Shelley Menefee
Timothy and Cindy Duffy
Robert and Juanita Orsak
Michael J. Dinges
Pat and Tammy McCormack
Garrett and Larkin Menefee
Tommy and Monica Bram
Helen McCormack
Rose Marshall
Jose and Brenda DeLeon
James C. and Merrilee A. Towers
C. Jason and Zia K. Lowe
William Blanchard
Russell and Tracy Rutledge
Allen and Marci Macha
Mark and JoAnn Williams

Calhoun County Texas
APPLICATION FOR DEVELOPMENT PERMIT
Floodplain Administration

211 S. Ann St., Suite 301
Port Lavaca, TX 77979
Phone 361-553-4455 FAX 361-553-4444
<https://www.calhouncobx.org/flood-plain-administration/>

Date: 9/23/2025 Precinct: 3 Permit #: 6843

OWNER / APPLICANT INFORMATION

Name: Charles L. Milks
Mailing Address: 1770 Mountain Dr.
City: Lakehills State: Tx Zip: 78063
Phone No: (361) 813-5544 Email: chuckmilks@gmail.com

CONTRACTOR INFORMATION

Name: Palm Harbor Homes Company: _____
Address: 13030 Gulf Frewy City: Houston State: Tx Zip: 77034
Phone: (281) 484-1000 Email: TKenthall@CAVCO.COM

SITE TO BE DEVELOPED

Legal Description: Lot Reserve B Block N/A Property ID# 23673
Subdivision: Sunilandings Phase 1 Vol. 2
Street Address or Physical Location: 2301 N. Marshal Johnson Ave Port Lavaca
77979 Texas
Use of building (check one): ☒ Residential ☐ Commercial ☐ RV Park (# of spaces _____) ☐ Other _____
Square Footage:
Living 1475 Garage N/A Porch _____ Other _____

Class of work (check one): ☒ New ☐ Repair ☐ Addition ☐ Remodel ☒ Move

Type of Foundation (check one): ☐ Slab ☐ Pier & Beam ☐ Pilings ☒ Pads & Blocks

Type of Roof (check one): ☒ Composition ☐ Metal ☐ Other _____

Water & Sewage System: ☒ Public Water ☒ Public Sewer ☐ Water Well ☐ Septic

New water wells need to contact the Groundwater Conservation District at 361-482-0357.

Port O'Connor residents need a pre-construction inspection from the Improvement District before development can begin. Approved _____

Description of all work being performed at site: Connections of Utilities, Reassembly,
Deck/Porch, Sewer, Trunk Line.

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- Any space designed for human habitation must be elevated to or above the BFE, including bedroom, bathroom, kitchen, dining, living, family and recreation room; office professional studio and commercial occupancy.
- Uses permitted in spaces below the BFE are vehicular parking, limited storage and building access (stairs, stairwells and elevator shafts only, are subject to design requirements described below for walls).

AE Zones

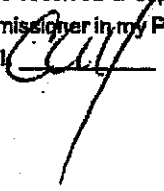
- Building must be elevated such that the lowest floor (including any enclosure or basement) is elevated to or above the BFE on fill, posts, piers, columns or extended walls.
- Where fully enclosed space exists below the BFE, wall must be designed to minimize buildup of flood loads by allowing water to automatically enter, flow through and drain from the enclosed area. The openings should have 1 square inch of openings for every square foot of enclosure. Vents, louvers or valves can be used to equalize flood levels inside and outside enclosed spaces.

VE Zones

- Mobile or Manufactured homes are not allowed in VE zones.
- Buildings must be elevated on pilings or columns such that the bottom of the structural member supporting the lowest floor is elevated to or above the BFE.
- Buildings must be certified by a registered professional architect or engineer to be securely fastened to adequately anchored pilings or columns to withstand velocity flow and wave wash.
- Space below the lowest floor must be free of obstruction or enclosed with breakaway walls (i.e. Walls designed and constructed to collapse under velocity flow conditions without jeopardizing the building's structural support).
- **FILL MAY NOT BE USED FOR STRUCTURAL SUPPORT**
- No construction is allowed seaward of mean high tide line.
- **Fences / Partitions / Separation Walls / Barriers in VE and adjacent AE zones -**
Prohibit the installation of fences that can divert water or serve as a dam either by the type of fence or the pile-up of flood-carrying debris (such as but not limited to solid wood, metal, masonry, or chain link). Fences must meet the following requirements and be permitted:
 - (i) Fences must be open and may not be higher than five (5) feet
 - (ii) must have no more than one (1) horizontal strand per foot of height
 - (iii) first strand starts (1) foot above ground
 - (iv) strand can be no wider than three (3) inches and no thicker than one (1) inch
 - (v) each strand separated by one (1) foot.
 - (vi) vertical posts for strands are a minimum of (6) six feet apart.

Please read and initial:

I have received a copy of the Subdivision Regulations and am also aware that I must obtain a culvert permit from the Commissioner in my Precinct at no additional charge. The Subdivision Regulations can be found at the website listed above.

Initial 

Calhoun County Texas
APPLICATION FOR DEVELOPMENT PERMIT
Floodplain Administration
211 S. Ann St., Suite 301
Port Lavaca, TX 77979
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FLOODPLAIN INFORMATION

Property is located in Floodzone Shaded X (el _____)

Community Number 480087, Map Number 48057C- 0100E

*If property is located in Floodzone AE or VE, a survey showing the natural ground elevation must be attached to application before it can be processed. After construction is complete, a **Finished Construction Elevation Certificate** must be filed with the Floodplain office within 60 days.*

Person or company responsible for finished elevation certificate? CHARLES C MILLS

Is this property in a Flood Hazard Area? No

Elevation at Building Site: 10.7'

First Floor Elevation is _____ feet above MSL/Ground.

Cost of Project is? 150,000.00

Are plans submitted with application? YES

DISCLAIMER

THE FLOOD INSURANCE RATE MAPS (FIRMS) AND OTHER FLOOD DATA USED BY THE CALHOUN COUNTY ADMINISTRATOR IN EVALUATING FLOOD HAZARD TO PROPOSED DEVELOPMENTS ARE CONSIDERED REASONABLE AND ACCURATE FOR REGULATOR PURPOSES AND ARE BASED ON THE BEST AVAILABLE SCIENTIFIC AND ENGINEERING DATA. ON RARE OCCASIONS, GREATER FLOODS CAN AND WILL OCCUR AND FLOOD HEIGHTS MAY BE INCREASED BY MAN-MADE OR NATURAL CAUSES. THESE DEVELOPMENT STANDARDS DEEMED NECESSARY TO MINIMIZE OR ELIMINATE FLOOD DAMAGE, BUT RELIANCE ON THESE MINIMUM STANDARDS SHALL NOT CREATE LIABILITY ON THE PART OF CALHOUN COUNTY, CALHOUN COUNTY FLOODPLAIN ADMINISTRATOR OR ANY OTHER OFFICER OR EMPLOYEE OF THE COUNTY OF CALHOUN IN THE EVENT OF FLOODING OR FLOOD DAMAGE OCCURS.

REGULATIONS FOR BUILDING IN FLOODZONES AE & VE

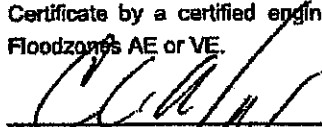
Both AE & VE Zones

- All structural components must be adequately connected and anchored to prevent flotation, collapse or permanent lateral movement of the building.
- Building materials and utility equipment must be resistant to flood damage. All machinery and equipment servicing the building must be elevated to or above the Base Flood Elevation (BFE), including furnaces, heat pumps, hot water heaters, air conditioners, washers, dryers, refrigerators and similar appliances, elevator lift machinery, electrical junction and circuit breaker boxes.

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I have read and agree to the regulations listed on this application and will build structure in strict compliance with the Flood Damage Prevention Order of Calhoun County, the State of Texas Building and Windstorm regulations. Failure to obey these regulations will result in fines and penalties and deem this application for permit null and void. I will also submit an Elevation Certificate by a certified engineer or licensed surveyor before the initiation of the proposed development that is in Floodzones AE or VE.


Signature of Applicant Owner

9/23/2025
Date

UTILITY CONNECTIONS

Final connections of utility services shall not be made until after the Floodplain Administrator has approved the building or structure to be in compliance with the Flood Damage Prevention Order of Calhoun County. All utility companies servicing customers within the county shall be apprised of this order and specifically this requirement.

PENALTIES

Violation of the Flood Damage Prevention Order by failure to comply with any of its requirements shall constitute a Class C misdemeanor for each act of violation and for each day of violation and in addition shall pay all costs and expenses involved in the case.

All permits expire 6 months from date of issuance.

Check or money orders are to be made payable to: Calhoun County

We do NOT accept credit or debit cards.

Cash must be exact as we do not have change.

Plans are preferred to be submitted electronically. If not electronic, cannot be larger than 8 1/2" x 11"

OFFICE USE ONLY

Permit Expiration Date 03/29/2026

Permit Amount \$60

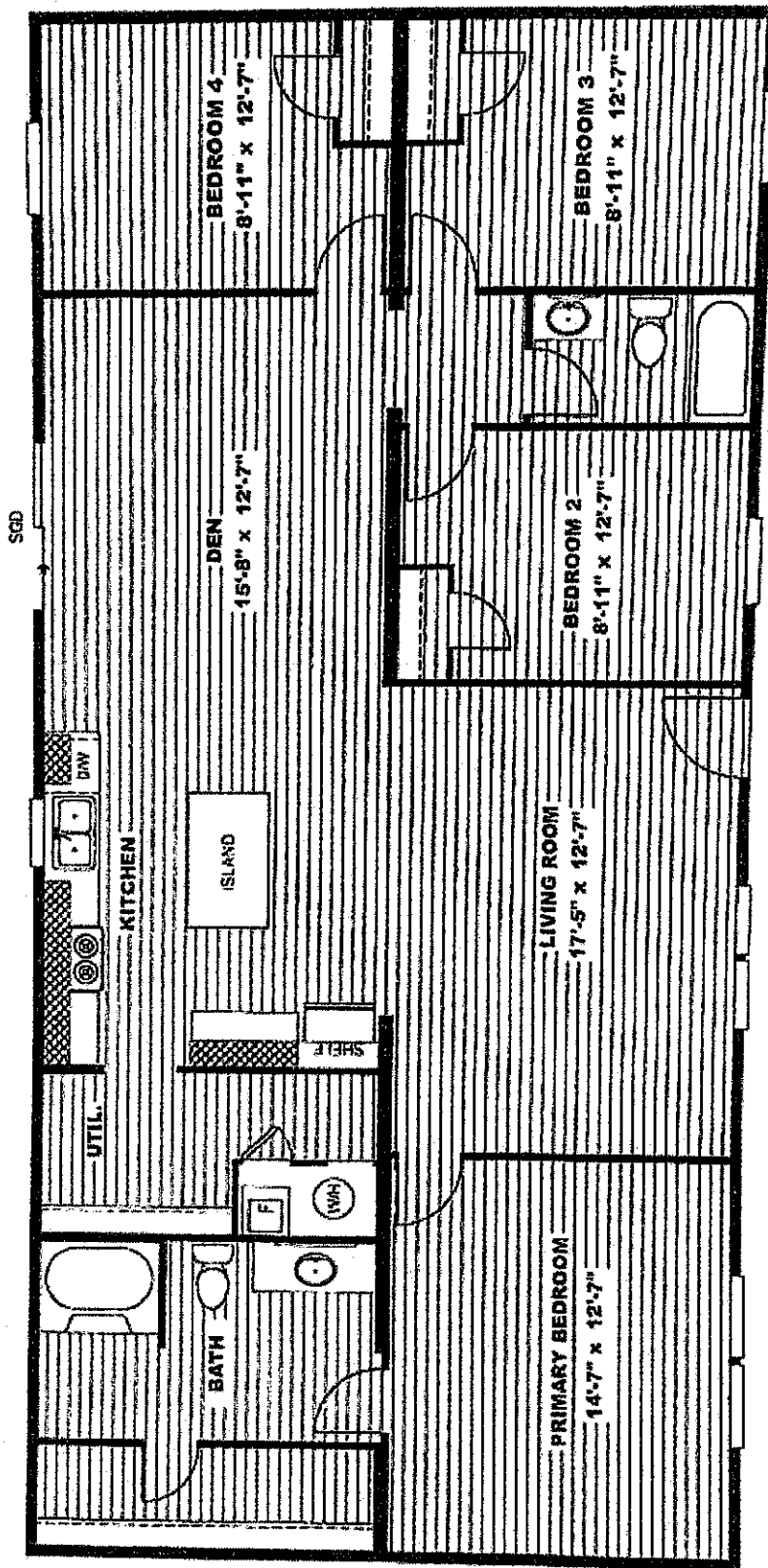
Paid by: ☐ cash ☒ check # 1837

Approved by K

Denied _____

Receipt# 820444

TRU28564A // 4 beds // 2 baths // 1,475 sq. ft. // 28x56



WNT

Calhoun Co. Floodplain Admin.
211 S. Ann St., Suite 301
Port Lavaca, TX 77979
361-553-4455

RECEIPT		DATE <u>09/29/2025</u>	No. <u>820444</u>
RECEIVED FROM <u>Charles L. Milks</u>		<u>\$60.⁰⁰/hr</u>	
<u>1770 Mountain Dr. Lakehills, TX 78063</u>		DOLLARS	
☐ FOR RENT		<u>2301 N. Marshal Johnson Ave</u>	
☒ FOR		<u>Permit # 6843 Chk# 1837</u>	
ACCOUNT		☐ CASH	FROM _____ TO _____ BY <u>KG</u>
PAYMENT	<u>60.00</u>	☒ CHECK	
BAL. DUE		☐ MONEY ORDER	
		☐ CREDIT CARD	

3-11

Vol 361 762

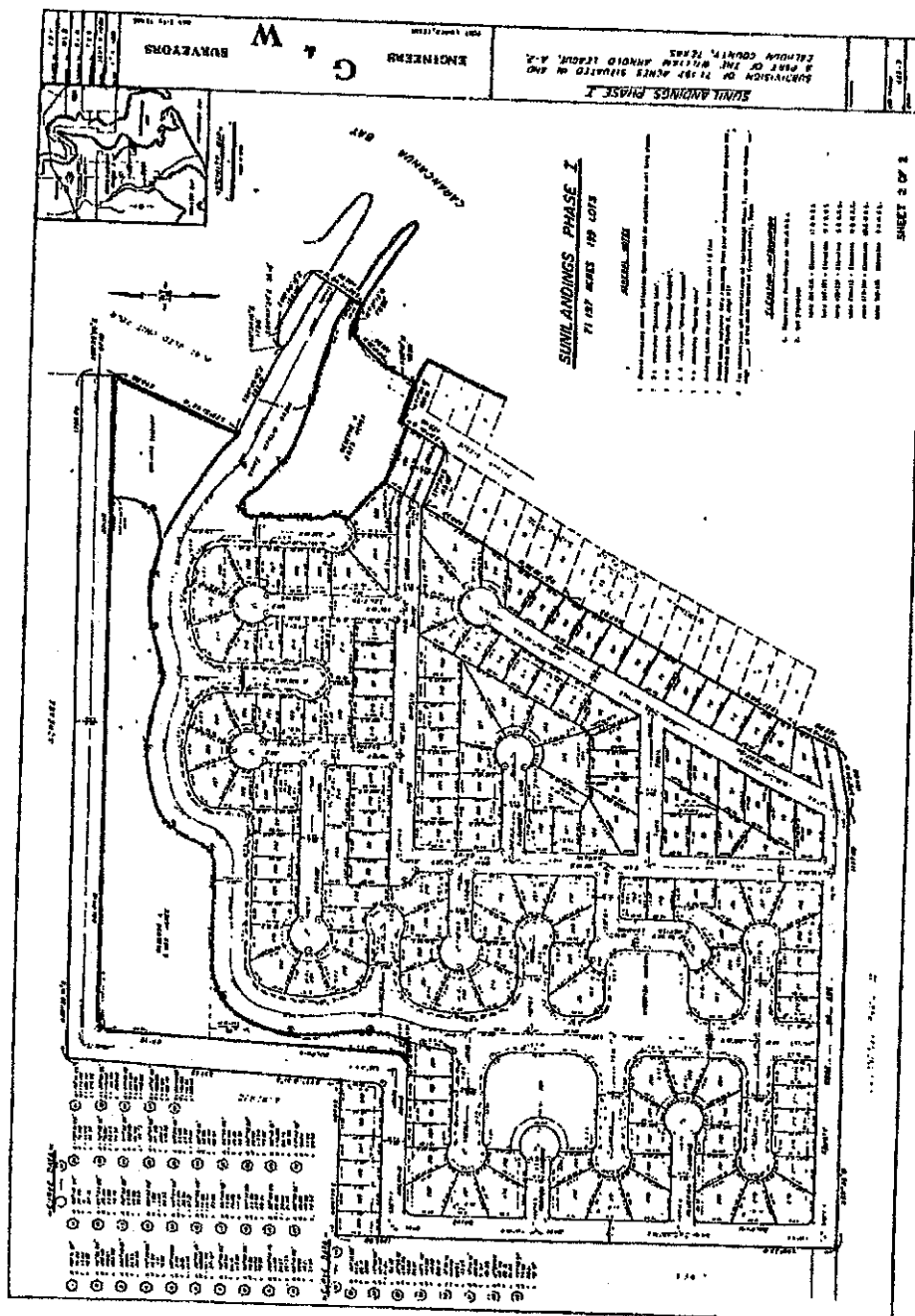


EXHIBIT A

THE STATE OF TEXAS
COUNTY OF CALHOUN

I, MARY LOIS McMAHAN, County Clerk in and for said County, do hereby certify that the foregoing instrument, with its certificate of authentication, was filed for record in my office, on the 29th day of December, A.D. 19 82, at 4:20 o'clock P.M., and duly recorded the 30th day of Dec., A.D. 1982, in the Deed Records in said County, in Vol. 361, on page 753-762.

Witness my hand and seal of the County Court of said County, at office in Port Lavaca, Texas, the day and year last above named.

MARY LOIS McMAHAN
Clerk, County Court, Calhoun County

BY Barbara A. Neill, Deputy
Barbara A. Neill

Maxer, Microsoft

PII

Approximate location based on user input and does not represent an authoritative property location

MAP PANELS

- ☐ Selected Flooding Boundary
- ☐ Digital Data Available
- ☐ AS Data Available
- ☒ Unimproved

- ☐ Areas of Annual Flood Hazard Zone 1
- ☐ Effective Limits
- ☐ Areas of Undetermined Flood Hazard Zone 2
- ☐ Other Flood Hazard Areas

SPECIAL FLOOD HAZARD AREAS

Without Base Flood Elevation (BFE)

With BFE or Depth

Regulatory Procedure: See 44 CFR 101.106

OTHER AREAS OF FLOOD HAZARD

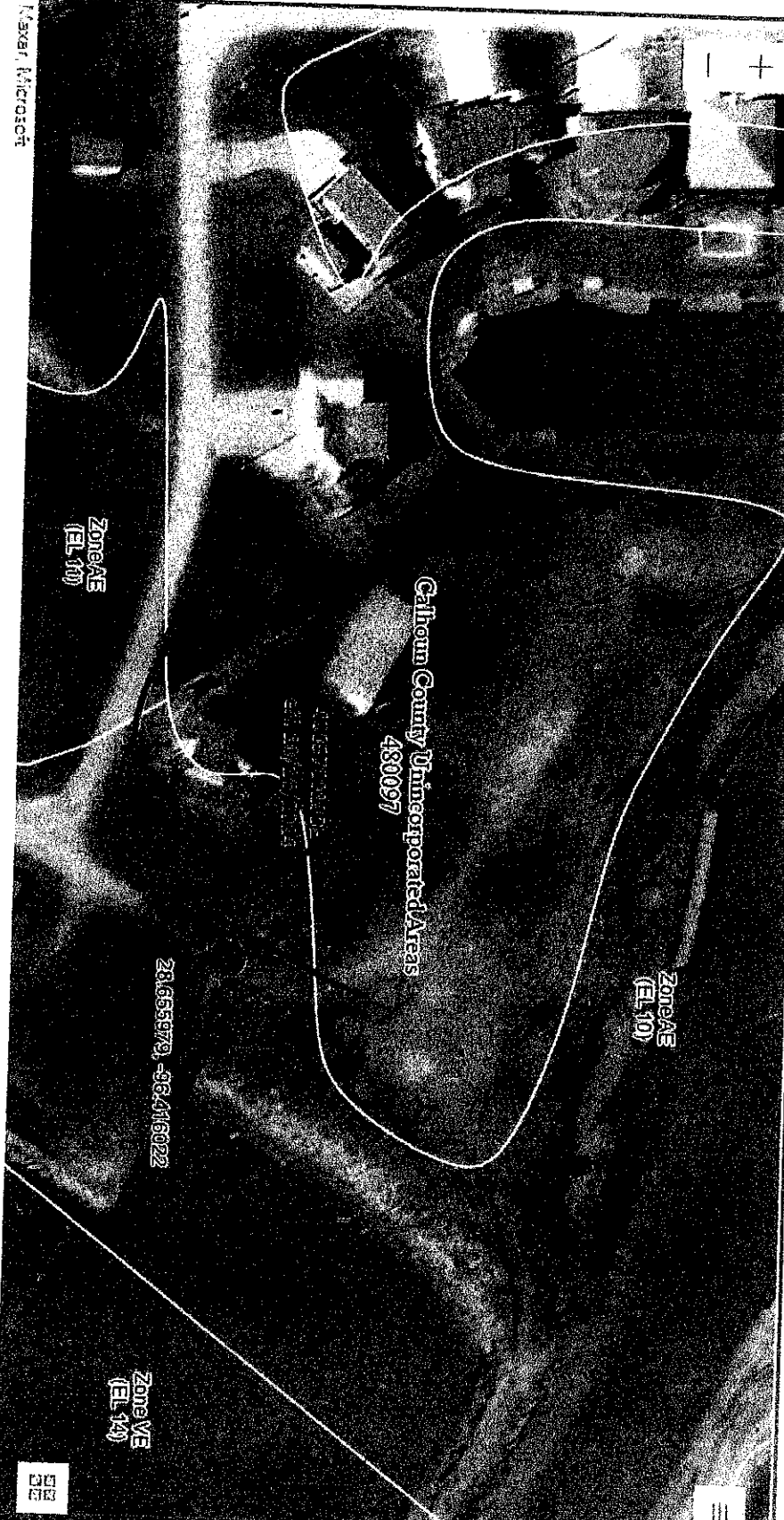
- 0.2% Annual Chance Flood Hazard Area of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile with future conditions 1% Annual Chance Flood Hazard Zone 1
- Areas with Reduced Flood Risk due to Levees: See Notes, Table 3
- Areas with Flood Risk due to Levees: See 3

OTHER FEATURES

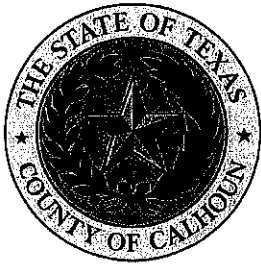
GENERAL STRUCTURES

- ☐ Cross Sections with 1% Annual Chance Water Surface Elevation
- ☐ Coastal Inland
- ☐ Base Flood Elevation Line (BFE)
- ☐ Limit of Study
- ☐ Jurisdiction Boundary
- ☐ Coastal Traverser Boundary
- ☐ Profile Baseline
- ☐ Hydrographic Feature
- ☐ Channel Culvert or Storm Sewer
- ☐ Levee, Dike, or Flood Wall

Powered by Esri



05

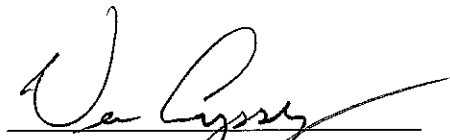


Vern L. Lyssy
County Judge

David Hall, Commissioner, Precinct 1
Ronald Best, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

The Commissioners' Court of Calhoun County, Texas met on Wednesday,
October 1, 2025 at 10:00 a.m. in the Commissioners' Courtroom in the County
Courthouse at 211 S. Ann Street, Suite 104, Port Lavaca, Calhoun County, Texas.

Attached are the true and correct minutes of the above referenced meeting.



Vern L. Lyssy, County Judge
Calhoun County, Texas

Anna Goodman, County Clerk



Kaddlee Smith
Deputy Clerk





October 1, 2025

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

MET IN A REGULAR MEETING AT 10:00 A.M. IN THE COMMISSIONERS' COURTROOM IN THE COUNTY COURTHOUSE AT 211 S. ANN STREET SUITE 104 PORT LAVACA, CALHOUN COUNTY, TEXAS.

THE FOLLOWING MEMBERS WERE PRESENT:

Vern Lyssy
†David Hall
Ronald Best
Joel Behrens
Gary Reese
Anna Goodman
By: Kaddie Smith

County Judge
Commissioner Pct 1
Commissioner Pct 2
Commissioner Pct 3
Commissioner Pct 4
County Clerk
Deputy Clerk

The subject matter of such meeting is as follows:

1. Call meeting to order.

Meeting was called to order by Judge Vern Lyssy at 10am

2. Invocation.

Commissioner Ronald Best

3. Pledges of Allegiance.

US Flag: Commissioner Gary Reese
Texas Flag: Commissioner Joel Behrens

4. General Discussion of Public Matters and Public Participation.

Gary Jackson expressed concern regarding the 9/11 Conspiracy book and explained it should be admitted into all CCISD Libraries.

5. Approve September 24, 2025 Commissioners' Court Meeting Minutes. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

6. Monthly MMC Report given by Erin Clevenger. (VLL)

Erin Clevenger gave the report.

7. Consider and take necessary action to approve the Amending Plat of Spradlin Place. (RB)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

8. Consider and take necessary action to transfer a Dell Latitude 550 BXT Base Laptop Serial No. 658XQV2 from the County Court at Law Inventory to the County Clerk. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

9. Consider and take necessary action to accept anonymous donation to the Sheriffs Office to be deposited into the Motivation account (2697-001-49082-679) in the amount of \$75.00. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

10. Consider and take necessary action to approve the Specifications and the Invitation to Bid Packet for the Annual Supply Contract for Insecticides for Mosquito Control, Bid Number 2026.01, for the period January 1, 2026 through December 31, 2026, and authorize the County Auditor to advertise for bids. Bids will be due before 2:00:00PM, Thursday, October 30, 2025. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

11. Consider and take necessary action to approve the Specifications and the Invitation to Bid Packet for the Annual Supply Contract for Road Materials, Bid Number 2026.02, for the period January 1, 2026 through December 31, 2026, and authorize the County Auditor to advertise for bids. Bids will be due before 2:00:00PM, Thursday, October 30, 2025. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

12. Consider and take necessary action to approve the Specifications and the Invitation to Bid Packet for the Annual Supply Contract for Asphalts, Oils and Emulsions, Bid Number 2026.03, for the period January 1, 2026 through December 31, 2026, and authorize the County Auditor to advertise for bids. Bids will be due before 2:00:00PM, Thursday, October 30, 2025. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

13. Consider and take necessary action to approve the Specifications and the Invitation to Bid Packet for the Annual Supply Contract for Delivered Fuel, Bid Number 2026.04, for the period January 1, 2026 through December 31, 2026, and authorize the County Auditor to advertise for bids. Bids will be due before 2:00:00Pm, Thursday, October 30, 2025. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

14. Consider and take necessary action to accept proposal from Odefey, Witte, Wall, Villafranca, LLP to complete easement paperwork for the drainage improvements along the Heron Slough. The work will not exceed \$50,000 and will be covered under the County's General Land Office CDBG-MIT grant funds. (GDR)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

15. Consider and take necessary action to approve Change Order No. 3 for Bid No. 2024.05 – Seadrift Drainage Improvements Project – GLO Contract No. 22-085-014-D245 for Calhoun County, Texas and Authorize Commissioner Reese to Sign. (GDR)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

16. Consider and take necessary action to approve a proclamation declaring October 5-11, 2025 as National 4-H Week in Calhoun County. (VLL)

Emilee DeForest read the resolution. Clay Brumfield, Bryce Sandy and Dalton Garner introduced themselves.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

17. Consider and take necessary action to remove the following vehicles from the Sheriffs Office fleet.

- a) 2012 DODGE PK VIN# 1 C6RD7PTXCS 180026
- b) 2019 CHEV SIL VIN#IGCUYEED5KZ152132
- c) 2019 CHEV SIL VIN#IGCUYEEDXKZ155480

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

18. Consider and take necessary action on 2025 budget adjustments. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

19. Approval of bills and payroll. (VLL)

MMC	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Ronald Best, Commissioner Pct 2
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

County:	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Ronald Best, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

20. Adjourn.
JB/RB 10:38am

06

TRAINING COURSES AVAILABLE

Course Title	Public	GCRAC Clinics Hospitals	Volunteers Churches	Schools	CCSO PLFD PLPD
Basic Life Support CPR/AED (Health Care Professional)	\$ 80.00	\$ 50.00	\$ 40.00	\$ 40.00	\$ 20.00
HeartSaver CPR/AED + First Aid	\$ 80.00	\$ 50.00	\$ 40.00	\$ 10.00	\$ 20.00
HeartSaver CPR/AED Only	\$ 70.00	\$ 50.00	\$ 40.00	\$ 10.00	\$ 20.00
HeartSaver First Aid Only	\$ 70.00	\$ 50.00	\$ 40.00	\$ 10.00	\$ 20.00
Advanced Cardiovascular Life Support (ACLS)	\$ 225.00	\$ 200.00	\$ 180.00	\$ 180.00	\$ 180.00
Advanced Cardiovascular Life Support (ACLS) Recert	\$ 140.00	\$ 120.00	\$ 120.00	\$ 120.00	\$ 120.00
Pediatric Advanced Life Support (PALS)	\$ 200.00	\$ 180.00	\$ 160.00	\$ 160.00	\$ 160.00
Pediatric Advanced Life Support (PALS) Recert	\$ 120.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00
Pedi Emergency Assess, Recognition & Stabilize (PEARS)	\$ 80.00	\$ 60.00	\$ 60.00	\$ 60.00	\$ 60.00
Prehospital Trauma Life Support (PHTLS)	\$ 175.00	\$ 150.00	\$ 150.00	\$ 150.00	\$ 150.00
Advanced Medical Life Support (AMLS)	\$ 175.00	\$ 150.00	\$ 150.00	\$ 150.00	\$ 150.00
Emergency Pediatric Care (EPC)	\$ 175.00	\$ 150.00	\$ 150.00	\$ 150.00	\$ 150.00
Geriatric Care for Emergency Medical Services (GEMS)	\$ 125.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00
First On the Scene (FOTS)	\$ 125.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00
Tactical Combat Casualty Care (TCCC)	\$ 495.00	\$ 495.00	\$ 495.00	\$ 495.00	T.B.D.
Tactical Emergency Casualty Care (TECC)	\$ 495.00	\$ 495.00	\$ 495.00	\$ 495.00	T.B.D.
Emergency Care Attendant (ECA)	\$ 1,375.00	\$ 1,100.00	\$ 950.00	\$ 950.00	\$ 950.00
Emergency Medical Technician (EMT)	\$ 1,675.00	\$ 1,500.00	\$ 1,200.00	\$ 1,200.00	\$ 1,200.00
Stop-the-Bleed	Free	Free	Free	Free	Free
Save-A-Life in 1-2-3	Free	Free	Free	Free	Free
Hands-Only CPR	Free	Free	Free	Free	Free
Opioid Overdose/Narcan	Free	Free	Free	Free	Free

All prices are subject to change

25-Sep

07

08

09

10

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Ame... No.	Eff Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7232	10/15/2025	1000	GENERAL FUND	001	REVENUE	STREET MAINTENANCE-SEADR...	44,926.00		NO GRANT	AMOUNT RCVD FOR SEADRIFT ROADWORK APPRVD CC 9/10/25
7226	10/15/2025	1000	GENERAL FUND	001	REVENUE	FEDERAL GRANT	22,264.00		ATF - TASK FORCE	INCREASE FOR ATF TASK FORCE APPRVD CC 7/9/25
7228	10/15/2025	1000	GENERAL FUND	001	REVENUE	FEES-EMS TRAINING	2,000.00		NO GRANT	CREATE ACCOUNT AND SET BUDGET - CC APPRVD 10/15/25
7231	10/15/2025	1000	GENERAL FUND	001	REVENUE	MISCELLANEOUS REVENUE-ROAD	64,428.00		NO GRANT	INCREASE FOR ROAD WORK PER INTERLOCAL DEPOSIT
				Total 001	REVENUE		133,618.00	0.00		
7242	10/15/2025	1000	GENERAL FUND	230	COMMS... COURT	COUNTY HEALTH/WEELLNESS PROGRAM	631.00		NO GRANT	REFLECT ACTUAL AMOUNT OF FUNDS REMAINING AT 12/31/24
				Total 230	COMMS... COURT		631.00	0.00		
7244	10/15/2025	1000	GENERAL FUND	240	CONTIN...	OPERATIONAL EXPENSES		45,000.00	NO GRANT	INCREASE AS NEEDED FOR AIRPORT FUND
7247	10/15/2025	1000	GENERAL FUND	240	CONTIN...	OPERATIONAL EXPENSES		12,510.00	NO GRANT	SET UP TXDO AVIATION GRANT 24AWPTLAV WITH 10% MATCHING
				Total 240	CONTIN...			57,510.00		
7229	10/15/2025	1000	GENERAL FUND	345	EMERGE... MEDICAL SERVICES	PARAMEDIC		141,000.00	NO GRANT	LINE ITEM TRANSFER TO MAKE STRYKER LIFEPAK ANNUAL PYMT
7229	10/15/2025	1000	GENERAL FUND	345	EMERGE... MEDICAL SERVICES	SPECIAL LICENSE		13,000.00	NO GRANT	LINE ITEM TRANSFER TO MAKE STRYKER LIFEPAK ANNUAL PYMT
7229	10/15/2025	1000	GENERAL FUND	345	EMERGE... MEDICAL SERVICES	OVERTIME BASE PAY		33,000.00	NO GRANT	LINE ITEM TRANSFER TO MAKE STRYKER LIFEPAK ANNUAL PYMT
7229	10/15/2025	1000	GENERAL FUND	345	EMERGE... MEDICAL SERVICES	OVERTIME PREMIUM PAY		15,000.00	NO GRANT	LINE ITEM TRANSFER TO MAKE STRYKER LIFEPAK ANNUAL PYMT

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Ame... No.	Eff. Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7229	10/15/2025	1000	GENERAL FUND	345	EMERGE... MEDICAL SERVICES	CAPITAL OUTLAY	202,000.00		NO GRANT	LINE ITEM TRANSFER TO MAKE STRYKER LIFEPAK ANNUAL PYMT
				Total 345	EMERGE... MEDICAL SERVICES		202,000.00	202,000.00		
7230	10/15/2025	1000	GENERAL FUND	380	WASTE MANAG...	OVERTIME BASE PAY	1.00		NO GRANT	CREATE ACCOUNTS AS NEEDED
7230	10/15/2025	1000	GENERAL FUND	380	WASTE MANAG...	OVERTIME PREMIUM PAY	1.00		NO GRANT	CREATE ACCOUNTS AS NEEDED
				Total 380	WASTE MANAG...		2.00	0.00		
7241	10/15/2025	1000	GENERAL FUND	410	COUNTY COURT-...	COUNTY COURT-AT-LAW JUDGE APPOINTED	1.00		NO GRANT	CREATE LINE ITEMS AS NEEDED FOR APPOINTED OFFICIALS
				Total 410	COUNTY COURT-...		1.00	0.00		
7241	10/15/2025	1000	GENERAL FUND	430	DISTRICT COURT	DISTRICT CLERK APPOINTED	1.00		NO GRANT	CREATE LINE ITEMS AS NEEDED FOR APPOINTED OFFICIALS
				Total 430	DISTRICT COURT		1.00	0.00		
7241	10/15/2025	1000	GENERAL FUND	500	JUVENILE COURT	COUNTY COURT-AT-LAW JUDGE APPOINTED	1.00		NO GRANT	CREATE LINE ITEMS AS NEEDED FOR APPOINTED OFFICIALS
				Total 500	JUVENILE COURT		1.00	0.00		
7241	10/15/2025	1000	GENERAL FUND	540	ROAD AND BRIDGE-... #1	COUNTY COMMISSIONER APPOINTED	1.00		NO GRANT	CREATE LINE ITEMS AS NEEDED FOR APPOINTED OFFICIALS

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**Unposted Budget Transactions - BUDGET AMENDMENT REPORT-PUBLIC
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Ame... No.	Eff Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7231	10/15/2025	1000	GENERAL FUND	540	ROAD AND BRIDGE-... #1	ROAD & BRIDGE SUPPLIES	64,428.00		NO GRANT	INCREASE FOR ROAD WORK PER INTERLOCAL DEPOSIT
7248	10/15/2025	1000	GENERAL FUND	540	ROAD AND BRIDGE-... #1	ROAD & BRIDGE SUPPLIES		21,357.00	NO GRANT	TRNSFR FROM GF- PROJ OVERAGE-CAP PROJ LITTLE CHOC BAYOU PARK
				Total 540	ROAD AND BRIDGE-... #1		64,429.00	21,357.00		
7232	10/15/2025	1000	GENERAL FUND	570	ROAD AND BRIDGE-... #4	ROAD & BRIDGE SUPPLIES	44,926.00		NO GRANT	AMOUNT RCVD FOR SEADRIFT ROADWORK APPRVD CC 9/10/25
				Total 570	ROAD AND BRIDGE-... #4		44,926.00	0.00		
7241	10/15/2025	1000	GENERAL FUND	610	CONSTA... #4	CONSTABLE-APPTD TEMPORARY	1.00		NO GRANT	CREATE LINE ITEMS AS NEEDED FOR APPOINTED OFFICIALS
				Total 610	CONSTA... #4		1.00	0.00		
7226	10/15/2025	1000	GENERAL FUND	760	SHERIFF	OVERTIME BASE PAY - ATF TASK FORCE	14,843.00		ATF - TASK FORCE	INCREASE FOR ATF TASK FORCE APPRVD CC 7/9/25
7226	10/15/2025	1000	GENERAL FUND	760	SHERIFF	OVERTIME PREMIUM PAY - ATF TASK FORCE	7,421.00		ATF - TASK FORCE	INCREASE FOR ATF TASK FORCE APPRVD CC 7/9/25
7243	10/15/2025	1000	GENERAL FUND	760	SHERIFF	CAPITAL OUTLAY-SB22 GRANT-EQUIPMENT	14,565.00		RURAL SHERIFF GRANT LGC 130.911	SO SB22 - EQUIPMENT - REMOVED IN ERROR
				Total 760	SHERIFF		36,829.00	0.00		

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Amn... No.	Eff. Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7244	10/15/2025	1000	GENERAL FUND	800	TRANSF...	TRANSFERS TO AIRPORT FUND	45,000.00		NO GRANT	INCREASE AS NEEDED FOR AIRPORT FUND
7248	10/15/2025	1000	GENERAL FUND	800	TRANSF...	TRANSFER TO CAP PROJ-LITTLE CHOC BAYOU P	21,357.00		NO GRANT	TRNSFR FROM GF- PROJ OVERAGE-CAP PROJ LITTLE CHOC BAYOU PARK
				Total 800	TRANSF...		66,357.00	0.00		
7247	10/15/2025	1000	GENERAL FUND	999	NO DEPART...	TRANSFER TO CAPITAL PROJECT-AIRPORT	12,510.00		NO GRANT	SET UP TXDO AVIATION GRANT 24AWPTLAV WITH 10% MATCHING
				Total 999	NO DEPART...		12,510.00	0.00		
		Total 1000	GENERAL FUND				561,306.00	280,867.00		
7244	10/15/2025	2610	AIRPORT FUND	999	NO DEPART...	MACHINERY/EQUIPME... REPAIRS	8,000.00		NO GRANT	INCREASE AS NEEDED FOR AIRPORT FUND
7244	10/15/2025	2610	AIRPORT FUND	999	NO DEPART...	CAPITAL OUTLAY	11,000.00		NO GRANT	INCREASE AS NEEDED FOR AIRPORT FUND
7244	10/15/2025	2610	AIRPORT FUND	999	NO DEPART...	EQUIPMENT-FUEL SYSTEM	26,000.00		NO GRANT	INCREASE AS NEEDED FOR AIRPORT FUND
7244	10/15/2025	2610	AIRPORT FUND	999	NO DEPART...	TRANSFERS FROM GENERAL FUND		45,000.00	NO GRANT	INCREASE AS NEEDED FOR AIRPORT FUND
				Total 999	NO DEPART...		45,000.00	45,000.00		
		Total 2610	AIRPORT FUND				45,000.00	45,000.00		
7233	10/15/2025	2620	APPELLATE JUDICIAL SYSTEM FUND	999	NO DEPART...	APPELLATE JUDICIAL SYSTEM EXPENDITURES	1,650.00		NO GRANT	UPDATE BASED ON ACTUAL -2024 INVOICE NOT RCVD UNTIL 2025
				Total 999	NO DEPART...		1,650.00	0.00		

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Ame... No.	Fund Code	Eff. Date	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
	Total 2620		APPELLATE JUDICIAL SYSTEM FUND				1,650.00	0.00		
7245	2660	10/15/2025	COASTAL PROTECTION FUND (GOMESA)	999	NO DEPART...	LAND	17,500.00		NO GRANT	FOR PURCHASE OF PROPERTY IN RB1 PID 39418 CC APPRVD 8/27/25
7249	2660	10/15/2025	COASTAL PROTECTION FUND (GOMESA)	999	NO DEPART...	TRANSFER TO CAP PROJ.-BILL SANDERS PARK	80,000.00		NO GRANT	BILL SANDERS PARK IMPROV-MATERIAL COST INCREASE
	Total 999				NO DEPART...		97,500.00	0.00		
	Total 2660		COASTAL PROTECTION FUND (GOMESA)				97,500.00	0.00		
7240	5106	10/15/2025	CAP. PROJ.-MAGNOLIA BEACH MARSH RESTORAT	001	REVENUE	STATE GRANT	600,000.00		CEPRA-C... EROSION PLAN/RE... ACT	SET UP CEPRA PROJECT #1792 W/ ARMY CORPS OF ENGINEERS
7240	5106	10/15/2025	CAP. PROJ.-MAGNOLIA BEACH MARSH RESTORAT	001	REVENUE	FEDERAL GRANT	700,000.00		U.S. ARMY CORPS OF ENGINEE...	SET UP CEPRA PROJECT #1792 W/ ARMY CORPS OF ENGINEERS
	Total 001				REVENUE		1,300,000.00	0.00		
7240	5106	10/15/2025	CAP. PROJ.-MAGNOLIA BEACH MARSH RESTORAT	999	NO DEPART...	ENGINEERING SERVICES	600,000.00		CEPRA-C... EROSION PLAN/RE... ACT	SET UP CEPRA PROJECT #1792 W/ ARMY CORPS OF ENGINEERS
7240	5106	10/15/2025	CAP. PROJ.-MAGNOLIA BEACH MARSH RESTORAT	999	NO DEPART...	ENGINEERING SERVICES	700,000.00		U.S. ARMY CORPS OF ENGINEE...	SET UP CEPRA PROJECT #1792 W/ ARMY CORPS OF ENGINEERS
	Total 999				NO DEPART...		1,300,000.00	0.00		

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Ame... No.	Eff. Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
		Total 5106	CAP. PROJ.-MAGNOLIA BEACH/MARSH RESTORAT				2,600,000.00	0.00		
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	001	REVENUE	FEDERAL GRANT	1,845,000.00		DRAINAG... SUBDIVIS...	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	001	REVENUE	FEDERAL GRANT	2,861,660.00		MAGNOLI... BEACH FIRE STATION	SET UP PROJECT BUDGET
		Total 001			REVENUE		4,706,660.00	0.00		
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	ENGINEERING SERVICES	269,660.00		MAGNOLI... BEACH FIRE STATION	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	ENGINEERING SERVICES	225,000.00		DRAINAG... SUBDIVIS...	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	ENVIRONMENT COSTS	10,000.00		DRAINAG... SUBDIVIS...	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	ENVIRONMENT COSTS	10,000.00		MAGNOLI... BEACH FIRE STATION	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	GRANT SERVICES	182,000.00		MAGNOLI... BEACH FIRE STATION	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	GRANT SERVICES	110,000.00		DRAINAG... SUBDIVIS...	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	IMPROVEMENTS-DRAI...	1,500,000.00		DRAINAG... SUBDIVIS...	SET UP PROJECT BUDGET
7246	10/15/2025	5114	CAP PROJ.-CDBG-... INFRASTRUCTURE	999	NO DEPART...	IMPROVEMENTS-DRAI...	2,400,000.00		MAGNOLI... BEACH FIRE STATION	SET UP PROJECT BUDGET
		Total 999			NO DEPART...		4,706,660.00	0.00		

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Amend... No.	Eff. Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
		Total 5114	CAP PROJ.-CDBG-... INFRASTRUCTURE				9,413,320.00	0.00		
7247	10/15/2025	5173	CAPITAL PROJECT AIRPORT IMPROVEMENTS III	001	REVENUE	STATE GRANT	135,000.00		NO GRANT	SET UP TXDO AVIATION GRANT 24AWPTLAV WITH 10% MATCHING
		Total 001			REVENUE		135,000.00	0.00		
7247	10/15/2025	5173	CAPITAL PROJECT AIRPORT IMPROVEMENTS III	999	NO DEPART...	EQUIPMT-AUTOMATED WEATHER OBSERV. SYSTEM	150,000.00		NO GRANT	SET UP TXDO AVIATION GRANT 24AWPTLAV WITH 10% MATCHING
7247	10/15/2025	5173	CAPITAL PROJECT AIRPORT IMPROVEMENTS III	999	NO DEPART...	TRANSFERS FROM GENERAL FUND		15,000.00	NO GRANT	SET UP TXDO AVIATION GRANT 24AWPTLAV WITH 10% MATCHING
		Total 999			NO DEPART...		150,000.00	15,000.00		
		Total 5173	CAPITAL PROJECT AIRPORT IMPROVEMENTS III				285,000.00	15,000.00		
7248	10/15/2025	5177	CAP PROJ - LITTLE CHOCOLATE BAYOU PARK	999	NO DEPART...	RESTROOMS/SHOWER... TABLES	21,357.00		MATAGO... BAY MITIGATI... TRUST	TRNSFR FROM GF- PROJ OVERAGE-CAP PROJ LITTLE CHOC BAYOU PARK
7248	10/15/2025	5177	CAP PROJ - LITTLE CHOCOLATE BAYOU PARK	999	NO DEPART...	TRANSFERS FROM GENERAL FUND		21,357.00	MATAGO... BAY MITIGATI... TRUST	TRNSFR FROM GF- PROJ OVERAGE-CAP PROJ LITTLE CHOC BAYOU PARK
		Total 999			NO DEPART...		21,357.00	21,357.00		
		Total 5177	CAP PROJ - LITTLE CHOCOLATE BAYOU PARK				21,357.00	21,357.00		

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Ame... No.	Fund Code	Eff Date	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7249	5183	10/15/2025	CAP PROJ-BILL SANDERS PARK IMPROVEMENTS	999	NO DEPART...	ENGINEERING SERVICES	489.00		MATAGO... BAY MITIGATI... TRUST	BILL SANDERS PARK IMPROV-MATERIAL COST INCREASE
7249	5183	10/15/2025	CAP PROJ-BILL SANDERS PARK IMPROVEMENTS	999	NO DEPART...	IMPROVEMENTS-PARK	79,511.00		MATAGO... BAY MITIGATI... TRUST	BILL SANDERS PARK IMPROV-MATERIAL COST INCREASE
7249	5183	10/15/2025	CAP PROJ-BILL SANDERS PARK IMPROVEMENTS	999	NO DEPART...	TRANS.FROM COASTAL PROTECT(GOMESA) FUND		80,000.00	MATAGO... BAY MITIGATI... TRUST	BILL SANDERS PARK IMPROV-MATERIAL COST INCREASE
				Total 999	NO DEPART...		80,000.00	80,000.00		
	Total 5183		CAP PROJ-BILL SANDERS PARK IMPROVEMENTS				80,000.00	80,000.00		
7250	5225	10/15/2025	CAPITAL PROJECT-GREEN LAKE PARK	999	NO DEPART...	CONSTRUCTION-GREEN LAKE PARK		105,000.00	MATAGO... BAY MITIGATI... TRUST	SET UP BUDGET FOR MBMT CONTRACT #102-GREEN LAKE PARK
7250	5225	10/15/2025	CAPITAL PROJECT-GREEN LAKE PARK	999	NO DEPART...	EQUIPMENT-PARKS	105,000.00		MATAGO... BAY MITIGATI... TRUST	SET UP BUDGET FOR MBMT CONTRACT #102-GREEN LAKE PARK
				Total 999	NO DEPART...		105,000.00	105,000.00		
	Total 5225		CAPITAL PROJECT-GREEN LAKE PARK				105,000.00	105,000.00		
7251	5278	10/15/2025	TAX NOTE (SERIES 2025) PROJECT FUND	001	REVENUE	INT INC-GENERAL GOVERNMENT	1.00		TAX NOTE	SET UP PROJECT BUDGET FOR HOSPITAL IMPROV-2025 TAX NOTE

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Ame... No.	Eff. Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
				Total 001	REVENUE		1.00	0.00		
7251	10/15/2025	5278	TAX NOTE (SERIES 2025) PROJECT FUND	999	NO DEPART...	BOND ISSUANCE COST-HILLTOP SECURITIES	35,003.00		TAX NOTE	SET UP PROJECT BUDGET FOR HOSPITAL IMPROV-2025 TAX NOTE
7251	10/15/2025	5278	TAX NOTE (SERIES 2025) PROJECT FUND	999	NO DEPART...	BOND ISSUANCE COST-OTHER	22,377.00		TAX NOTE	SET UP PROJECT BUDGET FOR HOSPITAL IMPROV-2025 TAX NOTE
7251	10/15/2025	5278	TAX NOTE (SERIES 2025) PROJECT FUND	999	NO DEPART...	PAYING AGENT FEES	1,350.00		TAX NOTE	SET UP PROJECT BUDGET FOR HOSPITAL IMPROV-2025 TAX NOTE
7251	10/15/2025	5278	TAX NOTE (SERIES 2025) PROJECT FUND	999	NO DEPART...	IMPROVEMENTS-HOSP...	4,211,270.00		TAX NOTE	SET UP PROJECT BUDGET FOR HOSPITAL IMPROV-2025 TAX NOTE
7251	10/15/2025	5278	TAX NOTE (SERIES 2025) PROJECT FUND	999	NO DEPART...	PROCEEDS FROM SALE OF BONDS	4,270,000.00	4,270,000.00	TAX NOTE	SET UP PROJECT BUDGET FOR HOSPITAL IMPROV-2025 TAX NOTE
		Total 5278	TAX NOTE (SERIES 2025) PROJECT FUND	Total 999	NO DEPART...		4,270,001.00	4,270,000.00		
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	001	REVENUE	INT INC-GENERAL GOVERNMENT	1.00		CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
		Total 001		Total 001	REVENUE		1.00	0.00		
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	BOND ISSUANCE COST-HILLTOP SECURITIES	69,081.00		CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	BOND ISSUANCE COST-OTHER	252,884.00		CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	ENGINEER/SURVEYOR/...	831,975.00		CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024

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Unposted Budget Transactions - BUDGET AMENDMENT REPORT-PUBLIC
BUD1687 - 2025 BUDGET-AMENDMENTS-PUBLIC-CCRT-2025.10.15

Ame... No.	Eff Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	PAYING AGENT FEES	350.00		CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	CAPITAL OUTLAY	106,273.00		CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	IMPROVEMENTS-HOSP...	29,061,751.00		CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	PREMIUM ON SALE OF BONDS		3,042,314.00	CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
7252	10/15/2025	5279	CERT OF OBLIGATION-SER...	999	NO DEPART...	PROCEEDS FROM SALE OF BONDS		27,280,000.00	CERTIFIC... OF OBLIGATI...	SET UP BUDGET FOR HOSPITAL IMPROVEMENTS SERIES 2024
		Total 999			NO DEPART...		30,322,314.00	30,322,314.00		
		Total 5279	CERT OF OBLIGATION-SER...				30,322,315.00	30,322,314.00		
7253	10/15/2025	5280	CAPITAL PROJECT-HOSPIT... IMPROVEMENTS	999	NO DEPART...	ASBESTOS ABATEMENT	3,500.00		NO GRANT	SET UP BUDGET AS NEEDED
7253	10/15/2025	5280	CAPITAL PROJECT-HOSPIT... IMPROVEMENTS	999	NO DEPART...	CAPITAL OUTLAY		3,500.00	NO GRANT	SET UP BUDGET AS NEEDED
		Total 999			NO DEPART...		3,500.00	3,500.00		
		Total 5280	CAPITAL PROJECT-HOSPIT... IMPROVEMENTS				3,500.00	3,500.00		
7254	10/15/2025	9200	JUVENILE PROBATION FUND	001	REVENUE	JUV PROB-TIJD GRANT	3,318.00		NO GRANT	INCREASE ACCORDING TO SALARY ADI CC 9/24/25

CALHOUN COUNTY, TEXAS

**Unposted Budget Transactions - BUDGET AMENDMENT REPORT-PUBLIC
BUD1687 - 2025 BUDGET-AMENDMENTS-PUBLIC-CCRT-2025.10.15**

Ame... No.	Eff. Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7234	10/15/2025	9200	JUVENILE PROBATION FUND	001	REVENUE	JUV PROB-TJJD GRANT	455,103.00		JUV PROB TJJD GRANT FY2026 9/2025-8/2...	RECORD TJJD FY2026 BUDGET 9/1/25-8/31/26
7227	10/15/2025	9200	JUVENILE PROBATION FUND	001	REVENUE	JUV PROB-TJJD GRANT	16,339.00		JUV PROB TJJD GRANT FY2025 9/2024-8/2...	UPDATE TJJD GRANT BUDGET AMOUNTS 9/1/24-8/31/25
7234	10/15/2025	9200	JUVENILE PROBATION FUND	001	REVENUE	JUV PROB-TJJD REIMBURSEMENT GRANT	100,000.00		JUV PROB TJJD GRANT FY2026 9/2025-8/2...	RECORD TJJD FY2026 BUDGET 9/1/25-8/31/26
7227	10/15/2025	9200	JUVENILE PROBATION FUND	001	REVENUE	JUV PROB-TJJD REIMBURSEMENT GRANT	81,617.00		JUV PROB TJJD GRANT FY2025 9/2024-8/2...	UPDATE TJJD GRANT BUDGET AMOUNTS 9/1/24-8/31/25
Total							656,377.00	0.00		
7254	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	CHIEF JUVENILE PROBATION OFFICER	2,770.00		NO GRANT	INCREASE ACCORDING TO SALARY ADJ CC 9/24/25
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	SALARIES&FRINGE - COURT INTAKE	23,163.00		JUV PROB TJJD GRANT FY2026 9/2025-8/2...	RECORD TJJD FY2026 BUDGET 9/1/25-8/31/26
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	SALARIES&FRINGE - DIRECT SUPERVISION	82,289.00		JUV PROB TJJD GRANT FY2026 9/2025-8/2...	RECORD TJJD FY2026 BUDGET 9/1/25-8/31/26
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	SALARIES&FRINGE - YOUTH SERVICES	15,000.00		JUV PROB TJJD GRANT FY2026 9/2025-8/2...	RECORD TJJD FY2026 BUDGET 9/1/25-8/31/26

CALHOUN COUNTY, TEXAS

Unposted Budget Transactions - BUDGET AMENDMENT REPORT-PUBLIC
BUD1687 - 2025 BUDGET-AMENDMENTS-PUBLIC-CORT-2025.10.15

Amc... No.	Eff Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	SALARIES&FRINGE - SALARY ADJUSTMENT	23,018.00		JUV PROB TIJD GRANT FY2026 9/2025-8/2...	RECORD TIJD FY2026 BUDGET 9/1/25-8/31/26
7254	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	SOCIAL SECURITY	212.00		NO GRANT	INCREASE ACCORDING TO SALARY ADJ CC 9/24/25
7254	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	RETIREMENT	317.00		NO GRANT	INCREASE ACCORDING TO SALARY ADJ CC 9/24/25
7254	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	WORKMENS COMPENSATION	17.00		NO GRANT	INCREASE ACCORDING TO SALARY ADJ CC 9/24/25
7254	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	FEDERAL/STATE UNEMPLOYMENT	2.00		NO GRANT	INCREASE ACCORDING TO SALARY ADJ CC 9/24/25
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	FAMILY CONFLICT RESOLUTION&SKILLS TRAINI	60,000.00		JUV PROB TIJD GRANT FY2026 9/2025-8/2...	RECORD TIJD FY2026 BUDGET 9/1/25-8/31/26
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	PREVENTION & INTERVENTION - GRANT S	125,078.00		JUV PROB TIJD GRANT FY2026 9/2025-8/2...	RECORD TIJD FY2026 BUDGET 9/1/25-8/31/26
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	REGIONAL DIVERSION ALTERNATIVE	100,000.00		JUV PROB TIJD GRANT FY2026 9/2025-8/2...	RECORD TIJD FY2026 BUDGET 9/1/25-8/31/26
7227	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	REGIONAL DIVERSION ALTERNATIVE	81,617.00		JUV PROB TIJD GRANT FY2025 9/2024-8/2...	UPDATE TIJD GRANT BUDGET AMOUNTS 9/1/24-8/31/25
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	RESIDENT SERV & DETENT-PRE&POST ADJUDICA	101,404.00		JUV PROB TIJD GRANT FY2026 9/2025-8/2...	RECORD TIJD FY2026 BUDGET 9/1/25-8/31/26

CALHOUN COUNTY, TEXAS

Unposted Budget Transactions - BUDGET AMENDMENT REPORT-PUBLIC
BUD1687 - 2025 BUDGET-AMENDMENTS-PUBLIC-CCRT-2025.10.15

Ame... No.	Eff Date	Fund Code	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7234	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	RESIDENTIAL SERVICE-MENTAL HEALTH SERVIC	25,151.00		JUV PROB TIJD GRANT FY2026 9/2025-8/2...	RECORD TIJD FY2026 BUDGET 9/1/25-8/31/26
7227	10/15/2025	9200	JUVENILE PROBATION FUND	999	NO DEPART...	TRAINING TRAVEL	16,339.00		JUV PROB TIJD GRANT FY2025 9/2024-8/2...	UPDATE TIJD GRANT BUDGET AMOUNTS 9/1/24-8/31/25
							656,377.00	0.00		
							1,312,754.00	0.00		
							49,118,703.00	35,143,038.00		
Report Total										

CALHOUN COUNTY, TEXAS

Unposted Budget Transactions - BUDGET AMENDMENT REPORT-PUBLIC
BUD1688 - 2026 BUDGET-AMENDMENTS-PUBLIC-CCRT-2025.10.15

Ame... No.	Fund Code	Eff Date	Fund Title	Dept Code	Dept Title	GL Title	Increase	Decrease	Grant Title	Transaction Description
7235	1000	1/1/2026	GENERAL FUND	001	REVENUE	FEES-EMS TRAINING	25,000.00		NO GRANT	SET 2026 BUDGET
				Total 001	REVENUE		25,000.00	0.00		
			GENERAL FUND				25,000.00	0.00		
7236	9200	1/1/2026	JUVENILE PROBATION FUND	001	REVENUE	JUV PROB-TIID GRANT	14,336.00		NO GRANT	INCREASING ACCORDING TO SALARY AMENDMENT CC 9/24/25
				Total 001	REVENUE		14,336.00	0.00		
7236	9200	1/1/2026	JUVENILE PROBATION FUND	999	NO DEPART...	CHIEF JUVENILE PROBATION OFFICER	12,000.00		NO GRANT	INCREASING ACCORDING TO SALARY AMENDMENT CC 9/24/25
7236	9200	1/1/2026	JUVENILE PROBATION FUND	999	NO DEPART...	SOCIAL SECURITY	918.00		NO GRANT	INCREASING ACCORDING TO SALARY AMENDMENT CC 9/24/25
7236	9200	1/1/2026	JUVENILE PROBATION FUND	999	NO DEPART...	RETIREMENT	1,338.00		NO GRANT	INCREASING ACCORDING TO SALARY AMENDMENT CC 9/24/25
7236	9200	1/1/2026	JUVENILE PROBATION FUND	999	NO DEPART...	WORKMENS COMPENSATION	74.00		NO GRANT	INCREASING ACCORDING TO SALARY AMENDMENT CC 9/24/25
7236	9200	1/1/2026	JUVENILE PROBATION FUND	999	NO DEPART...	FEDERAL/STATE UNEMPLOYMENT	6.00		NO GRANT	INCREASING ACCORDING TO SALARY AMENDMENT CC 9/24/25
				Total 999	NO DEPART...		14,336.00	0.00		
			JUVENILE PROBATION FUND				28,672.00	0.00		
							53,672.00	0.00		
Report Total										

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Vern L. Lyssy
County Judge

David Hall, Commissioner, Precinct 1
Ronald Best, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

A RESOLUTION OF THE COMMISSIONERS' COURT OF CALHOUN COUNTY TEXAS

**FOR THE NOMINATION OF CANDIDATES FOR THE BOARD OF DIRECTORS
OF THE CALHOUN COUNTY APPRAISAL DISTRICT
2026-2027 REGULAR TERM**

WHEREAS, the untimely passing of the chairman for the Board of Directors of the Calhoun County Appraisal District; and

WHEREAS, the Board of Directors consists of five (5) members who serve two-year terms, beginning January 1, 2026 through December 31, 2027; and

WHEREAS, Calhoun County Commissioners' Court is entitled to nominate candidates to the Calhoun County Appraisal District Board of Directors, if so desired.

NOW THEREFORE BE IT RESOLVED BY THE PRESIDING BOARD OF THE COMMISSIONERS' COURT OF CALHOUN COUNTY THAT:

The following individual is nominated and submitted as exhibited in the attached list to the Calhoun County Appraisal District for election to fulfill the unexpired term of the Calhoun County Appraisal District Board of Directors.

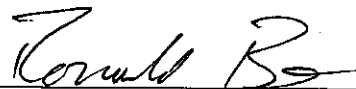
PASSED AND APPROVED by the Commissioners' Court of Calhoun County this 15th day of October, 2025.



Vern L. Lyssy, County Judge

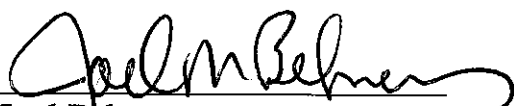
David Hall

Commissioner, Precinct 1



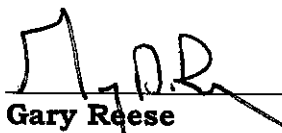
Ronald Best

Commissioner, Precinct 2



Joel Behrens

Commissioner, Precinct 3



Gary Reese

Commissioner, Precinct 4

Attest: Anna Goodman, County Clerk



By: Deputy Clerk



OFFICIAL NOMINATIONS FOR THE
CALHOUN COUNTY APPRAISAL DISTRICT BOARD OF DIRECTORS
JANUARY 2026- DECEMBER 2027 TERM

TAXING UNIT NAME: Calhoun County Commissioners' Court

NOMINEES

- 1.) Benjamin Boone
- 2.) Kevin Hill
- 3.) Vern Lyssy
- 4.) David Pfeil
- 5.) Jessie Rodriguez

Current Board Members:

Benjamin Boone

Kevin Hill

Vern Lyssy

David Pfeil

Jessie Rodriguez

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KEVIN KOLIBA

29 SEPTEMBER 2025

TO CALHOUN COUNTY,

CALHOUN COUNTY

I'm writing to formally announce my resignation from Constable Pct. 4, with my last day being September 29th. This decision was due to the part time position not meeting the TCOLE requirements for licensing.

I have enjoyed serving my community and will miss that.

SINCERELY,
Kevin Koliba

A handwritten signature in black ink, appearing to read "Kevin Koliba", written over the printed name.

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TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

CHECK DATE

CHECK NO.

85300

9/16/2025

85300

VENDOR ID

VENDOR NAME

ACCOUNT NUMBER

Calhoun County

DATE

INVOICE NO.

DESCRIPTION

AMOUNT

9/16/2025

APD20253952-1

MVD-to Clm/Aty Supplement 1 payment for 2025
Chevrolet Tahoe VIN 3132

\$8133.92

9/16/2025

APD20253952-1

\$0.00

8/24/25 Accident

DOCUMENT CHEMICAL REACTIVE PROPERTIES AND FEATURES A FOIL HOLOGRAM



**TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS**

1210 SAN ANTONIO STREET
AUSTIN, TX 78701
(512) 478-8753

FROST BANK

30-9/1140

85300

DATE

9/16/2025

AMOUNT

\$ 8,133.92

PAY EIGHT THOUSAND ONE HUNDRED THIRTY-THREE AND 92 / 100 DOLLARS

TO THE
ORDER
OF:

Calhoun County
202 S Ann St Ste B
Port Lavaca, TX 77979-4204



VOID AFTER 180 DAYS

Susan M. Ruffel
Julie Reg

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

85300

Calhoun County
202 S Ann St Ste B
Port Lavaca, TX 77979-4204

16

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Ronald Best

Calhoun County Commissioner, Precinct #2

5812 FM 1090 N
Port Lavaca, TX 77979



(361)552-9656
ronny.best@calhouncotx.org

September 25, 2025

Honorable Vern Lyssy
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: AGENDA ITEM

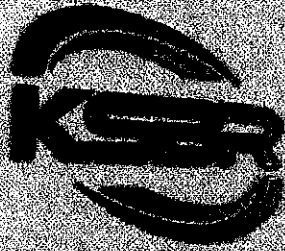
Please place the following item on the next Commissioners' Court Agenda

- Consider and take necessary action to accept proposal from KSBR, LLC to prepare grant application to the Matagorda Bay Mitigation Trust to update the playground equipment & picnic tables at Six Mile Pier Park; preparation fee of \$1000, to be paid with GOMESA funds.

Sincerely,

A handwritten signature in cursive script that reads "Ronald Best".

Ronald Best
RB/lj



✉ info@ksbr-llc.com
🌐 <https://www.ksbr-llc.com/>
📍 430 Church Street
Sulphur Springs, TX 75482

September 16, 2025

Commissioner Best
Calhoun County Pct. 2
201 W Austin Street
Port Lavaca, Texas 77979

Subject: Matagorda Bay Mitigation Trust Grant Application

Dear Commissioner Best,

KSBR LLC is pleased to offer our services to Calhoun County Precinct 2, to assist in preparation of a grant proposal to the Matagorda Bay Mitigation Trust for the park on Park Road. The application preparation fee is \$1,000.00. We will work with the relevant partners to gather the necessary information and to submit the application prior to the deadline of October 14, 2025. We appreciate the opportunity to assist the County in this endeavor.

In the meantime, if you have any questions, please reach out via email at katy@ksbr-llc.com or by phone at 903-243-0481.

Sincerely,

A handwritten signature in black ink, appearing to read 'Katy'.

Katy Sellers
KSBR, LLC - Principal

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**CALHOUN COUNTY, TEXAS
COUNTY SHERIFF'S OFFICE**

**211 SOUTH ANN STREET
PORT LAVACA, TEXAS 77979**

**PHONE NUMBER (361) 553-4646
FAX NUMBER (361) 553-4668**

MEMO TO: COUNTY JUDGE VERN LYSSY

SUBJECT: ACCEPT DONATION TO SHERIFF'S OFFICE

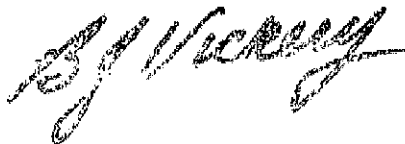
DATE: OCTOBER 15, 2025

Please place the following item(s) on the Commissioner's Court agenda for the date(s) indicated:

AGENDA FOR October 15, 2025

* Consider and take necessary action to accept donation to the Sheriff's Office from the Law Enforcement Partners to be deposited into the Motivation account (2697-001-49082-679) in the amount of \$1513.00.

Sincerely,



Bobbie Vickery
Calhoun County Sheriff

3376

LAW ENFORCEMENT PARTNERS

2530 SCOTTSVILLE RD, SUITE 8
BOWLING GREEN, KY 42104-6508

DATE 10/1/25

21-13/830

PAY
TO THE
ORDER OF

Calhoun County Sheriff's Office

\$ 1513⁰⁰

One thousand five hundred thirteen & 00/100

DOLLARS

CHASE

JPMorgan Chase Bank, N.A.
www.Chase.com

FOR _____

C. H. H.
Mary Ridgway

SE
10/1/25
1513.00



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MATAGORDA BAY MITIGATION TRUST

**RESPONSE
TO**

2025-2026 Funding Cycle Projects

RFP# 2025-2026-1

**BILL SANDERS MEMORIAL PARK
PLAYGROUND ADDITION**

**PREPARED & SUBMITTED BY
CALHOUN COUNTY PRECINCT 4**

October 14, 2025

Contact Person:	Steven J. Raabe, P.E. Trustee Email: trustee@mbmTrust.com
Respondent	Calhoun County Gary Reese, Commissioner Email: gary.reese@calhouncotx.org

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

Contents

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ATTACHMENT C -DRAWING.....	9

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

PART IV



MATAGORDA BAY MITIGATION TRUST

Deadline:
October 14, 2025
At 5:00 PM

Please contact Steven J. Raabe,
with any questions.
Trustee@mbmTrust.com

APPLICATION FORM - 2025-2026 Funding Cycle
(Please address all questions. Include additional pages if necessary)

1. Program/project contact information:

Name of Lead Investigator/Program Manager:
Gary Reese, Calhoun County Commissioner
Calhoun County Pct. 4

Name of organization:
Calhoun County

Physical address:
104 E. Dallas Avenue
Seadrift, Texas 77983

Mailing address:
P.O. Box 177
Seadrift, Texas 77983

Email address:
Gary.reese@calhouncotx.org

Telephone number:
361-785-3141

Fax number:
361-785-5602

Name of Authorized Representative:
Vern Lyssy, Calhoun County Judge
Email address for Authorized Representative:
Vern.lyssy@calhouncotx.org

Check the funding priority that
applies to your proposed
project:

General Call:

- ☐ Public Education
☐ Youth Camps
☐ Land for Pollution Prevention
☒ Public Access Improvement
☐ Environmental Research
☐ Environmental Advocacy
☐ Habitat Restoration

Specific Call No. 1:

- ☐ Dedicated Mitigation Projects

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

2. Applicants must be classified as a government or non-profit organization.
Provide Federal Tax ID number or IRS Letter of Determination

a) TIN – 74-6001923 DUNES – 087309324

3. Program/project name:

Bill Sanders Memorial Park Playground Addition

4. Implementation and conclusion dates of program/project:
March 1, 2026 – March 31, 2027

5. Amount requested: \$196,932.52

6. Proposed project summary (100 words or less)

To enhance the current playground area, we propose the addition of new playground equipment, including slides, a climbing wall, and spring riders, to create a more engaging and enjoyable experience for children. Furthermore, we will install outdoor park benches to provide comfortable seating for families and caregivers. To ensure visitor comfort during hot days, additional shade umbrellas will be placed throughout the area, offering protection from the heat and sun. These improvements will make the playground a more inviting and safe space for all visitors.

7. Brief history and mission statement of the proposing organization (150 words or less):

As a coastal county, Calhoun County recognizes the significance of outdoor activities for both local residents and visitors. The Calhoun County Commissioners Court is dedicated to offering a variety of amenities that cater to all ages, including fishing and boating opportunities for adults, while also prioritizing safe and enjoyable activities for children. Ensuring that our parks provide fun and secure environments for families is of utmost importance to the County, as we strive to create memorable experiences for parents and their children alike.

8. Describe the need for or value of the project and how it addresses the selected funding priority.

Bill Sanders Memorial Park is expanding in the amenities it provides for visitors. In 2024, Matagorda Bay Mitigation Trust awarded Calhoun County a grant to install a canopy shade over the existing playground equipment and build a new multi-functional pavilion. In 2025 Matagorda Bay Mitigation Trust awarded a grant to construct a new fishing pier,

The new playground amenities will add to the wonderful enhancements already made to Bill Sanders Memorial Park.

9. List the goals and objectives of the proposed project:

Project Goals:

At Bill Sanders Memorial Park, our goal is to create a welcoming environment that offers safe and enjoyable activities for children while also accommodating the needs of all visitors.

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

Project Objectives:

- a) By introducing new playground equipment, we aim to provide fun and engaging experiences for young visitors.
- b) Ensure ample seating is available throughout the park, allowing families and friends to relax and enjoy their time together.
- c) By enhancing the park's amenities, including the current fishing pier for adults and the new playground features for children, we hope to increase overall park visitation and foster a vibrant community space for everyone.

10. Describe the methods to be used in the proposed project. Please provide a list of tasks, deliverables and milestones. Please indicate what permits or authorizations are needed to implement project, if any, and if those have been secured:

Permits: We will ensure permits will be obtained in a timely manner and as required.

Task 1: Construction Deliverables:

- a) Construction photographs
- b) As-builts
- c) Project Closeout Report

11. Describe the impact the project will have on the areas it benefits and the longevity of those benefits.

The project will significantly enhance the overall experience at the park by providing additional playground equipment, shade structures, and park benches. These improvements will create a more inviting and comfortable environment for families, encouraging them to spend more time enjoying the park's amenities. The addition of shade will protect visitors from the sun, making the playground accessible even during warmer months, while the new benches will offer convenient seating for relaxation and socialization. As a result, these enhancements will not only increase visitor satisfaction and usage but also promote a sense of community and well-being. The longevity of these benefits is ensured through the durable design of the new facilities, which will support ongoing recreational activities for many years to come, fostering a vibrant and active community space

12. Attach vitae or resume of Lead Investigator/ Program Manager of the proposed project. Commissioner Reese will be the project manager for the proposed project. Commissioner Reese has several years of experience managing projects at Bill Sanders Memorial Park at Swan Point., King Fisher Beach Park, Hog Bayou, and Boggy Bayou.

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

13. Financial information:

- a) Total budget for this project: \$196,932.52
- b) Matching funds (in-kind services or cash)
(Not required but desirable for proposals in response to the general call for proposals: \$ _____
- c) Amount being requested from the Trust \$196,932.52

14. Please provide a task and expense budget. Note: Indirect/overhead costs are limited to 15% of salaries charged to the project.

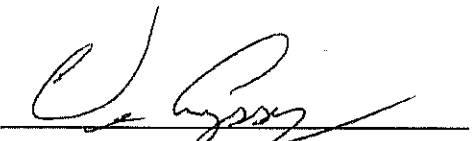
a) Kraftman Commercial Playground \$ 196,932.52

Total \$ 196,932.52

Should the Matagorda Bay Mitigation Trust fund this project, the undersigned agrees:

- a) To enter into a contract specifying the terms and conditions of the engagement.
b) To designate where any dissertation or thesis can be accessed by the Matagorda Bay Mitigation Trust if applicable (e.g., website, publication source, etc.);
c) To provide digital images of project activities; and
d) To provide evidence of full and proper credit to the Matagorda Bay Mitigation Trust for support of this research/project in all publications and other appropriate forums.


Gary D. Reese, Lead Investigator


Vern Lyssy, Authorized Representative

Submittal Date: 10-13-2025

<https://www.mbmtrust.com/rfps/>

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

PART V – ATTACHMENTS

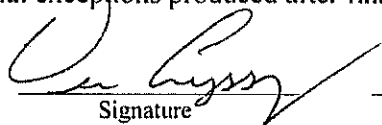
All Attachments are to be returned with Submittal
ATTACHMENT A - SUBMISSION EXCEPTIONS/CLARIFICATIONS

Any exceptions taken or clarifications made to this RFP must be itemized on the lines below. Additional pages may be added as needed. If there are no exceptions or clarifications, please indicate "NONE" and sign where indicated at the bottom of the page.

Item # Description

#1. As a Texas county, Calhoun County is subject to the laws and limitations of the Texas Local Government Code. As a governmental body, it will be unable to comply with some of the stated contractual terms and conditions, such as insurance requirements. However, to the extent possible, the County will comply with the contractual terms and conditions. All terms and conditions will be discussed and finalized during contract negotiations.

The above exceptions and clarifications (and any additional pages identified) are the ONLY exceptions/clarifications to the specifications. I understand that the Trust may not accept additional exceptions produced after final submission of this response.


Signature

Calhoun County
Respondent

10-13-2025
Date

No Exceptions are taken to this RFP.

N/A
Signature

N/A
Respondent

N/A
Date

ATTACHMENT B -ACKNOWLEDGMENT

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

ATTACHMENT C –DRAWING/PHOTOS



Kraftsman
COMMERCIAL PLAYGROUNDS &
WATER PARKS
19535 Hauke Road
Spring, TX 77388
Phone: (281) 353-9599
thomaso@kraftsmanplay.com

WORKSHEET #86003

Date: 09/08/2025

Project: 33831

Worksheet: Sanders Park Expansion - Play, Seating,

Created By: Thomas Ondrias

Page 1 of 6

BILL TO

Calhoun County ☎ 361-785-3141
Gary D. Reese
104 E. Dallas Avenue
PO Box 177
Seadrift, TX 77983

SHIP TO

Calhoun County ☎ 361-785-3141
Gary D. Reese
1522 Swan Point Road
Seadrift, TX 77983

Terms:

Percentage Completed Draws

QTY	Code	Description	Size	Color	Unit Price	Ext. Price
		Based on Kraftman Drawing KPS -00000: Dated XX-XX-XX25				\$0.00
	DISCBB	Proposal includes Discount on BuyBoard Purchase, BuyBoard Contract #679-22				\$0.00
		Play Equipment				\$0.00
1	GFP-10013	Recycled plastic playground w/ integrated shade (ages 2-12)			\$44,186.00	\$44,186.00
1	EFR0068XX	4-section bubble wall climber (ages 5-12)			\$5,985.00	\$5,985.00
1	TFS0039XX	Clownfish Spring Rider			\$3,156.00	\$3,156.00
1	TFS0040XX	Blue Tang Spring Rider			\$3,156.00	\$3,156.00
1	COASTALPAIN T	Corrosion-Defense Paint Package			\$4,505.05	\$4,505.05
1	SRPSURCHG	GC - Material Surcharge on Superior Playgrounds Recreational Equipment.			\$491.88	\$491.88
		Safety Surfacing - Additional 36' x 72' of Use Zone				\$0.00
125	EWf	Engineered Wood Fiber (includes 30% extra for natural settling/compacting)	cu. yd.	Natural	\$39.75	\$4,968.75
2	FABRIC	Polyspun Soil Separator, 1800 SF.	6'x300'		\$437.50	\$875.00
45	APS- BORDER12	12"x4" Playground Border w/ Spike - Reuse 1/2 existing borders	12'	black	\$42.00	\$1,890.00
		Seating and Shade				\$0.00
6	PB8NEW	Recycled 8 ft Plastic Newport Bench, surface mount		cedar or gray	\$1,271.39	\$7,628.34

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects



Kraftsman
COMMERCIAL PLAYGROUNDS &
WATER PARKS
19535 Hauke Road
Spring, TX 77388
Phone: (281) 353-9599
thomaso@kraftsmanplay.com

WORKSHEET #86003

Date: 09/08/2025

Project: 33831

Worksheet: Sanders Park Expansion - Play, Seating,

Created By: Thomas Ondrins

Page 2 of 6

6	CU080808SG	Square Cantilever Umbrella, 8'x8, 8' Eave Height, with Glide Elbows, one 8.5' column mounted on base plates 6" below surfacing, by Superior Shade	8x8x8	\$4,850.46	\$29,102.76
6	PIERS24X48	Concrete piers, for pavilion & canopy columns, with anchor bolts set if required, By: Kraftsman	24"X48"	\$2,266.65	\$13,599.90
30	EXCHAUL	Excavation of Existing Soil, and Haul-off from site. Per Cubic Yard	cubic yard	\$82.50	\$2,475.00
600	CONC5RB	Concrete Pad, 5" thick concrete pad with, rebar reinforced, broom finish, minimum 500 sq. ft.		\$17.86	\$10,716.00
1	SRPSURCHGS HADE	GC - Material Surcharge on Shade by Superior Recreational Products		\$1,164.15	\$1,164.15
General Conditions					\$0.00
1	INSURANCE- AI	Insurance - Name customer as additional insured on General Liability Policy and processing of coverage.		\$1.00	\$1.00
1	BOND1	Bonds - Performance & Payment Surety Bond, and processing of the bond documentation.		\$5,907.98	\$5,907.98

Item Subtotal	\$139,808.81
Shipping & Handling	\$12,846.56
Discount	-\$9,062.11
Subtotal	\$142,873.06
Tax	\$0.00
Install	\$54,059.46
Total:	\$196,932.52

Special Terms and Conditions

\$0.00

Sales Tax Exempt:

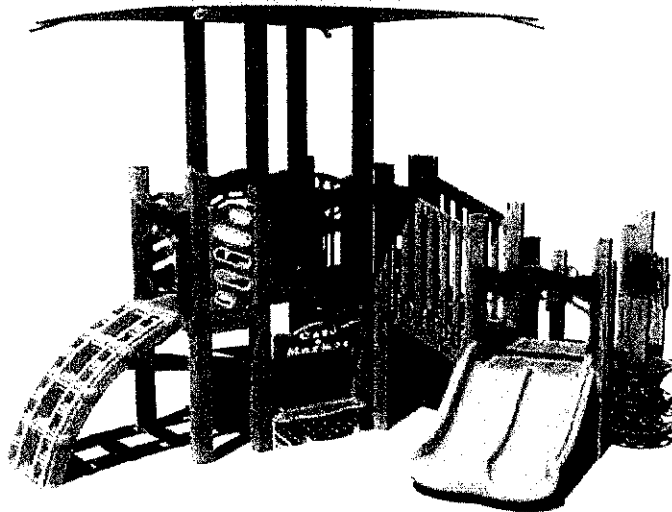
8/29/2025

Sales tax is not included in prices quoted. Customer is to supply Sales Tax Exemption or Sales Tax Resale certificate at time of acceptance of proposal, or sales tax will be added to final contract and invoicing for the project.

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects



GFP-10013



Name

GFP-10013

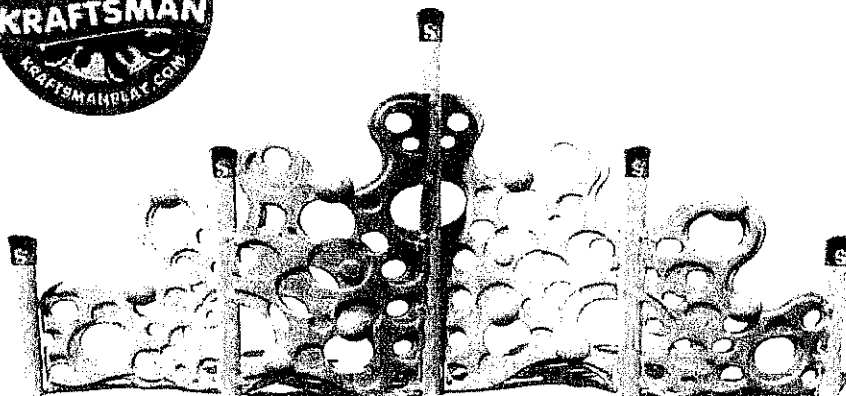
Description

This recycled playground is environmentally friendly and durable. Recycled material is great for coastal regions because it won't corrode. This play structure is appropriate for children 2-12 years old and features challenging climbers, interactive panels, and thrilling slides.

Ages	Structure Size	Fall Height	Use Zone	Capacity
2-12 Years	22'x19'	6'	34'x31'	20-30 Children



4-Section Bubble Wall Superior



Product Description

Encourage physical fitness and child development with our 4-Section Bubble Wall! Children will work their muscles while also having fun. Our 4-Section Bubble Wall adds more excitement to any play environment. This structure has multiple sections so more kids can play together! Climbing components are great for child development and building muscle. This playground asset is recommended for children between the ages of 5-12 years and has a use zone of 14' x 30'.

Use Zone

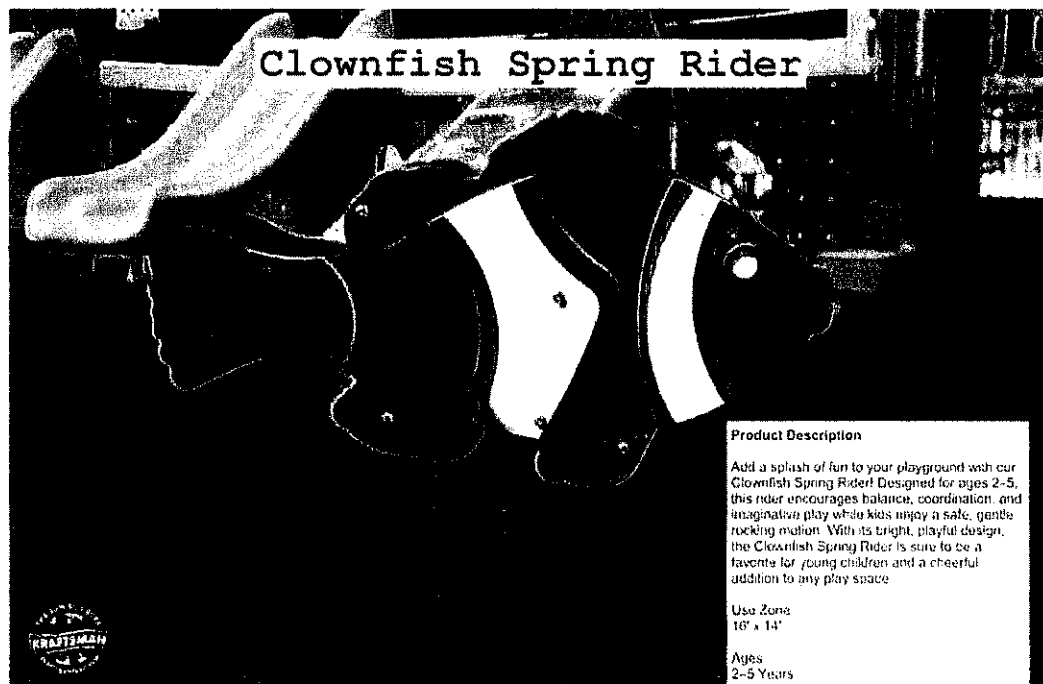
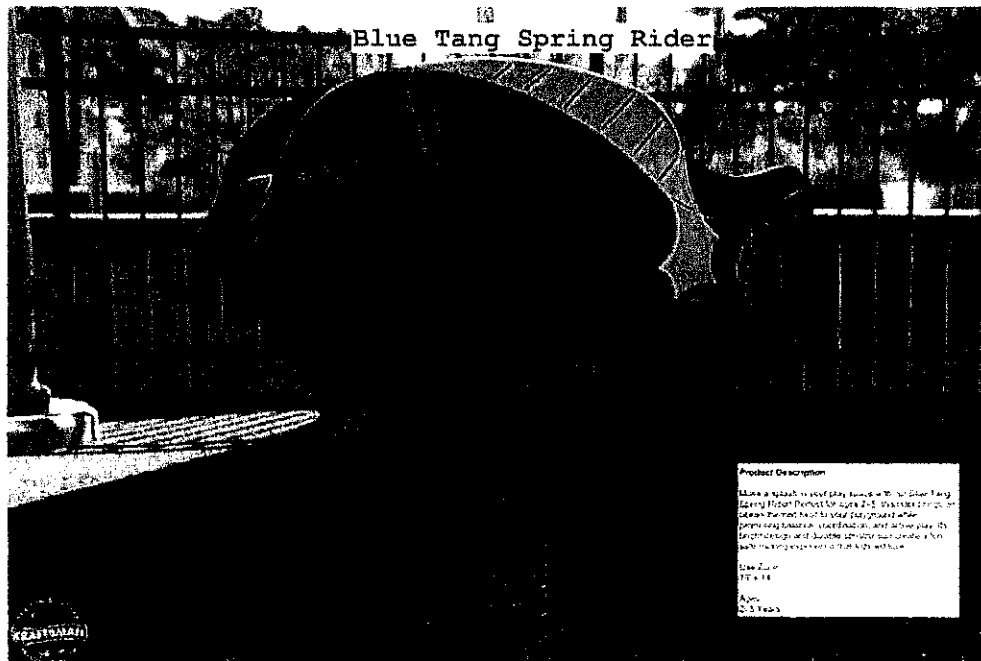
14'x30'

Ages

5-12 Years



Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects



Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects



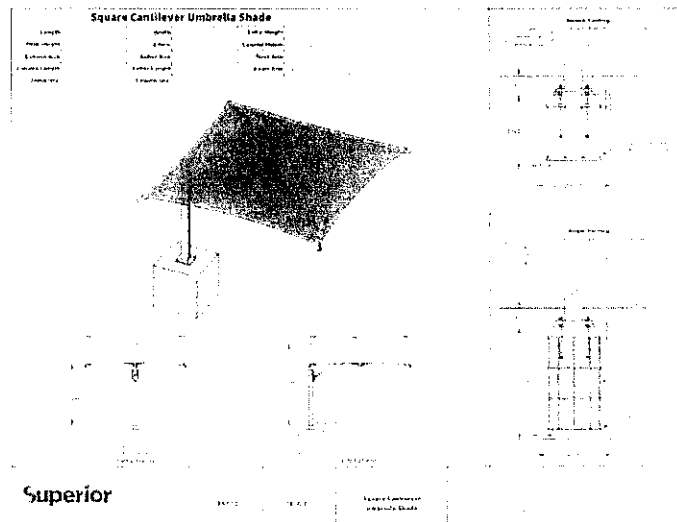
Square Cantilever
Umbrella Shade
Superior



Product Description

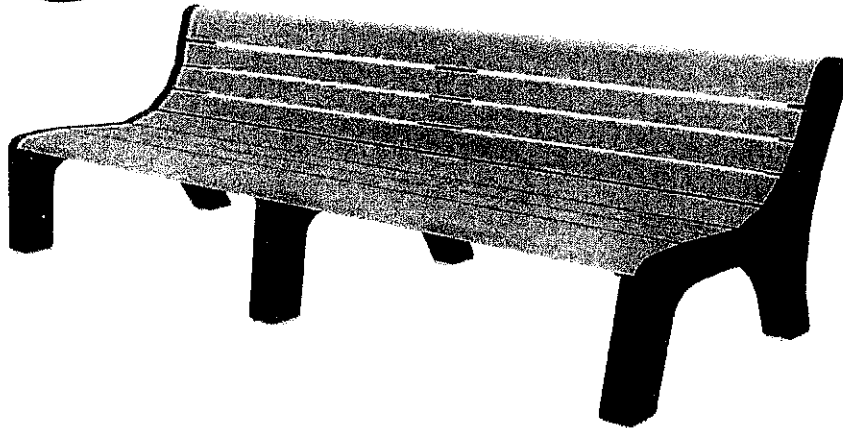
Whether you are looking to cover a waiting area, protect poolside chairs and tables, shade guests, or add style to an outdoor lounge, our cantilever umbrellas are a great choice. A cantilever-style umbrella features an off-center post that allows for the placement of site furnishings underneath without the interference of a column. This commercial umbrella is available with a surface mount base plate or an embedded column.

Standard Features





Newport Bench Superior



The Newport Bench is a popular outdoor seating option known for its durability, classic design, and versatility. This bench is designed to withstand various weather conditions, making it suitable for parks, gardens, commercial areas, and other outdoor settings. The Newport Bench is constructed using high-quality materials such as recycled plastic or metal, ensuring its strength and resistance to elements like UV rays, moisture, and rust. This makes it a long-lasting and low-maintenance seating solution for outdoor environments. The bench features a traditional and timeless design, characterized by its clean lines and slatted seat and backrest. This classic aesthetic seamlessly fits into a variety of outdoor settings, from parks and promenades to schools and public spaces. It's made from 100% recycled plastic that's durable and environmentally friendly. It's available in 6-foot or 8-foot lengths with cedar or gray slats. The black frame can be surface or in-ground mounted.

6' or 8' Lengths

2" x 4" Recycled Plastic Lumber Slats

Recycled Plastic Frame



ADDITIONS PREVIOUSLY MADE TO THE PARK



Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects



Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects



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MATAGORDA BAY MITIGATION TRUST

**RESPONSE
TO**

2025-2026 Funding Cycle Projects

RFP# 2025-2026-1

**KING FISHER BEACH PARK RESTROOM
PROJECT**

**PREPARED & SUBMITTED BY
CALHOUN COUNTY PRECINCT FOUR**

October 14, 2025

Contact Person: Steven J. Raabe, P.E.
Trustee
Email: trustee@mbmTrust.com

Respondent Calhoun County
Gary Reese, Commissioner
Email: gary.reese@calhouncotx.org

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

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Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

PART IV



MATAGORDA BAY MITIGATION TRUST

Deadline:
October 14, 2025
At 5:00 PM

Please contact Steven J. Raabe,
with any questions
Trustee@mbmTrust.com

APPLICATION FORM - 2025-2026 Funding Cycle
(Please address all questions. Include additional pages if necessary)

1. Program/project contact information:

Name of Lead Investigator/Program Manager:
Gary Reese, Calhoun County Commissioner
Calhoun County Pct. 4

Name of organization:
Calhoun County

Physical address:
104 E. Dallas Avenue
Seadrift, Texas 77983

Mailing address:
P.O. Box 177
Seadrift, Texas 77983

Email address:
Gary.reese@calhouncotx.org

Telephone number:
361-785-3141

Fax number:
361-785-5602

Name of Authorized Representative:
Vern Lyssy, Calhoun County Judge
Email address for Authorized Representative:
Vern.lyssy@calhouncotx.org

Check the funding priority that
applies to your proposed
project:

General Call:

- ☐ Public Education
☐ Youth Camps
☐ Land for Pollution Prevention
☒ Public Access Improvement
☐ Environmental Research
☐ Environmental Advocacy
☐ Habitat Restoration

Specific Call No. 1:

- ☐ Dedicated Mitigation Projects

**Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects**

2. Applicants must be classified as a government or non-profit organization.
Provide Federal Tax ID number or IRS Letter of Determination
 - a) TIN – 74-6001923 DUNES – 087309324
3. Program/project name:
King Fisher Beach Park Restroom Project
4. Implementation and conclusion dates of program/project:
March 1, 2026 – March 31, 2027
5. Amount requested: \$508,244.50
6. Proposed project summary (100 words or less)
 - a) Demolish the current 6-stall restroom and replace with a custom, pre-fabricated cement facility. The new 10-stall ADA accessible restroom is ideal for high traffic, will be a durable, hurricane resistant and low maintenance facility.
 - b) Install a similar custom, pre-fabricated concrete facility in the newly acquired park area purchased with Matagorda Bay Mitigation Trust funds in March 2025.. The new restroom will contain 4 stalls and be ADA compliant.
7. Brief history and mission statement of the proposing organization (150 words or less):

King Fisher Beach Park, located in the unincorporated community of Port O'Connor in Calhoun County, has long been a beloved destination for both residents and visitors. The park is managed by the Calhoun County Commissioners Court, which is dedicated to prioritizing the safety and well-being of all guests. Our mission is to enhance the quality of life for our community by providing accessible, clean, and safe recreational facilities. As one of the busiest parks in the area, it is crucial to ensure that visitors have access to modern restroom facilities, thereby improving their overall experience and encouraging continued enjoyment of the beach and its amenities..
8. Describe the need for or value of the project and how it addresses the selected funding priority.

The need for new restroom facilities at King Fisher Beach Park is critical, given that the current facilities have been in place since 1999 and suffer from aging plumbing that requires frequent repairs. As visitor foot traffic has significantly increased over the years, the existing restrooms can no longer adequately serve the growing number of park-goers. The recent acquisition of additional property for beach expansion in early 2025, funded by the Matagorda Bay Mitigation Trust, highlights the urgency for more restroom facilities in this newly developed area.

Moreover, the Port O'Connor Chamber of Commerce has proactively addressed safety concerns by repairing a failing seawall, enhancing public safety in the area where one of the new restroom facilities is planned. Additionally, the current pier is in the permitting phase for expansion, also supported by grant funds from the Matagorda Bay

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

Mitigation Trust, which is anticipated to attract even more visitors to the park. This project aligns with funding priorities by enhancing public health and safety, improving visitor experience, and supporting sustainable recreational use of the beach and park facilities.

9. List the goals and objectives of the proposed project:

Project Goals:

- a) Prevent contamination from the restrooms into the bodies of water in or around the beach.
- b) To increase beach visitation by providing quality facilities.

Project Objectives:

- a) Demolish the existing restroom and install 21.6' x 26' pre-cast 10-stall cement facility.
- b) Install a second 11' x 26' pre-cast 4-stall cement facility.

10. Describe the methods to be used in the proposed project. Please provide a list of tasks, deliverables and milestones. Please indicate what permits or authorizations are needed to implement project, if any, and if those have been secured:

Permits: We will ensure permits will be obtained in a timely manner and as required.

Task 1: Construction Awards:

- a) Engineering contract
- b) General construction contracts
- c) Plumbing and electrical contracts

Task 2: Construction Deliverable

- a) Construction Photographs
- b) As-builds
- c) Project Closeout Report

11. Describe the impact the project will have on the areas it benefits and the longevity of those benefits.

The installation of new restroom facilities at King Fisher Beach Park will have a significant positive impact on both visitors and the surrounding environment. The new restroom facilities is designed to be ADA compliant, ensuring accessibility for all visitors, including those with disabilities. This commitment to inclusivity will enhance the overall experience at King Fisher Beach Park, allowing everyone to enjoy the beach and its amenities comfortably and safely. By adhering to ADA standards, we are prioritizing the needs of all park-goers and promoting equal access to recreational facilities. By providing clean and modern restrooms, we will enhance the overall visitor experience, encouraging more families and individuals to enjoy the beach and park amenities. This increased usage will foster a greater sense of community and promote outdoor recreation.

The new facilities will play a vital role in protecting the surrounding waterbodies and ecosystems. By ensuring proper sanitation and waste management, we can mitigate pollution and safeguard the natural resources that are essential to the area's biodiversity. The longevity of these benefits is assured through the design and maintenance of the facilities, which will support responsible park usage for many years.

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

to come, ultimately contributing to the sustainability and health of the local environment.

12. Attach vitae or resume of Lead Investigator/ Program Manager of the proposed project. Commissioner Reese will be the project manager for the proposed project. Commissioner Reese has several years of experience managing projects at King Fisher Beach Park, Hog Bayou, Boggy Bayou, and Bill Sanders Memorial Park at Swan Point.

13. Financial information:

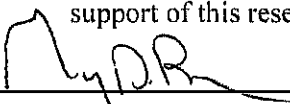
- a) Total budget for this project: \$530,244.50
- b) Matching funds (in-kind services or cash)
(Not required but desirable for proposals in response to the general call for proposals: \$10,000.00
- c) Amount being requested from the Trust \$520,244.50

14. Please provide a task and expense budget. Note: Indirect/overhead costs are limited to 15% of salaries charged to the project.

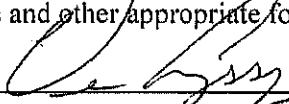
a) Pre-Fab Restroom Buildings	\$ 479,994.50
b) Plumbing	\$ 20,250.00
c) Concrete	\$ 20,000.00
d) Demolition	<u>\$ 10,000.00</u>
Total	\$ 530,244.50

Should the Matagorda Bay Mitigation Trust fund this project, the undersigned agrees:

- a) To enter into a contract specifying the terms and conditions of the engagement.
b) To designate where any dissertation or thesis can be accessed by the Matagorda Bay Mitigation Trust if applicable (e.g., website, publication source, etc.);
c) To provide digital images of project activities; and
d) To provide evidence of full and proper credit to the Matagorda Bay Mitigation Trust for support of this research/project in all publications and other appropriate forums.



Gary D. Reese, Lead Investigator



Vern Lyssy, Authorized Representative

Submittal Date: 10-13-2025

<https://www.mbmtrust.com/rfps/>

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

PART V - ATTACHMENTS

**All Attachments are to be returned with Submittal
ATTACHMENT A - SUBMISSION EXCEPTIONS/CLARIFICATIONS**

Any exceptions taken or clarifications made to this RFP must be itemized on the lines below. Additional pages may be added as needed. If there are no exceptions or clarifications, please indicate "NONE" and sign where indicated at the bottom of the page.

Item # Description

#1. As a Texas county, Calhoun County is subject to the laws and limitations of the Texas Local Government Code. As a governmental body, it will be unable to comply with some of the stated contractual terms and conditions, such as insurance requirements. However, to the extent possible, the County will comply with the contractual terms and conditions. All terms and conditions will be discussed and finalized during contract negotiations.

The above exceptions and clarifications (and any additional pages identified) are the ONLY exceptions/clarifications to the specifications. I understand that the Trust may not accept additional exceptions produced after final submission of this response.


Signature

Calhoun County
Respondent

10-13-2025
Date

No Exceptions are taken to this RFP.

N/A
Signature

N/A
Respondent

N/A
Date

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

ATTACHMENT B -ACKNOWLEDGMENT

The undersigned agrees this submission becomes the property of the Matagorda Bay Mitigation Trust (Trust) after the published submission deadline.

The undersigned affirms they have familiarized themselves with the specification, drawings, exhibits and other documents; the local conditions under which the work is to be performed; satisfied themselves of the conditions of delivery, handling and storage of materials and equipment; and all other matters that will be required for the work before submitting a response.

The undersigned agrees, if this submission is accepted, to furnish any and all items/services upon which prices are offered, at the price(s) and upon the terms and conditions contained in the specification. The period for acceptance of this submission will be 120 calendar days from the filing deadline noted herein unless a different period is noted.

The undersigned affirms that they are duly authorized to execute this contract, that this submission has not been prepared in collusion with any other Respondent, nor any employee or representative of the Trust, and that the contents of this submission have not been communicated to any other Respondent or to any employee or representative of the Trust prior to this submission.

Respondent hereby assigns to the Trust any and all claims for overcharges associated with this contract which arise under the antitrust laws of the United States, 15 USCA Section 1 et seq., and which arise under the antitrust laws of the State of Texas, Tex. Bus. & Com. Code, Section 15.01, et seq.

The undersigned affirms that they have read and understand the specifications, all exhibits, and attachments contained in this RFP package.

The undersigned agrees that the RFP package posted on the website are the official specifications and shall not alter the electronic copy of the RFP package, without clearly identifying changes.

The undersigned understands they will be responsible for monitoring the Trust Website at: <https://www.mbmtrust.com/rfps/> to ensure they have downloaded and signed all addendum(s) required for submission with their response.

In submitting a response to the Trust, the Responder offers and agrees that if the response is accepted, the Responder will convey, sell, assign or transfer to the Trust all rights, titles and interest in and to all causes to action it may now or hereafter acquire under the Anti-trust laws of the United States and the State of Texas for price fixing relating to the particular commodities or services purchased or acquired by the Trust. At the Trust's discretion, such assignment shall be made and become effective at the time the Trust tenders final payment to the Responder.

Acknowledge receipt of following addenda to the RFP:

Addendum No 1 Dated _____
Addendum No 2 Dated _____
Addendum No 3 Dated _____

Received _____
Received _____
Received _____

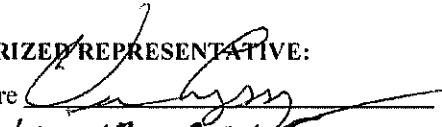
I certify that I have made no willful misrepresentations in this submission, nor have I withheld information in my statements and answers to questions. I am aware that the information given by me in this submission will be investigated, with my full permission, and that any misrepresentations or omissions may cause my submission to be rejected.

NAME AND ADDRESS OF RESPONDENT:

Calhoun County
211 S. Ann St.
Port Lavaca, TX 77979

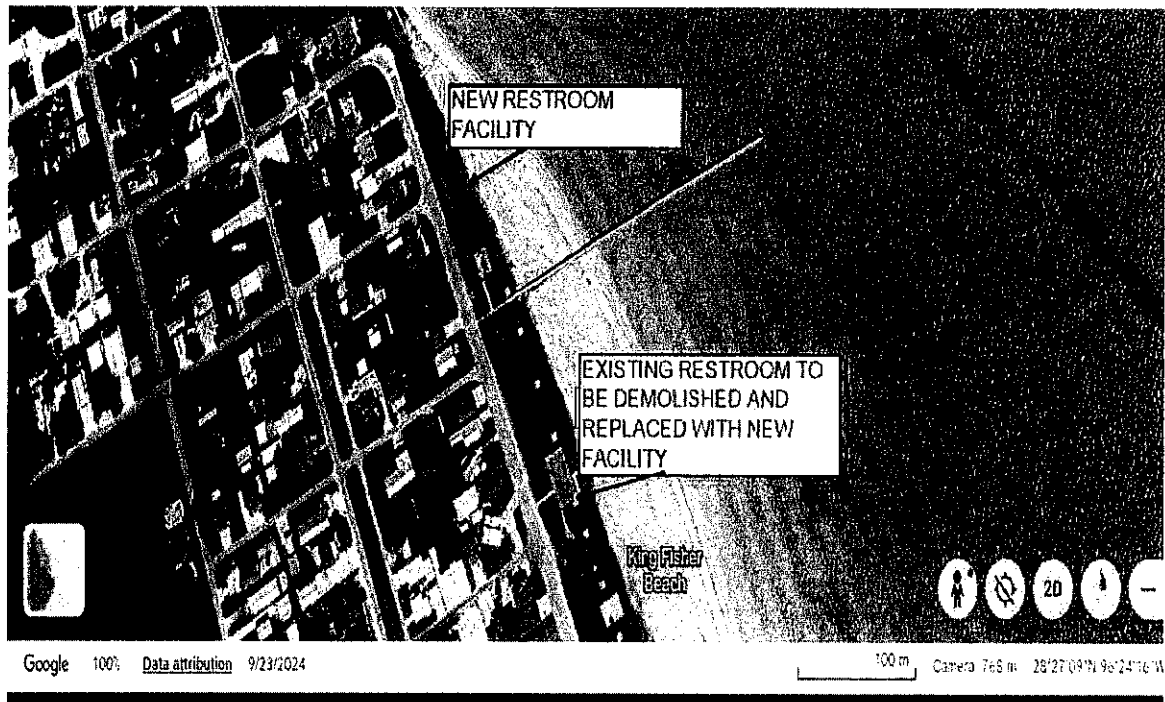
Tel. No. 361-553-4600

AUTHORIZED REPRESENTATIVE:

Signature 
Date 10-13-2025
Name Vern Lyssy
Title County Judge, Calhoun County
Email. vern.lyssy@calhouncotx.org

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

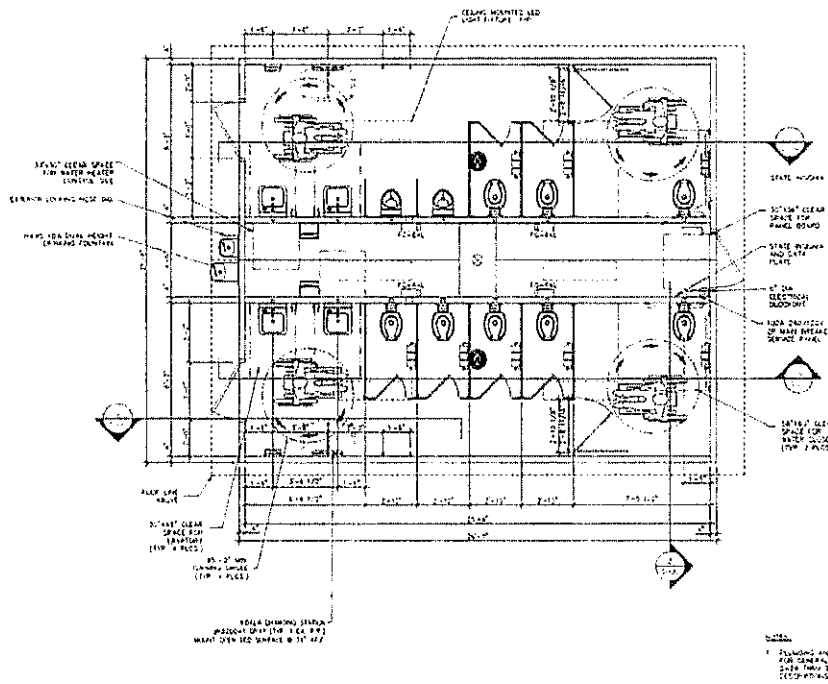
ATTACHMENT C –DRAWINGS



**CURRENT CONDITIONS OF EXISTING RESTROOM FACILITY AT KING FISHER
BEACH PARK**

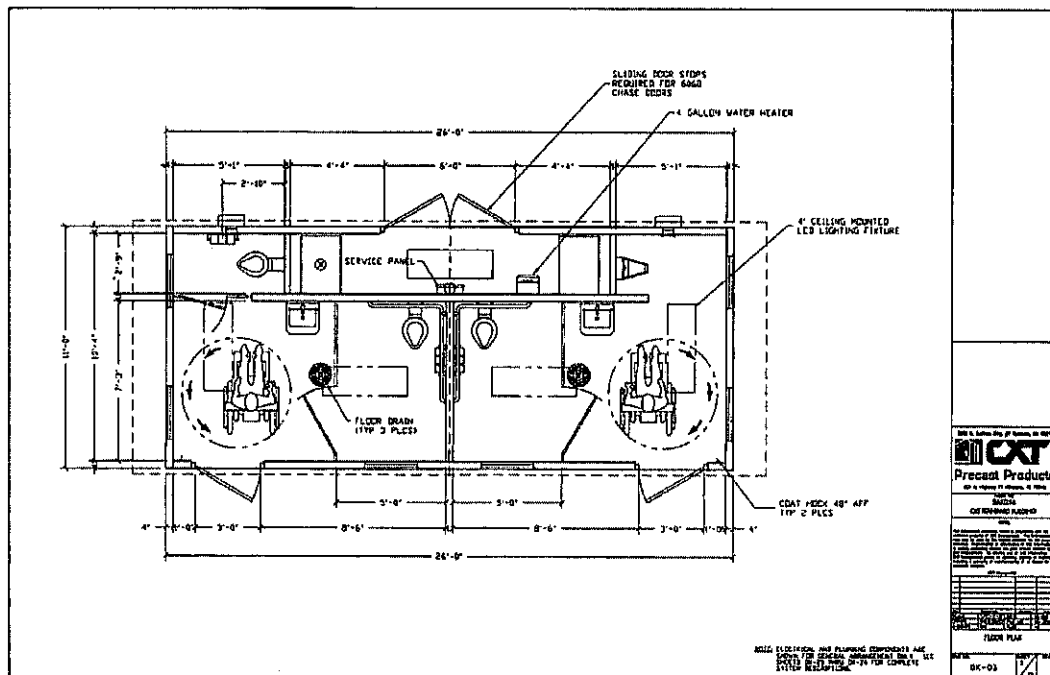
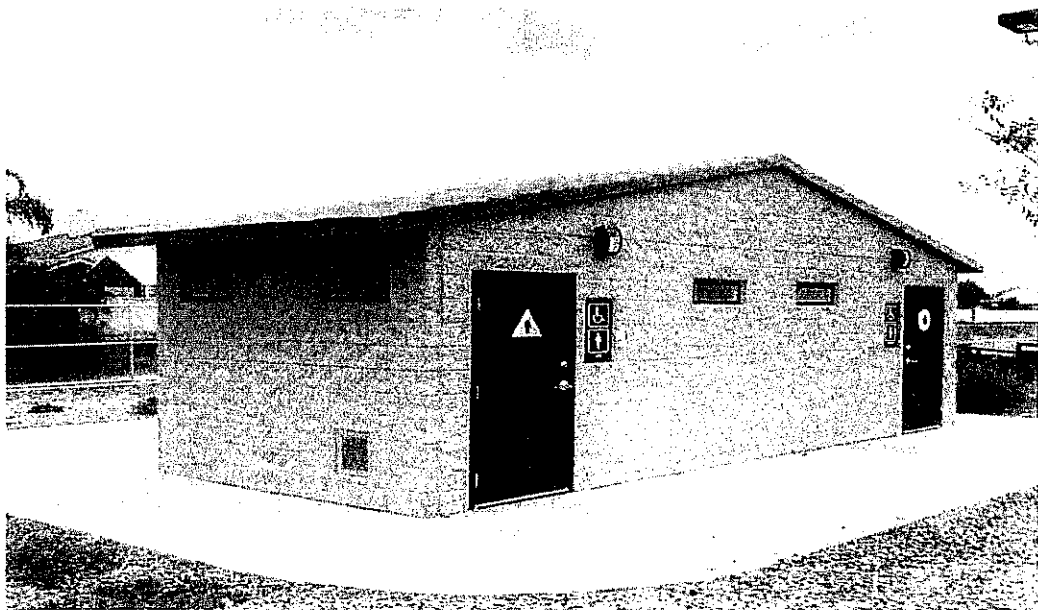


NEW RESTROOM FACILITY – REPLACING CURRENT RESTROOM



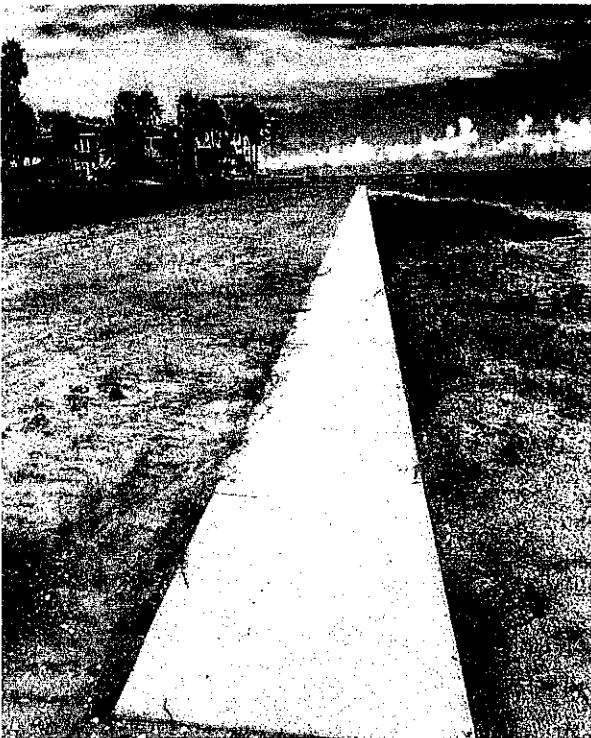
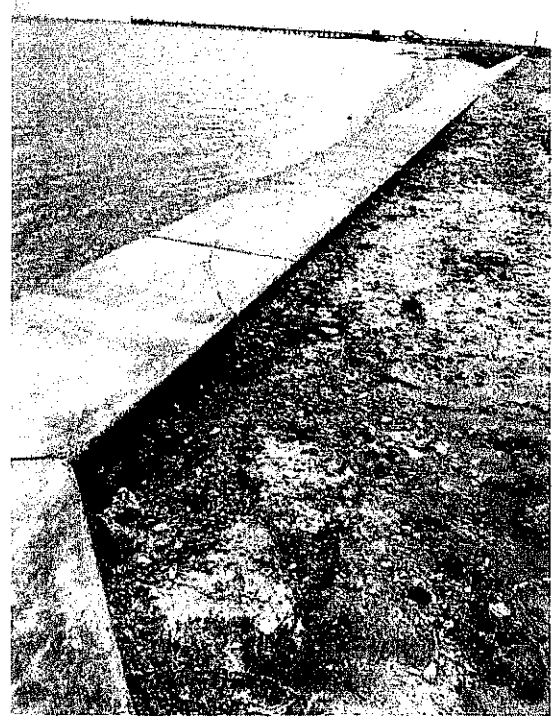
Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

NEW RESTROOM FACILITY FOR THE ADDED BEACH AREA



Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

**NEW AREA ACQUIRED FOR ADDED BEACH AREA, MADE POSSIBLE BY
MATAGORDA BAY MITIGATION TRUST**



Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

ATTACHMENT C –LETTER OF SUPPORT



The Best Kept Secret on the Gulf Coast

The Port O'Connor Chamber of Commerce

PO Box 701

Port O'Connor, TX 77982

Phone: 361-983-2898

www.portoconnorchamber.com

September 30, 2025

Steven J Raabe, P.E.
Trustee, Matagorda Bay Mitigation Trust
PO Box 1269
Poth, TX 78147-1269

Dear Grant Review Committee,

I am writing to express our wholehearted support for the grant application to fund the renovation and expansion of restroom facilities at King Fisher Beach Park. As a community member and volunteer supporter, I have observed the urgent need for modern, accessible public restrooms to better serve the diverse visitors to this vital community space.

The current restrooms at King Fisher Beach Park are outdated, frequently in disrepair, and insufficient to accommodate the growing number of visitors, which has grown significantly in recent years. The lack of facilities at the opposite end of the beach creates significant challenges, especially for individuals with disabilities, elderly visitors, and families with young children who must travel long distances to access restrooms. Most critically, the existing facilities do not fully meet the standards of the Americans with Disabilities Act (ADA), limiting access for community members who rely on wheelchairs or other mobility aids. Incorporating ADA-compliant restrooms in the proposed renovation and expansion project will yield significant benefits for our community, attracting a more diverse range of visitors.

King Fisher Beach Park is a cornerstone of our community, fostering recreation, social connection, and economic vitality. Renovating the existing restrooms and constructing additional ADA-compliant facilities at the opposite end of the beach will ensure that all community members, regardless of ability, can fully enjoy this cherished space. This initiative will enhance the park's role as an inclusive, safe, and accessible destination for residents and visitors alike. Improved and accessible restrooms will ensure a more comfortable experience for events, encouraging greater participation in community-building events which attract thousands of visitors, reducing wait times and enhancing the overall experience for attendees. This project will also enable all community members to enjoy the park's recreational opportunities, from picnics to beachside walks, with greater ease and dignity.

I strongly urge your support for this grant to fund the restroom renovation and expansion at King Fisher Beach Park. This project will have a lasting positive impact on our community, boosting local tourism and supporting nearby businesses that rely on improved amenities to increase economic activity in the area.

Sincerely,
Daria Parker
President, Port O'Connor Chamber of Commerce
361-983-2898

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MATAGORDA BAY MITIGATION TRUST

**RESPONSE
TO
2025-2026 Funding Cycle Projects
RFP# 2025-2026-1
GREEN LAKE BREACH REPAIR
PREPARED & SUBMITTED BY
CALHOUN COUNTY PRECINCT FOUR**

October 14, 2025

Contact Person:	Steven J. Raabe, P.E. Trustee Email: trustee@mbmTrust.com
Respondent	Calhoun County Gary Reese, Commissioner Email: gary.reese@calhouncotx.org

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

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Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

PART IV



MATAGORDA BAY MITIGATION TRUST

Deadline:
October 14, 2025
At 5:00 PM

Please contact Steven J. Raabe.
with any questions.
Trustee@mbmTrust.com

APPLICATION FORM - 2025-2026 Funding Cycle
(Please address all questions. Include additional pages if necessary)

1. Program/project contact information:

Name of Lead Investigator/Program Manager:
Gary Reese Calhoun County Commissioner
Calhoun County Pct. #4

Name of organization:
Calhoun County

Physical address:
104 E. Dallas Ave.
Seadrift, TX 77983

Mailing address:
P.O. Box 177
Seadrift, TX 77983

Email address:
gary.reese@calhouncotx.org

Telephone number:
361-785-3141

Fax number:
361-785-5602

Name of Authorized Representative:
Vern Lyssy, Calhoun County Judge
Email address for Authorized Representative:
vern.lyssy@calhouncotx.org

Check the funding priority that
applies to your proposed
project:

General Call:

- ☐ Public Education
- ☐ Youth Camps
- ☐ Land for Pollution Prevention
- ☐ Public Access Improvement
- ☐ Environmental Research
- ☐ Environmental Advocacy
- ☐ Habitat Restoration

Specific Call No. 1:

☒ Dedicated Mitigation Projects

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

2. Applicants must be classified as a government or non-profit organization.
Provide Federal Tax ID number or IRS Letter of Determination.
TIN: 74-6001923 DUNS:087309324
3. Program/project name: **Green Lake Breach Repair**
4. Implementation and conclusion dates of program/project:
Guadalupe Blanco River Authority started engineering plans to re-establish control of the Green Lake Control Structure in 2021; completion of the project should be fall 2026.
5. Amount requested: **\$2,000,000**
6. Proposed project summary (100 words or less)
This project aims to manage and regulate the overflow of Green Lake waters into the Guadalupe Blanco River Authority (GBRA) diversion channel. By implementing effective control measures, we will prevent further breaches and erosion of wetlands, thereby protecting the sensitive ecosystems surrounding Green Lake. This initiative is essential for preserving the area's biodiversity and ensuring the long-term health of the local environment.
7. Brief history and mission statement of the proposing organization (150 words or less)
The project is guided by an Interlocal Agreement between Calhoun County and the Guadalupe Blanco River Authority (GBRA) aimed at re-establishing control over Green Lake's overflow into the GBRA diversion channel. The GBRA operates a diversion canal adjacent to Green Lake, where erosive overflows have caused breaches along the canal's north side. These breaches negatively impact water supply operations and create access issues for the lake.

Our mission is to repair the existing breaches and implement measures to prevent future occurrences, thereby ensuring the integrity of the diversion canal and the sustainability of water resources. This initiative is essential for maintaining effective water management and protecting the surrounding ecosystems.
8. Describe the need for or value of the project and how it addresses the selected funding priority.
Due to length of engineering & permitting, and material cost overruns, the estimated total cost is \$2,000,000 over the initial \$2,000,000 allocated for this project. To date, engineering has cost \$911,840.37. Construction Cost Estimate (90% OPCC) is \$3,088,159.67.
9. List the goals and objectives of the proposed project:
Goal: Establish control of the Green Lake overflows to ensure effective water management and protect surrounding areas.

Objectives:
 - a) Repair existing breaches in the diversion canal and implement measures to prevent future breaches, safeguarding the integrity of the water management system.

Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

- b) Provide safe and reliable access to the control structure, facilitating ongoing maintenance and monitoring to ensure its functionality and effectiveness.

10. Describe the methods to be used in the proposed project. Please provide a list of tasks, deliverables and milestones. Please indicate what permits or authorizations are needed to implement project, if any, and if those have been secured:

- a) USACE Nationwide Permit has been obtained by GBRA
- b) Project plans are at 90% with 100% due to be completed by Sept. 30, 2025
- c) Environmental studies are complete along with archeological studies

11. Describe the impact the project will have on the areas it benefits and the longevity of those benefits.

- a) The project will have a profound impact on the surrounding areas by effectively controlling the overflows of Green Lake, which is essential for maintaining water quality and protecting adjacent ecosystems. By repairing existing breaches and implementing measures to prevent future occurrences, we will enhance the structural integrity of the diversion canal, ensuring reliable water management.
- b) Controlling the water level of Green Lake will not only support recreational activities for residents and visitors but also create a stable habitat for local wildlife. This balance is crucial for preserving biodiversity and promoting healthy ecosystems in the area.
- c) The longevity of these benefits is secured through the implementation of sustainable practices and ongoing maintenance of the control structure. By investing in this project, we are ensuring that the community can enjoy the recreational opportunities and ecological advantages of Green Lake for many years to come, fostering a thriving environment for both people and wildlife.

12. Attach vitae or resume of Lead Investigator/ Program Manager of the proposed project.

Commissioner Reese will be the project manager for the proposed project. Commissioner Reese is currently working with GBRA on the breach repair. This project will continue that work.

13. Financial information:

Total budget for this project: \$2,000,000

Matching funds (in-kind services or cash)

(Not required but desirable for proposals in response to the general call for proposals:

Amount being requested from the Trust \$2,000,000

14. Please provide a task and expense budget. Note: Indirect/overhead costs are limited to 15% of salaries charged to the project.

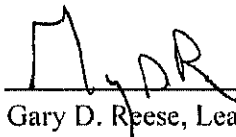
Engineering	\$ 911,840.27
Construction	<u>\$3,088,159.63</u>
Total	\$4,000,000.00

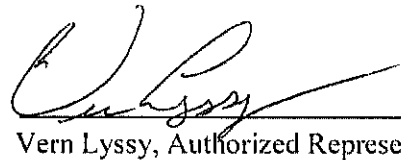
Matagorda Bay Mitigation Trust
RFP for 2025-2026 Funding Cycle Projects

As the amount requested is to go towards an established project, the full \$4,000,000 budget is shown.

Should the Matagorda Bay Mitigation Trust fund this project, the undersigned agrees:

- a) To enter into a contract specifying the terms and conditions of the engagement.
- b) To designate where any dissertation or thesis can be accessed by the Matagorda Bay Mitigation Trust if applicable (e.g., website, publication source, etc.);
- c) To provide digital images of project activities; and
- d) To provide evidence of full and proper credit to the Matagorda Bay Mitigation Trust for support of this research/project in all publications and other appropriate forums.


Gary D. Reese, Lead Investigator


Vern Lyssy, Authorized Representative

Submittal Date: 10-13-2025

Submit completed applications to (PDF file size limit: 15MB):

<https://www.mbmtrust.com/rfps/>

PART V - ATTACHMENTS

All Attachments are to be returned with Submittal

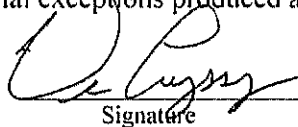
ATTACHMENT A - SUBMISSION EXCEPTIONS/CLARIFICATIONS

Any exceptions taken or clarifications made to this RFP must be itemized on the lines below. Additional pages may be added as needed. If there are no exceptions or clarifications, please indicate "NONE" and sign where indicated at the bottom of the page.

Item # Description

#1. As a Texas county, Calhoun County is subject to the laws and limitations of the Texas Local Government Code. As a governmental body, it will be unable to comply with some of the stated contractual terms and conditions, such as insurance requirements. However, to the extent possible, the County will comply with the contractual terms and conditions. All terms and conditions will be discussed and finalized during contract negotiations.

The above exceptions and clarifications (and any additional pages identified) are the ONLY exceptions/clarifications to the specifications. I understand that the Trust may not accept additional exceptions produced after final submission of this response.


Signature

Calhoun County
Respondent

10-13-2025
Date

No Exceptions are taken to this RFP.

N/A
Signature

N/A
Respondent

N/A
Date

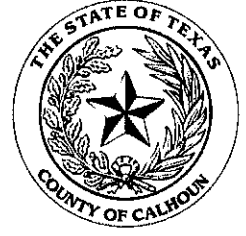
ATTACHMENT B -ACKNOWLEDGMENT

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Gary D. Reese
County Commissioner
County of Calhoun
Precinct 4



October 7, 2025

Honorable Vern Lyssy
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: AGENDA ITEM

Dear Judge Lyssy:

Please place the following item on the Commissioners' Court Agenda for October 15, 2025.

- Consider and take necessary action to accept Maintenance Agreement with Victoria Air Conditioning, Ltd for (2) Mini Splits Heat Pump and (1) DX Split System Electric Heat at an annual cost of \$1,876.00 to be billed quarterly at \$469.00 and authorize Commissioner Gary Reese to sign agreement.

Sincerely,

Gary D. Reese

GDR/at



200 S. Ben Jordan
Victoria, Texas 77901
(361) 578-5241
Fax 576-0811

Proposal Date: 8/20/2025

Peak Performance HVAC Maintenance Agreement

4 Maintenance & Filter Change with Task List

Designed Especially For

CALHOUN CTY PRECINCT 4 – OFFICE

PO BOX 177, SEADRIFT TX 77983

APRIL.TOWNSEND@CALHOUNCOTX.ORG

ATTENTION: GARY REESE/APRIL TOWNSEND

EQUIPMENT LOCATED AT:

104 E DALLAS, SEADRIFT TX 77983

PHONE NUMBER

361-785-3141

VAC is pleased to offer you this maintenance agreement for your Air Conditioning and Heating Systems listed in this agreement. VAC will check your equipment based on our task lists as it applies to your specific HVAC equipment. Equipment maintenance and inspections will be done on a quarterly basis with complete task list being performed. Pleated air filters will be replaced quarterly. Service records with task lists will be kept on file at our office. These lists can be emailed to you upon request.

An initial system inspection will be performed during our first maintenance at your facility. A list of all required repairs will be given to the owner for review and approval.

1. Commercial maintenance agreement customers receive priority, emergency demand service at all times.
2. This agreement is in effect from the date it is signed by VAC and is automatically renewed at the end of each year at the current contract amount unless it is canceled in writing, by either party. Intent to cancel shall be given at least (30) thirty days in advance. If VAC needs to increase the renewal price of the contract, we will submit a revised contract to the customer for their consideration.
3. If another contractor works on the equipment covered under this agreement, VAC retains the right to terminate this agreement.

4. If our inspection should uncover problems which require additional service or repair, you will be advised in writing. Your approval is required before any additional work can be performed.

5. Any repair and/or emergency labor costs will be billed at the current commercial demand service rate and current commercial demand service overtime rate (one-man rate). A two-man rate is used only when the work requires additional help and will be billed at our current two-man rate. Overtime is any work not performed between the hours of 8:00 A.M to 4:30 P.M. Monday through Friday excluding holidays.

6. VAC reserves the right to cease services under this agreement at any time, should the contract billing not be paid.

7. Effective date begins upon Victoria Air Conditioning, LTD execution of this contract.

Annual Cost of this agreement shall be \$1876.00 plus sales tax (if applicable)

Billing will occur in increments of \$469.00 plus sales tax (if applicable) to be

billed upon completion of each maintenance trip.

This price will remain in effect for 30 days from the date of this proposal.

Equipment and locations to be covered under this agreement is listed below or attached.

2-MINI SPLITS HEAT PUMP

1-DX SPLIT SYSTEMS ELECTRIC HEAT

Victoria Air Conditioning, LTD.

By



VAC Sales



VAC Service Manager

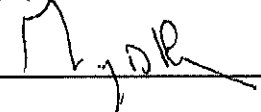
Date: 10/02/2025

Customer:

Address:

Name: Gary Reese

Title: Commissioner

Signature: 

Date: 10-15-2025

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
CERTIFICATION OF FILING**

1. Name of business entity filing form, and the city, state and country of the business entity's place of business.

Victoria Air Conditioning Ltd
Victoria, TX United States

Certificate Number:
2025-1372155

Date Filed:
10/02/2025

Date Acknowledged:

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Calhoun County Precinct 4 Commissioners Court

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

CMC Precinct 4 Office
HVAC Maintenance Contract

[illegible]

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Brandon Sappington, and my date of birth is 01/01/1998

My address is _____
(city) (state) (zip code) Vietnam
(country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Victoria County, State of TX, on the 2nd day of October, 20 25
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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October 7, 2025

Honorable Vern Lyssy
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: AGENDA ITEM

Dear Judge Lyssy:

Please place the following item on the Commissioner's Court Agenda for October 15, 2025.

- Consider and take the necessary action to accept a donation for Calhoun County Precinct 1 in the amount of \$500 in the form of a check and place into the 2697 DONATION FUND.

Sincerely,

/apt



TERESA MALINEK
PO BOX 32
PORT LAVACA, TX 77979

1498

88-2316/1131
01

10/6/2025
date

CHECK ARMOR
STANDARD PROTECTION

PAY to the order of Calhoun County Rd 2, Bridge \$ 500.00
Five hundred dollars

Photo
Safe
Deposit
Details on back

FNB FIRST NATIONAL BANK
In Port Lavaca
P.O. Drawer 7, Port Lavaca, Texas 77979
www.fnbportlavaca.com

for Misc. Donation - Employees Maline

⑆ 113123162⑆ 203 361 5⑈ 1498

Harford Clats

SEA TREASURES

25

Department Name: District Clerk Office
Requested By: Teresa Olaseuaga Garcia

[illegible]

26

Department Name: District Clerk Office
Requested By: Teresa Olascuaga Garcia

Department Name: District Clerk Office
Requested By: Teresa Olascuaga Garcia

Requested By: Teresa Olascuaga Garcia

[illegible]

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Debbie Vickery

From: Vicki.Cox@calhouncotx.org (Vicki Cox) <Vicki.Cox@calhouncotx.org>
Sent: Thursday, October 9, 2025 9:33 AM
To: Debbie Vickery
Subject: Commissioner's Court
Attachments: Gift Shop Price List.docx

Follow Up Flag: Follow up
Flag Status: Flagged

Please add to the next agenda

- Consider and take necessary action to allow Vicki Cox to change prices of items in the Museum Gift Shop.

Vicki Cox
Director
Calhoun County Museum

Calhoun County Texas

	New Price:	original price:
A frontier Tx Merc	8.00	15.00
African Americans in So. Tx Hitory	12.00	23.00
African Texans	5.00	10.95
Alligators of TX	15.00	29.95
Amazing Grace	5.00	9.03
American Artifacts of Personal..	25.00	45.00
Black Cowboys of TX	10.00	19.95
Black Frontiersman	10.00	19.95
Bowl of Red	10.00	19.95
Buff Tea	12.00	26.95
Buffalo Soldier Tragedy 1877	12.00	24.95
Buffalo Soldiers in the West	10.00	19.95
Camp Indianola	10.00	12.95
Cleaning the Well	7.00	14.19
Cooking with Tx Poets	12.00	22.95
Dazzle of Dragonflies	10.00	19.95
Deadly Betrayal	8.00	10.00
Dictionary of Common Wildflowers	15.00	29.95
Dragonflies of TX	15.00	27.95
Editing Sky	10.00	20.00
European Texans	5.00	12.95
Everyman Also	1.99	no change
Explore TX	15.00	28.00
Faithful Sheep	9.00	17.49
Famous African American Women	3.00	3.95
Famous Africans-Paper dolls	10.00	19.95
First Polish Americans	15.00	19.95
Fishes of the Gulf Of Mexico	10.00	18.95
French Thorn	35.00	49.50
From A Watery Grave	24.00	24.00
Gulf Coast Cooking	15.00	34.95
Hands to the Spindle	10.00	19.95
Hecho En Tejas	10.00	17.95
Here's to Noah	15.00	19.95
History-General Store	5.00	7.95
History-Home Crafts	5.00	7.95
Hog to Hog	5.00	5.99
Hundred years of Tx Waterfowl	20.00	35.00
Images of Calhoun County	21.99	no change
Images of Port A	17.00	21.99
Images of Shipwrecks	17.00	21.99

Indianola Mother of Western Texas	24.95	no change
LaBelle, Ship that changed History	15.00	19.95
LaSalle Expedition in Texas	25.00	35.00
Learn About Tx birds	8.00	10.95
Life Histories of N. American Marsh Birds	7.00	13.95
Life on the Texas Range	13.00	21.95
Lone Star Eats	18.00	24.95
Love Give us one Death	8.00	12.65
Images of Lighthouse of Texas	15.00	21.99
Longhorns	12.00	19.95
Mammals of Texas	20.00	29.95
Mariguano	18.00	22.95
Marine plants of the Texas Coast	20.00	32.00
Mascot Mania	3.00	3.25
Mexican Americans in Texas History	12.00	15.95
Mexican Texans	5.00	10.95
Naturally- South Texas	15.00	24.95
News about people you know	3.00	3.20
Notable Men & Women Spanish TX	25.00	35.00
Parts	12.00	20.95
Peppers Cookbook	12.00	21.95
Plants of the Tx Coastal Bend	20.00	40.00
Pompeii Man	15.00	26.95
Port Lavaca, Texas 1840-1990	10.00	15.00
Raiders & Horse Thieves	10.00	18.95
Rare Plants of Texas	20.00	35.00
Reginaldo at the Alamo	Remove-don't plan on re-ordering	
Resurrecting trash	15.00	24.95
Ruffin It	10.00	17.95
Seadrift Memories	15.00	25.00
Scissortails at Dawn, Bullbats at Dark	12.00	19.95
Sign of Redemption	10.00	17.95
Southern Poetry Anth. Vol 2: Miss	10.00	14.26
Southern Poetry Anth. Vol 7 N. Caro	10.00	22.95
Steinhouse	Remove-don't plan on re-ordering	
Take your time Coming Home	5.00	6.39
Tejano Community	8.00	14.95
Tejanos in Gray	20.00	29.95
Texans in the Confederate Calvary	6.00	11.95
Texas Bug Book	remove-not going to re-order	
Texas Coast	20.00	29.95
Texas Cook Book	12.00	19.95
Texas Gulf Coast Experience	20.00	40.00
Texas Market Hunt	15.00	30.00

Texas Turtles & Crocs	12.00		24.95
Texas Wildflowers	10.00		19.95
Texas Rangers	25.00		34.95
That Rough Beast	12.00		18.95
The Border	5.00		5.53
The Fire Doll (you have it listed as Fine)	10.00		17.05
A Good Girl (Not "the")	12.00		20.95
LaSalle Expedition on the Miss (the list shows 1 for sale, but it is in my office)			
Texas Anthology	5.00		8.95
Southwest Anthology	4.00		4.70
Vaquero	20.00		39.95
Vanishing Points	10.00		20.11
We Came Naked & Barefoot	20.00		39.95
Whooping Crane	30.00		45.00
Wild Game cookbook	5.00		7.95
Wilderness Manhunt	12.00		16.95
Wildflowers & Other Plants	15.00	1 is in my office	29.95
Wildflowers of Texas	10.00	1 in my office	19.95
Winships Log	7.00		7.99
Wooden Lions	5.00		9.85
Wreck of the Belle	15.00		29.95
Wrecking of LaSalle's Ship	20.00		50.00
Artifact Game	15.00		29.99
LaSalle in Texas DVD	15.00		24.95
LaSalle Odyssey CD	8.00		10.00
POC Pic DVD	4.00		6.00
Tie Bar	8.00		20.00
Cufflinks	8.00		24.95
Leather Keychains (all 3)	8.00		20.00
\$10 prints	5.00		10.00
\$14 prints	7.00		14.00
\$15 Halfmoon Reef	8.00		15.00
\$16 prints	8.00		16.00
8 X 10 -- Diorama	5.00		8.75
Postcards	.75		7.00
Amish/Quilt cross stitch bookmark	4.00		7.30
Beginning Weaving Projects	4.00		5.99
Cornhusk Doll kit	4.00		8.59

Cotton Handle Spindle set	5.00	12.89
Early American Sampler kit	5.00	11.99
Goose Quill Pen	4.00	5.25
Spool Knitter	5.00	10.59
Boat Picture Frame	8.00	11.70
Caught Napping Fish Hanging	6.00	12.75
Fish Fossil #2	10.00	21.35
Fish Hangers	6.00	12.75
Framed fish & Net	8.00	13.45
Dolphin Thermometer	2.00	2.80
Lighthouse candles	6.00	10.95
Lighthouse Plaques	9.00	19.97
Lighthouse plate	8.00	12.70
Lighthouse vase	7.00	14.51
Arrowheads	no change	
Clam shell – chipped	1.50	3.00
Shells: .10 no change		
.35 change to .20		
.45 .20		
.50 .20		
.55 .20		
1.0 .50		
1.95 .75		
1.99 .75		
2.00 .20		
2.50 .75		
3.00 1.50		
Small wooden seagull	6.00	11.95
Wood Pulley	Remove	
Wooden Pelican w/painted wings	15.00	31.50
Marble Whale	4.00	8.96
Glass Fish Bowls	8.00	11.70
Large Glass Dolphin	17.00	37.95
Large Glass Pelican	21.00	42.40
Small Glass Pelican	14.00	28.60
Plates: Ceramic	no change	
Metal	5.00	10.00

Letter opener	5.00	9.75
Erasers	no change	
Envelopes	.50	1.00
Cards w/ envelope	.75	1.00
Quilt card	.50	1.00
Old pictures	.50	.75
Assorted pins	.50 only 1 left, and feet of bird are broken	2.50
Assorted fan pulls	1.50	4.80
Assorted fish swirl sticks	remove	
Bags	10.00	20.00
Bibs	5.00	10.00
Flashlight keychains	3.23 to match other keychains	3.29
Ornament lighthouse	10.00	21.95

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CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7211	1000	GENERAL FUND	140	LIBRARY	65470	REPAIRS-MAIN LIBRARY		8,465.00	LINE ITEM TRANSFER - COVER HOOPLA FOR REMAINDER OF YEAR
10/15/2025	7211	1000	GENERAL FUND	140	LIBRARY	70750	CAPITAL OUTLAY	5,465.00		LINE ITEM TRANSFER - COVER HOOPLA FOR REMAINDER OF YEAR
10/15/2025	7211	1000	GENERAL FUND	140	LIBRARY	71146	E-FORMAT/DIGITAL MATL-LIBRARY	3,000.00		LINE ITEM TRANSFER - COVER HOOPLA FOR REMAINDER OF YEAR
				Total 140	LIBRARY			8,465.00	8,465.00	
10/15/2025	7212	1000	GENERAL FUND	180	JAIL OPERATIONS	66498	TRAVEL OUT OF COUNTY	1,500.00		LINE ITEM TRANSFER
10/15/2025	7212	1000	GENERAL FUND	180	JAIL OPERATIONS	70750	CAPITAL OUTLAY		1,500.00	LINE ITEM TRANSFER
				Total 180	JAIL OPERATIONS			1,500.00	1,500.00	
10/15/2025	7213	1000	GENERAL FUND	001	REVENUE	41150	TAX ATTORNEY COMMISSIONS	20,000.00		LINE ITEM TRANSFER TO COVER EXPENSE
				Total 001	REVENUE			20,000.00	0.00	
10/15/2025	7213	1000	GENERAL FUND	200	COUNTY TAX COLLECTOR	61700	DELINQUENT TAX ATTORNEY FEES	20,000.00		LINE ITEM TRANSFER TO COVER EXPENSE

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7214	1000	GENERAL FUND	230	COMMISSIONERS COURT	54020	DUES	4,163.00		LINE ITEM TRANSFER
10/15/2025	7214	1000	GENERAL FUND	230	COMMISSIONERS COURT	63920	MISCELLANEOUS		4,163.00	LINE ITEM TRANSFER
				Total 200	COUNTY TAX COLLECTOR			20,000.00	0.00	
10/15/2025	7215	1000	GENERAL FUND	270	ELECTIONS	60490	BUILDING RENTAL		155.00	LINE ITEM TRANSFER TO COVER EXPENSES
10/15/2025	7215	1000	GENERAL FUND	270	ELECTIONS	61240	CONTRACT SERVICES		150.00	LINE ITEM TRANSFER TO COVER EXPENSES
10/15/2025	7215	1000	GENERAL FUND	270	ELECTIONS	62375	ELECTION SITE SUPPORT		5,520.00	LINE ITEM TRANSFER TO COVER EXPENSES
10/15/2025	7215	1000	GENERAL FUND	270	ELECTIONS	63501	MACHINE MAINT.-VOTING EQUIP.		1,000.00	LINE ITEM TRANSFER TO COVER EXPENSES
10/15/2025	7215	1000	GENERAL FUND	270	ELECTIONS	64790	POSTAGE	5,520.00		LINE ITEM TRANSFER TO COVER EXPENSES
10/15/2025	7215	1000	GENERAL FUND	270	ELECTIONS	66498	TRAVEL OUT OF COUNTY	1,305.00		LINE ITEM TRANSFER TO COVER EXPENSES
				Total 270	ELECTIONS			6,825.00	6,825.00	
10/15/2025	7216	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	53020	GENERAL OFFICE SUPPLIES	2,000.00		LINE ITEM TRANSFER TO COVER COST

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7216	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	53310	PROGRAM SUPPLIES	200.00		LINE ITEM TRANSFER TO COVER COST
10/15/2025	7216	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	63530	MACHINERY/EQUI... REPAIRS	2,000.00		LINE ITEM TRANSFER TO COVER COST
10/15/2025	7216	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	70750	CAPITAL OUTLAY		4,200.00	LINE ITEM TRANSFER TO COVER COST
				Total 345	EMERGENCY MEDICAL SERVICES			4,200.00	4,200.00	
10/15/2025	7217	1000	GENERAL FUND	420	DISTRICT CLERK	63500	MACHINE MAINTENANCE		1,000.00	LINE ITEM TRANSFER TO COVER TRAVEL EXPENSES
10/15/2025	7217	1000	GENERAL FUND	420	DISTRICT CLERK	66316	TRAINING TRAVEL OUT OF COUNTY	1,000.00		LINE ITEM TRANSFER TO COVER TRAVEL EXPENSES
				Total 420	DISTRICT CLERK			1,000.00	1,000.00	
10/15/2025	7218	1000	GENERAL FUND	470	JUSTICE OF PEACE-PRECINCT #3	63500	MACHINE MAINTENANCE		499.00	LINE ITEM TRANSFER TO REPLACE AC/HEAT UNIT IN OFFICE
10/15/2025	7218	1000	GENERAL FUND	470	JUSTICE OF PEACE-PRECINCT #3	63920	MISCELLANEOUS		1,799.00	LINE ITEM TRANSFER TO REPLACE AC/HEAT UNIT IN OFFICE
10/15/2025	7218	1000	GENERAL FUND	470	JUSTICE OF PEACE-PRECINCT #3	65840	SOFTWARE TRAINING		849.00	LINE ITEM TRANSFER TO REPLACE AC/HEAT UNIT IN OFFICE

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7218	1000	GENERAL FUND	470	JUSTICE OF PEACE-PRECINCT #3	66192	TELEPHONE SERVICES	239.00		LINE ITEM TRANSFER TO REPLACE AC/HEAT UNIT IN OFFICE
10/15/2025	7218	1000	GENERAL FUND	470	JUSTICE OF PEACE-PRECINCT #3	72350	EQUIPMENT-OFFICE	2,908.00		LINE ITEM TRANSFER TO REPLACE AC/HEAT UNIT IN OFFICE
				Total 470	JUSTICE OF PEACE-PRECINCT #3			3,147.00	3,147.00	
10/15/2025	7219	1000	GENERAL FUND	480	JUSTICE OF PEACE-PRECINCT #4	53020	GENERAL OFFICE SUPPLIES		800.00	LINE ITEM TRANSFER TO COVER TRAVEL EXPENSE
10/15/2025	7219	1000	GENERAL FUND	480	JUSTICE OF PEACE-PRECINCT #4	66476	TRAVEL IN COUNTY	800.00		LINE ITEM TRANSFER TO COVER TRAVEL EXPENSE
				Total 480	JUSTICE OF PEACE-PRECINCT #4			800.00	800.00	
10/15/2025	7220	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	53210	MACHINERY PARTS/SUPPLIES	3,000.00		LINE ITEM ADJUSTMENT TO PAY BILLS
10/15/2025	7220	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	53630	INSECTICIDES/PES...	9,884.00		LINE ITEM ADJUSTMENT TO PAY BILLS
10/15/2025	7220	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	63920	MISCELLANEOUS		9,900.00	LINE ITEM ADJUSTMENT TO PAY BILLS
10/15/2025	7220	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	66498	TRAVEL OUT OF COUNTY	16.00		LINE ITEM ADJUSTMENT TO PAY BILLS

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7220	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	70750	CAPITAL OUTLAY		3,000.00	LINE ITEM ADJUSTMENT TO PAY BILLS
				Total 540	ROAD AND BRIDGE-PRECIN... #1			12,900.00	12,900.00	
10/15/2025	7221	1000	GENERAL FUND	560	ROAD AND BRIDGE-PRECIN... #3	51540	TEMPORARY	10,000.00		LINE ITEM TRANSFER
10/15/2025	7221	1000	GENERAL FUND	560	ROAD AND BRIDGE-PRECIN... #3	53590	SIGNS	700.00		LINE ITEM TRANSFER
10/15/2025	7221	1000	GENERAL FUND	560	ROAD AND BRIDGE-PRECIN... #3	60520	BUILDING REPAIRS		10,000.00	LINE ITEM TRANSFER
10/15/2025	7221	1000	GENERAL FUND	560	ROAD AND BRIDGE-PRECIN... #3	66600	UTILITIES	2,000.00		LINE ITEM TRANSFER
10/15/2025	7221	1000	GENERAL FUND	560	ROAD AND BRIDGE-PRECIN... #3	70750	CAPITAL OUTLAY		2,700.00	LINE ITEM TRANSFER
				Total 560	ROAD AND BRIDGE-PRECIN... #3			12,700.00	12,700.00	
10/15/2025	7222	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	53520	TIRES AND TUBES	656.00		LINE ITEM ADJUSTMENT
10/15/2025	7222	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	53540	GASOLINE/OIL/DIE...	5,000.00		LINE ITEM ADJUSTMENT
10/15/2025	7222	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	63530	MACHINERY/EQUI...		3,157.00	LINE ITEM ADJUSTMENT

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-COURT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7222	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	64370	OUTSIDE MAINTENANCE		2,499.00	LINE ITEM ADJUSTMENT
				Total 570	ROAD AND BRIDGE-PRECIN... #4			5,656.00	5,656.00	
10/15/2025	7223	2719	JUSTICE COURT TECHNOL... FUND	001	REVENUE	44061	FEES-JUSTICE OF PEACE-PRECINCT #1	296.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOL... FUND	001	REVENUE	44062	FEES-JUSTICE OF PEACE PRECINCT #2	62.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOL... FUND	001	REVENUE	44063	FEES-JUSTICE OF PEACE PRECINCT #3	38.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOL... FUND	001	REVENUE	44064	FEES-JUSTICE OF PEACE PRECINCT #4	16.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOL... FUND	001	REVENUE	44065	FEES-JUSTICE OF PEACE PRECINCT #5	127.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOL... FUND	001	REVENUE	46020	INT INC-JUSTICE SYSTEM	12.00		ADJUST BUDGET FOR JULY 2025 REVENUE
				Total 001	REVENUE			551.00	0.00	

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCKT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7223	2719	JUSTICE COURT TECHNOLOGICAL FUND	999	NO DEPARTMENT	70751	CAPITAL OUTLAY-JP PCT #1	303.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOLOGICAL FUND	999	NO DEPARTMENT	70752	CAPITAL OUTLAY-JP PCT #2	63.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOLOGICAL FUND	999	NO DEPARTMENT	70753	CAPITAL OUTLAY-JP PCT #3	39.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOLOGICAL FUND	999	NO DEPARTMENT	70754	CAPITAL OUTLAY-JP PCT #4	16.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7223	2719	JUSTICE COURT TECHNOLOGICAL FUND	999	NO DEPARTMENT	70755	CAPITAL OUTLAY-JP PCT #5	130.00		ADJUST BUDGET FOR JULY 2025 REVENUE
10/15/2025	7224	2736	POC COMMUNITY CENTER	999	NO DEPARTMENT	63920	MISCELLANEOUS	2,000.00		LINE ITEM ADJUSTMENT
10/15/2025	7224	2736	POC COMMUNITY CENTER	999	NO DEPARTMENT	65482	REPAIRS-P.O.C. COMMUNITY CENTER		2,000.00	LINE ITEM ADJUSTMENT
10/15/2025	7225	9200	JUVENILE PROBATION FUND	999	NO DEPARTMENT	60300	AUDITING SERVICES	1,000.00		LINE ITEM TRANSFER TO COVER EXPENSE
10/15/2025	7225	9200	JUVENILE PROBATION FUND	999	NO DEPARTMENT	62380	ELECTRONIC MONITORING		2,000.00	LINE ITEM TRANSFER TO COVER EXPENSE
10/15/2025	7225	9200	JUVENILE PROBATION FUND	999	NO DEPARTMENT	63776	MEDICAL/DENTAL FEES	1,000.00		LINE ITEM TRANSFER TO COVER EXPENSE

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-COCT-2025 10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
				Total 999	NO DEPARTMENT			4,551.00	4,000.00	
10/15/2025	7236	1000	GENERAL FUND	230	COMMISSIONERS COURT	60300	AUDITING SERVICES	11,845.00		LINE ITEM TRANSFER
				Total 230	COMMISSIONERS COURT			11,845.00	0.00	
10/15/2025	7236	1000	GENERAL FUND	240	CONTINGENCIES	64250	OPERATIONAL EXPENSES		11,845.00	LINE ITEM TRANSFER
10/15/2025	7237	1000	GENERAL FUND	240	CONTINGENCIES	51950	FEDERAL/STATE UNEMPLOYMENT		64.00	CORR ORIGINAL BUDGET FOR APPOINTED
				Total 240	CONTINGENCIES			0.00	11,909.00	
10/15/2025	7237	1000	GENERAL FUND	410	COUNTY COURT-AT-LAW	50245	COUNTY COURT-AT-LAW JUDGE		104,000.00	CORR ORIGINAL BUDGET FOR APPOINTED
10/15/2025	7237	1000	GENERAL FUND	410	COUNTY COURT-AT-LAW	50246	COUNTY COURT-AT-LAW JUDGE APPOINTED	104,000.00		CORR ORIGINAL BUDGET FOR APPOINTED
10/15/2025	7237	1000	GENERAL FUND	410	COUNTY COURT-AT-LAW	51950	FEDERAL/STATE UNEMPLOYMENT	61.00		CORR ORIGINAL BUDGET FOR APPOINTED
				Total 410	COUNTY COURT-AT-LAW			104,061.00	104,000.00	
10/15/2025	7237	1000	GENERAL FUND	500	JUVENILE COURT	50245	COUNTY COURT-AT-LAW JUDGE	2,900.00		CORR ORIGINAL BUDGET FOR APPOINTED
10/15/2025	7237	1000	GENERAL FUND	500	JUVENILE COURT	50246	COUNTY COURT-AT-LAW JUDGE APPOINTED		2,900.00	CORR ORIGINAL BUDGET FOR APPOINTED

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7237	1000	GENERAL FUND	500	JUVENILE COURT	51950	FEDERAL/STATE UNEMPLOYMENT	3.00		CORR ORIGINAL BUDGET FOR APPOINTED
				Total 500	JUVENILE COURT			2,903.00	2,900.00	
10/15/2025	7238	1000	GENERAL FUND	180	JAIL OPERATIONS	50363	DEPUTY JAILER		10,000.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	180	JAIL OPERATIONS	51616	OVERTIME PREMIUM PAY	3,000.00		OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	180	JAIL OPERATIONS	51620	ADDITIONAL PAY-REGULAR RATT	7,000.00		OVERDRAWN ACCOUNTS
				Total 180	JAIL OPERATIONS			10,000.00	10,000.00	
10/15/2025	7238	1000	GENERAL FUND	490	JUSTICE OF PEACE-PRECINCT #5	50275	COURT CLERK (P) PART-TIME	4,200.00		OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	490	JUSTICE OF PEACE-PRECINCT #5	51950	FEDERAL/STATE UNEMPLOYMENT	3.00		OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	490	JUSTICE OF PEACE-PRECINCT #5	63500	MACHINE MAINTENANCE		499.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	490	JUSTICE OF PEACE-PRECINCT #5	65840	SOFTWARE TRAINING		799.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	490	JUSTICE OF PEACE-PRECINCT #5	70750	CAPITAL OUTLAY		2,905.00	OVERDRAWN ACCOUNTS
				Total 490	JUSTICE OF PEACE-PRECINCT #5			4,203.00	4,203.00	

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-COCT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
10/15/2025	7238	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	50900	SPECIAL LICENSE		580.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	51540	TEMPORARY	2,398.00		OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	51545	PART-TIME EMPLOYEES		818.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	540	ROAD AND BRIDGE-PRECIN... #1	51930	RETIREMENT		1,000.00	OVERDRAWN ACCOUNTS
				Total 540	ROAD AND BRIDGE-PRECIN... #1			2,398.00	2,398.00	
10/15/2025	7238	1000	GENERAL FUND	550	ROAD AND BRIDGE-PRECIN... #2	50568	HEAVY EQUIPMENT OPER.(PCTS)/ASST FOREMAN		3,000.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	550	ROAD AND BRIDGE-PRECIN... #2	51540	TEMPORARY	3,000.00		OVERDRAWN ACCOUNTS
				Total 550	ROAD AND BRIDGE-PRECIN... #2			3,000.00	3,000.00	
10/15/2025	7238	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	51540	TEMPORARY	3,000.00		OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	51920	GROUP INSURANCE		3,000.00	OVERDRAWN ACCOUNTS

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1686 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.10.15

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
				Total 570	ROAD AND BRIDGE-PRECIN... #4			3,000.00	3,000.00	
10/15/2025	7238	1000	GENERAL FUND	635	EMERGENCY COMMUNICAT... DIVISION	51545	PART-TIME EMPLOYEES		4,000.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	635	EMERGENCY COMMUNICAT... DIVISION	51620	ADDITIONAL PAY-REGULAR RATI	2,000.00		OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	635	EMERGENCY COMMUNICAT... DIVISION	51740	VACATION PAY ON TERMINATION	2,000.00		OVERDRAWN ACCOUNTS
				Total 635	EMERGENCY COMMUNICAT... DIVISION			4,000.00	4,000.00	
10/15/2025	7238	1000	GENERAL FUND	760	SHERIFF	63150	K-9 SERVICES/SUPPLIES		2,100.00	OVERDRAWN ACCOUNTS
10/15/2025	7238	1000	GENERAL FUND	760	SHERIFF	66310	TRAINING REGISTRATION FEES/TRAVEL	2,100.00		OVERDRAWN ACCOUNTS
				Total 760	SHERIFF			2,100.00	2,100.00	
Total BUD1686 - 2025 BUDGET-ADJUSTME...								253,968.00	212,866.00	
Report Total								253,968.00	212,866.00	

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October 15, 2025

APPROVAL LIST - 2025 BUDGET

COMMISSIONERS COURT MEETING OF

10/15/25

BALANCE BROUGHT FORWARD FROM APPROVAL LIST REPORT PAGE 35

\$696,195.40

FLICA	PAYROLL 10/10/2025	P/R	\$	68,621.34
MEDICARE	PAYROLL 10/10/2025	P/R	\$	16,048.56
FMH	PAYROLL 10/10/2025	P/R	\$	44,069.04
AFIAC	OCTOBER 2025 PREMIUMS	P/R	\$	1,519.54
NATIONWIDE RETIREMENT SOLUTIONS	PAYROLL 10/10/2025	P/R	\$	1,497.50
OFFICE OF THE ATTORNEY GENERAL - CHILD SUPPORT	PAYROLL 10/10/2025	P/R	\$	3,752.83
UNDM	OCTOBER 2025 PREMIUMS	P/R	\$	10,900.12
VOYA	PAYROLL 10/10/2025	P/R	\$	1,910.00
STATE COMPTROLLER	2025 3RD QTR SALES TAX - MUSEUM	A/P	\$	33.46
STATE COMPTROLLER	2025 3RD QTR SALES TAX - LANDFILL	A/P	\$	896.34
TAC- TEXAS ASSOCIATION OF COUNTIES	3RD QTR 2025 UNEMPLOYMENT	P/R	\$	2,321.61
TEXAS COUNTY & DISTRICT RETIREMENT SYSTEM	SEPTEMBER 2025	P/R	\$	209,476.04
VOYAGER	FUEL USAGE	A/P	\$	20,442.25
CALHOUN CO AIRPORT FUND	TRANSFER PER BUDGET AMENDMENT- AIRPORT EXPENSES	A/P	\$	45,000.00
CALCO CAP PROJ- AIRPORT RUNWAY PROJ	TRANSFER PER BUDGET AMENDMENT- 10% MATCH- TXDOT	A/P	\$	12,510.00
CALCO CAP PROJ- LITTLE CHOC BAYOU PARK	TRANSFER FOR OVERAGE PER BUDGET AMENDMENT	A/P	\$	21,357.00

TOTAL VENDOR DISBURSEMENTS:

\$ 1,156,551.03

PAYROLL ON OCTOBER 10, 2025

P/R \$ 413,213.95

TOTAL PAYROLL AMOUNT:

\$ 413,213.95

CALHOUN COUNTY OPERATING ACCOUNT (TRANSFER FROM MONEY MKT TO OP ACCT FOR AP & PAYROLL)	\$	1,000,000.00
Textstar WITHDRAWALS TO CONSTRUCTION SERIES 2024 ACCOUNT (CERT OF OBLIGATION)	\$	34,559.08
G&W ENGINEERS, INC	\$	23,788.70
CALHOUN COUNTY INDIGENT HEALTH CARE	\$	5,115.63

TOTAL INVESTMENT ACTIVITY AND TRANSFERS BETWEEN FUNDS:

\$ 1,063,463.41

TOTAL AMOUNT FOR APPROVAL:

\$ 2,633,228.39

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
BUILDING MAINTENANCE	170	BUILDING SUPPLIES/PARTS	53610	AIRGAS USA LLC	136	9165163...	MAINT 9/24 SAFETY CLASSES, HARDHAT	21.55	
			53610	TOTAL MAINTENANCE SOLUTIONS	3620	INV1769...	MAINT 10/1 SEAL, DIAPHRAGM, DISC SLOAN, RLF VALVE	281.05	
			53610	GULF COAST HARDWARE LLC	63196	203160	MAINT 9/26 LED BULBS, TOGGLE SWITCH	15.38	
			53610	GULF COAST HARDWARE LLC	63196	203248	MAINT 9/29 TIP CLEANER KIT, GALV NIPPLE	12.98	
			53610	GULF COAST HARDWARE LLC	63196	203263	MAINT 9/30 WASHER, HARDWARE	4.33	
			53610	GULF COAST HARDWARE LLC	63196	203309	MAINT 10/1 BOLTS, CLOSET FLANGE, HARDWARE	15.69	
			53610	GULF COAST HARDWARE LLC	63196	203372	MAINT 10/2 WALL PLATES, GROUND RECEPTACLE	4.57	
			53610	GULF COAST HARDWARE LLC	63196	203389	MAINT 10/3 TANK TO BOWL KIT, SHIMS	14.58	
			53610	GULF COAST HARDWARE LLC	63196	203394	MAINT 10/3 TOILT FLANGE, WAX RING	27.98	
			53610	SHERWIN WILLIAMS	7215	13876	MAINT 7/30 PAINT	31.11	
			53610	SHERWIN WILLIAMS	7215	19717	MAINT 9/17 PAINT, BRUSH, TAPE	83.87	
			53610	SHERWIN WILLIAMS	7215	45567	MAINT 7/18 STAIN	31.11	
			53610	SHERWIN WILLIAMS	7215	50179	MAINT 7/31 CREDIT ON RETURN OF STAIN		31.11
		REPAIRS-BAUER BLDG	65452	VCS SECURITY SYSTEMS, INC.	8244	287182	MAINT 9/30 TIED IN NEW ACCESS CNTRL TO NEW DOORS @ BAUER	308.75	
		UTILITIES-AG BLDG/FAIRGROUNDS	66602	REPUBLIC SERVICES #847	8897	0847001...	FG 9/26 A# 3-0847-0004638 OCT 2025 TRASH	241.04	
		UTILITIES-COURTHOUSE AND JAIL	66604	REPUBLIC SERVICES #847	8897	0847001...	CH 9/26 A# 3-0847-0004639 OCT 2025 TRASH	393.66	
		UTILITIES-JAIL	66605	REPUBLIC SERVICES #847	8897	0847001...	JAIL 9/26 A# 3-0847-0004640 OCT 2025 TRASH	393.66	
BUILDING MAINTENANCE	Total 170							1,881.31	31.11

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
1000 - GENERAL FUND

Dept Title	Dept C ...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
COMMISSIONERS COURT	230	DUES	54020	GOLDEN CRESCENT REGIONAL	2609	8132	COM CRT 10/1 2026 DUES	7,712.70	
			54020	NATIONAL ASSOCIATION OF	5404	2025438...	COM CRT 8/18 2026 DUES	450.00	
		AUDITING SERVICES	60300	ARMSTRONG VAUGHAN AND ASSOC PC	8174	63091	COM CRT 9/30 AUDIT & PREP OF FYE 12/31/24 FINANCIAL STMTNS	31,845.00	
		INTERNET SERVICES	62955	SPARKLIGHT	9988	2000519...	COM CRT 10/4 A# 8160561620005199 CABLE 10/8- 11/7	11.07	
		MISCELLANEOUS	63920	VALLEY VIEW CONSULTING LLC	8144	4381	COM CRT 9/30 Q2 2025 INVESTMENT ADVISORY SVCS	7,706.10	
COMMISSIONERS COURT	Total 230							47,724.87	0.00
CONTINGENCIES	240	GROUP INSURANCE	51920	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS		140.61
CONTINGENCIES	Total 240							0.00	140.61
COUNTY AUDITOR	190	MACHINE MAINTENANCE	63500	DEWITT POTTS & SON LLC	3379	8088340	AUDITOR 9/22 COPY COUNT 8/15- 9/15	53.84	
		TRAVEL IN COUNTY	66476	VASQUEZ BRANDY	EM...	PO1904...	AUDITOR 10/10 IN-CNTY TRAVEL REIMB-CASH COUNTS 10/7- 10/10	63.49	
COUNTY AUDITOR	Total 190							117.33	0.00
COUNTY CLERK	250	GENERAL OFFICE SUPPLIES	53020	AQUA BEVERAGE CO	89	166089	CO CLK 9/10 WATER	39.97	
			53020	COASTAL OFFICE SOLUTIONS, INC	9063	OE530511	CO CLK 10/2 PAPER	269.94	
		COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	40167887	CO CLK 9/22 COPIER/SCANNER LEASES	428.00	
COUNTY CLERK	Total 250							737.91	0.00
COUNTY COURT-AT-LAW	410	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	45816096	CRT@LAW1 9/18 ALCOHOL	5.12	

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COUNTY COURT-AT-LAW	Total 410							101.18	0.00
		MACHINE MAINTENANCE	63500	DEWITT POTTH & SON LLC	3379	8088760	CRT@LAW1 9/18 FIRST AID KIT CRT@LAW1 9/22 COPY COUNT 8/18- 9/16	74.02	
			53020	QUILL LLC	6602	43825958		22.04	
COUNTY TAX COLLECTOR	200	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	45693265	TAX A/C 9/10 COUNTERFEIT DETECTOR	219.38	
			53020	QUILL LLC	6602	45703307	TAX A/C 9/10 CALCULATOR, PAPER, STAPLER	194.04	
			53020	QUILL LLC	6602	45741941	TAX A/C 9/12 CALCULATOR	84.88	
			53020	AQUA BEVERAGE CO	89	166097	TAX A/C 9/10 WATER	69.94	
		DELINQUENT TAX ATTORNEY FEES	61700	MCCREARY VESELKA BRAGG	5088	PO200D...	TAX A/C 9/10 AUG 2025 DTA FEES	26,520.90	
		MACHINE MAINTENANCE	63500	DEWITT POTTH & SON LLC	3379	8077690	TAX A/C 9/11 COPY COUNT 8/11- 9/11	40.62	
COUNTY TAX COLLECTOR	Total 200							27,129.76	0.00
COUNTY TREASURER	210	MACHINE MAINTENANCE	63500	DEWITT POTTH & SON LLC	3379	8091740	TREAS 9/23 COPY COUNT 8/21- 9/22	68.05	
COUNTY TREASURER	Total 210							68.05	0.00
DISTRICT ATTORNEY	510	GENERAL OFFICE SUPPLIES	53020	AQUA BEVERAGE CO	89	166090	DA 9/10 WATER	41.98	
			53020	AQUA BEVERAGE CO	89	172900	DA 9/30 WATER COOLER RENTAL	12.50	
		LEGAL SERVICES	63350	BROOKS DAVID B	5955	DB20259	DA 9/24 SEPT 2025 SUBSCRIPTION	100.00	
		MACHINE MAINTENANCE	63500	DEWITT POTTH & SON LLC	3379	8079730	DA 9/5 COPY COUNT 8/3- 9/3	109.72	
		BOOKS-LAW	70500	THOMSON REUTERS - WEST	8612	8525908...	DA 10/1 SEPT 2025 WESTLAW	1,893.00	
			70500	THOMSON REUTERS - WEST	8612	8526681...	DA 10/1 OCT 2025 LIBRARY PLAN CHGS. 25/26 OCONNOR TX CRIM CO	528.44	

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DISTRICT ATTORNEY	Total 510							2,685.64	0.00
DISTRICT CLERK	420	PHOTO COPIES/SUPPLIES	53030	DEWITT POT & SON LLC	3379	8048950	DIST CLK 8/18 COPY COUNT 7/18- 8/18	59.58	
			53030	DEWITT POT & SON LLC	3379	8090150	DIST CLK 9/23 COPY COUNT 8/18- 9/17	89.50	
DISTRICT CLERK	Total 420							149.08	0.00
DISTRICT COURT	430	ADULT ASSIGNED-ATTORNEY FEES	60050	HINDS RICHARD ORRIN	30830	2025218	DIST CRT 9/25 C# 2025-CR-9109-DC A. FLORES	450.00	
			60050	HINDS RICHARD ORRIN	30830	2025219	DIST CRT 9/25 C# 2025-CR-9113-DC E. COOPER	450.00	
			60050	HINDS RICHARD ORRIN	30830	2025220	DIST CRT 9/25 C# 2025-CR-9158-DC S. LOZANO	450.00	
			60050	ILES L CHRIS PC	8844	2025223	DIST CRT 9/29 C# 2020-CR-8363-DC R. GARCIA	1,170.00	
			60050	ILES L CHRIS PC	8844	2025225	DIST CRT 9/29 C# 2025-CR-9164-DC R. DELAROSA	100.00	
			60050	ILES L CHRIS PC	8844	2025226	DIST CRT 9/29 C# 2025-CR-9161-DC R. DELAROSA	100.00	
			60050	ILES L CHRIS PC	8844	2025227	DIST CRT 9/29 C# 2025-CR-9159-DC R. DELAROSA	450.00	
			60050	ILES L CHRIS PC	8844	2025228	DIST CRT 9/29 C# 2025-CR-9137-DC A. MARTINEZ-LUNA	810.00	
			60050	ILES L CHRIS PC	8844	2025229	DIST CRT 9/29 C# 2022-CR-8638-DC P. DOMINGUEZ	720.00	
			60050	ILES L CHRIS PC	8844	2025230	DIST CRT 9/29 C# 24-PF-0074-DC C. OCANAS	440.00	
			60050	ILES L CHRIS PC	8844	2025231	DIST CRT 9/29 C# 25-PF-0025-DC E. CAMACHO-VARGAS	630.00	

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			60050	CLARK JERRY	9858	2025217	DIST CRT 9/25 C# 2022-CR-8607-DC M. MARTINEZ	350.00	
			60050	CLARK JERRY	9858	2025219	DIST CRT 9/25 C# 2025-CR-9134-DC A. HAWES	1,540.00	
DISTRICT COURT	Total 430							7,660.00	0.00
ELECTIONS	270	GENERAL OFFICE SUPPLIES	53020	AQUA BEVERAGE CO	89	166096	ELEC 9/10 WATER	42.97	
		COPY MACHINE LEASE	61340	DEWITT POT & SON LLC	3379	8072590	ELEC 9/8 COPY COUNT 8/6- 9/5	9.87	
		POSTAGE	64790	SCOTT-MERRIMAN INC	7295	075773P	ELEC 10/2 POSTAGE FOR 25-26 MASS MAIL-OUT	5,990.40	
ELECTIONS	Total 270							6,043.24	0.00
EMERGENCY COMMUNICATION DIVISION	635	PHOTO COPIES/SUPPLIES	53030	DEWITT POT & SON LLC	3379	8092660	EMER COM 9/23 COPY COUNT 8/20- 9/22	23.65	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3619206...	EMER COM 9/19 A# 287343846709 PHONE 8/20- 9/19	83.74	
EMERGENCY COMMUNICATION DIVISION	Total 635							107.39	0.00
EMERGENCY MEDICAL SERVICES	345	GENERAL OFFICE SUPPLIES	53020	DRIESSEN WATER INC	6245	5610123	EMS CNTL 9/3 WATER, WATER SOFTENER SALT	101.30	
			53020	DRIESSEN WATER INC	6245	5617031	EMS STH 9/10 WATER	46.75	
			53020	DRIESSEN WATER INC	6245	56692102	EMS STH 9/24 WATER	39.20	
			53020	DRIESSEN WATER INC	6245	5732465	EMS STH 9/26 WATER COOLER RENTAL	57.95	
			53020	DRIESSEN WATER INC	6245	5732467	EMS CNTL 9/26 WATER COOLER RENTAL	57.95	
			53020	DRIESSEN WATER INC	6245	5735482	EMS CNTL 9/26 WATER SOFTENER RENTAL	71.45	
		PROGRAM SUPPLIES	53310	CREATIVE PRODUCT SOURCE INC	223	CP11081...	EMS 9/16 (500) PENS	680.69	

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		BUILDING SUPPLIES/PARTS							
		53610		GULF COAST PAPER CO INC	2619	2686008	EMS 9/23 CLEANERS	153.96	
		53610		GULF COAST PAPER CO INC	2619	2686009	EMS 9/23 (6) TRIGGER SPRAY	9.30	
		SUPPLIES/OPERATING EXPENSES							
		53980		HENRY SCHEIN INC	2753	46314026	EMS 9/2 ROCURONUM	45.92	
		53980		BOUND TREE MEDICAL, LLC	412	85800968	EMS 6/9 PEEP VALVES	150.42	
		53980		BOUND TREE MEDICAL, LLC	412	85927830	EMS 9/22 MIDAZOLAM	122.35	
		53980		BOUND TREE MEDICAL, LLC	412	85927831	EMS 9/22 GLOVES, LUBE, SHARPS CONTAINER	472.66	
		53980		BOUND TREE MEDICAL, LLC	412	85929760	EMS 9/23 IV DRIP SET	461.98	
		53980		BOUND TREE MEDICAL, LLC	412	85929761	EMS 9/23 TRANSPORT UNIT	352.73	
		53980		BOUND TREE MEDICAL, LLC	412	85929762	EMS 9/23 BANDAGES, ETTs	179.20	
		53980		BOUND TREE MEDICAL, LLC	412	85933429	EMS 9/25 ACTIVATED CHARCOAL	24.11	
		53980		BOUND TREE MEDICAL, LLC	412	85933430	EMS 9/25 SX CATH, ACETAMINOPHEN	52.36	
		53980		BOUND TREE MEDICAL, LLC	412	85935071	EMS 9/26 ACETAMINOPHEN	99.30	
		53980		BOUND TREE MEDICAL, LLC	412	85936612	EMS 9/29 LUCAS SX CURPS	177.11	
		53980		BOUND TREE MEDICAL, LLC	412	85938753	EMS 9/30 INFUSION PUMP SPLITTER & REPL BATTERY	154.83	
		53980		BOUND TREE MEDICAL, LLC	412	85940906	EMS 10/1 SPIDER STRAPS	626.35	
		MACHINE MAINTENANCE							
		63500		O REILLY AUTO PARTS	5803	0575448...	EMS 9/7 FUNNELS	8.98	
		63500		O REILLY AUTO PARTS	5803	0575449...	EMS 9/12 FUEL FILTERS	124.92	
		63500		O REILLY AUTO PARTS	5803	0575451...	EMS 9/25 IGN COIL, SPARK PLUGS	60.24	
		63500		O REILLY AUTO PARTS	5803	0575451...	EMS 9/26 SPARK PLUGS	142.38	
		63500		O REILLY AUTO PARTS	5803	0575451...	EMS 9/27 WATER PUMP, HAND CLEANER	102.66	
		MACHINERY/EQUIPMENT REPAIRS							
		63530		FRAZER LTD	2266	102082	EMS 8/21 LIGHT, WIRE	40.18	

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			63530	FRAZER LTD	2266	102628	EMS 9/25 A/C BLOWER-CONDENSER	737.50	
			63530	PORT LAVACA DODGE	6227	72779	EMS 9/23 FUEL RING, FUEL MODULE	390.60	
			63530	PORT LAVACA DODGE	6227	CM72779	EMS 9/29 CREDIT ON RETURN OF FUEL RING		42.00
			63530	GULF COAST HARDWARE LLC	63198	202619	EMS 9/9 WASHERS, MIS SUP	51.27	
			63530	GULF COAST HARDWARE LLC	63198	202628	EMS 9/9 NUT, DRILL BIT, MIS SUP	87.16	
			63530	GULF COAST HARDWARE LLC	63198	202638	EMS 9/9 MENDING BRACE, DOUBLE HOOK, UTILITY HOOK	26.56	
			63530	GULF COAST HARDWARE LLC	63198	202648	EMS 9/10 HARDWARE	8.92	
			63530	GULF COAST HARDWARE LLC	63198	202759	EMS 9/13 KRAZY GLUE, PINS, SYRINGE	16.06	
			63530	WINTON JEREMY	EM...	PO3451...	EMS 10/3 REIMB- LAWN MOWER PARTS	7.49	
TELEPHONE SERVICES			66192	FRONTIER COMMUNICATIONS	2855	3615521...	EMS CNTL 9/28 A# 361-552-1140-032410-5 PHONE 9/28- 10/27	888.88	
			66192	FRONTIER COMMUNICATIONS	2855	3617852...	EMS STH 9/28 A# 361-785-2000-022718-5 PHONE 9/28- 10/27	364.79	
			66192	INFINIUM BROADBAND INTERNET	3378	122735	EMS CNTL 10/5 A# ACC0002126 INTERNET 10/5-11/5	160.00	
			66192	INFINIUM BROADBAND INTERNET	3378	123445	EMS STH 10/12 A# ACC0002127 INTERNET 10/12- 11/12	160.00	
			66192	AT&T MOBILITY	5209	3617461...	EMS 10/1 A# 287298540337 ADMIN/AMB PHONE 9/2- 10/1	1,252.24	
UNIFORMS			66590	GALLS PARENT HOLDINGS LLC	26140	0326318...	EMS 9/23 UNIFORMS	72.99	
UTILITIES			66600	SEAPORT LAKES WATER SYSTEM LLC	1560	2040	EMS STH 10/2 WATER	33.00	

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EMERGENCY MEDICAL SERVICES	Total 345							9,321.27	42.00
EXTENSION SERVICE	110	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	45963228	EXT 9/29 BATTERIES	73.08	
		TELEPHONE SERVICES	53020	QUILL LLC	6602	45988436	EXT 9/30 ELEC DUSTERS	20.00	
			66192	AT&T MOBILITY	5209	3619209...	EXT SVC 9/19 A# 287335811011 PHONE 8/20-9/19	40.75	
		TRAVEL/OUT OF COUNTY-CEA/4HYD	66462	DISTRICT 11 TEAFCS	68901	PO1102...	EXT SVC 9/26 REG-E. DEFOREST-ROBSTOWN, TX 11/14/25	20.00	
		TRAVEL/OUT OF COUNTY-CEA/AGNR	66500	HAYES HALEY	EM...	PO1102...	EXT SVC 9/25 TRAVEL REIMB- DALLAS, TX 9/25-9/28	280.00	
EXTENSION SERVICE	Total 110							433.83	0.00
FIRE PROTECTION-OLIVIA/P.. ALTO	650	SUPPLIES/OPERATING EXPENSES	53980	GULF COAST HARDWARE LLC	63193	203006	OPA VFD 9/22 FLEX TAPE	14.99	
		UTILITIES	66600	LA WARD TELEPHONE EXC., INC.	4601	103225	OPA VFD 10/1 A# 101014 OCT 2025 PHONE	32.88	
			66600	LA WARD TELEPHONE EXC., INC.	4601	103229	OPA VFD 10/1 A# 101019 OCT 2025 INTERNET	50.45	
FIRE PROTECTION-OLIVIA/P.. ALTO	Total 650							98.32	0.00
FIRE PROTECTION-SEADRIFT	690	SUPPLIES/OPERATING EXPENSES	53980	GULF COAST HARDWARE LLC	63194	203025	SEA VFD 9/22 CLEANING CLOTHS, WINDEX	11.98	

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FIRE PROTECTION-SEADRIFT	Total 690							11.98	0.00
FLOOD PLAIN ADMINISTRATION	710	GENERAL OFFICE SUPPLIES	53020	AQUA BEVERAGE CO	89	166087	FP 9/10 WATER	19.99	
FLOOD PLAIN ADMINISTRATION	Total 710							19.99	0.00
HEALTH DEPARTMENT	350	ENVIRONMENTAL HEALTH SERVICES	62480	VICTORIA COUNTY PUBLIC	8219	ENV2511	HEALTH DEPT 10/1 NOV 2025 ENVIRONMENTAL SVCS	7,043.75	
HEALTH DEPARTMENT	Total 350							7,043.75	0.00
HUMAN RESOURCES	265	MISCELLANEOUS	63920	GREAT AMERICA FINANCIAL	2751	40224626	HR 9/29 COPIER LEASE	102.31	
HUMAN RESOURCES	Total 265							102.31	0.00
INFORMATION TECHNOLOGY	275	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3615539...	IT 9/19 A# 287289192983 PHONE 8/20- 9/19	163.38	
INFORMATION TECHNOLOGY		UTILITIES-117 W. ASH ST. BUILDING	66609	CENTERPOINT ENERGY	1805	2799453...	IT 10/1 A# 2799453-2 CCF 0 8/26- 9/24	58.84	
INFORMATION TECHNOLOGY			66609	REPUBLIC SERVICES #847	8897	0847001...	IT 9/26 A# 3-0847-0004634 OCT 2025 TRASH	40.64	
INFORMATION TECHNOLOGY	Total 275							262.86	0.00
JAIL OPERATIONS	180	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	45784689	JAIL 9/16 PENS, PENCILS	104.50	
JAIL OPERATIONS			53020	QUILL LLC	6602	45789266	JAIL 9/16 (+) STAPLERS	101.96	
JAIL OPERATIONS			53020	QUILL LLC	6602	45791032	JAIL 9/17 BINDERS	59.48	
JAIL OPERATIONS		JAIL MAINTENANCE/SUPPLIES	53420	CHARM-TEX INC	1177	0419347...	JAIL 9/18 EASY PAKS- HEAVY DUTY CLEANER/DEGREASER	355.80	
JAIL OPERATIONS			53420	DASH MEDICAL GLOVES INC	1514	INV1338...	JAIL 9/22 GLOVES	722.56	
JAIL OPERATIONS			53420	GULF COAST PAPER CO INC	2619	2686001	JAIL 9/23 SOAP & DISPENSER	148.00	

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		GROCERIES	53955	PERFORMANCE FOOD GROUP INC	63650	3208665	JAIL 8/6 MILK	96.15	
			53955	PERFORMANCE FOOD GROUP INC	63650	3234727	JAIL 9/29 INMATE GROCERIES	2,393.88	
			53955	PERFORMANCE FOOD GROUP INC	63650	3236815	JAIL 10/2 INMATE GROCERIES	2,258.10	
			53955	PERFORMANCE FOOD GROUP INC	63650	3238343	JAIL 10/6 INMATE GROCERIES	1,008.09	
			53955	PERFORMANCE FOOD GROUP INC	63650	3240327	JAIL 10/9 INMATE GROCERIES	1,221.29	
		SUPPLIES-MISCELLANEOUS	53992	GULF COAST PAPER CO INC	2619	2686004	JAIL 9/23 LAUNDRY SOAP	590.82	
			53992	PERFORMANCE FOOD GROUP INC	63650	3234727	JAIL 9/29 SANITIZER	36.08	
			53992	PERFORMANCE FOOD GROUP INC	63650	3236815	JAIL 10/2 LABELS, SANITIZER	62.67	
			53992	PERFORMANCE FOOD GROUP INC	63650	3238343	JAIL 10/6 HAIR NETS, BAGS	42.01	
		MISCELLANEOUS	63920	DRIESSEN WATER INC	6245	5617030	JAIL 9/10 WATER	69.40	
			63920	VCS SECURITY SYSTEMS, INC.	8244	286362	JAIL 9/24 ANNUAL FIRE INSPECTION	500.00	
		POSTAGE	64790	FEDEX	2222	9703617...	JAIL 9/25 LATE FEE	3.64	
		PRISONER MEDICAL SERVICES	64910	SOUTHERN HEALTH PARTNERS	3460	BASE54...	JAIL 10/2 NOV 2025 PRISONER MEDICAL	13,175.75	
JAIL OPERATIONS	Total 180							22,950.18	0.00
JUSTICE OF PEACE PRECINCT #2	460	TRAVEL OUT OF COUNTY	66498	TEXAS STATE UNIVERSITY	7745	22608	JP2 10/9 CONF REG- T. DIO	450.00	
JUSTICE OF PEACE PRECINCT #2	Total 460							450.00	0.00
JUSTICE OF PEACE-PRECINCT #1	450	TRAINING TRAVEL OUT OF COUNTY	66316	TEXAS STATE UNIVERSITY	7745	21169	JP1 9/30 CONF REG- H. KURTZ	150.00	
			66316	TEXAS STATE UNIVERSITY	7745	21993	JP1 10/3 CONF LODGING- H. KURTZ	300.00	

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JUSTICE OF PEACE-PRECINCT #1	Total 450								
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3619872...	JP3 9/25 A# 361-987-2919-082715-5 PHONE 9/25- 10/24	366.13	
			66192	MCI COMM SERVICE	3181	5P82989...	JP3 9/19 A# 5P829898 LONG DISTANCE SVC	38.09	
		TRAVEL IN COUNTY	66476	TEXAS STATE UNIVERSITY	7745	21346	JP3 9/30 CONF REG-CORPUS CHRISTI, TX 1/25/26- 1/28/26	450.00	
		UTILITIES	66600	CITY OF POINT COMFORT	860	8000/0825	JP3 8/1 A# 8000 WATER 6/18-8/20	37.50	
			66600	CITY OF POINT COMFORT	860	8000/0925	JP3 9/1 A# 8000 WATER 7/31-8/25	37.50	
			66600	CITY OF POINT COMFORT	860	8000/1025	JP3 10/2 A# 8000 WATER 9/2-10/2	37.50	
JUSTICE OF PEACE-PRECINCT #3	Total 470							966.72	0.00
		COPY MACHINE LEASE	61340	DEWITT POTH & SON LLC	3379	8067170	JP4 9/4 COPY COUNT 8/1- 9/2	20.14	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3617857...	JP4 A# 361-785-7082-110398-5 PHONE 9/25- 10/24	295.88	
		TRAVEL IN COUNTY	66476	SPENCE PATSY	EM...	PO2025...	JP4 10/1 IN-CNTY TRAVEL REIMB- 07/2025- 09/2025	352.80	
JUSTICE OF PEACE-PRECINCT #4	Total 480							668.82	0.00
		TRAINING TRAVEL OUT OF COUNTY	66316	POMYKAL NANCY	6203	PO1037	JP5 10/1 TRAVEL REIMB-CORPUS CHRISTI, TX 8/17-8/18	222.00	
		TRAVEL IN COUNTY	66476	GREGORY JANA	EM...	PO1038	JP5 10/1 REIMB-SEPT 2025 IN-CNTY TRAVEL	175.00	
JUSTICE OF PEACE-PRECINCT #5	Total 490							397.00	0.00

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JUVENILE COURT	500	JUVENILE ASSIGNED-ATTORNEY FEES	63070	SMITH JAMES	72500	2025140	CRT@LAW1 9/22 C# 2025-JV-0025-CC	275.00	
			63070	SMITH JAMES	72500	2025141	CRT@LAW1 9/22 C# 2025-JV-0021-CC	275.00	
JUVENILE COURT	Total 500							550.00	0.00
LIBRARY	140	PHOTO COPIES/SUPPLIES	53030	XEROX CORPORATION	9001	0243463...	PL LIBRARY 10/1 COPIER LEASE 8/21-9/21	201.19	
			53030	XEROX CORPORATION	9001	0243463...	POC LIBRARY 10/1 COPIER LEASE 8/21-9/21	60.69	
			53030	XEROX CORPORATION	9001	0243463...	SEA LIBRARY 10/1 COPIER LEASE 8/21-9/21	72.16	
		FIRE & SECURITY SERVICES	62630	VCS SECURITY SYSTEMS, INC.	8244	286360	LIBRARY 9/24 ANNUAL FIRE INSPECTION	390.00	
			62630	VCS SECURITY SYSTEMS, INC.	8244	286445	LIBRARY 9/25 FIRE MONITORING	25.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3617854...	LIBRARY 9/25 A# 361-785-4241- 020867-5 PHONE 9/25- 10/24	177.68	
			66192	FRONTIER COMMUNICATIONS	2855	3619834...	POC LIBRARY 9/25 A# 361-983-4365- 010589-5 PHONE 9/25- 10/24	136.22	
		UTILITIES-MAIN LIBRARY	66610	REPUBLIC SERVICES #847	8897	0847001...	LIBRARY 9/26 A# 3-0847-0004635 OCT 2025 TRASH	40.64	
		UTILITIES-SEADRIFT LIBRARY	66622	CITY OF SEADRIFT	862	1253/0925	SEA LIBRARY 9/30 A# 1253 WATER	103.20	
		BOOKS & PRINT MATL-LIBRARY	70550	CENGAGE LEARNING, INC.	26020	9991014...	LIBRARY 9/18 BOOKS	53.98	
			70550	CENGAGE LEARNING, INC.	26020	9991014...	LIBRARY 9/25 BOOKS	74.22	
			70550	CENGAGE LEARNING, INC.	26020	9991014...	LIBRARY 9/25 BOOKS	111.71	
			70550	BAKER & TAYLOR	403	5019660...	LIBRARY 9/8 BOOKS	11.07	
			70550	BAKER & TAYLOR	403	5019660...	LIBRARY 9/8 BOOKS	260.26	
		CAPITAL OUTLAY	70750	STANLEY ACCESS TECH LLC	2566	90063112	LIBRARY 9/11 INSTALL (2) AUTOMATIC DOOR OPENERS	8,465.00	

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LIBRARY	Total 140	E-FORMAT/DIGITAL MATL-LIBRARY	71146	MIDWEST TAPE LLC	3377	5078228...	LIBRARY 9/30 SEPT 2025 DIGITAL ACT	582.08	
MISCELLANEOUS	280	INSURANCE-LIABILITY AND PROPERTY	62872	VFIS OF TEXAS/REGNIER & ASSOC.	8247	21392	CALCO 9/25 P# VFNU-TR-0002359 ADD EMS TRAIN & STORAGE BLDG	1,636.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615336...	MUSEUM 9/22 A# 361-553-6868- 083005-5 PHONE 9/22- 10/21	74.98	
MISCELLANEOUS	Total 280							1,710.98	0.00
MUSEUM	150	MISCELLANEOUS	63920	CIMPRESS USA INCORPORATED	3799	1143416...	MUSEUM 9/17 UNIFORM SHIRT	68.99	
			63920	CIMPRESS USA INCORPORATED	3799	1143434...	MUSEUM 9/18 UNIFORM SHIRT	68.99	
		TELEPHONE	66190	FRONTIER COMMUNICATIONS	2855	3615335...	MUSEUM 10/2 A# 361-553-5858-122716-5 ALARM 10/2- 11/1	131.45	
MUSEUM	Total 150							269.43	0.00
NO DEPARTMENT	999	COBRA PREMIUM COLLECTED IN ADVANCE	20501	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	1,166.56	
		ACCURUED MISCELLANEOUS2	20537	MASA	5569	2191761	CALCO 10/2 OCT 2025 PREMIUMS	2,517.03	
		ACCURUED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	61.58	
		ACCURUED INSURANCE-UNIVERSAL LIFE	20562	TRUSTMARK	8169	10152025	CALCO 10/1 OCT 2025 PREMIUMS	1,001.56	
		ACCURUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	9,064.53	
		ACCURUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	257,580.49	
		ACCURUED INSURANCE-LIFE/LONG TERM CARE	20568	COMBINED INSURANCE	542	PO1001...	CALCO 10/1 OCT 2025 PREMIUMS	270.68	

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		ACCURUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	496.71	
		ACCURUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	1,239.63	
		ACCURUED SALES TAXES PAYABLE	20585	CALHOUN CO. GENERAL FUND	930	PO1010...	CALCO 10/13 3RD QTR 25 SALES TAX TIMELY FILING DISC- LANDF	4.11	
		DUE TO STATE-SEPTIC FEES	20742	TEXAS COMMISSION ON	7597	WTR006...	CALCO 9/30 A# 0620035 WASTEWATER TX FEE JUN 2025	80.00	
			20742	TEXAS COMMISSION ON	7597	WTR006...	CALCO 9/30 A# 0620035 WASTEWATER TX FEE JUL 2025	40.00	
			20742	TEXAS COMMISSION ON	7597	WTR006...	CALCO 9/30 A# 0620035 WASTEWATER TX FEE AUG 2025	50.00	
		DUE TO JP COLLECTIONS ATTORNEY	20770	MCCREARY VESELKA BRAGG ALLEN	5255	308678	JP4 9/26 COLLECTION FEES	591.54	
		RENTAL DEPOSITS	20820	MORALES FERRAH	RF4...	1973	BAUER 6/18 DEPOSIT REFUND	250.00	
			20820	ETZLER CATHY	RF4...	1966	BUAER 2/14 DEPOSIT REFUND	100.00	
NO DEPARTMENT	Total 999							274,514.42	0.00
ROAD AND BRIDGE-PRECINCT #1	540	MACHINERY PARTS/SUPPLIES	53210	DANIEL INDUSTRIES	3695	28731	RB1 10/2 MOWER BLADES	903.78	
			53210	GULF COAST HARDWARE LLC	63191	203098	RB1 9/24 CHAIN HOOK PINS	12.56	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/23 SENSOR- #0245	117.59	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/24 FILTERS	12.66	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 10/2 FIX LEAK	3.23	
		ROAD & BRIDGE SUPPLIES	53510	QUALITY HOT MIX INC	6603	29694	RB1 10/1 53.85T HOT MIX COLD LAID	6,146.44	

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ROAD AND BRIDGE-PRECINCT #1	Total 540	TIRES AND TUBES	53520	CARV'S TIRE & AUTOMOTIVE LLC	89820	32537	RB1 9/22 (3) TIRES-#0311	995.61	
			53520	CARV'S TIRE & AUTOMOTIVE LLC	89820	32539	RB1 9/22 TIRE REPAIR- #0338	25.00	
			53520	CARV'S TIRE & AUTOMOTIVE LLC	89820	32544	RB1 9/23 TIRE-#0312	432.00	
			53520	CARV'S TIRE & AUTOMOTIVE LLC	89820	32575	RB1 9/29 TIRE-#0220	300.00	
		INSECTICIDES/PESTICIDES UNIFORMS	53630 53995	ADAPCO LLC CINTAS CORPORATION LOC. 083	8458 958	5130100... 4244499...	RB1 10/3 55G FYFANON RB1 9/25 UNIFORMS	5,064.95 200.09	
			53995	CINTAS CORPORATION LOC. 083	958	4245240...	RB1 10/2 UNIFORMS	200.09	
		BLDG REPAIRS-PARKS	60370	GULF COAST HARDWARE LLC	63191	202903	RB1 9/18 TP HOLDER REPAIR-MAG BEACH RR	25.47	
		GARBAGE COLLECTION	62659	VICTORIA LANDFILL - 3430	8228	3430000...	RB1 9/30 FALL BEACH CLEAN-UP	43.73	
		MISCELLANEOUS	63920	DEWITT POTB & SON LLC	3379	8068100	RB1 9/4 COPY COUNT 8/1- 9/2	32.79	
		TRAVEL OUT OF COUNTY	66498	TORRES JESUS LUGO	EM...	PO5401...	RB1 10/2 TRAVEL REIMB- RICHMOND, TX 9/29- 10/2	280.00	
			66498	KURTZ CHRISTOPHER	EM...	PO5401...	RB1 10/2 TRAVEL REIMB- RICHMOND, TX 9/29- 10/2	280.00	
		UTILITIES	66600	UNDINE TEXAS LLC - GBRA (31)	80670	5700182...	RB1 9/30 A# 79031-5700182800 WATER 8/18- 9/17	68.68	
		UTILITIES-PARKS	66614	UNDINE TEXAS LLC - GBRA (31)	80670	5700152...	RB1 9/30 A# 79031-5700152800 WATER 8/18- 9/17	179.83	
			66614	UNDINE TEXAS LLC - GBRA (31)	80670	5700257...	RB1 9/30 A# 79031-5700257100 WATER 8/18- 9/17	68.68	
ROAD AND BRIDGE-PRECINCT #1	Total 540							15,393.18	0.00
ROAD AND BRIDGE-PRECINCT #2	530	MACHINERY PARTS/SUPPLIES	53210	HOLT CAT	3048	PIMV01...	RB2 9/29 EDGE, BOLTS, NUTS, WASHERS- BACKHOE	434.26	

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			53210	HATEC INTERNATIONAL INC	3116	1840217...	RB2 6/2 ROLLER PARTS	52.55	
			53210	HATEC INTERNATIONAL INC	3116	1840219...	RB2 7/9 MIS PARTS	22.55	
			53210	HATEC INTERNATIONAL INC	3116	1840223...	RB2 8/26 BACKHOE PARTS	36.23	
			53210	HATEC INTERNATIONAL INC	3116	1840225...	RB2 9/25 BACKHOE PARTS	60.13	
			53210	HATEC INTERNATIONAL INC	3116	1840225...	RB2 9/25 BACKHOE PARTS	38.93	
			53210	HATEC INTERNATIONAL INC	3116	1840225...	RB2 9/30 MIS PARTS- CASE LOADER	55.54	
			53210	HATEC INTERNATIONAL INC	3116	3400070...	RB2 4/14 CREDIT ON PAID CANCELLED ORDER		98.23
			53210	GULF COAST HARDWARE LLC	63192	203334	RB2 10/1 HARDWARE	5.48	
			53210	SERVICE SUPPLY	7211	7012797...	RB2 9/29 NIPPLES	33.19	
			53210	THIRD COAST DISTRIBUTING, LLC	75930	054423	RB2 9/24 CAPSCREW, BATTERY CABLES, CLAMP- BACKHOE	25.80	
			53210	THIRD COAST DISTRIBUTING, LLC	75930	054509	RB2 9/25 DISTRIBUTOR	42.13	
		SUPPLIES-MISCELLANEOUS	53992	ARNOLD OIL COMPANY - VICTORIA	1472	102MB6...	RB2 10/1 (10) BAGS OIL DRY	119.30	
			53992	FASTENAL COMPANY	2274	TXPOT2...	RB2 9/8 SHOP TOWELS	62.24	
			53992	HIGH PRESSURE CLEANING	2731	3265	RB2 10/1 CAR WASH	45.00	
			53992	O REILLY AUTO PARTS	5803	0575451...	RB2 9/29 FUSE HOLDER	5.99	
			53992	GULF COAST HARDWARE LLC	63192	203031	RB2 9/23 BOLT CUTTER, FUNNEL	45.17	
			53992	GULF COAST HARDWARE LLC	63192	203123	RB2 9/25 SPIDER KILLER	22.99	
			53992	GULF COAST HARDWARE LLC	63192	203265	RB2 9/30 CHAIN	27.99	
			53992	GULF COAST HARDWARE LLC	63192	203272	RB2 9/30 CREDIT ON EXCH OF CHAIN		4.00
			53992	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB2 9/24 TIRE GAGE	42.44	

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ROAD AND BRIDGE-PRECINCT #2	Total 550		53992	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB2 9/25 CLAMPS	40.55	
			53992	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB2 9/25 ELEC TAPE	8.59	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4244175...	RB2 9/23 UNIFORMS	79.16	
			53995	CINTAS CORPORATION LOC. 083	958	4244921...	RB2 9/30 UNIFORMS	79.16	
		MISCELLANEOUS	63920	KSBR LLC	1978	CALCO...	RB2 10/2 GRANT APP	1,000.00	
			63920	TEXAS DEPT. OF AGRICULTURE	7641	02143331	RB2 9/6 RENEWAL- NONCOMM POLITICAL LICENSE-R. BEST	75.00	
		UTILITIES	66600	UNDINE TEXAS LLC - GBRA (31)	80670	5700123...	RB2 9/30 A# 79031-5700123200 WATER 8/18-9/17	87.01	
								2,547.38	102.23
ROAD AND BRIDGE-PRECINCT #3	560		53210	LES ZEPLIN MOTORS	4688	20137	RB3 10/3 BEARINGS, BLADE, BOLTS- MOWER	44.50	
		MACHINERY PARTS/SUPPLIES	53210	O REILLY AUTO PARTS	5803	0575451...	RB3 9/30 BATTERY, FUEL FILTERS	102.73	
			53340	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB3 9/22 OIL	75.30	
		GASOLINE/OIL/DIESEL/GRE...	53350	COASTAL NAIL & TOOL LLC	9070	2509167...	RB3 9/17 LUMBER	406.90	
		LUMBER	53350	COASTAL NAIL & TOOL LLC	9070	2509168...	RB3 9/22 LUMBER	91.17	
		TOOLS	53395	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB3 10/1 SOCKETS	24.18	
		INSECTICIDES/PESTICIDES	53630	ES OPCO USA LLC	32140	CINV10...	RB3 9/30 MOSQUITO CNTRL.	3,571.20	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4244341...	RB3 9/24 FRESHENER	12.68	
			53640	CINTAS CORPORATION LOC. 083	958	4245083...	RB3 10/1 FRESHENER	12.68	
		SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63193	203009	RB3 9/22 (4) BAGS CONCRETE	51.96	

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			53992	GULF COAST HARDWARE LLC	63193	203143	RB3 9/25 ROLLERS, SPRAY PAINT, MIS SUP	73.31	
			53992	GULF COAST HARDWARE LLC	63193	203215	RB3 9/29 SPRAY PAINT	59.34	
			53992	GULF COAST HARDWARE LLC	63193	203239	RB3 9/29 WASHER FLUID, TORCH FLAME, HARDWARE	31.63	
			53992	GULF COAST HARDWARE LLC	63193	203269	RB3 9/30 BITS, STRIPING PAINT	75.33	
			53992	GULF COAST HARDWARE LLC	63193	203271	RB3 9/30 TAPE MEASURE	35.99	
			53992	GULF COAST HARDWARE LLC	63193	203287	RB3 9/30 PAINT, BRUSHES	62.98	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301125...	RB3 9/22 FILTER	8.00	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301125...	RB3 9/29 BATTERY, HITCH, MIS SUP	313.65	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301125...	RB3 9/29 CREDIT ON BATTERY CORES		177.00
			53992	COASTAL NAIL & TOOL LLC	9070	2509167...	RB3 9/17 HARDWARE, SCREWS	113.67	
			53992	COASTAL NAIL & TOOL LLC	9070	2509168...	RB3 9/30 GROOVE SIDING, CHALK	164.26	
			53992	CINTAS CORPORATION LOC. 083	958	4244341...	RB3 9/24 UNIFORMS	142.18	
			53995	CINTAS CORPORATION LOC. 083	958	4245083...	RB3 10/1 UNIFORMS	142.18	
			62510	LEGACY DISPOSAL & SANITATION	2988	13191	RB3 10/3 PORTABLE TOILET RENTAL 10/3- 10/30	290.00	
			63920	PORT LAVACA WAVE	62340	POS609...	RB3 10/4 SUBS ID# P975MXFH ANNUAL RENEWAL	45.00	
			66192	LA WARD TELEPHONE EXC., INC.	4601	103214	RB3 10/1 A# 100994 OCT 2025 PHONE/INTERNET	153.34	
			66192	LA WARD TELEPHONE EXC., INC.	4601	103226	RB3 10/1 A# 101016 OCT 2025 PHONE/INTERNET	180.53	
			66192	LA WARD TELEPHONE EXC., INC.	4601	103227	RB3 10/1 A# 101017 OCT 2025 PHONE	58.08	
			66192	AT&T MOBILITY	5209	3617461...	RB3 10/3 A# 287275183899 PHONE 10/4- 11/3	172.31	

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ROAD AND BRIDGE-PRECINCT #3	Total 560	UTILITIES	66600	JACKSON ELECTRIC COOP, INC.	3802	3098001...	RB3 9/18 A# 3098001 ELEC 8/18- 9/18	281.65		
			66600	JACKSON ELECTRIC COOP, INC.	3802	3098002...	RB3 9/18 A# 3098002 ELEC 8/18- 9/18	225.12		
			66600	JACKSON ELECTRIC COOP, INC.	3802	3098005...	RB3 9/18 A# 3098005 ELEC 8/18- 9/18	250.70		
			66614	JACKSON ELECTRIC COOP, INC.	3802	3098003...	RB3 9/18 A# 3098003 ELEC 8/18- 9/18	38.75		
			66614	JACKSON ELECTRIC COOP, INC.	3802	3098004...	RB3 9/18 A# 3098004 ELEC 8/18- 9/18	27.42		
			66614	AT&T MOBILITY	5209	3619209...	RB3 9/19 A# 287336340847 CAMERA WIFI 8/20- 9/19	66.00		

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ROAD AND BRIDGE-PRECINCT #4	Total 570	SUPPLIES-MISCELLANEOUS	53992	BOSART LOCK & KEY INC	486	130489	RB4 9/23 (2) LOCKS- GREEN LAKE	481.14	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301125...	RB4 9/22 STARTING FLUID. CLAMP	8.49	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301125...	RB4 9/24 CLAMPS, REDUCER- WATER TRUCK	142.13	
			53992	CINTAS CORPORATION LOC. 083	958	4243598...	RB4 9/17 MAT, MOP	15.51	
			53992	CINTAS CORPORATION LOC. 083	958	4244340...	RB4 9/24 MAT, MOP	15.51	
			53992	CINTAS CORPORATION LOC. 083	958	4245082...	RB4 10/1 MAT, MOP	15.51	
		EQUIPMENT RENTAL	62310	AIRGAS USA LLC	136	5519750...	RB4 9/30 SEPT 2025 CYLINDER RENTAL	503.93	
			62310	XEROX CORPORATION	9001	0243463...	RB4 10/1 COPIER LEASE 8/21- 9/21	189.31	
		MACHINERY/EQUIPMENT REPAIRS	63530	KEATHLEY BRUCE CLAYTON	4231	1012721	RB4 9/29 WINDOW REPAIR- U27	305.02	
		OUTSIDE SERVICES	64400	REXCO INC	6830	254035	RB4 9/30 MIXER WORK	9,480.00	
SHERIFF	760		64400	RUDON LEASE SERVICE INC	6840	6974	RB4 9/30 HAULING EQUIPMENT	1,200.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3617855...	RB4 10/4 A# 361-785-5602- 092404-5 FAX 10/4- 11/3	84.32	
		UNIFORMS	66590	CINTAS CORPORATION LOC. 083	958	4243598...	RB4 9/17 UNIFORMS	134.90	
			66590	CINTAS CORPORATION LOC. 083	958	4244340...	RB4 9/24 UNIFORMS	134.90	
			66590	CINTAS CORPORATION LOC. 083	958	4245082...	RB4 10/1 UNIFORMS	134.90	
		UTILITIES	66600	CITY OF SEADRIFT	862	1166/0925	RB4 9/30 A# 1166 SWAN POINT WATER	33.35	
			66600	CITY OF SEADRIFT	862	125/0925	RB4 9/30 A# 125 SEA WATER	56.60	
								65,652.79	0.00
SHERIFF	760	GENERAL OFFICE SUPPLIES	53020	GULF COAST HARDWARE LLC	63195	203169	SO 9/26 HARDWARE- PATROL DOOR	23.99	

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			53020	QUILL LLC	6602	45813418	SO 9/18 (2) PACKING TAPE DISPENSER	19.59	
			53020	QUILL LLC	6602	45826225	SO 9/18 INK, POSTITS, SHARPIES, RUBBER BANDS, PENS, FOLDERS	733.38	
			53020	CINTAS CORPORATION LOC. 083	958	4245240...	SO 10/2 MATS	91.32	
		PHOTO COPIES/SUPPLIES	53030	DEWITT POTH & SON LLC	3379	8068090	SO 9/14 COPY COUNT 8/1- 9/2	141.59	
		LAW ENFORCEMENT SUPPLIES	53430	WORKQUEST	34501	PINVO2...	SO 9/17 BLOOD TEST KITS	185.80	
				TRANSUNION RISK & ALTERNATIVE	8168	2953082...	SO 10/1 SEPT 2025 SEARCHES	245.00	
		TIRES AND TUBES	53520	FIRESTONE OF PORT LAVACA LLC	5584	0091039	SO 9/29 TIRE REPAIR- U47	26.75	
		UNIFORMS	53995	FOWLER DAVE	2937	7476	SO 9/22 UNIFORM JACKETS	2,130.28	
		AUTOMOTIVE REPAIRS	60360	TISDALE MARK	3374	6447	SO 10/3 DECALS- U28	325.00	
			60360	KNEUPPER CARROLL	3678	55102	SO 9/23 OIL CHG- OSG22	118.94	
			60360	KNEUPPER CARROLL	3678	55132	SO 9/24 OIL CHG- U6	118.94	
			60360	KNEUPPER CARROLL	3678	55192	SO 9/26 OIL CHG- U11	186.20	
			60360	KNEUPPER CARROLL	3678	55214	SO 9/29 OIL CHG- U3	123.94	
			60360	KNEUPPER CARROLL	3678	55235	SO 9/29 OIL CHG- U3	148.22	
			60360	KNEUPPER CARROLL	3678	55266	SO 10/1 OIL CHG- U2	148.22	
			60360	KNEUPPER CARROLL	3678	55281	SO 10/1 OIL CHG- U34	118.94	
			60360	AUTO ZONE	6	0351296...	SO 9/16 BATTERY- U19	160.99	
			60360	CROSSROADS TIRE SERVICE LLC	7059	4001939	SO 9/25 ADD COOLANT- U19	128.79	
			60360	CROSSROADS TIRE SERVICE LLC	7059	4001981	SO 10/1 BRAKE INSPECTION- U3	47.07	
			60360	STAR W EQUIPMENT REPAIR INC	741	6729	SO 9/30 MOTOR, WATER PUMP, EXHAUST SYSTEM- U49	6,550.00	
			60360	VICTORIA COMMUNICATION SERVICE	8229	VICS127...	SO 10/2 INSTALL CAMERAS- U27, U28	615.00	
		TRAINING REGISTRATION FEES/TRAVEL	66310	VICTORIA COLLEGE	8201	111847	SO 9/29 CADET PROGRAM- WILLIAMS 1 QTR (8/27- 12/4)	1,825.00	
		CAPITAL OUTLAY-SB22 GRANT-EQUIPMENT	70749	GT DISTRIBUTORS INC	2679	INV1059...	SO 9/25 FLARES	139.93	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
SHERIFF	Total 760							14,352.88	0.00
WASTE MANAGEMENT	380	SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63192	203199	WASTE MGMT 9/27 (3) NIFTY NABBERS, HARDWARE	84.09	
		WASTE DISPOSAL FEES	66830	REPUBLIC SERVICES #847	8897	0847001...	WASTE MGMT 9/30 A# 3-0847-0007565 SEPT 2025 RECYCLE SVCS	1,207.50	
			66830	REPUBLIC SERVICES #847	8897	0847001...	WASTE MGMT 9/30 A# 3-0847-007565 SEPT 2025 REC SVCS- FORMOSA	1,603.76	
			66830	REPUBLIC SERVICES #847	8897	0847001...	WASTE MGMT 9/30 A# 3-0847-0013749 SEPT 2025 TRASH	6,545.29	
WASTE MANAGEMENT	Total 380							9,440.64	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 2697 - DONATIONS FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCRUED SALES TAXES PAYABLE	20585	CALHOUN CO. GENERAL FUND	930	PO1010...	CALCO 10/13 3RD QTR '25 SALES TAX TIMELY FILING DISC- MUSEUM	0.57	
		SOUVENIR/GIFT ITEMS	53973	CIMPRESS USA INCORPORATED	3799	1143394...	MUSEUM- DONATIONS 9/15 (125) GIFT SHOP KOOZIES	203.11	
			53973	CIMPRESS USA INCORPORATED	3799	5006844...	MUSEUM- DONATIONS 9/9 (108) GIFT SHOP SHOT GLASSES	328.67	
		MISCELLANEOUS	63920	BAUM DOUGLAS EDWARD	7997	202513	HIST COM- DONATIONS 9/23 10/9 7TH GRADE PRESENTATION	1,500.00	
NO DEPARTMENT	Total 999							2,032.35	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
2699 - JUVENILE CASE MANAGER FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCRUED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	0.02	
		ACCURUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	2.30	
		ACCURUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	91.21	
		ACCURUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	0.19	
		ACCURUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	0.36	
NO DEPARTMENT	Total 999							94.08	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 2716 - GRANT'S FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCURED MISCELLANEOUS2	20537	MASA	5569	2191761	CALCO 10/2 OCT 2025 PREMIUMS	17.81	
		ACCURED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	0.49	
		ACCURED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	96.32	
		ACCURED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	2,211.74	
		ACCURED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	3.97	
		ACCURED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	12.43	
		LAW ENFORCEMENT SUPPLIES	53430	GT DISTRIBUTORS INC	2679	INV1060...	SO- NRA FOUNDATION GRANT 9/26 SIMULATION KITS FOR FIREARMS	2,016.00	
		GRANT SERVICES	62740	KSBR LLC	1978	CALCO...	CDBG 10/2 MULTI JURISDICTION HAZARD MITIGATION	23,750.00	
		TELEPHONE SERVICES	66192	VERIZON WIRELESS	7896	6124250...	OSG 9/23 A# 342228328-00001 PHONE 8/24-9/23	75.98	
		CAPITAL OUTLAY	70750	CALHOUN CO. GENERAL FUND	930	PO2716...	CALCO 9/30 REIMB FROM FY2024 WASTE GRANT FOR TRAILER	1,711.89	
NO DEPARTMENT	Total 999							29,896.63	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 2721 - LATERAL ROAD FUND PRECINCT #1

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SUPPLIES-ROAD AND BRIDGE	53991	CALHOUN CO. GENERAL FUND	930	PCTILA...	CALCO 9/26 REIMB RB1 SUP- OLD MAGNOLIA ST 8/1/24- 7/31/25	3,716.86	
NO DEPARTMENT	Total 999							3,716.86	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 2722 - LATERAL ROAD FUND PRECINCT #2

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SUPPLIES-ROAD AND BRIDGE	53991	CALHOUN CO. GENERAL FUND	930	PCT2LA...	CALCO 9/17 REIMB RB2-SUP E MAXWELL DITCH 8/1/24- 7/31/25	3,716.86	
NO DEPARTMENT	Total 999							3,716.86	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 2723 - LATERAL ROAD FUND PRECINCT #3

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SUPPLIES-ROAD AND BRIDGE	53991	CALHOUN CO. GENERAL FUND	930	PCT31A...	CALCO 9/22 REIMB RB3 SUP- OLD CR302/CR305 8/1/24- 7/31/25	3,716.86	
NO DEPARTMENT	Total 999							3,716.86	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 2724 - LATERAL ROAD FUND PRECINCT #4

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SUPPLIES-ROAD AND BRIDGE	53991	CALHOUN CO. GENERAL FUND	930	PCT4LA...	CALCO 9/17 REIMB RB4 SUP- OLD GATES RD 8/1/24- 7/31/25	3,716.87	
NO DEPARTMENT	Total 999							3,716.87	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 2736 - POC COMMUNITY CENTER

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCURED MISCELLANEOUS2	20537	MASA	5569	2191761	CALCO 10/2 OCT 2025 PREMIUMS	1.16	
		ACCURED INSURANCE-ADAM D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	0.01	
		ACCURED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	0.85	
		ACCURED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	33.58	
		ACCURED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	0.07	
		MISCELLANEOUS	63920	VICTORIA FIRE & SAFETY	8204	148597	POCCC 9/24 ANNUAL FIRE INSPECTION	379.00	
NO DEPARTMENT	Total 999							414.67	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 5177 - CAP PROJ - LITTLE CHOCOLATE BAYOU PARK

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	RESTROOMS/SHOWERS/PL... TABLES	73441	GUERRERO CONSTRUCTION	85901	PO9992...	CAP PROJ 10/7 LITTLE CHOC BAY PK RR- HANDRAILS	9,600.00	
NO DEPARTMENT	Total 999							9,600.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 5186 - CP PROJ-MAG BEACH RESTORATION/CRABBIN BR

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING SERVICES	62454	MOTT MACDONALD GROUP INC	3885	5075198...	MAT MIT 9/25 CRABBIN BRIDGE 8/1- 8/31	4,265.00	
NO DEPARTMENT	Total 999							4,265.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 5225 - CAPITAL PROJECT-GREEN LAKE PARK

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	EQUIPMENT-PARKS	72400	HOLT CAT	3048	SIMV12...	CAP PROJ 9/30 GREEN LAKE PK- MAINT EQUIP- TRACK LOADER	81,172.61	
NO DEPARTMENT	Total 999							81,172.61	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
 7750 - MISCELLANEOUS CLEARING FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	DUE TO OTHER GOVERNMENTS	20749	CALHOUN CO PORT AUTHORITY	1106	PO2025...	TAX A/C 9/26 SEPT 2025 TAX COLLECS	5.86	
		DUE TO OTHERS	20751	MCCREARY VESELKA BRAAG	5088	PO200D...	TAX A/C 9/10 AUG 2025 DTA FEES	53.69	
NO DEPARTMENT	Total 999							59.55	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 10.15.25
9200 - JUVENILE PROBATION FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCURED MISCELLANEOUS2	20537	MASA	5569	2191761	CALCO 10/2 OCT 2025 PREMIUMS	42.00	
		ACCURED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	1.20	
		ACCURED INSURANCE-UNIVERSAL LIFE	20562	TRUSTMARK	8169	10152025	CALCO 10/1 OCT 2025 PREMIUMS	96.44	
		ACCURED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	172.92	
		ACCURED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	4,992.63	
		ACCURED INSURANCE-LIFE/LONG TERM CARE	20568	COMBINED INSURANCE	542	PO1001...	CALCO 10/1 OCT 2025 PREMIUMS	45.74	
		ACCURED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	9.68	
		ACCURED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	3281020...	CALCO 10/6 OCTOBER 2025 PREMIUMS	27.52	
		PHOTO COPIES/SUPPLIES	53030	DEWITT POTH & SON LLC	3379	8071240	JUV PROB 9/5 COPY COUNT 9/4- 8/4	68.24	
		SUPPLIES/OPERATING EXPENSES	53980	MICRO DISTRIBUTING II LTD	52950	1369669	JUV PROB 9/22 DRUG TESTS	225.00	
		53980		THOMSON REUTERS - WEST	8612	8525699...	JUV PROB 9/17 2026 TX PENAL CODE	87.00	
		FAMILY CONFLICT RESOLUTION&SKILLS TRAINI	62567	BELIEVE BEHAVIORAL HEALTH	7057	P07401...	JUV PROB 9/30 SEPT 2025 SKILLS TRAINING	3,333.33	
		PREVENTION & INTERVENTION - GRANT S	64839	LIBERTY RESOURCES	1634	90125	JUV PROB 9/30 SEPT 2025 PARTNERS ASSURING SCHOOL SUCCESS	5,000.00	
NO DEPARTMENT	Total 999							14,101.70	0.00
Report Total								696,688.35	492.95

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ----October 15, 2025

by:CT

INDIGENT HEALTHCARE FUND:

INDIGENT EXPENSES

HEB Pharmacy (Medimpact) Pharmacy Reimbursement	17.66
Memorial Medical Clinic	360.00
MMCenter (In-patient \$0/ Out-patient \$630.01/ER \$0)	630.01

SUBTOTAL

Memorial Medical Center (Indigent Healthcare Payroll and Expenses)

Subtotal

Co-pays adjustments for September 2025
Reimbursement from Medicaid

1,007.67

4,166.67

5,174.34

(50.00)

0.00

TOTAL APPROVED INDIGENT HEALTHCARE FUND EXPENSES

5,124.34

RBGRV

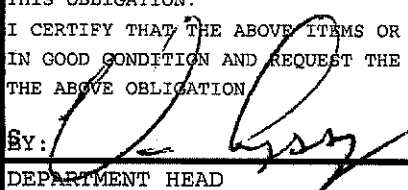
000 000000010/15/2025 0 CALHOUN COUNTY, TEXAS

DATE: 10/15/2025

CC Indigent Health Care

VENDOR # 852

ACCOUNT NUMBER	DESCRIPTION OF GOODS OR SERVICES	QUANTITY	UNIT PRICE	TOTAL PRICE
1000-800-98722-999	Transfer to pay bills for Indigent Health Care approved by Commissioners Court on 10/15/2025			\$5,124.34
1000-001-46010	September 30, 2025 Interest			(\$8.71)
				\$5,115.63

COUNTY AUDITOR APPROVAL ONLY	THE ITEMS OR SERVICES SHOWN ABOVE ARE NEEDED IN THE DISCHARGE OF MY OFFICIAL DUTIES AND I CERTIFY THAT FUNDS ARE AVAILABLE TO PAY THIS OBLIGATION. I CERTIFY THAT THE ABOVE ITEMS OR SERVICES WERE RECEIVED BY ME IN GOOD CONDITION AND REQUEST THE COUNTY TREASURER TO PAY THE ABOVE OBLIGATION
APPROVED ON OCT - 9 2025 BY COUNTY AUDITOR CALHOUN COUNTY, TEX	By:  10/15/2025 DEPARTMENT HEAD DATE

IHS
Issued 10/07/25

Source Totals Report
Calhoun Indigent Health Care
Batch Dates 10/01/2025 through 10/01/2025
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
02	Prescription Drugs	17.66	17.66
08	Rural Health Clinics	360.00	360.00
14	Mmc - Hospital Outpatient	1,301.00	630.01
	Expenditures	1,678.66	1,007.67
	Reimb/Adjustments		
	Grand Total	1,678.66	1,007.67
		Expenses	4,166.67
		Co-Pays	< 50.00 >
			5,124.34

Michelle Childers
10/9/25

APPROVED ON
OCT - 9 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE: 10/07/25
TIME: 06:15

MEMORIAL MEDICAL CENTER
RECEIPTS FROM 09/01/25 TO 09/30/25

PAGE 230
RCMREP

G/L NUMBER	RECEIPT DATE	PAY NUMBER TYPE PAYER	CASH AMOUNT	RECEIPT AMOUNT	NUMBER	NAME	DISC DATE	COLL GL CASH INIT CODE ACCOUNT
50240.000	09/11/25	757119 CA	10.00	10.00			00/00/00	PLB 1
50240.000	09/15/25	758859 VI	10.00	10.00			00/00/00	PLB 1
50240.000	09/22/25	758150 VI	10.00	10.00			00/00/00	PLB 1
50240.000	09/23/25	759168 CA	10.00	10.00			00/00/00	PLB 1
50240.000	09/26/25	760007 CA	10.00	10.00			00/00/00	PLB 1

TOTAL 50240.000 COUNTY INDIGENT COPAYS

50.00

IHS
Issued 10/07/25

Source Totals Report
Calhoun Indigent Health Care
Batch Dates 02/01/2025 through 10/01/2025
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	70.00	33.95
02	Prescription Drugs	57.63	57.63
08	Rural Health Clinics	1,060.00	1,060.00
14	Mmc - Hospital Outpatient	11,619.76	5,464.13
15	Mmc - Er Bills	427.00	204.96
	Expenditures	13,234.39	6,820.67
	Reimb/Adjustments		
	Grand Total	13,234.39	6,820.67
		Expenses	37,500.03
		Co-Pays	< 120.00 >
			44,200.70

Michelle Crowland
10/9/25

Calhoun County Indigent Care Patient Caseload 2025

	Approved	Denied	Removed	Active	Pending
January	0	1	0	1	2
February	1	1	0	2	2
March	0	3	0	2	2
April	1	0	0	3	3
May	1	0	0	4	0
June	0	0	0	4	3
July	1	1	0	5	6
August	0	5	1	4	1
September	0	0	0	4	4
October					
November					
December					
YTD	4	11			
Monthly Avg	0	1	0	3	3
December 2024 Active		1			



PROSPERITY BANK®

THE COUNTY OF CALHOUN TEXAS
CAL CO INDIGENT HEALTHCARE
202 S ANN ST STE A
PORT LAVACA TX 77979

Statement Date 9/30/2025
Account No ****4551
Page 1 of 2

12812

STATEMENT SUMMARY

Public Fund Contractual Ckg w Int Account No ****4551

09/01/2025	Beginning Balance			\$9,415.16
	1 Deposits/Other Credits	+		\$8.71
	4 Checks/Other Debits	-		\$4,571.53
09/30/2025	Ending Balance	30	Days in Statement Period	\$4,852.34
	Total Enclosures			4

DEPOSITS/OTHER CREDITS

Date	Description	Amount
09/30/2025	Accr Earning Pymt Added to Account	\$8.71

CHECKS

Check Number	Date	Amount	Check Number	Date	Amount
12672	09-11	\$30.25	12674	09-11	\$360.00
12673	09-11	\$14.61	12675	09-16	\$4,166.67

DAILY ENDING BALANCE

Date	Balance	Date	Balance
09-01	\$9,415.16	09-16	\$4,843.63
09-11	\$9,010.30	09-30	\$4,852.34

EARNINGS SUMMARY

** Below is an Itemization of the Earnings paid this period. **

Interest Paid This Period	\$8.71	Annual Percentage Yield Earned	1.51 %
Interest Paid YTD	\$76.87	Days in Earnings Period	30
		Earnings Balance	\$7,061.92

MEMBER FDIC



NYSE Symbol "PB"

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101331 : 01281201

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---October 15, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 1,411,391.01
TOTAL TRANSFERS BETWEEN FUNDS	\$ 359,103.31
TOTAL NURSING HOME UPL EXPENSES	\$ 1,799,914.65
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED October 15, 2025	\$ 3,570,408.97

R.B. GRV ✓

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---October 15, 2025

PAYABLES AND PAYROLL

10/9/2025 Weekly Payables	987,231.36
10/13/2025 McKesson-340B Prescription Expense	121,855.86
10/13/2025 McKesson-340B Prescription Expense	81,282.39
10/13/2025 Amerisource Bergen-340B Prescription Expense	1,077.44
10/13/2025 Amerisource Bergen-340B Prescription Expense	216.87
10/13/2025 Amerisource Bergen-340B Prescription Expense	65.29
10/13/2025 Amerisource Bergen-340B Prescription Expense	125.46
10/13/2025 Amerisource Bergen-340B Prescription Expense	3,914.99

Prosperity Electronic Bank Payments

10/13/2025 90 Degree Benefits - employee insurance claims	17,573.67
10/13/2025 90 Degree Benefits - employee insurance claims	5,451.17
10/13/2025 Sales Tax - September 2025	2,616.04
10/13/2025 TCDRS September Retirement	177,157.92
10/13/2025 Pay Plus-Patient Claims Processing Fee	2,961.52
10/13/2025 Credit Card Leasing Fee	335.53
10/13/2025 Credit Card Processing Fee	8,500.30
10/13/2025 Authnet Gateway	25.20

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **1,411,391.01**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

10/9/2025 MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	154,919.09
10/9/2025 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	188,165.76
10/9/2025 MMC Operating to Bethany/Lavaca Bay-Correction of insurance payment deposited into MMC Operating in error	16,018.46

TOTAL TRANSFERS BETWEEN FUNDS \$ **359,103.31**

NURSING HOME UPL EXPENSES

10/13/2025 Nursing Home UPL-Cantex Transfer	5,130.61
10/13/2025 Nursing Home UPL-Nexion Transfer	511,727.78
10/13/2025 Nursing Home UPL-Tuscany Transfer	223,184.75
10/13/2025 Nursing Home UPL-HSL Transfer	452,669.22

QIPP CHECKS TO MMC

10/13/2025 Tuscany - QIPP Q3 owed to MMC	66,151.46
10/13/2025 Golden Creek - QIPP Q3 owed to MMC	63,491.39
10/13/2025 Lavaca Bay-QIPP Q3 owed to MMC	237,469.61

TRANSFER BETWEEN FUNDS FROM NURSING HOMES TO MMC

10/13/2025 Lavaca Bay to MMC - Claim owed to MMC	38,181.67
10/13/2025 Gulfpointe to MMC - Claim owed to MMC	130,291.92
10/13/2025 Lavaca Bay to MMC - Q3 Interest payment	740.73
10/13/2025 Golden Creek to MMC-Q3 Interest payment	552.05
10/13/2025 Lavaca Bay to MMC - Medicare Recoup on MMC for Lavaca Bay patients	68,368.21
10/13/2025 Fort Bend to MMC-Check was mailed to Cantex-Crescent	406.20

TRANSFER OF FUNDS BETWEEN NURSING HOMES

10/13/2025 Lavaca Bay to Sweeny - Claim payments owed to Sweeny from Lavaca Bay	1,549.05

TOTAL NURSING HOME UPL EXPENSES \$ **1,799,914.65**

TOTAL INTER-GOVERNMENT TRANSFERS \$

GRAND TOTAL DISBURSEMENTS APPROVED October 15, 2025 \$ **3,570,408.97**

OCT 09 2025

10/09/2025

12:09

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 10/31/2025

0
ap_open_invoice.template

Vendor# Vendor Name

18148

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ LEAABR003		10/07/202	09/30/202	10/07/202			24.00	0.00	0.00	24.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
18148		24.00	0.00	0.00	24.00

Vendor# Vendor Name

11283

ACE HARDWARE 15521

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 093025		09/30/202	09/30/202	10/25/202			1,248.30	0.00	0.00	1,248.30 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11283	ACE HARDWARE 15521	1,248.30	0.00	0.00	1,248.30

Vendor# Vendor Name

10950

ACUTE CARE INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ INV2504		10/08/202	10/20/202	10/20/202			1,400.00	0.00	0.00	1,400.00 ✓

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

Vendor# Vendor Name

A1680

AIRGAS USA, LLC - CENTRAL DIV

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9165350299		10/06/202	09/30/202	10/25/202			2,683.63	0.00	0.00	2,683.63 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 5519693026	OXYGEN	10/06/202	09/30/202	10/25/202			288.77	0.00	0.00	288.77 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 5519692815		10/06/202	09/30/202	10/25/202			1,067.96	0.00	0.00	1,067.96 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 5519692475		10/07/202	09/30/202	10/25/202			625.47	0.00	0.00	625.47 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS USA, LLC - CENTRAL DIV	4,665.83	0.00	0.00	4,665.83

Vendor# Vendor Name

14028

AMAZON CAPITAL SERVICES

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1WHPJF7N4CPN		09/24/202	09/17/202	10/17/202			6.78	0.00	0.00	6.78 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1X31NV4CCLLD		09/24/202	09/19/202	10/19/202			58.18	0.00	0.00	58.18 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1Y7D4NXDCMJJ		09/24/202	09/19/202	10/19/202			637.80	0.00	0.00	637.80 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1WXF971XCM1F		09/24/202	09/19/202	10/19/202			327.81	0.00	0.00	327.81 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1MKTGF79D4N1		09/24/202	09/22/202	10/22/202			940.22	0.00	0.00	940.22 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1QKC374Y6DJ7		09/24/202	09/23/202	10/23/202			331.23	0.00	0.00	331.23 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1J9PGX911HQK		09/24/202	09/24/202	10/24/202			65.94	0.00	0.00	65.94 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1FJCTLHW613D		10/08/202	09/24/202	10/24/202			55.33	0.00	0.00	55.33 ✓

Patient Record

Supplies

Vental

Vental

ink curk

Slipper Floor pad

Keypad Entry

Sponges, Bins, Floor pads

Storage / filing Cabinet

Office Desk

Patient Parking Sign

Floor pads / Patient folders

✓ 4588710	10/08/202 08/21/202 09/15/202	1,484.00	0.00	0.00	1,484.00	✓
✓ 4593627	10/08/202 10/03/202 10/28/202	1,484.00	0.00	0.00	1,484.00	✓
✓ 112279293	10/08/202 10/03/202 10/28/202	3,887.18	0.00	0.00	3,887.18	✓
✓ 112283341	10/08/202 10/08/202 10/31/202	1,203.21	0.00	0.00	1,203.21	✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 B1220 BECKMAN COULTER INC. 25,632.76 0.00 0.00 25,632.76

Vendor# Vendor Name Class Pay Code
 13448

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 092925		10/07/202	09/29/202	10/07/202			850.00	0.00	0.00	850.00

Vendor Totals: Number Name Gross Discount No-Pay Net
 13448 850.00 0.00 0.00 850.00

Vendor# Vendor Name Class Pay Code
 11072 BIO-RAD LABORATORIES, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 908597599		10/08/202	09/24/202	10/08/202			1,020.62	0.00	0.00	1,020.62
✓ 908603081		10/08/202	09/25/202	10/08/202			242.62	0.00	0.00	242.62

Vendor Totals: Number Name Gross Discount No-Pay Net
 11072 BIO-RAD LABORATORIES, INC 1,263.24 0.00 0.00 1,263.24

Vendor# Vendor Name Class Pay Code
 17720

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ CARNOL0001		09/25/202	03/26/202	10/20/202			40.00	0.00	0.00	40.00

Vendor Totals: Number Name Gross Discount No-Pay Net
 17720 40.00 0.00 0.00 40.00

Vendor# Vendor Name Class Pay Code
 17708

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ BROEMM0001		09/25/202	03/26/202	10/20/202			60.00	0.00	0.00	60.00

Vendor Totals: Number Name Gross Discount No-Pay Net
 17708 60.00 0.00 0.00 60.00

Vendor# Vendor Name Class Pay Code
 C1048 CALHOUN COUNTY W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 092425		10/07/202	09/24/202	09/24/202			93.41	0.00	0.00	93.41

Vendor Totals: Number Name Gross Discount No-Pay Net
 C1048 CALHOUN COUNTY 93.41 0.00 0.00 93.41

Vendor# Vendor Name Class Pay Code
 14120 CALHOUN COUNTY EMS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 202509		09/30/202	10/06/202	10/31/202			6,160.00	0.00	0.00	6,160.00

Vendor Totals: Number Name Gross Discount No-Pay Net
 14120 CALHOUN COUNTY EMS 6,160.00 0.00 0.00 6,160.00

Vendor# Vendor Name Class Pay Code

10988	✓	CALHOUN SPORTS MEDICINE												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
10001		10/06/202	09/26/202	10/06/202			350.00	0.00	0.00	350.00				✓
	ADVERTISING													
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				
	10988	CALHOUN SPORTS MEDICINE					350.00	0.00	0.00	350.00				
Vendor#	Vendor Name													
17656	✓													
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
✓	STRCLA0001	09/25/202	03/27/202	10/20/202			280.69	0.00	0.00	280.69				✓
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				
	17656						280.69	0.00	0.00	280.69				
Vendor#	Vendor Name													
14064	✓	CAPITAL ONE												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
✓	081925	09/30/202	09/19/202	10/10/202			697.03	0.00	0.00	697.03				✓
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				
	14064	CAPITAL ONE					697.03	0.00	0.00	697.03				
Vendor#	Vendor Name													
C1325	✓	CARDINAL HEALTH 414, INC.												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
✓	8003972508	09/30/202	09/30/202	10/30/202			164.82	0.00	0.00	164.82				✓
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				
	C1325	CARDINAL HEALTH 414, INC.					164.82	0.00	0.00	164.82				
Vendor#	Vendor Name													
18132	✓													
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
✓	GOOCAR0003	10/07/202	09/30/202	10/07/202			35.64	0.00	0.00	35.64				✓
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				
	18132						35.64	0.00	0.00	35.64				
Vendor#	Vendor Name													
14236	✓	CARRIER CORPORATION												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
✓	90487031	10/06/202	09/30/202	10/30/202			12,830.00	0.00	0.00	12,830.00				✓
	032425-042025 RENTAL													
✓	90487035	10/06/202	09/30/202	10/30/202			12,830.00	0.00	0.00	12,830.00				✓
	042125-051825 RENTAL													
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				
	14236	CARRIER CORPORATION					25,660.00	0.00	0.00	25,660.00				
Vendor#	Vendor Name													
C1992	✓	CDW GOVERNMENT, INC.												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
✓	AG1XM6H	10/08/202	09/22/202	10/22/202			108.38	0.00	0.00	108.38				✓
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				
	C1992	CDW GOVERNMENT, INC.					108.38	0.00	0.00	108.38				
Vendor#	Vendor Name													
13264	✓	CERVEY, LLC												
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net				
✓	37859	10/08/202	10/01/202	10/26/202			2,150.00	0.00	0.00	2,150.00				✓
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net				

	13264	CERVEY, LLC						2,150.00	0.00	0.00	2,150.00
Vendor#	Vendor Name		Class	Pay Code							
C1600	CITIZENS MEDICAL CENTER		W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
202537		09/30/202	10/06/202	10/06/202			56,117.92	0.00	0.00	56,117.92	✓
CENA Coverage Sept. 2025											
Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net	
C1600	CITIZENS MEDICAL CENTER						56,117.92	0.00	0.00	56,117.92	
Vendor#	Vendor Name		Class	Pay Code							
15188	CLARITY ENROLLMENT SOLUTIONS										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
2509		10/06/202	10/01/202	10/30/202			315.00	0.00	0.00	315.00	✓
Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net	
15188	CLARITY ENROLLMENT SOLUTIONS						315.00	0.00	0.00	315.00	
Vendor#	Vendor Name		Class	Pay Code							
13000	CLEARFLY										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
INV749422		10/06/202	10/01/202	10/06/202			1,236.55	0.00	0.00	1,236.55	✓
October 2025											
Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net	
13000	CLEARFLY						1,236.55	0.00	0.00	1,236.55	
Vendor#	Vendor Name		Class	Pay Code							
10212	CLINICAL PATHOLOGY LABS										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
17656083125		09/30/202	08/31/202	10/07/202			19,501.37	0.00	0.00	19,501.37	✓
September 2025											
Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net	
10212	CLINICAL PATHOLOGY LABS						19,501.37	0.00	0.00	19,501.37	
Vendor#	Vendor Name		Class	Pay Code							
C1166	COASTAL OFFICE SOLUTIONS		W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
OE526121		10/08/202	09/04/202	09/14/202			351.44	0.00	0.00	351.44	✓
Can Unlrs											
OEQT337351		10/08/202	10/02/202	10/12/202			308.78	0.00	0.00	308.78	✓
OE529261		10/08/202	10/08/202	10/18/202			207.50	0.00	0.00	207.50	✓
Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net	
C1166	COASTAL OFFICE SOLUTIONS						867.72	0.00	0.00	867.72	
Vendor#	Vendor Name		Class	Pay Code							
13336	COCA COLA SOUTHWEST BEVERAGES										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
49138718010		10/08/202	10/03/202	10/03/202			854.87	0.00	0.00	854.87	✓
Ways - Beverages											
Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net	
13336	COCA COLA SOUTHWEST BEVERAGES						854.87	0.00	0.00	854.87	
Vendor#	Vendor Name		Class	Pay Code							
11030	COMBINED INSURANCE										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
100125		10/06/202	10/01/202	10/01/202			501.72	0.00	0.00	501.72	✓
Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net	
11030	COMBINED INSURANCE						501.72	0.00	0.00	501.72	
Vendor#	Vendor Name		Class	Pay Code							
15116	COMPUGROUP MEDICAL - EMDS INC.										

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9090132120		10/08/202	10/03/202	10/03/202			11,930.40	0.00	0.00	11,930.40 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
15116 COMPUGROUP MEDICAL - EMDS INC.							11,930.40	0.00	0.00	11,930.40
Vendor#	Vendor Name	Class		Pay Code						
12264 ✓	CROSSROADS MECHANICAL, INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 00966		10/06/202	09/09/202	09/09/202			1,913.76	0.00	0.00	1,913.76 ✓
Taxes included - removed										1,772.18 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
12264 CROSSROADS MECHANICAL, INC							1,913.76	0.00	0.00	1,913.76
Vendor#	Vendor Name	Class		Pay Code						
17540 ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ FITCYN0001		09/25/202	02/24/202	10/20/202			23.61	0.00	0.00	23.61 ✓
Patient refund										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
17540							23.61	0.00	0.00	23.61
Vendor#	Vendor Name	Class		Pay Code						
17760 ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ BARMAC0001		09/25/202	03/26/202	10/20/202			36.72	0.00	0.00	36.72 ✓
Patient refund										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
17760							36.72	0.00	0.00	36.72
Vendor#	Vendor Name	Class		Pay Code						
11368 ✓	CYRACOM LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2025066471		09/30/202	09/30/202	10/30/202			361.03	0.00	0.00	361.03 ✓
INTERPRET SERVICES Sept. 2025										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
11368 CYRACOM LLC							361.03	0.00	0.00	361.03
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
✓ 6864642		10/08/202	07/28/202	08/22/202			91.02	0.00	0.00	91.02 ✓
✓ 6886621		10/08/202	07/29/202	08/23/202			58.91	0.00	0.00	58.91 ✓
✓ C7788820		10/08/202	01/03/202	01/28/202			-24.50	0.00	0.00	-24.50 ✓
✓ C7794910		10/08/202	01/18/202	02/10/202			-7.61	0.00	0.00	-7.61 ✓
✓ 8049960		10/08/202	08/20/202	09/14/202			72.87	0.00	0.00	72.87 ✓
✓ 8083530		10/08/202	09/17/202	10/12/202			95.79	0.00	0.00	95.79 ✓
✓ 8086130		10/08/202	09/18/202	10/13/202			480.00	0.00	0.00	480.00 ✓
✓ 8087510		10/08/202	09/23/202	10/18/202			497.06	0.00	0.00	497.06 ✓
✓ 8100100		10/08/202	10/01/202	10/26/202			127.97	0.00	0.00	127.97 ✓
marker / Sharpie pack Highlighter pack Credit Credit Pen / highlighters / notes Cartridge envelopes envelopes / binders / pen / Sharpies paper / markers / Cartridge										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
10368 DEWITT POTH & SON							1,391.51	0.00	0.00	1,391.51

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
	IN20056720		09/30/202	10/01/202	10/26/202			19,166.67	0.00	0.00	19,166.67
	IN20056719		09/30/202	10/01/202	10/26/202			31,418.64	0.00	0.00	31,418.64
Sept. 2025 CPR											
Sept. 2025 Ben Health											
Vendor Totals: Number			Name					Gross	Discount	No-Pay	Net
11011			DIAMOND HEALTHCARE CORP					50,585.31	0.00	0.00	50,585.31
Vendor#	Vendor Name	Class	Pay Code								
10789	DISCOVERY MEDICAL NETWORK INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	MM0093025		09/30/202	09/30/202	10/01/202			192,084.36	0.00	0.00	192,084.36
Sept. 2025											
Vendor Totals: Number			Name					Gross	Discount	No-Pay	Net
10789			DISCOVERY MEDICAL NETWORK INC					192,084.36	0.00	0.00	192,084.36
Vendor#	Vendor Name	Class	Pay Code								
11291	DOWELL PEST CONTROL										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	59956		10/06/202	10/01/202	10/26/202			75.00	0.00	0.00	75.00
11/16/2025											
Vendor Totals: Number			Name					Gross	Discount	No-Pay	Net
11291			DOWELL PEST CONTROL					75.00	0.00	0.00	75.00
Vendor#	Vendor Name	Class	Pay Code								
15240	ECLINICAL WORKS LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	0003349307		09/30/202	10/01/202	10/31/202			450.20	0.00	0.00	450.20
Vendor Totals: Number			Name					Gross	Discount	No-Pay	Net
15240			ECLINICAL WORKS LLC					450.20	0.00	0.00	450.20
Vendor#	Vendor Name	Class	Pay Code								
11091	ECOLAB										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	6355108491		10/07/202	10/01/202	10/01/202			235.78	0.00	0.00	235.78
100125-103125 RENTAL											
Vendor Totals: Number			Name					Gross	Discount	No-Pay	Net
11091			ECOLAB					235.78	0.00	0.00	235.78
Vendor#	Vendor Name	Class	Pay Code								
18104											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	SANEL10001		09/25/202	09/19/202	10/20/202			120.00	0.00	0.00	120.00
patient refund											
Vendor Totals: Number			Name					Gross	Discount	No-Pay	Net
18104								120.00	0.00	0.00	120.00
Vendor#	Vendor Name	Class	Pay Code								
14136	EPI-EDWARD PLUMBING										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	69287		10/06/202	09/24/202	09/24/202			1,449.06	0.00	0.00	1,449.06
CHILLER REPAIR											
Vendor Totals: Number			Name					Gross	Discount	No-Pay	Net
14136			EPI-EDWARD PLUMBING					1,449.06	0.00	0.00	1,449.06
Vendor#	Vendor Name	Class	Pay Code								
11944	EQUIFAX WORKFORCE SOLUTIONS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2067883277		09/30/202	09/30/202	10/30/202			10.99	0.00	0.00	10.99
Crew Reporting											

Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
11944		EQUIFAX WORKFORCE SOLUTIONS				10.99	0.00	0.00	10.99		
Vendor#	Vendor Name	Class		Pay Code							
10042	✓ ERBE USA INC SURGICAL SYSTEMS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	37219646		09/24/202	09/30/202	10/08/202			169.50	0.00	0.00	169.50 ✓
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
10042		ERBE USA INC SURGICAL SYSTEMS				169.50	0.00	0.00	169.50		
Vendor#	Vendor Name	Class		Pay Code							
17664	✓ [REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	CHAZZZ0001		09/25/202	03/27/202	10/20/202			20.00	0.00	0.00	20.00 ✓
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
17664		[REDACTED]				20.00	0.00	0.00	20.00		
Vendor#	Vendor Name	Class		Pay Code							
17736	✓ [REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	TALSID0001		09/25/202	03/26/202	10/20/202			20.00	0.00	0.00	20.00 ✓
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
17736		[REDACTED]				20.00	0.00	0.00	20.00		
Vendor#	Vendor Name	Class		Pay Code							
S0501	✓ EVOQUA WATER TECHNOLOGIES LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	907237532		10/06/202	10/01/202	10/26/202			1,119.30	0.00	0.00	1,119.30 ✓
✓	907124133		10/08/202	07/16/202	08/10/202			2,090.51	0.00	0.00	2,090.51 ✓
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
S0501		EVOQUA WATER TECHNOLOGIES LLC				3,209.81	0.00	0.00	3,209.81		
Vendor#	Vendor Name	Class		Pay Code							
10689	✓ FASTHEALTH CORPORATION										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	10A25MMC		10/07/202	10/01/202	10/16/202			545.00	0.00	0.00	545.00 ✓
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
10689		FASTHEALTH CORPORATION				545.00	0.00	0.00	545.00		
Vendor#	Vendor Name	Class		Pay Code							
F1100	✓ FEDERAL EXPRESS CORP.	W									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	897092495		10/06/202	08/28/202	09/22/202			69.77	0.00	0.00	69.77 ✓
✓	898793178		10/06/202	09/11/202	10/08/202			83.49	0.00	0.00	83.49 ✓
✓	899683125		10/06/202	09/18/202	10/13/202			96.79	0.00	0.00	96.79 ✓
✓	900541197		10/06/202	09/25/202	10/20/202			74.12	0.00	0.00	74.12 ✓
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
F1100		FEDERAL EXPRESS CORP.				324.17	0.00	0.00	324.17		
Vendor#	Vendor Name	Class		Pay Code							
17292	✓ [REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	KOLMAC0001		09/25/202	03/25/202	10/20/202			20.00	0.00	0.00	20.00 ✓

Vendor Totals: Number Name		Gross		Discount		No-Pay		Net		
17292 [REDACTED]		20.00		0.00		0.00		20.00		
Vendor#	Vendor Name	Class		Pay Code						
14336	FIRETRON, INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
299972		10/08/202	09/22/202	10/22/202			580.00	0.00	0.00	580.00
300718		10/08/202	09/30/202	10/30/202			2,045.00	0.00	0.00	2,045.00
Semi inspection Sprinkler / Fire Alarm										
inspection										
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net		
14336 FIRETRON, INC		2,625.00		0.00		0.00		2,625.00		
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
3796623		09/24/202	09/22/202	10/17/202			49.27	0.00	0.00	49.27
3991878		09/24/202	09/30/202	10/25/202			2,588.33	0.00	0.00	2,588.33
3959607		10/08/202	09/29/202	10/24/202			100.73	0.00	0.00	100.73
4051408		10/08/202	10/02/202	10/27/202			502.25	0.00	0.00	502.25
4108890		10/08/202	10/06/202	10/31/202			503.86	0.00	0.00	503.86
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net		
F1400 FISHER HEALTHCARE		3,744.44		0.00		0.00		3,744.44		
Vendor#	Vendor Name	Class		Pay Code						
10599	FORVIS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2864578		10/08/202	09/29/202	10/24/202			15,225.00	0.00	0.00	15,225.00
ASSX - W/ August financial statements										
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net		
10599 FORVIS		15,225.00		0.00		0.00		15,225.00		
Vendor#	Vendor Name	Class		Pay Code						
11183	FRONTIER									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
092325		10/06/202	09/23/202	10/06/202			40.03	0.00	0.00	40.03
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net		
11183 FRONTIER		40.03		0.00		0.00		40.03		
Vendor#	Vendor Name	Class		Pay Code						
14156	FUJI FILM									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
91700029		09/01/202	09/30/202	09/30/202			7,916.67	0.00	0.00	7,916.67
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net		
14156 FUJI FILM		7,916.67		0.00		0.00		7,916.67		
Vendor#	Vendor Name	Class		Pay Code						
17724	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
GOHRYA0001		09/25/202	03/26/202	10/20/202			26.04	0.00	0.00	26.04
Patient refund										
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net		
17724 [REDACTED]		26.04		0.00		0.00		26.04		
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
✓ 6003051614		10/06/202	10/01/202	10/31/202			36.34	0.00	0.00	36.34 ✓
✓ 6003051613		10/06/202	10/01/202	10/31/202			1,504.89	0.00	0.00	1,504.89 ✓
	100125-101325 BILL PERIOD									
✓ 6003051903		10/06/202	10/01/202	10/31/202			1,044.28	0.00	0.00	1,044.28 ✓
	100125-101325 BILL PERIOD									
✓ 600351616		10/06/202	10/01/202	10/31/202			25.86	0.00	0.00	25.86 ✓
	100125-101325 BILL PERIOD									
✓ 6003051621		10/06/202	10/01/202	10/31/202			5,665.83	0.00	0.00	5,665.83 ✓
✓ 6003051615		10/06/202	10/01/202	10/31/202			1,015.90	0.00	0.00	1,015.90 ✓
	100125-101325 BILL PERIOD									

Vendor Totals: Number Name Gross Discount No-Pay Net
12404 GE PRECISION HEALTHCARE, LLC 9,293.08 0.00 0.00 9,293.08

Vendor# Vendor Name Class Pay Code
18144 ✓ [REDACTED]

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ CRAGLE001		10/07/202	09/30/202	10/07/202			40.00	0.00	0.00	40.00 ✓
	<i>Patient Refund</i>									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
18144	[REDACTED]						40.00	0.00	0.00	40.00

Vendor# Vendor Name Class Pay Code
11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
092425A		09/30/202	09/24/202	10/31/202			17,687.10	0.00	0.00	17,687.10
092425		09/30/202	09/24/202	10/31/202			70,878.61	0.00	0.00	70,878.61
092525		09/30/202	09/25/202	10/31/202			40,804.71	0.00	0.00	40,804.71
092625		09/30/202	09/26/202	10/31/202			308.04	0.00	0.00	308.04
092625B		09/30/202	09/26/202	10/31/202			2,375.00	0.00	0.00	2,375.00
092625A		09/30/202	09/26/202	10/31/202			985.50	0.00	0.00	985.50
092925		09/30/202	09/29/202	10/31/202			6,050.00	0.00	0.00	6,050.00
093025		09/30/202	09/30/202	10/31/202			412.22	0.00	0.00	412.22
093025A		09/30/202	09/30/202	10/31/202			665.39	0.00	0.00	665.39
093025B		09/30/202	09/30/202	10/31/202			4,530.34	0.00	0.00	4,530.34
100125		10/08/202	10/01/202	10/31/202			2,791.49	0.00	0.00	2,791.49
100225		10/08/202	10/02/202	10/31/202			384.75	0.00	0.00	384.75
100625A		10/08/202	10/06/202	10/31/202			356.54	0.00	0.00	356.54
100625		10/08/202	10/06/202	10/31/202			189.40	0.00	0.00	189.40
100725		10/08/202	10/07/202	10/31/202			6,500.00	0.00	0.00	6,500.00

Remove - Nursing Home does not belong
↓

Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
11836		GOLDENCREEK HEALTHCARE				154,919.09	0.00	0.00	154,919.09	
Vendor#	Vendor Name	Class	Pay Code							
W1300	GRAINGER	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9644701998		10/08/202	09/17/202	10/12/202			112.26	0.00	0.00	112.26
Glove Box Dispenser										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
W1300		GRAINGER				112.26	0.00	0.00	112.26	
Vendor#	Vendor Name	Class	Pay Code							
12948	GREAT AMERICA FINANCIAL SVCS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
40224627		10/07/202	09/29/202	10/24/202			10,020.34	0.00	0.00	10,020.34
COPIES 8/24 - 9/23/25										
40224625		10/07/202	09/29/202	10/24/202			66.53	0.00	0.00	66.53
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
12948		GREAT AMERICA FINANCIAL SVCS				10,086.87	0.00	0.00	10,086.87	
Vendor#	Vendor Name	Class	Pay Code							
G0401	GULF COAST DELIVERY									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
083025		10/07/202	09/30/202	10/30/202			75.00	0.00	0.00	75.00
Work performed 9/12 - 9/19/25										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
G0401		GULF COAST DELIVERY				75.00	0.00	0.00	75.00	
Vendor#	Vendor Name	Class	Pay Code							
17752										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
AGUARI0001		09/25/202	09/26/202	10/20/202			37.58	0.00	0.00	37.58
Patient refund										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
17752						37.58	0.00	0.00	37.58	
Vendor#	Vendor Name	Class	Pay Code							
17324										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
DEWHAR01		08/25/202	03/25/202	10/30/202			50.00	0.00	0.00	50.00
PT REFUND										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
17324						50.00	0.00	0.00	50.00	
Vendor#	Vendor Name	Class	Pay Code							
12380	HEALTH SOLUTIONS DIETETICS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
090125		09/30/202	09/01/202	10/06/202			3,400.00	0.00	0.00	3,400.00
Sept. 2025										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
12380		HEALTH SOLUTIONS DIETETICS				3,400.00	0.00	0.00	3,400.00	
Vendor#	Vendor Name	Class	Pay Code							
17652										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
JONJOS0001		09/25/202	03/27/202	10/20/202			40.00	0.00	0.00	40.00
Patient Refund										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
17652						40.00	0.00	0.00	40.00	
Vendor#	Vendor Name	Class	Pay Code							
H0031	HEB CREDIT RECEIVABLES DEPT308									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

✓	092625		09/30/202 09/26/202 10/20/202				282.20	0.00	0.00	282.20	✓	
		DIETARY SUPPLIES										
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	H0031	HEB CREDIT RECEIVABLES DEPT308					282.20	0.00	0.00	282.20		
Vendor#	Vendor Name						Class	Pay Code				
H1269	✓ HENRY SCHEIN INC.											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	✓ 44527746		10/08/202	07/24/202	10/08/202			33.63	0.00	0.00	33.63	✓
			car wash xps									
	✓ 47574890		10/08/202	09/30/202	10/08/202			33.63	0.00	0.00	33.63	✓
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	H1269	HENRY SCHEIN INC.					67.26	0.00	0.00	67.26		
Vendor#	Vendor Name						Class	Pay Code				
14916	✓ HEWLETT-PACKARD											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	✓ 100001389902		10/06/202	09/17/202				573.53	0.00	0.00	573.53	✓
			Yuma									
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	14916	HEWLETT-PACKARD					573.53	0.00	0.00	573.53		
Vendor#	Vendor Name						Class	Pay Code				
15620	✓ HHSC											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	✓ 100225		10/07/202	10/02/202	10/02/202			500.00	0.00	0.00	500.00	✓
		MRI ROOFTOP UNIT THHS INSPE										
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	15620	HHSC					500.00	0.00	0.00	500.00		
Vendor#	Vendor Name						Class	Pay Code				
10922	✓ HUNTER PHARMACY SERVICES											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	✓ 6876		09/30/202	09/30/202	10/20/202			15,167.45	0.00	0.00	15,167.45	✓
			Dobson Novased									
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	10922	HUNTER PHARMACY SERVICES					15,167.45	0.00	0.00	15,167.45		
Vendor#	Vendor Name						Class	Pay Code				
14976	✓ INOVALON PROVIDER INC.											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	✓ 25M0126770		10/08/202	10/08/202	10/31/202			773.76	0.00	0.00	773.76	✓
		100125-103125 SERVICE PERIOD										
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	14976	INOVALON PROVIDER INC.					773.76	0.00	0.00	773.76		
Vendor#	Vendor Name						Class	Pay Code				
11200	✓ IRON MOUNTAIN											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	✓ KSPV248		09/30/202	09/30/202	10/30/202			3,260.62	0.00	0.00	3,260.62	✓
			Shred 8/27, 9/23/25									
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	11200	IRON MOUNTAIN					3,260.62	0.00	0.00	3,260.62		
Vendor#	Vendor Name						Class	Pay Code				
11285	✓ ITA RESOURCES INC											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	✓ MMC102025		10/06/202	10/01/202	10/21/202			42,293.25	0.00	0.00	42,293.25	✓
			prop fee / call back / OT									
	Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	11285	ITA RESOURCES INC					42,293.25	0.00	0.00	42,293.25		
Vendor#	Vendor Name						Class	Pay Code				

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
18156	MAYJAC0001	10/07/202	09/30/202	10/07/202			40.00	0.00	0.00	40.00
Vendor Totals: Number 18156 Name [REDACTED] Gross 40.00 Discount 0.00 No-Pay 0.00 Net 40.00										
Vendor#	Vendor Name	Class		Pay Code						
18068	[REDACTED]									
18068	STRAJAM003	10/07/202	09/30/202	10/07/202			42.21	0.00	0.00	42.21
Vendor Totals: Number 18068 Name [REDACTED] Gross 42.21 Discount 0.00 No-Pay 0.00 Net 42.21										
Vendor#	Vendor Name	Class		Pay Code						
18116	JENNIFER MORALES									
18116	092325	10/08/202	09/23/202	09/23/202			347.20	0.00	0.00	347.20
Vendor Totals: Number 18116 Name JENNIFER MORALES Gross 347.20 Discount 0.00 No-Pay 0.00 Net 347.20										
Vendor#	Vendor Name	Class		Pay Code						
18120	[REDACTED]									
18120	ZEIJEN0002	10/07/202	09/30/202	10/07/202			11.18	0.00	0.00	11.18
Vendor Totals: Number 18120 Name [REDACTED] Gross 11.18 Discount 0.00 No-Pay 0.00 Net 11.18										
Vendor#	Vendor Name	Class		Pay Code						
18152	[REDACTED]									
18152	STAJOB0001	10/07/202	09/30/202	10/07/202			40.00	0.00	0.00	40.00
Vendor Totals: Number 18152 Name [REDACTED] Gross 40.00 Discount 0.00 No-Pay 0.00 Net 40.00										
Vendor#	Vendor Name	Class		Pay Code						
17692	[REDACTED]									
17692	SELJOS0001	09/25/202	03/28/202	10/20/202			15.00	0.00	0.00	15.00
Vendor Totals: Number 17692 Name [REDACTED] Gross 15.00 Discount 0.00 No-Pay 0.00 Net 15.00										
Vendor#	Vendor Name	Class		Pay Code						
17672	[REDACTED]									
17672	BROUNI0001	09/25/202	03/28/202	10/20/202			46.87	0.00	0.00	46.87
Vendor Totals: Number 17672 Name [REDACTED] Gross 46.87 Discount 0.00 No-Pay 0.00 Net 46.87										
Vendor#	Vendor Name	Class		Pay Code						
18160	KYLIE TAYLOR									
18160	092325	10/08/202	09/23/202	10/08/202			347.20	0.00	0.00	347.20
Vendor Totals: Number 18160 Name KYLIE TAYLOR Gross 347.20 Discount 0.00 No-Pay 0.00 Net 347.20										
Vendor#	Vendor Name	Class		Pay Code						

patient refund

patient refund

8/15 - 8/17/25 San Antonio, TX

patient refund

patient refund

patient refund

patient refund

8/15 - 8/17/25 San Antonio, TX

L0700 ✓	LABCORP OF AMERICA HOLDINGS				M						
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net ✓
✓	85037856		09/30/202	09/22/197	09/27/202			565.00	0.00	0.00	565.00 ✓
✓	82418242		09/30/202	09/27/202	09/27/202			1.29	0.00	0.00	1.29 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
L0700	LABCORP OF AMERICA HOLDINGS	566.29	0.00	0.00	566.29

Vendor# Vendor Name Class Pay Code

12792	LAVACA BAY NURSING AND REHAB										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	092425A		09/30/202	09/24/202	10/31/202			~~2,507.10~~	0.00	0.00	~~2,507.10~~
	092425	<i>remove - Nursing Homes</i>									
	092625A		09/30/202	09/26/202	10/31/202			~~4,886.00~~	0.00	0.00	~~4,886.00~~
	092625		09/30/202	09/26/202	10/31/202			~~1,876.00~~	0.00	0.00	~~1,876.00~~
	093025		09/30/202	09/30/202	10/31/202			~~2,330.57~~	0.00	0.00	~~2,330.57~~
	093025A		09/30/202	09/30/202	10/31/202			~~373.57~~	0.00	0.00	~~373.57~~
	100225		10/08/202	10/02/202	10/31/202			~~4,190.00~~	0.00	0.00	~~4,190.00~~

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12792	LAVACA BAY NURSING AND REHAB	16,018.46	0.00	0.00	16,018.46

Vendor# Vendor Name Class Pay Code

18128 ✓											
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	HERLIN0002		10/07/202	09/30/202	10/07/202			120.00	0.00	0.00	120.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
18128		120.00	0.00	0.00	120.00

Vendor# Vendor Name Class Pay Code

10972 ✓	M G TRUST										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	0091925		10/06/202	09/19/202	10/06/202			895.00	0.00	0.00	895.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10972	M G TRUST	895.00	0.00	0.00	895.00

Vendor# Vendor Name Class Pay Code

J1350 ✓	M.C. JOHNSON COMPANY INC										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	00399485		09/24/202	10/01/202	10/08/202			95.33	0.00	0.00	95.33

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
J1350	M.C. JOHNSON COMPANY INC	95.33	0.00	0.00	95.33

Vendor# Vendor Name Class Pay Code

17704 ✓											
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	WEEMAD0001		09/25/202	03/26/202	10/20/202			36.07	0.00	0.00	36.07

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
17704		36.07	0.00	0.00	36.07

Vendor# Vendor Name Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
17972	MALEK INC									
W18498		10/08/202	09/30/202	10/01/202			5,300.00	0.00	0.00	5,300.00
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
17972	MALEK INC						5,300.00	0.00	0.00	5,300.00
Vendor#	Vendor Name				Class	Pay Code				
17756										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
MYEKAM0001		09/25/202	03/26/202	10/20/202			36.12	0.00	0.00	36.12
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
17756							36.12	0.00	0.00	36.12
Vendor#	Vendor Name				Class	Pay Code				
17696										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
TIMQUI0001		09/25/202	03/26/202	10/20/202			20.00	0.00	0.00	20.00
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
17696							20.00	0.00	0.00	20.00
Vendor#	Vendor Name				Class	Pay Code				
17648										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
RESKAY0001		09/10/202	03/27/202	10/25/202			20.00	0.00	0.00	20.00
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
17648							20.00	0.00	0.00	20.00
Vendor#	Vendor Name				Class	Pay Code				
M2178	MCKESSON MEDICAL SURGICAL INC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
24404110		10/08/202	09/29/202	10/14/202			2,217.49	0.00	0.00	2,217.49
24430181		10/08/202	10/02/202	10/17/202			158.00	0.00	0.00	158.00
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
M2178	MCKESSON MEDICAL SURGICAL INC						2,375.49	0.00	0.00	2,375.49
Vendor#	Vendor Name				Class	Pay Code				
18092	MEDICAL SOLUTIONS LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
201015929		09/30/202	10/01/202	10/31/202			2,294.25	0.00	0.00	2,294.25
201024395		09/30/202	10/06/202	10/06/202			2,656.50	0.00	0.00	2,656.50
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
18092	MEDICAL SOLUTIONS LLC						4,950.75	0.00	0.00	4,950.75
Vendor#	Vendor Name				Class	Pay Code				
12588	MEDICAL TECHNOLOGY ASSOCIATES									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV277650		09/24/202	09/30/202	10/25/202			8,480.39	0.00	0.00	8,480.39
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
12588	MEDICAL TECHNOLOGY ASSOCIATES						8,480.39	0.00	0.00	8,480.39
Vendor#	Vendor Name				Class	Pay Code				
10613	MEDIMPACT HEALTHCARE SYS. INC.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100725		10/08/202	10/07/202	10/07/202			17.66			

Vendor Totals: Number Name		Gross	Discount	No-Pay	Net				
10813	MEDIMPACT HEALTHCARE SYS, INC.	17.66	0.00	0.00	17.66				
Vendor#	Vendor Name	Class	Pay Code						
M2470	MEDLINE INDUSTRIES INC	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ 2389903302		09/24/202	09/23/202	10/18/202		28.70	0.00	0.00	28.70 ✓
✓ 2389903303	Walker	09/24/202	09/23/202	10/18/202		24.32	0.00	0.00	24.32 ✓
✓ 2390067724	Mask/Sheild	09/24/202	09/23/202	10/18/202		64.95	0.00	0.00	64.95 ✓
✓ 2390228598	PR Patient X-ray	09/24/202	09/24/202	10/19/202		335.63	0.00	0.00	335.63 ✓
✓ 2390228590	Supplies	09/24/202	09/24/202	10/19/202		57.04	0.00	0.00	57.04 ✓
✓ 2390229709	PRM Board	09/24/202	09/24/202	10/19/202		132.84	0.00	0.00	132.84 ✓
✓ 2390229700	Shore Coated Vicryl Plus	09/24/202	09/24/202	10/19/202		38.04	0.00	0.00	38.04 ✓
✓ 2390228596	Tube	09/24/202	09/24/202	10/19/202		15.35	0.00	0.00	15.35 ✓
✓ 2390228594	Gumbe Tube	09/24/202	09/24/202	10/19/202		1,184.52	0.00	0.00	1,184.52 ✓
✓ 2390229705	Supplies	09/24/202	09/24/202	10/19/202		85.13	0.00	0.00	85.13 ✓
✓ 2390229702	Pedi Feeding Tube	09/24/202	09/24/202	10/19/202		11.51	0.00	0.00	11.51 ✓
✓ 2390228599	Splint	09/24/202	09/24/202	10/19/202		844.07	0.00	0.00	844.07 ✓
✓ 2390228592	Supplies	09/24/202	09/24/202	10/19/202		55.26	0.00	0.00	55.26 ✓
✓ 2390229708	Gel	09/24/202	09/24/202	10/19/202		3,501.70	0.00	0.00	3,501.70 ✓
✓ 2390228593	Supplies	09/24/202	09/24/202	10/19/202		12,830.74	0.00	0.00	12,830.74 ✓
✓ 2390228587	Supplies	09/24/202	09/24/202	10/19/202		455.18	0.00	0.00	455.18 ✓
✓ 2390228597	Supplies	09/24/202	09/24/202	10/19/202		338.86	0.00	0.00	338.86 ✓
✓ 2390228589	Solution	09/24/202	09/24/202	10/19/202		14.14	0.00	0.00	14.14 ✓
✓ 2390229701	Control Bacterial	09/24/202	09/24/202	10/19/202		11.51	0.00	0.00	11.51 ✓
✓ 2390229703	Splint	09/24/202	09/24/202	10/19/202		36.06	0.00	0.00	36.06 ✓
✓ 2390229704	Spluman Bag	09/24/202	09/24/202	10/19/202		18.45	0.00	0.00	18.45 ✓
✓ 1703479706	Connector Oxygen Tube	10/06/202	05/24/202	06/18/202		899.15	0.00	0.00	899.15 ✓
✓ 1703552362		10/06/202	09/27/202	10/22/202		281.38	0.00	0.00	281.38 ✓
✓ 2390289871		10/08/202	09/24/202	10/19/202		133.34	0.00	0.00	133.34 ✓
✓ 2390494184	Carrox mroth	10/08/202	09/25/202	10/20/202		222.58	0.00	0.00	222.58 ✓
	Supplies								

✓	2390699486	10/08/202 09/27/202 10/22/202	133.85	0.00	0.00	133.85	✓
✓	2390968824	10/08/202 09/30/202 10/25/202 <i>Da mask</i>	222.95	0.00	0.00	222.95	✓
✓	2390968826	10/08/202 09/30/202 10/25/202 <i>Insta Pad</i>	109.84	0.00	0.00	109.84	✓
✓	2390968823	10/08/202 09/30/202 10/25/202 <i>Page Test</i>	34.31	0.00	0.00	34.31	✓
✓	2391201885	10/08/202 10/01/202 10/26/202 <i>Wraps: ear cannulas</i>	492.74	0.00	0.00	492.74	✓
✓	2391201877	10/08/202 10/01/202 10/26/202 <i>Tray: spinal epidural</i>	22.33	0.00	0.00	22.33	✓
✓	2391201883	10/08/202 10/01/202 10/26/202 <i>Swab</i>	393.47	0.00	0.00	393.47	✓
✓	2391201897	10/08/202 10/01/202 10/26/202 <i>Draper Shoulder</i>	35.72	0.00	0.00	35.72	✓
✓	2391201895	10/08/202 10/01/202 10/26/202 <i>Shield nipple</i>	20.68	0.00	0.00	20.68	✓
✓	2391774833	10/08/202 10/03/202 10/28/202 <i>Braze foot Left</i>	-93.53	0.00	0.00	-93.53	✓

Vendor Totals: Number Name Gross Discount No-Pay Net
M2470 MEDLINE INDUSTRIES INC 22,992.81 0.00 0.00 22,992.81

Vendor#	Vendor Name	Class	Pay Code				
M2621	MMC AUXILIARY GIFT SHOP	W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 092525		09/25/202	09/25/202	10/07/202			

Vendor Totals: Number Name Gross Discount No-Pay Net
M2621 MMC AUXILIARY GIFT SHOP 347.16 0.00 0.00 347.16

Vendor#	Vendor Name	Class	Pay Code				
10536	MORRIS & DICKSON CO. LLC						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 3887182		10/07/202	09/23/202	10/03/202			
✓ 3885009		10/07/202	09/23/202	10/03/202			
✓ 3887181		10/07/202	09/23/202	10/03/202			
✓ CM47850		10/07/202	09/24/202	10/04/202			
✓ 3889432		10/07/202	09/24/202	10/04/202			
✓ 3892186		10/07/202	09/24/202	10/04/202			
✓ 3889431		10/07/202	09/24/202	10/04/202			
✓ 3892187		10/07/202	09/24/202	10/04/202			
✓ 3894464		10/07/202	09/25/202	10/05/202			
✓ 3894465		10/07/202	09/25/202	10/05/202			
✓ SC9038		10/07/202	09/25/202	10/05/202			
✓ 3896214		10/07/202	09/25/202	10/05/202			

✓ 3894132	10/07/202 09/25/202 10/05/202 <i>Med</i>	5,146.94	0.00	0.00	5,146.94 ✓
✓ 3894119	10/07/202 09/25/202 10/05/202	3,602.76	0.00	0.00	3,602.76 ✓
✓ 3896213	10/07/202 09/25/202 10/05/202	27.24	0.00	0.00	27.24 ✓
✓ SC9039	10/07/202 09/25/202 10/05/202	88.00	0.00	0.00	88.00 ✓
✓ 3894463	<i>Credit</i> 10/07/202 09/25/202 10/05/202	121.89	0.00	0.00	121.89 ✓
✓ 3902225	<i>Med</i> 10/07/202 09/28/202 10/08/202	18.28	0.00	0.00	18.28 ✓
✓ 3902224	10/07/202 09/28/202 10/08/202	698.37	0.00	0.00	698.37 ✓
✓ 3904132	10/07/202 09/28/202 10/08/202	199.30	0.00	0.00	199.30 ✓
✓ 3902223	10/07/202 09/28/202 10/08/202	502.46	0.00	0.00	502.46 ✓
✓ 3904133	10/07/202 09/28/202 10/08/202	1,164.46	0.00	0.00	1,164.46 ✓
✓ 3908278	10/07/202 09/29/202 10/09/202	513.50	0.00	0.00	513.50 ✓
✓ 3908277	10/07/202 09/29/202 10/09/202	17.75	0.00	0.00	17.75 ✓
✓ 3914001	10/07/202 09/29/202 10/09/202	398.59	0.00	0.00	398.59 ✓
✓ 3914003	10/07/202 09/30/202 10/10/202	284.76	0.00	0.00	284.76 ✓
✓ 3914002	10/07/202 09/30/202 10/10/202	1,298.32	0.00	0.00	1,298.32 ✓
✓ 6799	10/07/202 09/30/202 10/10/202	-115.74	0.00	0.00	-115.74 ✓
✓ 3919073	<i>Credit</i> 10/07/202 10/01/202 10/11/202	2,777.11	0.00	0.00	2,777.11 ✓
✓ CM49872	<i>Med</i> 10/07/202 10/01/202 10/11/202	-10.75	0.00	0.00	-10.75 ✓
✓ 3916104	<i>Credit</i> 10/07/202 10/01/202 10/11/202	26.32	0.00	0.00	26.32 ✓
✓ CM49870	<i>Med</i> 10/07/202 10/01/202 10/11/202	-22.94	0.00	0.00	-22.94 ✓
✓ 3919072	<i>Credit</i> 10/07/202 10/01/202 10/11/202	3.85	0.00	0.00	3.85 ✓
✓ CM49871	<i>Med</i> 10/07/202 10/01/202 10/11/202	-22.94	0.00	0.00	-22.94 ✓
✓ 3916105	<i>Credit</i> 10/07/202 10/01/202 10/11/202	66.10	0.00	0.00	66.10 ✓
✓ 3919071	<i>Med</i> 10/07/202 10/01/202 10/11/202	53.49	0.00	0.00	53.49 ✓
✓ 3934670	10/07/202 10/02/202 10/12/202	84.17	0.00	0.00	84.17 ✓
✓ 0169295	10/07/202 10/02/202 10/12/202	675.84	0.00	0.00	675.84 ✓
✓ 3921309	10/07/202 10/02/202 10/12/202	98.98	0.00	0.00	98.98 ✓
✓ 3923176	10/07/202 10/02/202 10/12/202	1,904.17	0.00	0.00	1,904.17 ✓

✓ 3932750	10/07/202 10/02/202 10/12/202	3,730.82	0.00	0.00	3,730.82	✓
✓ 3923177	10/07/202 10/02/202 10/12/202	46.83	0.00	0.00	46.83	✓
✓ 3923175	10/07/202 10/02/202 10/12/202	125.51	0.00	0.00	125.51	✓
✓ 3930349	10/07/202 10/05/202 10/15/202	63.26	0.00	0.00	63.26	✓
✓ 3930351	10/07/202 10/05/202 10/15/202	1,057.03	0.00	0.00	1,057.03	✓
✓ 3930350	10/07/202 10/05/202 10/15/202	0.85	0.00	0.00	0.85	✓
✓ 3930352	10/07/202 10/05/202 10/15/202	1.85	0.00	0.00	1.85	✓
✓ 3930348	10/07/202 10/06/202 10/16/202	6.88	0.00	0.00	6.88	✓
✓ 3934671	10/07/202 10/06/202 10/16/202	1,013.04	0.00	0.00	1,013.04	✓
✓ 3932749	10/07/202 10/06/202 10/16/202	10,826.06	0.00	0.00	10,826.06	✓

Vendor Totals: Number Name Gross Discount No-Pay Net
10536 MORRIS & DICKSON CO, LLC 49,810.17 0.00 0.00 49,810.17

Vendor# Vendor Name Class Pay Code
M2659 ✓ MXR IMAGING, INC M

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 8801292902 10/08/202 09/25/202 10/25/202 83.51 0.00 0.00 83.51 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
M2659 MXR IMAGING, INC 83.51 0.00 0.00 83.51

Vendor# Vendor Name Class Pay Code
13548 ✓ NACOGDOCHES TRANSCRIPTION

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 8858 10/06/202 10/02/202 10/12/202 91.42 0.00 0.00 91.42 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
13548 NACOGDOCHES TRANSCRIPTION 91.42 0.00 0.00 91.42

Vendor# Vendor Name Class Pay Code
17684 [REDACTED]

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ RIPROY0001 09/25/202 03/26/202 10/20/202 43.96 0.00 0.00 43.96 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
17684 [REDACTED] 43.96 0.00 0.00 43.96

Vendor# Vendor Name Class Pay Code
13624 ✓ NEXION HEALTH AT NAVASOTA INC

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 090125 09/30/202 09/01/202 10/04/202 1,000.00 0.00 0.00 1,000.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
13624 NEXION HEALTH AT NAVASOTA INC 1,000.00 0.00 0.00 1,000.00

Vendor# Vendor Name Class Pay Code
G0425 ODEFEY WITTE WALL & VILLAFRANC W

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 4938 10/06/202 09/18/202 10/18/202 4,717.25 0.00 0.00 4,717.25 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
4,717.25 0.00 0.00 4,717.25

G0425		ODEFEY WITTE WALL & VILLAFRANC		4,717.25		0.00		0:00		4,717.25	
Vendor#	Vendor Name	Class		Pay Code							
O1500	OLYMPUS AMERICA INC	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
38740527		10/08/202	09/30/202	10/25/202			273.99	0.00	0.00	273.99	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
O1500 OLYMPUS AMERICA INC							273.99	0.00	0.00	273.99	
Vendor#	Vendor Name	Class		Pay Code							
11155	PARAREV										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
2025596		10/08/202	10/01/202	10/31/202			3,084.00	0.00	0.00	3,084.00	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
11155 PARAREV							3,084.00	0.00	0.00	3,084.00	
Vendor#	Vendor Name	Class		Pay Code							
P1800	PITNEY BOWES INC	W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
1028184426		09/01/202	09/22/202	10/22/202			970.00	0.00	0.00	970.00	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
P1800 PITNEY BOWES INC							970.00	0.00	0.00	970.00	
Vendor#	Vendor Name	Class		Pay Code							
14764	PL-CPR, LLC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
407		09/30/202	09/24/202	09/24/202			525.00	0.00	0.00	525.00	
409		10/06/202	10/03/202	10/03/202			1,380.00	0.00	0.00	1,380.00	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
14764 PL-CPR, LLC							1,905.00	0.00	0.00	1,905.00	
Vendor#	Vendor Name	Class		Pay Code							
P2100	PORT LAVACA WAVE	W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
INV0036		09/30/202	09/29/202	10/24/202			1,100.00	0.00	0.00	1,100.00	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
P2100 PORT LAVACA WAVE							1,100.00	0.00	0.00	1,100.00	
Vendor#	Vendor Name	Class		Pay Code							
P2200	POWER HARDWARE	W									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
A122997		10/06/202	10/01/202	10/11/202			11.98	0.00	0.00	11.98	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
P2200 POWER HARDWARE							11.98	0.00	0.00	11.98	
Vendor#	Vendor Name	Class		Pay Code							
11932	PRESS GANEY ASSOCIATES, INC.										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
IN000724736		09/30/202	09/30/202	10/30/202			2,952.47	0.00	0.00	2,952.47	
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
11932 PRESS GANEY ASSOCIATES, INC.							2,952.47	0.00	0.00	2,952.47	
Vendor#	Vendor Name	Class		Pay Code							
10896	QIAGEN INC										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
999822839		09/24/202	09/16/202	10/16/202			1,299.91	0.00	0.00	1,299.91	

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
✓ 999827967	08/24/202 09/19/202 10/19/202			355.60	0.00	0.00	355.60 ✓
<i>Positive & negative controls</i>							
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
10896	QIAGEN INC			1,855.51	0.00	0.00	1,855.51
Vendor#	Vendor Name	Class	Pay Code				
11024	REED, CLAYMON, MEEKER & HARGET						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 35391		10/06/202	09/23/202	09/23/202			265.50 ✓
<i>Qxpp Inexion Discussion</i>							
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
11024	REED, CLAYMON, MEEKER & HARGET			265.50	0.00	0.00	265.50
Vendor#	Vendor Name	Class	Pay Code				
14920	REPUBLIC SERVICES, INC.						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 0847001415736		10/06/202	09/26/202	09/26/202			2,926.54 ✓
<i>Wash container</i>							
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
14920	REPUBLIC SERVICES, INC.			2,926.54	0.00	0.00	2,926.54
Vendor#	Vendor Name	Class	Pay Code				
17748							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 2227770035		09/25/202	03/26/202	10/20/202			40.00 ✓
<i>patient Refund</i>							
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
17748				40.00	0.00	0.00	40.00
Vendor#	Vendor Name	Class	Pay Code				
S0900	SAMS CLUB DIRECT	W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 092025		09/30/202	09/20/202	10/07/202			232.47 ✓
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
S0900	SAMS CLUB DIRECT			232.47	0.00	0.00	232.47
Vendor#	Vendor Name	Class	Pay Code				
10936	SIEMENS FINANCIAL SERVICES						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 56382500079965		10/07/202	09/29/202	10/19/202			1,333.33 ✓
<i>Verbal</i>							
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
10936	SIEMENS FINANCIAL SERVICES			1,333.33	0.00	0.00	1,333.33
Vendor#	Vendor Name	Class	Pay Code				
S2001	SIEMENS MEDICAL SOLUTIONS INC	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 116791612		09/30/202	09/25/202	10/20/202			3,507.72 ✓
<i>Contract Billing 9/24 10/23/25</i>							
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
S2001	SIEMENS MEDICAL SOLUTIONS INC			3,507.72	0.00	0.00	3,507.72
Vendor#	Vendor Name	Class	Pay Code				
10681	SIMMLER, INC.						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 196761		10/06/202	10/02/202				239.00 ✓
<i>Sexual Cell Scan kit</i>							
Vendor Totals: Number	Name			Gross	Discount	No-Pay	Net
10681	SIMMLER, INC.			239.00	0.00	0.00	239.00
Vendor#	Vendor Name	Class	Pay Code				
17992	SOUTHWEST MEDICAL EQUIPMENT						

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
125110		10/08/202	09/30/202	10/08/202			3,136.55	0.00	0.00	3,136.55
Stretcher 300										
Vendor#	Vendor Name	Class	Pay Code							
17992	SOUTHWEST MEDICAL EQUIPMENT									
17992				Gross	Discount	No-Pay	Net			
17992				3,136.55	0.00	0.00	3,136.55			
Vendor#	Vendor Name	Class	Pay Code							
C1010	SPARKLIGHT		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
100125		10/08/202	10/01/202	10/02/202			3,596.00	0.00	0.00	3,596.00
Internet										
Vendor#	Vendor Name	Class	Pay Code							
C1010	SPARKLIGHT									
C1010				Gross	Discount	No-Pay	Net			
C1010				3,596.00	0.00	0.00	3,596.00			
Vendor#	Vendor Name	Class	Pay Code							
12288	SPBS CLINICAL EQUIPMENT SRVC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1708691		10/06/202	09/30/202	10/01/202			1,511.45	0.00	0.00	1,511.45
Parks										
INV050001025		10/06/202	10/01/202	10/02/202			9,836.92	0.00	0.00	9,836.92
Monthly Contract Calling										
Vendor#	Vendor Name	Class	Pay Code							
12288	SPBS CLINICAL EQUIPMENT SRVC									
12288				Gross	Discount	No-Pay	Net			
12288				11,348.37	0.00	0.00	11,348.37			
Vendor#	Vendor Name	Class	Pay Code							
15236	SPECIALTY PROFESSIONAL									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1250001027		09/30/202	09/12/202	09/12/202			2,950.00	0.00	0.00	2,950.00
Amber Helzer 9/1, 9/2, 9/4										
Vendor#	Vendor Name	Class	Pay Code							
15236	SPECIALTY PROFESSIONAL									
15236				Gross	Discount	No-Pay	Net			
15236				2,950.00	0.00	0.00	2,950.00			
Vendor#	Vendor Name	Class	Pay Code							
S3940	STERIS CORPORATION		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
505402382		10/08/202	09/16/202	10/11/202			3,676.88	0.00	0.00	3,676.88
edge take up hose										
14385277		10/08/202	09/30/202	10/25/202			218.40	0.00	0.00	218.40
Rapide										
Vendor#	Vendor Name	Class	Pay Code							
S3940	STERIS CORPORATION									
S3940				Gross	Discount	No-Pay	Net			
S3940				3,895.28	0.00	0.00	3,895.28			
Vendor#	Vendor Name	Class	Pay Code							
17248	SUMMIT PAIN AND WELLNESS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1317		09/01/202	09/27/202	10/27/202			5,240.00	0.00	0.00	5,240.00
RN's 9/26/25										
Vendor#	Vendor Name	Class	Pay Code							
17248	SUMMIT PAIN AND WELLNESS									
17248				Gross	Discount	No-Pay	Net			
17248				5,240.00	0.00	0.00	5,240.00			
Vendor#	Vendor Name	Class	Pay Code							
14524	SYSMEX AMERICA, INC.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
96114645		10/08/202	09/24/202	10/08/202			527.44	0.00	0.00	527.44
Beyond Cure Remote										
Vendor#	Vendor Name	Class	Pay Code							
14524	SYSMEX AMERICA, INC.									
14524				Gross	Discount	No-Pay	Net			
14524				527.44	0.00	0.00	527.44			
Vendor#	Vendor Name	Class	Pay Code							
T2539	T-SYSTEM, INC.		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2024773		09/30/202	09/30/202	10/30/202			6,130.42	0.00	0.00	6,130.42

Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	T2539	T-SYSTEM, INC				6,130.42	0.00	0.00	6,130.42		
Vendor#	Vendor Name		Class	Pay Code							
15856	TEXAS A&M HEALTH SCIENCE CENTE										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	H186073		10/06/202	09/19/202	10/06/202			2,625.00	0.00	0.00	2,625.00
Physician Peer review Services Oct-Dec-2025											
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	15856	TEXAS A&M HEALTH SCIENCE CENTE				2,625.00	0.00	0.00	2,625.00		
Vendor#	Vendor Name		Class	Pay Code							
T1450	TEXAS ASSOCIATION OF COUNTIES		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	100625		09/30/202	10/06/202	10/06/202			3,072.40	0.00	0.00	3,072.40
3rd QTR Unemployment Contr. 2025											
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	T1450	TEXAS ASSOCIATION OF COUNTIES				3,072.40	0.00	0.00	3,072.40		
Vendor#	Vendor Name		Class	Pay Code							
10758	TEXAS SELECT STAFFING, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	0025949		09/30/202	09/25/202	09/25/202			3,675.00	0.00	0.00	3,675.00
	0025974		09/30/202	10/02/202	10/03/202			6,147.50	0.00	0.00	6,147.50
Shawn Terrence 9/30/25 Jennifer Stephens 9/27/25											
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	10758	TEXAS SELECT STAFFING, LLC				9,822.50	0.00	0.00	9,822.50		
Vendor#	Vendor Name		Class	Pay Code							
B1941	THE BACK OFFICE		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	0242127		09/01/202	10/01/202	10/01/202			1,673.75	0.00	0.00	1,673.75
Paper Shredding 9/1 - 9/30/25											
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	B1941	THE BACK OFFICE				1,673.75	0.00	0.00	1,673.75		
Vendor#	Vendor Name		Class	Pay Code							
15396	THIRD COAST DISTRIBUTING LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	093025		09/30/202	09/30/202	09/30/202			92.44	0.00	0.00	92.44
SUPPLIES											
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	15396	THIRD COAST DISTRIBUTING LLC				92.44	0.00	0.00	92.44		
Vendor#	Vendor Name		Class	Pay Code							
13144	TRI WHOLESALE CO.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	092525		09/30/202	09/25/202	09/25/202			81.50	0.00	0.00	81.50
SUPPLIES											
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	13144	TRI WHOLESALE CO.				81.50	0.00	0.00	81.50		
Vendor#	Vendor Name		Class	Pay Code							
13616	TRIOSE, INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	TRI211934		10/06/202	02/11/202	02/26/202			178.29	0.00	0.00	178.29
FREIGHT											
	TRI253248		10/06/202	09/16/202	10/01/202			130.82	0.00	0.00	130.82
	TRI254270		10/06/202	09/27/202	10/12/202			69.30	0.00	0.00	69.30
	TRI265063		10/07/202	10/06/202	10/21/202			137.31	0.00	0.00	137.31

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13616	TRIOSE, INC	515.72	0.00	0.00	515.72

Vendor#	Vendor Name	Class	Pay Code				
C2510	TRUBRIDGE	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
T2508081378		09/16/202	08/08/202	10/20/202			
	<i>Business Services</i>						
T2509161378		09/18/202	09/16/202	10/20/202			

Gross	Discount	No-Pay	Net
120,318.41	0.00	0.00	120,318.41 ✓
102,950.39	0.00	0.00	102,950.39 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
C2510	TRUBRIDGE	223,268.80	0.00	0.00	223,268.80

Vendor#	Vendor Name	Class	Pay Code				
13004	TUSCANY VILLAGE						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
092425A		09/30/202	09/24/202	10/31/202			
	<i>Remove - Nursing homes</i>						
092425		09/30/202	09/24/202	10/31/202			
092525		09/30/202	09/25/202	10/31/202			
092625		09/30/202	09/26/202	10/31/202			
092625C		09/30/202	09/26/202	10/31/202			
092625B		09/30/202	09/26/202	10/31/202			
092925		09/30/202	09/29/202	10/31/202			
093025		09/30/202	09/30/202	10/31/202			
081125		10/08/202	06/11/202	10/31/202			
100125		10/08/202	10/01/202	10/31/202			
100225		10/08/202	10/02/202	10/31/202			
100325A		10/08/202	10/03/202	10/31/202			
100325		10/08/202	10/03/202	10/31/202			
100825		10/08/202	10/06/202	10/31/202			
100725		10/08/202	10/07/202	10/31/202			
100725A		10/08/202	10/07/202	10/31/202			
061125A		10/09/202	06/11/202	10/31/202			

Gross	Discount	No-Pay	Net
~~6,240.00~~	0.00	0.00	~~6,240.00~~
~~3,640.00~~	0.00	0.00	~~3,640.00~~
~~12,497.45~~	0.00	0.00	~~12,497.45~~
~~6,240.00~~	0.00	0.00	~~6,240.00~~
~~550.16~~	0.00	0.00	~~550.16~~
~~975.00~~	0.00	0.00	~~975.00~~
~~100.00~~	0.00	0.00	~~100.00~~
~~628.50~~	0.00	0.00	~~628.50~~
~~50,322.84~~	0.00	0.00	~~50,322.84~~
~~4,818.50~~	0.00	0.00	~~4,818.50~~
~~628.50~~	0.00	0.00	~~628.50~~
~~10,195.52~~	0.00	0.00	~~10,195.52~~
~~30,714.36~~	0.00	0.00	~~30,714.36~~
~~31,691.44~~	0.00	0.00	~~31,691.44~~
~~6,924.13~~	0.00	0.00	~~6,924.13~~
~~1,181.29~~	0.00	0.00	~~1,181.29~~
~~20,818.07~~	0.00	0.00	~~20,818.07~~

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE	188,165.76	0.00	0.00	188,165.76

Vendor#	Vendor Name	Class	Pay Code				
U1064	UNIFIRST HOLDINGS INC						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
2921069696		09/23/202	09/22/202	10/17/202			
	<i>Uniforms</i>						

Gross	Discount	No-Pay	Net
268.33	0.00	0.00	268.33 ✓

✓	2921069688	09/30/202 09/22/202 10/17/202	3,899.14	0.00	0.00	3,899.14	✓
✓	2921070004	<i>Laundry</i> 09/30/202 09/25/202 10/20/202	3,306.56	0.00	0.00	3,306.56	✓
✓	2921070178	09/30/202 09/29/202 10/24/202	7,626.84	0.00	0.00	7,626.84	✓
✓	2921069004	<i>Laundry / Supplies</i> 10/06/202 09/11/202 10/06/202	157.09	0.00	0.00	157.09	✓
✓	2921070010	<i>Supplies</i> 10/06/202 09/25/202 10/20/202	75.17	0.00	0.00	75.17	✓
✓	2921070026	<i>Uniforms</i> 10/06/202 09/25/202 10/20/202	201.60	0.00	0.00	201.60	✓
✓	2921070036	<i>Laundry</i> 10/06/202 09/25/202 10/20/202	159.80	0.00	0.00	159.80	✓
✓	2921070185	<i>Supplies</i> 10/06/202 09/29/202 10/24/202	268.33	0.00	0.00	268.33	✓
✓	2921070536	<i>Uniforms</i> 10/06/202 10/02/202 10/27/202	289.05	0.00	0.00	289.05	✓
✓	2921070520	<i>Laundry</i> 10/06/202 10/02/202 10/27/202	97.19	0.00	0.00	97.19	✓
✓	2921069532	<i>Uniforms</i> 10/07/202 09/18/202 10/13/202	272.46	0.00	0.00	272.46	✓
✓	2921070034	<i>Laundry</i> 10/07/202 09/25/202 10/20/202	268.38	0.00	0.00	268.38	✓
✓	2921070546	10/07/202 10/02/202 10/27/202	396.76	0.00	0.00	396.76	✓
✓	2921070692	10/07/202 10/08/202 10/31/202	3,704.70	0.00	0.00	3,704.70	✓
✓	2921070018	10/08/202 09/25/202 10/20/202	289.83	0.00	0.00	289.83	✓
			<i>Uniforms</i>				

Vendor Totals: Number Name Gross Discount No-Pay Net
 U1064 UNIFIRST HOLDINGS INC 21,281.23 0.00 0.00 21,281.23

Vendor# Vendor Name Class Pay Code
 11057 ✓ UNITED STATES TREASURY

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 / 063025 10/07/202 09/29/202 10/07/202 2,309.57 0.00 0.00 2,309.57 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 11057 UNITED STATES TREASURY 2,309.57 0.00 0.00 2,309.57

Vendor# Vendor Name Class Pay Code
 18100 ✓ UNITEDHEALTHCARE

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 100725 10/07/202 10/07/202 10/07/202 2,809.01 0.00 0.00 2,809.01 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 18100 UNITEDHEALTHCARE 2,809.01 0.00 0.00 2,809.01

Vendor# Vendor Name Class Pay Code
 12400 ✓ UPDOX LLC

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ INV00616112 10/07/202 10/01/202 10/07/202 653.34 0.00 0.00 653.34 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 12400 UPDOX LLC 653.34 0.00 0.00 653.34

Vendor# Vendor Name Class Pay Code
 15616 ✓ UTHEALTH CQHII

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
✓ 3219	09/23/202 09/19/202 10/19/202			1,000.00	0.00	0.00	1,000.00 ✓
✓ 3212	10/06/202 09/19/202 10/19/202			900.00	0.00	0.00	900.00 ✓
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
15616	UTHEALTH CQHII			1,900.00	0.00	0.00	1,900.00
Vendor#	Vendor Name	Class	Pay Code				
10768	VICTORIA MEDICAL FOUNDATION						
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 192025		09/01/202	09/18/202	09/18/202			Gross Discount No-Pay Net
							200.00 0.00 0.00 200.00 ✓
✓ 182025		10/06/202	09/18/202	09/18/202			200.00 0.00 0.00 200.00 ✓
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
10768	VICTORIA MEDICAL FOUNDATION			400.00	0.00	0.00	400.00
Vendor#	Vendor Name	Class	Pay Code				
V1471	VICTORIA RADIOWORKS, LLC	W					
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 25090145		09/30/202	09/30/202	09/30/202			Gross Discount No-Pay Net
							160.00 0.00 0.00 160.00 ✓
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
V1471	VICTORIA RADIOWORKS, LLC			160.00	0.00	0.00	160.00
Vendor#	Vendor Name	Class	Pay Code				
17832	VOCA LLC						
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 41306		09/30/202	09/26/202	10/26/202			Gross Discount No-Pay Net
							3,467.50 0.00 0.00 3,467.50 ✓
✓ 40563		10/07/202	08/08/202	09/07/202			3,120.75 0.00 0.00 3,120.75 ✓
✓ 40672		10/07/202	08/15/202	09/14/202			3,562.50 0.00 0.00 3,562.50 ✓
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
17832	VOCA LLC			10,150.75	0.00	0.00	10,150.75
Vendor#	Vendor Name	Class	Pay Code				
12548	WAGeworks, INC						
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 0925TR116685A		09/30/202	09/01/202	09/30/202			Gross Discount No-Pay Net
							131.25 0.00 0.00 131.25 ✓
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
12548	WAGeworks, INC			131.25	0.00	0.00	131.25
Vendor#	Vendor Name	Class	Pay Code				
17740	[REDACTED]						
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ SCOKAI0001		09/25/202	03/28/202	10/20/202			Gross Discount No-Pay Net
							33.00 0.00 0.00 33.00 ✓
Vendor Totals: Number Name				Gross	Discount	No-Pay	Net
17740	[REDACTED]			33.00	0.00	0.00	33.00
Vendor#	Vendor Name	Class	Pay Code				
11110	WERFEN USA LLC						
✓ Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
✓ 9111980059		09/24/202	09/22/202	10/17/202			Gross Discount No-Pay Net
							1,794.76 0.00 0.00 1,794.76 ✓
✓ 9111976991		09/24/202	09/24/202	10/19/202			381.31 0.00 0.00 381.31 ✓
✓ 9111986597		10/08/202	09/29/202	10/24/202			2,153.26 0.00 0.00 2,153.26 ✓

Vendor Totals: Number Name		Gross		Discount	No-Pay	Net
I1110 WERFEN USA LLC		4,329.33		0.00	0.00	4,329.33
Vendor#	Vendor Name	Class	Pay Code			
Z1005	ZIMMER US, INC.	W				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
✓ 9004051271		10/08/202	09/16/202	10/08/202		
		Gross		Discount	No-Pay	Net
		644.00		0.00	0.00	644.00 ✓
✓ 9004051270		10/08/202	09/25/202	09/25/202		
		Gross		Discount	No-Pay	Net
		644.00		0.00	0.00	644.00 ✓
Vendor Totals: Number Name		Gross		Discount	No-Pay	Net
Z1005 ZIMMER US, INC.		1,288.00		0.00	0.00	1,288.00

Grand Totals: Gross Discount No-Pay Net

APPROVED ON 1,346,476.25 0.00 0.00 1,346,476.25

OCT 09 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

1,346,476.25 +

1,913.76 -

1,772.18 +

1,772.18 +

1,772.18 +

1,772.18 +

987,231.36 0

pg 6. Taxes removed

pg 10/11 removed NH

pg 14

pg 24

MEKESSON

STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 10/03/2025

Page: 002

DC: 8115
Customer INV SupplD:
Territory:

Customer: 632536
Date: 10/03/2025

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

As of: 10/03/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 10/03/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account 632536 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

Subtotal: 124,342.91 USD

Future Due: 0.00

Past Due: 0.00

Last Payment
08/07/2017 2,451.97

If Paid By 10/07/2025,
Pay This Amount:

121,855.86 USD

If Paid After 10/07/2025,
Pay this Amount:

124,342.91 USD

Due If Paid On Time/
USD 121,855.86

Disc lost if paid late: 2,487.05

Due If Paid Late:
USD 124,342.91

121,622.02 +
134.91 +
98.93 +
121,855.86 =

APPROVED ON
OCT 13 2025
BY COUNTY ALDORE
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 10/03/2025

Page: 009

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

Company: 8000

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77978

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 256342
Date: 10/03/2025

As of: 10/03/2025 Page: 009
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/03/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account	632536 Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
10/03/2025	10/07/2025	7594134897		246382445	115Invoice	0.01	0.83		✓ 0.62 ✓		7594134897	
10/03/2025	10/07/2025	7594134898		247463253	115Invoice	0.01	0.32		✓ 0.31 ✓		7594134898	
10/03/2025	10/07/2025	7594134899		247486678	115Invoice	0.01	0.32		✓ 0.31 ✓		7594134899	
10/03/2025	10/07/2025	7594134900		248131313	115Invoice	0.02	0.95		✓ 0.93 ✓		7594134900	
10/03/2025	10/07/2025	7594134901		249361517	115Invoice	0.04	1.90		✓ 1.86 ✓		7594134901	
10/03/2025	10/07/2025	7594134902		252256655	115Invoice	5.16	258.12		✓ 252.96 ✓		7594134902	
10/03/2025	10/07/2025	7594134903		245747047	115Invoice	6.13	306.59		✓ 300.46 ✓		7594134903	
10/03/2025	10/07/2025	7594134904		246108022	115Invoice	6.13	306.59		✓ 300.46 ✓		7594134904	
10/03/2025	10/07/2025	7594180971		250224951	115Invoice	116.99	5,849.36		✓ 5,732.37 ✓		7594180971	
10/03/2025	10/07/2025	7594180972		244846687	115Invoice	417.82	20,891.24		✓ 20,473.42 ✓		7594180972	
10/03/2025	10/07/2025	7594180973		244389588	115Invoice	133.71	6,685.47		✓ 6,551.76 ✓		7594180973	
10/03/2025	10/07/2025	7594184440		247220821	115Invoice	50.14	2,507.06		✓ 2,456.92 ✓		7594184440	
10/03/2025	10/07/2025	7594184441		248887070	115Invoice	17.72	886.00		✓ 868.28 ✓		7594184441	
10/03/2025	10/07/2025	7594184442		249162550	115Invoice	133.71	6,685.56		✓ 6,551.84 ✓		7594184442	
10/03/2025	10/07/2025	7594184443		249361517	115Invoice	133.71	6,685.39		✓ 6,551.68 ✓		7594184443	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS
Subtotal: 124,104.31 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 09/29/2025 15,145.63

If Paid By 10/07/2025,
Pay This Amount:

121,622.02 USD

If Paid After 10/07/2025
Pay this Amount:

124,104.31 USD

Due If Paid On Time:

USD 121,622.02

Disc lost if paid late: 2,482.29

Due If Paid Late:

USD 124,104.31

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/03/2025

Page: 001

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

Company: 8000

DC: 8115
Customer INV SuppID:
Territory: 7001

As of: 10/03/2025 Page: 001
Mail to: Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 256342
Date: 10/03/2025

Cust: 256342 PLEASE CHECK ANY
Date: 10/03/2025 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										
09/27/2025	10/07/2025	7592952961	240131313	115Invoice	0.01	0.32	✓	0.31	✓	7592952961
09/27/2025	10/07/2025	7592952962	242679914	115Invoice	0.35	17.51	✓	17.16	✓	7592952962
09/27/2025	10/07/2025	7592952963	240543543	115Invoice	0.70	35.02	✓	34.32	✓	7592952963
09/27/2025	10/07/2025	7592952964	244389588	115Invoice	3.83	191.55	✓	187.72	✓	7592952964
09/27/2025	10/07/2025	7592952965	244846857	115Invoice	1.92	95.78	✓	93.86	✓	7592952965
09/27/2025	10/07/2025	7592952966	245382896	115Invoice	1.92	95.78	✓	93.86	✓	7592952966
09/27/2025	10/07/2025	7592952967	244137320	115Invoice	0.26	12.84	✓	12.58	✓	7592952967
09/27/2025	10/07/2025	7592952968	244598892	115Invoice	0.26	12.84	✓	12.58	✓	7592952968
09/27/2025	10/07/2025	7592957302	250516201	115Invoice	0.01	0.32	✓	0.31	✓	7592957302
09/27/2025	10/07/2025	7592957303	241820002	115Invoice	0.01	0.32	✓	0.31	✓	7592957303
09/27/2025	10/07/2025	7592957304	242346354	115Invoice	0.02	0.95	✓	0.93	✓	7592957304
09/27/2025	10/07/2025	7592957305	242231228	115Invoice	5.13	308.59	✓	300.46	✓	7592957305
09/27/2025	10/07/2025	7592957306	242945354	115Invoice	5.13	306.59	✓	300.46	✓	7592957306
09/27/2025	10/07/2025	7592957307	242743824	115Invoice	17.03	851.42	✓	834.39	✓	7592957307
09/29/2025	10/07/2025	7593187335	243605082	115Invoice	0.98	49.00	✓	48.02	✓	7593187335
09/29/2025	10/07/2025	7593187336	242297210	115Invoice	9.33	16.56	✓	16.23	✓	7593187336
09/29/2025	10/07/2025	7593187337	244508892	115Invoice	0.13	6.47	✓	6.34	✓	7593187337
09/29/2025	10/07/2025	7593187338	244646857	115Invoice	0.13	6.47	✓	6.34	✓	7593187338
09/29/2025	10/07/2025	7593187339	245135885	115Invoice	0.13	6.47	✓	6.34	✓	7593187339
09/29/2025	10/07/2025	7593187340	245819546	115Invoice	0.13	6.47	✓	6.34	✓	7593187340
09/29/2025	10/07/2025	7593187341	246007098	115Invoice	0.13	6.47	✓	6.34	✓	7593187341
09/29/2025	10/07/2025	7593187342	240293289	115Invoice	0.26	12.94	✓	12.68	✓	7593187342
09/29/2025	10/07/2025	7593202923	242345354	115Invoice	6.13	306.59	✓	300.46	✓	7593202923
09/29/2025	10/07/2025	7593202924	242584417	115Invoice	30.88	1,532.96	✓	1,502.30	✓	7593202924
09/29/2025	10/07/2025	7593202925	250925302	115Invoice	5.41	270.70	✓	265.29	✓	7593202925
09/29/2025	10/07/2025	7593202926	242345354	115Invoice	2.85	142.46	✓	139.61	✓	7593202926
09/29/2025	10/07/2025	7593202927	242345354	115Invoice	0.01	0.32	✓	0.31	✓	7593202927
09/29/2025	10/07/2025	7593202928	242520521	115Invoice	0.01	0.63	✓	0.62	✓	7593202928
09/29/2025	10/07/2025	7593202929	242584417	115Invoice	0.03	1.27	✓	1.24	✓	7593202929
09/29/2025	10/07/2025	7593202930	243146824	115Invoice	0.01	0.63	✓	0.62	✓	7593202930
09/29/2025	10/07/2025	7593202931	244195955	115Invoice	0.01	0.63	✓	0.62	✓	7593202931

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 10/03/2025

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

IC: 8115
Customer INV Suppl:
Territory: 7001

Customer: 258342
Date: 10/03/2025

As of: 10/03/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 258342 PLEASE CHECK ANY
Date: 10/03/2025 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	
09/29/2025	10/07/2025	7593202932	244452040	115Invoice	0.02	0.85	✓	0.83	✓	7593202932	
09/29/2025	10/07/2025	7593202933	244598892	115Invoice	0.02	0.85	✓	0.83	✓	7593202933	
09/29/2025	10/07/2025	7593202934	244648657	115Invoice	0.04	2.21	✓	2.17	✓	7593202934	
09/29/2025	10/07/2025	7593202935	246570120	116Invoice	5.11	255.41	✓	250.30	✓	7593202935	
09/29/2025	10/07/2025	7593202936	242231228	115Invoice	5.41	270.70	✓	265.29	✓	7593202936	
09/29/2025	10/07/2025	7593202937	243859048	115Invoice	0.01	0.32	✓	0.31	✓	7593202937	
09/29/2025	10/07/2025	7593202938	251180457	115Invoice	0.01	0.83	✓	0.82	✓	7593202938	
09/29/2025	10/07/2025	7593202939	251369670	115Invoice	0.01	0.32	✓	0.31	✓	7593202939	
09/29/2025	10/07/2025	7593202940	242829500	115Invoice	17.03	851.56	✓	834.53	✓	7593202940	
09/29/2025	10/07/2025	7593202941	244300524	115Invoice	34.06	1,703.12	✓	1,669.06	✓	7593202941	
09/30/2025	10/07/2025	7593441773	242345364	115Invoice	0.02	1.02	✓	1.00	✓	7593441773	
09/30/2025	10/07/2025	7593441774	246878425	115Invoice	0.13	6.67	✓	6.34	✓	7593441774	
09/30/2025	10/07/2025	7593441775	247220821	115Invoice	0.13	6.47	✓	6.34	✓	7593441775	
09/30/2025	10/07/2025	7593441776	247824588	115Invoice	0.85	32.35	✓	31.70	✓	7593441776	
09/30/2025	10/07/2025	7593441777	246609283	115Invoice	1.92	95.78	✓	93.86	✓	7593441777	
09/30/2025	10/07/2025	7593441778	246825653	115Invoice	3.83	191.55	✓	187.72	✓	7593441778	
09/30/2025	10/07/2025	7593454880	246808293	115Invoice	5.11	255.41	✓	250.30	✓	7593454880	
09/30/2025	10/07/2025	7593454881	247220821	115Invoice	5.11	255.41	✓	250.30	✓	7593454881	
09/30/2025	10/07/2025	7593454882	247939881	115Invoice	5.11	255.41	✓	250.30	✓	7593454882	
09/30/2025	10/07/2025	7593454883	248068007	115Invoice	5.11	255.41	✓	250.30	✓	7593454883	
09/30/2025	10/07/2025	7593454884	248134642	115Invoice	0.03	1.48	✓	1.45	✓	7593454884	
09/30/2025	10/07/2025	7593454885	244646657	115Invoice	0.01	0.32	✓	0.31	✓	7593454885	
09/30/2025	10/07/2025	7593454886	244783404	115Invoice	0.01	0.63	✓	0.62	✓	7593454886	
09/30/2025	10/07/2025	7593454887	244833510	115Invoice	0.01	0.32	✓	0.31	✓	7593454887	
09/30/2025	10/07/2025	7593454888	244389588	115Invoice	17.03	851.56	✓	834.53	✓	7593454888	
09/30/2025	10/07/2025	7593454889	251369670	115Invoice	0.01	0.32	✓	0.31	✓	7593454889	
09/30/2025	10/07/2025	7593454890	251773019	115Invoice	0.01	0.83	✓	0.82	✓	7593454890	
09/30/2025	10/07/2025	7593454891	250224851	115Invoice	59.50	2,975.04	✓	2,915.54	✓	7593454891	
10/01/2025	10/07/2025	7593667685	249381517	115Invoice	0.01	0.32	✓	0.31	✓	7593667685	
10/01/2025	10/07/2025	7593667686	251369670	115Invoice	14.42	720.80	✓	706.38	✓	7593667686	
10/01/2025	10/07/2025	7593667687	246843643	115Invoice	0.35	17.51	✓	17.16	✓	7593667687	

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/03/2025

Page: 003

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer JNV SupplD:
Territory: 7001

Customer: 256342
Date: 10/03/2025

As of: 10/03/2025 Page: 003
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/03/2025 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	
10/01/2025	10/07/2025	7593667686	246678425	115Invoice	1.05	52.53	✓	51.48	✓	7593667686	
10/01/2025	10/07/2025	7593667689	245135885	115Invoice	0.12	305.83	✓	299.71	✓	7593667689	
10/01/2025	10/07/2025	7593667690	251369670	115Invoice	18.35	917.48	✓	899.13	✓	7593667690	
10/01/2025	10/07/2025	7593667691	242287210	115Invoice	0.99	49.88	✓	48.89	✓	7593667691	
10/01/2025	10/07/2025	7593667692	243660248	115Invoice	0.33	16.56	✓	16.23	✓	7593667692	
10/01/2025	10/07/2025	7593667693	242297210	115Invoice	3.66	177.90	✓	174.34	✓	7593667693	
10/01/2025	10/07/2025	7593667694	242345354	115Invoice	3.56	177.90	✓	174.34	✓	7593667694	
10/01/2025	10/07/2025	7593667695	249826442	115Invoice	0.05	0.05	✓	0.05	✓	7593667695	
10/01/2025	10/07/2025	7593667696	242401898	115Invoice	8.80	339.95	✓	333.15	✓	7593667696	
10/01/2025	10/07/2025	7593667697	247939881	115Invoice	0.39	19.41	✓	19.02	✓	7593667697	
10/01/2025	10/07/2025	7593667698	248086007	115Invoice	0.13	5.47	✓	5.34	✓	7593667698	
10/01/2025	10/07/2025	7593667699	248887070	115Invoice	0.39	19.41	✓	19.02	✓	7593667699	
10/01/2025	10/07/2025	7593667800	249065325	115Invoice	0.39	19.41	✓	19.02	✓	7593667800	
10/01/2025	10/07/2025	7593667801	244233047	115Invoice	12.30	615.06	✓	602.76	✓	7593667801	
10/01/2025	10/07/2025	7593668003	251557657	115Invoice	0.03	1.48	✓	1.45	✓	7593668003	
10/01/2025	10/07/2025	7593668004	244949797	115Invoice	4.29	214.47	✓	210.18	✓	7593668004	
10/01/2025	10/07/2025	7593668005	245135885	115Invoice	2.14	107.23	✓	105.09	✓	7593668005	
10/01/2025	10/07/2025	7593668006	242231226	115Invoice	0.04	1.90	✓	1.86	✓	7593668006	
10/01/2025	10/07/2025	7593668007	242345354	115Invoice	5.70	284.92	✓	279.22	✓	7593668007	
10/01/2025	10/07/2025	7593668008	242584917	115Invoice	5.70	284.92	✓	279.22	✓	7593668008	
10/01/2025	10/07/2025	7593668009	243447517	115Invoice	0.02	0.95	✓	0.93	✓	7593668009	
10/01/2025	10/07/2025	7593668010	244530782	115Invoice	0.01	0.32	✓	0.31	✓	7593668010	
10/01/2025	10/07/2025	7593668011	245459941	115Invoice	0.01	0.63	✓	0.62	✓	7593668011	
10/01/2025	10/07/2025	7593668012	242297210	115Invoice	5.41	270.70	✓	265.29	✓	7593668012	
10/01/2025	10/07/2025	7593668013	242760490	115Invoice	10.83	541.41	✓	530.58	✓	7593668013	
10/01/2025	10/07/2025	7593668014	243213823	115Invoice	1.44	71.89	✓	70.45	✓	7593668014	
10/01/2025	10/07/2025	7593668015	251989648	115Invoice	0.01	0.32	✓	0.31	✓	7593668015	
10/01/2025	10/07/2025	7593668016	242345354	115Invoice	0.01	0.32	✓	0.31	✓	7593668016	
10/01/2025	10/07/2025	7593668017	242820500	115Invoice	0.01	0.32	✓	0.31	✓	7593668017	
10/01/2025	10/07/2025	7593668018	243081590	115Invoice	0.01	0.63	✓	0.62	✓	7593668018	
10/01/2025	10/07/2025	7593668019	247939881	115Invoice	0.01	0.32	✓	0.31	✓	7593668019	

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STATEMENT

As of: 10/03/2025

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VICKY KALISEK
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PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for informational only

DC: 8115
Customer INV Suppld:
Territory: 7001

Customer: 250342
Date: 10/03/2025

As of: 10/03/2025 Page: 004
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for informational only

Cust: 250342 PLEASE CHECK ANY
Date: 10/03/2025 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	
10/01/2025	10/07/2025	7593684020	249028088	115Invoice	0.01	0.32	✓	0.31	✓	7593684020	
10/01/2025	10/07/2025	7593684021	242884880	115Invoice	0.01	0.63	✓	0.62	✓	7593684021	
10/01/2025	10/07/2025	7593684022	243605082	115Invoice	0.03	1.27	✓	1.24	✓	7593684022	
10/01/2025	10/07/2025	7593684023	242231228	115Invoice	21.26	1,063.04	✓	1,041.78	✓	7593684023	
10/01/2025	10/07/2025	7593684024	242345354	115Invoice	42.52	2,128.08	✓	2,085.56	✓	7593684024	
10/01/2025	10/07/2025	7593684025	242401698	115Invoice	14.17	708.89	✓	694.52	✓	7593684025	
10/01/2025	10/07/2025	7593684026	242458675	115Invoice	28.35	1,417.39	✓	1,389.04	✓	7593684026	
10/01/2025	10/07/2025	7593684027	242584817	115Invoice	28.35	1,417.39	✓	1,389.04	✓	7593684027	
10/01/2025	10/07/2025	7593684028	243140824	115Invoice	28.35	1,417.39	✓	1,389.04	✓	7593684028	
10/01/2025	10/07/2025	7593684029	242345354	115Invoice	12.14	608.88	✓	594.74	✓	7593684029	
10/01/2025	10/07/2025	7593684030	242401698	115Invoice	12.14	608.88	✓	594.74	✓	7593684030	
10/01/2025	10/07/2025	7593684031	242520521	115Invoice	24.28	1,213.76	✓	1,189.48	✓	7593684031	
10/01/2025	10/07/2025	7593684032	242551047	115Invoice	12.14	608.88	✓	594.74	✓	7593684032	
10/01/2025	10/07/2025	7593684033	242584817	115Invoice	24.28	1,213.76	✓	1,189.48	✓	7593684033	
10/01/2025	10/07/2025	7593684034	243031285	115Invoice	12.14	608.88	✓	594.74	✓	7593684034	
10/01/2025	10/07/2025	7593684035	243091590	115Invoice	12.14	608.88	✓	594.74	✓	7593684035	
10/01/2025	10/07/2025	7593684036	251968648	115Invoice	5.41	270.70	✓	265.29	✓	7593684036	
10/01/2025	10/07/2025	7593684037	242297210	115Invoice	13.38	669.12	✓	655.74	✓	7593684037	
10/01/2025	10/07/2025	7593684038	242401698	115Invoice	13.38	669.12	✓	655.74	✓	7593684038	
10/01/2025	10/07/2025	7593684039	242884880	115Invoice	13.38	669.12	✓	655.74	✓	7593684039	
10/01/2025	10/07/2025	7593684040	243031285	115Invoice	13.38	669.12	✓	655.74	✓	7593684040	
10/01/2025	10/07/2025	7593684041	243787731	115Invoice	13.38	669.12	✓	655.74	✓	7593684041	
10/01/2025	10/07/2025	7593684042	244716835	115Invoice	1.73	86.46	✓	84.73	✓	7593684042	
10/01/2025	10/07/2025	7593684043	244793404	115Invoice	1.73	86.46	✓	84.73	✓	7593684043	
10/01/2025	10/07/2025	7593684044	244835510	115Invoice	0.03	1.58	✓	1.55	✓	7593684044	
10/01/2025	10/07/2025	7593684045	245014201	115Invoice	0.03	1.27	✓	1.24	✓	7593684045	
10/01/2025	10/07/2025	7593684046	245706170	115Invoice	0.03	1.27	✓	1.24	✓	7593684046	
10/01/2025	10/07/2025	7593684047	247415261	115Invoice	0.03	1.58	✓	1.55	✓	7593684047	
10/01/2025	10/07/2025	7593684048	247453253	115Invoice	0.01	0.63	✓	0.62	✓	7593684048	
10/01/2025	10/07/2025	7593684049	248755753	115Invoice	0.01	0.32	✓	0.31	✓	7593684049	
10/01/2025	10/07/2025	7593684050	248826553	115Invoice	0.02	0.95	✓	0.93	✓	7593684050	

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STATEMENT

As of: 10/03/2025

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VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for Information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 256342
Date: 10/03/2025

As of: 10/03/2025 Page: 005
Mail to: Comp: 8001

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/03/2025 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	
10/01/2025	10/07/2025	7593684051	248887070	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684051	
10/01/2025	10/07/2025	7593684052	249028058	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684052	
10/01/2025	10/07/2025	7593684053	249217016	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684053	
10/01/2025	10/07/2025	7593684054	249467709	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684054	
10/01/2025	10/07/2025	7593684055	249636442	115Invoice	0.01	0.63	✓	0.62 ✓	✓	7593684055	
10/01/2025	10/07/2025	7593684056	243447517	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684056	
10/01/2025	10/07/2025	7593684057	242231228	115Invoice	0.03	1.27	✓	1.24 ✓	✓	7593684057	
10/01/2025	10/07/2025	7593684058	243031285	115Invoice	0.01	0.63	✓	0.62 ✓	✓	7593684058	
10/01/2025	10/07/2025	7593684059	242964880	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684059	
10/01/2025	10/07/2025	7593684060	243001580	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684060	
10/01/2025	10/07/2025	7593684061	243146824	115Invoice	0.02	0.95	✓	0.93 ✓	✓	7593684061	
10/01/2025	10/07/2025	7593684062	243284988	115Invoice	0.02	0.95	✓	0.93 ✓	✓	7593684062	
10/01/2025	10/07/2025	7593684063	243605082	115Invoice	0.01	0.63	✓	0.62 ✓	✓	7593684063	
10/01/2025	10/07/2025	7593684064	243859048	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684064	
10/01/2025	10/07/2025	7593684065	244071972	115Invoice	0.01	0.63	✓	0.62 ✓	✓	7593684065	
10/01/2025	10/07/2025	7593684066	246859284	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684066	
10/01/2025	10/07/2025	7593684067	247028801	115Invoice	0.03	1.27	✓	1.24 ✓	✓	7593684067	
10/01/2025	10/07/2025	7593684068	247187188	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684068	
10/01/2025	10/07/2025	7593684069	242231228	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684069	
10/01/2025	10/07/2025	7593684070	244198855	115Invoice	0.01	0.63	✓	0.62 ✓	✓	7593684070	
10/01/2025	10/07/2025	7593684071	244309524	115Invoice	0.02	0.95	✓	0.93 ✓	✓	7593684071	
10/01/2025	10/07/2025	7593684072	251368670	115Invoice	0.01	0.32	✓	0.31 ✓	✓	7593684072	
10/01/2025	10/07/2025	7593684073	251725148	115Invoice	0.01	0.63	✓	0.62 ✓	✓	7593684073	
10/01/2025	10/07/2025	7593684074	244648657	115Invoice	1.33	68.28	✓	64.93 ✓	✓	7593684074	
10/01/2025	10/07/2025	7593684075	251952029	115Invoice	1.33	68.28	✓	64.93 ✓	✓	7593684075	
10/01/2025	10/07/2025	7593684076	245382888	115Invoice	6.13	308.59	✓	300.46 ✓	✓	7593684076	
10/01/2025	10/07/2025	7593684077	245661440	115Invoice	12.26	613.18	✓	600.92 ✓	✓	7593684077	
10/02/2025	10/07/2025	7593908248	243668246	115Invoice	0.66	33.12	✓	32.46 ✓	✓	7593908248	
10/02/2025	10/07/2025	7593908249	248065329	115Invoice	1.92	95.78	✓	93.86 ✓	✓	7593908249	
10/02/2025	10/07/2025	7593908250	248100482	115Invoice	0.65	32.35	✓	31.70 ✓	✓	7593908250	
10/02/2025	10/07/2025	7593908251	249361517	115Invoice	0.91	45.29	✓	44.38 ✓	✓	7593908251	

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STATEMENT

As of: 10/03/2025

Page: 006

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Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 256342
Date: 10/03/2025

As of: 10/03/2025 Page: 006
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/03/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
10/02/2025	10/07/2025	7593906252	243859048	115Invoice	1.78	88.85		✓ 87.17 ✓		7593906252	
10/02/2025	10/07/2025	7593906253	243515547	115Invoice	28.35	1,417.39		✓ 1,389.04 ✓		7593906253	
10/02/2025	10/07/2025	7593906254	243805082	115Invoice	28.35	1,417.39		✓ 1,389.04 ✓		7593906254	
10/02/2025	10/07/2025	7593906255	243859048	115Invoice	14.17	708.89		✓ 694.52 ✓		7593906255	
10/02/2025	10/07/2025	7593906256	244000373	115Invoice	28.35	1,417.39		✓ 1,389.04 ✓		7593906256	
10/02/2025	10/07/2025	7593906257	244071972	115Invoice	14.17	708.89		✓ 694.52 ✓		7593906257	
10/02/2025	10/07/2025	7593906258	244137320	115Invoice	42.52	2,128.08		✓ 2,083.56 ✓		7593906258	
10/02/2025	10/07/2025	7593906259	244646057	115Invoice	7.09	354.35		✓ 347.26 ✓		7593906259	
10/02/2025	10/07/2025	7593906260	243059048	115Invoice	13.38	669.12		✓ 655.74 ✓		7593906260	
10/02/2025	10/07/2025	7593906261	244195955	115Invoice	20.07	1,003.68		✓ 983.61 ✓		7593906261	
10/02/2025	10/07/2025	7593906262	244233047	115Invoice	13.38	669.12		✓ 655.74 ✓		7593906262	
10/02/2025	10/07/2025	7593906263	244309588	115Invoice	8.69	334.66		✓ 327.87 ✓		7593906263	
10/02/2025	10/07/2025	7593918984	249702443	115Invoice	10.05	502.42		✓ 492.37 ✓		7593918984	
10/02/2025	10/07/2025	7593918985	244646057	115Invoice	0.96	48.02		✓ 47.06 ✓		7593918985	
10/02/2025	10/07/2025	7593918986	244946797	115Invoice	0.01	0.63		✓ 0.62 ✓		7593918986	
10/02/2025	10/07/2025	7593918987	245237335	115Invoice	4.29	214.47		✓ 210.18 ✓		7593918987	
10/02/2025	10/07/2025	7593918988	248518946	115Invoice	2.14	107.23		✓ 105.09 ✓		7593918988	
10/02/2025	10/07/2025	7593918989	242564817	115Invoice	2.85	142.46		✓ 139.61 ✓		7593918989	
10/02/2025	10/07/2025	7593918990	248678425	115Invoice	2.85	142.46		✓ 139.61 ✓		7593918990	
10/02/2025	10/07/2025	7593918991	248964306	115Invoice	8.55	427.38		✓ 418.83 ✓		7593918991	
10/02/2025	10/07/2025	7593918992	247167188	115Invoice	2.85	142.46		✓ 139.61 ✓		7593918992	
10/02/2025	10/07/2025	7593918993	247167188	115Invoice	0.01	0.63		✓ 0.62 ✓		7593918993	
10/02/2025	10/07/2025	7593918994	248068007	115Invoice	0.01	0.63		✓ 0.62 ✓		7593918994	
10/02/2025	10/07/2025	7593918995	245459941	115Invoice	0.01	0.32		✓ 0.31 ✓		7593918995	
10/02/2025	10/07/2025	7593918996	245706170	115Invoice	0.01	0.63		✓ 0.62 ✓		7593918996	
10/02/2025	10/07/2025	7593918997	245747047	115Invoice	0.01	0.32		✓ 0.31 ✓		7593918997	
10/02/2025	10/07/2025	7593918998	259376172	115Invoice	0.01	0.32		✓ 0.31 ✓		7593918998	
10/02/2025	10/07/2025	7593918999	249538442	115Invoice	0.01	0.63		✓ 0.62 ✓		7593918999	
10/02/2025	10/07/2025	7593919200	249872109	115Invoice	0.02	0.95		✓ 0.93 ✓		7593919200	
10/02/2025	10/07/2025	7593919201	250001714	115Invoice	0.03	1.58		✓ 1.55 ✓		7593919201	
10/02/2025	10/07/2025	7593919202	250582099	115Invoice	0.03	1.27		✓ 1.24 ✓		7593919202	

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STATEMENT

As of: 10/03/2025

Page: 007

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

Company: 8000

DC: 8115
Customer (NV Suppl):
Territory: 7001

As of: 10/03/2025 Page: 007
Mail to: Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 256342
Date: 10/03/2025

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/03/2025 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	
10/02/2025	10/07/2025	7593919203	251435139	115Invoice	0.01	0.32		✓ 0.31 ✓		7593919203	
10/02/2025	10/07/2025	7593919204	251557857	115Invoice	0.01	0.83		✓ 0.62 ✓		7593919204	
10/02/2025	10/07/2025	7593919205	251598404	115Invoice	0.01	0.32		✓ 0.31 ✓		7593919205	
10/02/2025	10/07/2025	7593919206	249081590	115Invoice	12.14	808.88		✓ 594.74 ✓		7593919206	
10/02/2025	10/07/2025	7593919207	243350658	115Invoice	24.28	1,213.76		✓ 1,189.48 ✓		7593919207	
10/02/2025	10/07/2025	7593919208	243515847	115Invoice	12.14	808.88		✓ 594.74 ✓		7593919208	
10/02/2025	10/07/2025	7593919209	243805082	115Invoice	36.41	1,820.63		✓ 1,784.22 ✓		7593919209	
10/02/2025	10/07/2025	7593919210	243737731	115Invoice	12.14	808.88		✓ 594.74 ✓		7593919210	
10/02/2025	10/07/2025	7593919211	243932732	115Invoice	12.14	808.88		✓ 594.74 ✓		7593919211	
10/02/2025	10/07/2025	7593919212	244038477	115Invoice	12.14	808.88		✓ 594.74 ✓		7593919212	
10/02/2025	10/07/2025	7593919213	244196855	115Invoice	12.14	808.88		✓ 594.74 ✓		7593919213	
10/02/2025	10/07/2025	7593919214	243350656	115Invoice	5.41	270.70		✓ 265.29 ✓		7593919214	
10/02/2025	10/07/2025	7593919215	243447517	115Invoice	5.41	270.70		✓ 265.29 ✓		7593919215	
10/02/2025	10/07/2025	7593919216	244137320	115Invoice	5.41	270.70		✓ 265.29 ✓		7593919216	
10/02/2025	10/07/2025	7593919217	243605082	115Invoice	1.44	71.89		✓ 70.45 ✓		7593919217	
10/02/2025	10/07/2025	7593919218	244648857	115Invoice	1.44	71.89		✓ 70.45 ✓		7593919218	
10/02/2025	10/07/2025	7593919219	246328315	115Invoice	0.02	0.95		✓ 0.93 ✓		7593919219	
10/02/2025	10/07/2025	7593919220	243081590	115Invoice	0.01	0.63		✓ 0.62 ✓		7593919220	
10/02/2025	10/07/2025	7593919221	244648857	115Invoice	0.09	1.27		✓ 1.24 ✓		7593919221	
10/02/2025	10/07/2025	7593919222	244718835	115Invoice	0.01	0.32		✓ 0.31 ✓		7593919222	
10/02/2025	10/07/2025	7593919223	244873333	115Invoice	0.02	0.95		✓ 0.93 ✓		7593919223	
10/02/2025	10/07/2025	7593919224	246007096	115Invoice	0.02	0.95		✓ 0.93 ✓		7593919224	
10/02/2025	10/07/2025	7593919225	246108022	115Invoice	0.01	0.32		✓ 0.31 ✓		7593919225	
10/02/2025	10/07/2025	7593919226	246253289	115Invoice	0.03	1.58		✓ 1.55 ✓		7593919226	
10/02/2025	10/07/2025	7593919227	243737731	115Invoice	17.03	851.42		✓ 834.39 ✓		7593919227	
10/02/2025	10/07/2025	7593919228	243859048	115Invoice	17.03	851.42		✓ 834.39 ✓		7593919228	
10/02/2025	10/07/2025	7593919229	245081449	115Invoice	6.13	308.59		✓ 300.46 ✓		7593919229	
10/02/2025	10/07/2025	7593919230	245747047	115Invoice	6.13	308.59		✓ 300.46 ✓		7593919230	
10/03/2025	10/07/2025	7594123883	242829500	115Invoice	0.44	21.76		✓ 21.32 ✓		7594123883	
10/03/2025	10/07/2025	7594123884	242488675	115Invoice	4.27	213.49		✓ 209.22 ✓		7594123884	
10/03/2025	10/07/2025	7594123885	242584817	115Invoice	8.80	338.95		✓ 333.15 ✓		7594123885	

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/03/2025

Page: 008

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

Company: 8090

OC: 8115
Customer (INV Suppl):
Territory: 7001

As of: 10/03/2025 Page: 008
Mail to: Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 256342
Date: 10/03/2025

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/03/2025 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	
10/03/2025	10/07/2025	7594123866	243859048	115Invoice	1.78	88.95	✓	87.17	✓	7594123866	
10/03/2025	10/07/2025	7594123867	249361517	115Invoice	0.39	19.41	✓	19.02	✓	7594123867	
10/03/2025	10/07/2025	7594123868	249421357	115Invoice	0.26	12.94	✓	12.68	✓	7594123868	
10/03/2025	10/07/2025	7594123869	250582089	115Invoice	0.26	12.84	✓	12.58	✓	7594123869	
10/03/2025	10/07/2025	7594134870	244648657	115Invoice	5.41	270.70	✓	265.29	✓	7594134870	
10/03/2025	10/07/2025	7594134871	245068754	115Invoice	5.41	270.70	✓	265.29	✓	7594134871	
10/03/2025	10/07/2025	7594134872	247520310	115Invoice	5.70	284.92	✓	279.22	✓	7594134872	
10/03/2025	10/07/2025	7594134873	247797636	115Invoice	2.85	142.46	✓	139.61	✓	7594134873	
10/03/2025	10/07/2025	7594134874	251388670	115Invoice	24.00	1,200.24	✓	1,176.24	✓	7594134874	
10/03/2025	10/07/2025	7594134875	252258855	115Invoice	0.01	0.32	✓	0.31	✓	7594134875	
10/03/2025	10/07/2025	7594134876	244946797	115Invoice	0.03	1.27	✓	1.24	✓	7594134876	
10/03/2025	10/07/2025	7594134877	244482040	115Invoice	0.02	0.95	✓	0.93	✓	7594134877	
10/03/2025	10/07/2025	7594134878	244048857	115Invoice	49.61	2,480.43	✓	2,430.82	✓	7594134878	
10/03/2025	10/07/2025	7594134879	244873333	115Invoice	14.17	708.69	✓	694.52	✓	7594134879	
10/03/2025	10/07/2025	7594134880	244389588	115Invoice	8.69	334.56	✓	327.87	✓	7594134880	
10/03/2025	10/07/2025	7594134881	244530782	115Invoice	40.15	2,007.37	✓	1,967.22	✓	7594134881	
10/03/2025	10/07/2025	7594134882	244233047	115Invoice	24.28	1,213.76	✓	1,189.48	✓	7594134882	
10/03/2025	10/07/2025	7594134883	244300524	115Invoice	24.28	1,213.76	✓	1,189.48	✓	7594134883	
10/03/2025	10/07/2025	7594134884	244389588	115Invoice	12.14	606.88	✓	594.74	✓	7594134884	
10/03/2025	10/07/2025	7594134885	244530782	115Invoice	12.14	606.88	✓	594.74	✓	7594134885	
10/03/2025	10/07/2025	7594134886	244873333	115Invoice	12.14	606.88	✓	594.74	✓	7594134886	
10/03/2025	10/07/2025	7594134887	245306558	115Invoice	12.14	606.88	✓	594.74	✓	7594134887	
10/03/2025	10/07/2025	7594134888	245382898	115Invoice	12.14	606.88	✓	594.74	✓	7594134888	
10/03/2025	10/07/2025	7594134889	248068807	115Invoice	0.01	0.32	✓	0.31	✓	7594134889	
10/03/2025	10/07/2025	7594134890	248285396	115Invoice	0.02	0.95	✓	0.93	✓	7594134890	
10/03/2025	10/07/2025	7594134891	248408284	115Invoice	0.02	0.95	✓	0.93	✓	7594134891	
10/03/2025	10/07/2025	7594134892	248450255	115Invoice	0.01	0.63	✓	0.62	✓	7594134892	
10/03/2025	10/07/2025	7594134893	248453885	115Invoice	0.01	0.32	✓	0.31	✓	7594134893	
10/03/2025	10/07/2025	7594134894	247084452	115Invoice	0.01	0.32	✓	0.31	✓	7594134894	
10/03/2025	10/07/2025	7594134895	247939881	115Invoice	0.01	0.32	✓	0.31	✓	7594134895	
10/03/2025	10/07/2025	7594134896	248859048	115Invoice	1.33	66.41	✓	65.08	✓	7594134896	

For AR Inquiries please contact 800-867-0333

WILKESON
Engineering Hardware
Company: 8000

STATEMENT

As of: 10/03/2025

Page: 001

HEB PHCY WHSE/MEM MED PHS
MEMORIAL MEDICAL CENTER
815 N VIRGINIA ST
PORT LAVACA TX 77979
USA

CARR: MCK INITIATED ACH DEBIT
AMT DUE REMITTED VIA ACH DEBIT
Statement for information only
USA

DC: 8115

Territory: 7001

Customer Location:

Customer: 820405

Date: 10/04/2025

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

As of: 10/03/2025 Page: 001

Mail to: Comp: 8000

CARR: MCK INITIATED ACH DEBIT
AMT DUE REMITTED VIA ACH DEBIT
Statement for information only
USA

Cust: 820405 PLEASE CHECK ANY
Date: ITEMS NOT PAID ↓

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
10/02/2025	10/07/2025	7593740112	82510-055-234536	115Invoice	1.31	65.60		64.29	✓	7593740112
10/03/2025	10/07/2025	7593973420	82510-055-235040	115Invoice	1.44	72.06		70.62	✓	7593973420

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

TOTAL

uture Due:	0.00	Subtotals:	137.66	USD	Due If Paid On Time:	134.91
ast Due:	0.00	If Paid By 10/07/2025			USD	
ast Payment:	15,145.63	Pay This Amount:	134.91	USD	Disc lost if paid late:	2.75
9/29/2025		If Paid After 10/07/2025	137.66	USD	Due if paid late:	137.66
otal Discount:	2.75	Pay This Amount:			USD	

10/04/2025

10/03/2025

10/03/2025

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/03/2025

Page: 001

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

Company: 0000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplID:
Territory: 7001

Customer: 190813
Date: 10/03/2025

As of: 10/03/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 10/03/2025 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											
10/01/2025	10/07/2025	7593598912	4719701	115Invoice	1.91	95.72		93.81	✓	7593598912	
10/01/2025	10/07/2025	7593598913	4719701	115Invoice	0.10	5.22		5.12	✓	7593598913	

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: 100.94 USD

Future Due: 0.00

If Paid By 10/07/2025,
Pay This Amount:

98.93 USD

Due If Paid On Time:
USD

98.93

Past Due: 0.00

Disc lost if paid late:

2.01

Last Payment 09/15/2025 101.03

If Paid After 10/07/2025,
Pay this Amount:

100.94 USD

Due If Paid Late:
USD

100.94

APPROVED BY

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 10/10/2025

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SuppID:
Territory:

Customer: 632536
Date: 10/11/2025

As of: 10/10/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 10/11/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account	632536 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: 82,941.20 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/07/2017 2,451.97

If Paid By 10/14/2025,
Pay This Amount:

81,282.39 USD

If Paid After 10/14/2025,
Pay this Amount:

82,941.20 USD

Due If Paid On Time: 81,282.39

Disc lost if paid later: 1,658.81

Due If Paid Late: 82,941.20

Total for all

80,657.25 +
270.68 +
4.45 +
350.01 +
81,282.39 =

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/10/2025

Page: 001

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

Company: 6000

WALMART 1098/MEM MED PH8
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 256342
Date: 10/11/2025

As of: 10/10/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/11/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account	632536 Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PH8												
10/08/2025	10/14/2025	7594460217		251630814	115Invoice	8.86	443.11	✓	434.25	✓	7594460217	
10/06/2025	10/14/2025	7594460218		243284069	115Invoice	1.87	93.61	✓	91.74	✓	7594460218	
10/06/2025	10/14/2025	7594460219		244948797	115Invoice	14.17	708.69	✓	694.52	✓	7594460219	
10/06/2025	10/14/2025	7594460220		245014201	115Invoice	7.09	354.35	✓	347.26	✓	7594460220	
10/06/2025	10/14/2025	7594476620		245382895	115Invoice	5.41	270.70	✓	265.29	✓	7594476620	
10/06/2025	10/14/2025	7594476621		262497792	115Invoice	0.01	0.32	✓	0.31	✓	7594476621	
10/06/2025	10/14/2025	7594476622		244530782	115Invoice	13.38	669.12	✓	655.74	✓	7594476622	
10/06/2025	10/14/2025	7594476623		244640667	115Invoice	1.44	71.89	✓	70.45	✓	7594476623	
10/06/2025	10/14/2025	7594476624		252412998	115Invoice	0.01	0.63	✓	0.62	✓	7594476624	
10/06/2025	10/14/2025	7594476625		251239593	115Invoice	56.26	2,919.17	✓	2,864.91	✓	7594476625	
10/06/2025	10/14/2025	7594540544		248068007	115Invoice	27.21	1,360.56	✓	1,333.35	✓	7594540544	
10/06/2025	10/14/2025	7594540545		251239593	115Invoice	83.57	4,178.42	✓	4,094.85	✓	7594540545	
10/06/2025	10/14/2025	7594540546		251368070	115Invoice	233.99	11,699.47	✓	11,465.48	✓	7594540546	
10/06/2025	10/14/2025	7594540547		249636442	115Invoice	484.69	24,234.56	✓	23,749.87	✓	7594540547	
10/06/2025	10/14/2025	7594540548		245512070	115Invoice	200.57	10,028.39	✓	9,827.76	✓	7594540548	
10/06/2025	10/14/2025	7594548523		244873333	115Invoice	133.71	6,685.55	✓	6,551.84	✓	7594548523	
10/06/2025	10/14/2025	7594548524		247098916	115Invoice	8.65	432.47	✓	423.82	✓	7594548524	
10/06/2025	10/14/2025	7594548525		246613461	115Invoice	62.52	3,131.14	✓	3,068.52	✓	7594548525	
10/06/2025	10/14/2025	7594548526		250743763	115Invoice	83.57	4,178.42	✓	4,094.85	✓	7594548526	
10/07/2025	10/14/2025	7594729272		245747047	115Invoice	0.02	1.02	✓	1.00	✓	7594729272	
10/07/2025	10/14/2025	7594729273		247621586	115Invoice	1.91	95.56	✓	93.65	✓	7594729273	
10/07/2025	10/14/2025	7594729274		244846857	115Invoice	26.76	1,338.24	✓	1,311.48	✓	7594729274	
10/07/2025	10/14/2025	7594729275		245382896	115Invoice	6.07	303.44	✓	297.37	✓	7594729275	
10/08/2025	10/14/2025	7594961040		244233047	115Invoice	1.78	88.96	✓	87.17	✓	7594961040	
10/08/2025	10/14/2025	7594961041		245512070	115Invoice	0.82	31.20	✓	30.58	✓	7594961041	
10/08/2025	10/14/2025	7594961042		247486978	115Invoice	0.82	31.20	✓	30.58	✓	7594961042	
10/08/2025	10/14/2025	7594961043		244646657	115Invoice	13.38	669.12	✓	655.74	✓	7594961043	
10/08/2025	10/14/2025	7594961044		244783404	115Invoice	6.89	334.56	✓	327.67	✓	7594961044	
10/08/2025	10/14/2025	7594961045		245014201	115Invoice	7.09	354.35	✓	347.26	✓	7594961045	
10/08/2025	10/14/2025	7594961046		245058754	115Invoice	14.17	708.69	✓	694.52	✓	7594961046	
10/08/2025	10/14/2025	7594961047		245237335	115Invoice	7.09	354.35	✓	347.26	✓	7594961047	

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/10/2025

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplID:
Territory: 7001

Customer: 256342
Date: 10/11/2025

As of: 10/10/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/11/2025 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	
10/08/2025	10/14/2025	7594873439	252844156	115Invoice	1.33	66.26	✓	64.93	✓	7594873439	
10/08/2025	10/14/2025	7594873440	248068007	115Invoice	2.85	142.46	✓	139.61	✓	7594873440	
10/08/2025	10/14/2025	7594873441	248208937	115Invoice	2.85	142.46	✓	139.61	✓	7594873441	
10/08/2025	10/14/2025	7594873442	248706048	115Invoice	2.85	142.46	✓	139.61	✓	7594873442	
10/08/2025	10/14/2025	7594873443	250704705	115Invoice	2.85	142.46	✓	139.61	✓	7594873443	
10/09/2025	10/14/2025	7594873444	262120666	115Invoice	2.85	142.46	✓	139.61	✓	7594873444	
10/08/2025	10/14/2025	7594873445	252266858	115Invoice	0.01	0.32	✓	0.31	✓	7594873445	
10/08/2025	10/14/2025	7594873446	248450265	115Invoice	0.01	0.63	✓	0.62	✓	7594873446	
10/08/2025	10/14/2025	7594873447	248887070	115Invoice	0.01	0.32	✓	0.31	✓	7594873447	
10/08/2025	10/14/2025	7594873448	252497792	115Invoice	0.01	0.32	✓	0.31	✓	7594873448	
10/08/2025	10/14/2025	7594873449	247939881	115Invoice	0.01	0.63	✓	0.62	✓	7594873449	
10/08/2025	10/14/2025	7594873450	248134642	115Invoice	0.01	0.32	✓	0.31	✓	7594873450	
10/08/2025	10/14/2025	7594873451	246382898	115Invoice	6.07	303.44	✓	297.37	✓	7594873451	
10/08/2025	10/14/2025	7594873452	246108022	115Invoice	6.13	306.59	✓	300.46	✓	7594873452	
10/08/2025	10/14/2025	7594873453	246741249	115Invoice	6.13	306.59	✓	300.46	✓	7594873453	
10/09/2025	10/14/2025	7595205951	244793404	115Invoice	6.89	334.56	✓	327.67	✓	7595205951	
10/09/2025	10/14/2025	7595205952	252182781	115Invoice	2.85	142.46	✓	139.61	✓	7595205952	
10/09/2025	10/14/2025	7595205953	243284989	115Invoice	1.82	95.81	✓	93.99	✓	7595205953	
10/09/2025	10/14/2025	7595205954	253064649	115Invoice	0.01	0.63	✓	0.62	✓	7595205954	
10/10/2025	10/14/2025	7595420450	253128232	115Invoice	5.11	255.41	✓	250.30	✓	7595420450	
10/10/2025	10/14/2025	7595420451	244530782	115Invoice	3.96	177.90	✓	174.34	✓	7595420451	
10/10/2025	10/14/2025	7595420452	244793404	115Invoice	13.38	669.12	✓	655.74	✓	7595420452	
10/10/2025	10/14/2025	7595420453	253128232	115Invoice	0.02	0.95	✓	0.93	✓	7595420453	
10/10/2025	10/14/2025	7595420454	253197431	115Invoice	0.02	0.95	✓	0.93	✓	7595420454	
10/10/2025	10/14/2025	7595420455	253128232	115Invoice	0.01	0.63	✓	0.62	✓	7595420455	
10/10/2025	10/14/2025	7595420456	245382898	115Invoice	2.13	106.74	✓	104.61	✓	7595420456	
10/10/2025	10/14/2025	7595420457	246741249	115Invoice	8.13	308.58	✓	300.45	✓	7595420457	
10/10/2025	10/14/2025	7595420458	247084452	115Invoice	8.13	306.59	✓	300.46	✓	7595420458	
10/10/2025	10/14/2025	7595420459	249636442	115Invoice	7.91	395.54	✓	387.63	✓	7595420459	
10/10/2025	10/14/2025	7595420460	245237335	115Invoice	7.09	354.35	✓	347.26	✓	7595420460	
10/10/2025	10/14/2025	7595420461	245382898	115Invoice	14.17	708.89	✓	694.72	✓	7595420461	

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/10/2025

Page: 003

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 256342
Date: 10/11/2025

As of: 10/10/2025 Page: 003
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 10/11/2025 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	
10/10/2025	10/14/2025	7595420462	245382896	115Invoice	18.21	910.32	✓	892.11	✓	7595420462	
10/10/2025	10/14/2025	7595420463	244648657	115Invoice	1.44	71.89	✓	70.45	✓	7595420463	
10/10/2025	10/14/2025	7595420464	253128232	115Invoice	0.01	0.32	✓	0.31	✓	7595420464	
10/10/2025	10/14/2025	7595420465	248887070	115Invoice	0.01	0.32	✓	0.31	✓	7595420465	
10/10/2025	10/14/2025	7595420466	249636442	115Invoice	0.01	0.63	✓	0.62	✓	7595420466	

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: 82,303.31 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 10/06/2025 121,855.86

If Paid By 10/14/2025,
Pay This Amount:

80,657.25 USD

If Paid After 10/14/2025,
Pay this Amount:

82,303.31 USD

Due If Paid On Time:
USD 80,657.25
Disc lost if paid late: 1,646.06

Due If Paid Late:
USD 82,303.31

APPROVED ON

OCT 19 2025

BY COUNTY ALPHEA
CATHOLIC COUNTY TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/10/2025

Page: 001

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 820405
Date: 10/11/2025

As of: 10/10/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 PLEASE CHECK ANY
Date: 10/11/2025 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 820405 HEB PHCY WHSE/MEM MED PHS											
10/06/2025	10/14/2025	7594261241	82510-055-235433	115Invoice	4.62	231.24	✓	226.62	✓	7594251241	
10/06/2025	10/14/2025	7594251242	82510-055-235472	115Invoice	0.64	31.84	✓	31.20	✓	7594251242	
10/09/2025	10/14/2025	7595037391	82510-055-237414	115Invoice	0.26	13.12	✓	12.86	✓	7595037391	

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

TOTAL: Customer Number 820405 HEB PHCY WHSE/MEM MED PHS

Subtotals: 276.20 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 10/06/2025 121.855.86

If Paid By 10/14/2025,
Pay This Amount:

270.68 USD

If Paid After 10/14/2025,
Pay this Amount:

276.20 USD

Due If Paid On Time:

USD 270.68

Disc lost if paid late: 5.52

Due If Paid Late: 276.20
USD

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 10/10/2025

Page: 001

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

Company: 8000

CVS PHCY 7416/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplID:
Territory: 7001

Customer: 835437
Date: 10/11/2025

As of: 10/10/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835437 PLEASE CHECK ANY
Date: 10/11/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 835437	CVS PHCY 7416/MEM MC PHS									
10/08/2025	10/14/2025	7594956923	4462891	115Invoice	0.09	4.54	✓	4.45	✓	7594956923

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

TOTAL:	Customer Number 835437	CVS PHCY 7416/MEM MC PHS	Subtotals:	4.54	USD					
Future Due:	0.00		If Paid By 10/14/2025,					Due If Paid On Time:		
Past Due:	0.00		Pay This Amount:	4.45	USD			USD	4.45	
Last Payment	101.03		If Paid After 10/14/2025,					Disc lost if paid late:	0.09	
09/15/2025			Pay this Amount:	4.54	USD			Due If Paid Late:		
								USD	4.54	

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 10/10/2025

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 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 835438
Date: 10/11/2025

As of: 10/10/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 PLEASE CHECK ANY
Date: 10/11/2025 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										
10/08/2025	10/14/2025	7594947780	4464186	115Invoice	7.14	357.15	✓	350.01	✓	7594947780	

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: 357.15 USD

Future Due:	0.00	If Paid By 10/14/2025,				Due If Paid On Time:	
Past Due:	0.00	Pay This Amount:	350.01	USD		USD	350.01
Last Payment	50.30	If Paid After 10/14/2025,				Disc lost if paid late:	7.14
08/25/2025		Pay this Amount:	357.15	USD		Due If Paid Late:	357.15
						USD	

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

For AR Inquiries please contact 800-867-0333



STATEMENT

Statement Number: 70651205
Date: 10-03-2025

1 of 1

Served By:
AMERISOURCEBERGEN DRUG CORP
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101

DEA: RA0289276
866-451-9655

Customer:
WALGREENS #12494 3408
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2509

Customer Number

100135284 / 037028186

Terms

Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	1,077.44
Past Due:	0.00
Total Due:	1,077.44
Account Balance:	1,077.44

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
08-29-2025	10-10-2025	3228314955	7010641070	Invoice	487.79		0.00	487.79 ✓
09-29-2025	10-10-2025	3228314956	7010651360	Invoice	2.40		0.00	2.40 ✓
09-30-2025	10-10-2025	3228403948	7010659959	Invoice	173.65		0.00	173.65 ✓
10-01-2025	10-10-2025	3228624033	7010664530	Invoice	71.03		0.00	71.03 ✓
10-02-2025	10-10-2025	3228760040	7010671449	Invoice	268.07		0.00	268.07 ✓
10-03-2025	10-10-2025	3228916486	7010682255	Invoice	74.50		0.00	74.50 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,077.44	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CATHARINE COUNTY TEXAS

Reminders

Due Date	Amount
10-10-2025	1,077.44 ✓
Total Due:	1,077.44 ✓



STATEMENT

Statement Number: 70667657
Date: 10-03-2025

1 of 1

Served By:
AMERISOURCEBERGEN DRUG CORP
501 PATRIOT PARKWAY
ROANOKE TX 76262-6338DEA: RA0316958
866-451-9655**Customer:**
WALGREENS CENTRAL FILL #21373 3408
MEMORIAL MEDICAL CENTER
4100 DALE EARNHARDT WAY 200
NORTHLAKE TX 76262-2389**Remit To:**
AMERISOURCEBERGEN
PO Box 978740
DALLAS TX 75397-8740**Customer Number**

100566356 / 100566356

Terms

Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	216.87
Past Due:	0.00
Total Due:	216.87
Account Balance:	216.87

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
09-29-2025	10-10-2025	3228301158	7010648876	Invoice	147.10		0.00	147.10 ✓
09-29-2025	10-10-2025	3228367470	7010659315	Invoice	3.24		0.00	3.24 ✓
09-30-2025	10-10-2025	3228519479	7010664485	Invoice	13.83		0.00	13.83 ✓
10-01-2025	10-10-2025	3228662399	7010671685	Invoice	19.64		0.00	19.64 ✓
10-03-2025	10-10-2025	3228916381	7010682367	Invoice	33.06		0.00	33.06 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
216.87	0.00	0.00	0.00	0.00	0.00	0.00

Reminders

Due Date	Amount
10-10-2025	216.87
Total Due:	216.87

APPROVED ON
OCT 13 2025
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS



STATEMENT

Statement Number: 70700034
Date: 10-10-2025

1 of 1

Served By: AMERISOURCEBERGEN DRUG CORP
501 PATRIOT PARKWAY
ROANOKE TX 76262-6336DEA: RA0316958
866-451-9655Customer: WALGREENS CENTRAL FILL #21373 340B
MEMORIAL MEDICAL CENTER
4100 DALE EARNHARDT WAY 200
NORTHLAKE TX 76262-2389Remit To: AMERISOURCEBERGEN
PO Box 978740
DALLAS TX 75397-8740

Customer Number

100566356 / 100566356

Terms

Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	65.29
Past Due:	0.00
Total Due:	65.29
Account Balance:	65.29

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
10-06-2025	10-17-2025	3228034549	7010689244	Invoice	3.33			✓ 3.33
10-06-2025	10-17-2025	3228034551	7010687711	Invoice	28.66		0.00	✓ 28.66
10-06-2025	10-17-2025	3228034553	7010701871	Invoice	16.29		0.00	✓ 16.29
10-06-2025	10-17-2025	3228387055	7010721036	Invoice	3.55		0.00	✓ 3.55
10-09-2025	10-17-2025	3229519326	7010726137	Invoice	12.55		0.00	✓ 12.55
10-10-2025	10-17-2025	3228654503	7010731941	Invoice	0.91		0.00	✓ 0.91

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
65.29	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
DALLAS COUNTY TEXAS

Reminders

Due Date	Amount
10-17-2025	65.29
Total Due:	65.29

✓ CC



STATEMENT

Statement Number: 70683848
Date: 10-10-2025

1 of 1

Served By:
AMERISOURCEBERGEN DRUG CORP
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101

DEA: RA0289276
866-451-9655

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

Customer Number
100135284 / 037028186

Terms
Sat - Fri Due in 7 days

Remit To:
AMERISOURCEBERGEN
PO Box 905223
CHARLOTTE NC 28290-5223

Summary
Not Yet Due: 0.00
Current: 125.46
Past Due: 0.00
Total Due: 125.46
Account Balance: 125.46

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
10-06-2025	10-17-2025	3229052360	7010689744	Invoice	12.94		0.00	12.94
10-06-2025	10-17-2025	3229052361	7010695051	Invoice	41.24		0.00	41.24
10-07-2025	10-17-2025	3229202899	7010707746	Invoice	8.24		0.00	6.24
10-08-2025	10-17-2025	3229352967	7010714600	Invoice	26.76		0.00	26.76
10-09-2025	10-17-2025	3229476806	7010720356	Invoice	2.10		0.00	2.10
10-10-2025	10-17-2025	3229627517	7010726513	Invoice	36.18		0.00	36.18

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
125.46	0.00	0.00	0.00	0.00	0.00	0.00

Reminders

Due Date	Amount
10-17-2025	125.46
Total Due:	125.46

APPROVED FOR

OCT 13 2025

BY COUNTY CLERK
CALLED BY CLERK 10/13/25

✓ CC

STATEMENT

Statement Number: 70693958
Date: 10-10-2025

1 of 1

By: **AMERISOURCEBERGEN DRUG CORP**
12577 STATELINE ROAD
OLIVE BRANCH MS 38654

DEA: RA0504743
866-451-9655

omerc: ACCREDO MEMPHIS 340B
MEMORIAL MEDICAL CENTER
1620 CENTURY CENTER PKWY #109
MEMPHIS TN 38134-8849

Submit To: AMERISOURCEBERGEN
POST OFFICE
PO Box 29808
NEW YORK NY 10087-9808

Customer Number

100302028 / 100302028

Tormis

Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	3,914.99
Past Due:	0.00
Total Due:	3,914.99
Account Balance:	3,914.99

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
10-06-2025	10-17-2025	3229178714	B1006014855604	Invoice	3,914.99		0.00	3,914.99

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
3,914.99	0.00	0.00	0.00	0.00	0.00	0.00

Reminders

Due Date	Amount
10-17-2025	3,914.99
Total Due:	3,914.99

APPROVED ON

2013 2025

62 QUINN, SUPP. 128
CALIF. 301, 302, 1283

6544	76351	2	5	0	2025	269002091	0	10/6/2025	\$76.14	1	AARON M MCCORMIE DO	P	457	0	OV5	F	9/17/2025	9/17/2025	242200837
6545	76351	7	5	0	2025	269002180	0	10/6/2025	\$132.01	1	BHARTI VU DO PA	P	122	0	AB	F	1/26/2025	1/26/2025	451261253
6547	76351	1	8	0	2025	273001041	0	10/6/2025	\$69.50	1	PORT LAVACA CLINIC ASSOCIATES	P	377	0	OV	F	9/14/2025	9/14/2025	143606470
6548	76351	3	73	0	2025	273001084	0	10/6/2025	\$18.75	1	CLINICAL PATHOLOGY LABS, INC	P	123	0	AB	F	9/16/2025	9/16/2025	742504859
6551	76351	3	21	1	2025	269002153	0	10/6/2025	\$60.89	1	PORT LAVACA CLINIC	P	127	0	OV	F	9/11/2025	9/11/2025	742506470
6554	76351	1	57	0	2025	267004666	0	10/6/2025	\$65.69	1	PORT LAVACA CLINIC ASSOCIATES	P	127	0	OV	F	9/11/2025	9/11/2025	742605030
6555	76351	1	63	1	2025	269002120	0	10/6/2025	\$43.04	1	PORT LAVACA CLINIC ASSOCIATES	P	127	0	OV	F	9/11/2025	9/11/2025	742605030
6556	76351	1	12	0	2025	272001074	0	10/6/2025	\$79.61	1	SINGLETON ASSOCIATES PA	P	127	0	AB	F	9/11/2025	9/11/2025	742605030
6559	76351	1	23	0	2025	269000032	0	10/6/2025	\$93.00	1	EMERLY JACHTH W	P	457	0	OV5	F	9/16/2025	9/16/2025	742605030
6560	76351	1	8	0	2025	268000070	0	10/6/2025	\$124.34	1	HEALTH AND WELLNESS SOLUTIONS PA	P	457	0	OV5	F	9/16/2025	9/16/2025	742605030
6562	76351	1	79	0	2025	2684000382	0	10/6/2025	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6566	76351	2	25	0	2025	269001939	0	10/6/2025	\$339.56	1	PORTHSTAR ANESTHESIA PA	P	172	0	AB	F	9/16/2025	9/16/2025	742605030
6569	76351	3	29	0	2025	2680000501	0	10/6/2025	\$1,660.00	1	METHODIST HOSPITAL ASSOCIATES	P	400	0	OV5	F	9/16/2025	9/16/2025	742605030
6570	76351	3	43	0	2025	269000161	0	10/6/2025	\$2,254.00	1	LOME STAR EMERGENCY ASSOCIATES	P	400	0	OV5	F	9/16/2025	9/16/2025	742605030
6571	76351	3	57	2	2025	272000292	0	10/6/2025	\$4,270.87	1	METHODIST HOSPITAL	P	400	0	OV5	F	9/16/2025	9/16/2025	742605030
6578	76360	2	31	0	2025	2680003115	0	10/6/2025	\$109.81	1	REGIONAL EMPLOYEE ASSISTANCE PROGRAM	P	457	0	OV5	F	9/16/2025	9/16/2025	742605030
6578	76360	2	119	1	2025	2710010793	0	10/6/2025	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6578	76360	2	114	0	2025	268000144	0	10/6/2025	\$11.52	1	CERUSA NUCLEAR PROFESSIONAL	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6579	76360	2	114	0	2025	268000144	0	10/6/2025	\$29.30	1	PORT LAVACA CLINIC ASSOCIATES	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6580	76360	2	23	0	2025	269001124	0	10/6/2025	\$39.09	1	SINGLETON ASSOCIATES PA	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6582	76360	3	7	0	2025	268000094	0	10/6/2025	\$59.84	1	CLINICAL PATHOLOGY LABS, INC	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6590	76360	3	127	0	2025	272001079	0	10/6/2025	\$40.86	1	DIAGNOSTIC IMAGING ASSOCIATES, PA	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6591	76360	3	49	2	2025	2690000601	0	10/6/2025	\$65.88	1	FRANK'S PARKS MED	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6592	76360	3	60	0	2025	272001069	0	10/6/2025	\$72.62	1	VICTORIA WOMEN'S CLINIC	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6593	76360	3	154	0	2025	268000076	0	10/6/2025	\$131.18	1	SINGLETON ASSOCIATES PA	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6598	76360	3	7	0	2025	2690007061	0	10/6/2025	\$124.18	1	PORT LAVACA CLINIC ASSOCIATES	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6599	76360	3	139	0	2025	2690000611	0	10/6/2025	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6600	76360	3	2	0	2025	2680001137	0	10/6/2025	\$165.72	1	VICTORIA WOMEN'S CLINIC	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6601	76360	3	127	0	2025	272001069	0	10/6/2025	\$241.18	1	SINGLETON ASSOCIATES PA	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6602	76360	3	68	0	2025	272001079	0	10/6/2025	\$107.85	1	VICTORIA NEPHROLOGY ASSOCIATES	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6604	76360	3	21	3	2025	2670012174	0	10/6/2025	\$365.74	1	ESS OF PORT LAVACA LLC	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6605	76360	3	40	0	2025	2670014668	0	10/6/2025	\$1,251.94	1	VICTORIA HEART VASCULAR CENTER	P	404	0	OV5	F	9/16/2025	9/16/2025	742605030
6611	76360	3	61	0	2025	269001102	0	10/6/2025	\$2,053.97	1	GIUTINS MEDICAL CENTER	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6611	76360	3	49	2	2025	2690015116	0	10/6/2025	\$198.77	1	WILFRED HOSPITALISTS TEXAS MEDICAL	P	189	0	OV5	F	9/16/2025	9/16/2025	742605030
6615	76360	3	35	0	2025	272001079	0	10/6/2025	\$415.24	1	HOUSTON RADIOLOGY ASSOCIATED	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6616	76360	3	35	0	2025	2690000951	0	10/6/2025	\$563.88	1	HOUSTON RADIOLOGY ASSOCIATED	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6617	76360	3	35	0	2025	2690000951	0	10/6/2025	\$563.88	1	HOUSTON RADIOLOGY ASSOCIATED	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6618	76360	3	35	0	2025	2690000951	0	10/6/2025	\$563.88	1	HOUSTON RADIOLOGY ASSOCIATED	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6619	76360	3	35	0	2025	2690000951	0	10/6/2025	\$563.88	1	HOUSTON RADIOLOGY ASSOCIATED	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
6622	76370	3	16	0	2025	267000466	0	10/6/2025	\$248.82	1	TRAVIS COUNTY EMERGENCY PHYSICIANS PA	P	172	0	OV5	F	9/16/2025	9/16/2025	742605030
									\$17,578.87										

CO2
10/13/25

APPROVED FOR
OCT 13 2025
BY COUNTY AUDITOR
CALVIN L. GIBSON, JR.

MEMORIAL MEDICAL CENTER
PROSPERITY BANK

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT — Sep 26, 2025 - Oct 12, 2025

[illegible]

Amount	CPA's "Standard" Issues
1,138.47	911004
1,171.88	911005
1,238.21	911006
4,823.80	910707
66.66	910708
1,946.65	910809
57.40	910710
388.94	910711
1,979.72	910712
376,507.12	910713
1,171.88	910714
46.78	910715
431,653.32	910716
324.64	910717
70,621.46	910718
20,801.02	910719
66,615.17	910720
12.72	910721
171.66	910722
300.65	910723
340.00	911214
340.00	910725
1,000.00	910726
71,517.00	910727
174.70	910728
164.85	910729
3.93	910731
615.48	910732
28.95	910733
174.00	910734
267.51	910735
176.67	910736
25.20	910737
131.60	910738
44.72	910739
15,145.42	910740
95.16	910741
117,570.54	910742
914.84	910743
1,047.00	910744
366,795.11	910745

proc.
fee

12ase
Fee

case 32-45 +
fee 75-67 +
181-77 +
45-64 +
355-53
num net
25-20 +
25-20

October 11, 2023

PROSPERITY BANK

ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACIS

- Sales Tax
- Retirement Funding

October 13, 2025

BY COUNTY ADDRESS
CALHOUN COUNTY TEXAS

2,961.52 +	45.64 +
8,500.50 +	355.53
335.55 +	<i>from net</i>
25.20 +	25.20 +
11,022.55 =	25.20

Date/Time 09-30-2025 / 03:17 PM
Submitted By Emilyv04

Pay Date 09-30-2025

Employee Deposits	\$72,520.95
Employer Contributions	\$104,636.97
Group Term Life Premiums	\$0.00
Total	\$177,157.92

Comments

Payroll File September 2025.xlsx

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Sales and Use Tax

Taxpayer: XXXXXXXXXX MEMORIAL MEDICAL CENTER
Address: 815 N VIRGINIA ST, PORT LAVACA TX 77979-3025
Tax Type: Sales and Use Tax

Return Summary Original Return for Period Ending 09/30/2025 (2509)

Total Amount Due and Payable may not reflect all payments or discounts. Please allow pending payments 3-5 business days to process and appear on this page.

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	31,869	31,869	0	31,869	1,991.81	31,869	0.02000	637.38
SubTotal	31,869	31,869	0	31,869	1,991.81	31,869		637.38

Total Tax for Locations

\$2,629.19

Total Tax Due:

\$2,629.19

Balance Due:

\$2,629.20

Pending Payments:

- \$2,616.04

(State amount due is \$0.00)

(Local amount due is \$13.16)

Total Amount Due and Payable may not reflect all payments or discounts. Please allow pending payments 3-5 business days to process and appear on this page.

Page

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10:07

OCT 09 2025

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 10/31/2025

0
ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

Class Pay Code

11836 ✓ GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 092425A		09/30/202	09/24/202	10/31/202			17,687.10	0.00	0.00	17,687.10 ✓
✓ 092425		09/30/202	09/24/202	10/31/202			70,878.61	0.00	0.00	70,878.61 ✓
✓ 092525		09/30/202	09/25/202	10/31/202			40,804.71	0.00	0.00	40,804.71 ✓
✓ 092625		09/30/202	09/26/202	10/31/202			308.04	0.00	0.00	308.04 ✓
✓ 092625B		09/30/202	09/26/202	10/31/202			2,375.00	0.00	0.00	2,375.00 ✓
✓ 092625A		09/30/202	09/26/202	10/31/202			985.50	0.00	0.00	985.50 ✓
✓ 092925		09/30/202	09/29/202	10/31/202			6,050.00	0.00	0.00	6,050.00 ✓
✓ 093025		09/30/202	09/30/202	10/31/202			412.22	0.00	0.00	412.22 ✓
✓ 093025A		09/30/202	09/30/202	10/31/202			665.39	0.00	0.00	665.39 ✓
✓ 093025B		09/30/202	09/30/202	10/31/202			4,530.34	0.00	0.00	4,530.34 ✓
✓ 100125		10/08/202	10/01/202	10/31/202			2,791.49	0.00	0.00	2,791.49 ✓
✓ 100225		10/08/202	10/02/202	10/31/202			384.75	0.00	0.00	384.75 ✓
✓ 100625A		10/08/202	10/06/202	10/31/202			356.54	0.00	0.00	356.54 ✓
✓ 100625		10/08/202	10/06/202	10/31/202			189.40	0.00	0.00	189.40 ✓
✓ 100725		10/08/202	10/07/202	10/31/202			6,500.00	0.00	0.00	6,500.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE	154,919.09	0.00	0.00	154,919.09

Grand Totals:	Gross	Discount	No-Pay	Net
	154,919.09	0.00	0.00	154,919.09

APPROVED ON:

OCT 09 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
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10/09/2025
10:21

OCT 09 2025

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 10/31/2025

0
ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓ 092425A		09/30/202	09/24/202	10/31/202			6,240.00	0.00	0.00	6,240.00	✓
✓ 092425		09/30/202	09/24/202	10/31/202			3,640.00	0.00	0.00	3,640.00	✓
✓ 092525		09/30/202	09/25/202	10/31/202			12,497.45	0.00	0.00	12,497.45	✓
✓ 092625		09/30/202	09/26/202	10/31/202			6,240.00	0.00	0.00	6,240.00	✓
✓ 092625C		09/30/202	09/26/202	10/31/202			550.16	0.00	0.00	550.16	✓
✓ 092625B		09/30/202	09/26/202	10/31/202			975.00	0.00	0.00	975.00	✓
✓ 092925		09/30/202	09/29/202	10/31/202			100.00	0.00	0.00	100.00	✓
✓ 093025		09/30/202	09/30/202	10/31/202			628.50	0.00	0.00	628.50	✓
✓ 061125		10/08/202	06/11/202	10/31/202			50,322.84	0.00	0.00	50,322.84	✓
✓ 100125		10/08/202	10/01/202	10/31/202			4,818.50	0.00	0.00	4,818.50	✓
✓ 100225		10/08/202	10/02/202	10/31/202			628.50	0.00	0.00	628.50	✓
✓ 100325A		10/08/202	10/03/202	10/31/202			10,195.52	0.00	0.00	10,195.52	✓
✓ 100325		10/08/202	10/03/202	10/31/202			30,714.36	0.00	0.00	30,714.36	✓
✓ 100625		10/08/202	10/06/202	10/31/202			31,691.44	0.00	0.00	31,691.44	✓
✓ 100725		10/08/202	10/07/202	10/31/202			6,924.13	0.00	0.00	6,924.13	✓
✓ 100725A		10/08/202	10/07/202	10/31/202			1,181.29	0.00	0.00	1,181.29	✓
✓ 061125A		10/09/202	06/11/202	10/31/202			20,818.07	0.00	0.00	20,818.07	✓

Vendor Totals: Number Name
13004 TUSCANY VILLAGE

Gross Discount No-Pay Net
188,165.76 0.00 0.00 188,165.76

Grand Totals:

Gross Discount No-Pay Net
188,165.76 0.00 0.00 188,165.76

APPROVED ON

OCT 09 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
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OCT 09 2025

10/09/2025

10:22

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 10/31/2025

0

ap_open_invoice.template

Vendor# / Vendor Name

Class Pay Code

12792 / LAVACA BAY NURSING AND REHAB

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 092425A		09/30/202	09/24/202	10/31/202			2,507.10	0.00	0.00	2,507.10 ✓
✓ 092425	INS. PMT. CLERK. INTO MMC DUE IN ERROR	09/30/202	09/24/202	10/31/202			55.22	0.00	0.00	55.22 ✓
✓ 092625A		09/30/202	09/26/202	10/31/202			4,886.00	0.00	0.00	4,886.00 ✓
✓ 092625		09/30/202	09/26/202	10/31/202			1,676.00	0.00	0.00	1,676.00 ✓
✓ 093025		09/30/202	09/30/202	10/31/202			2,330.57	0.00	0.00	2,330.57 ✓
/ 093025A		09/30/202	09/30/202	10/31/202			373.57	0.00	0.00	373.57 ✓
✓ 100225		10/08/202	10/02/202	10/31/202			4,190.00	0.00	0.00	4,190.00 ✓

Vendor Totals: Number

Name

Gross

Discount

No-Pay

Net

12792

LAVACA BAY NURSING AND REHAB

16,018.46

0.00

0.00

16,018.46

Grand Totals:

Gross

Discount

No-Pay

Net

16,018.46

0.00

0.00

16,018.46

APPROVED ON

OCT 09 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
10/13/2025

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		60.52		0.26		60.78	0
						Bank Balance	60.78
						Variance	-
						Leave in Balance	100.00

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
JP Morgan Chase Bank

						Adjust Balance/Transfer Amt	(39.22)
Broadmoor		102.11		0.19			102.30
						Bank Balance	102.30
						Variance	0.00
						Leave in Balance	100.00

						Adjust Balance/Transfer Amt	2.30
Crescent		100.00		0.76			100.76
						Bank Balance	100.76
						Variance	-
						Leave in Balance	100.00

						Adjust Balance/Transfer Amt	0.76
Fort Bend		40,189.48	40,089.48	20.81			120.82
						Bank Balance	120.82
						Variance	-
						Leave in Balance	100.00

						Adjust Balance/Transfer Amt	(385.38)
Salera at West Houston		137,443.60	137,343.60	5,130.61			5,230.61
						Bank Balance	5,230.61
						Variance	-
						Leave in Balance	100.00

APPROVED ON

Routing Information for Crescent / Salera at West Houston / Fort Bend / Broadmoor:

Cantex Health Care Centers III LLC
JP Morgan Chase Bank

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Adjust Balance/Transfer Amt 5,130.61

TOTAL TRANSFERS 5,130.61

Approved:
Caitlin Clevenger, Controller

45,845.00

10/13/25

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.

Ashford Gardens

9/30/2025 Added to Account

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
-	0.26		0.26
-	-		-
✓	-		-
-	-		-
-	0.26	-	0.26

Broadmoor

9/30/2025 Added to Account

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
-	0.19		0.19
-	-		-
✓	-		-
-	-		-
-	-		-
-	0.19	-	0.19

Crescent

9/30/2025 Added to Account

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
-	0.76		0.76
-	-		-
✓	-		-
-	-		-
-	-		-
-	0.76	-	0.76

Fort Bend

10/1/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III

9/30/2025 Added to Account

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
40,089.48	-		-
-	20.82		20.82
-	-		-
-	-		-
✓	-		-
40,089.48	20.82	-	20.82

Solera at West Houston

10/3/2025 HUMANA CHA DISB HCCLAIMPMT 85817657 42000014

10/2/2025 Deposit

10/1/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III

9/30/2025 Added to Account

9/26/2025 NOVITAS SOLUTION HCCLAIMPMT 676310 420000143

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
-	3,382.11		3,382.11
✓	1,574.28		1,574.28
137,343.60	-		-
-	71.72		71.72
-	102.50		102.50
-	-		-
137,343.60	5,130.61	-	5,130.61
	5,152.64	-	5,152.64

TOTALS

Balances Overview

Account Name

*4357 MEMORIAL MEDICAL - OPERATING	\$1,617,499.92	\$1,825,453.84	\$1,617,499.92	\$1,940,003.42
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.78 ✓ ✓	\$60.78	\$60.78	\$60.78
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.30 ✓ ✓	\$102.30	\$102.30	\$102.30
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.76 ✓ ✓	\$100.76	\$100.76	\$100.76
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$5,230.61 ✓ ✓	\$5,230.61	\$5,230.61	\$5,230.61
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$120.82 ✓ ✓	\$120.82	\$120.82	\$120.82
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$575,871.22 ✓	\$575,871.22	\$575,871.22	\$569,476.47
*4551 CAL CO INDIGENT HEALTHCARE	\$4,827.63	\$4,827.63	\$4,827.63	\$4,827.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$127,634.87	\$127,634.87	\$127,634.87	\$127,634.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.26	\$100.26	\$100.26	\$100.26
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$760,896.82	\$760,896.82	\$760,896.82	\$748,745.93
*3407 MMC -NH TUSCANY VILLAGE	\$289,436.21	\$289,436.21	\$289,436.21	\$289,436.21
*2998 MMC -MONEY MARKET FUND	\$68,830.50	\$68,830.50	\$68,830.50	\$68,830.50
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$22,903.15	\$22,903.15	\$22,903.15	\$22,265.58
Total Balance	\$3,473,615.85	\$3,681,569.77	\$3,473,615.85	\$3,776,936.14

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
10/13/2025

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		128,948.66	127,527.34	574,449.90		575,871.22	511,727.78
						575,871.22	
						-	
						100.00	
						68,491.39	

Routing Information for Golden Creek:
Nexion Health at Golden Creek
Wells Fargo Bank, N.A.

July Interest 228.79
Aug Interest 77.27
Sept Interest 244.99

Adjust Balance/Transfer Amt 511,727.78

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: 
Caitlin Clevenger, Controller

10/13/2025

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Golden Creek

10/10/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/10/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001984
 10/9/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/9/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
 10/9/2025 Am Health TX PAYMENT 21531 84307030014113
 10/8/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/8/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001988
 10/7/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001498
 10/7/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001498
 10/7/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001498
 10/7/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
 10/6/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/6/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/6/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/6/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001467
 10/3/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/3/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001288
 10/2/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/2/2025 GOLDENCREEKHEALT MERC DEP 1220356 9100001056
 10/1/2025 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
 10/1/2025 Deposit
 10/1/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/1/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 10/1/2025 NOVITAS SOLUTION HCCLAIMPMT 576097 420000185
 9/30/2025 Added to Account
 9/30/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 9/30/2025 HNB - ECHO HCCLAIMPMT 746003411 440000257775
 9/29/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 9/29/2025 HNB - ECHO HCCLAIMPMT 746003411 440000295230
 9/26/2025 NOVITAS SOLUTION HCCLAIMPMT 676097 420000143
 9/26/2025 Centene Manageme ACH 008765433514 1110000297

Transfer-Out	Transfer-In	MMC	
		PORTION	NH PORTION
-	1,155.00		1,155.00
-	5,239.75		5,239.75
-	2,500.00		2,500.00
-	838.00		838.00
-	11,500.00		11,500.00
-	2,335.00		2,335.00
-	8,260.99		8,260.99
-	1,666.95		1,666.95
-	1,674.43		1,674.43
-	5,115.00		5,115.00
-	3,611.13		3,611.13
-	1,710.00		1,710.00
-	2,222.00		2,222.00
-	1,406.42		1,406.42
-	6,582.06		6,582.06
-	713.00		713.00
-	6,787.00		6,787.00
-	46.00		46.00
-	4,950.00		4,950.00
127,527.94	-		-
-	162,850.37		162,850.37
-	1,027.00		1,027.00
-	448.00		448.00
-	1,223.96		1,223.96
-	244.99		244.99
-	224.00		224.00
-	1,856.85		1,856.85
-	1,534.85		1,534.85
-	12,192.02		12,192.02
-	2,751.57		2,751.57
-	321,783.56	63,491.99	258,292.17
127,527.34	574,449.90	63,491.99	510,958.51

Balances Overview

Account Name

*4357 MEMORIAL MEDICAL - OPERATING	\$1,617,499.92	\$1,825,453.84	\$1,617,499.92	\$1,940,003.42
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.78	\$60.78	\$60.78	\$60.78
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.30	\$102.30	\$102.30	\$102.30
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.76	\$100.76	\$100.76	\$100.76
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$5,230.61	\$5,230.61	\$5,230.61	\$5,230.61
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$120.82	\$120.82	\$120.82	\$120.82
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$575,871.22	\$575,871.22	\$575,871.22	\$569,476.47
*4551 CAL CO INDIGENT HEALTHCARE	\$4,827.63	\$4,827.63	\$4,827.63	\$4,827.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$127,634.87	\$127,634.87	\$127,634.87	\$127,634.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.26	\$100.26	\$100.26	\$100.26
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$760,896.82	\$760,896.82	\$760,896.82	\$748,745.93
*3407 MMC -NH TUSCANY VILLAGE	\$289,436.21	\$289,436.21	\$289,436.21	\$289,436.21
*2998 MMC -MONEY MARKET FUND	\$68,830.50	\$68,830.50	\$68,830.50	\$68,830.50
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$22,903.15	\$22,903.15	\$22,903.15	\$22,265.58
Total Balance	\$3,473,615.85	\$3,681,569.77	\$3,473,615.85	\$3,776,936.14

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
10/13/2025

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
Gold Points Plaza, Prosper, TX		41,419.65	39,633.66	125,849.08			127,534.87	No Transfer
						Bank Balance	127,534.87	
						Variance		
						Leave in Balance	100.00	
						Claims owed to MMC	130,291.82	
						Claims owed to MMC	1,275.72	
						Claims owed to MMC	49.00	
						Claims owed to MMC	361.07	
						Adjust Balance/Transfer Amt	(4,042.84)	
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
Gold Points Plaza, Prosper, TX		100.14		0.12			100.26	NO TRANSFER
						Bank Balance	100.26	
						Variance		
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	0.26	
Routing Information for Gold Points Plaza:						TOTAL TRANSFERS		

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: 
Cathin Clavenger, Controller 10/13/2025

APPROVED ON
OCT 13 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Gulf Pointe Plaza-Private Pay

10/9/2025 HNB - ECHO HCCLAIMPMT 746003411 440000296957
 10/8/2025 HNB - ECHO HCCLAIMPMT 746003411 440000256364
 10/7/2025 HNB - ECHO HCCLAIMPMT 746003411 440000222545
 10/7/2025 HNB - ECHO HCCLAIMPMT 746003411 440000221760
 10/6/2025 HNB - ECHO HCCLAIMPMT 746003411 440000252727
 10/3/2025 HNB - ECHO HCCLAIMPMT 746003411 440000206466
 10/3/2025 HNB - ECHO HCCLAIMPMT 746003411 440000206793
 10/2/2025 HNB - ECHO HCCLAIMPMT 746003411 440000253390
 10/1/2025 WIRE OUT HMIG Rockport SNF, LP -Commerical
 10/1/2025 HNB - ECHO HCCLAIMPMT 746003411 440000206073
 9/30/2025 Added to Account

Transfer-Out	Transfer-In	MMC	
		PORTION	NH PORTION
-	3,816.47		3,816.47
-	467.79		467.79
-	45,453.05		45,453.05
-	185.20		185.20
-	17,733.35		17,733.35
-	95.04		95.04
✓	15,923.89		15,923.89
✓	35,468.48		
39,633.66	-		
-	6,679.35		
-	26.46		
39,633.66	125,849.08	-	83,674.79

Gulf Pointe Plaza-Medicare/Medicaid

9/30/2025 Added to Account

Transfer-Out	Transfer-In	MMC	
		PORTION	NH PORTION
✓	✓ 0.12		0.12
-	0.12	-	0.12
39,633.66	125,849.20	-	83,674.91

Balances Overview

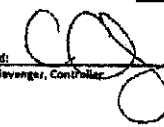
Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,617,499.92	\$1,825,453.84	\$1,617,499.92	\$1,940,003.42
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.78	\$60.78	\$60.78	\$60.78
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.30	\$102.30	\$102.30	\$102.30
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.76	\$100.76	\$100.76	\$100.76
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$5,230.61	\$5,230.61	\$5,230.61	\$5,230.61
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$120.82	\$120.82	\$120.82	\$120.82
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$575,871.22	\$575,871.22	\$575,871.22	\$569,476.47
*4551 CAL CO INDIGENT HEALTHCARE	\$4,827.63	\$4,827.63	\$4,827.63	\$4,827.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$127,634.87 ✓	\$127,634.87	\$127,634.87	\$127,634.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.26 ✓	\$100.26	\$100.26	\$100.26
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$760,896.82	\$760,896.82	\$760,896.82	\$748,745.93
*3407 MMC -NH TUSCANY VILLAGE	\$289,436.21	\$289,436.21	\$289,436.21	\$289,436.21
*2998 MMC -MONEY MARKET FUND	\$68,830.50	\$68,830.50	\$68,830.50	\$68,830.50
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$22,903.15	\$22,903.15	\$22,903.15	\$22,265.58
Total Balance	\$3,473,615.85	\$3,681,569.77	\$3,473,615.85	\$3,776,936.14

Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
10/13/2025

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 Village		373,474.41	371,314.41	289,338.21			289,456.21	223,184.75
						Bank Balance Variance	289,456.21	
						Leave in Balance	100.00	
						QPPP Q3 OWED TO MMC	66,151.46	

Adjust Balance/Transfer Amt 223,184.75

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: 
Caitlin Cleveland, Controller 10/13/2025

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Tuscany Village

10/9/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000175
 10/8/2025 HNB - ECHO HCCLAIMPMT 746003411 440000256364
 10/8/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000142
 10/7/2025 Deposit
 10/6/2025 Deposit
 10/3/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000112
 10/2/2025 Deposit
 10/1/2025 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE
 10/1/2025 Deposit
 9/30/2025 Added to Account
 9/30/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000101
 9/26/2025 MOLINA HEALTHCAR MOLINAACH 01452014 42000016
 9/26/2025 WELLPOINT CO AP E-PAYMENT EE53064624 1110000

<u>Transfer-Out</u>	<u>Transfer-In</u>	MMC	
		<u>PORTION</u>	<u>NH PORTION</u>
-	40,357.50		40,357.50
-	8,905.05		8,905.05
-	21,462.97		21,462.97
-	15,965.00		15,965.00
-	19,693.00		19,693.00
-	24,203.73		24,203.73
-	1,119.35		1,119.35
373,324.41	-		-
-	29,568.82		29,568.82
-	279.90		279.90
-	33,884.32		33,884.32
-	93,753.42	63,491.39	30,262.03
-	143.15		143.15
		/	
373,324.41	289,336.21	63,491.39	225,844.82

Balances Overview

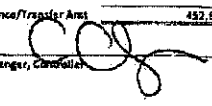
Account Name

*4357 MEMORIAL MEDICAL - OPERATING	\$1,617,499.92	\$1,825,453.84	\$1,617,499.92	\$1,940,003.42
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.78	\$60.78	\$60.78	\$60.78
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.30	\$102.30	\$102.30	\$102.30
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.76	\$100.76	\$100.76	\$100.76
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$5,230.61	\$5,230.61	\$5,230.61	\$5,230.61
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$120.82	\$120.82	\$120.82	\$120.82
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$575,871.22	\$575,871.22	\$575,871.22	\$569,476.47
*4551 CAL CO INDIGENT HEALTHCARE	\$4,827.63	\$4,827.63	\$4,827.63	\$4,827.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$127,634.87	\$127,634.87	\$127,634.87	\$127,634.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.26	\$100.26	\$100.26	\$100.26
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$760,896.82	\$760,896.82	\$760,896.82	\$748,745.93
*3407 MMC -NH TUSCANY VILLAGE	\$289,436.21 ✓	\$289,436.21	\$289,436.21	\$289,436.21
*2998 MMC -MONEY MARKET FUND	\$68,830.50	\$68,830.50	\$68,830.50	\$68,830.50
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$22,903.15	\$22,903.15	\$22,903.15	\$22,265.58
Total Balance	\$3,473,615.85	\$3,681,569.77	\$3,473,615.85	\$3,776,936.14

Memorial Medical Center
Nursing Home UPL
Weekly HSI Transfer
Prosperity Accounts
10/13/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer Out	Transfer In	Cls Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Lakeside Bay Nursing Home		227,311.60	113,349.56	670,934.49			760,896.52	452,669.22
						Bank Balance	760,896.52	
						Variance		
						Late Fee Balance	100.00	
						Medicare Repay to MMHC	68,368.21	
						CHPP 439 owed to MMHC	207,469.81	
						Lakeside Bay to Seaway	1,349.15	
						July Interest	348.98	
						August Interest	210.84	
						September Interest	279.50	

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

✓ Adjust Balance/Transfer Amt 452,669.22 452,669.22
Approved: 
Cathlin Cleveland, Controller 10/13/2025

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Lavage Bay Nursing and Rehab

10/10/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2
 10/9/2025 ck8466
 10/9/2025 HOSPICE OF SOUTH Payments NF 113122650006351
 10/8/2025 NDC SWEEP FAC 02330 56009680014801 SWEEP FR
 10/8/2025 Marketplace HCCLAIMPMT 91000015852487
 10/7/2025 Deposit
 10/7/2025 Deposit
 10/7/2025 HUMANA INS CO HCCLAIMPMT 85963626 8300005537
 10/7/2025 HIC KY HCCLAIMPMT 86166217 42000010718073 45
 10/3/2025 HOSPICE OF SOUTH Payments NF 113122650029442
 10/3/2025 CENTENE CORP HCCLAIMPMT 53101124490849
 10/2/2025 NOVITAS SOLUTION HCCLAIMPMT 676481 420000156
 10/1/2025 WIRE OUT REG Leased OpCo LLC
 10/1/2025 Deposit
 10/1/2025 HNB - ECHO HCCLAIMPMT 746003411 440000206073
 10/1/2025 CENTENE CORP HCCLAIMPMT 53101123662128
 9/30/2025 Added to Account
 9/30/2025 NDC SWEEP FAC 02330 56009680011721 SWEEP FR
 9/30/2025 Deposit
 9/30/2025 CENTENE CORP HCCLAIMPMT 53101126879278
 9/29/2025 Care Hospice Payment 41008 71000288226391
 9/29/2025 PaySpan ACCTVERIFY 53101125395420
 9/26/2025 WELLPOINT CO AP E-PAYMENT EE53064625 1110000
 9/26/2025 HOSPICE OF SOUTH Payments NF 113122650030091
 9/26/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2
 9/26/2025 Centene Managemt ACH 008765433514 1110000297
 9/26/2025 CENTENE CORP HCCLAIMPMT 53101122129644

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
-	12,150.89		12,150.89
4,540.00	-		-
-	1,365.61		1,365.61
-	24,402.94		24,402.94
-	1,462.64		1,462.64
-	79,775.17		79,775.17
-	42,097.32		42,097.32
-	694.67		694.67
-	552.40		552.40
-	1,013.96		1,013.96
-	645.95		645.95
-	4,363.88		4,363.88
128,809.56	-		-
-	61,919.77		61,919.77
-	2,285.92		2,285.92
-	11,698.24		11,698.24
-	284.99		284.99
-	1,970.00		1,970.00
-	16,580.56		16,580.56
-	14,872.72		14,872.72
-	25,288.52		25,288.52
-	0.15		0.15
-	134,836.85	65,330.96	69,505.89
-	1,128.56		1,128.56
-	7,420.50		7,420.50
-	223,961.70	172,138.65	51,823.05
-	160.58		160.58
-	-		-
133,349.56	670,934.49	237,469.61	433,464.88

Balances Overview

Account Name

*4357 MEMORIAL MEDICAL - OPERATING	\$1,617,499.92	\$1,825,453.84	\$1,617,499.92	\$1,940,003.42
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$80.78	\$60.78	\$60.78	\$60.78
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.30	\$102.30	\$102.30	\$102.30
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$100.76	\$100.76	\$100.76	\$100.76
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$5,230.61	\$5,230.61	\$5,230.61	\$5,230.61
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$120.82	\$120.82	\$120.82	\$120.82
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$575,871.22	\$575,871.22	\$575,871.22	\$569,476.47
*4551 CAL CO INDIGENT HEALTHCARE	\$4,827.63	\$4,827.63	\$4,827.63	\$4,827.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$127,634.87	\$127,634.87	\$127,634.87	\$127,634.87
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.26	\$100.26	\$100.26	\$100.26
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$760,896.82 ✓	\$760,896.82	\$760,896.82	\$748,745.93
*3407 MMC -NH TUSCANY VILLAGE	\$289,436.21	\$289,436.21	\$289,436.21	\$289,436.21
*2998 MMC -MONEY MARKET FUND	\$68,830.50	\$68,830.50	\$68,830.50	\$68,830.50
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$22,903.15	\$22,903.15	\$22,903.15	\$22,265.58
Total Balance	\$3,473,615.85	\$3,681,569.77	\$3,473,615.85	\$3,776,936.14

Tuscania

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

66,151.46

✓

G/L NUMBER:

10255040

EXPLANATION:

QIPP Q3 owed to MMC

REQUESTED BY:

Caitlin Clevenger

✓
AUTHORIZED BY:

MSC

Golden Creek

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

A

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

63,491.39 ✓

G/L NUMBER:

10255040

EXPLANATION:

QIPP Q3 owed to MMC

REQUESTED BY:

Caitlin Clevenger

✓
AUTHORIZED BY:

MSL

Lavaca Basin

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$ 237,469.61 ✓

G/L NUMBER:

10255040

EXPLANATION:

QIPP Q3 owed to MMC

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

✓
M&C

Lanaca Bay

MEMORIAL MEDICAL CENTER CHECK REQUEST

P MMC OPERATING
A _____
Y _____
E _____
E _____

Date Requested: 10/13/2025

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

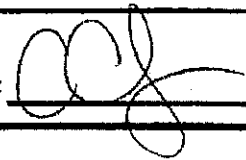
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT: \$ 234.76

G/L NUMBER: _____

EXPLANATION: CLAIMS OWED TO MMC

REQUESTED BY: KATRINA POKLUDA

AUTHORIZED BY: 

W. M. B. B.

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC OPERATING

Date Requested:

10/13/2025

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E

APPROVED ON:

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

20,473.62

G/L NUMBER:

EXPLANATION:

CLAIMS OWED TO MMC

REQUESTED BY:

KATRINA POKLUDA

AUTHORIZED BY:

[Signature]

Lanaca Bay

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E

MMC OPERATING

Date Requested: 10/13/2025

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

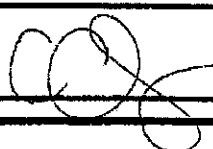
- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT: \$ 16,253.59

G/L NUMBER: _____

EXPLANATION: CLAIMS OWED TO MMC

REQUESTED BY: KATRINA POKLUDA

AUTHORIZED BY: 

Lanala Bay

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E
MMC OPERATING

Date Requested: 10/13/2025

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

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

AMOUNT: \$ 1,219.70

G/L NUMBER:

EXPLANATION: CLAIMS OWED TO MMC

REQUESTED BY: KATRINA POKLUDA

AUTHORIZED BY:

[Signature]

MEMORIAL MEDICAL CENTER
CHECK REQUEST

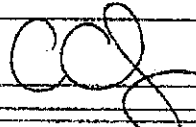
P Memorial Medical Center Date Requested: 10/06/2025
A 815 N. Virginia St. APPROVED ON
Y Port Lavaca, TX 77979 OCT 13 2025
E BY COUNTY AUDITOR
E CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$8,253.65 G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y APPROVED BY

E Port Lavaca, TX 77979

001 18 001

E BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

AMOUNT \$6,679.35

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: CCJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

APPROVED ON

OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$14,303.64

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Date Requested: 10/06/2025
A 815 N. Virginia St.
Y Port Lavaca, TX 77979 APPROVED ON OCT 13 2025
E BY COUNTY AUDITOR
E CARROLL COUNTY, TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$26,325.36 G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado AUTHORIZED BY: COQ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

63.12

G/L NUMBER:

20654000

EXPLANATION:

Claims owed to MMC

REQUESTED BY:

Melissa Delgado

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/09/2025

A 815 N. Virginia St.

Y APPROVED ON

E Port Lavaca, TX 77979 OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

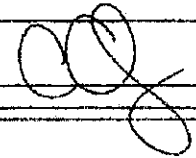
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$943.44

G/L NUMBER: 20654000

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P MMC Operating

Date Requested: 10/13/2025

A _____

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

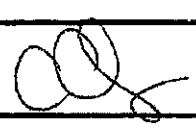
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT: \$ 71.00

G/L NUMBER: 20654000

EXPLANATION: Claims owed to MMC

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

APPROVED ON

10/13/2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

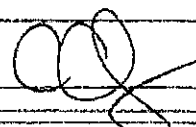
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept.

AMOUNT \$49.00

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

Memorial Medical Center

Date Requested: 10/06/2025

A

815 N. Virginia St.

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Port Lavaca, TX 77979

APPROVED ON

E

OCT 13 2025

FOR ACCT. USE ONLY

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

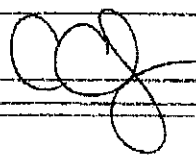
AMOUNT \$61.86

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Date Requested: 10/06/2025

A 815 N. Virginia St.

V Port Lavaca, TX 77979 APPROVED ON

E OCT 13 2025

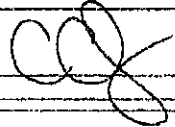
E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$128.56 G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON

OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

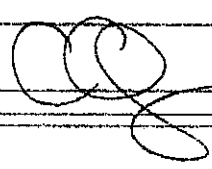
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$144.38

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON
OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

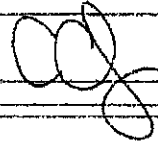
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$139.13

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

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E

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$288.77

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y APPROVED ON

E Port Lavaca, TX 77979 OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

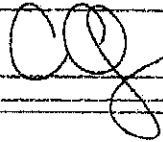
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$717.10

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON
OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

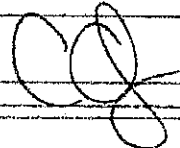
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$144.38

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON

E OCT 13 2025

FOR ACCT. USE ONLY

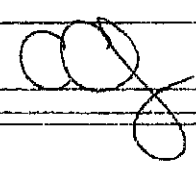
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$115.50

BY COUNTY AUDITOR
CALHOUN COUNTY G/E NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

V APPROVED ON

E Port Lavaca, TX 77979 DEC 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

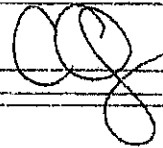
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$61.86

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON

E OCT 13 2025

FOR ACCT. USE ONLY

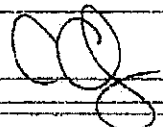
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$577.52

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS
G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON

E OCT 13 2025

FOR ACCT. USE ONLY

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

AMOUNT \$68.03

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS
G/ENUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E
E

Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

APPROVED ON

OCT 13 2025

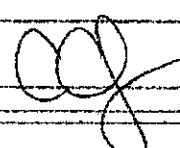
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

AMOUNT \$288.77

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON:

OCT 13 2025

E BY COUNTY AUDITOR

CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

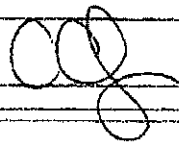
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$21.46

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

V Port Lavaca, TX 77979

E Port Lavaca, TX 77979

E Port Lavaca, TX 77979

APPROVED ON
OCT 18 2025
BY COUNTY AUDITOR
HARRIS COUNTY TEXAS

FOR ACCT. USE ONLY

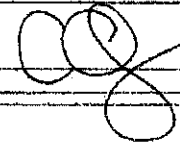
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$24.00

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E
E

Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

APPROVED ON:

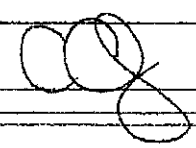
OCT 19 2025

AMOUNT \$16.00

BY COUNTY AUDITOR
CALHOUN COUNTY
G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E

E

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

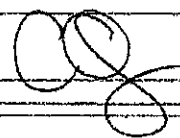
☐ Return Check to Dept

AMOUNT \$24.00

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON
OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$48.00

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

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FOR ACCT. USE ONLY

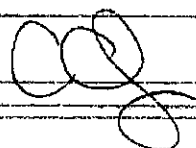
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$48.00

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E
E

Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

AMOUNT \$16.00

BE COUNTY OF
GALVESTON COUNTY TEXAS
G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E APPROVED FOR
E OCT 18 2025

Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

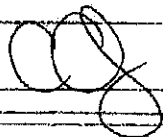
AMOUNT \$91.40

BY COUNTY AUDITOR
CALHOUN COUNTY

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E Port Lavaca, TX 77979

E Port Lavaca, TX 77979

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$24.00

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: CO

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON
OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT \$61.86

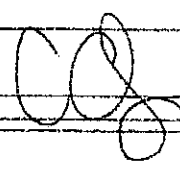
G/L NUMBER: _____

FOR ACCT. USE ONLY

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

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E APPROVED ON
E OCT 13 2025

Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

AMOUNT \$43.53

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

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FOR ACCT. USE ONLY

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

APPROVED ON

OCT 19 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

AMOUNT \$49.00

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

V Port Lavaca, TX 77979

E APPROVED FOR

E 10/3/2025

FOR ACCT. USE ONLY

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

AMOUNT \$361.07

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS
G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: CS

MEMORIAL MEDICAL CENTER
CHECK REQUEST

F Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E APPROVED: OK
E OCT 19 2025

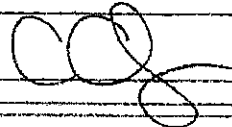
Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

AMOUNT \$600.00 BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E Port Lavaca, TX 77979

E Port Lavaca, TX 77979

APPROVED ON

OCT 13 2025

BY COUNTY CLERK FOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$590.40

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: CO

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON
OCT 13 2025

E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

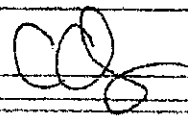
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$127.56

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

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FOR ACCT. USE ONLY

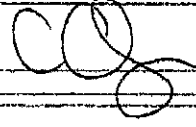
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$1,695.95

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E

E

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
DAVID H. FOSTER OCT 13 2025

FOR ACCT. USE ONLY

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

AMOUNT \$186.20

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: COG

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E BY COURTNEY ALDREDGE
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$1,328.00

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

Memorial Medical Center

Date Requested: 10/06/2025

A

815 N. Virginia St.

V

Port Lavaca, TX 77979

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FOR ACCT. USE ONLY

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

APPROVED BY:

OCT 13 2025

BY COUNTY JUDGE
CALHOFF COL. T. WATTS

AMOUNT \$1,180.80

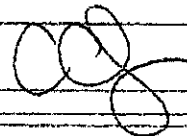
G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY:

Melissa Delgado

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED BY

E OCT 13 2025

FOR ACCT. USE ONLY

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

AMOUNT \$697.60

BY COUNTY AUDITOR
GALHOUT COUNTY, TX G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: CO

MEMORIAL MEDICAL CENTER
CHECK REQUEST

F Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

APPROVED ON

001 13 2025

E

FOR ACCT. USE ONLY

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

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT \$425.72

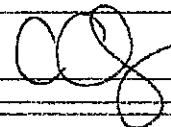
G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY:

Melissa Delgado

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

V Port Lavaca, TX 77979

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FOR ACCT. USE ONLY

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

APPROVED ON

OCT 13 2025

AMOUNT \$2,617.56

BY COUNTY: G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY:



MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

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FOR ACCT. USE ONLY

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

APPROVED ON

OCT 13 2025

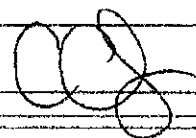
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT \$5,503.39

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E
E

Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

AMOUNT \$65.63

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center Date Requested: 10/06/2025
A 815 N. Virginia St.
Y Port Lavaca, TX 77979 APPROVED: QA
E BY COUNTY AUDITOR OCT 13 2025
E GALHOUT COUNTY TEXAS

FOR ACCT. USE ONLY

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

AMOUNT \$1,070.10 G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado AUTHORIZED BY: CC

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E MEMORIAL MEDICAL CENTER

E BY COUNTY AUDITOR
DAVID R. GUNTER, JR.

FOR ACCT. USE ONLY

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

AMOUNT \$1,934.48

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: CO

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

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FOR ACCT. USE ONLY

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

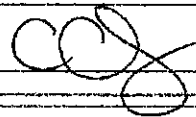
BY COUNCIL AUDITOR
CALHOUN COUNTY TEXAS

AMOUNT \$1,630.55

G/L NUMBER:

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
E
E

Date Requested: 10/06/2025

FOR ACCT. USE ONLY

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

APPROVED ON:

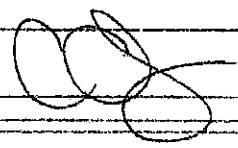
OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS
G/L NUMBER:

AMOUNT \$1,433.54

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED ON
OCT 13 2025

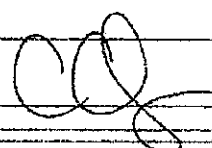
E BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

AMOUNT \$5,114.35

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

FOR ACCT. USE ONLY

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

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center

Date Requested: 10/06/2025

A 815 N. Virginia St.

Y Port Lavaca, TX 77979

E APPROVED FOR

E OCT 13 2025

FOR ACCT. USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

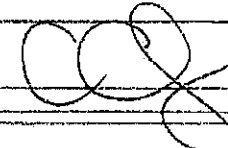
☐ Return Check to Dept

AMOUNT \$35,468.48

BY COUNTY AUDITOR
CALCULATED
G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P Memorial Medical Center
A 815 N. Virginia St.
Y Port Lavaca, TX 77979
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Date Requested: 10/06/2025

FOR ACCT. USE ONLY

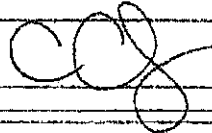
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$8,338.86

G/L NUMBER: _____

EXPLANATION: Payment was addressed to Gulf Pointe

REQUESTED BY: Melissa Delgado

AUTHORIZED BY: 

MMC Claims deposited to GPP account

✓	63.12	✓
✓	943.44	✓
✓	71.00	✓
✓	49.00	✓
✓	61.86	✓
✓	128.56	✓
✓	144.38	✓
✓	139.13	✓
✓	288.77	✓
✓	717.10	✓
✓	144.38	✓
✓	115.50	✓
✓	61.86	✓
✓	577.52	✓
✓	68.03	✓
✓	288.77	✓
✓	21.46	✓
✓	24.00	✓
✓	16.00	✓
✓	24.00	✓
✓	48.00	✓
✓	48.00	✓
✓	16.00	✓
✓	91.40	✓
✓	24.00	✓
✓	61.86	✓
✓	43.53	✓
✓	49.00	✓
✓	361.07	✓
✓	600.00	✓
✓	590.40	✓
✓	127.56	✓
✓	1,695.96	✓
✓	186.20	✓
✓	1,328.00	✓
✓	1,180.80	✓
✓	697.60	✓
✓	425.72	✓
✓	2,617.56	✓
✓	5,503.39	✓
✓	65.63	✓
✓	1,070.10	✓
✓	1,934.48	✓
✓	1,630.55	✓
✓	1,433.54	✓
✓	5,144.35	✓
✓	35,468.48	✓
✓	8,338.86	✓
✓	8,253.65	✓
✓	6,679.35	✓
✓	14,303.64	✓
✓	26,325.36	✓
	130,291.92	

APPROVED OK

OCT 13 2020

BY COUNTY AUDITOR
GALINDO COUNTY, TEXAS

Lakea Bay

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

AMOUNT:

\$740.73

G/L NUMBER:

21400015

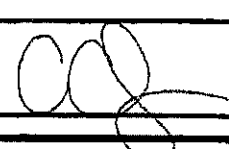
EXPLANATION:

Q3 Interest pymt

REQUESTED BY:

Emily Vick

AUTHORIZED BY:



Golden Creek

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

A

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

AMOUNT:

\$552.05

G/L NUMBER:

21400013

EXPLANATION:

Q3 Interest pymt

REQUESTED BY:

Emily Vick

AUTHORIZED BY:

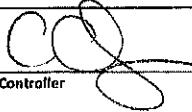
CCJ

Q3 2025 TO MMC

Interest To MMC From NH

NH Name	From CPSI Bank Acct #	CK#	Payee	GL #		Amt	Date
Golden Creek	██████ - Prosperity		MMC - Prosperity Operating ██████	21400013	July- September	552.05	10/13/2025
Lavaca Bay	██████ - Prosperity		MMC - Prosperity Operating ██████	21400015	July- September	740.73	10/13/2025
						1,292.78	

Note:

Approved: 
Caitlin Clevenger, Controller

10/13/2025

Lavaca Bay → MMC

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

10,972.94

G/L NUMBER:

20656000

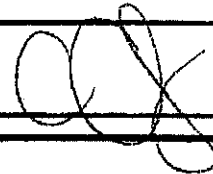
EXPLANATION:

MEDICARE RECOUPS ON MMC FOR LAVACA BAY PATIENTS

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:



Lavaca Bay → MMC

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

MMC Operating

Date Requested:

10/13/2025

A

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

36,671.66

G/L NUMBER:

20656000

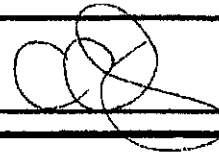
EXPLANATION:

MEDICARE RECOUPS ON MMC FOR LAVACA BAY PATIENTS

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:



Lavaca Bay → MMC

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

MMC

Date Requested: 10/10/25

APPROVED ON

OCT 13 2025

FOR ACCT. USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Voucher Check

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

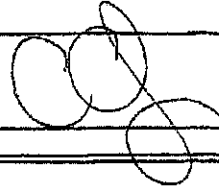
AMOUNT \$158.81

G/L NUMBER: 20656000

EXPLANATION: Medicare withhold - Lavaca Bay (7-2-25)

REQUESTED BY: K. Potluda

AUTHORIZED BY:



Lavaca Bay → mmc

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

mmc

Date Requested: 9-30-25

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$3723.87 G/L NUMBER: 20656000

EXPLANATION: Humana recap - Lavaca Bay

REQUESTED BY: K. Pokluda AUTHORIZED BY: CO

Lavaca Bay → mme

MEMORIAL MEDICAL CENTER

CHECK REQUEST

P
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E

mme

Date Requested: 9-30-25

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$172.76 G/L NUMBER: 20656000

EXPLANATION: Humana Recoup - Lavaca Bay

REQUESTED BY: K. Polcluda AUTHORIZED BY: CCJ

Lavaca Bay → MMC

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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E

MMC

Date Requested: 9-30-25

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$1598.33

G/L NUMBER: 20656000

EXPLANATION: Humana recoup - Lavaca Bay

REQUESTED BY: K. Pokluda

AUTHORIZED BY:

MEMORIAL MEDICAL CENTER
CHECK REQUEST

mme

Date Requested: 10-3-25

P
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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$671.73

G/L NUMBER: 20656000

EXPLANATION: Humana recoup- Lavaca Bay

REQUESTED BY: K. Pokloda

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

mmc

Date Requested: 10-3-25

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$865.34

G/L NUMBER: 20656000

EXPLANATION: Medicare recoup- Lavaca Bay

REQUESTED BY: K. Poklada

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

mmc

Date Requested: 10-3-25

P
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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$7710.19

G/L NUMBER: 20656000

EXPLANATION: Medicare recoup - Lavaca Bay

REQUESTED BY: K. Poklada

AUTHORIZED BY: COG

MEMORIAL MEDICAL CENTER
CHECK REQUEST

mnc

Date Requested: 10-3-25

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$236.61

G/L NUMBER: 20656000

EXPLANATION: Medicare recoup- Lavaca Bay

REQUESTED BY: K. Poklada

AUTHORIZED BY: CCJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
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E

mnc

Date Requested: 10-3-25

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$271.95 G/L NUMBER: 20656000

EXPLANATION: Medicare recoup - Lavaca Bay

REQUESTED BY: K. Pokluda

AUTHORIZED BY: CCJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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mmc

Date Requested: 10-3-25

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

APPROVED ON

OCT 13 2025

AMOUNT \$15.82

BY COUNTY AUDITOR
CALHOUN CO. G/L NUMBER: 20656000

EXPLANATION: Medicare recoup- Lavaca Bay

REQUESTED BY: K. Pokluda

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

mnc

Date Requested: 10-3-25

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$494.32

G/L NUMBER: 20656000

EXPLANATION: Humana recoup- Lavaca Bay

REQUESTED BY: K. Pokluda

AUTHORIZED BY: CO

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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mnc

Date Requested: 10-3-25

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$101.96

G/L NUMBER: 20656000

EXPLANATION: Humana recoup- Lavaca Bay

REQUESTED BY: K. Pokluda

AUTHORIZED BY: CO

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
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mnc

Date Requested: 10-3-25

APPROVED ON

OCT 18 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$1520.45

G/L NUMBER: 20656000

EXPLANATION: Humana recoup- Lavaca Bay

REQUESTED BY: K. Pokloda

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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mnc

APPROVED ON

Date Requested: 10-3-25

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$2422.44

G/L NUMBER: 20656000

EXPLANATION: Humana recoup- Lavaca Bay

REQUESTED BY: K. Pokluda

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

MMC

Date Requested: 10-3-25

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APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$71.60

G/L NUMBER: 20656000

EXPLANATION: Humana recoup- Lavaca Bay

REQUESTED BY: K. Pokloda

AUTHORIZED BY: COJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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MHC

Date Requested: 10-3-25

APPROVED OR

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$195.45

G/L NUMBER: 20656000

EXPLANATION: Humana recoup- Lavaca Bay

REQUESTED BY: K. Pokluda

AUTHORIZED BY: CCJ

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
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Y
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MMC

Date Requested: 10-10-25

APPROVED ON:

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

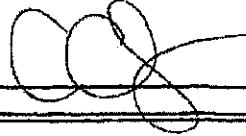
- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$191.43

G/L NUMBER: 20656000

EXPLANATION: Medicare withhold - Lavaca Bay (7-8-25)

REQUESTED BY: K. Pokluda

AUTHORIZED BY: 

Medicare Recoups on MMC for Lavaca Bay Patients

10,972.94	✓
36,671.66	✓
158.81	✓
3,723.87	✓
172.76	✓
1,598.38	✓
671.73	✓
865.34	✓
7,710.19	✓
236.61	✓
271.95	✓
15.82	✓
494.82	✓
101.96	✓
1,820.45	✓
2,422.44	✓
71.60	✓
195.45	✓
191.43	✓
68,368.21	

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Fort Bend → mmc

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

mmc

Date Requested: 10-9-25

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT. USE ONLY

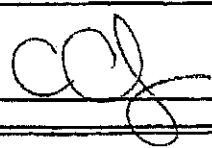
- ☐ Imprest Cash
☐ A/P Check
☐ Voucher Check

AMOUNT \$406.20

G/L NUMBER: 20652000

EXPLANATION: Check was mailed to Centex - Crescent

REQUESTED BY: K. Potluda

AUTHORIZED BY: 

Lavrica Bay → Sweeny

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P
A
Y
E
E

Sweeny

Date Requested: 10/13/2025

APPROVED ON

OCT 13 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

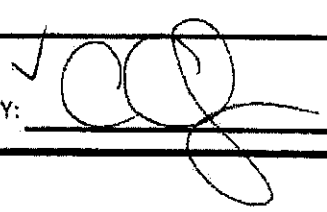
- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT: \$ 1,549.05

G/L NUMBER: _____

EXPLANATION: Claim payment owed to Sweeny HD

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: 

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