



April 3, 2024

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:

Richard Meyer
David Hall
Vern Lyssy
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 at 10am by Judge Richard Meyer

2. Invocation.

Commissioner David Hall

3. Pledges of Allegiance.

US Flag: Commissioner Gary Reese
Texas Flag: Commissioner Vern Lyssy

4. General Discussion of Public Matters and Public Participation.

Shane Veach expressed his concerns about his neighbor opening an RV Park.

5. Approve the minutes of the March 27, 2024 regular meetings. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

6. Memorial Medical Center Report. (RHM)

Roshanda Thomas gave the report for February 2024.

7. Consider and take necessary action on insurance proceeds check from TAC in the amount of \$50,494.51 (\$52,994.51 – \$2,500.00 deductible) for damages to a Sheriff Office Vehicle on 01/03/24. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

8. Consider and take necessary action to authorize the Calhoun County Judge and EMS Director to sign the DSHS Provider License Declaration Form (notarization needed). (RHM)

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

9. Consider and take necessary action to appoint William Crowley, D.O. as the Memorial Medical Center Chief of Staff for the April, 2024 – March, 2026 term, along with the MMC Board Members approved at the March 27, 2024 Commissioners Court Meeting. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

10. Consider and take necessary action on any necessary budget adjustments. (RHM)

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

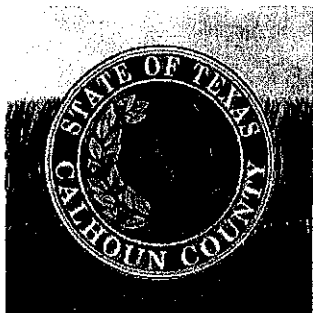
11. Approval of bills and payroll. (RHM)

MMC Bills	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

County Bills	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Adjourned 10:16

AGENDA



Richard H. Meyer
County Judge

David Hall, Commissioner, Precinct 1
Vern Lyssy, 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, April 3, 2024 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.

AGENDA

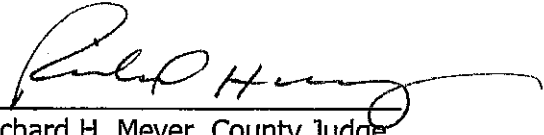
The subject matter of such meeting is as follows:

1. Call meeting to order.
2. Invocation.
3. Pledges of Allegiance.
4. General Discussion of Public Matters and Public Participation.
5. Approve the minutes of the March 27, 2024 regular meetings. (RHM)
6. Memorial Medical Center Report. (RHM)
7. Consider and take necessary action on insurance proceeds check from TAC in the amount of \$50,494.51 (\$52,994.51 – \$2,500.00 deductible) for damages to a Sheriff Office Vehicle on 01/03/24. (RHM)
8. Consider and take necessary action to authorize the Calhoun County Judge and EMS Director to sign the DSHS Provider License Declaration Form (notarization needed). (RHM)
9. Consider and take necessary action to appoint William Crowley, D.O. as the Memorial Medical Center Chief of Staff for the April, 2024 – March, 2026 term, along with the MMC Board Members approved at the March 27, 2024 Commissioners Court Meeting. (RHM)
10. Consider and take necessary action on any necessary budget adjustments. (RHM)
11. Approval of bills and payroll. (RHM)

AT 9:55 FILED O'CLOCK a M

MAR 28 2024

ANNA GOODMAN
COUNTY CLERK, CALHOUN COUNTY, TEXAS
DEPUTY: Kaddie Smith


Richard H. Meyer, County Judge
Calhoun County, Texas

A copy of this Notice has been placed on the outside bulletin board of the Calhoun County Courthouse, 211 South Ann Street, Port Lavaca, Texas, which is readily accessible to the general public at all times. This Notice shall remain posted continuously for at least 72 hours preceding the scheduled meeting time. For your convenience, you may visit the county's website at www.calhouncotx.org under "Commissioners' Court Agenda" for any official court postings.



April 3, 2024

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

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THE FOLLOWING MEMBERS WERE PRESENT:

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Joel Behrens
Gary Reese
Anna Goodman
By: Kaddie Smith

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3. Pledges of Allegiance.

US Flag: Commissioner Gary Reese
Texas Flag: Commissioner Vern Lyssy

4. General Discussion of Public Matters and Public Participation.

Shane Veach expressed his concerns about his neighbor opening an RV Park.

Calhoun County Commissioners Court

Public Participation Form

NOTE: This Public Participation Form must be presented to the County Clerk or Deputy Clerk prior to the time the agenda item (or items) you wish to address are discussed before the Court.

Instructions: Fill out all appropriate blanks. Please print or write legibly.

NAME:

Shane Veach

ADDRESS:

285 Romona Rd

TELEPHONE:

737 932 2525

PLACE OF EMPLOYMENT:

0

EMPLOYMENT TELEPHONE:

0

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

If you do represent a group or organization, please provide the name, address and telephone number of the group or organization:

0

Which agenda item (or items) do you wish to address?

Gene Cady

RV PARK

In general, are you for or against the agenda item (or items)?

TOTALLY AGAINST Gene Cady RV PARK

I hereby swear that any statement I make will be the truth, and nothing but the truth, to the best of my knowledge and ability.

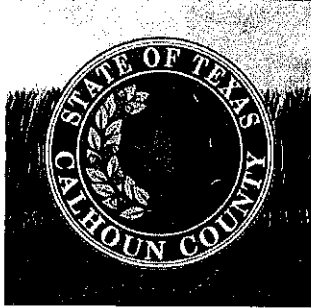
Signature:

Shane Veach

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5. Approve the minutes of the March 27, 2024 regular meetings. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

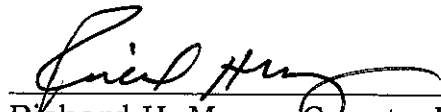


Richard H. Meyer
County Judge

David Hall, Commissioner, Precinct 1
Vern Lyssy, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

The Commissioners' Court of Calhoun County, Texas met on Wednesday,
March 27, 2024, 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.


Richard H. Meyer, County Judge
Calhoun County, Texas

4-3-2024
Date

Anna Goodman, County Clerk


Deputy Clerk

4.3.24
Date





March 27, 2024

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

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Richard Meyer
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Vern Lyssy
Joel Behrens
Gary Reese
Anna Goodman
By: Kaddie Smith

County Judge
Commissioner Pct 1
Commissioner Pct 2
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2. Invocation.

Commissioner David Hall

3. Pledges of Allegiance.

US Flag: Commissioner Gary Reese
Texas Flag: Commissioner Vern Lyssy

4. General Discussion of Public Matters and Public Participation.

n/a

5. Approve the minutes of the March 20, 2024 regular meetings. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

6. Consider and take necessary action to proclaim the month of April, 2024 as Child Abuse Prevention Month. (RHM)

Maria Walton with The Harbor spoke. Judge Meyer read proclamation.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Richard Meyer, County Judge
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

7. Consider and take necessary action to proclaim the month of April, 2024 as Sexual Assault Awareness Month. (RHM)

Jennifer Hahn with The Harbor spoke. Judge Meyer read proclamation.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Richard Meyer, County Judge
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

8. Consider and take necessary action to accept the attached list of donations to the Calhoun County Library for the months of January and February. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

9. Consider and take necessary action to declare the attached list of items for the Calhoun County Library as Surplus/Salvage for the months of January and February. (RHM)

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

10. Consider and take necessary action to declare the attached list of items for the Calhoun County Library as Waste for the months of January and February. (RHM)

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

11. Consider and take necessary action to approve reappointment of the following Memorial Medical Center Board Members for another term April, 2024 – March, 2026. (RHM)

- Michael Chavana
- Shelia Dierschke
- Dallas Franklin
- Kay McPherson
- Reynaldo Tuazon

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

12. Consider and take necessary action to close a portion of Main Street in Port O'Connor, Texas from the intersection of 2nd Street/State Highway 185 & Main Street; west 150 feet on May 25, 2024; and July 13, 2024 for street dances. (GDR)

John Harper asked the court to consider approving and asked to add July 6th to the list of dates for Street Dances.	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

13. Consider and take necessary action to authorize Kathy Pullin, sponsor of "Give Domestic Violence the Boot", to use King Fisher Beach Pavilion. September 27 - 28, 2024 for the annual fundraiser benefiting Calhoun County Harbor Children's Alliance. (GDR)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

14. Consider and take necessary action to approve the Specifications and Contract Documents for Bid No. 2024.05 Seadrift Drainage Improvements Project for Calhoun County, Texas - Texas General Land Office Contract No. 22-085-014-D245 and to authorize G & W Engineers, Inc. and the County Auditor to advertise for bids. A pre-bid meeting shall be held at 10:00 am, Tuesday, April 16, 2024 at Calhoun County Precinct #4 Office. Sealed Bids will be due before 2:00:00 pm, Thursday, May 9, 2024 at the County Judge's Office. (GDR)

Scott and Marla with G&W explained specifications of 6 million dollar project.

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

15. Consider and take necessary action to transfer to IT and remove from inventory from Precinct 4 Road & Bridge inventory number 24-0478, Lenovo Yoga Laptop. (GDR)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

16. Consider and take necessary action accept the Supplemental Agreement for Professional Services in the amount of \$5,900 with Urban Engineering for Cultural Resources Services for Green Lake Park Development Phase 1, and authorize Judge Meyer to sign all documentation. (GDR)

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

17. Consider and take necessary action to approve the Letter of Agreement to retain Higgins, Inc. as the Architect for the First Responder Training Facility building project and authorize the Director of EMS to sign this agreement. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

18. Consider and take necessary action to add "IT Certification" as a special license paid at the same rate as the Paramedic License (\$0.58/hr) and added to the License Differential list. Approval of qualifying certifications will be at the discretion of the County IT Director when individuals are recommended by a Department head. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

19. Discuss and take necessary action to renew aerobic septic system service contract for Six Mile Volunteer Fire Department with Victoria Precision Products and allow Commissioner Vern Lyssy to sign. (VLL)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

20. Consider and take necessary action to award qualified bidder on Bid No. 2024.04 Recycle Waste Transfer Station Project and allow Commissioner Vern Lyssy to sign any and all paperwork. (VLL)

**Scott Mason explained and gave the court his recommendation.
Commissioners awarded bid to ConMetal Contractors.**

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

21. Accept Monthly Reports from the following County Offices:

i. Calhoun County Tax Assessor – February 2024

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

22. Consider and take necessary action on any necessary budget adjustments. (RHM)

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

23. Approval of bills and payroll. (RHM)

MMC Bills	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Indigent Healthcare	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

County Bills	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Adjourned 10:50am

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6. Memorial Medical Center Report. (RHM)

Roshanda Thomas gave the report for February 2024.

Mae Belle Cassel

From: pfikac@mmcportlavaca.com (Pam Fikac) <pfikac@mmcportlavaca.com>
Sent: Monday, March 18, 2024 10:02 AM
To: Maebelle Cassel (maebelle.cassel@calhouncotx.org)
Subject: MMC Report to Commissioner's Court Date Change

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

Good morning Maebelle,

MMC's Board meeting has been changed to April 2, 2024. Would you please change date for MMC's Report to Court to April 3rd?

Thank you.

Pam Fikac
Executive Assistant
Credentialing Coordinator
815 N Virginia Street
Port Lavaca, TX 77979
(361) 552-0222
(361) 552-0220 Fax
pfikac@mmcportlavaca.com

MEMORIAL
MEDICAL  **CENTER**

So Much... So Close!



Monthly CEO Report

March 2024

"Success seems to be connected with action. Successful people keep moving. They make mistakes, but they don't quit."

—Conrad Hilton, Founder of Hilton Hotels

Executive Summary

Our financials are beginning to turn around in a positive way. February was a much better financial month with a combined loss of roughly \$127K in February compared to our \$521K loss in January.

Operationally we performed very well with the following highlights.

1. Gross and Net Patient Revenue both increased roughly \$500K
2. Collections were down at \$1.96 M (Avg. is \$2.4 M)
3. Deductions down in February (60.6% compared to 65.5%)
4. Agency Staffing expense decreased \$36K (~\$68K vs. ~\$103K)
5. Various department volumes were up
6. Hospital Payor Mix Impact: 24% Med. Advantage vs. 18% Trad. Medicare

As we continue to press forward with our growth strategies this year, with objectives around our four pillars 1.) Patient Experience, 2.) Profitability, 3.) Quality, and 4.) Community Impact we must continue to stay diligent and committed and remain focused on our goals. February reflects a very good operational month for our organization with all key areas improving over last month with significant increases or decreases.

Leadership at Memorial Medical Center will continue to innovate and create solutions that can help reach revenue growth tactics. *Memorial*



Executive Summary



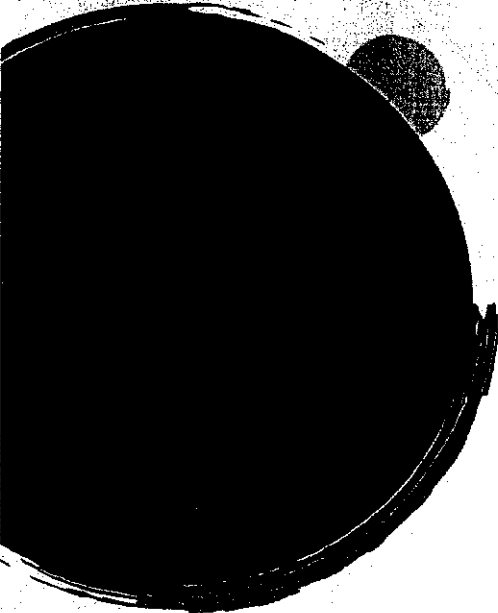
Strategy and Way Forward



General Updates



Other Matters of Interest
Financial/Profitability



pleased to spotlight our current and future efforts in service-line growth, enhancements, and development with the following services.

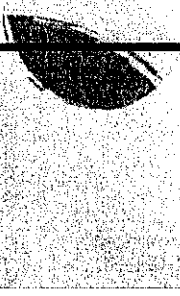
- A. Speech Therapy (Pedi & Adult)
- B. Specialty Clinic:
 - Republic Pain Specialists (CRNA Model)
 - General Surgery: Citizens Medical Center (Surgical Assoc.)
 - Orthopedic Clinic: Victoria Orthopedic Center Partnership
- C. Swingbed Program
- D. Women's Health Services
 - Open House – April 7th
- E. Lunch & Learn Sessions (Monthly Educational Topics)
- F. Pediatrics Services
- G. Wound Care Program

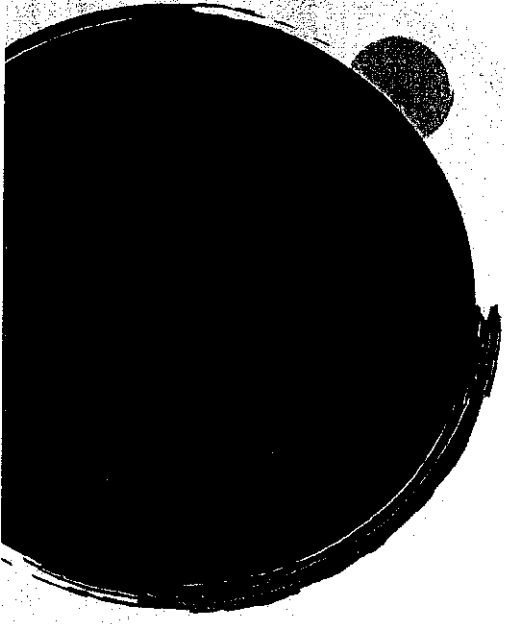
Strategy and the Way Forward

Our goal is to stay focused on living our mission, core values and actively connect with our patients, team members and community. As we reflect back on our major challenges in 2023, we must press forward this year in 2024 with goals and objectives that will lead to our overall success.

Driving long-term growth and success means keeping our workforce top of mind. Our 250+ employees make our healthcare system stronger and an amazing place to work. We must expect and prepare for rapid healthcare industry changes in order to achieve success.

As your CEO, I am committed to leading our organization into the future with confidence, innovation, and proactivity. We will stay competitive by staying current with technological changes and embracing new opportunities. Our leadership who are empowered with decision making will take collective ownership of our mission and create a culture of learning. So, with an appropriate plan of action for profitability and an experienced team of healthcare professional, I am certain making smart decisions will lead to future growth and profitability. Memorial Medical Center will position itself for optimal results both now and in the future.





General Updates

Tele-neuro Cart – Equipment Upgrade

- The lease for the cart that St. David's subsidizes has reached its end. A new cart was ordered to replace our current cart, so there will be no interruption of service. The device will be smaller than previous, but the software will be the same, so no onsite training will really be necessary. The rate was lower at \$325.00 vs. \$425.00 per non-emergent neurology telemedicine call coverage consult.

HHSC QIPP Project Proposal – Compliance Monitoring

- Memorial Medical Center received an email notifying that the Health and Human Services Commission (HHSC) has initiated the review of provider reported data for the Quality Incentive Payment Program (QIPP) for state fiscal year (SFY) 2022. We received this email because one or more of the QIPP measures have been randomly selected for quality assurance review to be conducted by Myers and Stauffer LC (MSLC) in accordance with 1 Tex. Admin. Code § 353.1304(e). HHSC has contracted with MSLC to complete compliance monitoring for SFY 2022 QIPP reporting. **Next Steps:** To determine compliance, MSLC will review documentation and data previously submitted to HHSC. MSLC will contact directly if additional information is needed to complete the review. Failure to participate in the review or to provide supporting documentation may result in adjustments pursuant to 1 Tex. Admin. Code § 353.1301(k).

Victoria Orthopedic Center (Concession/Use) – Specialty Clinic

- Victoria Orthopedic Center has agreed to do orthopedic clinic in our Specialty Clinic beginning in April 2024. Dr. Followwill will be the visiting specialist coming twice a month for clinic and will perform surgical procedures as needed.

MainStreet Rural Health

- MainStreet hired two navigators and have started working at our clinic (Main Campus). We are excited to have two navigators and ready to start our partnership!

Calhoun County Medical Foundation

- On February 7th the Foundation gave a brief update of its purpose and future goals at Commissioner's Court as part of the CEO Report from Memorial Medical Center. The information presented by Mr. Steve Marwitz and Mr. Russell Cain was well received.





340B Updates

- MMC has been in discussion with SunRx about its 340B Program. Getting an update on our HEB contracted pharmacy being offline since 2022. Asking how far back has SUNRx been able to reprocess HEB claims and has the entire claim count been processed for MMC?

Other Matters of Interest

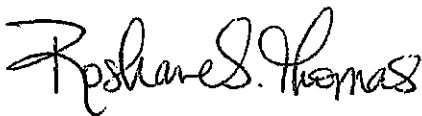
Medical Staff nominated and voted a new Chief of Staff to serve a two-year term.

*William Crowley, D.O.

Financial or Non-Financial Board Agenda Items

- Airgas Healthcare Agreement

Respectfully Submitted



Roshanda S. Thomas, MHA
Chief Executive Officer



February 2024 Financial Presentation

**Memorial Medical Center
Executive Summary
For The Month Ended February 29, 2024**

Primary Drivers to Operations

	February 2024	January 2024	Incr/(Decr) From January 2024	Incr/(Decr) % From January 2024		February 2023	Incr/(Decr) From February 2023	Incr/(Decr) % From February 2023	
Admissions	55	49	6	12.2%	↑	42	13	31.0%	↑
Inpatient Days	223	199	24	12.1%	↑	144	79	54.9%	↑
Swing Bed Days	60	78	(18)	-23.1%	↓	39	21	53.8%	↑
Observation Hours	1,563	1,607	(44)	-2.7%	↓	2,119	(556)	-26.2%	↓
Traditional Medicare %*	17.4%	18.0%	-0.6%	-3.3%	↓	20.7%	-3.3%	-16.0%	↓
Emergency Room Visits	792	745	47	6.3%	↑	638	154	24.1%	↑
Outpatient Visits^	2,090	2,091	(1)	0.0%	↓	2,016	74	3.7%	↑
Clinic Visits	2,894	2,873	21	0.7%	↑	2,459	435	17.7%	↑
Total Surgery Cases*	72	52	20	38.5%	↑	50	22	44.0%	↑
Total Radiology Procedures*	1,452	1,444	8	0.6%	↑	1,470	(18)	-1.2%	↓
Total Laboratory Procedures*	41,933	42,443	(510)	-1.2%	↓	36,511	5,422	14.9%	↑
Total Rehab Procedures*	1,605	1,200	405	33.8%	↑	1,673	(68)	-4.1%	↓

* Includes Inpatient & Outpatient

^ Registrations (W & WO Lab) Less Admissions & ER Visits

Financials

February Financial Highlights

- Gross patient revenue (GPR)
 - GPR increased \$437K to \$7.0 million in February
 - Medicare payer mix (Traditional and Managed Care) decreased 1.94% to 40.83% in February when compared to January, while Private Pay decreased .39% to 9.39% in February compared to 9.78% in January
- Net patient revenue (NPR)
 - NPR increased \$500K to \$2.8 million in February
- Other operating revenue
 - 340B revenue was \$61K compared to \$96K in January
 - Net of expenses 340B income was \$44K compared to \$79K in January
- Salaries, wages and benefits (SWB)
 - SWB increased \$170K to \$1.62 million; on a per calendar day basis SWB increased 19.41%
- Agency staffing expense decreased \$36K in February
 - Total agency staffing costs were \$68,144 compared to \$103,758 in January
- Supplies expense as a percent of gross patient revenue increased in February to 5.62% from 5.59% in January
 - This ratio has averaged 5.33% over the last 12 months
- Overall operating expenses increased \$49K in February
- Net Loss for February was (\$127,871) compared to a Net Loss of (\$521,667) in January
- EBITDA Net Loss for February was (\$54,107) compared to EBITDA Net Income of (\$447,338) in January

Memorial Medical Center
Income Statement by Operating Unit
For The Month Ended February 29, 2024

Current Period			
Hospital	Clinics	Nursing Homes	Combined
750,368		-	750,368
3,238,935	\$680,014	-	3,918,949
2,379,390		-	2,379,390
-		6,420,331	6,420,331
6,368,693	680,014	6,420,331	13,469,039
3,099,629	204,962	-	3,304,591
429,698	411	-	430,109
539	-	-	539
(161,686)	-	-	(161,686)
695,579	-	-	695,579
4,063,759	205,373	-	4,269,132
2,304,934	474,641	6,420,331	9,199,906
31,302	61,944	-	93,246
2,336,236	536,585	6,420,331	9,293,152

Current Period			
Hospital	Clinics	Nursing Homes	Combined
959,901	201,553	-	1,161,454
385,986	74,221	-	460,207
292,059	191,793	-	483,852
398,818	53,248	-	452,066
379,682	16,138	-	395,820
3,650	-	-	3,650
43,601	-	-	43,601
56,483	24,756	-	81,239
-	-	6,653,758	6,653,758
2,520,180	561,709	6,653,758	9,735,647
57,469	16,000	-	73,469
2,577,650	577,709	6,653,758	9,809,116
(241,414)	(41,124)	(233,426)	(515,964)
19,232	-	-	19,232
(295)	-	-	(295)
0	20,688	-	20,688
-	-	-	-
-	-	348,467	348,467
18,937	20,688	348,467	388,093
(222,476)	(20,436)	115,041	(127,871)

Revenue

Inpatient Revenues
Outpatient Revenues
ER Revenues
Resident Revenues

Total Patient Revenue

Revenue Deductions

Contractuals
Charity
Indigent Care
DSH/UCC/DSRIP
Bad Debt

Total Revenue Deductions

Net Patient Revenue

Other Operating Revenue

Total Operating Revenue

Operating Expenses

Salaries & Wages
Employee Benefits & PR Taxes
Professional Fees
Purchased Services
Supplies
Insurance
Utilities
Other Expenses
Nursing Home Fee

Total Operating Expenses

Depreciation

Total Expenses

Net Operating Income / (Loss)

Non Operating Income / (Exp)

Investment Income
Interest Expense
Contributions and Grants
Stimulus Funds
Nursing Home Program

Total Non-Operating Revenue

Total Net Income / (Loss)

Year to Date			
Hospital	Clinics	Nursing Homes	Combined
1,577,690		-	1,577,690
6,085,818	\$ 1,271,865	-	7,357,683
4,724,958		-	4,724,958
-		13,152,258	13,152,258

12,388,466 1,271,865 13,152,258 26,812,589

6,806,127	340,008	-	7,146,135
907,454	13,468	-	920,922
4,400	-	-	4,400
(323,371)	-	-	(323,371)
853,364	-	-	853,364

8,247,973 353,476 - 8,601,449

4,140,493 918,389 13,152,258 18,211,140

54,911 158,664 - 213,575

4,195,404 1,077,053 13,152,258 18,424,715

Year to Date			
Hospital	Clinics	Nursing Homes	Combined
1,987,133	447,389	-	2,434,522
530,193	108,621	-	638,814
582,475	551,036	-	1,133,511
817,428	69,324	-	886,752
721,679	43,907	-	765,586
6,602	-	-	6,602
85,961	-	-	85,961
114,929	48,338	-	163,267
-	-	13,584,225	13,584,225

4,846,401 1,268,615 13,584,225 19,699,241

115,478 32,000 - 147,478

4,961,879 1,300,615 13,584,225 19,846,719

(766,475) (223,562) (431,967) (1,422,005)

44,452	-	-	44,452
(616)	-	-	(616)
39,227	27,354	-	66,581
-	-	-	-
-	-	662,050	662,050

83,063 27,354 662,050 772,466

(683,413) (196,208) 230,082 (649,538)

**Memorial Medical Center
Income Statement - Combined
For The Month Ended February 29, 2024**

			Revenue			Year to Date		
Actual This	Current Period					Actual YTD	Budget YTD	Last Year YTD
Month	Budget This	Last Year						
	Month							
750,368	932,008	691,106	Inpatient Revenues			1,577,690	1,864,016	1,728,243
3,918,949	3,839,160	3,479,032	Outpatient Revenues			7,357,683	7,678,321	7,088,895
2,379,390	2,272,240	2,107,373	ER Revenues			4,724,958	4,544,480	4,605,265
6,420,331	5,569,062	6,425,863	Resident Revenues			13,152,258	11,138,124	12,879,025
13,469,039	12,612,470	12,703,374	Total Patient Revenue			26,812,589	25,224,940	26,301,428
			Revenue Deductions					
3,304,591	3,452,654	3,536,319	Contractuals			7,146,135	6,905,309	7,759,589
430,109	786,035	610,190	Charity			920,922	1,572,071	869,696
539	24,869	-	Indigent Care			4,400	49,739	68
(161,686)	(170,835)	(183,686)	DSH/UCC/DSRIP			(323,371)	(341,669)	(367,372)
695,579	65,000	58,475	Bad Debt			853,364	130,000	574,109
4,269,132	4,157,724	4,021,298	Total Revenue Deductions			8,601,449	8,315,449	8,836,090
9,199,906	8,454,746	8,682,076	Net Patient Revenue			18,211,140	16,909,492	17,465,338
93,246	194,581	173,399	Other Operating Revenue			213,575	389,162	321,790
9,293,152	8,649,327	8,855,475	Total Operating Revenue			18,424,715	17,298,653	17,787,128
			Operating Expenses			Year to Date		
Actual This	Current Period					Actual YTD	Budget YTD	Last Year YTD
Month	Budget This	Last Year						
	Month							
1,161,454	1,311,756	1,128,838	Salaries & Wages			2,434,522	2,623,512	2,401,698
460,207	432,262	398,215	Employee Benefits & PR Taxes			638,814	864,525	838,161
483,852	430,619	403,824	Professional Fees			1,133,511	861,238	815,772
452,066	492,013	504,828	Purchased Services			886,752	984,027	893,382
395,820	371,545	336,100	Supplies			765,586	743,091	692,569
3,650	7,000	4,261	Insurance			6,602	14,000	8,401
43,601	45,600	46,249	Utilities			85,961	91,200	87,783
81,239	117,391	155,673	Other Expenses			163,267	234,782	271,917
6,653,758	5,834,957	6,624,405	Nursing Home Fee			13,584,225	11,669,914	13,276,109
9,735,647	9,043,143	9,602,393	Total Operating Expenses			19,699,241	18,086,287	19,285,792
73,469	100,078	75,636	Depreciation			147,478	200,156	151,273
9,809,116	9,143,222	9,678,029	Total Expenses			19,846,719	18,286,443	19,437,065
(515,964)	(493,895)	(822,554)	Net Operating Income / (Loss)			(1,422,005)	(987,790)	(1,649,937)
			Non Operating Income / (Exp)					
19,232	2,050	5,215	Investment Income			44,452	4,100	8,070
(295)	(1,199)	(995)	Interest Expense			(616)	(2,398)	(1,710)
20,688	83,353	59,037	Contributions and Grants			66,581	166,707	536,263
-	-	-	Stimulus Funds			-	-	-
348,467	418,024	396,082	Nursing Home Program			662,050	836,048	792,164
388,093	502,228	459,339	Total Non-Operating Revenue			772,466	1,004,457	1,334,787
(127,871)	8,333	(363,215)	Total Net Income / (Loss)			(649,538)	16,667	(315,150)

Memorial Medical Center
Trending Income Statement
For The Month Ending February 29, 2024

	2023	2023	2023	2023	2023	2023	2023	2023	2023	2023	2023	2024	2024	2024
Revenue	February	March	April	May	June	July	August	September	October	November	December	January	February	YTD
Inpatient Revenues	691,106	796,710	681,759	753,972	836,000	750,340	873,397	759,281	1,199,341	782,426	772,282	827,322	750,368	1,577,680
Outpatient Revenues	3,479,032	3,649,065	3,592,508	4,162,208	4,163,431	3,562,901	4,369,219	3,949,963	3,788,715	3,912,450	3,504,364	3,438,734	3,918,949	7,357,683
ER Revenues	2,107,373	2,389,755	2,569,262	2,856,133	2,640,340	2,801,796	2,300,369	2,631,019	2,553,248	2,874,030	2,721,269	2,345,568	2,379,390	4,724,958
Total Patient Revenue	6,277,510	6,834,530	6,843,430	7,772,313	7,639,771	7,115,037	7,542,985	7,340,263	7,541,304	7,568,907	6,997,915	6,611,624	7,048,707	13,660,331
Deductions / Revenue	64.3%	63.5%	67.1%	63.4%	67.1%	62.1%	68.6%	66.2%	67.9%	68.9%	67.4%	65.5%	60.6%	63.0%
Revenue Deductions	February	March	April	May	June	July	August	September	October	November	December	January	February	YTD
Contractuals	3,536,319	3,755,909	3,839,501	4,262,606	4,325,326	3,932,880	4,126,857	4,030,974	4,292,873	4,308,274	3,225,218	3,841,543	3,304,591	7,146,135
Charity	610,190	71,244	250,487	217,608	222,574	671,223	838,956	392,509	434,890	110,922	716,269	490,813	430,109	920,922
Indigent Care	0	2,564	5,145	0	341	300	4,655	0	0	5,826	0	3,861	539	4,400
OSH/UCC/DSRP	(183,685)	(183,686)	(183,686)	(183,686)	(183,686)	(183,686)	(183,686)	(183,686)	(161,686)	(161,686)	(161,686)	(161,686)	(161,686)	(323,371)
Bad Debt	58,475	696,736	678,660	633,188	763,864	(3,575)	386,903	619,648	526,859	951,981	236,795	157,785	695,579	853,364
Total Revenue Deductions	4,021,299	4,342,767	4,590,108	4,929,716	5,128,419	4,417,142	5,173,685	4,859,445	5,092,936	5,215,317	4,016,596	4,932,317	4,269,132	8,601,449
Net Patient Revenue	2,256,211	2,491,763	2,253,322	2,842,597	2,511,352	2,697,895	2,369,300	2,480,818	2,448,368	2,353,589	2,981,319	2,279,307	2,779,575	5,058,882
Other Operating Revenue	173,399	186,517	198,653	235,069	198,824	229,055	249,826	109,153	131,476	145,765	125,334	120,329	93,246	213,575
Total Operating Revenue	2,429,611	2,678,280	2,451,975	3,077,666	2,710,176	2,926,950	2,619,126	2,589,971	2,579,844	2,499,354	3,106,653	2,399,636	2,872,821	5,272,457
SWB / Operating Revenue	62.9%	59.6%	66.3%	59.9%	56.9%	54.0%	62.4%	62.3%	64.1%	62.7%	62.4%	60.9%	56.4%	58.3%
Operating Expenses	February	March	April	May	June	July	August	September	October	November	December	January	February	YTD
Salaries & Wages	1,128,838	1,201,215	1,208,652	1,168,344	1,123,405	1,181,537	1,215,027	1,168,421	1,238,876	1,153,990	1,193,977	1,273,068	1,161,454	2,434,522
Employee Benefits & PR Taxes	398,215	394,096	416,498	397,528	418,029	398,361	418,918	444,133	413,716	412,124	433,427	178,607	460,207	638,814
Professional Fees	403,824	564,022	320,683	549,444	367,839	506,818	378,841	377,827	480,882	452,882	466,627	649,659	483,852	1,133,511
Purchased Services	504,828	425,796	415,805	437,354	425,744	422,522	487,127	458,977	435,351	471,879	534,286	434,686	452,066	886,752
Supplies	336,100	357,446	364,167	411,813	358,508	356,540	413,311	365,223	428,948	406,194	404,818	369,766	395,820	765,586
Insurance	4,261	4,877	5,254	5,677	5,677	5,677	6,453	7,423	7,423	4,653	6,406	2,952	3,650	6,602
Utilities	46,249	42,675	44,291	46,815	46,091	46,706	53,720	90,469	47,723	48,014	45,960	42,361	43,601	85,961
Other Expenses	155,673	160,981	132,890	172,492	143,621	138,903	121,365	128,003	163,080	104,417	84,838	82,028	81,239	163,267
Total Operating Expenses	2,977,987	3,151,108	2,908,240	3,189,467	2,888,914	3,057,064	3,095,352	3,040,476	3,216,009	3,054,153	3,170,339	3,033,126	3,081,889	6,115,016
Depreciation	75,636	75,791	75,791	76,209	75,749	75,689	76,115	75,988	77,520	77,484	74,650	74,009	73,469	147,478
Total Expenses	3,053,624	3,226,899	2,984,031	3,265,676	2,964,663	3,132,753	3,171,477	3,116,464	3,293,529	3,131,637	3,244,989	3,107,136	3,155,359	6,262,494
Net Operating Income / (Loss)	(624,013)	(548,619)	(532,056)	(188,010)	(254,487)	(205,803)	(552,351)	(526,493)	(713,685)	(632,282)	(138,336)	(707,500)	(282,538)	(990,037)
Non Operating Income / (Exp)	February	March	April	May	June	July	August	September	October	November	December	January	February	YTD
Investment Income	5,215	5,834	6,979	7,672	6,329	26,900	24,858	23,554	29,202	27,313	22,134	25,219	19,232	44,452
Interest Expense	(995)	(933)	(348)	(563)	(558)	(303)	(717)	(286)	(4,059)	(596)	(353)	(321)	(295)	(616)
Contributions and Grants	59,037	(1,328)	1,449	100	0	0	6,937	0	118,136	13,549	34,382	45,899	20,688	66,581
Stimulus Funds	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Non-Operating Revenue	63,258	3,573	8,079	7,209	5,771	26,597	31,078	23,268	143,279	40,267	56,262	70,791	39,625	110,417
Net Gain / (Loss) before NH	(560,755)	(545,045)	(523,976)	(180,801)	(248,716)	(179,206)	(521,273)	(503,224)	(570,406)	(592,015)	(82,174)	(636,709)	(242,912)	(879,621)
Operating Margin	-23.1%	-20.4%	-21.4%	-5.8%	-9.2%	-8.1%	-19.9%	-19.4%	-22.1%	-23.7%	-2.6%	-26.6%	-8.6%	-16.7%
Nursing Home Program:	February	March	April	May	June	July	August	September	October	November	December	January	February	YTD
Resident Revenue	6,425,863	5,736,285	6,198,952	5,790,046	6,015,667	6,009,992	3,270,436	4,897,433	5,877,984	6,034,517	10,499,822	6,731,926	6,420,331	13,152,258
Nursing Home Fees	6,624,405	5,934,827	6,397,494	5,988,588	6,214,209	6,208,534	3,468,978	5,095,975	6,076,526	6,233,059	10,698,354	6,930,468	6,653,758	13,584,225
QIPP Net of IGT	396,082	396,082	396,082	396,082	396,082	396,082	292,219	266,293	266,293	266,293	313,582	348,467	662,050	
Net Nursing Home Program	197,541	197,541	197,541	197,540	197,540	197,540	83,677	87,752	87,751	87,752	67,752	115,041	115,041	230,082
Net Income / (Loss)	(363,214)	(347,504)	(328,435)	16,739	(51,176)	18,334	(427,596)	(435,472)	(502,655)	(524,263)	(14,422)	(521,687)	(127,871)	(648,538)
Net Income Margin	-14.9%	-13.0%	-13.3%	0.6%	-1.9%	0.6%	-16.3%	-16.8%	-19.5%	-21.0%	-0.6%	-21.7%	-4.6%	-12.3%
EBITDA	(286,583)	(270,780)	(250,296)	93,511	25,181	94,326	(350,764)	(359,198)	(421,076)	(446,184)	60,581	(447,338)	(54,107)	(501,444)
EBITDA Percentage	-11.8%	-10.1%	-10.2%	3.0%	0.9%	3.2%	-13.4%	-13.9%	-16.3%	-17.9%	2.0%	-18.6%	-1.9%	-9.5%

Memorial Medical Center

Multi-Year Comparison Income Statement - Without Nursing Home & Service Organization

For The Month Ended February 29, 2024

Current Period			Revenue			Year to Date			Change	Change	Actual YTD	Change	Change
Actual This	Budget This	Last Year				Actual YTD	Budget YTD	Last Year YTD	From 2023	From 2023	2022	From 2022	From 2022
Month	Month												
750,368	932,008	691,106	Inpatient Revenues			1,577,690	1,864,016	1,728,243	(150,559)	-9%	\$ 2,390,249	\$ (752,558.81)	-32%
3,918,949	3,839,160	3,479,032	Outpatient Revenues			7,357,683	7,678,321	7,088,695	268,788	4%	\$6,514,173	\$ 843,510	13%
2,379,390	2,272,240	2,107,373	ER Revenues			4,724,958	4,544,480	4,605,265	119,693	3%	\$4,646,982	\$ 78,406	2%
7,048,707	7,043,408	6,277,511	Total Patient Revenue			13,660,331	14,086,817	13,422,403	237,928	2%	\$13,490,974	\$ 169,357	1%
			Revenue Deductions										
3,304,591	3,452,654	3,536,319	Contractuals			7,146,135	6,905,309	7,759,589	(613,454)	-8%	\$8,592,649	\$ 553,486	8%
430,109	786,035	610,190	Charity			920,922	1,572,071	869,696	51,226	6%	\$2,389,281	\$ (1,448,359)	-61%
539	24,869	-	Indigent Care			4,400	49,739	68	4,332	6371%	\$8,651	\$ (4,451)	-50%
(161,686)	(170,835)	(183,686)	DSH/UCC/DSRIP			(323,371)	(341,669)	(367,372)	44,001	-12%	(\$490,328)	\$ 166,958	-34%
695,579	65,000	58,475	Bad Debt			853,364	130,000	574,109	279,255	49%	(\$296,776)	\$ 1,150,140	-388%
4,269,132	4,157,724	4,021,298	Total Revenue Deductions			8,601,449	8,315,449	8,836,090	(234,641)	-3%	\$8,183,676	\$ 417,773	5%
60.6%	59.0%	64.3%				63.0%	59.0%	65.8%			60.7%		
2,779,575	2,885,684	2,256,213	Net Patient Revenue			5,058,882	5,771,368	4,586,313	472,569	10%	\$5,307,298	\$ (248,416)	-5%
93,246	194,581	173,399	Other Operating Revenue			213,575	389,162	321,790	(108,215)	-34%	\$381,484	\$ (147,879)	-41%
2,872,821	3,080,265	2,429,612	Total Operating Revenue			5,272,457	6,160,530	4,908,103	364,254	7%	\$5,688,782	\$ (396,295)	-7%
			Operating Expenses			Year to Date			Change	Change	Actual YTD	Change	Change
Actual This	Budget This	Last Year				Actual YTD	Budget YTD	Last Year YTD	From 2023	From 2023	2022	From 2022	From 2022
Month	Month												
1,161,454	1,311,756	1,128,838	Salaries & Wages			2,434,522	2,623,512	2,401,698	32,824	1%	1,903,995	\$ 530,527	28%
460,207	432,262	398,215	Employee Benefits & PR Taxes			638,814	864,525	838,161	(199,347)	-24%	609,880	\$ 28,934	5%
483,852	430,619	403,824	Professional Fees			1,133,511	861,238	815,772	317,739	39%	743,453	\$ 390,058	52%
452,066	492,013	504,828	Purchased Services			886,752	984,027	893,382	(6,630)	-1%	1,353,692	\$ (466,940)	-34%
395,820	371,545	336,100	Supplies			765,586	743,091	692,569	73,017	11%	787,665	\$ (22,079)	-3%
3,650	7,000	4,261	Insurance			6,602	14,000	8,401	(1,799)	-21%	6,357	\$ 245	4%
43,601	45,600	46,249	Utilities			85,951	91,200	87,783	(1,822)	-2%	74,788	\$ 11,173	15%
81,239	117,391	155,673	Other Expenses			163,267	234,782	271,917	(108,650)	-40%	218,902	\$ (55,635)	-25%
3,081,889	3,208,186	2,977,988	Total Operating Expenses			6,115,016	6,416,373	6,009,683	105,333	2%	5,698,732	\$ 416,284	7%
73,469	100,078	75,636	Depreciation			147,478	200,156	151,273	(3,795)	-3%	\$181,488	\$ (34,010)	-19%
3,155,359	3,308,265	3,053,624	Total Expenses			6,262,494	6,616,529	6,160,956	101,538	2%	5,880,220	\$ 382,274	7%
(282,538)	(228,000)	(624,012)	Net Operating Income / (Loss)			(990,037)	(456,000)	(1,252,853)	262,816	-21%	(211,468)	\$ (778,569)	368%
			Non Operating Income / (Exp)										
19,232	2,050	5,215	Investment Income			44,452	4,100	8,070	36,382	451%	\$2,048	\$ 42,406	2073%
(295)	(1,199)	(995)	Interest Expense			(616)	(2,398)	(1,710)	1,094	-64%	(\$4,532)	\$ 3,916	-86%
20,688	83,353	59,037	Contributions and Grants			66,581	166,707	536,263	(469,682)		74,951	\$ (8,370)	
-	-	-	Stimulus Funds & COVID Grants			-	-	-	-		-	-	-
39,625	84,205	63,257	Total Non-Operating Revenue			110,417	168,409	542,623	(432,205)	-80%	72,465	37,952	52%
(242,912)	(143,795)	(560,755)	Total Net Income / (Loss)			(879,621)	(287,591)	(710,230)	(169,391)	24%	(139,003)	\$ (740,618)	533%

Memorial Medical Center
Trending Balance Sheet
At February 29, 2024

	02/28/23	03/31/23	04/30/23	05/31/23	06/30/23	07/31/23	08/31/23	09/30/23	10/31/23	11/30/23	12/31/23	01/31/24	02/29/24
Assets													
Cash and Cash Equivalents	6,470,137	6,766,504	7,006,507	7,729,165	6,376,980	6,398,278	8,002,115	6,017,422	7,613,795	7,576,958	5,091,941	5,310,161	4,611,198
Private Waiver Clearing Account	432	433	433	433	433	433	433	434	435	435	436	436	437
MM Clinic Construction Account	537	537	537	538	538	538	538	539	540	540	541	542	543
Nursing Home Accounts	3,118,862	2,068,924	2,855,467	2,999,360	3,220,384	1,409,865	792,498	1,298,957	1,194,735	659,560	1,174,619	3,117,890	1,188,013
Investments	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Cash and Investments	9,589,968	8,836,408	9,862,945	10,729,496	9,598,334	7,803,114	8,795,525	7,317,353	8,809,504	8,237,494	6,267,536	8,429,029	5,800,190
A/R - Patient - MMC	10,330,832	10,085,409	10,578,800	11,661,695	12,483,195	12,208,144	12,686,696	12,936,568	12,361,104	13,355,427	12,940,061	12,546,084	13,916,373
A/R - Patient - MMC Clinic	763,116	654,075	645,546	594,379	589,120	611,267	523,793	537,178	577,982	709,999	656,328	685,272	801,197
Allowance - Contractuals	(8,351,301)	(8,011,910)	(8,507,386)	(9,141,251)	(9,767,946)	(9,554,567)	(10,235,407)	(10,265,626)	(9,803,468)	(10,613,849)	(9,942,132)	(9,781,188)	(10,664,778)
Patient A/R, Net	2,742,647	2,727,573	2,716,960	3,114,823	3,304,369	3,264,844	2,975,023	3,208,120	3,135,618	3,451,577	3,654,257	3,450,169	4,052,793
Receivable - Other	8,100,523	6,930,862	7,273,282	7,347,482	9,119,099	9,100,505	9,276,188	9,556,515	7,873,692	8,566,033	10,814,747	11,432,736	12,150,177
Receivable - 3rd Party	(113,040)	(113,040)	(113,040)	(113,040)	(113,040)	(113,040)	(113,040)	(113,040)	(23,555)	(23,555)	(38,040)	(38,040)	(38,040)
Receivable - Nursing Home	18,615,157	18,243,951	18,665,899	18,125,786	24,953,730	25,132,360	25,273,218	25,723,952	25,677,587	25,974,746	26,251,689	25,151,607	25,454,175
Inventory	1,722,694	1,700,235	1,615,495	1,595,094	1,546,732	1,581,986	1,582,012	1,528,101	1,531,356	1,567,607	1,528,600	1,517,168	1,658,807
Prepays	709,643	673,468	697,592	663,681	732,888	726,502	717,613	640,437	651,386	702,717	384,663	439,684	450,088
Other Assets	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Other Current Assets	29,034,978	27,435,476	28,139,228	27,620,005	36,239,410	36,428,913	36,735,991	37,335,965	35,710,465	36,787,548	38,941,659	38,503,155	39,675,207
Total Current Assets	41,367,593	38,999,457	40,719,132	41,464,323	49,142,114	47,496,871	48,506,539	47,861,438	47,655,587	48,476,618	48,863,453	50,382,352	49,528,189
Working Capital	11,840,718	11,524,057	11,263,182	11,266,001	11,304,820	11,342,005	10,988,619	10,617,380	10,070,889	9,559,490	9,606,491	9,180,822	9,136,725
Current Ratio	1.40	1.42	1.38	1.37	1.30	1.31	1.29	1.29	1.27	1.25	1.24	1.22	1.23
Property, Plant and Equipment	29,286,464	29,303,034	29,303,034	29,342,063	29,353,163	29,365,414	29,393,317	29,431,072	29,572,995	29,663,614	29,702,841	29,702,841	29,718,535
Accumulated Depreciation	(22,282,972)	(22,358,763)	(22,434,554)	(22,510,763)	(22,586,512)	(22,662,201)	(22,738,316)	(22,814,304)	(22,891,825)	(22,969,308)	(23,048,958)	(23,117,967)	(23,191,435)
Total Capital Assets, Net	7,003,492	6,944,271	6,868,480	6,831,300	6,766,650	6,703,213	6,655,001	6,616,768	6,681,170	6,694,306	6,654,883	6,584,874	6,527,100
Deferred Outflows of Resources	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049	2,524,049
Total Assets	50,895,135	48,467,779	50,111,665	50,819,675	58,432,816	56,724,137	57,685,590	57,002,255	56,860,807	57,694,973	58,046,385	59,491,275	58,579,338
Return on Assets	-0.7%	-0.7%	-0.7%	0.0%	-0.1%	0.0%	-0.7%	-0.8%	-0.9%	-0.9%	-0.7%	-0.6%	-0.7%
Liabilities													
Long Term Debt, Current	203,912	189,788	183,006	171,256	158,779	151,952	138,185	127,579	125,803	111,914	101,821	97,504	89,151
Note Payable-Related Party, Current	3,000,000	3,000,000	3,000,000	3,000,000	3,000,000	2,850,000	2,700,000	2,550,000	2,400,000	2,250,000	2,100,000	1,950,000	1,800,000
Accounts Payable	2,201,991	1,157,922	1,230,939	976,825	1,688,008	985,597	1,180,149	691,413	1,071,912	1,336,787	761,176	1,155,574	858,578
Due to Nursing Home	22,915,983	22,179,651	24,267,285	25,154,184	32,238,263	31,050,603	31,538,308	32,857,886	33,026,236	33,936,291	35,124,014	36,379,639	35,609,498
NH INS W/H	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)	(3,529)
Accrued Intergovernmental Transfer	267,009	227,685	316,186	404,687	213,079	95,223	183,724	(469,851)	(391,350)	(312,848)	(234,347)	(155,845)	66,598
Refundable Provider Relief Fund - NH	-	-	-	-	-	-	-	-	-	-	-	-	-
Unearned Indigent Care	-	-	-	-	-	(4,711)	-	-	-	5,466	-	-	-
Payable - Est. 3rd Party Payor Settlement	(695,031)	(684,056)	(736,348)	(677,041)	(706,404)	(336,850)	255,528	280,678	208,258	381,964	67,880	11,986	(23,549)
Accrued Payroll	887,855	593,076	713,784	673,421	756,159	885,197	1,022,433	650,035	666,957	786,097	872,122	1,022,861	1,216,210
Accrued Benefits	748,545	813,035	482,798	496,689	491,153	478,758	501,241	558,112	478,332	472,929	465,783	741,450	782,525
Accrued Sales Tax	141	1,828	1,825	1,826	1,783	1,684	1,876	1,731	2,074	2,051	2,036	1,985	1,977
Total Current Liabilities	29,526,875	27,475,400	29,455,950	30,198,322	37,897,293	36,154,866	37,517,521	37,244,059	37,584,698	38,917,128	39,256,961	41,201,530	40,391,464
Long Term Debt	-	-	-	-	-	-	-	-	-	-	-	-	-
Long Term Lease, Net of Current	58,419	58,419	58,419	58,419	58,419	58,419	58,419	58,419	58,419	58,419	58,419	54,408	54,408
Pension Asset	(4,030,805)	(4,004,805)	(3,978,805)	(3,952,805)	(3,926,805)	(3,900,805)	(3,874,805)	(3,848,805)	(3,822,805)	(3,796,805)	(3,770,805)	(3,744,805)	(3,718,805)
Total Long Term	(3,972,386)	(3,946,386)	(3,920,386)	(3,894,386)	(3,868,386)	(3,842,386)	(3,816,386)	(3,790,386)	(3,764,386)	(3,738,386)	(3,712,386)	(3,686,397)	(3,660,397)
Total Liabilities	25,554,489	23,529,014	25,535,563	26,303,936	33,968,907	32,312,479	33,701,594	33,453,672	33,820,312	35,178,742	35,544,575	37,511,132	36,727,067
Deferred Inflows of Resources	6,950,050	6,895,674	6,859,445	6,782,342	6,781,686	6,711,099	6,711,099	6,711,099	6,705,667	6,705,667	6,705,667	6,705,667	6,705,667
Debt-to-Asset Ratio	63.9%	62.8%	64.6%	65.1%	69.7%	68.8%	70.1%	70.5%	71.3%	72.6%	72.8%	74.3%	74.1%
Net Assets													
Net Assets, Beginning	18,705,744	18,705,744	18,705,744	18,705,744	18,705,744	18,705,744	18,705,744	18,705,744	18,705,744	18,705,744	18,705,744	15,796,149	15,796,149
Increase / (Decrease)	(315,148)	(662,652)	(989,087)	(972,346)	(1,023,521)	(1,005,186)	(1,432,782)	(1,868,254)	(2,370,910)	(2,895,173)	(2,909,595)	(521,667)	(649,538)
Net Assets, Ending	18,390,596	18,043,092	17,716,657	17,733,398	17,682,223	17,700,558	17,272,962	16,837,490	16,334,834	15,810,571	15,796,149	15,274,482	15,146,611
Total Liabilities and Net Assets	50,895,135	48,467,779	50,111,665	50,819,675	58,432,816	56,724,137	57,685,590	57,002,255	56,860,807	57,694,973	58,046,385	59,491,275	58,579,338
Debt-to-Equity Ratio	1.77	1.69	1.83	1.87	2.30	2.20	2.34	2.39	2.48	2.65	2.67	2.89	2.87

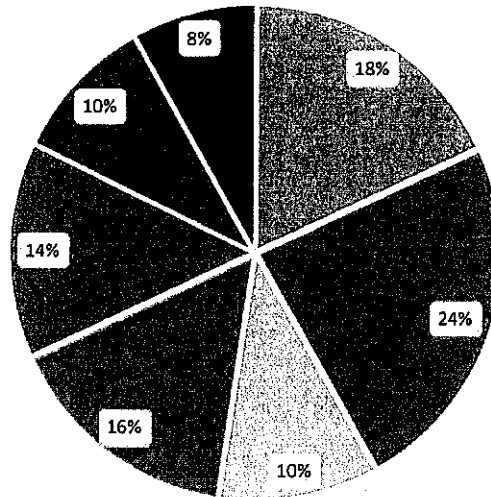
Memorial Medical Center
Days Cash on Hand
For The Month Ended February 29, 2024

Cash and Cash Equivalents:	February	March	April	May	June	July	August	September	October	November	December	January	February
Cash and Cash Equivalents	6,470,137	6,766,504	7,006,507	7,729,165	6,376,980	6,398,278	8,002,115	6,017,422	7,613,795	7,576,958	5,091,941	5,310,161	4,611,198
Private Waiver Clearing Account	432	433	433	433	433	433	433	434	435	435	436	436	437
MM Clinic Construction Account	537	537	537	538	538	538	538	539	540	540	541	542	543
Investments	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Cash and Investments	6,471,107	6,767,474	7,007,477	7,730,135	6,377,950	6,399,249	8,003,087	6,018,395	7,614,769	7,577,934	5,092,917	5,311,139	4,612,177
Operating Expenses:													
Salaries & Wages	1,128,838	1,201,215	1,208,652	1,168,344	1,123,405	1,181,537	1,215,027	1,168,421	1,238,876	1,153,990	1,193,977	1,273,068	1,161,454
Employee Benefits & PR Taxes	398,215	394,096	416,498	397,528	418,029	398,361	418,918	444,133	413,716	412,124	433,427	178,607	460,207
Professional Fees	403,824	564,022	320,683	549,444	367,839	506,818	378,841	377,827	480,882	452,882	466,627	649,659	483,852
Purchased Services	504,828	425,796	415,805	437,354	425,744	422,522	487,127	458,977	435,361	471,879	534,286	434,686	452,066
Supplies	336,100	357,446	364,167	411,813	358,508	356,540	413,311	365,223	428,948	406,194	404,818	369,766	395,820
Insurance	4,261	4,877	5,254	5,677	5,677	5,677	6,453	7,423	7,423	4,653	6,406	2,952	3,650
Utilities	46,249	42,675	44,291	46,815	46,091	46,706	53,720	90,469	47,723	48,014	45,960	42,361	43,601
Other Expenses	155,673	160,981	132,890	172,492	143,621	138,903	121,965	128,003	163,080	104,417	84,838	82,028	81,239
Total Expenses	2,977,987	3,151,108	2,908,240	3,189,467	2,888,914	3,057,064	3,095,362	3,040,476	3,216,009	3,054,153	3,170,339	3,033,126	3,081,889
Days in Period	28	31	30	31	30	31	31	30	31	30	31	31	29
Total Cash and Cash Equivalents	6,471,107	6,767,474	7,007,477	7,730,135	6,377,950	6,399,249	8,003,087	6,018,395	7,614,769	7,577,934	5,092,917	5,311,139	4,612,177
Operating Expenses (without employer tax credit) Less	2,902,351	3,075,316	2,832,449	3,113,258	2,813,165	2,981,375	3,019,247	2,964,487	3,216,009	3,054,153	3,170,339	3,033,126	3,081,889
Daily Expenses (Expenses Divided By # Of Days)	103,655	99,204	94,415	100,428	93,772	96,173	97,395	98,816	103,742	101,805	102,269	97,843	106,272
Days Cash on Hand Ratio	62.4	68.2	74.2	77.0	68.0	66.5	82.2	60.9	73.4	74.4	49.8	54.3	43.4
Cash and Investments less Private Waiver Cash	6,470,137	6,766,504	7,006,507	7,729,165	6,376,980	6,398,278	8,002,115	6,017,422	7,613,795	7,576,958	5,091,941	5,310,161	4,611,198
Adjusted Days Cash on Hand	62.4	68.2	74.2	77.0	68.0	66.5	82.2	60.9	73.4	74.4	49.8	54.3	43.4

Financial Drivers

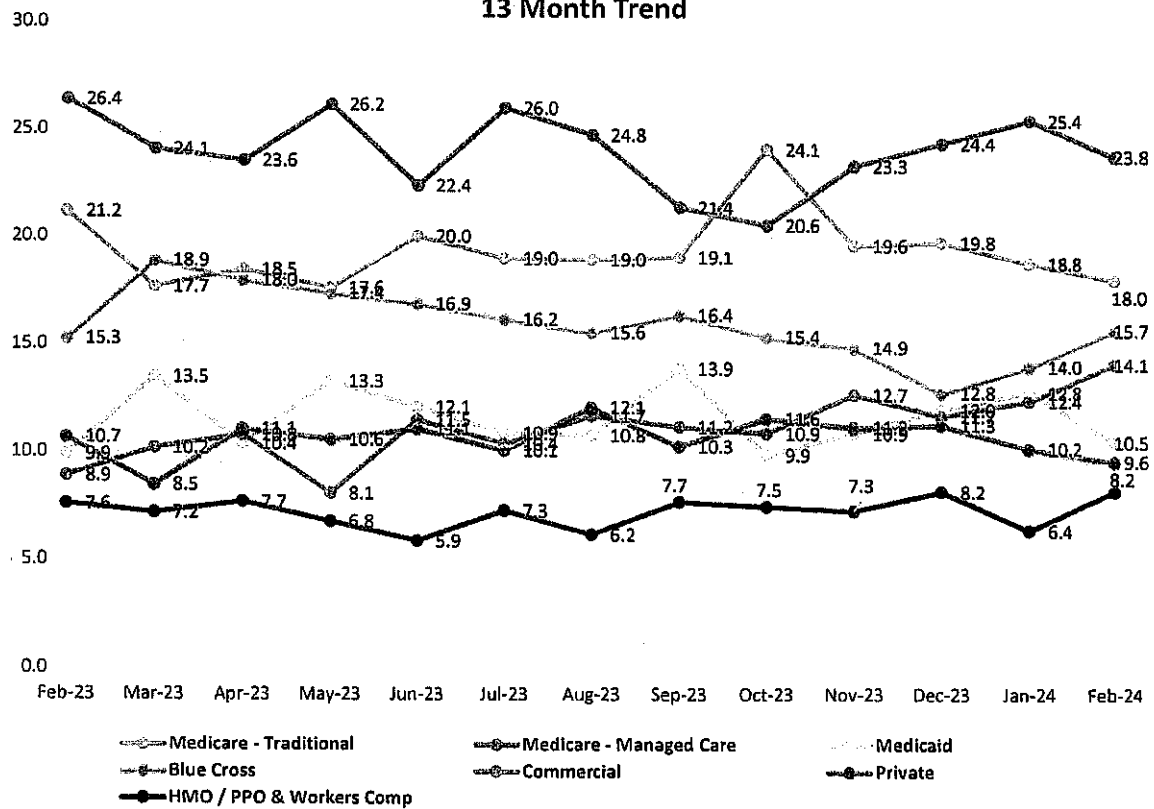
Memorial Medical Center Payer Mix

MMC (Hospital) Payer Mix As of February 29, 2024



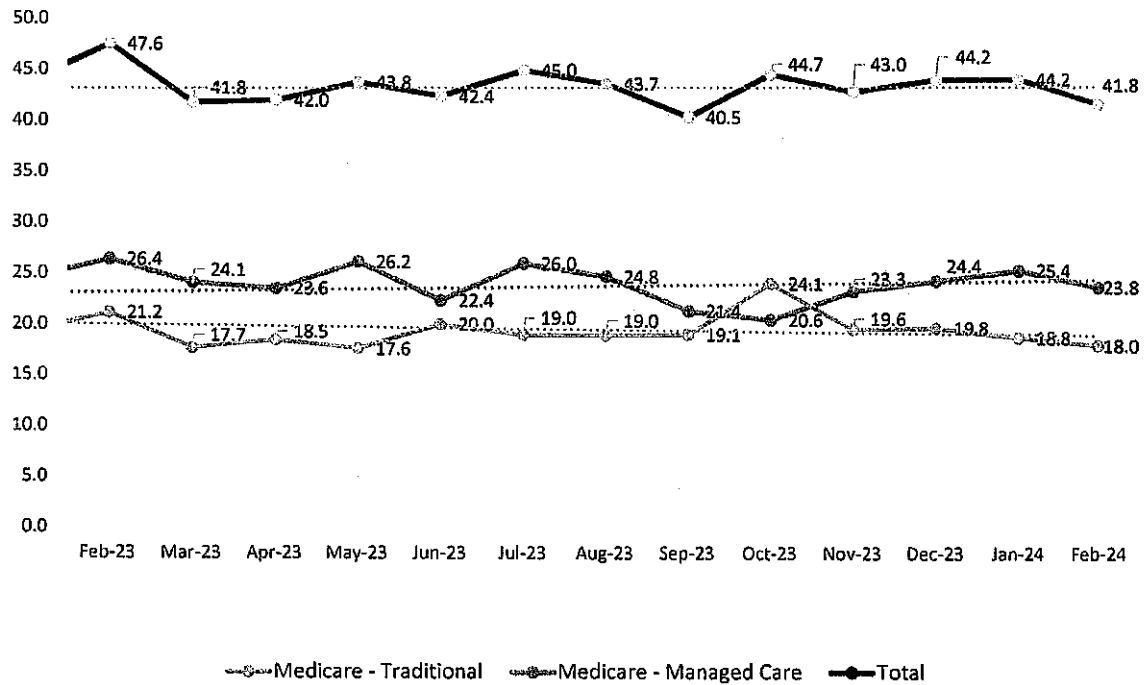
Medicare - Traditional
 Medicare - Managed Care
 Medicaid
 Blue Cross
 Commercial
 Private
 HMO / PPO & Workers Comp

13 Month Trend



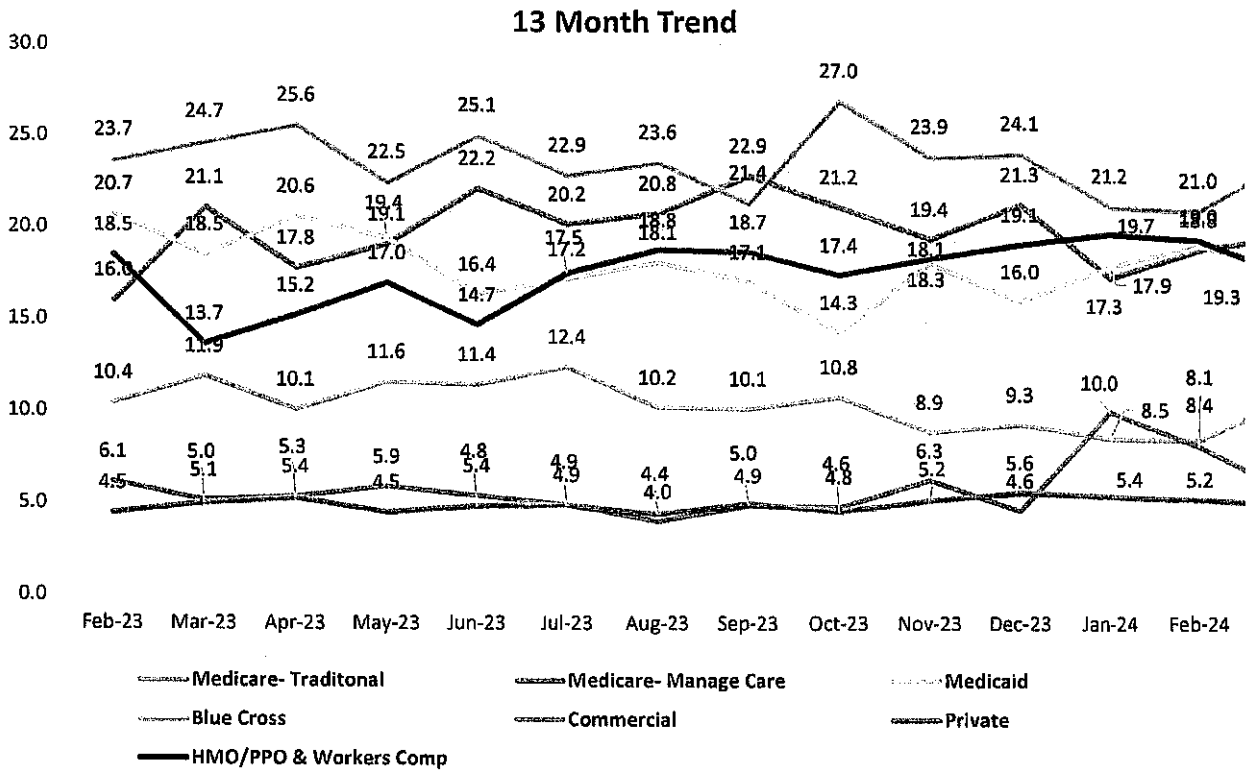
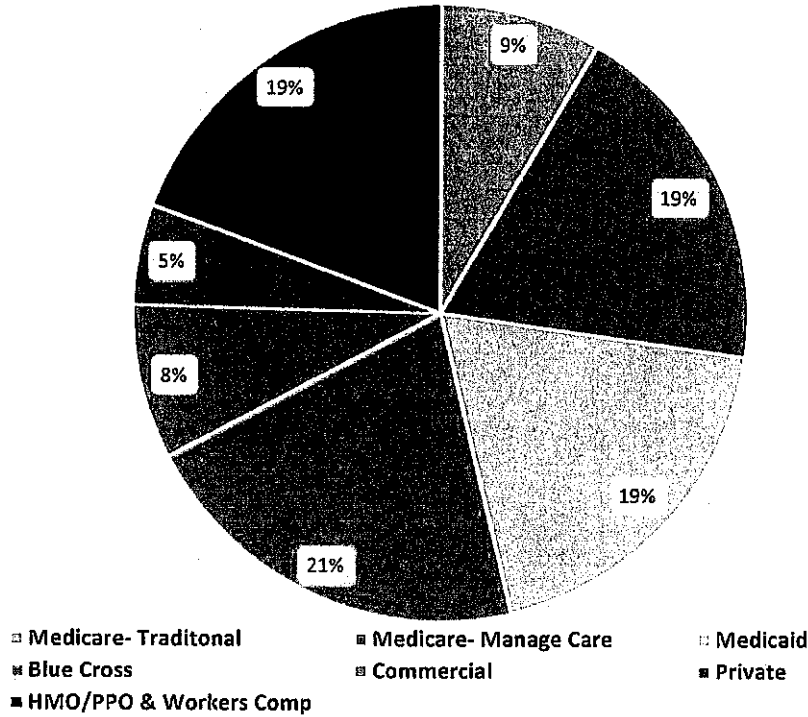
Memorial Medical Center Medicare Traditional vs. Managed Care Comparison

Medicare Traditional vs. Managed Care 13 Month Trend



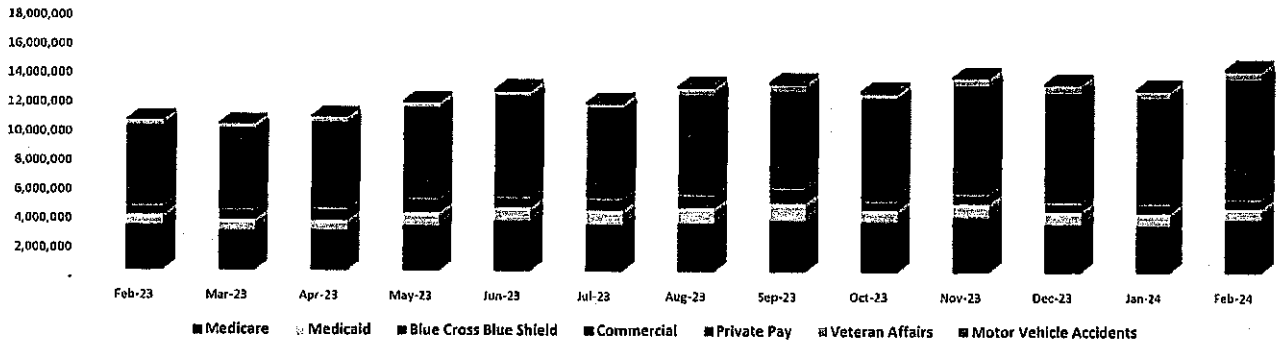
Memorial Medical Clinic Payer Mix

Memorial Medical Center (Clinic) As of February 29, 2024

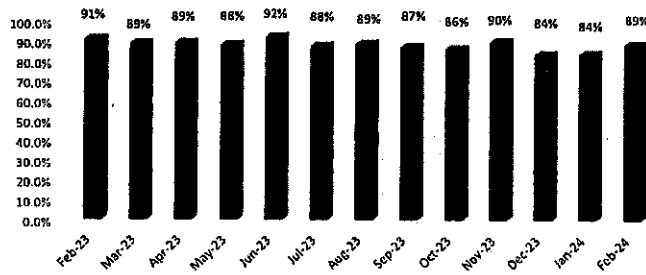


**Memorial Medical Center
Hospital Accounts Receivable Quality Indicators**

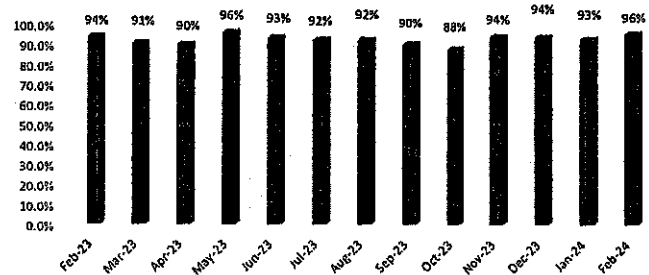
Accounts Receivable By Payor



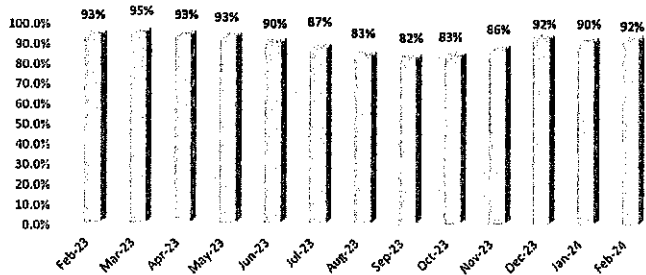
Medicare Aging < 60 Days



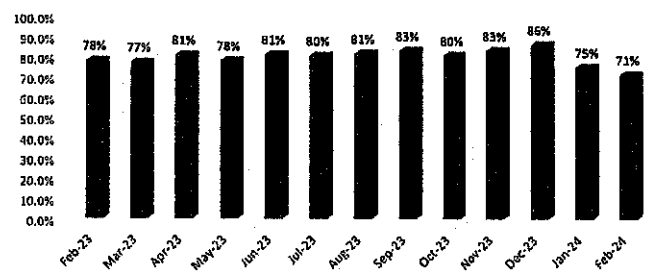
Blue Cross < 90 Days



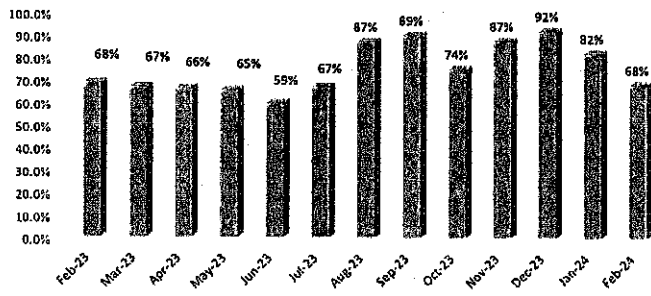
Medicaid Aging < 90 Days



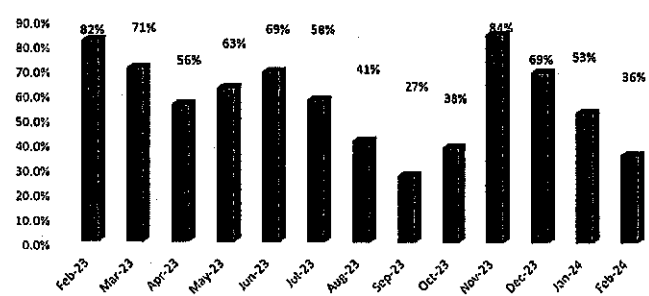
Commercial < 90 Days



Veteran Affairs < 90 Days



Motor Vehicle Accidents < 90 Days

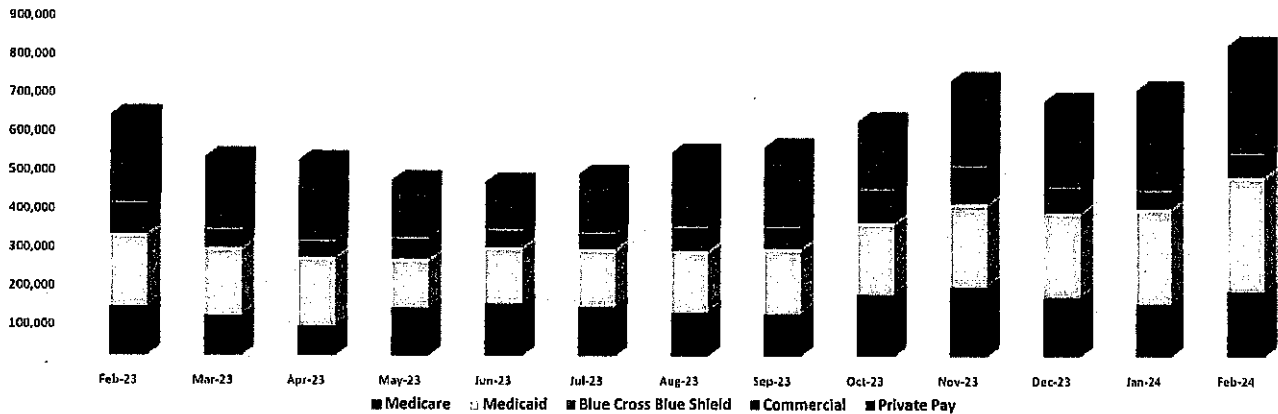


Memorial Medical Center
Accounts Receivable Agings

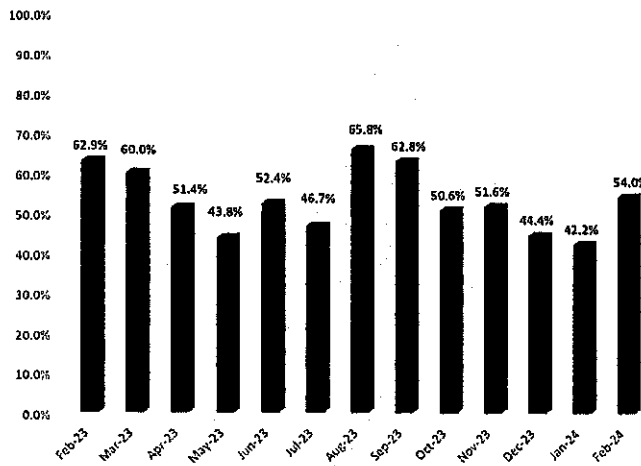
Aging	0 - 30	31-60	61-90	91-120	121-150	151-180	181-365	Total Gross	% Over 120 Days	% Over 90 Days	% Under 60 Days	% Under 90 Days
Total												
Apr-17	3,596,810	1,887,117	1,343,950	698,284	391,335	182,383	958,124	9,058,003	16.9%	24.6%	60.5%	75.4%
Feb-23	5,142,583	1,723,809	776,479	500,601	302,293	335,260	1,514,036	10,295,061	20.9%	25.8%	66.7%	74.2%
Mar-23	4,651,629	1,597,886	1,091,042	627,756	347,860	248,117	1,485,348	10,049,638	20.7%	27.0%	62.2%	73.0%
Apr-23	4,914,144	1,612,594	1,063,392	904,300	476,421	225,184	1,346,994	10,543,029	19.4%	28.0%	61.9%	72.0%
May-23	5,392,333	1,721,776	1,044,527	876,163	791,735	376,975	1,422,416	11,625,925	22.3%	29.8%	61.2%	70.2%
Jun-23	5,592,263	1,955,318	1,103,470	916,757	839,840	562,901	1,476,877	12,447,425	23.1%	30.5%	60.6%	69.5%
Jul-23	5,149,973	1,899,264	1,205,658	802,561	512,714	414,791	1,587,411	11,572,374	21.7%	28.7%	60.9%	71.3%
Aug-23	5,368,397	2,089,705	1,255,235	1,014,329	717,505	418,821	1,842,117	12,706,109	23.4%	31.4%	58.7%	68.6%
Sep-23	5,463,113	2,210,826	1,363,783	1,092,846	816,811	477,619	1,551,092	12,976,090	21.9%	30.4%	59.1%	69.6%
Oct-23	5,262,717	1,584,795	1,195,527	1,054,657	903,710	692,659	1,703,317	12,397,382	26.6%	35.1%	55.2%	64.9%
Nov-23	5,850,431	2,342,820	991,646	937,375	767,202	580,291	1,894,811	13,364,576	24.3%	31.3%	61.3%	68.7%
Dec-23	4,985,479	2,669,288	1,583,706	914,920	764,097	389,021	1,644,964	12,951,473	21.6%	28.7%	59.1%	71.3%
Jan-24	4,911,560	1,994,115	1,867,154	1,086,211	560,670	462,874	1,676,067	12,558,651	21.5%	30.1%	55.0%	69.9%
Feb-24	5,491,085	2,460,298	1,399,867	1,447,438	926,368	392,650	1,811,234	13,928,940	22.5%	32.9%	57.1%	67.1%
Medicare												
Sep-17	1,655,132	426,033	182,349	35,908	5,783	19,655	53,433	2,378,292	3.3%	4.8%	87.5%	95.2%
Feb-23	2,554,616	285,585	92,393	24,051	5,685	17,303	137,886	3,117,519	5.2%	5.9%	91.1%	94.1%
Mar-23	2,087,649	362,933	99,218	46,796	15,076	5,656	139,176	2,756,505	5.8%	7.5%	88.9%	92.5%
Apr-23	2,128,639	371,045	98,669	57,879	9,001	13,794	121,016	2,800,043	5.1%	7.2%	89.3%	92.8%
May-23	2,551,956	224,289	106,771	32,708	51,583	40,120	139,679	3,147,106	7.4%	8.4%	88.2%	91.6%
Jun-23	2,687,213	506,867	66,277	52,227	18,055	5,884	121,643	3,458,165	4.2%	5.7%	92.4%	94.3%
Jul-23	2,513,803	338,583	126,819	60,734	51,788	14,069	139,505	3,245,300	6.3%	8.2%	87.9%	91.8%
Aug-23	2,504,407	480,159	83,947	75,971	47,650	22,017	146,265	3,360,417	6.4%	8.7%	88.8%	91.3%
Sep-23	2,380,789	688,768	171,080	42,321	43,668	25,695	162,304	3,514,626	6.6%	7.8%	87.3%	92.2%
Oct-23	2,641,427	347,080	135,729	84,640	31,189	31,871	185,180	3,457,117	7.2%	9.6%	86.4%	90.4%
Nov-23	2,726,661	687,167	59,583	38,560	47,895	35,972	199,106	3,794,944	7.5%	8.5%	90.0%	91.5%
Dec-23	2,197,452	591,325	277,593	26,082	20,513	17,286	203,205	3,333,456	7.2%	8.0%	83.7%	92.0%
Jan-24	2,342,537	386,029	237,360	30,655	12,659	25,036	219,028	3,253,305	7.9%	8.8%	83.9%	91.2%
Feb-24	2,433,018	794,758	113,220	50,514	18,579	10,527	221,204	3,641,820	6.9%	8.3%	88.6%	91.7%
Medicaid												
Aug-17	460,814	355,303	115,759	32,474	7,570	2,527	2,963	977,411	1.3%	4.7%	83.5%	95.3%
Feb-23	483,035	103,304	18,361	23,378	-	681	20,073	648,831	3.2%	6.8%	90.4%	93.2%
Mar-23	527,761	78,824	26,972	3,157	15,507	161	17,984	670,367	5.0%	5.5%	90.5%	94.5%
Apr-23	444,556	74,778	32,666	4,556	879	710	33,353	591,499	5.9%	6.7%	87.8%	93.3%
May-23	613,131	106,171	19,987	22,116	1,920	60	35,577	798,962	4.7%	7.5%	90.0%	92.5%
Jun-23	595,741	135,835	32,153	16,491	9,980	3,722	59,099	853,020	8.5%	10.5%	85.8%	89.5%
Jul-23	490,628	199,878	71,264	14,562	30,866	13,768	57,462	878,428	11.6%	13.3%	78.6%	86.7%
Aug-23	535,487	160,785	95,176	67,170	8,569	13,851	70,492	951,530	9.8%	16.8%	73.2%	83.2%
Sep-23	707,722	122,546	114,122	58,684	57,209	5,151	88,438	1,153,871	13.1%	18.2%	72.0%	81.8%
Oct-23	467,505	135,280	25,280	34,915	14,812	30,601	48,713	757,107	12.4%	17.0%	79.6%	83.0%
Nov-23	588,110	133,380	35,489	24,872	19,411	12,279	62,638	876,178	10.8%	13.6%	82.3%	86.4%
Dec-23	551,580	115,574	74,586	12,383	7,294	1,637	45,015	808,070	6.7%	8.2%	82.6%	91.8%
Jan-24	568,530	98,554	45,516	33,720	7,553	2,863	30,811	787,547	5.2%	9.5%	84.7%	90.5%
Feb-24	490,255	146,378	44,891	14,067	19,158	2,916	26,637	744,302	6.5%	8.4%	85.5%	91.6%
BCBS												
Jul-18	293,552	25,273	21,415	4,663	4,641	1,022	1,147	351,714	1.9%	3.3%	90.6%	96.7%
Feb-23	500,362	53,288	45,673	11,062	3,091	-	25,152	638,629	4.4%	6.2%	86.7%	93.8%
Mar-23	570,512	41,929	15,674	27,670	12,647	44	25,152	693,628	5.5%	9.4%	88.3%	90.6%
Apr-23	674,429	53,245	11,602	15,863	27,670	11,253	28,395	822,456	8.2%	10.1%	88.5%	89.9%
May-23	710,256	212,297	27,943	2,445	6,891	1,060	27,508	988,400	3.6%	3.8%	93.3%	96.2%
Jun-23	595,580	60,185	11,738	14,451	2,619	4,239	27,297	716,109	4.8%	6.8%	91.6%	93.2%
Jul-23	654,068	86,774	17,349	8,279	14,496	2,497	37,600	821,064	6.6%	7.7%	90.2%	92.3%
Aug-23	634,397	169,916	35,958	10,215	5,811	10,500	43,077	909,874	6.5%	7.6%	88.4%	92.4%
Sep-23	696,274	143,155	100,761	28,197	18,129	5,811	51,884	1,044,211	7.3%	10.0%	80.4%	90.0%
Oct-23	470,942	37,716	42,812	21,503	16,445	2,951	35,940	628,308	8.8%	12.2%	81.0%	87.8%
Nov-23	530,568	79,250	11,518	3,643	13,998	3,119	20,113	662,208	5.6%	6.2%	92.1%	93.8%
Dec-23	440,771	103,155	29,352	7,444	9,145	4,324	18,522	612,714	5.2%	6.4%	88.8%	93.6%
Jan-24	486,524	76,603	41,207	8,348	4,588	10,956	24,212	652,438	6.1%	7.4%	86.3%	92.6%
Feb-24	498,460	74,377	14,366	3,059	5,170	-	19,415	614,846	4.0%	4.5%	93.2%	95.5%

Memorial Medical Center Clinic Accounts Receivable Quality Indicators

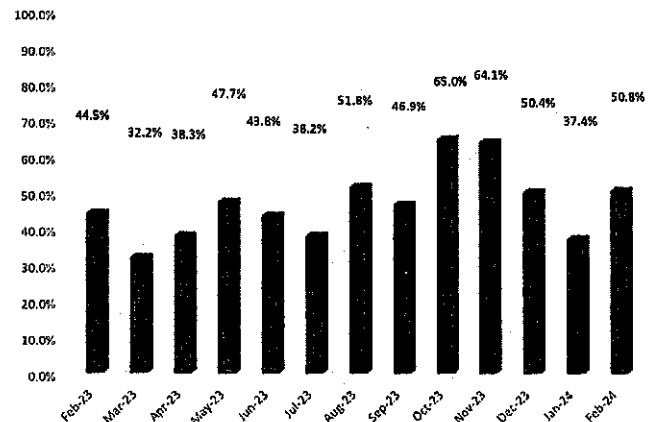
Accounts Receivable By Payor



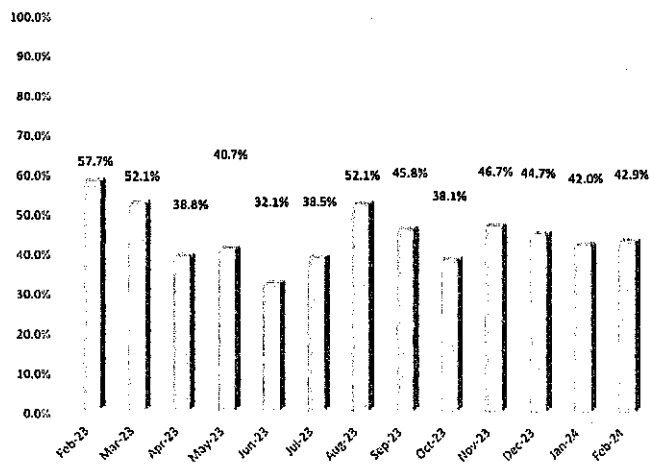
Medicare < 60 Days



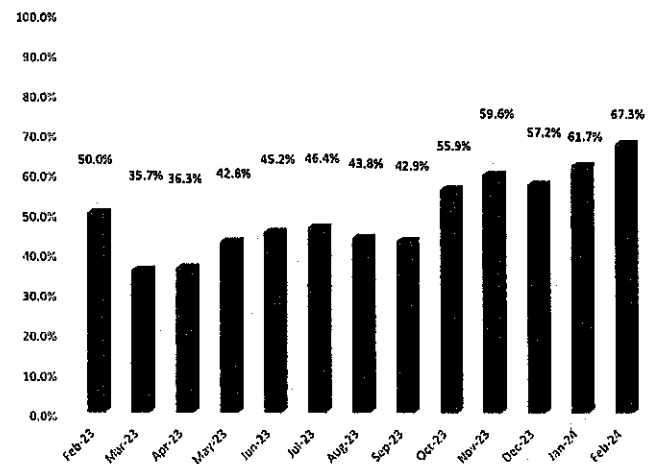
Blue Cross < 90 Days



Medicaid < 90 Days



Commercial < 90 Days



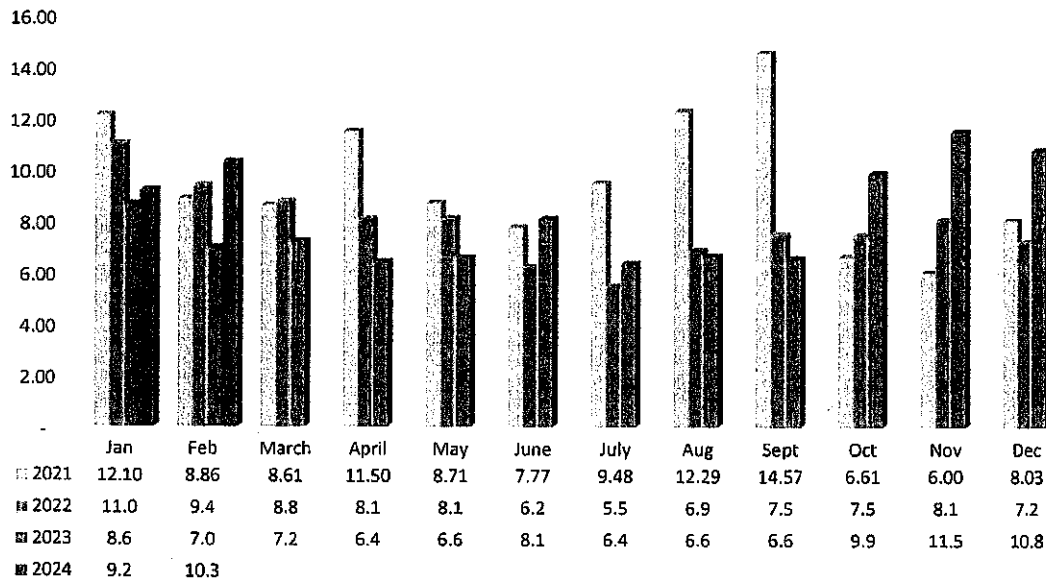
**Memorial Medical Clinics
Accounts Receivable Agings**

Aging	0 - 30	31-60	61-90	91-120	121-150	151-180	181-365	Total Gross	% Over 120 Days	% Over 90 Days	% Under 60 Days	% Under 90 Days
Total												
Jan-18	489,483	12,415	9,784	10,329	1,798	1,725	(7,453)	518,080	-0.8%	1.2%	96.9%	98.8%
Feb-23	260,301	57,824	62,370	42,550	25,613	(114)	174,958	623,503	32.2%	39.0%	51.0%	61.0%
Mar-23	175,990	48,612	43,462	47,750	33,688	24,551	140,410	514,462	38.6%	47.9%	43.7%	52.1%
Apr-23	162,614	48,644	35,497	36,004	42,491	31,444	149,241	505,933	44.1%	51.2%	41.8%	48.8%
May-23	181,081	28,582	26,393	25,559	23,007	18,185	151,960	454,767	42.5%	48.1%	46.1%	51.9%
Jun-23	166,525	40,389	19,887	18,214	21,152	19,559	163,782	449,508	45.5%	49.5%	46.0%	50.5%
Jul-23	186,035	34,785	26,856	15,092	16,896	18,332	173,659	471,655	44.3%	47.5%	46.8%	52.5%
Aug-23	260,786	15,106	18,848	23,269	11,593	16,359	181,110	527,072	39.7%	44.1%	52.3%	55.9%
Sep-23	209,124	77,246	7,810	13,320	21,950	11,887	199,119	540,456	43.1%	45.6%	53.0%	54.4%
Oct-23	258,758	55,740	25,865	20,052	20,732	3,771	223,665	608,582	40.8%	44.1%	51.7%	55.9%
Nov-23	323,745	84,643	48,822	42,539	(796)	5,444	208,880	713,277	29.9%	35.9%	57.3%	64.1%
Dec-23	245,538	103,879	53,826	31,582	26,496	1,897	196,389	659,607	34.1%	38.9%	53.0%	61.1%
Jan-24	294,226	57,066	54,046	44,668	24,828	23,107	190,610	688,551	34.6%	41.1%	51.0%	58.9%
Feb-24	359,402	101,679	35,140	42,484	38,847	20,097	206,826	804,475	33.0%	38.3%	57.3%	61.7%
Medicare												
Aug-19	126,263	2,130	766	559	(82)	265	2,029	131,931	1.7%	2.1%	97.3%	97.9%
Feb-23	76,821	4,139	7,443	5,849	2,180	597	31,601	128,629	26.7%	31.3%	62.9%	68.7%
Mar-23	58,373	4,218	2,911	5,643	6,103	1,567	25,499	104,315	31.8%	37.2%	60.0%	62.8%
Apr-23	36,061	3,938	799	1,662	4,410	5,965	25,042	77,878	45.5%	47.6%	51.4%	52.4%
May-23	49,871	5,153	4,713	3,236	4,379	3,025	55,236	125,613	49.9%	52.4%	43.8%	47.6%
Jun-23	61,057	10,430	4,784	3,133	1,988	1,247	53,905	136,543	41.8%	44.1%	52.4%	55.9%
Jul-23	50,161	9,636	7,499	4,375	3,239	1,105	52,097	128,112	44.1%	47.5%	46.7%	52.5%
Aug-23	71,504	3,412	2,980	661	2,768	3,207	29,286	113,817	31.0%	31.6%	65.8%	68.4%
Sep-23	68,238	1,458	2,557	2,811	686	2,648	32,530	110,928	32.3%	34.9%	62.8%	65.1%
Oct-23	67,386	14,641	11,568	2,986	3,312	5,601	56,525	162,019	40.4%	42.2%	50.6%	57.8%
Nov-23	72,964	20,032	14,968	8,390	2,678	3,094	58,122	180,249	35.4%	40.1%	51.6%	59.9%
Dec-23	58,561	10,039	9,733	11,248	2,483	5,913	56,408	154,387	42.0%	49.3%	44.4%	50.7%
Jan-24	51,210	6,558	5,535	4,112	9,018	1,377	59,242	137,052	50.8%	53.8%	42.2%	46.2%
Feb-24	76,319	15,478	4,398	4,105	3,274	8,258	58,076	169,908	41.0%	43.4%	54.0%	56.6%
Medicaid												
Feb-18	180,174	2,576	2,454	2,616	108	268	(603)	187,593	-0.1%	1.3%	97.4%	98.7%
Feb-23	72,942	20,685	13,018	19,312	9,474	10,220	39,207	184,857	31.9%	42.3%	50.6%	57.7%
Mar-23	44,330	23,972	22,616	11,681	17,070	7,290	47,404	174,363	41.2%	47.9%	39.2%	52.1%
Apr-23	26,396	21,209	20,683	23,420	10,166	16,435	57,834	176,144	47.9%	61.2%	27.0%	38.8%
May-23	25,617	11,451	13,338	13,624	13,882	2,633	43,262	123,808	48.3%	59.3%	29.9%	40.7%
Jun-23	25,248	12,128	8,873	13,259	13,866	15,780	54,961	144,114	58.7%	67.9%	25.9%	32.1%
Jul-23	26,019	19,704	11,614	10,676	10,906	11,923	58,100	148,942	54.3%	61.5%	30.7%	38.5%
Aug-23	46,258	20,380	15,914	7,902	6,864	8,500	52,554	158,372	42.9%	47.9%	42.1%	52.1%
Sep-23	26,077	27,962	22,863	13,931	8,559	6,782	61,776	167,951	45.9%	54.2%	32.2%	45.8%
Oct-23	37,876	14,886	17,351	23,256	13,955	7,442	69,196	183,962	49.2%	61.9%	28.7%	38.1%
Nov-23	57,050	27,276	16,178	11,637	21,124	13,765	68,257	215,287	47.9%	53.3%	39.2%	46.7%
Dec-23	35,878	38,958	22,685	13,859	9,443	20,529	76,709	218,060	48.9%	55.3%	34.3%	44.7%
Jan-24	51,767	21,290	29,872	22,181	15,812	7,870	96,265	245,057	48.9%	58.0%	29.8%	42.0%
Feb-24	83,456	23,063	19,902	31,306	22,189	14,954	99,867	294,738	46.5%	57.1%	36.1%	42.9%
BCBS												
Mar-19	25,847	9,402	43	145	(1,332)	1,565	(2,571)	33,100	-7.1%	-6.6%	106.5%	106.6%
Feb-23	21,307	3,294	11,954	1,490	8,017	3,656	32,475	82,193	53.7%	55.5%	29.9%	44.5%
Mar-23	8,134	4,905	2,714	11,591	909	7,635	13,006	48,894	44.1%	67.8%	26.7%	32.2%
Apr-23	8,770	4,376	3,418	2,458	11,660	561	12,043	43,286	56.1%	61.7%	30.4%	38.3%
May-23	19,011	3,320	4,208	3,364	2,402	5,554	17,829	55,688	46.3%	52.3%	40.1%	47.7%
Jun-23	10,409	7,277	2,704	1,128	2,679	2,430	19,971	46,598	53.8%	56.2%	38.0%	43.8%
Jul-23	9,845	1,285	5,016	2,659	1,073	2,679	19,687	42,244	55.5%	61.8%	26.3%	38.2%
Aug-23	30,003	1,139	1,279	4,763	2,701	781	21,878	62,544	40.5%	48.2%	49.8%	51.8%
Sep-23	13,232	11,767	1,174	1,088	4,410	2,328	21,843	55,842	51.2%	53.1%	44.8%	46.9%
Oct-23	41,894	5,622	8,675	984	840	5,097	23,397	86,509	33.9%	35.0%	54.9%	65.0%
Nov-23	46,717	11,047	5,349	8,777	250	200	26,077	98,417	27.0%	35.9%	58.7%	64.1%
Dec-23	19,242	10,499	3,274	1,038	5,269	490	25,726	65,537	48.0%	49.6%	45.4%	50.4%
Jan-24	13,829	1,549	2,470	2,459	(313)	5,213	22,563	47,771	57.5%	62.6%	32.2%	37.4%
Feb-24	24,537	6,005	929	1,249	2,361	(503)	27,313	61,891	47.1%	49.2%	49.3%	50.8%

Memorial Medical Center

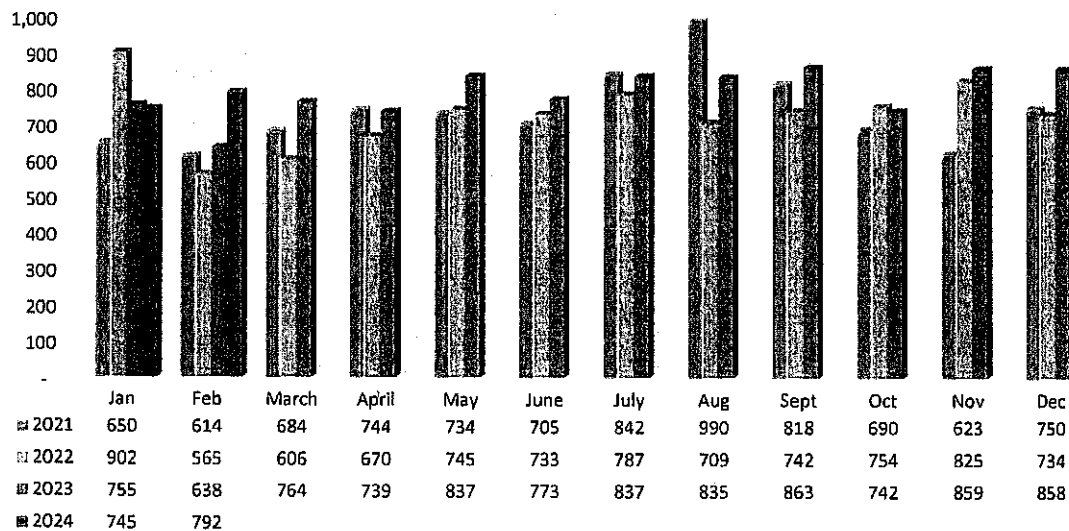
February 2024 Inpatient and Emergency Room Statistics

Average Daily Census



- Admissions are the primary driver to inpatient gross revenue
- Average daily census was 10.3, or .8 higher than target of 9.5
- Inpatient gross revenue was \$750 thousand on a budget of \$932 thousand

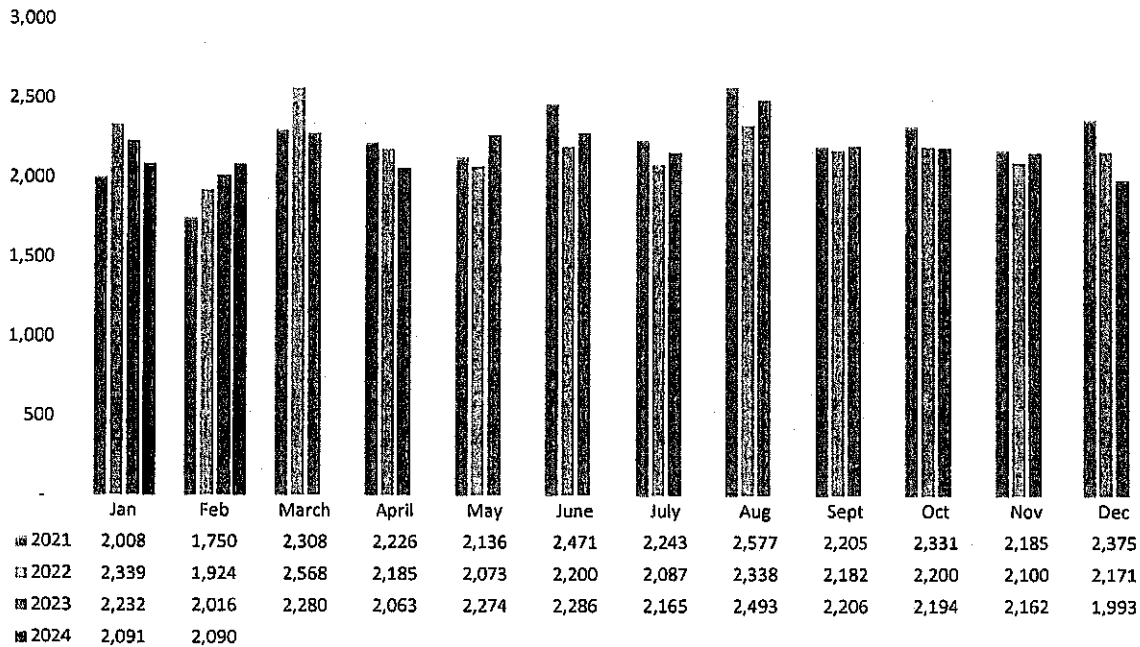
Emergency Room Visits



- Emergency room visits are the primary driver to emergency room gross revenue
- Emergency room visits were 792, or 47 higher than target of 745
- Emergency room gross revenue was \$2.38 million on a budget of \$2.27 million
- Gross revenue is not netted down for payer contracts or cost based reimbursement

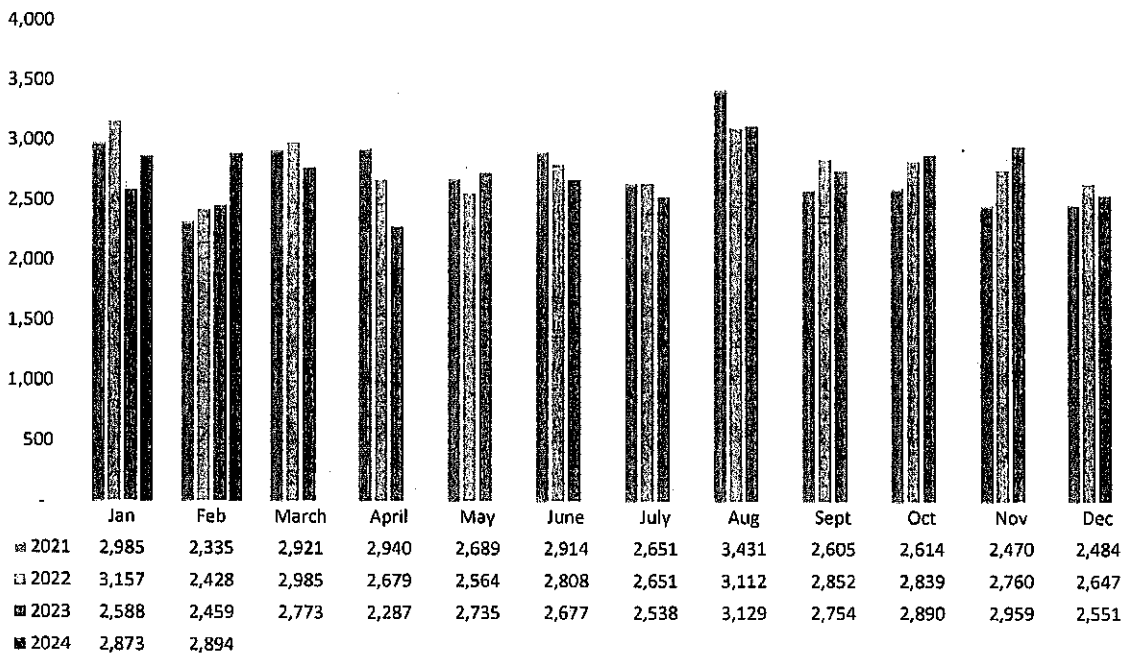
Memorial Medical Center February 2024 Census Charts

Outpatient Visits



- Clinic visits are the primary driver to outpatient gross revenue
- Outpatient visits were 2,090, or 210 lower than target of 2,300
- Outpatient gross revenue was \$3.92 million on a budget of \$3.84 million

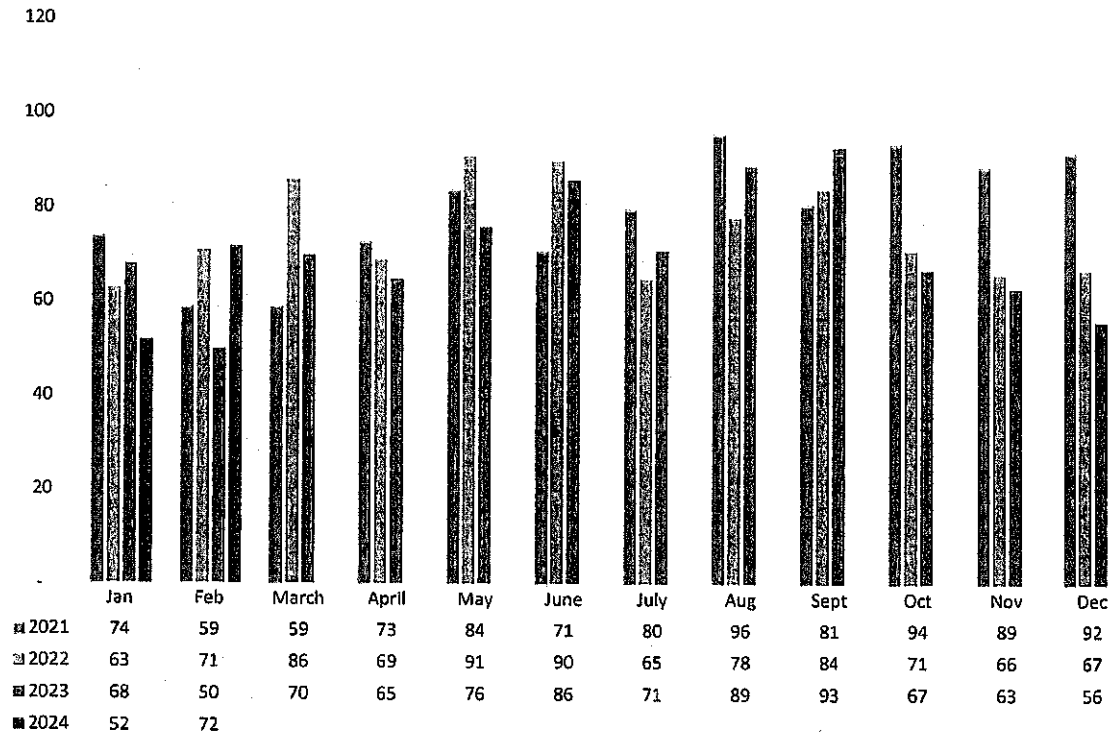
Clinic Visits



- Clinic visits were 2,894, or 606 lower than target of 3,500
- Clinic gross revenue was \$680K compared to \$592K in January, a 14.9% increase in revenue
- Increased and sustained clinic visits at a target of 3,500 per month will produce downstream volume and would lift financial results

**Memorial Medical Center
February 2024 Downstream Statistics**

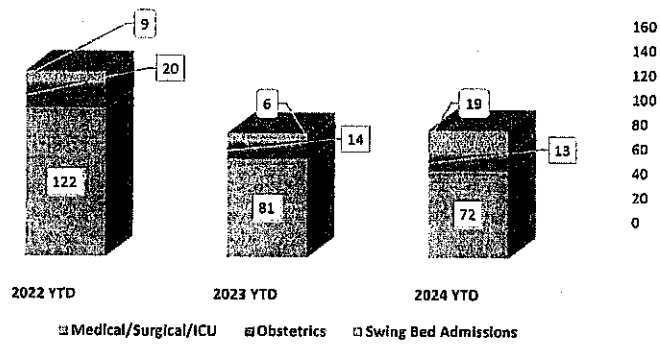
Surgery and Endoscopy Cases



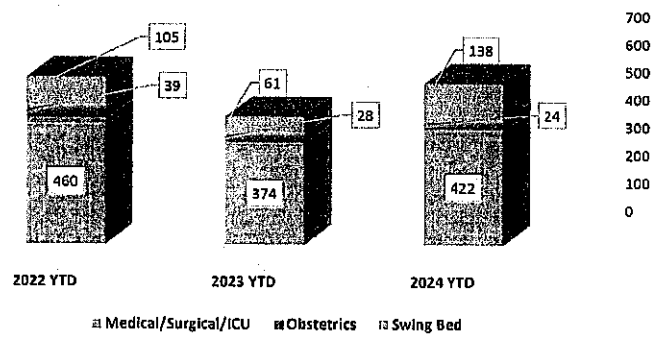
- **Surgery and endoscopy cases were 72, or 10 lower than target of 82**
- **Outpatient cases - 66** • **Inpatient cases - 6** • **C-Sections cases - 0**

Memorial Medical Center Inpatient Volume Indicators

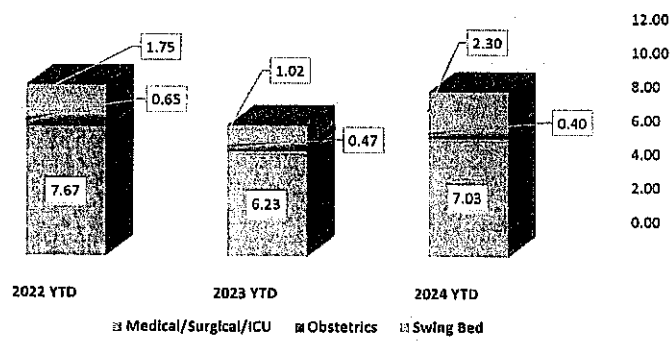
Admissions by Unit



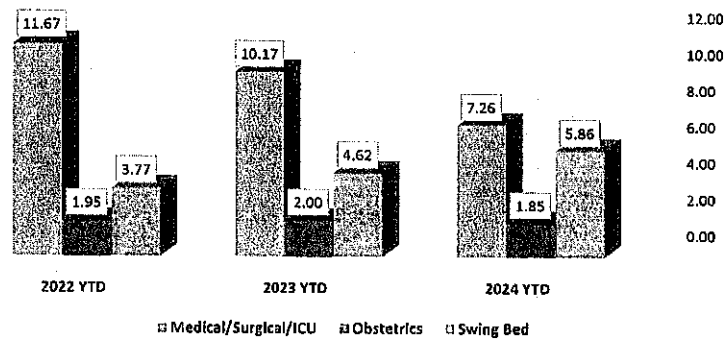
Patient Days by Unit



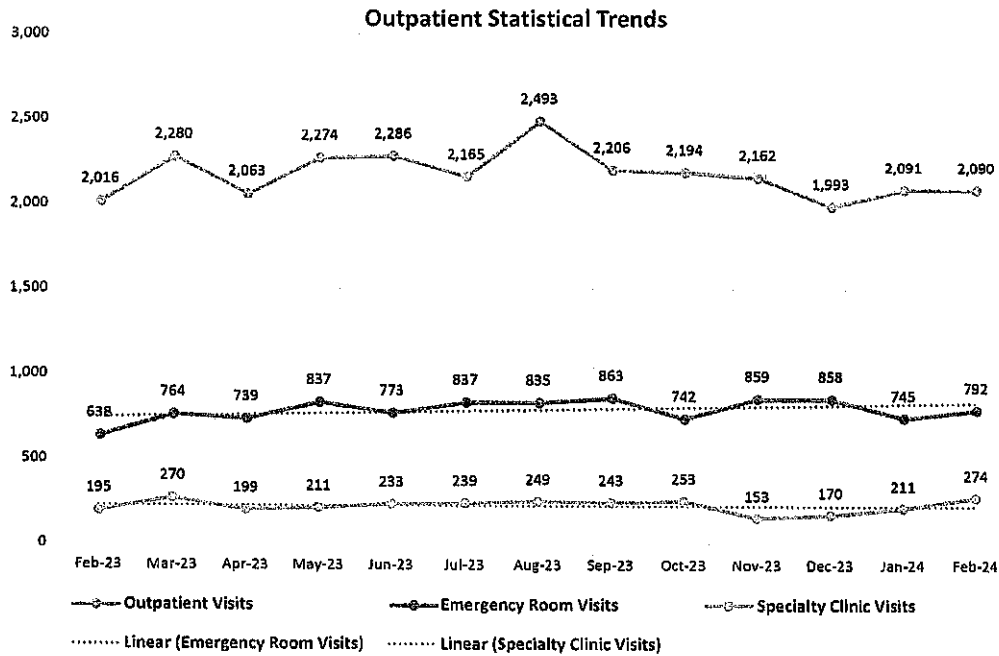
Average Daily Census



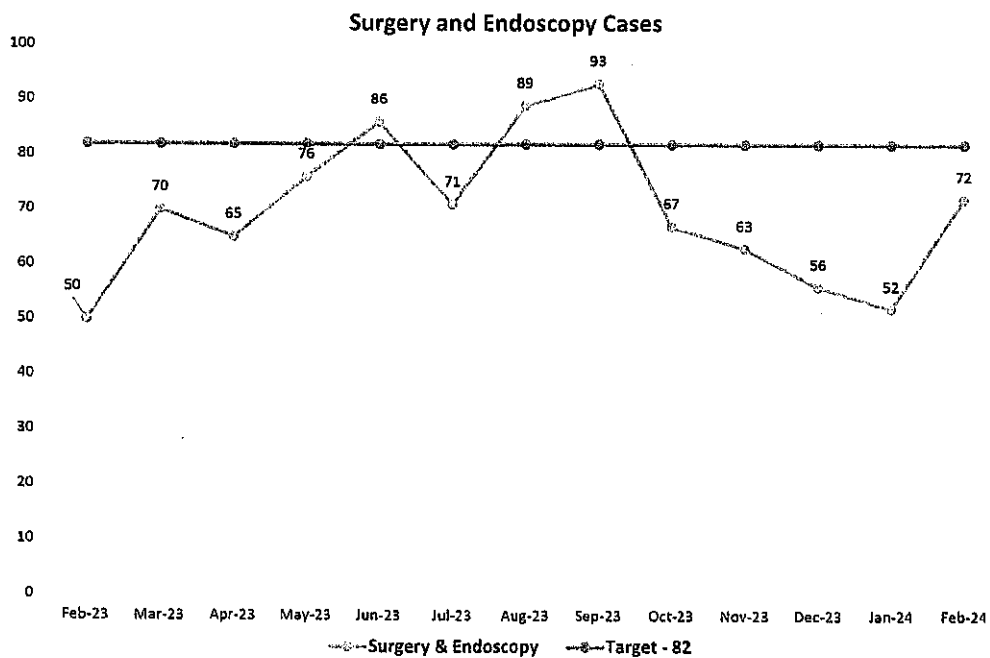
Average Length of Stay



**Memorial Medical Center
Operating Statistics
13-Month Trends**



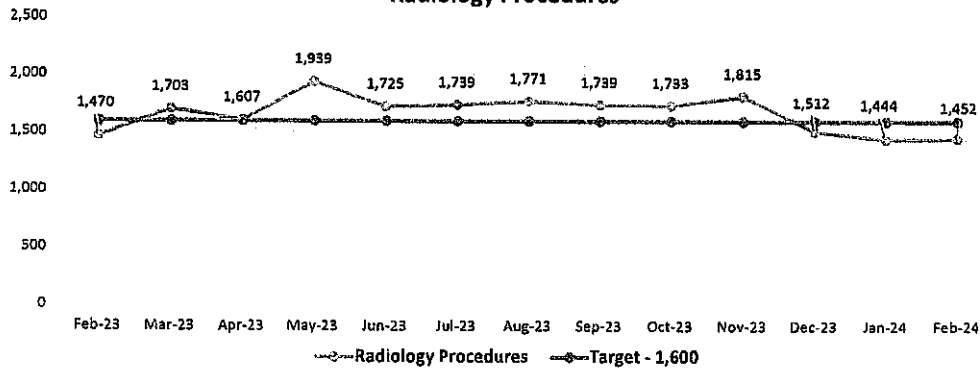
- Outpatient, emergency room and specialty clinic visits combined were 3,156, compared to 3,047 in January
- The following key downstream statistics, Surgery, Endoscopy, Radiology, Laboratory and Rehab produce revenue for the Hospital system
- The primary driver to elevating these specific statistics is to increase Clinic visits



- Surgery and Endoscopy cases were 72, or 10 less than target of 82

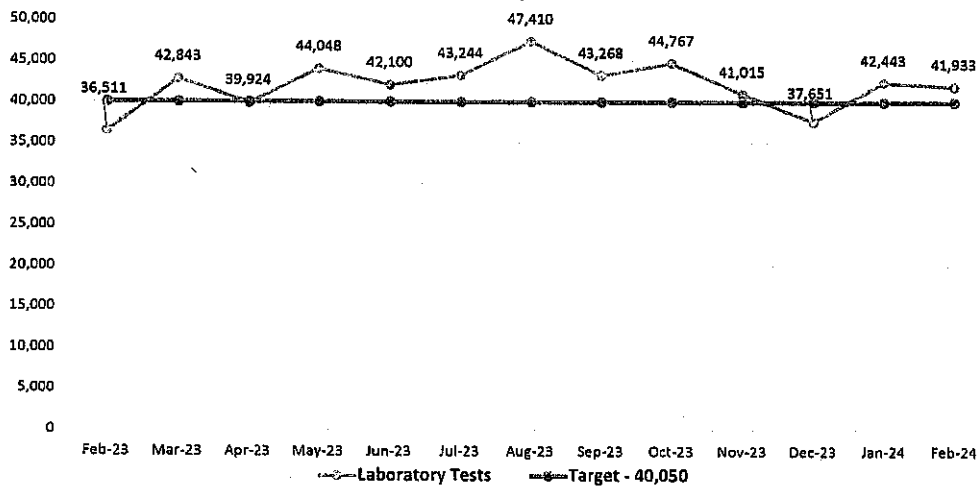
**Memorial Medical Center
Operating Statistics
13-Month Trends**

Radiology Procedures



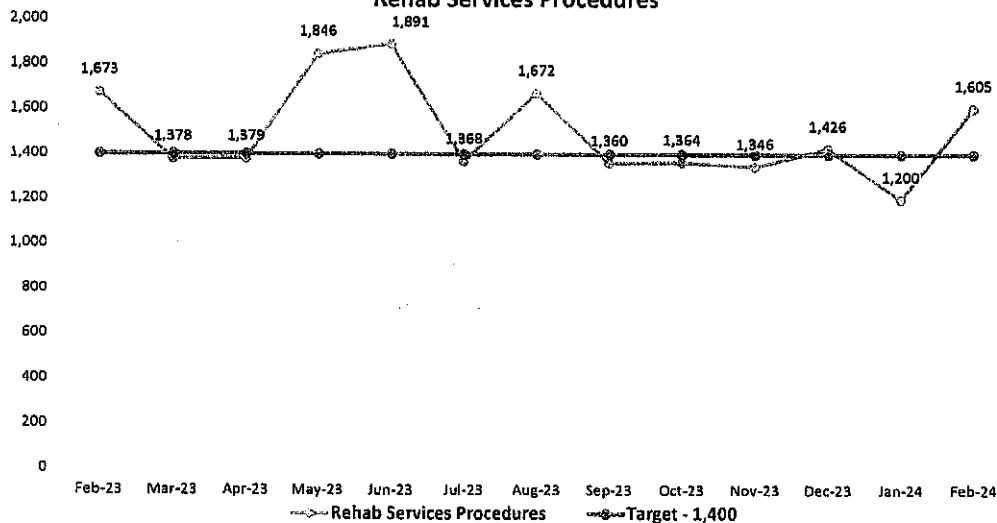
- Radiology procedures were 1,452, or 148 less than target of 1,600

Laboratory Tests



- Laboratory tests were 41,933, or 1,883 more than target of 40,050

Rehab Services Procedures



- Rehab service procedures were 1,605, or 205 more than target of 1,400

Rehab Services Breakdown:

- Physical Therapy - 1,266
- Occupational Therapy - 248
- Speech Therapy - 91

County Indigent Healthcare Report

*IHS
Issued 03/18/24

Source Totals Report
Calhoun Indigent Health Care
Batch Dates 02/01/2024 through 03/01/2024
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
14	Mmc - Hospital Outpatient	54.00	30.25
	Expenditures	54.00	30.25
	Reimb/Adjustments		
	Grand Total	54.00	30.25

Expenses	4,166.67
Co-Pays	< 0.00>
	<u>4,196.92</u>


3/19/24

•IHS
Issued 03/18/24

Source Totals Report
Calhoun Indigent Health Care
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	Reimb/Adjustments		
	Grand Total	54.00	30.25

Expenses	4,166.67
Co-Pays	< 0.00>
	4,196.67

~~B~~
3/19/24

San Juan County Indigent Care Patient Caseload 2024

Number of Charity patients	258
Number of Charity patients below <u>50% FPL</u>	136
Number of Charity patients who meet State Indigent Guidelines	129

Monthly Avg	1	2	-	1	\$805.18
December 2023 Active		36			

Cash Flow Projections

Memorial Medical Center 7 Month Cash Flow Projection

	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24
Cash On Hand - Operating & Money Market (Beginning of Month)	\$ 2,472,823	\$ 2,662,187	\$ 2,386,016	\$ 1,953,845	\$ 112,442	\$ (369,729)	\$ (851,900)
CASH INFLOWS:							
Cash AR Receipts - Hospital	\$ 2,385,000	\$ 2,385,000	\$ 2,385,000	\$ 2,385,000	\$ 2,385,000	\$ 2,385,000	\$ 2,385,000
Cash AR Receipts - Clinic	\$ 375,000	\$ 375,000	\$ 375,000	\$ 375,000	\$ 375,000	\$ 375,000	\$ 375,000
Other							
Cafeteria	\$ 17,500	\$ 17,500	\$ 17,500	\$ 17,500	\$ 17,500	\$ 17,500	\$ 17,500
340B	\$ 170,000	\$ 170,000	\$ 170,000	\$ 170,000	\$ 170,000	\$ 170,000	\$ 170,000
Bank Interest Earned	\$ 21,000	\$ 21,000	\$ 21,000	\$ 21,000	\$ 21,000	\$ 21,000	\$ 21,000
MG & Lillie A Johnson Grant Funds							
Nursing Grant Money							
Employee Retention Tax Credit (3rd of 3 Pymts)							
TOTAL Operating Cash Activity	\$ 2,968,500	\$ 2,968,500	\$ 2,968,500	\$ 2,968,500	\$ 2,968,500	\$ 2,968,500	\$ 2,968,500
QIPP Year 5 IGT Reconciliation							
Disproportionate Share Hospital (DSH)		\$ 380,000		\$ 340,000			
Uncompensated Care (UC)	\$ 782,364						
Medicare Cost Report Settlement - 2022							
Medicare Interim Reimbursement - 2023	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
QIPP	\$ 544,500	\$ 310,329	\$ 310,329	\$ 544,500	\$ 310,329	\$ 310,329	\$ 310,329
TOTAL Supplemental Activity	\$ 1,326,864	\$ 690,329	\$ 310,329	\$ 884,500	\$ 310,329	\$ 310,329	\$ 310,329
Total Cash Inflow	\$ 4,295,364	\$ 3,658,829	\$ 3,278,829	\$ 3,853,000	\$ 3,278,829	\$ 3,278,829	\$ 3,278,829
CASH OUTFLOWS:							
Operating Expenses	3 pay periods						
Accounts Payable	\$ (2,238,000)	\$ (2,238,000)	\$ (2,238,000)	\$ (2,238,000)	\$ (2,238,000)	\$ (2,238,000)	\$ (2,238,000)
Payroll	\$ (1,175,000)	\$ (780,000)	\$ (780,000)	\$ (780,000)	\$ (780,000)	\$ (780,000)	\$ (780,000)
Payroll Taxes	\$ (258,000)	\$ (387,000)	\$ (258,000)	\$ (258,000)	\$ (258,000)	\$ (258,000)	\$ (258,000)
Retirement	\$ (195,000)	\$ (290,000)	\$ (195,000)	\$ (195,000)	\$ (195,000)	\$ (195,000)	\$ (195,000)
340B	\$ (50,000)	\$ (50,000)	\$ (50,000)	\$ (50,000)	\$ (50,000)	\$ (50,000)	\$ (50,000)
Leases	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
MMC New Equipment Purchases	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
MMC New Equipment Purchases-2023	\$ (40,000)	\$ (40,000)	\$ (40,000)	\$ (40,000)	\$ (40,000)	\$ (40,000)	\$ (40,000)
Est. NH Cash receipts in Cash due NH							
Grant Imaging Equipment (funds to be spent)							
Medicare Interim Overpayment - 2023							
RHC Stimulus (funds to be spent)							
340B Drug Compliance Overpayment							
2019 DSH Refund Of Overpayment							
Payback of Advance Payments	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL Operating Activity	\$ (3,956,000)	\$ (3,785,000)	\$ (3,561,000)	\$ (3,561,000)	\$ (3,561,000)	\$ (3,561,000)	\$ (3,561,000)
Supplemental IGT Programs							
DSH - Pass 1 & 2 - \$116,894, Pass 3 - \$163,216							
UC							
DSRIP							
RAPPS / CHIRP							
UHRIP							
QIPP Semi-annual and Reconciliations Pymts.				\$ (1,983,403)			
TOTAL Supplemental Activity	\$ -	\$ -	\$ -	\$ (1,983,403)	\$ -	\$ -	\$ -
TOTAL CASH PAID OUT	\$ (3,956,000)	\$ (3,785,000)	\$ (3,561,000)	\$ (5,544,403)	\$ (3,561,000)	\$ (3,561,000)	\$ (3,561,000)
Cash Increase (Decrease)	\$ 339,364	\$ (126,171)	\$ (282,171)	\$ (1,691,403)	\$ (282,171)	\$ (282,171)	\$ (282,171)
Loan Additional Borrowing (Repayment)	\$ (150,000)	\$ (150,000)	\$ (150,000)	\$ (150,000)	\$ (200,000)	\$ (200,000)	\$ (200,000)
Cash on Hand (End of Month)	\$ 2,662,187	\$ 2,386,016	\$ 1,953,845	\$ 112,442	\$ (369,729)	\$ (851,900)	\$ (1,334,071)
Cumulative Borrowed From County	\$ 1,650,000	\$ 1,500,000	\$ 1,350,000	\$ 1,200,000	\$ 1,000,000	\$ 800,000	\$ 600,000

Physician Revenue 3 Year Trend Comparison

**Memorial Medical Center
Physician Revenue Trend
For The Month Ended February 29, 2024, 2023, & 2022**

	2024 YTD	2023 YTD	2022 YTD	Amount Comparison 2024 to 2023	% Comparison 2024 to 2023	Amount Comparison 2024 to 2022	% Comparison 2024 to 2022
Memorial Medical Center Clinic							
000966 Thao Truong	169,037	123,692	117,256	45,345	36.7%	51,781	44.2%
001367 Michael Pfeil	-	-	120,884	0	0.0%	(120,884)	-100.0%
002099 Traci Shefcik	260,835	235,766	135,326	25,068	10.6%	125,509	92.7%
002927 Michael Gaines	284,019	207,760	96,904	76,259	36.7%	187,116	193.1%
011005 William Crowley	701,747	814,171	1,066,212	(112,424)	-13.8%	(364,464)	-34.2%
019000 Ric Arroyo-Diaz	410,324	351,524	545,916	58,801	16.7%	(135,591)	-24.8%
022000 Peter Rojas	-	-	92,872	0	0.0%	(92,872)	-100.0%
041574 Frank Hinds	398,146	304,201	284,436	93,945	30.9%	113,710	40.0%
041596 Mercedes Schultz	-	138,814	330,245	(138,814)	-100.0%	(330,245)	-100.0%
058001 Court Thurlkill	116,369	85,365	84,588	31,004	36.3%	31,781	37.6%
097445 Pete Papapetrou	-	-	-	0	0.0%	0	0.0%
100118 Joseph Jenkins	450,723	297,943	277,357	152,780	51.3%	173,367	62.5%
102218 Marshall Cook	-	-	756	0	0.0%	(756)	-100.0%
320001 Shanna Odonnell	252,400	130,280	184,911	122,121	93.7%	67,490	36.5%
041597 David Hobson	53,769	6,214	-	47,555	765.3%	53,769	100.0%
003279 Tasha Norman	86,987	-	-	86,987	100.0%	86,987	100.0%
985045 Chau Minh Uong	-	145,813	77,950	(145,813)	-100.0%	(77,950)	-100.0%
	<u>3,184,357</u>	<u>2,841,544</u>	<u>3,415,611</u>	<u>342,814</u>	<u>12.1%</u>	<u>(231,254)</u>	<u>-6.8%</u>
	25.1%	20.9%	26.0%	4.3%	20.4%	-0.8%	-3.2%
Hospitalist							
013006 Hospitalist	930,312	2,833,680	2,518,297	(1,903,368)	-67.2%	(1,587,985)	-63.1%
	<u>930,312</u>	<u>2,833,680</u>	<u>2,518,297</u>	<u>(1,903,368)</u>	<u>-67.2%</u>	<u>(1,587,985)</u>	<u>-63.1%</u>
	7.3%	20.8%	19.1%	-13.5%	-64.7%	-11.8%	-61.6%
Port Lavaca Clinic							
000983 Michael Caughron	66,669	74,181	47,818	(7,512)	-10.1%	18,851	39.4%
001126 Nirtas Kwi Timu	138,286	212,221	220,762	(73,935)	-34.8%	(82,476)	-37.4%
012000 Jeannine Griffin	98,359	85,902	167,810	12,458	14.5%	(69,450)	-41.4%
013001 Leigh Anne Falcon	204,706	226,096	254,696	(21,390)	-9.5%	(49,989)	-19.6%
050001 John Wright	252,427	330,256	403,823	(77,828)	-23.6%	(151,396)	-37.5%
001668 Ibrom Destiny	56,162	43,599	53,374	12,563	28.8%	2,788	5.2%
002686 Brown Victoria	41,494	18,810	-	22,684	120.6%	41,494	100.0%
097121 John Clinton	45,749	56,353	132,129	(10,603)	-18.8%	(86,379)	-65.4%
	<u>903,853</u>	<u>1,047,416</u>	<u>1,280,411</u>	<u>(143,563)</u>	<u>-13.7%</u>	<u>(376,558)</u>	<u>-29.4%</u>
	7.1%	7.7%	9.7%	-0.6%	-7.3%	-2.6%	-26.7%
Specialty Clinic							
000548 Hareesh Kumar	23,481	14,809	6,802	8,672	58.6%	16,679	245.2%
001965 George Osuchku	32,624	21,172	10,211	11,452	54.1%	22,413	219.5%
013000 Don Paul Bunnell	87	48,073	52,315	(47,986)	-99.8%	(52,228)	-99.8%
050002 John Wright (Woundcare)	232,827	28,414	-	204,413	719.4%	232,827	100.0%
059000 Kurtis Krueger	13,840	1,589	1,327	12,251	771.0%	12,513	943.0%
065005 Lam Peter	42,337	3,223	45,421	39,114	1213.6%	(3,084)	-6.8%
068000 Clemmons Andrew	21,205	48,211	-	(27,006)	-56.0%	21,205	100.0%
525225 Azhar Malik MD	10,183	21,899	20,617	(11,716)	-53.5%	(10,434)	-50.6%
001835 Smith Hannah	18,555	6,426	-	12,129	188.7%	18,555	100.0%
000514 DU Yong	-	4,439	23,553	(4,439)	-100.0%	(23,553)	-100.0%
	<u>395,953</u>	<u>198,256</u>	<u>160,246</u>	<u>197,698</u>	<u>99.7%</u>	<u>235,707</u>	<u>147.1%</u>
	3.1%	1.5%	1.2%	1.7%	114.5%	1.9%	156.5%
Coastal Medical Clinic							
000806 William McFarland	-	-	320	0	0.0%	(320)	-100.0%
000809 Delgado Ana	-	12,613.00	1,058	(12,613)	-100.0%	(1,058)	-100.0%
011000 McFarland, Tim R	-	11,372	55,112	(11,372)	-100.0%	(55,112)	-100.0%
	<u>-</u>	<u>23,985</u>	<u>56,490</u>	<u>(23,985)</u>	<u>-100.0%</u>	<u>(56,490)</u>	<u>-100.0%</u>
	0.0%	0.2%	0.4%	-0.2%	-100.0%	-0.4%	-100.0%
Independent							
310001 Cummins Michelle	27,895	38,541	70,452	(10,646)	-27.6%	(42,557)	-60.4%
	<u>27,895</u>	<u>38,541</u>	<u>70,452</u>	<u>(10,646)</u>	<u>-27.6%</u>	<u>(42,557)</u>	<u>-60.4%</u>
	0.2%	0.3%	0.5%	-0.1%	-22.3%	-0.3%	-58.9%

Memorial Medical Center
Physician Revenue Trend
For The Month Ended February 29, 2024, 2023, & 2022

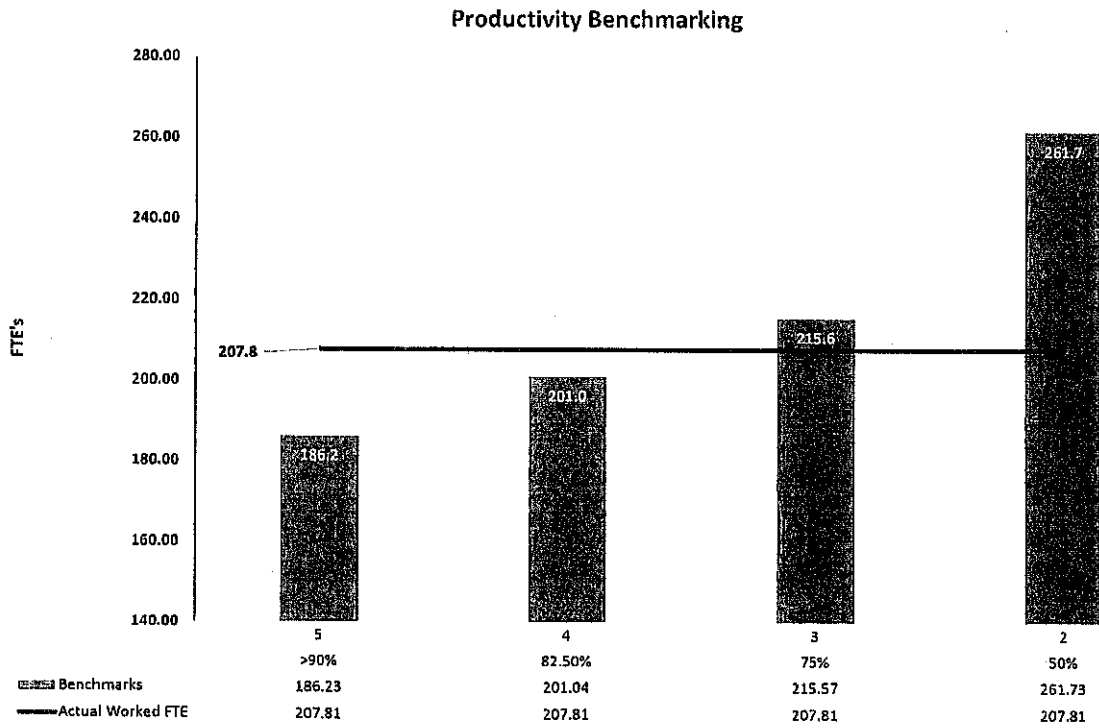
	2024 YTD	2023 YTD	2022 YTD	Amount Comparison 2024 to 2023	% Comparison 2024 to 2023	Amount Comparison 2024 to 2022	% Comparison 2024 to 2022
Other Medical Staff							
002372 Gerber Bernard	138,212	168,180	98,057.00	(29,968)	-17.8%	40,155	41.0%
012100 Donald Breech	42,634	56,282	68,115.94	(13,648)	-24.2%	(25,482)	-37.4%
001003 Gustave Sandigo	397	926	2,493.00	(529)	-57.1%	(2,096)	-84.1%
001645 Mark Yeakley	-	-	-	0	0.0%	0	0.0%
807077 Nilesh Patel	-	-	397.00	0	0.0%	(397)	-100.0%
900000 Dakshesh Parikh	-	24,339	1,221.00	(24,339)	-100.0%	(1,221)	-100.0%
989112 Peter Powaser	4,985	29,246	27,274.48	(24,261)	-83.0%	(22,289)	-81.7%
002205 Sanjeev Bhatia	-	359	944.00	(359)	-100.0%	(944)	-100.0%
001306 Jose Valladares	10,805	128,518	50,383.00	(117,713)	-91.6%	(39,578)	-78.6%
	<u>197,033</u>	<u>407,851</u>	<u>248,885</u>	<u>(210,818)</u>	<u>-51.7%</u>	<u>(51,852)</u>	<u>-20.8%</u>
	1.6%	3.0%	1.9%	-1.4%	-48.1%	-0.3%	-17.8%
Total E/R Physicians	<u>5,266,844</u>	<u>3,580,610</u>	<u>3,980,680</u>	<u>1,686,234</u>	<u>47.1%</u>	<u>1,286,164</u>	<u>32.3%</u>
	5,266,844	3,580,610	3,980,680	1,686,234	47.1%	1,286,164	32.3%
	41.6%	26.3%	30.3%	15.3%	58.0%	11.3%	37.4%
Other Ordering Physicians							
Other Ordering Physicians	1,761,097	2,632,095	1,420,214	(870,998)	-33.1%	340,883	24.0%
	<u>1,761,097</u>	<u>2,632,095</u>	<u>1,420,214</u>	<u>(870,998)</u>	<u>-33.1%</u>	<u>340,883</u>	<u>24.0%</u>
	13.9%	19.3%	10.8%	-5.4%	-28.1%	3.1%	28.7%
Totals	<u>12,667,346</u>	<u>13,603,978</u>	<u>13,151,287</u>	<u>(936,632)</u>	<u>-6.88%</u>	<u>(483,941)</u>	<u>-3.68%</u>

Productivity Benchmarking Report

**Memorial Medical Center
Monthly Productivity Totals
February 2024**

Score	Target FTE's BM 90% 5	Target FTE's BM 82.5% 4	Target FTE's BM 75% 3	Target FTE's BM 50% 2	Actual FTE's Worked	Goal	Min Requirements
Nursing							
Med Surg/ICU	18.21	19.51	20.34	22.74	30.38	● 1	
Nursery/OB	3.45	3.60	3.75	3.93	8.44	● 1	8.42
Nurse Admin	5.35	6.41	7.60	10.95	6.63	○ 3	
Case Management	3.69	4.31	4.93	6.40	0.71	● 5	
Infusion Services	-	-	-	-	-	FALSE	
Emergency Room	10.12	10.54	10.95	12.06	8.75	● 5	
Risk Management / Infection Prevention / Employee Health	1.31	1.47	1.64	2.35	-	● 5	
Surgery	7.26	8.25	9.25	11.67	8.59	○ 3	
All Nursing	49.40	54.09	58.45	70.09	63.50	● 2	
Ancillary Services							
Diagnostic Imaging	8.84	9.24	9.64	11.68	9.32	○ 3	
Lab	15.97	16.74	17.51	21.26	19.42	● 2	
Pharmacy	4.79	5.28	5.77	6.93	3.68	● 5	
Rehab Services	5.93	6.19	6.44	7.70	6.75	● 2	
	35.53	37.44	39.36	47.57	39.17	○ 3	
Clinic Operations							
MMC Clinic	21.76	23.23	24.71	29.20	27.72	● 2	
Clinic PFS	13.28	14.24	15.20	19.16	8.76	● 5	
Clinics	35.03	37.47	39.91	48.37	36.48	● 4	
Support Services							
Dietary	10.02	10.73	11.45	14.12	8.82	● 5	8.11
Environmental Services	14.73	15.23	15.74	18.04	13.73	● 5	
Plant/Bio Med	4.62	5.35	6.14	7.90	5.06	● 4	
Security	3.14	3.53	3.92	2.01	3.48	● 4	
	32.51	34.85	37.24	42.08	31.09	● 5	
Fiscal Services							
Admin	6.64	7.19	7.74	9.49	5.74	● 5	
Fiscal Acct	3.40	3.73	4.07	6.56	4.50	● 2	
PFS	13.44	14.85	16.26	20.38	14.49	● 4	
HIM	4.13	4.47	4.80	5.78	4.28	● 4	
IT	1.65	1.99	2.34	3.72	2.70	● 2	
Purchasing-CS	2.65	3.11	3.56	5.84	3.01	● 4	
Indigent Care	1.84	1.84	1.84	1.84	1.84	○ 3	
	33.75	37.18	40.60	53.61	36.56	● 4	
Covid Related: Door Screeners	0.01	0.01	0.01	0.01	0.01		
Totals	186.23	201.04	215.57	261.73	207.81	○ 3	

	>90%	82.50%	75%	50%
	5	4	3	2
Benchmarks	186.23	201.04	215.57	261.73
Actual Worked FTE	207.81	207.81	207.81	207.81
		14.81	14.53	46.15



MEMORIAL MEDICAL CENTER
CHECK REGISTER: 02-01-24 THRU 02-29-2024

<u>BANK CODE</u>	<u>CK #</u>	<u>DATE</u>	<u>AMOUNT</u>	<u>PAYEE</u>	<u>NOTES</u>
A/P	800477	2/1/2024	3,526.99	HEALTH EQUITY INC	EMPLOYEE PAYROLL
A/P	901032	2/1/2024	100.15	PAY PLUS	3RD PARTY PAYOR FEE
A/P	500572	2/2/2024	1,564.88	AMERISOURCE	3408 EXPENSE
A/P	800476	2/2/2024	570.69	EXPERTPAY	CHILD SUPPORT
A/P	901030	2/2/2024	33.00	AUTHNET GATEWAY BILLING	3RD PARTY PAYOR FEE
A/P	901031	2/2/2024	454.73	PAY PLUS	3RD PARTY PAYOR FEE
A/P	110081	2/2/2024	311772.16	STATE COMPTLR TEXNET	IGT PAYMENT
A/P	800479	2/5/2024	2,226.37	IRS USATAXPYMT	PAYROLL TAXES
A/P	800480	2/5/2024	133,435.18	IRS USATAX PYMT	PAYROLL TAXES
A/P	901041	2/5/2024	18.31	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901042	2/5/2024	19.95	MERCHANT BANKCD	CREDIT CARD PROCESSING FEE
A/P	901043	2/5/2024	297.96	MERCHANT BANKCD	CREDIT CARD PROCESSING FEE
A/P	901044	2/5/2024	171.71	MERCHANT BANKCD	CREDIT CARD PROCESSING FEE
A/P	901045	2/5/2024	9.95	MERCHANT BANKCD	CREDIT CARD PROCESSING FEE
A/P	907047	2/5/2024	75.67	FDMS	CC MACHINE LEASE
A/P	901046	2/5/2024	156.37	MERCHANT BANKCD	CREDIT CARD PROCESSING FEE
A/P	500575	2/6/2024	3,180.13	MCKESSON	3408 EXPENSE
A/P	901039	2/6/2024	7.56	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901040	2/6/2024	32.45	FDMS	CC MACHINE LEASE
A/P	202695	2/7/2024	53.61	ADT COMMERCIAL	FIRE MONITORING
A/P	202696	2/7/2024	325.55	AMAZON CAPITAL SERVICES	VARIOUS DEPT EXPENSES
A/P	202697	2/7/2024	2,976.75	AYA HEALTHCARE INC	NURSE STAFFING
A/P	202698	2/7/2024	3,904.81	BECKMAN COULTER INC	LABORATORY SUPPLIES
A/P	202699	2/7/2024	483.50	BECTON, DICKINSON & CO (BD)	SURGICAL SUPPLIES
A/P	202700	2/7/2024	266.51	BIO-RAD LABORATORIES, INC	DIAGNOSTIC SUPPLIES
A/P	202701	2/7/2024	45.50	CALHOUN COUNTY	FUEL
A/P	202702	2/7/2024	5,720.00	CALHOUN COUNTY EMS	EMS
A/P	202703	2/7/2024	640.81	CAPITAL ONE	VARIOUS DEPT EXPENSES
A/P	202704	2/7/2024	90.36	CAREFUSION 2200, INC.	MEDICAL SUPPLIES
A/P	202705	2/7/2024	1,331.07	CDW GOVERNMENT, INC.	IT SUPPLIES / EQUIPMENT
A/P	202706	2/7/2024	593.69	CHEMAQUA	WATER TREATMENT
A/P	202707	2/7/2024	215.06	CONMED CORPORATION	SURGICAL SUPPLIES
A/P	202708	2/7/2024	354.48	COVIDIEN	MEDICAL / SURGICAL SUPPLIES
A/P	202709	2/7/2024	28.99	DANIELLE KALISEK	DIETARY SERVICES
A/P	202710	2/7/2024	692.65	DEWITT POTH & SON	OFFICE SUPPLIES
A/P	202711	2/7/2024	75.00	DOWELL PEST CONTROL	PEST CONTROL
A/P	202712	2/7/2024	449.00	ECLINICAL WORKS LLC	EMR SOFTWARE
A/P	202713	2/7/2024	40,062.50	EMERGENCY STAFFING SOLUTIONS	PHYSICIAN SERVICES
A/P	202714	2/7/2024	7,399.54	EVIDENT	CONSULTING SERVICES
A/P	202715	2/7/2024	9,215.00	FAVORITE HEALTHCARE STAFFING	NURSE STAFFING
A/P	202716	2/7/2024	1,239.87	FISHER HEALTHCARE	LABORATORY SUPPLIES
A/P	202717	2/7/2024	56.40	FRONTIER	TELEPHONE
A/P	202718	2/7/2024	7,908.33	FUJI FILM	VERTEX
A/P	202719	2/7/2024	11,102.49	GBS ADMINISTRATORS, INC.	EMPLOYEE INSURANCE
A/P	202720	2/7/2024	7,002.89	GRACE FLOORING AND GLASS	FLOOR INSTALL
A/P	202721	2/7/2024	110.20	GRAINGER	PLANT SERVICES SUPPLIES
A/P	202722	2/7/2024	1,002.88	GULF COAST PAPER COMPANY	HOUSEKEEPING SUPPLIES
A/P	202723	2/7/2024	174.00	HEALTH CARE LOGISTICS INC	PHARMACY SUPPLIES
A/P	202724	2/7/2024	5,070.61	HOLT CAT	PURCHASED SERVICES - PLANT OPS
A/P	202725	2/7/2024	26,663.00	HOSPITAL CARE CONSULTANTS INC.	HOSPITALIST PHYSICIAN SERVICES
A/P	202726	2/7/2024	1,015.86	M G TRUST	PAYROLL DEDUCT
A/P	202727	2/7/2024	354.01	MARKS PLUMBING PARTS	PLANT SERVICES SUPPLIES
A/P	202728	2/7/2024	229.70	MEDI-DOSE, INC	PHARMACY SUPPLIES
A/P	202729	2/7/2024	1,603.00	MEDICAL AIR SERVICES ASSOC.	PAYROLL DEDUCT
A/P	202730	2/7/2024	522.18	MEDLINE INDUSTRIES INC	MEDICAL SUPPLIES
A/P	202731	2/7/2024	25.00	MEMORIAL MEDICAL CLINIC	PAYROLL DEDUCTIONS
A/P	202732	2/7/2024	1,656.44	MERCK SHARP & DOHME CORP	INVENTORY PHARMACY
A/P	202733	2/7/2024	0	VOIDED	
A/P	202734	2/7/2024	18,474.90	MORRIS & DICKSON CO, LLC	PHARMACY INVENTORY
A/P	202735	2/7/2024	25,387.14	MUTUAL OF OMAHA	EMPLOYEE BENEFITS/DEDUCTIONS
A/P	202736	2/7/2024	735.25	MXR IMAGING, INC	IMAGING SUPPLIES
A/P	202737	2/7/2024	330.56	PARTSOURCE, LLC	MEDICAL EQUIP REPAIR SUPPLIES
A/P	202738	2/7/2024	3,085.29	PROVATION	APEX HARDWARE/SOFTWARE
A/P	202739	2/7/2024	1,738.62	REPUBLIC SERVICES, INC.	TRASH SERVICES
A/P	202740	2/7/2024	703.81	SAM'S CLUB DIRECT	MISCELLANEOUS SUPPLIES
A/P	202741	2/7/2024	888.00	SHANMEI MARTINEZ	DEA REGISTRATION FEE
A/P	202742	2/7/2024	2,525.00	SOMETHING MORE MEDIA, INC.	ADVERTISING
A/P	202743	2/7/2024	23,583.75	SPECIALTY PROFESSIONAL	NURSE STAFFING
A/P	202744	2/7/2024	219.80	STERIS CORPORATION	SURGICAL SUPPLIES
A/P	202745	2/7/2024	3,315.00	SURGICAL DIRECT SOUTH	SUPPLIES
A/P	202746	2/7/2024	10,000.00	T-SYSTEM, INC	PLATFORM MIGRATION
A/P	202747	2/7/2024	8,250.00	TEXAS SELECT STAFFING, LLC	CONTRACT STAFFING SERVICES
A/P	202748	2/7/2024	481.35	TMS SOUTH	PLANT SERVICES SUPPLIES
A/P	202749	2/7/2024	3,467.50	TRIAGE, LLC	AGENCY STAFFING
A/P	202750	2/7/2024	173.40	ULINE	SUPPLIES / EQUIPMENT
A/P	202751	2/7/2024	6,777.53	UNIFIRST HOLDINGS INC	LAUNDRY

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A/P	202752	2/7/2024	590.75	WAGeworks	ADMIN FEE
A/P	202753	2/7/2024	9,281.67	WERFEN USA LLC	MEDICAL / LABORATORY SUPPLIES
A/P	202762	2/7/2024	195.81		PATIENT REFUND
A/P	202763	2/7/2024	25.00		PATIENT REFUND
A/P	202764	2/7/2024	12.50		PATIENT REFUND
A/P	202765	2/7/2024	1,181.94		PATIENT REFUND
A/P	202766	2/7/2024	275.00		PATIENT REFUND
A/P	202767	2/7/2024	47.84		PATIENT REFUND
A/P	202768	2/7/2024	10.00		PATIENT REFUND
A/P	202769	2/7/2024	168.56		PATIENT REFUND
A/P	901037	2/7/2024	56.77	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901038	2/7/2024	117.37	CLEARGAGE	PATIENT FINANCING SERVICE
A/P	800478	2/8/2024	16,126.93	WIRE OUT HEALTH EQUITY	WAGeworks
A/P	901036	2/8/2024	25.12	PAY PLUS	3RD PARTY PAYOR FEE
A/P	500574	2/9/2024	1,203.66	AMERISOURCE	340B EXPENSE
A/P	901035	2/9/2024	358.89	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901061	2/12/2024	5.02	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901062	2/12/2024	715.20	TSYS	CC MACHINE FEES
A/P	901063	2/12/2024	129.00	TSYS	CC MACHINE FEES
A/P	901064	2/12/2024	522.09	TSYS	CC MACHINE FEES
A/P	901065	2/12/2024	58.60	TSYS	CC MACHINE FEES
A/P	901066	2/12/2024	277.13	TSYS	CC MACHINE FEES
A/P	901067	2/12/2024	1,607.97	TSYS	CC MACHINE FEES
A/P	901068	2/12/2024	1,955.99	TSYS	CC MACHINE FEES
A/P	901069	2/12/2024	249.65	TSYS	CC MACHINE FEES
A/P	901060	2/13/2024	54.05	PAY PLUS	3RD PARTY PAYOR FEE
A/P	800486	2/13/2024	69499.78	HPHG LLC MEMEDCTRP	90 DEGREE HEALTH INSURANCE PREMIUMS
A/P	500579	2/13/2024	5635.35	MCKESSON	340 B EXPENSE
A/P	202770	2/14/2024	1,791.00	3WON, LLC	CREDENTIALING
A/P	202771	2/14/2024	2,585.67	ACE HARDWARE 15521	VARIOUS DEPT EXPENSES
A/P	202772	2/14/2024	1,400.00	ACUTE CARE INC	RFID FEE
A/P	202773	2/14/2024	149.00	ALAMO SCIENTIFIC, INC	MEDICAL SUPPLIES
A/P	202774	2/14/2024	1,700.00	ALCOR SCIENTIFIC	LABORATORY ANNUAL AGREEMENT
A/P	202775	2/14/2024	280.96	AMAZON CAPITAL SERVICES	VARIOUS DEPT EXPENSES
A/P	202776	2/14/2024	82.99	ANNOUNCEMENTS PLUS TOO AGAIN	PRINTING/ COPIES
A/P	202777	2/14/2024	5,487.75	AYA HEALTHCARE INC	NURSE STAFFING
A/P	202778	2/14/2024	594.00	AZALEA HEALTH	EHR PROCESSING FEES
A/P	202779	2/14/2024	337.25	BAXTER HEALTHCARE	MEDICAL/NURSING SUPPLIES
A/P	202780	2/14/2024	1,380.10	BAYER HEALTHCARE	MEDICAL/CT SUPPLIES
A/P	202781	2/14/2024	9,433.10	BECKMAN COULTER INC	LABORATORY SUPPLIES
A/P	202782	2/14/2024	3,383.65	BEYER MECHANICAL LTD	THERMOSTAT
A/P	202783	2/14/2024	773.00	BOSTON SCIENTIFIC CORPORATION	MEDICAL SUPPLIES
A/P	202784	2/14/2024	305.80	BRIGGS HEALTHCARE	ER REGISTER BOOK
A/P	202785	2/14/2024	5,563.27	BRIGHTLY SOFTWARE INC.	THEWORKHUB -PREMIUM FOR HEALTHCARE
A/P	202786	2/14/2024	357.72	C R BARD INC	SURGICAL SUPPLIES
A/P	202787	2/14/2024	183,981.40	CALHOUN COUNTY	LOAN PAYMENT AND ELECTRICITY
A/P	202788	2/14/2024	795.76	CARDINAL HEALTH 414, INC.	MEDICAL SUPPLIES
A/P	202789	2/14/2024	3,078.92	CDW GOVERNMENT, INC.	IT SUPPLIES / EQUIPMENT
A/P	202790	2/14/2024	1,207.79	CLEARFLY	TELEPHONE
A/P	202791	2/14/2024	926.00	COASTAL OFFICE SOLUTIONS	OFFICE SUPPLIES
A/P	202792	2/14/2024	524.56	COMBINED INSURANCE	PAYROLL DEDUCT
A/P	202793	2/14/2024	316.23	COMPADRES DESIGN INC	EMC REPAIR
A/P	202794	2/14/2024	725.05	CONMED CORPORATION	SURGICAL SUPPLIES
A/P	202795	2/14/2024	116.20	DETAR HOSPITAL	LABORATORY SERVICES
A/P	202796	2/14/2024	906.84	DEWITT POTH & SON	OFFICE SUPPLIES
A/P	202797	2/14/2024	50,311.25	DIAMOND HEALTHCARE CORP	PURCHASED SERVICES
A/P	202798	2/14/2024	221,499.34	DISCOVERY MEDICAL NETWORK INC	PHYSICIAN SERVICES
A/P	202799	2/14/2024	4,000.00	DR JEANNINE GRIFFIN	OB SERVICES
A/P	202800	2/14/2024	8,800.00	DR JOHN CLINTON	OB SERVICES
A/P	202801	2/14/2024	10,500.00	DR. JOHN WRIGHT	OB SERVICES
A/P	202802	2/14/2024	5,500.00	DR. TIMU KWI	OB SERVICES
A/P	202803	2/14/2024	760.20	DRIESSEN WATER INC. (CULLIGAN)	WATER
A/P	202804	2/14/2024	321.26	EITAN GROUP NORTH AMERICA, INC	INFUSION SUPPLIES
A/P	202805	2/14/2024	175.00	EMERGENCY STAFFING SOLUTIONS	PHYSICIAN SERVICES
A/P	202806	2/14/2024	5,500.00	EQUALIZE RCM SERVICES	CODING & BILLING
A/P	202807	2/14/2024	230.01	FEDERAL EXPRESS CORP.	FREIGHT
A/P	202808	2/14/2024		0 VOIDED	
A/P	202809	2/14/2024	27,357.30	FISHER HEALTHCARE	LABORATORY SUPPLIES
A/P	202810	2/14/2024	9,266.25	FORVIS	AUDITING FEES
A/P	202811	2/14/2024	25.83	FRONTIER	TELEPHONE
A/P	202812	2/14/2024	12,823.59	GE PRECISION HEALTHCARE, LLC	EQUIP LEASE & MED SUPPLIES
A/P	202813	2/14/2024	178.24	GRAINGER	PLANT SERVICES SUPPLIES
A/P	202814	2/14/2024	10,525.69	GREAT AMERICA FINANCIAL SVCS	COPIER LEASE
A/P	202815	2/14/2024	25.00	GULF COAST DELIVERY	REPORTS/ SLIDES
A/P	202816	2/14/2024	1,080.23	GULF COAST PAPER COMPANY	HOUSEKEEPING SUPPLIES
A/P	202817	2/14/2024	64.62	H + H SYSTEM, INC.	PHARMACY SUPPLIES
A/P	202818	2/14/2024	3,400.00	HEALTH SOLUTIONS DIETETICS	DIETARY SERVICES
A/P	202819	2/14/2024	4,610.52	HEALTHCARE FINANCIAL SERVICES	LEASE
A/P	202820	2/14/2024	573.53	HEWLETT-PACKARD	RENTAL/DOCUMENTATION FEE

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A/P	202822	2/14/2024	6,537.73	HOLT CAT	PURCHASED SERVICES - PLANT OPS
A/P	202823	2/14/2024	1,343.17	IRON MOUNTAIN	SHREDDING
A/P	202824	2/14/2024	28,871.72	ITA RESOURCES INC	RESPIRATORY PROF FEES
A/P	202825	2/14/2024	4,161.46	ITERSOURCE CORPORATION	MONTHLY SUPPORT
A/P	202826	2/14/2024	75.68	LANGUAGE LINE SERVICES	INTEPRETATION SERVICES
A/P	202827	2/14/2024	567.94	LOWE'S BUSINESS ACCT/SYNCR	MISCELLANEOUS SUPPLIES
A/P	202828	2/14/2024	2,088.78	MEDICAL DATA SYSTEMS, INC.	BUSINESS SERVICES
A/P	202829	2/14/2024	0	VOIDED	
A/P	202830	2/14/2024	0	VOIDED	
A/P	202831	2/14/2024	7,417.93	MEDLINE INDUSTRIES INC	MEDICAL SUPPLIES
A/P	202832	2/14/2024	0	VOIDED	
A/P	202833	2/14/2024	0	VOIDED	
A/P	202834	2/14/2024	31,870.04	MORRIS & DICKSON CO, LLC	PHARMACY INVENTORY
A/P	202835	2/14/2024	173.73	MXR IMAGING, INC	IMAGING SUPPLIES
A/P	202836	2/14/2024	193.03	NACOGDOCHES TRANSCRIPTION	TRANSCRIPTION
A/P	202837	2/14/2024	95.30	NORTH COAST MEDICAL INC	MEDICAL SUPPLIES
A/P	202838	2/14/2024	472.50	OCCUPRO LLC	PROVIDER LICENSE
A/P	202839	2/14/2024	1,221.82	ORTHO CLINICAL DIAGNOSTICS	LABORATORY SUPPLIES
A/P	202840	2/14/2024	131.90	POWER HARDWARE	PLANT SERVICES SUPPLIES
A/P	202841	2/14/2024	2,729.72	PRESS GANEY ASSOCIATES, INC.	PROFESSIONAL FEES
A/P	202842	2/14/2024	5,371.57	SIEMENS FINANCIAL SERVICES	DIAGNOSTIC IMAGING EQUIP LEASE
A/P	202843	2/14/2024	5,854.20	SIEMENS MEDICAL SOLUTIONS INC	MAMMO EXAM EQUIP LEASE
A/P	202844	2/14/2024	410.00	SIGN AD, LTD.	ADVERTISING
A/P	202845	2/14/2024	3,750.00	SOUTH TEXAS BLOOD & TISSUE CEN	BLOOD
A/P	202846	2/14/2024	1,842.00	SPARKLIGHT	INTERNET/ CABLE
A/P	202847	2/14/2024	7,338.75	SPECIALTY PROFESSIONAL	NURSE STAFFING
A/P	202848	2/14/2024	420.00	ST DAVIDS HEALTHCARE	CONNECTIVITY FEE
A/P	202849	2/14/2024	505.55	STAPLES	OFFICE SUPPLIES
A/P	202850	2/14/2024	2,795.69	STERICYCLE, INC	WASTE DISPOSAL
A/P	202851	2/14/2024	12,620.42	T-SYSTEM, INC	PHYSICIAN TRACKING/HOSTING
A/P	202852	2/14/2024	541.00	TELEFLEX MEDICAL	MEDICAL SUPPLIES
A/P	202853	2/14/2024	6,825.00	TEXAS A&M	CONTINUING EDUCATION/TRAINING
A/P	202854	2/14/2024	500.00	TEXAS DEPARTMENT OF STATE	RADIATION LICENSE
A/P	202855	2/14/2024	8,310.75	TEXAS HOSPITAL ASSOCIATION	COMPASS 2024
A/P	202856	2/14/2024	4,684.00	TEXAS MUTUAL INSURANCE CO	WORKERS COMP
A/P	202857	2/14/2024	8,167.50	TEXAS SELECT STAFFING, LLC	CONTRACT STAFFING SERVICES
A/P	202858	2/14/2024	1,452.07	THE COMPLIANCE TEAM, INC	MM CLINIC TRAVEL
A/P	202859	2/14/2024	901.00	TIGER SUPPLIES INC.	MEDICAL SUPPLIES
A/P	202860	2/14/2024	1,534.62	TK ELEVATOR CORPORATION	BRONZE/OIL/GREASE
A/P	202861	2/14/2024	888.00	TRACI SHEFCIK	REIMBURSEMENT BOOKS/RENEWAL
A/P	202862	2/14/2024	416.51	TRI-ANIM HEALTH SERVICES INC	RESPIRATORY SUPPLIES
A/P	202863	2/14/2024	3,467.50	TRIAGE, LLC	AGENCY STAFFING
A/P	202864	2/14/2024	710.69	TRIOSE, INC	FREIGHT
A/P	202865	2/14/2024	1,117.95	ULINE	SUPPLIES / EQUIPMENT
A/P	202866	2/14/2024	0	VOIDED	
A/P	202867	2/14/2024	9,895.11	UNIFIRST HOLDINGS INC	LAUNDRY
A/P	202868	2/14/2024	1,269.18	UPDOX LLC	HIPPA COMPLIANT eFAX
A/P	202869	2/14/2024	27.10	VICTORIA ADVOCATE	NEWSPAPER
A/P	202870	2/14/2024	131.25	WAGWORKS, INC	MONTHLY FEE
A/P	202871	2/14/2024	6,800.14	WERFEN USA LLC	MEDICAL / LABORATORY SUPPLIES
A/P	202872	2/14/2024	604.00	WISCONSIN STATE LABORATORY	LABORATORY CERTIFICATION
A/P	901059	2/14/2024	0.40	PAY PLUS	3RD PARTY PAYOR FEE
A/P	202879	2/15/2024	326,650.15	HHSC	DSH FUNDS
A/P	800484	2/15/2024	186,021.61	TEXAS COUNTY DRS	RETIREMENT FUNDING
A/P	800485	2/15/2024	60,284.00	WIRE OUT CAPTIVE	INSURANCE COLLATERAL
A/P	901054	2/15/2024	17.64	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901055	2/15/2024	120.09	FDMS	CC MACHINE LEASE
A/P	901056	2/15/2024	80.06	FDMS	CC MACHINE LEASE
A/P	901057	2/15/2024	45.64	FDMS	CC MACHINE LEASE
A/P	901058	2/15/2024	40.03	FDMS	CC MACHINE LEASE
A/P	500578	2/16/2024	601.87	AMERISOURCE	340B EXPENSE
A/P	800483	2/16/2024	570.69	EXPERTPAY	CHILD SUPPORT
A/P	800482	2/16/2024	1367.83	HEALTH EQUITY	FSR/HAS FUNDING
A/P	500577	2/20/2024	170.43	MCKESSON	340 B EXPENSE
A/P	800481	2/20/2024	115,981.52	IRS USATAXPYMT	PAYROLL TAXES
A/P	901051	2/20/2024	2,386.38	WIRE OUT CBNA	CITIBANK CREDIT CARD PAYMENT
A/P	901052	2/20/2024	4.02	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901053	2/20/2024	163.85	PAY PLUS	3RD PARTY PAYOR FEE
A/P	700127	2/20/2024	1875.13	WEBFILE TAX PYMT	SALES TAX
A/P	901050	2/21/2024	65.06	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901049	2/22/2024	3.30	PAY PLUS	3RD PARTY PAYOR FEE
A/P	202880	2/23/2024	498.05	CHEYENNE NESSA	REISSUE PAYROLL CHECK
A/P	500576	2/23/2024	1,020.39	AMERISOURCE	340B EXPENSE
A/P	901048	2/23/2024	29.23	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901074	2/26/2024	11.24	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901073	2/27/2024	164.03	PAY PLUS	3RD PARTY PAYOR FEE
A/P	500581	2/27/2024	4320.05	MCKESSON	340 B EXPENSE
A/P	203014	2/28/2024	300.00	3WON, LLC	CREDENTIALING
A/P	203015	2/28/2024	336.32	ADVANCED STERILIZATION PRODUCT	SUPPLIES

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A/P	203016	2/28/2024	288.49	ALIMED INC.	MEDICAL SUPPLIES
A/P	203017	2/28/2024	1,919.33	AMAZON CAPITAL SERVICES	VARIOUS DEPT EXPENSES
A/P	203018	2/28/2024	24,310.54	AMERISOURCEBERGEN DRUG CORP	PHARMACY INVENTORY
A/P	203019	2/28/2024	24.00	AQUA BEVERAGE COMPANY	WATER
A/P	203020	2/28/2024	0	VOIDED	
A/P	203021	2/28/2024	5,034.50	BAXTER HEALTHCARE	MEDICAL/NURSING SUPPLIES
A/P	203022	2/28/2024	0	VOIDED	
A/P	203023	2/28/2024	6,023.48	BECKMAN COULTER INC	LABORATORY SUPPLIES
A/P	203024	2/28/2024	1,758.50	BEYER MECHANICAL LTD	THERMOSTAT
A/P	203025	2/28/2024	20,736.88	BIOMERIEUX, INC	LABORATORY SUPPLIES
A/P	203026	2/28/2024	324.87	BOHLS BEARING & POWER TRANS	PLANT SERVICES SUPPLIES
A/P	203027	2/28/2024	19.25	BOSART LOCK & KEY INC	LOCK AND KEY SERVICES
A/P	203028	2/28/2024	3,580.00	CAREFUSION SOLUTIONS, LLC	SURGICAL INVENTORY
A/P	203029	2/28/2024	279.37	CDW GOVERNMENT, INC.	IT SUPPLIES / EQUIPMENT
A/P	203030	2/28/2024	1,699.00	CERVEY, LLC	LICENSE FEE
A/P	203031	2/28/2024	58,546.14	CITIZENS MEDICAL CENTER	ANESTHESIA SERVICES
A/P	203032	2/28/2024	2,261.37	CITY OF PORT LAVACA	UTILITIES - WATER
A/P	203033	2/28/2024	14,892.21	CLINICAL PATHOLOGY LABS	LABORATORY SERVICES
A/P	203034	2/28/2024	927.60	COCA COLA SOUTHWEST BEVERAGES	BEVERAGES
A/P	203035	2/28/2024	457.39	COOPER SURGICAL INC	SURGICAL SUPPLIES
A/P	203036	2/28/2024	2,545.85	CORROHEALTH, INC.	CODING SERVICES
A/P	203037	2/28/2024	1,474.50	COVIDIEN SALES LLC	MEDICAL / SURGICAL SUPPLIES
A/P	203038	2/28/2024	29,671.82	CULINARY CONCESSIONS LLC	DIETARY SERVICES
A/P	203039	2/28/2024	1,148.32	CYRACOM LLC	INTERPRETATION SERVICES
A/P	203040	2/28/2024	1,406.28	DEWITT POTH & SON	OFFICE SUPPLIES
A/P	203041	2/28/2024	96,043.72	DISCOVERY MEDICAL NETWORK INC	PHYSICIAN SERVICES
A/P	203042	2/28/2024	610.00	DOWELL PEST CONTROL	PEST CONTROL
A/P	203043	2/28/2024	435.53	ECLINICAL WORKS LLC	INFUSION MNTHLY SERVICE
A/P	203044	2/28/2024	273.08	EITAN GROUP NORTH AMERICA, INC	INFUSION SUPPLIES
A/P	203045	2/28/2024	40,062.50	EMERGENCY STAFFING SOLUTIONS	PHYSICIAN SERVICES
A/P	203046	2/28/2024	10.99	EQUIFAX WORKFORCE SOLUTIONS	SERV FEE ANCILLARY
A/P	203047	2/28/2024	371.48	EQUIPMENTSHARE.COM INC	PLANT SERVICES EQUIP RENTAL
A/P	203048	2/28/2024	51,580.70	EVIDENT	SOFTWARE MAINTENANCE/TECH SUPPORT, CONSULTING SERVICES
A/P	203049	2/28/2024	545.00	FASTHEALTH CORPORATION	WEBSITE
A/P	203050	2/28/2024	143.30	FEDERAL EXPRESS CORP.	FREIGHT
A/P	203051	2/28/2024	1,470.00	FIRETRON, INC	AIR HANDLER/ CABLE
A/P	203052	2/28/2024	7,262.78	FIRST INSURANCE FUNDING	HOSPITAL INSURANCE
A/P	203053	2/28/2024	0	VOIDED	
A/P	203054	2/28/2024	17,645.57	FISHER HEALTHCARE	LABORATORY SUPPLIES
A/P	203055	2/28/2024	1,297.15	FRONTIER	TELEPHONE
A/P	203056	2/28/2024	256.78	GE HEALTHCARE	EQUIP LEASE & MED SUPPLIES
A/P	203057	2/28/2024	55.42	GRAINGER	PLANT SERVICES SUPPLIES
A/P	203058	2/28/2024	2,772.09	GULF COAST PAPER COMPANY	HOUSEKEEPING SUPPLIES
A/P	203059	2/28/2024	484.00	HEALTHCARE CODING & CONSULTING	PRO CLINIC AUDIT/ CHARTS
A/P	203060	2/28/2024	573.53	HEWLETT-PACKARD	RENTAL/DOCUMENTATION FEE
A/P	203061	2/28/2024	607.45	HILL-ROM COMPANY, INC	MEDICAL EQUIP / SUPPLIES
A/P	203062	2/28/2024	819.00	HOLLAND & KNIGHT LLP	LEGAL SERVICES
A/P	203063	2/28/2024	236.25	HOLOGIC INC	RADIOLOGY SUPPLIES
A/P	203064	2/28/2024	1,000.00	HOSPICE OF SOUTH TEXAS	ADVERTISING- GOLD MEMBER
A/P	203065	2/28/2024	23,663.00	HOSPITAL CARE CONSULTANTS INC.	PHYSICIAN SERVICES
A/P	203066	2/28/2024	15,292.94	HUNTER PHARMACY SERVICES	PAYROLL
A/P	203067	2/28/2024	736.56	INOVALON PROVIDER INC.	SCHEDULING SERVICE
A/P	203068	2/28/2024	9,000.00	JINDAL X LLC	REVENUE CYCLE MANAGEMENT
A/P	203069	2/28/2024	1,128.00	JOHNSON & JOHNSON	ENDO SUPPLIES
A/P	203070	2/28/2024	150.40	JOHNSTONE SUPPLY	PLANT SERVICES SUPPLIES
A/P	203071	2/28/2024	51.29	LABCORP OF AMERICA HOLDINGS	LABORATORY SERVICES
A/P	203072	2/28/2024	1,140.86	M G TRUST	PAYROLL DEDUCT
A/P	203073	2/28/2024	500.00	MANAGED CARE PARTNERS INC.	PROFESSIONAL FEES-INCEPTION
A/P	203074	2/28/2024	228.44	MARKETLAB, INC	LAB SUPPLIES
A/P	203075	2/28/2024	0	VOIDED	
A/P	203076	2/28/2024	0	VOIDED	
A/P	203077	2/28/2024	0	VOIDED	
A/P	203078	2/28/2024	0	VOIDED	
A/P	203079	2/28/2024	0	VOIDED	
A/P	203080	2/28/2024	0	VOIDED	
A/P	203081	2/28/2024	0	VOIDED	
A/P	203082	2/28/2024	0	VOIDED	
A/P	203083	2/28/2024	0	VOIDED	
A/P	203084	2/28/2024	0	VOIDED	
A/P	203085	2/28/2024	0	VOIDED	
A/P	203086	2/28/2024	0	VOIDED	
A/P	203087	2/28/2024	0	VOIDED	
A/P	203088	2/28/2024	0	VOIDED	
A/P	203089	2/28/2024	0	VOIDED	
A/P	203090	2/28/2024	0	VOIDED	
A/P	203091	2/28/2024	56,985.15	MCKESSON MEDICAL SURGICAL INC	MEDICAL SUPPLIES
A/P	203092	2/28/2024	1,836.00	MEDICAL AIR SERVICES ASSOC.	PAYROLL DEDUCT
A/P	203093	2/28/2024	7,500.00	MEDICAL COMPUTING SOLUTIONS	TECH SUPPORT SERVICE
A/P	203094	2/28/2024	0	VOIDED	

<u>BANK CODE</u>	<u>CK #</u>	<u>DATE</u>	<u>AMOUNT</u>	<u>PAYEE</u>	<u>NOTES</u>
A/P	203095	2/28/2024	0	VOIDED	
A/P	203096	2/28/2024	0	VOIDED	
A/P	203097	2/28/2024	51,974.71	MEDLINE INDUSTRIES INC	MEDICAL SUPPLIES
A/P	203098	2/28/2024	45.00	MEMORIAL MEDICAL CLINIC	PAYROLL DEDUCTIONS
A/P	203099	2/28/2024	136.20	METTLER-TOLEDO RAININ, LLC	LABORATORY SUPPLIES
A/P	203100	2/28/2024	182.18	MMC AUXILIARY GIFT SHOP	PAYROLL DEDUCT
A/P	203101	2/28/2024	1,600.00	MORENO BROS BRICK CONTRACTOR	LABOR/MATERIAL
A/P	203102	2/28/2024	0	VOIDED	
A/P	203103	2/28/2024	28,548.78	MORRIS & DICKSON CO, LLC	PHARMACY INVENTORY
A/P	203104	2/28/2024	25,374.36	MUTUAL OF OMAHA	MONTHLY PREMIUMS-SUPPLEMENTAL INSURANCE
A/P	203105	2/28/2024	294.57	MXR IMAGING, INC	IMAGING SUPPLIES
A/P	203106	2/28/2024	164.08	NACOGDOCHES TRANSCRIPTION	TRANSCRIPTION
A/P	203107	2/28/2024	451.00	NEOGENOMICS LABORATORIES	LAB SERVICES
A/P	203108	2/28/2024	1,000.00	NEXION HEALTH AT NAVASOTA INC	TELEMEDICINE
A/P	203109	2/28/2024	2,672.01	OLYMPUS AMERICA INC	SURGICAL SUPPLIES
A/P	203110	2/28/2024	837.07	ORTHO CLINICAL DIAGNOSTICS	LABORATORY SUPPLIES
A/P	203111	2/28/2024	3,084.00	PARAREV	REV INTEGRITY PROG/ QTRLY PROCESSING
A/P	203112	2/28/2024	0	VOIDED	
A/P	203113	2/28/2024	11,075.24	PHILIPS HEALTHCARE	CARDIOGRAPH
A/P	203114	2/28/2024	1,425.00	PL-CPR, LLC	CPR CERTIFICATIONS/TRAINING
A/P	203115	2/28/2024	2,208.77	POC ELECTRIC, LLC	INSTALLATION
A/P	203116	2/28/2024	204.36	PRECISION DYNAMICS CORP (PDC)	MEDICAL SUPPLIES
A/P	203117	2/28/2024	4,196.58	PRO ENERGY PARTNERS LLC	FUEL/PLANT OPS/ENERGY SERVICES
A/P	203118	2/28/2024	203.52	QUVA PHARMA INC	PHARMACY INVENTORY
A/P	203119	2/28/2024	900.00	RADCOM ASSOCIATES, LLC	MEDICAL PHYSICS
A/P	203120	2/28/2024	60.00	RAPID PRINTING LLC	MISCELLANEOUS PRINTING
A/P	203121	2/28/2024	7,000.00	REPUBLIC PAIN SPECIALISTS	PROFESSIONAL FEES
A/P	203122	2/28/2024	413.52	SHERWIN WILLIAMS	PLANT SERVICE SUPPLIES
A/P	203123	2/28/2024	410.00	SIGN AD, LTD.	ADVERTISING
A/P	203124	2/28/2024	27,161.31	SINGLETON ASSOCIATES, P.A.	ONSITE SERVICES RADIOLOGY
A/P	203125	2/28/2024	141.36	SPARKLIGHT	INTERNET/ CABLE
A/P	203126	2/28/2024	550.00	STANFORD VACUUM SERVICE	GREASE TRAP
A/P	203127	2/28/2024	193.34	STAPLES	OFFICE SUPPLIES
A/P	203128	2/28/2024	472.91	STERIS CORPORATION	SURGICAL SUPPLIES
A/P	203129	2/28/2024	2,721.30	STRYKER SALES CORP	MEDICAL EQUIPMENT / SUPPLIES
A/P	203130	2/28/2024	2,224.82	STRYKER SUSTAINABILITY	SURGICAL SUPPLIES
A/P	203131	2/28/2024	541.00	TELEFLEX MEDICAL	MEDICAL SUPPLIES
A/P	203132	2/28/2024	3,000.00	TEXAS ELITE THERAPY TEAM LLC	JAN SERVICE
A/P	203133	2/28/2024	12,347.50	TEXAS SELECT STAFFING, LLC	CONTRACT STAFFING SERVICES
A/P	203134	2/28/2024	310.53	THE REYNOLDS COMPANY	PLANT SERVICES SUPPLIES
A/P	203135	2/28/2024	901.00	TIGER SUPPLIES INC.	MEDICAL SUPPLIES
A/P	203136	2/28/2024	116.60	TMS SOUTH	PLANT SERVICES SUPPLIES
A/P	203137	2/28/2024	6,761.62	TRIAGE, LLC	AGENCY STAFFING
A/P	203138	2/28/2024	145.24	TRIOSE, INC	FREIGHT
A/P	203139	2/28/2024	2,568.54	TRIZETTO PROVIDER SOLUTIONS	MAINT FEE/ PATIENT STATEMENT
A/P	203140	2/28/2024	0	VOIDED	
A/P	203141	2/28/2024	17,069.42	UNIFIRST HOLDINGS INC	LAUNDRY
A/P	203142	2/28/2024	337.36	UNIFORM ADVANTAGE	SUPPLIES/ UNIFORMS
A/P	203143	2/28/2024	1,984.78	US MED-EQUIP, LLC	SUPPLIES
A/P	203144	2/28/2024	5,503.47	WERFEN USA LLC	MEDICAL / LABORATORY SUPPLIES
A/P	203145	2/28/2024	246.00	WISCONSIN STATE LABORATORY	LABORATORY CERTIFICATION
A/P	203147	2/28/2024	0	VOIDED	
A/P	901072	2/28/2024	605.46	PAY PLUS	3RD PARTY PAYOR FEE
A/P	901071	2/29/2024	33.34	PAY PLUS	3RD PARTY PAYOR FEE

A/P TOTALS 3,052,280.87

NHG	205	2/7/2024	24,759.09	MMC OPERATING
NHF	238	2/7/2024	10,670.52	MMC OPERATING
NHB	266	2/7/2024	12,645.12	MMC OPERATING
NHC	324	2/7/2024	9,432.20	MMC OPERATING
NHC	326	2/7/2024	18,900.00	TUSCANY
NHA	1230	2/7/2024	34,181.19	MMC OPERATING
NHS	1291	2/7/2024	10,233.12	MMC OPERATING
TUS	1147	2/28/2024	534.17	MMC OPERATING
NHG	206	2/29/2024	71,896.17	MMC OPERATING
NHF	239	2/29/2024	307.32	MMC OPERATING
NHB	267	2/29/2024	330.24	MMC OPERATING
NHC	327	2/29/2024	259.29	MMC OPERATING
NHC	328	2/29/2024	48,343.00	TUSCANY VILLAGE
BSL	1037	2/29/2024	68,999.83	MMC OPERATING
NHA	1231	2/29/2024	817.61	MMC OPERATING
NHS	1292	2/29/2024	245.26	MMC OPERATING
NURSING HOME TOTALS			<u>312,554.13</u>	

ICP	12627	2/9/2024	658.90	MEMORIAL MEDICAL CENTER
ICP	12628	2/9/2024	4,166.67	MEMORIAL MEDICAL CENTER

<u>BANK CODE</u>	<u>CK #</u>	<u>DATE</u>	<u>AMOUNT</u>	<u>PAYEE</u>	<u>NOTES</u>
ICP	12629	2/9/2024	26.93	MEMORIAL MEDICAL CENTER	
ICP	12630	2/9/2024	67.37	SINGLETON ASSOCIATES PA	
ICP TOTAL			<u>4,919.87</u>		
A/P	202754	2/7/2024	7,893.04	ASHFORD GARDENS	
A/P	202756	2/7/2024	7,486.86	BROADMOOR AT CREEKSIDE PARK	
A/P	202757	2/7/2024	6,618.30	FORTBEND HEALTHCARE CENTER	
A/P	202758	2/7/2024	82,010.14	GOLDENCREEK HEALTHCARE	
A/P	202759	2/7/2024	2,319.65	SOLERA WEST HOUSTON	
A/P	202760	2/7/2024	7,794.83	THE CRESCENT	
A/P	202761	2/7/2024	28,080.77	TUSCANY VILLAGE	
A/P	202755	2/7/2024	84,803.15	BETHANY SENIOR LIVING	
A/P	202874	2/14/2024	8,930.56	GOLDENCREEK HEALTHCARE	
A/P	202875	2/14/2024	22,108.10	GULF POINTE PLAZA	
A/P	202876	2/14/2024	13,327.67	SOLERA WEST HOUSTON	
A/P	202877	2/14/2024	16,720.00	THE CRESCENT	
A/P	202878	2/14/2024	25,274.10	TUSCANY VILLAGE	
A/P	202873	2/14/2024	27,964.45	BETHANY SENIOR LIVING	
A/P	203146	2/28/2024	84,028.28	ASHFORD GARDENS	
A/P	203149	2/28/2024	38,931.28	BROADMOOR AT CREEKSIDE PARK	
A/P	203150	2/28/2024	33,565.59	FORTBEND HEALTHCARE CENTER	
A/P	203151	2/28/2024	163,270.86	GOLDENCREEK HEALTHCARE	
A/P	203152	2/28/2024	4,524.69	GULF POINTE PLAZA	
A/P	203153	2/28/2024	31,331.02	SOLERA WEST HOUSTON	
A/P	203154	2/28/2024	28,511.69	THE CRESCENT	
A/P	203155	2/28/2024	44,134.17	TUSCANY VILLAGE	
A/P	203148	2/28/2024	140,154.96	BETHANY SENIOR LIVING	
NURSING HOME AP TOTALS			<u>909,784.16</u>		
P/R	63382	2/2/2024	18.47	PAY PERIOD 1/12/24-1/24/24	
P/R	63383	2/2/2024	2,588.81	PAY PERIOD 1/12/24-1/24/24	
P/R	63384	2/2/2024	2,032.69	PAY PERIOD 1/12/24-1/24/24	
P/R	63385	2/2/2024	479.30	PAY PERIOD 1/12/24-1/24/24	
P/R	63386	2/2/2024	838.48	PAY PERIOD 1/12/24-1/24/24	
P/R	63387	2/16/2024	463.87	PAY PERIOD 1/25/24-02/08/24	
P/R	63388	2/16/2024	312.09	PAY PERIOD 1/25/24-02/08/24	
P/R	63389	2/16/2024	925.50	PAY PERIOD 1/25/24-02/08/24	
P/R	999999	2/2/2024	398,169.12	PAY PERIOD 1/12/24-1/24/24	
P/R	999999	2/16/2024	<u>370,399.87</u>	PAY PERIOD 1/25/24-02/08/24	
P/R TOTALS			<u>776,228.20</u>		
A/P	202821	2/14/2024	(326,650.15)	HHSC	
Voided AP Checks			<u>(326,650.15)</u>		
Grand Total			<u>4,739,117.08</u>		

**MEMORIAL MEDICAL CENTER
GROSS PAYROLL REPORT - FEB 2024**

PRTitle	PRDeptName	PRTotGross
SECURITY SUPERVISOR	SECURITY	\$ 3,791.76
OPERATOR	CLINIC FS	\$ 2,949.00
LICENSED VOCATIONAL	MEMORIAL MEDICAL CLINIC	\$ 4,069.56
PURCHASING AGENT	CENTRAL SUPPLY	\$ 3,367.29
REGISTERED NURSE	MED/SURG	\$ 4,701.79
REGISTERED NURSE	MED/SURG	\$ 8,517.37
LICENSED VOCATIONAL	OBSTETRICS	\$ 4,307.88
REGISTERED NURSE	MED/SURG	\$ 9,094.22
REGISTERED NURSE	OBSTETRICS	\$ 15,002.55
REGISTERED NURSE	EMERGENCY ROOM	\$ 6,426.72
DIRECTOR OF INPT SVC	MED/SURG	\$ 7,517.80
EXECUTIVE ASSISTANT	ADMINISTRATION	\$ 4,507.20
LICENSED VOCATIONAL	SURGERY	\$ 4,850.47
MEDICAL LAB TECH	LABORATORY	\$ 5,321.05
MEDICAL TECHNOLOGIST	LABORATORY	\$ 1,308.00
LAB ASSISTANT	MMC CLINIC - LABORATORY	\$ 3,640.57
MEDICAL LAB TECH	LABORATORY	\$ 5,169.58
REGISTERED NURSE	MED/SURG	\$ 2,101.72
REGISTERED NURSE	OBSTETRICS	\$ 2,085.86
REGISTERED NURSE	EMERGENCY ROOM	\$ 962.94
REGISTERED NURSE	MED/SURG	\$ 1,200.91
CLINICAL IT SPCLST	ADMINISTRATION-CLINICAL SERVIC	\$ 6,578.62
REGISTERED NURSE	OBSTETRICS	\$ 5,702.75
REGISTERED NURSE	OBSTETRICS	\$ 1,019.07
REGISTERED NURSE	OBSTETRICS	\$ 1,352.70
REGISTERED NURSE	OBSTETRICS	\$ 7,149.05
CNO	ADMINISTRATION-CLINICAL SERVIC	\$ 12,010.48
LVN	MED/SURG	\$ 1,643.82
REGISTERED NURSE	MED/SURG	\$ 15,204.37
OCCUPATIONAL THERAPY	OCCUPATIONAL THERAPY	\$ 7,345.60
LICENSED VOCATIONAL	MED/SURG	\$ 4,930.41
NURSE PRACTITIONER	MEMORIAL MEDICAL CLINIC	\$ 8,795.20
REGISTERED NURSE	MED/SURG	\$ 7,092.94
REGISTERED NURSE	MED/SURG	\$ 4,974.66
CERTIFIED NURSE AIDE	MED/SURG	\$ 3,735.11
CERTIFIED NURSE AIDE	MED/SURG	\$ 911.00
REGISTERED NURSE	EMERGENCY ROOM	\$ 3,525.11
REGISTERED NURSE	EMERGENCY ROOM	\$ 74.00
REGISTERED NURSE	MED/SURG	\$ 6,676.55
REGISTERED NURSE	MED/SURG	\$ 5,833.56
REGISTERED NURSE	MED/SURG	\$ 4,254.70
REGISTERED NURSE	MED/SURG	\$ 1,895.50
STUDENT NURSE TECH	MED/SURG	\$ 236.66
CASE MANAGER/UR/DP	UTILIZATION REVIEW	\$ 6,271.97
REGISTERED NURSE	ICU	\$ 6,134.81
CERTIFIED NURSE AIDE	MED/SURG	\$ 190.00
REGISTERED NURSE	MED/SURG	\$ 8,410.04
CERTIFIED NURSE AIDE	MED/SURG	\$ 521.19

REGISTERED NURSE	OBSTETRICS	\$	6,764.86
REGISTERED NURSE	MED/SURG	\$	904.00
REGISTERED NURSE	SURGERY	\$	2,202.26
REGISTERED NURSE	MED/SURG	\$	5,727.36
CERTIFIED NURSE AIDE	MED/SURG	\$	2,515.29
REGISTERED NURSE	EMERGENCY ROOM	\$	885.20
REGISTERED NURSE	MED/SURG	\$	6,144.45
CERTIFIED NURSE AIDE	MED/SURG	\$	1,816.51
CERTIFIED NURSE AIDE	MED/SURG	\$	170.25
REGISTERED NURSE	MED/SURG	\$	2,357.45
LVN	MED/SURG	\$	5,436.79
LIC VOCATIONAL NURSE	MED/SURG	\$	258.38
REGISTERED NURSE	OBSTETRICS	\$	6,830.66
INFUSION NURSE	INFUSION CLINIC	\$	6,811.82
REGISTERED NURSE	ICU	\$	5,249.67
REGISTERED NURSE	MED/SURG	\$	7,746.31
REGISTERED NURSE	EMERGENCY ROOM	\$	1,463.45
CERTIFIED NURSE AIDE	MED/SURG	\$	354.75
CLINICAL COORDINATOR	MEMORIAL MEDICAL CLINIC	\$	5,645.32
REGISTERED NURSE	ICU	\$	6,887.70
LICENSED VOCATIONAL	MED/SURG	\$	3,624.63
NURSE PRACTITIONER	HOSPITAL CAMPUS RHC	\$	8,795.20
CERTIFIED NURSE AIDE	MED/SURG	\$	2,127.85
DIRECTOR OF QUALITY	ADMINISTRATION-CLINICAL SERVIC	\$	6,232.00
REG PHARM TECH SUPER	PHARMACY	\$	4,258.75
NURSE PRACTITIONER	MEMORIAL MEDICAL CLINIC	\$	8,795.20
REGISTERED NURSE	ICU	\$	9,010.54
REGISTERED NURSE	OBSTETRICS	\$	2,880.12
REGISTERED NURSE	ICU	\$	466.25
REGISTERED NURSE	ICU	\$	1,342.00
REGISTERED NURSE	ICU	\$	4,279.36
REGISTERED NURSE	ICU	\$	5,625.95
PREADMISSION NURSE	SURGERY	\$	4,522.98
REGISTERED NURSE	SURGERY	\$	6,448.55
HIM SPECIALIST	HEALTH INFORMATION MANAGEMENT	\$	3,205.00
REGISTERED NURSE	OBSTETRICS	\$	16,209.57
REGISTERED NURSE	OBSTETRICS	\$	3,891.40
REGISTERED NURSE	OBSTETRICS	\$	1,845.36
CERTIFIED STERIL TEC	SURGERY	\$	2,770.20
MATERIALS MNGMT MNGR	CENTRAL SUPPLY	\$	4,931.23
CENTRAL SUPPLY TECH	CENTRAL SUPPLY	\$	1,134.00
DIRECTOR	EMERGENCY ROOM	\$	9,088.06
REGISTERED NURSE	EMERGENCY ROOM	\$	4,790.96
REGISTERED NURSE	EMERGENCY ROOM	\$	4,925.25
REGISTERED NURSE	EMERGENCY ROOM	\$	8,674.85
REGISTERED NURSE	MED/SURG	\$	1,194.00
REGISTERED NURSE	EMERGENCY ROOM	\$	2,016.07
TRAUMA COORDINATOR	ADMINISTRATION-CLINICAL SERVIC	\$	6,142.23
REGISTERED NURSE	EMERGENCY ROOM	\$	5,846.72
REGISTERED NURSE	EMERGENCY ROOM	\$	7,967.76
LAB ASSISTANT	LABORATORY	\$	452.19
REGISTERED NURSE	MED/SURG	\$	452.50

REGISTERED NURSE	EMERGENCY ROOM	\$	1,729.32
REGISTERED NURSE	EMERGENCY ROOM	\$	6,101.18
LAB ASSISTANT	LABORATORY	\$	3,239.28
LAB ASSISTANT	LABORATORY	\$	2,344.71
MEDICAL LAB TECH	LABORATORY	\$	6,810.75
GENERAL SUPERVISOR	MMC CLINIC - LABORATORY	\$	9,644.60
MEDICAL LAB TECH	LABORATORY	\$	4,757.01
MLT	LABORATORY	\$	6,695.60
MEDICAL ASSISTANT	HOSPITAL CAMPUS RHC	\$	2,605.83
MEDICAL TECHNOLOGIST	LABORATORY	\$	7,366.13
LAB ASSISTANT	LABORATORY	\$	1,286.25
LAB ASSISTANT	LABORATORY	\$	390.00
REGISTERED NURSE	EMERGENCY ROOM	\$	1,013.19
MEDICAL TECH	LABORATORY	\$	2,500.25
LAB ASSISTANT	LABORATORY	\$	1,302.00
LAB COORDINATOR	LABORATORY	\$	6,803.23
LAB ASSISTANT	LABORATORY	\$	365.66
MEDICAL LAB TECH	LABORATORY	\$	4,610.02
LAB ASSISTANT	LABORATORY	\$	2,215.38
REGISTERED NURSE	MED/SURG	\$	4,290.25
REGISTERED NURSE	MED/SURG	\$	4,317.83
REGISTERED NURSE	ICU	\$	12,954.96
REGISTERED NURSE	MED/SURG	\$	1,365.50
CENTRAL SUPPLY TECH	CENTRAL SUPPLY	\$	1,710.14
REGISTERED NURSE	MED/SURG	\$	2,070.51
CERTIFIED NURSE AIDE	MED/SURG	\$	2,592.00
REGISTERED NURSE	EMERGENCY ROOM	\$	5,879.34
RADIOLOGICAL TECH	DIAGNOSTIC IMAGING	\$	5,541.76
RECEPT/SECRETARY	DIAGNOSTIC IMAGING	\$	2,651.24
XRAY TECHNICIAN	DIAGNOSTIC IMAGING	\$	2,706.88
RADIOLOGY TECH	DIAGNOSTIC IMAGING	\$	4,016.39
RADIOLOGY TECH	DIAGNOSTIC IMAGING	\$	665.00
RADIOLOGIC TECH	DIAGNOSTIC IMAGING	\$	4,983.80
RADIOLOGICAL TECH	DIAGNOSTIC IMAGING	\$	6,183.82
LEAD MAMMO TECH	DIAGNOSTIC IMAGING	\$	4,659.63
NUCLEAR MED TECH	DIAGNOSTIC IMAGING	\$	7,551.57
RADIOLOGICAL TECH	DIAGNOSTIC IMAGING	\$	5,397.55
RADIOLOGICAL TECH	DIAGNOSTIC IMAGING	\$	4,507.30
PHARMACY TECH	PHARMACY	\$	3,239.32
PHARMACY TECHNICIAN	PHARMACY	\$	2,004.26
PHARMACY TECHNICIAN	PHARMACY	\$	3,078.60
RECEPTIONIST	MEMORIAL MEDICAL CLINIC	\$	1,772.60
INS COORDINATOR	PATIENT FINANCIAL SERVICES	\$	2,479.43
RECEPTIONIST	CLINIC FS	\$	2,187.85
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	1,892.36
CERTIFIED NURSE AIDE	MED/SURG	\$	3,244.46
LICENSED VOCATIONAL	MEMORIAL MEDICAL CLINIC	\$	3,858.58
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	2,144.63
RECEPTIONIST	CLINIC FS	\$	3,012.61
RECEPTIONIST	MEMORIAL MEDICAL CLINIC	\$	2,014.11
RECEPTIONIST	CLINIC FS	\$	3,236.71
REFERRAL SPECIALIST	MEMORIAL MEDICAL CLINIC	\$	2,744.28

COLLECTIONS CLERK	PATIENT FINANCIAL SERVICES	\$	2,297.12
OPERATOR	CLINIC FS	\$	2,741.29
NURSE PRACTITIONER	MEMORIAL MEDICAL CLINIC	\$	8,883.16
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	2,420.85
NURSE PRACTITIONER	MEMORIAL MEDICAL CLINIC	\$	7,615.37
MEDICAL ASSISTANT	HOSPITAL CAMPUS RHC	\$	3,184.33
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	2,341.18
LICENSED VOCATIONAL	MEMORIAL MEDICAL CLINIC	\$	2,645.00
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	2,310.35
REFERRAL SPECIALIST	HOSPITAL CAMPUS RHC	\$	2,987.00
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	3,109.26
OFFICE COORDINATOR	MEMORIAL MEDICAL CLINIC	\$	1,220.82
MEDICAL ASSISTANT	CLINIC FS	\$	3,225.88
LVN	MEMORIAL MEDICAL CLINIC	\$	3,082.68
RECEPTIONIST	MEMORIAL MEDICAL CLINIC	\$	4,537.78
CLINICAL SUPERVISOR	CLINIC FS	\$	2,391.85
RECEPTIONIST	MEMORIAL MEDICAL CLINIC	\$	6,094.94
MEDICAL ASSISTANT	CLINIC FS	\$	2,210.00
NURSE PRACTITIONER	MEMORIAL MEDICAL CLINIC	\$	2,801.81
COTA	MEMORIAL MEDICAL CLINIC	\$	20,081.99
PT ASSISTANT	OCCUPATIONAL THERAPY	\$	400.00
DIRECTOR REHAB SRVCS	PHYSICAL THERAPY	\$	3,812.87
LVN	PHYSICAL THERAPY	\$	9,578.20
RECEPTIONIST	MED/SURG	\$	865.88
PHYSICAL THERAPIST	PHYSICAL THERAPY	\$	1,351.73
OFFICE COORDINATOR	PHYSICAL THERAPY	\$	7,437.71
REGISTERED NURSE	PHYSICAL THERAPY	\$	2,325.65
PTA	MEMORIAL MEDICAL CLINIC	\$	5,671.63
TEAM LEAD PTA	PHYSICAL THERAPY	\$	5,121.27
REGISTERED NURSE	PHYSICAL THERAPY	\$	6,092.07
MEDICAL ASSISTANT	OBSTETRICS	\$	7,225.65
THERAPIST	HOSPITAL CAMPUS RHC	\$	2,659.80
CIHCP COORDINATOR	BEHAVIORAL HEALTH	\$	4,790.40
DIRECTOR OF HIM	INDIGENT CARE PROGRAM	\$	3,150.00
HIM SPECIALIST	HEALTH INFORMATION MANAGEMENT	\$	3,961.00
PHYSICAL THERAPIST	HEALTH INFORMATION MANAGEMENT	\$	2,008.90
RECORDS IMAGING TECH	PHYSICAL THERAPY	\$	3,340.08
REGISTERED NURSE	HEALTH INFORMATION MANAGEMENT	\$	1,352.83
DIRECTOR OF HIM	EMERGENCY ROOM	\$	1,008.45
BIRTH REG/DIS ANALYS	HEALTH INFORMATION MANAGEMENT	\$	1,440.01
MEDICAL ASSISTANT	HEALTH INFORMATION MANAGEMENT	\$	2,221.83
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	2,820.20
DIRECTOR OF DIETARY	MEMORIAL MEDICAL CLINIC	\$	1,948.11
OPERATOR	DIETARY	\$	8,804.20
FOOD SERVICE STAFF	CLINIC FS	\$	1,957.45
FOOD SERVICE STAFF	DIETARY	\$	3,595.00
FOOD SERVICE STAFF	DIETARY	\$	3,453.38
FOOD SERVICE STAFF	DIETARY	\$	7,356.25
FOOD SERVICE STAFF	DIETARY	\$	1,900.75
FOOD SERVICE STAFF	DIETARY	\$	3,244.00
PLANT OPS TEAM LEAD	DIETARY	\$	2,271.23
	PLANT OPERATIONS	\$	4,349.53

PLANT OPS SPECIALIST	PLANT OPERATIONS	\$	3,279.08
DEPARTMENT ASSISTANT	PLANT OPERATIONS	\$	2,465.68
ES AIDE	ENVIRONMENTAL SERVICES	\$	1,920.00
ES AIDE	ENVIRONMENTAL SERVICES	\$	2,051.20
ES AIDE	ENVIRONMENTAL SERVICES	\$	1,612.38
SECURITY OFFICER	SECURITY	\$	2,628.64
ES AIDE	ENVIRONMENTAL SERVICES	\$	2,412.92
ES AIDE	ENVIRONMENTAL SERVICES	\$	2,205.14
ES TEAM LEAD	ENVIRONMENTAL SERVICES	\$	1,909.50
ES AIDE	ENVIRONMENTAL SERVICES	\$	1,966.00
PLANT OPS SPECIALIST	PLANT OPERATIONS	\$	3,253.59
ES AIDE	ENVIRONMENTAL SERVICES	\$	1,773.75
FLOOR TECHNICIAN	ENVIRONMENTAL SERVICES	\$	2,440.63
ES AIDE	ENVIRONMENTAL SERVICES	\$	2,326.00
ES SUPERVISOR	ENVIRONMENTAL SERVICES	\$	3,341.50
FOOD SERVICE STAFF	DIETARY	\$	3,305.46
ES AIDE	ENVIRONMENTAL SERVICES	\$	2,146.00
ES AIDE	ENVIRONMENTAL SERVICES	\$	2,431.25
ES AIDE	ENVIRONMENTAL SERVICES	\$	2,879.31
FOOD SERVICE STAFF	DIETARY	\$	2,599.78
FLOOR TECHNICIAN	ENVIRONMENTAL SERVICES	\$	2,425.13
ES AIDE	ENVIRONMENTAL SERVICES	\$	1,106.22
OR AIDE	SURGERY	\$	2,462.42
SECURITY OFFICER	SECURITY	\$	1,288.19
SECURITY OFFICER	SECURITY	\$	2,802.81
DIRECTOR OF PLANT OP	PLANT OPERATIONS	\$	5,983.40
SURGERY MANAGER	SURGERY	\$	7,890.39
DIRECTOR	ADMINISTRATION-CLINICAL SERVIC	\$	120.00
PERIOPERATIVE RN	SURGERY	\$	7,775.53
FINANCIAL COUNSELOR	INDIGENT CARE PROGRAM	\$	3,018.65
REGISTERED NURSE	SURGERY	\$	6,209.75
OPERATOR	CLINIC FS	\$	827.52
REGISTRATION CLERK	PFS - REGISTRATION	\$	822.25
INFUSION SVC COORD	INFUSION CLINIC	\$	2,370.13
BILLING CLERK	PATIENT FINANCIAL SERVICES	\$	3,585.91
INFUSION SERV. COOR.	INFUSION CLINIC	\$	2,144.82
ER CLERK	PFS - REGISTRATION	\$	892.25
REGISTRATION CLERK	PFS - REGISTRATION	\$	2,893.63
CASHIER-SWITCHBOARD	PATIENT FINANCIAL SERVICES	\$	2,417.31
INS ADJUDICATOR	PATIENT FINANCIAL SERVICES	\$	3,533.68
MEDICARE COORDINATOR	PATIENT FINANCIAL SERVICES	\$	2,875.20
REGISTRATION CLERK	PATIENT FINANCIAL SERVICES	\$	2,074.43
ER CLERK	PFS - REGISTRATION	\$	2,523.47
ER CLERK	PFS - REGISTRATION	\$	1,324.44
ADMIN ASSISTANT	ADMINISTRATION-CLINICAL SERVIC	\$	3,295.22
DIRECTOR OF REV/BILL	PATIENT FINANCIAL SERVICES	\$	5,425.40
REGISTERED NURSE	SURGERY	\$	1,463.07
REG CLERK TEAM LEAD	PFS - REGISTRATION	\$	4,896.39
ER CLERK	PFS - REGISTRATION	\$	2,770.52
PRACTICE ADMIN	MEMORIAL MEDICAL CLINIC	\$	6,963.07
REGISTERED NURSE	EMERGENCY ROOM	\$	4,895.20
MEDICAID COORDINATOR	PATIENT FINANCIAL SERVICES	\$	2,575.94

PERIOPERATIVE RN	SURGERY	\$	5,577.95
REGISTERED NURSE	ICU	\$	7,006.90
DIRECTOR	DIAGNOSTIC IMAGING	\$	7,250.96
REGISTRATION CLERK	PATIENT FINANCIAL SERVICES	\$	2,203.33
I.T. DIRECTOR	INFORMATION TECHNOLOGY	\$	6,994.72
IT SYSTEM ANALYST	INFORMATION TECHNOLOGY	\$	4,663.23
IT SYSTEM ANALYST	INFORMATION TECHNOLOGY	\$	6,810.62
ACCOUNTANT	ACCOUNTING	\$	3,650.06
LAB ASSISTANT	LABORATORY	\$	2,474.42
MEDICAL ASSISTANT	MEMORIAL MEDICAL CLINIC	\$	2,356.21
ACCOUNTS PAYABLE	ACCOUNTING	\$	2,932.77
ACCOUNTANT	ACCOUNTING	\$	5,159.24
CONTROLLER	ACCOUNTING	\$	7,538.48
ACCOUNTANT	ACCOUNTING	\$	4,751.25
CEO	ADMINISTRATION	\$	19,242.32
CFO	ADMINISTRATION	\$	13,886.16
HR MANAGER	HUMAN RESOURCES	\$	4,825.00
HR GENERALIST	HUMAN RESOURCES	\$	3,254.96
SPEC PROJ/MKGT MGR	BUSINESS DEVELOPMENT	\$	4,602.09
		\$	1,125,698.52

7

7. Consider and take necessary action on insurance proceeds check from TAC in the amount of \$50,494.51 (\$52,994.51 – \$2,500.00 deductible) for damages to a Sheriff Office Vehicle on 01/03/24. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Mae Belle Cassel

From: Erica.Perez@calhouncotx.org (Erica Perez) <Erica.Perez@calhouncotx.org>
Sent: Tuesday, March 26, 2024 9:43 AM
To: maevelle.cassel@calhouncotx.org; Richard.Meyer@calhouncotx.org;
David.Hall@calhouncotx.org; vern.lyssy@calhouncotx.org;
Joel.Behrens@calhouncotx.org; 'Gary Reese'; 'Jenny McGrew'
Subject: Agenda Item - Insurance Proceeds - SO

MaeBelle,

Please add the following to the next available Commissioners Court agenda.

- Consider and take necessary action on insurance proceeds check from TAC in the amount of \$50,494.51 (\$52,994.51 – \$2,500.00 deductible) for damages to a Sheriff Office Vehicle on 01/03/24.

Thank you,

Best regards,
Erica Perez
First Assistant Auditor
Calhoun County
202 S. Ann, Suite B
Port Lavaca, TX 77979
Phone: 361. 553.4463
Fax: 361.553.4614

Calhoun County Texas

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

CHECK DATE CHECK NO.

3/19/2024

72377

72377

VENDOR ID		VENDOR NAME		ACCOUNT NUMBER
		Calhoun County		
DATE	INVOICE NO.	DESCRIPTION		AMOUNT
3/19/2024	APD20249868-1	MVD-to Cim/Aty Total loss settlement payment for the 2019 Chevrolet Express Van VIN 4427		\$52994.51
3/19/2024	APD20249868-1	Deductible		\$-2500.00

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

72377

DATE
3/19/2024

AMOUNT
\$ 50,494.51

PAY FIFTY THOUSAND FOUR HUNDRED NINETY-FOUR AND 51 / 100 DOLLARS

TO THE
ORDER
OF:

Calhoun County
211 S Ann St
Port Lavaca, TX 77979-4203



VOID AFTER 180 DAYS

Susan M. Rufford
Julie Rugg

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

72377

Calhoun County
211 S Ann St
Port Lavaca, TX 77979-4203

TO REORDER CALL: (706) 327-9550

W14SF001014M 03/23

8

8. Consider and take necessary action to authorize the Calhoun County Judge and EMS Director to sign the DSHS Provider License Declaration Form (notarization needed). (RHM)

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

Mae Belle Cassel

From: Dustin.Jenkins@calhouncotx.org (Dustin Jenkins) <Dustin.Jenkins@calhouncotx.org>
Sent: Friday, March 22, 2024 2:46 PM
To: Mae Belle Cassel
Cc: Donna Hall; Erika Rojas
Subject: Item for Commissioners Court
Attachments: CCEMSDeclarationForm_2024.pdf

Mae Belle,

Please place the following on the next Commissioners Court Agenda.

Consider and take necessary action to authorize the Calhoun County Judge and EMS Director to sign the DSHS Provider License Declaration Form (notarization needed).

Thanks,

J. Dustin Jenkins, DMin, MBA, LP
Director of Emergency Medical Services
705 Henry Barber Way
Calhoun County, TX
dustin.jenkins@calhouncotx.org
(361) 571-0014

Calhoun County Texas



TEXAS
Health and Human
Services

Texas Department of State
Health Services

**EMERGENCY MEDICAL SERVICES
PROVIDER LICENSE
DECLARATION FORM
REVISED: 2/16/2018**

Submit the completed form to the appropriate address and with the appropriate cover sheet when mailing or upload with your online renewal application

All Forms Are Available On The EMS-Trauma System Webpage:

<http://www.dshs.state.tx.us/emstraumasystems/provfro.shtm>

Fax Number: 512-834-6714 Email: EMSPROVIDERFRO@dshs.texas.gov

Privacy Notification: With a few exceptions, you have the right to request and be informed about information the State of Texas collect about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. See <http://www.dshs.state.tx.us> for more information on Privacy Notification. (Reference: Government Code, Section 552.021, 552.023 and 559.004)

TYPE OR PRINT IN BLACK INK

Application Type:

☐ Initial Application ☒ Renewal Application

☐ Other _____

Fill in Requested Information:

DSHS License Number: 029008 (Leave blank if initial application.)

Federal Employer Identification Number: 746001923

National Provider Identifier Number: 1245338433

Section 1 – Name of Legal Entity Applying for License

CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

Section 2 – Entity Assumed or Operating Name(s), list all if applicable.
If applicable, attach copies of all assumed name certificates.

Section 3 – Name(s) to be used on Vehicles

If different from Section 1 & 2, a written explanation must be provided.

Section 4 – Chief Executive Officer/Owner or Highest Elected Official (Government)

Name:	RICHARD MEYER				
Title:	COUNTY JUDGE				
Address:	211 S. ANN STREET				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Phone:	(361) 553-4646	Email:	richard.meyer@calhouncotx.org		

Section 5 – Administrator of Record

Name:	J. DUSTIN JENKINS				
Address:	4395 STATE HWY 238				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Phone:	(361) 552-1140	Email:	dustin.jenkins@calhouncotx.org		
TX EMS Certification/ID# or SSN:	PL-ID#149931 & SS#455952260				
Date of Birth:	12/10/1978				

☒ A completed EMS Administrator of Record Form is attached or has been included.
Government entities are exempt from submitting the additional form.

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

Section 6 – Alternate Contact

The person who can answer questions if administrator is unavailable.

Name:	ERIKA ROJAS				
Title:	ASSISTANT DIRECTOR/TRAINING COORDINATOR				
Address:	705 HENRY BARBER WAY				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Phone:	(361) 552-1140	Email:	erika.rojas@calhouncotx.org		

Section 7 – Designated Infection Control Officer

Name:	ERIKA ROJAS				
Title:	ASSISTANT DIRECTOR/TRAINING COORDINATOR				
Address:	705 HENRY BARBER WAY				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Phone:	(361) 552-1140	Email:	erika.rojas@calhouncotx.org		

Section 8 – Physician Medical Director

Address must be where the physician receives mail.

Name:	DON PAUL BUNNELL				
TX Medical License #:	G3196				
Address:	815 N. VIRGINIA ST.				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Phone:	(361) 552-6713	Email:	dpaulbunnell@gmail.com		

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

Section 9 – Vehicle Authorizations

List the number of vehicle authorizations requested at each level and the total.

Basic Life Support (BLS)	
BLS with ALS Capability	
BLS with MICU Capability	7
Advanced Life Support (ALS)	
ALS with MICU Capability	
Mobile Intensive Care Unit (MICU- Ground)	
Rotor-Wing (MICU)	
Fixed Wing (MICU)	
Specialized	
TOTAL NUMBER OF AUTHORIZATIONS REQUESTED	7

Section 10 – Information

10-A: Entity Type: Check any that apply or explain.

☒ **Governmental Entity**

Please Select Type of Government Entity:

- ☐ City
- ☒ County
- ☐ ESD - Emergency Service District
- ☐ Hospital District
- ☐ State Agency

☐ **Hospital**

☐ **Private**

☐ **Other (Must Explain)** _____

10-B: Tax Status: You must check only one.

☒ **Government Entity** ☐ **For Profit** ☐ **Non-Profit 501c3**

☐ **Other (Must Explain)** _____

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

10-C: Response Type: *You must check only one.*

☒ **Emergency/ 911** ☐ **Non-Emergency/Non-911** ☐ **Both**

10-D: Subscription Program:

Does your organization offer a subscription program? ☐ **Yes** ☒ **No**

*If yes, please submit all required documentation and information. Air Medical Providers are excluded from this requirement.

10-E: Emergency Medical Task Force (EMTF) Participant:

☐ **Yes** ☒ **No** (This is for planning purposes only. Participation not required.)

10-F: Letter of Credit:

Attach a copy of a letter of credit issued by a federally insured bank (FDIC) or savings institution. An emergency medical services provider that is directly operated by a governmental entity is exempt from this section.

Institution Name: EXEMPT- GOVERNMENTAL ENTITY

Date of Letter: _____

Amount of required credit: (must select one)

- ☐ \$100,000 for the initial license and for renewal of the license on the second anniversary of the date the initial license is issued
- ☐ \$75,000 for renewal of the license on the fourth anniversary of the date the initial license is issued
- ☐ \$50,000 for renewal of the license on the sixth anniversary of the date the initial license is issued
- ☐ \$25,000 for renewal of the license on the eighth anniversary of the date the initial license is issued
- ☐ Not required, Explain _____
- ☒ Exempt - Governmental Entity

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

10-G: Medicaid Provider Surety Bond

EMS providers are required to provide a surety bond as a condition of participation in the Medicaid program and as required by the Texas Health and Humans Services Commission. An EMS provider that is directly operated by a governmental entity is exempt from this section.

☐ Yes ☐ No ☒ **Exempt (Governmental Entity)**

If No, please explain: _____

Bond Number: _____

Bond Effective Date: _____

Name of institution issuing bond and contact telephone number:

10-H: EMS Personnel:

Compensation Status:

☒ Paid/Non-Volunteer ☐ Volunteer ☐ Mixed (*You may check only one.*)

☒ I attest on behalf of the legal entity mentioned above, that all licensed or certified EMS personnel have completed a juris prudence examination approved by DSHS.

-----or-----

☐ I attest on behalf of the legal entity mentioned above, that all licensed or certified EMS personnel have **NOT** completed a juris prudence examination approved by DSHS but will ensure that all EMS Personnel will complete upon the renewal of their EMS Personnel Certification.

10-I: Medicare and/or Medicaid Eligibility

☒ I attest on behalf of the legal entity mentioned above, that the entity, applicant, management staff, medical director and/or employees are not excluded from participation in the Medicare and/or Medicaid program.

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

10-J: Headquarters/Physical Primary Location:

- ☐ I attest on behalf of the legal entity mentioned above, that no other licensed EMS Provider is located at the Headquarters/Primary Physical Location Street Address.
- ☐ I attest on behalf of the legal entity mentioned above, that the entity owns or has a lease agreement for the Headquarters/Primary Physical Location address.
- ☐ I attest on behalf of the legal entity mentioned above, that the entity understands it must have permission from DSHS to relocate from the Headquarters/Primary Physical Location address prior to moving.

10-K: Medical Equipment:

- ☐ I attest on behalf of the legal entity mentioned above, that the entity owns or has a lease for all of the medical equipment that will be used.
- ☐ I attest on behalf of the legal entity mentioned above, that the entity has enough medical equipment so that each vehicle has its own set of medical equipment to operate at the level authorized by DSHS.

10-L: Vehicles:

- ☐ I attest on behalf of the legal entity mentioned above, that the entity owns or has a lease for all of the vehicles that will be used.
- ☐ I attest on behalf of the legal entity mentioned above, that the entity and/or management staff understand that authorized vehicles are considered response ready unless the vehicle is designated as being **out of service** using the form provided by the department.

10-M: Medical Records:

- ☐ I attest on behalf of the legal entity mentioned above, that the entity has a plan for the going out of business to ensure the maintenance of the medical records.

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

10-N: Knowledge and Experience:

☒ I attest on behalf of the legal entity mentioned above, that the applicant, including its management staff possesses sufficient professional experience and qualifications related to EMS including: having at least one year of experience each in emergency medical dispatch processes, EMS billing processes, medical control accountability, and quality improvement processes for EMS operations.

10-O: Management Staff:

☒ I attest on behalf of the legal entity mentioned above, that the entity and/or management staff have read the Texas Emergency Healthcare Act and the Texas Administrative Code 157.

10-P: Trauma Service Area (TSA) – Regional Advisory Council (RAC):

☒ I attest on behalf of the legal entity mentioned above, that the entity or its management staff participate in a Regional Advisory Council.

10-Q: RESPONSE HOURS OF OPERATION

☒ I attest on behalf of the legal entity mentioned above, the entity provides 24/7/365 of their declared service.

--- OR ---

☐ I attest on behalf of the legal entity mentioned above, is **NOT** available 24/7/365 and has written agreements with other EMS providers for coverage of their declared service area and has notified all the emergency service agencies in the designated service area.

10-R: Expansion by an EMS Provider

☒ I attest on behalf of the legal entity mentioned above, that the entity and its management staff understand that an EMS provider is prohibited from expanding operations to or stationing any EMS vehicles in a municipality or county other than the municipality or county from which the provider obtained the letter of approval under until after the second anniversary of the date the provider's initial license was issued, unless the expansion or stationing occurs in connection with:

(A) a contract awarded by another municipality or county for the provision of EMS;
(B) an emergency response made in connection with an existing mutual aid agreement;
or (C) an activation of a statewide emergency or disaster response by the department.

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

10-S: Station Locations:

☒ I attest on behalf of the legal entity mentioned above, the legal entity mentioned above has stations locations.

10-T: Insurance:

☒ I attest on behalf of the legal entity mentioned above, understand that the entity must maintain motor vehicle liability insurance as required under the Texas Transportation Code.

☒ I attest on behalf of the legal entity mentioned above, understand that the entity must maintain professional liability insurance coverage in the minimum amount of \$500,000 per occurrence, or as necessary per state law during the license period.

Section 11 – Service Area

Provide the City(s) and County(s) you plan to operate in. If you need more space Please provide all of the required information on a separate piece of paper.

☐ Additional Sheet(s) attached:

1.	City:	PORT LAVACA	County:	CALHOUN
2.	City:	POINT COMFORT	County:	CALHOUN
3.	City:	SEADRIFT	County:	CALHOUN
4.	City:		County:	
5.	City:		County:	
6.	City:		County:	
7.	City:		County:	
8.	City:		County:	

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

Section 12 – Governmental Recognition

List and attach recognition from governmental entities. This section does not apply to renewal of an emergency medical services provider license or a municipality, county, emergency services district, hospital, or emergency medical services volunteer provider organization in this state that applies for an emergency medical services provider license. If you need more space, please provide all of the required information on a separate piece of paper. Additional Sheet(s) attached: ☐

1.	City:		County:	
2.	City:		County:	
3.	City:		County:	
4.	City:		County:	
5.	City:		County:	
6.	City:		County:	
7.	City:		County:	
8.	City:		County:	

Section 13 – Addresses

Headquarters/Physical Primary Location Street Address:

Address:	705 HENRY BARBER WAY				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Telephone #:	(361) 552-1140	Fax #:			

Headquarters/Physical Primary Location Business Hours

Please list the days and hours of normal operation or a designated day and time when personnel are present so the public may ask questions.

MONDAY-FRIDAY 7:30AM-11:30AM & 12:00PM-4:00PM

☒ I attest on behalf of the legal entity mentioned above, these hours are posted for public viewing on the outside of the building.

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

Business Mailing Address:					
Address:	705 HENRY BARBER WAY				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Telephone #:	(361) 552-1140	Fax #:			

Records Location Street Address: ☒ Same as headquarters					
Address:					
City:					
County:		State:		Zip:	
Telephone #:		Fax #:			

Billing Office Street Address: ☒ Same as headquarters					
Dispatching Agency:					
Address:					
City:					
County:		State:		Zip:	
Telephone #:		Fax #:			

Dispatch Location Street Address: ☐ Same as headquarters					
Dispatching Agency:	CALHOUN COUNTY SHERIFFS OFFICE				
Address:	211 S. ANN STREET				
City:	PORT LAVACA				
County:	CALHOUN	State:	TX	Zip:	77979
Telephone #:	(361) 553-4646	Fax #:			

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

Section 14 – Ownership & Type of Legal Entity

Complete the following to indicate the type of legal entity and responsible persons:

- ☒ **Government Entity** ☐ **Unincorporated Association of People**
☐ **Sole Proprietorship** ☐ **Partnership/General Partnership**
☐ **Corporation** ☐ **Limited Liability Company** ☐ **Limited Partnership**
☐ **Limited Liability Partnership**
☐ **Other (*must explain*)** _____

Please complete this information for all officers, general partners and limited partners of the legal entity. Government Entities should complete this information for the chief elected official (i.e. city mayor or county judge) or appointed officials that are responsible for the entity (i.e. emergency service district or hospital district board members).

Name: RICHARD MEYER

Title: COUNTY JUDGE

Mailing address: 211 S. ANN STREET

City: PORT LAVACA **State:** TX **Zip:** 77979

Name: _____

Title: _____

Mailing address: _____

City: _____ **State:** _____ **Zip:** _____

Name: _____

Title: _____

Mailing address: _____

City: _____ **State:** _____ **Zip:** _____

☐ **Additional Persons are listed on separate sheet attached.**

Legal Entity Name: CALHOUN COUNTY EMERGENCY MEDICAL SERVICES

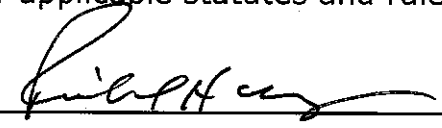
Section 15 – Signature Unsworn Declaration

On behalf of the above named legal entity, I hereby affirm and declare I am authorized to make this Emergency Medical Services Provider application and/or declaration and all information submitted on this form and any supplemental documents are true and correct. I attest and understand the legal entity and I are accountable and responsible for the accuracy of all answers and statements on this form. I attest the legal entity listed on this form meets all requirements for the type of license requested. Further, I understand it is a Class A misdemeanor violation of Texas Penal Code Sec. 37.10 to submit a false statement to a governmental agency. I have read and understand Health and Safety Code Chapter 773 and Texas Administrative Code Title 25, Chapter 157, and agree to adhere to those statutes rules, and all other applicable statutes and rules.


Signature of Administrator of Record

J. Dustin Jenkins, Director of EMS

Printed Name of Administrator of Record

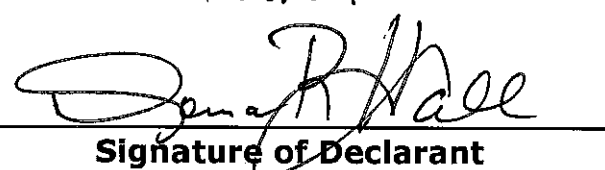

Signature of CEO/Owner

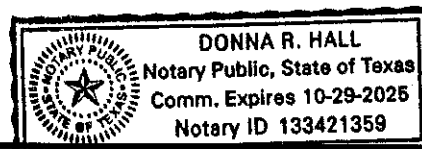
Richard Meyer, County Judge

Printed Name of CEO/Owner

My name is Donna Hall, my date of birth is 1-26-67
and my address is 705 Henry Barber Way Pelavaca Tx 77989
(Street) (City) (State) (Zip Code)
and USA. I declare under penalty of perjury that the foregoing is true
(Country)
and correct.

Executed in Calhoun County, State of Tx, on the 3 day of April, 2024
(Month) (Year)


Signature of Declarant



9

9. Consider and take necessary action to appoint William Crowley, D.O. as the Memorial Medical Center Chief of Staff for the April, 2024 – March, 2026 term, along with the MMC Board Members approved at the March 27, 2024 Commissioners Court Meeting. (RHM)

RESULT:	APPROVED [UNANIMOUS]
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Mae Belle Cassel

From: pfikac@mmcportlavaca.com (Pam Fikac) <pfikac@mmcportlavaca.com>
Sent: Wednesday, March 27, 2024 10:49 AM
To: Maebelle Cassel (maebelle.cassel@calhouncotx.org)
Cc: Roshanda S. Thomas
Subject: New Chief of Staff for Board Appointment

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

Good morning,

William Crowley, D.O. is the new Chief of Staff, effective April 1, 2024. This is a two-year term. Would you please add him to the Commissioner's Court Agenda for Board appointment? Dr. Jenkins will be coming off the board.

Thank you.

Pam Fikac
Executive Assistant
Credentialing Coordinator
815 N Virginia Street
Port Lavaca, TX 77979
(361) 552-0222
(361) 552-0220 Fax
pfikac@mmcportlavaca.com

MEMORIAL
MEDICAL  **CENTER**

So Much... So Close!

10

10. Consider and take necessary action on any necessary budget adjustments. (RHM)

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

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, April 3, 2024

HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: FLOOD PLAIN ADMINISTRATION

DEPARTMENT NO: 710

AMENDMENT NO: 6642 REQUESTOR: FLOODPLAIN

AMENDMENT REASON: LINE ITEM TRANSFER

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
60332	AUTO ALLOWANCES	999	NO GRANT	\$0	\$0	\$0	\$1,300	\$1,300
66316	TRAINING TRAVEL OUT OF COUNTY	999	NO GRANT	\$0	\$0	\$1,300	\$0	(\$1,300)
AMENDMENT NO 6642 TOTAL				\$0	\$0	\$1,300	\$1,300	\$0

FLOOD PLAIN ADMINISTRATION TOTAL

\$0

\$0

\$1,300

\$1,300

\$0

DEPARTMENT NAME: REVENUE

DEPARTMENT NO: 1

AMENDMENT NO: 6643 REQUESTOR: SHERIFF

AMENDMENT REASON: INSURANCE PROCEEDS FOR DAMAGES ON 1/3/24, ACCEPTED IN CC 4/3/24

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
49150	RECOVERIES-INSURANCE	999	NO GRANT	\$50,495	\$0	\$0	\$0	\$50,495
AMENDMENT NO 6643 TOTAL				\$50,495	\$0	\$0	\$0	\$50,495

REVENUE TOTAL

\$50,495

\$0

\$0

\$0

\$50,495

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1

DEPARTMENT NO: 540

AMENDMENT NO: 6641 REQUESTOR: COMMISSIONER PRECINCT #1

AMENDMENT REASON: LINE ITEM TRANSFER

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$5,000	\$5,000

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, April 3, 2024

HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1 DEPARTMENT NO: 540

AMENDMENT NO: 6641 REQUESTOR: COMMISSIONER PRECINCT #1

AMENDMENT REASON: LINE ITEM TRANSFER

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
63920	MISCELLANEOUS	999	NO GRANT	\$0	\$0	\$5,000	\$0	(\$5,000)
AMENDMENT NO 6641 TOTAL				\$0	\$0	\$5,000	\$5,000	\$0
ROAD AND BRIDGE-PRECINCT #1 TOTAL				\$0	\$0	\$5,000	\$5,000	\$0

DEPARTMENT NAME: SHERIFF DEPARTMENT NO: 760

AMENDMENT NO: 6643 REQUESTOR: SHERIFF

AMENDMENT REASON: INSURANCE PROCEEDS FOR DAMAGES ON 1/3/24, ACCEPTED IN CC 4/3/24

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
65464	REPAIRS-INSURANCE RECOVERY	999	NO GRANT	\$0	\$0	\$50,495	\$0	(\$50,495)
AMENDMENT NO 6643 TOTAL				\$0	\$0	\$50,495	\$0	(\$50,495)
SHERIFF TOTAL				\$0	\$0	\$50,495	\$0	(\$50,495)

DEPARTMENT NAME: WASTE MANAGEMENT DEPARTMENT NO: 380

AMENDMENT NO: 6640 REQUESTOR: COMMISSIONER PRECINCT #2

AMENDMENT REASON: LINE ITEM TRANSFER

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53210	MACHINERY PARTS/SUPPLIES	999	NO GRANT	\$0	\$0	\$100	\$0	(\$100)
53640	JANITOR SUPPLIES	999	NO GRANT	\$0	\$0	\$50	\$0	(\$50)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, April 3, 2024 HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND FUND NO: 1000
DEPARTMENT NAME: WASTE MANAGEMENT DEPARTMENT NO: 380

AMENDMENT NO: 6640 REQUESTOR: COMMISSIONER PRECINCT #2

AMENDMENT REASON: LINE ITEM TRANSFER

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
63530	MACHINERY/EQUIPMENT REPAIRS	999	NO GRANT	\$0	\$0	\$0	\$0	\$150	\$150	\$150	\$0
AMENDMENT NO 6640 TOTAL				\$0	\$0	\$150	\$150	\$150	\$150	\$0	\$0
WASTE MANAGEMENT TOTAL											
GENERAL FUND TOTAL				\$50,495	\$0	\$56,945	\$6,450	\$6,450	\$0	\$0	\$0
Grand Total				\$50,495	\$0	\$56,945	\$6,450	\$6,450	\$0	\$0	\$0

11

11. Approval of bills and payroll. (RHM)

MMC Bills

RESULT: **APPROVED [UNANIMOUS]**

MOVER: David Hall, Commissioner Pct 1

SECONDER: Vern Lyssy, Commissioner Pct 2

AYES: Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

County Bills

RESULT: **APPROVED [UNANIMOUS]**

MOVER: David Hall, Commissioner Pct 1

SECONDER: Vern Lyssy, Commissioner Pct 2

AYES: Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Adjourned 10:16

Mae Belle Cassel

From: Erica.Perez@calhouncotx.org (Erica Perez) <Erica.Perez@calhouncotx.org>
Sent: Monday, April 1, 2024 4:35 PM
To: 'Angela Torres'; 'April Townsend'; 'David Hall'; 'Gary Reese'; 'Judge Richard Meyer'; 'Lesia Jurek'; 'Lynette Adame'; 'Mae Belle Cassel'; 'vern lyssy'; demi.cabrera@calhouncotx.org; joel.behrens@calhouncotx.org; jjenkins@mmcportlavaca.com; mcphersonkay056@gmail.com; chavanm2@dow.com; sdierschke@fnbportlavaca.com; dallas@dallasfranklin.net; rtuazon0717@gmail.com; jackwu@ftpc.fpcusa.com; 'Roshanda S Thomas'
Subject: MMC Approval List for April 03, 2024
Attachments: MMC Approval List for April 03, 2024.pdf

Please see attached copy to place in Agenda Packet behind item #11.

Best regards,
Erica Perez
First Assistant Auditor
Calhoun County
202 S. Ann, Suite B
Port Lavaca, TX 77979
Phone: 361. 553.4463
Fax: 361.553.4614

Calhoun County Texas

April 3, 2024

APPROVAL LIST - 2024 BUDGET

COMMISSIONERS COURT MEETING OF

04/03/24

BALANCE BROUGHT FORWARD FROM APPROVAL LIST REPORT PAGE 26

\$264,242.00

FICA	PAYROLL 03/29/2024	P/R	\$	66,001.08
MEDICARE	PAYROLL 03/29/2024	P/R	\$	15,435.60
FWH	PAYROLL 03/29/2024	P/R	\$	43,442.35
AFLAC	APRIL 2024 PREMIUMS	P/R	\$	2,107.69
PRINCIPAL FINANCIAL GROUP	APRIL 2024 PREMIUMS	P/R	\$	1,933.53
NATIONWIDE RETIREMENT SOLUTIONS	PAYROLL 03/29/2024	P/R	\$	1,862.50
OFFICE OF THE ATTORNEY GENERAL - CHILD SUPPORT	PAYROLL 03/29/2024	P/R	\$	2,121.60
VOYA	PAYROLL 03/29/2024	P/R	\$	1,715.00

TOTAL VENDOR DISBURSEMENTS:

\$ 398,861.35 ✓

CALHOUN COUNTY OPERATING ACCOUNT (TRANSFER FROM MONEY MKT TO OP ACCT FOR AP & PAYROLL)

\$ 1,250,000.00 ✓

TOTAL INVESTMENT ACTIVITY AND TRANSFERS BETWEEN FUNDS:

\$ 1,250,000.00 ✓

TOTAL AMOUNT FOR APPROVAL:

\$ 1,648,861.35 ✓

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---April 03, 2024

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ 370,848.33J

TOTAL TRANSFERS BETWEEN FUNDS \$ 15,032.31J

TOTAL NURSING HOME UPL EXPENSES \$ 1,537,142.42J

TOTAL INTER-GOVERNMENT TRANSFERS \$ -

GRAND TOTAL DISBURSEMENTS APPROVED April 03, 2024	\$ 1,923,023.06J
--	-------------------------

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---April 03, 2024

PAYABLES AND PAYROLL

3/28/2024 Weekly Payables	338,426.41
4/1/2024 McKesson-supplies	8,586.28
4/1/2024 Sam's Club Direct-dietary supplies	345.78
4/1/2024 Republic Services Inc.-waste	2,324.90
4/1/2024 Capitalone-supplies	265.29
4/1/2024 Frontier-phone	82.23
4/1/2024 McKesson-340B Prescription Expense	3,539.65
4/1/2024 Amerisource Bergen-340B Prescription Expense	910.59

Prosperity Electronic Bank Payments

4/1/2024 nsKnox Technologies-account verification	10.00
3/25-3/29/24 Pay Plus-Patient Claims Processing Fee	338.84
4/1/2024 Health Equity-HSA Contributions	15,447.67
3/29/2024 ExpertPay- child support	570.69

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **370,848.33**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

3/28/2024 MMC Operating to Golden Creek Healthcare-correction of nursing home insurance payment deposited into MMC Operating	3,823.03
3/28/2024 MMC Operating to Tuscany Village-correction of nursing home insurance payment deposited into MMC Operating	10,747.88
3/28/2024 MMC Operating to Bethany-correction of nursing home insurance payment deposited into MMC Operating	461.40

TOTAL TRANSFERS BETWEEN FUNDS \$ **15,032.31**

NURSING HOME UPL EXPENSES

4/1/2024 Nursing Home UPL-Cantex Transfer	804,232.73
4/1/2024 Nursing Home UPL-Nexlon Transfer	66,802.85
4/1/2024 Nursing Home UPL-HMG Transfer	30,120.73
4/1/2024 Nursing Home UPL-Tuscany Transfer	286,972.65
4/1/2024 Nursing Home UPL-HSL Transfer	276,505.28

QIPP CHECKS TO MMC

4/1/2024 Ashford	22,405.01
4/1/2024 Broadmoor	8,341.55
4/1/2024 Crescent	6,196.77
4/1/2024 Fort Bend	7,021.58
4/1/2024 Solera	6,724.64
4/1/2024 Tuscany	13,808.13

TRANSFER BETWEEN FUNDS FROM NURSING HOMES TO MMC

4/1/2024 Ashford-Interest Earned	705.78
4/1/2024 Broadmoor-Interest Earned	693.15
4/1/2024 Crescent-Interest Earned	972.37
4/1/2024 Fort Bend-Interest Earned	301.90
4/1/2024 Solera-Interest Earned	738.98
4/1/2024 Golden Creek-Interest earned	621.86
4/1/2024 Bethany-Interest Earned	826.46

TRANSFER OF FUNDS BETWEEN NURSING HOMES

4/1/2024 Tuscany to Solera - Solera insurance payment deposited into Tuscany in error	3,150.00
---	----------

TOTAL NURSING HOME UPL EXPENSES \$ **1,537,142.42**

TOTAL INTER-GOVERNMENT TRANSFERS

\$ -

GRAND TOTAL DISBURSEMENTS APPROVED April 03, 2024

\$ 1,923,023.06

RECEIVED

03/28/2024 MAR 28 2024

10:44

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 04/19/2024

ap_open_invoice.template

Caffrey County Auditor

Vendor# Vendor Name

Class Pay Code

R1200 ADT COMMERCIAL ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
154139323		03/27/202	03/05/202	03/30/202			53.61	0.00	0.00	53.61 ✓

FIRE MONITORING (311-3124)

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
R1200	ADT COMMERCIAL	53.61	0.00	0.00	53.61

Vendor# Vendor Name Class Pay Code

A1680 AIRGAS USA, LLC - CENTRAL DIV ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9148097601		03/27/202	03/21/202	04/15/202			3,795.67	0.00	0.00	3,795.67 ✓
9146143131	BULK	03/27/202	01/23/202	02/17/202			2,840.25	0.00	0.00	2,840.25 ✓
9146397262	BULK	03/27/202	01/25/202	02/19/202			274.43	0.00	0.00	274.43 ✓
5505597590	OXYGEN	03/27/202	01/31/202	02/25/202			561.27	0.00	0.00	561.27 ✓
5505597592	OXYGEN	03/27/202	01/31/202	02/25/202			257.11	0.00	0.00	257.11 ✓
9146444417	OXYGEN	03/27/202	01/31/202	02/25/202			2,481.16	0.00	0.00	2,481.16 ✓
5505597591	BULK	03/27/202	01/31/202	02/25/202			984.68	0.00	0.00	984.68 ✓
9146815858	OXYGEN	03/27/202	02/12/202	03/08/202			237.75	0.00	0.00	237.75 ✓
9146815857	OXYGEN	03/27/202	02/12/202	03/08/202			32.92	0.00	0.00	32.92 ✓
9147053565	OXYGEN	03/27/202	02/19/202	03/15/202			795.00	0.00	0.00	795.00 ✓
9147424743	OXYGEN	03/27/202	02/29/202	03/25/202			2,488.16	0.00	0.00	2,488.16 ✓
5506315347	BULK	03/27/202	02/29/202	03/25/202			913.37	0.00	0.00	913.37 ✓
5506315348	OXYGEN	03/27/202	02/29/202	03/25/202			242.01	0.00	0.00	242.01 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS USA, LLC - CENTRAL DIV	15,903.78	0.00	0.00	15,903.78

Vendor# Vendor Name Class Pay Code

14028 AMAZON CAPITAL SERVICES ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1RMQ-96GQ-DR9M		03/27/202	03/20/202	04/19/202			419.97	0.00	0.00	419.97 ✓

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
14028	AMAZON CAPITAL SERVICES	419.97	0.00	0.00	419.97

Vendor# Vendor Name Class Pay Code

10419 AMBU INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
224066944		03/27/202	03/05/202	04/05/202			87.00	0.00	0.00	87.00 ✓

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10419	AMBU INC	87.00	0.00	0.00	87.00

Vendor#	Vendor Name	Class	Pay Code							
B1220	BECKMAN COULTER INC ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
111184237 ✓	SUPPLIES	03/27/202	03/04/202	03/29/202			87.50	0.00	0.00	87.50 ✓
111187806 ✓	CONTRACT	03/27/202	03/05/202	03/30/202			4,470.76	0.00	0.00	4,470.76 ✓
111189477 ✓	SUPPLIES	03/27/202	03/06/202	03/31/202			956.00	0.00	0.00	956.00 ✓
7358109 ✓	SUPPLIES	03/27/202	03/11/202	04/05/202			7,979.31	0.00	0.00	7,979.31 ✓
111202420 ✓	FREIGHT	03/27/202	03/13/202	04/07/202			48.81	0.00	0.00	48.81 ✓
5485987 ✓	CONTRACT	03/27/202	03/13/202	04/07/202			5,016.58	0.00	0.00	5,016.58 ✓
111206297 ✓	CONTRACT	03/27/202	03/15/202	04/09/202			1,288.45	0.00	0.00	1,288.45 ✓
5486356 ✓	LEASE	03/27/202	03/21/202	04/15/202			1,935.15	0.00	0.00	1,935.15 ✓
4526840 ✓	CONTRACT	03/27/202	03/21/202	04/15/202			1,484.00	0.00	0.00	1,484.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
B1220 BECKMAN COULTER INC							23,266.56	0.00	0.00	23,266.56
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
032424	FUEL	03/27/202	03/24/202	04/03/202			83.79	0.00	0.00	83.79 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
C1048 CALHOUN COUNTY							83.79	0.00	0.00	83.79
Vendor#	Vendor Name	Class	Pay Code							
14236	CARRIER CORPORATION ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
90350955 ✓	CHILLER RENTAL 11/6-12/3/23	03/27/202	03/12/202	04/11/202			12,830.00	0.00	0.00	12,830.00 ✓
90350953 ✓	CHILLER RENTAL 12/4-12/31/23	03/27/202	03/12/202	04/11/202			12,830.00	0.00	0.00	12,830.00 ✓
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	Class	Pay Code							
C1992	CDW GOVERNMENT, INC. ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
QC06715 ✓	SUPPLIES	03/27/202	03/08/202	04/07/202			120.82	0.00	0.00	120.82 ✓
QC92952 ✓	SUPPLIES	03/27/202	03/12/202	04/11/202			127.62	0.00	0.00	127.62 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
C1992 CDW GOVERNMENT, INC.							248.44	0.00	0.00	248.44
Vendor#	Vendor Name	Class	Pay Code							
C1390	CENTRAL DRUG ✓	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
032524 ✓	INVENTORY	03/27/202	03/25/202	04/15/202			38.80	0.00	0.00	38.80 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
C1390 CENTRAL DRUG							38.80	0.00	0.00	38.80
Vendor#	Vendor Name	Class	Pay Code							

12768	CHEMAQUA										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
8605804		03/27/202	03/10/202	03/20/202			593.69	0.00	0.00	593.69	
WATER TREATMENT											
Vendor Totals: Number		Name						Gross	Discount	No-Pay	Net
12768		CHEMAQUA						593.69	0.00	0.00	593.69
Vendor#	Vendor Name			Class	Pay Code						
C1730	CITY OF PORT LAVACA			W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
031224		03/27/202	03/12/202	04/05/202			2,430.86	0.00	0.00	2,430.86	
	WATER	815 N. Virginia									
031224A		03/27/202	03/12/202	04/05/202			38.64	0.00	0.00	38.64	
	WATER	815 N. Virginia									
031224B		03/27/202	03/12/202	04/05/202			93.51	0.00	0.00	93.51	
	WATER	1016 N Virginia									
031224C		03/27/202	03/12/202	04/11/202			65.66	0.00	0.00	65.66	
	WATER	701 N Virginia									
Vendor Totals: Number		Name						Gross	Discount	No-Pay	Net
C1730		CITY OF PORT LAVACA						2,628.67	0.00	0.00	2,628.67
Vendor#	Vendor Name			Class	Pay Code						
15368	COLONIAL PENN LIFE INSURANCE										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
258032		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
2187981		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
248785		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
206135		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
4 24095		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
250863		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
257511		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
260814		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
211934		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
200001		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
220547		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
224482		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
237825		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
247104		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
213341		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
254925		03/27/202	03/22/202	04/15/202			20.00	0.00	0.00	20.00	
	PT REFUND										
Vendor Totals: Number		Name						Gross	Discount	No-Pay	Net
15368		COLONIAL PENN LIFE INSURANCE						320.00	0.00	0.00	320.00

Vendor#	Vendor Name	Class	Pay Code							
C1970	CONMED CORPORATION ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
10514429 ✓		03/27/202	03/12/202	04/10/202			243.90	0.00	0.00	243.90 ✓
	SUPPLIES									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C1970 CONMED CORPORATION						243.90	0.00	0.00	243.90
Vendor#	Vendor Name	Class	Pay Code							
C2157	COOPER SURGICAL INC ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
CINV5500006443 ✓		03/27/202	02/18/202	03/27/202			1,494.59	0.00	0.00	1,494.59 ✓
	SUPPLIES									
CINV55000068511 ✓		03/27/202	03/14/202	03/27/202			1,282.89	0.00	0.00	1,282.89 ✓
	SUPPLIES									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C2157 COOPER SURGICAL INC						2,777.48	0.00	0.00	2,777.48
Vendor#	Vendor Name	Class	Pay Code							
C1443	CYGNUS MEDICAL LLC ✓	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
443834 ✓		03/27/202	03/13/202	04/12/202			419.00	0.00	0.00	419.00 ✓
	SUPPLIES									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C1443 CYGNUS MEDICAL LLC						419.00	0.00	0.00	419.00
Vendor#	Vendor Name	Class	Pay Code							
10368	DEWITT POTH & SON ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
749503-0 ✓		03/27/202	03/14/202	04/08/202			508.94	0.00	0.00	508.94 ✓
	SUPPLIES									
748890-01 ✓		03/27/202	03/14/202	04/08/202			24.90	0.00	0.00	24.90 ✓
	SUPPLIES									
749837-0 ✓		03/27/202	03/16/202	04/12/202			194.82	0.00	0.00	194.82 ✓
	SUPPLIES									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10368 DEWITT POTH & SON						728.66	0.00	0.00	728.66
Vendor#	Vendor Name	Class	Pay Code							
14800	DIRECTV ENTERTAINMENT HOLDINGS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
X240312 ✓		03/27/202	03/05/202	04/05/202			489.85	0.00	0.00	489.85 ✓
	SATELLITE <i>note for 6-25</i>									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	14800 DIRECTV ENTERTAINMENT HOLDINGS						489.85	0.00	0.00	489.85
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
MMC031524 ✓		03/27/202	03/15/202	03/16/202			144,932.37	0.00	0.00	144,932.37 ✓
	PHYSICIAN SERV <i>March 1-15, 2024</i>									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10789 DISCOVERY MEDICAL NETWORK INC						144,932.37	0.00	0.00	144,932.37
Vendor#	Vendor Name	Class	Pay Code							
10026	DONN STRINGO ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
032724		03/28/202	03/27/202	04/03/202			344.38	0.00	0.00	344.38 ✓
	TRAVEL/TEXAS AIM <i>for Maternal Hypertension</i>									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10026 DONN STRINGO						344.38	0.00	0.00	344.38
Vendor#	Vendor Name	Class	Pay Code							

E1320	EPIMED ✓									
M										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
77874 ✓		03/27/202	03/13/202	03/27/202			143.92	0.00	0.00	143.92 ✓
SUPPLIES										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
E1320 EPIMED							143.92	0.00	0.00	143.92
Vendor#	Vendor Name				Class	Pay Code				
C2510	EVIDENT ✓				M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
T2403151378 ✓		03/27/202	03/15/202	04/09/202			7,441.70	0.00	0.00	7,441.70 ✓
BUSINESS SERV										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
C2510 EVIDENT							7,441.70	0.00	0.00	7,441.70
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
8-437-90946 ✓		03/27/202	03/14/202	04/08/202			46.18	0.00	0.00	46.18 ✓
FREIGHT <i>Lat fu 5.1</i>										
8-431-216040 ✓		03/27/202	03/14/202	04/08/202			62.12	0.00	0.00	62.12 ✓
FREIGHT										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
F1100 FEDERAL EXPRESS CORP.							108.30	0.00	0.00	108.30
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
252467 ✓		03/27/202	03/18/202	04/17/202			600.00	0.00	0.00	600.00 ✓
ANNUAL MONITORING										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
14336 FIRETRON, INC							600.00	0.00	0.00	600.00
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
0635404 ✓		03/27/202	03/12/202	04/06/202			2,503.92	0.00	0.00	2,503.92 ✓
SUPPLIES										
0675142 ✓		03/27/202	03/13/202	04/07/202			4,248.00	0.00	0.00	4,248.00 ✓
SUPPLIES										
0713595 ✓		03/27/202	03/14/202	04/08/202			69.96	0.00	0.00	69.96 ✓
SUPPLIES										
0749265 ✓		03/27/202	03/15/202	04/09/202			127.56	0.00	0.00	127.56 ✓
SUPPLIES										
0785514 ✓		03/27/202	03/18/202	04/12/202			320.69	0.00	0.00	320.69 ✓
SUPPLIES										
0825705 ✓		03/27/202	03/19/202	04/13/202			318.13	0.00	0.00	318.13 ✓
SUPPLIES										
0825704 ✓		03/27/202	03/19/202	04/13/202			589.13	0.00	0.00	589.13 ✓
SUPPLIES										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
F1400 FISHER HEALTHCARE							8,177.39	0.00	0.00	8,177.39
Vendor#	Vendor Name				Class	Pay Code				
12636	FUSION CLOUD SERVICES, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1029139089 ✓		03/27/202	03/16/202	04/15/202			876.84	0.00	0.00	876.84 ✓
PHONE										
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
12636 FUSION CLOUD SERVICES, LLC							876.84	0.00	0.00	876.84
Vendor#	Vendor Name				Class	Pay Code				

15380

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
031124		03/28/202	03/11/202	04/11/202			306.00	0.00	0.00	306.00

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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
15380		306.00	0.00	0.00	306.00

Vendor#	Vendor Name	Class	Pay Code
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11149 GBS ADMINISTRATORS, INC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
686073448930		03/27/202	03/19/202	04/01/202			5,080.91	0.00	0.00	5,080.91

LTD

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11149	GBS ADMINISTRATORS, INC	5,080.91	0.00	0.00	5,080.91

Vendor#	Vendor Name	Class	Pay Code
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10956 GETINGE USA SALES LLC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6992512707		03/27/202	03/06/202	03/27/202			66.74	0.00	0.00	66.74

SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10956	GETINGE USA SALES LLC	66.74	0.00	0.00	66.74

Vendor#	Vendor Name	Class	Pay Code
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10642 GLAXOSMITHKLINE PHARMACUETICAL ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8254155142		03/27/202	10/04/202	01/04/202			8,859.20	0.00	0.00	8,859.20

INVENTORY

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10642	GLAXOSMITHKLINE PHARMACUETICAL	8,859.20	0.00	0.00	8,859.20

Vendor#	Vendor Name	Class	Pay Code
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W1300 GRAINGER ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9046808425		03/27/202	03/08/202	04/02/202			29.19	0.00	0.00	29.19

SUPPLIES

9048275623		03/27/202	03/11/202	04/05/202			5.98	0.00	0.00	5.98
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SUPPLIES

9049465462		03/27/202	03/12/202	04/06/202			4.56	0.00	0.00	4.56
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SUPPLIES

9050082503		03/27/202	03/12/202	04/06/202			19.64	0.00	0.00	19.64
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SUPPLIES

9051131002		03/27/202	03/13/202	04/07/202			34.40	0.00	0.00	34.40
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SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
W1300	GRAINGER	93.77	0.00	0.00	93.77

Vendor#	Vendor Name	Class	Pay Code
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11984 GUERBET, LLC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
18739572		03/27/202	02/14/202	03/27/202			350.00	0.00	0.00	350.00

SUPPLIES

18740672		03/27/202	02/21/202	03/27/202			350.00	0.00	0.00	350.00
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SUPPLIES

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11984	GUERBET, LLC	700.00	0.00	0.00	700.00

Vendor#	Vendor Name	Class	Pay Code
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G1210 GULF COAST PAPER COMPANY ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2507003		03/27/202	02/27/202	03/28/202			848.70	0.00	0.00	848.70

SUPPLIES

2506974 ✓		03/27/202 02/27/202 03/28/202		69.00	0.00	0.00	69.00 ✓
2514415 ✓	SUPPLIES	03/27/202 03/19/202 04/18/202		769.92	0.00	0.00	769.92 ✓
	SUPPLIES						
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
	G1210 GULF COAST PAPER COMPANY			1,687.62	0.00	0.00	1,687.62
Vendor#	Vendor Name	Class	Pay Code				
H1399	HILL-ROM COMPANY, INC ✓	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross
1826326 ✓		03/27/202	03/21/202	03/27/202			68.74
	SUPPLIES						68.74 ✓
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
	H1399 HILL-ROM COMPANY, INC			68.74	0.00	0.00	68.74
Vendor#	Vendor Name	Class	Pay Code				
10341	JENISE SVETLIK ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross
032724		03/28/202	03/24/202	04/03/202			344.38
	TRAVEL/TEXAS AIM - Maternal Hypertension						344.38 ✓
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
	10341 JENISE SVETLIK			344.38	0.00	0.00	344.38
Vendor#	Vendor Name	Class	Pay Code				
15376	JOHN CHOVANETZ ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross
~~034824~~ 270628	REFUND	03/28/202	03/18/202	04/15/202			120.00
							120.00 ✓
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
	15376 JOHN CHOVANETZ			120.00	0.00	0.00	120.00
Vendor#	Vendor Name	Class	Pay Code				
15372	MARION JESSUP ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross
~~034524~~ 270193	REFUND	03/28/202	03/15/202	04/15/202			120.00
							120.00 ✓
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
	15372 MARION JESSUP			120.00	0.00	0.00	120.00
Vendor#	Vendor Name	Class	Pay Code				
M2178	MCKESSON MEDICAL SURGICAL INC ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross
21850059 ✓		03/20/202	03/18/202	04/02/202			742.45
	SUPPLIES						742.45 ✓
19113095 ✓		03/26/202	02/27/202	03/14/202			264.75
	SUPPLIES						264.75 ✓
19314081 ✓		03/26/202	04/24/202	05/09/202			264.75
	SUPPLIES						264.75 ✓
21875771 ✓		03/27/202	03/22/202	04/06/202			119.51
	SUPPLIES						119.51 ✓
21882388 ✓		03/27/202	03/25/202	04/09/202			2,113.54
	SUPPLIES						2,113.54 ✓
21880815 ✓		03/27/202	03/25/202	04/09/202			410.51
	SUPPLIES						410.51 ✓
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
	M2178 MCKESSON MEDICAL SURGICAL INC			3,915.51	0.00	0.00	3,915.51
Vendor#	Vendor Name	Class	Pay Code				
11203	MEDI-DOSE, INC ✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross
0919290 ✓		03/27/202	03/18/202	04/01/202			285.00
	SUPPLIES						285.00 ✓

Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net
		11203	MEDI-DOSE, INC			285.00	0.00	0.00	285.00
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
2311696385 ✓	SUPPLIES	03/27/202	03/19/202	04/13/202		1,676.89	0.00	0.00	1,676.89 ✓
2311696384 ✓	SUPPLIES	03/27/202	03/19/202	04/13/202		33.05	0.00	0.00	33.05 ✓
2311779092 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		394.93	0.00	0.00	394.93 ✓
2311779096 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		8.74	0.00	0.00	8.74 ✓
2311779098 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		546.80	0.00	0.00	546.80 ✓
2311779089 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		1,058.98	0.00	0.00	1,058.98 ✓
2311780800 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		216.73	0.00	0.00	216.73 ✓
2311779091 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		34.25	0.00	0.00	34.25 ✓
2311779090 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		14.95	0.00	0.00	14.95 ✓
2311779094 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		248.65	0.00	0.00	248.65 ✓
2311779099 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		5,260.37	0.00	0.00	5,260.37 ✓
2311779095 ✓	SUPPLIES	03/27/202	03/20/202	04/14/202		98.28	0.00	0.00	98.28 ✓
2312055604 ✓	SUPPLIES	03/27/202	03/21/202	04/15/202		2.78	0.00	0.00	2.78 ✓
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net
		M2470	MEDLINE INDUSTRIES INC			9,595.40	0.00	0.00	9,595.40
Vendor#	Vendor Name		Class	Pay Code					
M2685	MICROTEK MEDICAL INC ✓		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
6342727655 ✓	SUPPLIES	03/27/202	12/26/202	01/26/202		380.24	0.00	0.00	380.24 ✓
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net
		M2685	MICROTEK MEDICAL INC			380.24	0.00	0.00	380.24
Vendor#	Vendor Name		Class	Pay Code					
M2621	MMC AUXILIARY GIFT SHOP ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
032124	PAYROLL DEDUCT	03/27/202	03/21/202	04/03/202		315.58	0.00	0.00	315.58 ✓
Vendor Totals:		Number	Name			Gross	Discount	No-Pay	Net
		M2621	MMC AUXILIARY GIFT SHOP			315.58	0.00	0.00	315.58
Vendor#	Vendor Name		Class	Pay Code					
10536	MORRIS & DICKSON CO, LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
1769374 ✓	INVENTORY	03/27/202	03/18/202	03/28/202		686.70	0.00	0.00	686.70 ✓
1774055 ✓	INVENTORY	03/27/202	03/19/202	03/29/202		2,283.14	0.00	0.00	2,283.14 ✓
1774054 ✓	INVENTORY	03/27/202	03/19/202	03/29/202		273.88	0.00	0.00	273.88 ✓

1777574 ✓		03/27/202 03/20/202 03/30/202	34.31	0.00	0.00	34.31 ✓
	INVENTORY					
1780594 ✓		03/27/202 03/20/202 03/30/202	19.81	0.00	0.00	19.81 ✓
	INVENTORY					
1780595 ✓		03/27/202 03/20/202 03/30/202	682.90	0.00	0.00	682.90 ✓
	INVENTORY					
1777575 ✓		03/27/202 03/20/202 03/30/202	33.78	0.00	0.00	33.78 ✓
	INVENTORY					
1777573 ✓		03/27/202 03/20/202 03/30/202	37.83	0.00	0.00	37.83 ✓
	INVENTORY					
1776978 ✓		03/27/202 03/20/202 03/30/202	3,611.54	0.00	0.00	3,611.54 ✓
	INVENTORY					
1785354 ✓		03/27/202 03/21/202 03/31/202	267.74	0.00	0.00	267.74 ✓
	INVENTORY					
1782819 ✓		03/27/202 03/21/202 03/31/202	4,342.50	0.00	0.00	4,342.50 ✓
	INVENTORY					
1785353 ✓		03/27/202 03/21/202 03/31/202	35.86	0.00	0.00	35.86 ✓
	INVENTORY					
1787248 ✓		03/27/202 03/22/202 04/01/202	1,085.75	0.00	0.00	1,085.75 ✓
	INVENTORY					
1787184 ✓		03/27/202 03/22/202 04/01/202	12,381.92	0.00	0.00	12,381.92 ✓
	INVENTORY					
1790296 ✓		03/27/202 03/24/202 04/03/202	1,119.91	0.00	0.00	1,119.91 ✓
	INVENTORY					
1791527 ✓		03/27/202 03/24/202 04/03/202	1,357.40	0.00	0.00	1,357.40 ✓
	INVENTORY					
1790295 ✓		03/27/202 03/24/202 04/03/202	11.41	0.00	0.00	11.41 ✓
	INVENTORY					
1791528 ✓		03/27/202 03/24/202 04/03/202	545.17	0.00	0.00	545.17 ✓
	INVENTORY					
1796557 ✓		03/27/202 03/25/202 04/04/202	186.94	0.00	0.00	186.94 ✓
	INVENTORY					
1796556 ✓		03/27/202 03/25/202 04/04/202	287.10	0.00	0.00	287.10 ✓
	INVENTORY					
1801732 ✓		03/27/202 03/26/202 04/05/202	1,723.57	0.00	0.00	1,723.57 ✓
	INVENTORY					
1801731 ✓		03/27/202 03/26/202 04/05/202	600.45	0.00	0.00	600.45 ✓
	INVENTORY					

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	31,609.61	0.00	0.00	31,609.61

Vendor#	Vendor Name	Class	Pay Code
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11163	NINA GREEN ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
032724		03/28/202	03/27/202	04/03/202			344.38	0.00	0.00	344.38 ✓
	TRAVEL/TEXAS AIM - Maternal Hypertension									
Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net				
	11163	NINA GREEN	344.38	0.00	0.00	344.38				

Vendor#	Vendor Name	Class	Pay Code
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Q1416	ORTHO CLINICAL DIAGNOSTICS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1853439356		03/27/202	03/12/202	04/11/202			782.16	0.00	0.00	782.16 ✓
	SUPPLIES									
1853444231		03/27/202	03/13/202	04/12/202			190.04	0.00	0.00	190.04 ✓
	SUPPLIES									
Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net				
	Q1416	ORTHO CLINICAL DIAGNOSTICS	972.20	0.00	0.00	972.20				

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
301 ✓		03/27/202	03/21/202	04/15/202			525.00	0.00	0.00	525.00 ✓
	PALS RECERT									
300 ✓		03/27/202	03/21/202	04/15/202			1,200.00	0.00	0.00	1,200.00 ✓
	ACLS									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
14764	PL-CPR, LLC						1,725.00	0.00	0.00	1,725.00
Vendor#	Vendor Name	Class	Pay Code							
11080	RADSOURCE ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
PSI001228 ✓		03/27/202	03/16/202	04/10/202			1,708.33	0.00	0.00	1,708.33 ✓
	CONTRACT									
PSI001205 ✓		03/27/202	03/16/202	04/10/202			1,791.67	0.00	0.00	1,791.67 ✓
	CONTRACT									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
11080	RADSOURCE						3,500.00	0.00	0.00	3,500.00
Vendor#	Vendor Name	Class	Pay Code							
11296	SOUTH TEXAS BLOOD & TISSUE CEN ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
I07038959 ✓		03/27/202	03/15/202	04/09/202			5,544.00	0.00	0.00	5,544.00 ✓
	BLOOD									
GM11856 ✓		03/27/202	03/15/202	04/09/202			-4,224.00	0.00	0.00	-4,224.00 ✓
	CREDIT									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
11296	SOUTH TEXAS BLOOD & TISSUE CEN						1,320.00	0.00	0.00	1,320.00
Vendor#	Vendor Name	Class	Pay Code							
C1010	SPARKLIGHT ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
031424		03/27/202	03/14/202	03/15/202			113.22	0.00	0.00	113.22 ✓
	CABLE									
031624		03/27/202	03/16/202	03/17/202			132.93	0.00	0.00	132.93 ✓
	CABLE									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
C1010	SPARKLIGHT						246.15	0.00	0.00	246.15
Vendor#	Vendor Name	Class	Pay Code							
S2694	STANFORD VACUUM SERVICE ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
695095 ✓		03/27/202	03/18/202	04/15/202			550.00	0.00	0.00	550.00 ✓
	GREASE TRAP									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
S2694	STANFORD VACUUM SERVICE						550.00	0.00	0.00	550.00
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
12182234 ✓		03/27/202	03/14/202	04/08/202			907.12	0.00	0.00	907.12 ✓
	SUPPLIES									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
S3940	STERIS CORPORATION						907.12	0.00	0.00	907.12
Vendor#	Vendor Name	Class	Pay Code							
T0420	TELEFLEX MEDICAL ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9508149406 ✓		03/27/202	03/07/202	04/06/202			27.00	0.00	0.00	27.00 ✓
	SUPPLIES									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net

	T0420	TELEFLEX MEDICAL					27.00	0.00	0.00	27.00
Vendor#	Vendor Name		Class	Pay Code						
15364	IDO ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
263670 ✓		03/27/202	03/26/202	04/15/202			168.00	0.00	0.00	168.00 ✓
	PT REFUND									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	15364						168.00	0.00	0.00	168.00
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
TRI179268 ✓		03/27/202	03/12/202	03/27/202			253.23	0.00	0.00	253.23 ✓
	FREIGHT									
TRI80049 ✓		03/27/202	03/20/202	04/04/202			168.97	0.00	0.00	168.97 ✓
	FREIGHT									
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	13616	TRIOSE, INC					422.20	0.00	0.00	422.20
Vendor#	Vendor Name		Class	Pay Code						
U1064	UNIFIRST HOLDINGS INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2921027409 ✓		03/27/202	03/14/202	04/08/202			251.93	0.00	0.00	251.93 ✓
	LAUNDRY									
2921027406 ✓		03/27/202	03/14/202	04/08/202			29.95	0.00	0.00	29.95 ✓
	LAUNDRY									
2921027410 ✓		03/27/202	03/14/202	04/08/202			112.14	0.00	0.00	112.14 ✓
	LAUNDRY									
2921027405 ✓		03/27/202	03/14/202	04/08/202			2,581.68	0.00	0.00	2,581.68 ✓
	LAUNDRY									
2921027408 ✓		03/27/202	03/14/202	04/08/202			282.90	0.00	0.00	282.90 ✓
	LAUNDRY									
2921027403 ✓		03/27/202	03/14/202	04/08/202			114.42	0.00	0.00	114.42 ✓
	LAUNDRY									
2921027404 ✓		03/27/202	03/14/202	04/08/202			166.02	0.00	0.00	166.02 ✓
	LAUNDRY									
2921027407 ✓		03/27/202	03/14/202	04/08/202			314.87	0.00	0.00	314.87 ✓
	LAUNDRY									
2921027621 ✓		03/27/202	03/18/202	04/12/202			102.07	0.00	0.00	102.07 ✓
	LAUNDRY									
2921027620 ✓		03/27/202	03/18/202	04/12/202			2,852.26	0.00	0.00	2,852.26 ✓
	LAUNDRY									
2921027950 ✓		03/27/202	03/21/202	04/15/202			29.15	0.00	0.00	29.15 ✓
	LAUNDRY									
2921027954 ✓		03/27/202	03/21/202	04/15/202			155.08	0.00	0.00	155.08 ✓
	LAUNDRY									
2921027952 ✓	LAUNDRY	03/27/202	03/21/202	04/15/202			282.90	0.00	0.00	282.90 ✓
	LAUNDRY									
2921027946 ✓		03/27/202	03/21/202	04/15/202			111.68	0.00	0.00	111.68 ✓
	LAUNDRY									
2921027949 ✓		03/27/202	03/21/202	04/15/202			2,329.34	0.00	0.00	2,329.34 ✓
	LAUNDRY									
2921027947 ✓		03/27/202	03/21/202	04/15/202			208.64	0.00	0.00	208.64 ✓
	LAUNDRY									
2921027951 ✓		03/27/202	03/21/202	04/15/202			315.03	0.00	0.00	315.03 ✓
	LAUNDRY									
2921027953 ✓		03/27/202	03/21/202	04/15/202			259.80	0.00	0.00	259.80 ✓
	LAUNDRY									

Vendor Totals: Number		Name		Gross		Discount		No-Pay		Net	
U1064		UNIFIRST HOLDINGS INC		10,499.86		0.00		0.00		10,499.86	
Vendor#	Vendor Name			Class	Pay Code						
11064	VELOCITY EHS ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
305947 ✓		03/27/202	03/13/202	04/12/202			4,796.76	0.00	0.00	4,796.76 ✓	
SDS MANAGEMENT											
Vendor Totals: Number		Name		Gross		Discount		No-Pay		Net	
11064		VELOCITY EHS		4,796.76		0.00		0.00		4,796.76	
Vendor#	Vendor Name			Class	Pay Code						
14752	VYAIRE MEDICAL 211 INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
31662585 ✓		03/27/202	03/13/202	03/27/202			190.94	0.00	0.00	190.94 ✓	
SUPPLIES											
Vendor Totals: Number		Name		Gross		Discount		No-Pay		Net	
14752		VYAIRE MEDICAL 211 INC		190.94		0.00		0.00		190.94	
Vendor#	Vendor Name			Class	Pay Code						
15360	WENDELL POOLE ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
269413 ✓		03/27/202	03/22/202	04/15/202			120.00	0.00	0.00	120.00 ✓	
PT REFUND											
Vendor Totals: Number		Name		Gross		Discount		No-Pay		Net	
15360		WENDELL POOLE		120.00		0.00		0.00		120.00	
Vendor#	Vendor Name			Class	Pay Code						
10556	WOUND CARE SPECIALISTS ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
WCS00006450 ✓		03/27/202	01/01/202	01/30/202			12,500.00	0.00	0.00	12,500.00 ✓	
WOUND CARE											
Vendor Totals: Number		Name		Gross		Discount		No-Pay		Net	
10556		WOUND CARE SPECIALISTS		12,500.00		0.00		0.00		12,500.00	
Report Summary											
Grand Totals:		Gross		Discount		No-Pay		Net			
		338,426.41		0.00		0.00		338,426.41			

APPROVED
ON

MAR 28 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

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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
21859059	SUPPLIES	03/20/202	03/18/202	04/02/202			742.45	0.00	0.00	742.45
18113095	SUPPLIES	03/26/202	02/27/202	03/14/202			264.75	0.00	0.00	264.75
19314081	SUPPLIES	03/26/202	04/24/202	05/09/202			264.75	0.00	0.00	264.75
21875771	SUPPLIES	03/27/202	03/22/202	04/06/202			119.51	0.00	0.00	119.51
21880816	SUPPLIES	03/27/202	03/25/202	04/09/202			410.51	0.00	0.00	410.51
21882388	SUPPLIES	03/27/202	03/25/202	04/09/202			2113.54	0.00	0.00	2113.54
18715233 ✓	SUPPLIES	03/29/202	01/02/202	01/17/202			333.48	0.00	0.00	333.48 * ✓
19777108 ✓	SUPPLIES	03/29/202	09/01/202	09/16/202			771.17	0.00	0.00	771.17 * ✓
19891777 ✓	SUPPLIES	03/29/202	10/03/202	10/18/202			303.68	0.00	0.00	303.68 * ✓
20070089 ✓	SUPPLIES	03/29/202	11/25/202	12/10/202			771.17	0.00	0.00	771.17 * ✓
20335358 ✓	SUPPLIES	03/29/202	02/17/202	03/04/202			870.79	0.00	0.00	870.79 * ✓
20604719 ✓	SUPPLIES	03/29/202	05/03/202	05/18/202			2,052.83	0.00	0.00	2,052.83 * ✓
20643011 ✓	SUPPLIES	03/29/202	05/12/202	05/27/202			870.79	0.00	0.00	870.79 * ✓
2094756 ✓	SUPPLIES	03/29/202	08/08/202	08/21/202			870.79	0.00	0.00	870.79 * ✓
21281641 ✓	SUPPLIES	03/29/202	10/27/202	11/11/202			870.79	0.00	0.00	870.79 * ✓
21628587 ✓	SUPPLIES	03/29/202	01/24/202	02/08/202			870.79	0.00	0.00	870.79 * ✓

Vendor Totals: Number Name

M2178 MCKESSON MEDICAL SURGICAL INC

Gross Discount No-Pay Net
12,501.79 0.00 0.00 12,501.79

Grand Totals:

Gross Discount No-Pay Net
12,501.79 0.00 0.00 12,501.79

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

critical added: \$ 8,586.28 ✓

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4/1/24, 11:28 AM
APR 01 2024

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MEMORIAL MEDICAL CENTER

AP Open Invoice List

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Vendor# Vendor Name

Class Pay Code

Dates Through:

S0900 SAM'S CLUB DIRECT

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
032324		03/29/202	03/23/202	04/08/202			345.78	0.00	0.00	345.78

SUPPLIES

Vendor Totals: Number Name

S0900 SAM'S CLUB DIRECT

Gross	Discount	No-Pay	Net
345.78	0.00	0.00	345.78

Grand Totals:

Gross	Discount	No-Pay	Net
345.78	0.00	0.00	345.78

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

4/1/24 11:37 AM

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MEMORIAL MEDICAL CENTER

AP Open Invoice List

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Dates Through:

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Calhoun County Auditor

Class Pay Code

14920 REPUBLIC SERVICES, INC. ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
001324754	✓	03/29/202	03/15/202	04/04/202			586.28	0.00	0.00	586.28 ✓
	WASTE DISPOSAL									
001327206	✓	03/29/202	03/25/202	04/15/202			1,738.62	0.00	0.00	1,738.62 ✓
	WASTE DISPOSAL									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
14920 REPUBLIC SERVICES, INC.							2,324.90	0.00	0.00	2,324.90

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,324.90	0.00	0.00	2,324.90

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED

tmp_cw5report4146120134036946698.html

APR 01 2024

04/01/2024

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

ap_open_invoice.template

10:26 AM
Calhoun County Auditor

Vendor# Vendor Name

14064 CAPITAL ONE ✓

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay
1654564663		03/29/202	03/19/202	04/13/202		

Gross	Discount	No-Pay	Net
265.29	0.00	0.00	265.29 ✓

MISC Supplies

Vendor Totals: Number Name
14064 CAPITAL ONE

Gross	Discount	No-Pay	Net
265.29	0.00	0.00	265.29

Grand Totals:

Gross	Discount	No-Pay	Net
265.29	0.00	0.00	265.29

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APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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4/1/24 11:49 AM

APR 01 2024

04/01/2024

Calhoun County Auditor

tmp_cw5report4000649533252501224.html

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

0
ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

11183 FRONTIER ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
03192024		03/29/202	03/19/202	04/12/202			56.40	0.00	0.00	56.40 ✓
	PHONE									
032324		03/29/202	03/23/202	04/16/202			25.83	0.00	0.00	25.83 ✓
	TELEPHONE									

Vendor Totals: Number Name

11183 FRONTIER

Gross	Discount	No-Pay	Net
82.23	0.00	0.00	82.23

Grand Totals:

Gross	Discount	No-Pay	Net
82.23	0.00	0.00	82.23

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

McKESSON

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: 03/29/2024

Page: 002

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

DC: 8115
Customer INV SupplD:
Territory:

As of: 03/29/2024 Page: 002
Mail to: Comp: 8000

Customer: 632536
Date: 03/30/2024

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 03/30/2024 ITEMS NOT PAID (✓)

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 3,611.87 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 04/02/2024,
Pay This Amount:

3,539.66 USD

If Paid After 04/02/2024,
Pay this Amount:

3,611.87 USD

Due If Paid On Time:

USD 3,539.65 ✓

Disc lost if paid late: 72.22

Due If Paid Late:
USD 3,611.87

Andrew Delasanta
4/1/24

3,388.67 +
3.02 +
137.29 +
7.65 +
3.02 +
3,539.65 =

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 03/29/2024

Page: 001

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

DC: 8115
Customer INV SupplD:
Territory: 7001

As of: 03/29/2024 Page: 001
Mail to: Comp: 8000

Customer: 256342
Date: 03/30/2024

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 03/30/2024 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
03/25/2024	04/02/2024	7485637298	110350681	115Invoice	9.58	479.09		469.51 X		7485637298	✓
03/25/2024	04/02/2024	7485637299	110427645	115Invoice	1.34	66.99		65.65 X		7485637299	✓
03/25/2024	04/02/2024	7485669858	110501512	195Invoice	0.01	0.63		0.62 X		7485669858	✓
03/26/2024	04/02/2024	7486161547	110597906	195Invoice	1.27	63.54		62.27 X		7486161547	✓
03/27/2024	04/02/2024	7486270631	110745054	115Invoice	1.05	52.59		51.54 X		7486270631	✓
03/27/2024	04/02/2024	7486466312	110757111	115Invoice	0.62	31.24		30.62 X		7486466312	✓
03/28/2024	04/02/2024	7486558943	110876496	115Invoice	46.53	2,326.65		2,280.12 X		7486558943	✓
03/28/2024	04/02/2024	7486728701	110883278	195Invoice	5.25	262.45		257.20 X		7486728701	✓
03/29/2024	04/02/2024	7486826714	110990372	115Invoice		0.18		0.18 X		7486826714	✓
03/29/2024	04/02/2024	7486977352	110997422	195Invoice	0.42	20.90		20.48 X		7486977352	✓
03/29/2024	04/02/2024	7486977353	111002943	115Invoice	3.07	153.55		150.48 X		7486977353	✓

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

TOTAL:

Subtotals: 3,457.81 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 03/25/2024 2,178.29

If Paid By 04/02/2024,
Pay This Amount:

3,388.67 USD

If Paid After 04/02/2024,
Pay this Amount:

3,457.81 USD

Due If Paid On Time:

USD 3,388.67 ✓

Disc lost if paid late:

69.14

Due If Paid Late:

USD 3,457.81

Andrew Dela Santos
4/1/24

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON**STATEMENT**

As of: 03/29/2024

Page: 001

To ensure proper credit to your
account, detach and return this
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Company: 8000

CVS PHCY 10356/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyDC: 8115
Customer INV SupplD:
Territory: 7001Customer: 835430
Date: 03/30/2024As of: 03/29/2024 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 835430 PLEASE CHECK ANY
Date: 03/30/2024 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account 612536 Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835430	CVS PHCY 10356/MEM MC PHS										
03/27/2024	04/02/2024	7486275832	3133591	115Invoice	0.06	3.08		3.02		7486275832	☒

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

TOTAL: Customer Number 835430 CVS PHCY 10356/MEM MC PHS

Subtotals: 3.08 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 14,828.46
03/18/2024If Paid By 04/02/2024,
Pay This Amount:

3.02 USD

If Paid After 04/02/2024,
Pay this Amount:

3.08 USD

Due If Paid On Time:

USD 3.02 ✓

Disc lost if paid late:

0.08

Due If Paid Late:

USD 3.08

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXASAndrew De La Sota
4/1/24

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

Company: 8000

CVS PHCY 8923/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

As of: 03/29/2024

Page: 001

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account, detach and return this
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DC: 8115
Customer INV SupplD:
Territory: 7001

As of: 03/29/2024 Page: 001
Mail to: Comp: 8000

Customer: 835434
Date: 03/30/2024

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835434 PLEASE CHECK ANY
Date: 03/30/2024 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 835434 CVS PHCY 8923/MEM MC PHS											
03/27/2024	04/02/2024	7486314224	3133922	115Invoice	0.06	3.08		3.02	✓	7486314224	✓
03/27/2024	04/02/2024	7486314225	3133922	115Invoice	2.74	137.01		134.27	✓	7486314225	✓

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

TOTAL: Customer Number 835434 CVS PHCY 8923/MEM MC PHS

Subtotals:

140.09 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,178.29
03/25/2024

If Paid By 04/02/2024,

Pay This Amount:

137.29 USD

If Paid After 04/02/2024,

Pay this Amount:

140.09 USD

Due If Paid On Time:

USD

137.29

Disc lost if paid late:

2.80

Due If Paid Late:

USD

140.09

Andres De Los Santos
4/1/24

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ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

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

As of: 03/29/2024

Page: 001

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DC: 8115
Customer INV SupplD:
Territory: 7001

As of: 03/29/2024 Page: 001
Mail to: Comp: 8000

Customer: 835437
Date: 03/30/2024

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835437 PLEASE CHECK ANY
Date: 03/30/2024 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 835437	CVS PHCY 7416/MEM MC PHS										
03/27/2024	04/02/2024	7486462515	3131834	115Invoice	0.16	7.81		7.65		7486462515	☒

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: 7.81 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,178.29
03/25/2024

If Paid By 04/02/2024,
Pay This Amount:

7.65 USD

If Paid After 04/02/2024,
Pay this Amount:

7.81 USD

Due If Paid On Time:

USD 7.65 X ✓ ✓

Disc lost if paid late: 0.16

Due If Paid Late:

USD 7.81

Andrew D. Santos
4/1/24

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

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

As of: 03/29/2024

Page: 001

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account, detach and return this
stub with your remittance

DC: 8115
Customer INV SupplD:
Territory: 7001

As of: 03/29/2024 Page: 001
Mail to: Comp: 8000

Customer: 835438
Date: 03/30/2024

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 PLEASE CHECK ANY
Date: 03/30/2024 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Number	632536 Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835438 CVS PHCY 7475/MEM MC PHS												
03/27/2024	04/02/2024	7486456094		3134343	115Invoice	0.06	3.08		3.02		7486456094	✓

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:

3.08 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,178.29
03/25/2024

If Paid By 04/02/2024,
Pay This Amount:

3.02 USD

If Paid After 04/02/2024,
Pay this Amount:

3.08 USD

Due If Paid On Time:
USD

3.02 ✓✓

Disc lost if paid late:

0.06

Due If Paid Late:
USD

3.08

Andrew De La Senter
4/1/24

APPROVED
ON

APR 11 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- Mar 25, 2024 - March 31, 2024 ✓**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>	<u>Amount</u>	<u>CPSL</u>	
3/29/2024	PAY PLUS ACHTrans 000000018578574 1010006920	- 3rd Party Payor Fee	21.57	21.57	
3/29/2024	EXPERTPAY EXPERTPAY 746003411 91000015618090	- Child Support Payment	270.69	270.69	
3/29/2024	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	406.46	406.46	
3/29/2024	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	411,188.95	411,188.95	
3/28/2024	PAY PLUS ACHTrans 000000018407037 1010006907	- 3rd Party Payor Fee	201.23	201.23	
3/27/2024	PAY PLUS ACHTrans 000000018295355 1010006997	- 3rd Party Payor Fee	22.58	22.58	
3/27/2024	HPHG LLC MEMOR PREM MemMedCtr Ptlav 11312265	- Health Insurance Premium Payment	68,313.77	68,313.77	
3/26/2024	WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT	corrected with transfer from ODA 4462	23,488.78	23,488.78	
3/26/2024	PAY PLUS ACHTrans 000000018172034 1010006985	- 3rd Party Payor Fee	71.94	71.94	
3/26/2024	MCKESSON DRUG AUTO ACH ACH05929787 910000126	- 340B Drug Program Expense	2,178.29	2,178.29	
3/26/2024	HPHG LLC ACH3.4 MemMedCtr Ptlav 113122650007	- Health Insurance Claim Payments	35,022.27	35,022.27	
3/25/2024	PAY PLUS ACHTrans 000000018096193 1010006975	- 3rd Party Payor Fee	21.72	21.72	
			541,508.05		

PAY PLUS

21.57
201.23
22.58
406.46
411,188.95
201.23
22.58
68,313.77
23,488.78
71.94
2,178.29
35,022.27
21.72
909.55

Andrew De Los Santos
ANDREW DE LOS SANTOS
Memorial Medical Center

April 1, 2024

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

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

* Approved 03-27-24 CC
** Approved 03-20-24 CC
*** Approved 03-16-24 CC

X county credit card
paid out of wrong account
Treasurer transferred funds
from operating to MMC
opening to cover pymt
made in error,

0.00 ✓

Andrew De Los Santos
ANDREW DE LOS SANTOS
Memorial Medical Center

APPROVED
April 1, 2024 ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Transfer Request

Amount: 10.00 ✓

From Account: Operating- *4357

To Account: Bank of America

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Account Number: 466007904549

Routing Number: 026009593

Explanation:

Account Validation to receive rebates from Medline

Requested by: Caitlin Clevenger

Date: 4/1/2024

Authorized by: Andrew P. Santos

Date: 4/1/24

Powered by **nsknox**[Welcome](#)[Company
Details](#)[Bank Account
Details](#)[Validation
Instructions](#)

Standard Account Validation

Thank you for registering. To complete the validation of your account, please make a one time transfer of USD \$10 or equivalent in the currency you expect to receive your payments.

Payment instructions

Do not use ACH

Only wire transfer (SWIFT)

Beneficiary name

nsKnox Technologies, Inc

Address

Account number

Swift code

ires)

ABA Fedwire

Bank name and address

Bank of America,
222 Broadway,
New York, NY 10038

[Privacy](#) - [Terms](#)

Memorial Medical Center
Transfer Request

Amount: 15,447.67 ✓

From Account: Operating- *4357

To Account: US BANCORP FSA/HRA/DC ACCT ACCT

APPROVED
ON
APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Account Number: 158300195894

Routing Number: 122235821

Explanation:

Invoice numbers: 6255948, 6292085, 6314053, 6334398

Requested by: Caitlin Clevenger

Date: 4/1/2024

Authorized by: Andrew D. DeSantis

Date: 4/1/24

HealthEquity WageWorks

INVOICE

To: Memorial Medical Center
PO Box 25
Port Lavaca TX 77979

WageWorks, Inc.
4609 Regent Blvd.
Irving, TX 75063
214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821
Please include invoice # in your payment addenda for ACH
Credit or Wire payment.
Log on to our employer website to view detailed invoice
reports: employer.wageworks.com

Account #	Invoice Date
2052366	03/04/2024
PO #	DUE DATE
	06/03/2024
Invoice #	AMOUNT DUE
INV6255948	\$2,288.06

Description	Plan Code	Amount
PMB Payments - HCFA 2024	HCFA2024	261.01
PMP Payments - HCFA 2024	HCFA2024	209.46
Visa Card Payments - HCFA 2024	HCFA2024	1,399.14
Visa Card Payments - HCFA 2023	HCFA2023	398.45

Total Amount Due

\$2,288.06

411124

WageWorks

INVOICE

To: Memorial Medical Center
PO Box 25
Port Lavaca TX 77979

WageWorks, Inc.
4609 Regent Blvd.
Irving, TX 75063
214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821

Please include invoice # in your payment addenda for ACH Credit or Wire payment.

Log on to our employer website to view detailed invoice reports: employer.wageworks.com

Account #	Invoice Date
2052366	03/11/2024
PO #	DUE DATE
	06/10/2024
Invoice #	AMOUNT DUE
INV6292085	\$5,724.44

Description	Plan Code	Amount
PMP Payments - DCFSA 2024	DCFSA2024	190.00
Visa Card Payments - HCFSa 2024	HCFSa2024	4,876.38
Visa Card Payments - HCFSa 2023	HCFSa2023	658.06

Total Amount Due

\$5,724.44

6.D.
411124

HealthEquity WageWorks

INVOICE

To: Memorial Medical Center ✓
PO Box 25
Port Lavaca TX 77979

WageWorks, Inc.
4609 Regent Blvd.
Irving, TX 75063
214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821
Please include invoice # in your payment addenda for ACH
Credit or Wire payment.
Log on to our employer website to view detailed invoice
reports: employer.wageworks.com

Account #	Invoice Date
2052366	03/18/2024
PO #	DUE DATE
	06/17/2024
Invoice #	AMOUNT DUE
INV6314053	\$3,291.55

Description	Plan Code	Amount
PMB Payments - DCFS 2024	DCFS2024	380.00
PMP Payments - HCFS 2024	HCFS2024	424.08
Visa Card Payments - HCFS 2024	HCFS2024	2,386.80
Visa Card Payments - HCFS 2023	HCFS2023	100.67

Total Amount Due

\$3,291.55 ✓

A.S.
4/1/24

HealthEquity WageWorks

INVOICE

To: Memorial Medical Center
PO Box 25
Port Lavaca TX 77979

WageWorks, Inc.
4609 Regent Blvd.
Irving, TX 75063
214.596.6900

Remit: Via Wire or ACH Credit to US BANCORP
FSA/HRA/DC Acct #: 158300195894 Routing #: 122235821

Please include invoice # in your payment addenda for ACH
Credit or Wire payment.

Log on to our employer website to view detailed invoice
reports: employer.wageworks.com

Account #	Invoice Date
2052366	03/25/2024
PO #	DUE DATE
	06/24/2024
Invoice #	AMOUNT DUE
INV6334398	\$4,183.62

Description	Plan Code	Amount
PMB Payments - HCFA 2024	HCFA2024	72.46
Visa Card Payments - HCFA 2024	HCFA2024	2,757.56
PMB Payments - HCFA 2023	HCFA2023	987.49
Visa Card Payments - HCFA 2023	HCFA2023	346.11

Total Amount Due

\$4,183.62 ✓

A.S.
4/1/24

RECEIVED

03/28/2024

09:32

MAR 28 2024

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

Vendor#	Vendor Name	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
11836	GOLDENCREEK HEALTHCARE ✓	031524A		03/27/202	03/15/202	04/20/202			59.04	0.00	0.00	59.04 ✓
		031524B	TRANSFER	03/27/202	03/15/202	04/20/202			43.30	0.00	0.00	43.30 ✓
		031524	TRANSFER	03/27/202	03/15/202	04/20/202			622.58	0.00	0.00	622.58 ✓
		031824	TRANSFER	03/27/202	03/18/202	04/20/202			684.62	0.00	0.00	684.62 ✓
		031824A	TRANSFER	03/27/202	03/18/202	04/20/202			0.57	0.00	0.00	0.57 ✓
		032024A	TRANSFER	03/27/202	03/20/202	04/20/202			22.58	0.00	0.00	22.58 ✓
		032024	TRANSFER	03/27/202	03/20/202	04/20/202			146.34	0.00	0.00	146.34 ✓
		032024B	TRANSFER	03/27/202	03/20/202	04/20/202			2,244.00	0.00	0.00	2,244.00 ✓
Vendor Totals: Number Name									Gross	Discount	No-Pay	Net
	11836 GOLDENCREEK HEALTHCARE								3,823.03	0.00	0.00	3,823.03

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	3,823.03	0.00	0.00	3,823.03

APPROVED
ON

MAR 28 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

3/28/24, 9:33 AM

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RECEIVED

03/28/2024
09:32

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

0
ap_open_invoice.template

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
031524		03/27/202	03/15/202	04/20/202			10,524.00	0.00	0.00	10,524.00 ✓
	TRANSFER									
032024		03/27/202	03/20/202	04/20/202			223.88	0.00	0.00	223.88 ✓
	TRANSFER "									
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE						10,747.88	0.00	0.00	10,747.88

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	10,747.88	0.00	0.00	10,747.88

APPROVED
ON

MAR 28 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED

MAR 28 2024

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0
ap_open_invoice.template

09:33

Dates Through:

Vendor# Vendor Name

Class Pay Code

12792 BETHANY SENIOR LIVING ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
031524		03/27/202	03/15/202	04/20/202			461.40	0.00	0.00	461.40 ✓

TRANSFER *HH insurance pymt deposited into MMC operating*

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR LIVING	461.40	0.00	0.00	461.40

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	461.40	0.00	0.00	461.40

APPROVED
ON

MAR 28 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/31/2024 Added to Account	243.95						243.95
3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213180	29,385.53						29,385.53
3/29/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	17,311.39						17,311.39
3/29/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	5,957.82						5,957.82
3/29/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	799.47						799.47
3/28/2024 WIRE OUT ASHORD HEALTH CARE CENTER LTD	87,773.44						
3/28/2024 HNB - ECHO HCCLAIMPMT 746003411 44000021670	121.31						121.31
3/28/2024 NOVITAS SOLUTION HCCLAIMPMT 675423 420000132	2,012.36						2,012.36
3/27/2024 HNB - ECHO HCCLAIMPMT 746003411 440000210945	7,825.00						7,825.00
3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	814.16						814.16
3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	35,396.48						35,396.48
3/27/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	41,763.47						41,763.47
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	1,492.81						1,492.81
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	57,656.23						57,656.23
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	11,839.03						11,839.03
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	2,082.59						2,082.59
3/26/2024 NOVITAS SOLUTION HCCLAIMPMT 675423 420000137	340.19						340.19
3/26/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	490.04						490.04
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 44000021676	8,353.36						8,353.36
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 44000021676	115.86						115.86
3/25/2024 WELLPOINT CO-OP PAYMENT 65376900 1110000	20,951.19		4,846.05			22,405.01	3,397.24
3/25/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	1,470.12					1,470.12	
	87,773.44	251,268.51	20,951.19	4,846.05		22,405.01	228,863.51

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/31/2024 Added to Account	264.40						266.40
3/29/2024 MANAGEANDNET1718 MNS PMNT 00000000004293 41	67.50						67.50
3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213180	27,158.56						27,158.56
3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213448	3,989.01						3,989.01
3/29/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	969.39						969.39
3/29/2024 NOVITAS SOLUTION HCCLAIMPMT 676357 420000149	12,012.45						12,012.45
3/28/2024 WIRE OUT CANEX HEALTH CARE CENTERS III	224,510.05						
3/28/2024 Deposit	6,880.00						6,880.00
3/28/2024 HNB - ECHO HCCLAIMPMT 746003411 44000021314	775.79						775.79
3/28/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384	6,370.00						6,370.00
3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	1,873.43						1,873.43
3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	21,355.71						21,355.71
3/27/2024 NOVITAS SOLUTION HCCLAIMPMT 676357 420000169	16,978.69						16,978.69
3/27/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2	20,300.02						20,300.02
3/26/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384	5,460.00						5,460.00
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	3,680.17						3,680.17
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	17,610.18						17,610.18
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	7,986.13						7,986.13
3/26/2024 NOVITAS SOLUTION HCCLAIMPMT 676357 420000137	3,730.88						3,730.88
3/26/2024 HUMANA CHA DISB HCCLAIMPMT 44335384 42000012	2,383.00						2,383.00
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 440000217827	11,351.73						11,351.73
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 44000021676	5,542.80						5,542.80
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 44000021676	6,488.05						6,488.05
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 44000021676	10,632.71						10,632.71
3/25/2024 WELLPOINT CO-OP PAYMENT 65376900 1110000	7,753.59		1,959.87			8,341.55	1,871.91
3/25/2024 NOVITAS SOLUTION HCCLAIMPMT 676357 420000103	8,298.91						8,298.91
	224,510.05	211,875.98	7,753.59	1,959.87		8,341.55	209,394.47

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/31/2024 Added to Account	351.56						351.56
3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213448	1,332.94						1,332.94
3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213180	3,368.76						3,368.76
3/29/2024 DEVOTED HEALTH P HCCLAIMPMT 21000029341834	1,050.00						1,050.00
3/29/2024 DEVOTED HEALTH P HCCLAIMPMT 21000029341834	6,300.00						6,300.00
3/29/2024 DEVOTED HEALTH P HCCLAIMPMT 21000029341834	8,550.00						8,550.00
3/29/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	14,349.41						14,349.41
3/29/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	13,149.90						13,149.90
3/29/2024 NOVITAS SOLUTION HCCLAIMPMT 676323 420000149	729.78						729.78
3/29/2024 HUMANA INS CO HCCLAIMPMT 44407531 8300003756	2,325.00						2,325.00
3/29/2024 HUMANA CHA DISB HCCLAIMPMT 44407531 8300003756	375.00						375.00
3/28/2024 WIRE OUT CANEX HEALTH CARE CENTERS III	403,311.64						
3/28/2024 MANAGEANDNET1718 MNS PMNT 00000000003268 41	89.50						89.50
3/28/2024 DEVOTED HEALTH P HCCLAIMPMT 21000028391209	6,300.00						6,300.00
3/28/2024 DEVOTED HEALTH P HCCLAIMPMT 21000028391209	350.00						350.00
3/28/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384	690.00						690.00
3/27/2024 Deposit	11,324.00						11,324.00
3/27/2024 MANAGEANDNET1718 MNS PMNT 00000000003268 41	5,939.50						5,939.50
3/27/2024 DEVOTED HEALTH P HCCLAIMPMT 21000025646801	7,782.00						7,782.00
3/27/2024 DEVOTED HEALTH P HCCLAIMPMT 21000025646799	14,400.00						14,400.00
3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	2,765.59						2,765.59
3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	21,001.97						21,001.97
3/27/2024 NOVITAS SOLUTION HCCLAIMPMT 676323 420000169	591.90						591.90
3/26/2024 Check	6,344.00						
3/26/2024 MANAGEANDNET1718 MNS PMNT 00000000003268 41	4,016.50						4,016.50
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	2,115.14						2,115.14
3/26/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	16,430.62						16,430.62
3/26/2024 NOVITAS SOLUTION HCCLAIMPMT 676323 420000137	3,436.37						3,436.37
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 4400002148010	3,145.63						3,145.63
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 4400002147953	11,613.57						11,613.57
3/25/2024 WELLPOINT CO-OP PAYMENT 65376900 1110000	7,488.45		1,409.40			6,196.77	986.58
3/25/2024 NOVITAS SOLUTION HCCLAIMPMT 676323 420000109	13,377.63						13,377.63
3/25/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2	3,864.63						3,864.63
	409,655.64	188,300.25	5,773.95	1,409.40		6,196.77	182,103.48

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
3/31/2024 Added to Account	100.18						100.18
3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213180	2,612.83						2,612.83
3/29/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	4,781.54						4,781.54
3/28/2024 WIRE OUT CANEX HEALTH CARE CENTERS III	349.42						349.42
3/27/2024 Deposit	6,634.54						6,634.54
3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	12,680.77						12,680.77
3/27/2024 NOVITAS SOLUTION HCCLAIMPMT 676323 420000169	9,335.16						9,335.16

3/25/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
 3/26/2024 NOVITAS SOLUTION HCCLAIMPMT 675663 420000137
 3/25/2024 WELLPOINT CO AP E-PAYMENT 653766346 1110000
 3/25/2024 NOVITAS SOLUTION HCCLAIMPMT 675663 420000103

-	12,804.42	-	-	12,804.42
-	3,281.87	-	-	3,281.87
-	8,136.39	6,543.81	1,592.58	7,021.58
-	959.87	-	-	959.87
81,012.56	61,676.99	6,543.81	1,592.58	7,021.58
				54,655.41

Schedule of Payments

3/31/2024 Added to Account
 3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213448
 3/29/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384
 3/29/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
 3/28/2024 WIRE OUT CANTER HEALTH CARE CENTERS III
 3/28/2024 MANAGEANDNET1718 MNS PMNT 000000000002482 41
 3/28/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384
 3/28/2024 NOVITAS SOLUTION HCCLAIMPMT 676310 420000111
 3/27/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
 3/27/2024 NOVITAS SOLUTION HCCLAIMPMT 676310 420000169
 3/16/2024 MANAGEANDNET1718 MNS PMNT 000000000002482 41
 3/16/2024 HNB - ECHO HCCLAIMPMT 746003411 4400002134122
 3/16/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000
 3/16/2024 NOVITAS SOLUTION HCCLAIMPMT 676310 420000237
 3/16/2024 HUMANA INS CO HCCLAIMPMT 44244853 8300005501
 3/25/2024 WELLPOINT CO AP E-PAYMENT 653766346 1110000
 3/25/2024 NOVITAS SOLUTION HCCLAIMPMT 676310 420000103
 3/25/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	215.23	-	-	-	-	-	215.23
-	3,087.31	-	-	-	-	-	3,087.31
-	1,800.00	-	-	-	-	-	1,800.00
-	2,009.87	-	-	-	-	-	2,009.87
212,438.60	-	-	-	-	-	-	-
-	1,969.00	-	-	-	-	-	1,969.00
-	3,600.00	-	-	-	-	-	3,600.00
-	5,188.85	-	-	-	-	-	5,188.85
-	11,617.57	-	-	-	-	-	11,617.57
-	2,733.46	-	-	-	-	-	2,733.46
-	4,828.50	-	-	-	-	-	4,828.50
-	23,375.38	-	-	-	-	-	23,375.38
-	25,931.27	-	-	-	-	-	25,931.27
-	19,155.34	-	-	-	-	-	19,155.34
-	13,047.13	-	-	-	-	-	13,047.13
-	6,715.00	-	-	-	-	-	6,715.00
-	7,746.12	6,268.86	1,519.26	-	-	6,724.64	1,063.48
-	9,374.09	-	-	-	-	-	9,374.09
-	541.74	-	-	-	-	-	541.74
212,438.60	242,977.85	6,268.86	1,519.26	-	-	6,724.64	136,253.22
1,015,391.29	856,099.59	47,291.40	11,327.16	-	-	50,689.55	805,410.04

TOTALS

DETAILS Overview

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$1,689,145.09	\$1,621,400.69	\$1,689,145.09	\$1,991,449.27
*4385 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$543.19	\$543.19	\$543.19	\$542.50
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$437.28	\$437.28	\$437.28	\$436.73
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD ✓	\$251,830.34 ✓	\$266,137.17	\$251,830.34	\$198,132.18
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR ✓	\$212,402.73 ✓	\$219,118.01	\$212,402.73	\$167,938.41
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT ✓	\$189,021.06 ✓	\$197,975.74	\$189,021.06	\$137,138.71
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON ✓	\$143,601.61 ✓	\$156,563.46	\$143,601.61	\$136,489.20
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND ✓	\$61,978.71 ✓	\$63,016.16	\$61,978.71	\$54,134.74
*4484 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$67,524.71	\$78,587.24	\$67,524.71	\$67,353.55
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$394.27	\$394.27	\$394.27	\$382.66
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$30,220.73	\$30,220.73	\$30,220.73	\$27,767.95
*5505 MMC -NH BETHANY SENIOR LIVING	\$277,431.74	\$282,370.24	\$277,431.74	\$277,168.09
*3407 MMC -NH TUSCANY VILLAGE	\$304,030.78	\$304,030.78	\$304,030.78	\$272,089.10
*3880 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$609,891.25	\$609,891.25	\$609,891.25	\$608,191.31
Total Balance	\$3,838,553.49	\$3,830,786.21	\$3,838,553.49	\$3,939,294.60

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
4/1/2024

Nursing Home	Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
602240000		158,616.79	158,086.09	66,974.01		67,524.71	66,802.85
						Bank Balance Variance	
						Leave In Balance	100.00

January Interest 246.88
February Interest 283.82
March Interest 171.16

Adjust Balance/Transfer Amt 66,802.85

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: Andrew De Los Santos
ANDREW DE LOS SANTOS 4/1/2024

APPROVED
ON
APR 01 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



3/11/2024 Added to Account
3/28/2024 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
3/27/2024 Depoat
3/27/2024 TSY1/TRANS111EST CA CD DEP 543684355876917 91
3/26/2024 AETNA AS01 HCCLAIMPMT 3586075964 51000014676

MMC PORTION							NH PORTION
Transfer-Out	Transfer-In	QIP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPP T1	
-	173.16						173.16
158,066.09	-						-
-	63,601.58						63,601.58
-	1,901.27						1,901.27
-	1,300.00						1,300.00
158,066.09	65,974.01	-	-	-	-	-	65,974.01

FINANCIAL OVERVIEW

Account Name

*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$1,689,145.09	\$1,621,400.69	\$1,689,145.09	\$1,991,449.27
*4388 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$543.19	\$543.19	\$543.19	\$542.50
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$437.28	\$437.28	\$437.28	\$436.73
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$251,830.34	\$266,137.17	\$251,830.34	\$198,132.18
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$212,402.73	\$219,118.01	\$212,402.73	\$167,938.41
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$189,021.06	\$197,975.74	\$189,021.06	\$137,138.71
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$143,601.61	\$156,563.46	\$143,601.61	\$138,489.20
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$61,978.71	\$63,016.16	\$61,978.71	\$54,134.74
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE ✓	\$67,524.71 ✓	\$78,587.24	\$67,524.71	\$67,353.55
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$394.27	\$394.27	\$394.27	\$382.86
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$30,220.73	\$30,220.73	\$30,220.73	\$27,767.95
*5506 MMC -NH BETHANY SENIOR LIVING	\$277,431.74	\$282,370.24	\$277,431.74	\$277,168.09
*3407 MMC -NH TUSCANY VILLAGE	\$304,030.78	\$304,030.78	\$304,030.78	\$272,069.10
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$609,891.25	\$609,891.25	\$609,891.25	\$608,191.31
Total Balance	\$3,838,553.49	\$3,830,786.21	\$3,838,553.49	\$3,939,294.60

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
4/1/2024

Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Ck Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home ~~Gulf Pointe Plaza Private Pay~~	100.00		294.27			194.27	06 transfer
					Bank Balance	194.27	
					Variance		
					Leave in Balance	100.00	

Adjust Balance/Transfer Amt 294.27

Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Ck Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home ~~Gulf Pointe Plaza Medicare/Medicaid~~	65,493.18	65,993.18	30,120.73			30,220.73	30,120.73
					Bank Balance	30,220.73	
					Variance		
					Leave in Balance	100.00	

Adjust Balance/Transfer Amt 30,120.73

Routing Information for Gulf Pointe Plaza:

TOTAL TRANSFERS 30,415.00

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: Andrew De Los Santos
ANDREW DE LOS SANTOS 4/1/2024

APPROVED
ON
APR 01 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

3/31/2024 Added to Account
3/28/2024 HNB - ECHO HCLLAIMPMT 746003411 440000271314
3/26/2024 HNB - ECHO HCLLAIMPMT 746003411 440000294122

Guidelines for the use of the book

3/31/2024 Added to Account
3/29/2024 MERCHANT BANKCD DEPOSIT 436478518889 9100001
3/28/2024 Check 1015
3/28/2024 WIRE OUT HMG Rockport SNF, LP - Commerical
3/27/2024 Deposit
3/25/2024 NORIDIAN JSA HCLCLAIMPMT 675892 4200001009861

MMC PORTION						NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp2	QIPP/Comp3	QIPP/Comp4 & Lapse	
-	49.78	-	-	-	-	49.78
-	2,403.00	-	-	-	-	2,403.00
6,880.00	-	-	-	-	-	-
58,513.18	-	-	-	-	-	-
-	19,253.09	-	-	-	-	19,253.09
-	8,414.86	-	-	-	-	8,414.86
65,393.18	30,120.73	-	-	-	-	30,120.73
65,393.18	30,415.00	-	-	-	-	30,415.00

BARRIOS Overview

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$1,689,145.09	\$1,621,400.69	\$1,689,145.09	\$1,991,449.27
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$543.19	\$543.19	\$543.19	\$542.50
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$437.28	\$437.28	\$437.28	\$436.73
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$251,830.34	\$266,137.17	\$251,830.34	\$198,132.18
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$212,402.73	\$219,118.01	\$212,402.73	\$167,938.41
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$189,021.06	\$197,975.74	\$189,021.06	\$137,138.71
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$143,601.61	\$156,563.46	\$143,601.61	\$136,489.20
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$61,978.71	\$63,016.16	\$61,978.71	\$54,134.74
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$67,524.71	\$78,587.24	\$67,524.71	\$67,353.55
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$394.27	\$394.27	\$394.27	\$382.86
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$30,220.73	\$30,220.73	\$30,220.73	\$27,767.95
*5506 MMC -NH BETHANY SENIOR LIVING	\$277,431.74	\$282,370.24	\$277,431.74	\$277,168.09
*3407 MMC -NH TUSCANY VILLAGE	\$304,030.78	\$304,030.78	\$304,030.78	\$272,069.10
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$609,891.25	\$609,891.25	\$609,891.25	\$608,191.31
Total Balance	\$3,838,553.49	\$3,830,786.21	\$3,838,553.49	\$3,939,294.60

Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
4/1/2024

Nursing Home	Account Number	Previous							Amount to Be
		Beginning Balance	Transfer-Out	Transfer-In	As Cleared	Pending Deposits	Today's Beginning Balance	Transferred to Nursing Home	
Tuscany Village		92,906.50	92,806.50	303,930.78			304,030.78	286,972.65	
						Bank Balance Variance	304,030.78		
						Leave in Balance	100.00		
						Wellpoint January	13,808.13		
						Claim pymt owed to Solera	3,150.00		
						Adjust Balance/Transfer Amt	286,972.65		

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:
ANDREW DE LOS SANTOS 4/1/2024

APPROVED
ON
APR 01 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

		MMC PORTION						
	Transfer-Out	Transfer-In	QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	NH PORTION
3/31/2024 Added to Account	-	203.77						203.77
3/29/2024 HNB - ECHO HCCLAIMPMT 746003411 440000213448	-	9,478.55						9,478.55
3/29/2024 NOVITAS SOLUTION HCCLAIMPMT 676201 420000149	-	22,279.36						22,279.36
3/28/2024 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE	92,806.50	-						-
3/27/2024 Deposit	-	3,458.00						3,458.00
3/27/2024 NOVITAS SOLUTION HCCLAIMPMT 676201 420000169	-	5,580.72						5,580.72
3/26/2024 Deposit	-	6,344.00						6,344.00
3/26/2024 NOVITAS SOLUTION HCCLAIMPMT 676201 420000137	-	96,665.34						96,665.34
3/25/2024 HNB - ECHO HCCLAIMPMT 746003411 440000247827	-	6,680.36						6,680.36
3/25/2024 WELLPOINT CO AP E-PAYMENT EE52766951 1110000	-	15,225.18	12,391.08	2,834.10			13,808.13	1,417.05
3/25/2024 NOVITAS SOLUTION HCCLAIMPMT 676201 420000109	-	138,015.50						138,015.50
	92,806.50	303,930.78	12,391.08	2,834.10	-	-	13,808.13	290,122.65

BUSINESS OVERVIEW

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$1,689,145.09	\$1,621,400.69	\$1,689,145.09	\$1,991,449.27
*4385 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$543.19	\$543.19	\$543.19	\$542.50
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$437.28	\$437.28	\$437.28	\$436.73
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$251,830.34	\$266,137.17	\$251,830.34	\$198,132.18
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$212,402.73	\$219,118.01	\$212,402.73	\$167,938.41
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$189,021.06	\$197,975.74	\$189,021.06	\$137,198.71
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$143,601.61	\$156,563.46	\$143,601.61	\$136,489.20
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$61,978.71	\$63,016.16	\$61,978.71	\$54,134.74
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$67,524.71	\$78,587.24	\$67,524.71	\$67,353.55
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$394.27	\$394.27	\$394.27	\$382.86
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$30,220.73	\$30,220.73	\$30,220.73	\$27,767.95
*5505 MMC -NH BETHANY SENIOR LIVING	\$277,431.74	\$282,370.24	\$277,431.74	\$277,168.09
*3407 MMC -NH TUSCANY VILLAGE ✓	\$304,030.78 ✓	\$304,030.78	\$304,030.78	\$272,069.10
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2998 MMC -MONEY MARKET FUND	\$609,891.25	\$608,891.25	\$609,891.25	\$608,191.31
Total Balance	\$3,838,553.49	\$3,830,786.21	\$3,838,553.49	\$3,939,294.60

Memorial Medical Center
 Nursing Home UPL
 Weekly HSL Transfer
 Prosperity Accounts
 4/1/2024

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Prosperity Senior Upl		222,403.82	221,741.01	276,768.93			277,431.74	276,505.28
						Bank Balance	277,431.74	
						Variance		
						Leave in Balance	100.00	

January Interest 250.87 ✓
 February Interest 301.94 ✓
 March Interest 259.65 ✓
 Adjust Balance/Transfer Amt 276,505.28 ✓
 Approved: Andrew de los Santos
 ANDREW DE LOS SANTOS 4/1/2024

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

APPROVED
 ON
 APR 01 2024
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Return to: [REDACTED]

3/31/2024 Added to Account
3/28/2024 WIRE OUT PORT LAVACA NW, LLC
3/28/2024 Deposit
3/28/2024 Deposit
3/27/2024 Deposit
3/27/2024 Deposit
3/27/2024 Deposit
3/27/2024 Deposit

MMCPORION							NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	
-	263.65	-	-	-	-	-	263.65
221,741.01	-	-	-	-	-	-	-
-	46,490.43	-	-	-	-	-	46,490.43
-	14,057.80	-	-	-	-	-	14,057.80
-	181,231.19	-	-	-	-	-	181,231.19
-	13,511.75	-	-	-	-	-	13,511.75
-	18,691.82	-	-	-	-	-	18,691.82
-	2,522.29	-	-	-	-	-	2,522.29
221,741.01	276,768.93	-	-	-	-	-	276,768.93

FINANCIAL OVERVIEW

Account Name				
*4357 MEMORIAL MEDICAL CENTER - OPERATING	\$1,689,145.09	\$1,621,400.89	\$1,689,145.09	\$1,991,449.27
*4365 MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$543.19	\$543.19	\$543.19	\$542.50
*4373 MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$437.28	\$437.28	\$437.28	\$436.73
*4381 MEMORIAL MEDICAL CENTER / NH ASHFORD	\$251,830.34	\$266,137.17	\$251,830.34	\$198,132.18
*4403 MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$212,402.73	\$219,118.01	\$212,402.73	\$167,938.41
*4411 MEMORIAL MEDICAL CENTER / NH CRESCENT	\$189,021.06	\$197,975.74	\$189,021.06	\$137,136.71
*4438 MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$143,601.61	\$156,563.46	\$143,601.61	\$136,489.20
*4446 MEMORIAL MEDICAL CENTER / NH FORT BEND	\$61,978.71	\$63,016.16	\$61,978.71	\$54,134.74
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$67,524.71	\$78,587.24	\$67,524.71	\$67,353.55
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$394.27	\$394.27	\$394.27	\$382.86
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$30,220.73	\$30,220.73	\$30,220.73	\$27,767.95
*5506 MMC -NH BETHANY SENIOR LIVING ✓	\$277,431.74 ✓	\$282,370.24 ✓	\$277,431.74	\$277,168.09
*3407 MMC -NH TUSCANY VILLAGE	\$304,030.78	\$304,030.78	\$304,030.78	\$272,089.10
*3660 MMC -BETHANY SR LIVING - DACA	\$100.00	\$100.00	\$100.00	\$100.00
*2898 MMC -MONEY MARKET FUND	\$609,891.25	\$609,891.25	\$609,891.25	\$608,191.31
Total Balance	\$3,838,553.49	\$3,838,786.21	\$3,838,553.49	\$3,939,294.60

Ashford ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

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Memorial Medical Center

Date Requested: 4/1/2024

_____ APPROVED
ON

_____ APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT: \$ 22,405.01 ✓

G/L NUMBER: 21400007

EXPLANATION: Wellpoint January QIPP Payment

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: Andrew D. [Signature]

4/1/24

Broadmoor ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

Memorial Medical Center

Date Requested:

4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

8,341.55 ✓

G/L NUMBER:

21400007

EXPLANATION:

Wellpoint January QIPP Payment

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew E. [Signature]

4/1/24

Crescent. ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

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Memorial Medical Center

Date Requested:

4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

6,196.77 ✓

G/L NUMBER:

10255040

EXPLANATION:

Wellpoint January QIPP Payment

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew DeFos Santen

411/24

Solera ✓

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

Memorial Medical Center

Date Requested: 4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

6,724.64 ✓

G/L NUMBER:

10255040

EXPLANATION:

Wellpoint January QIPP Payment

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew F. Fox-Santos

4/1/24

Tuscrany /

MEMORIAL MEDICAL CENTER CHECK REQUEST

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Memorial Medical Center

Date Requested:

4/1/2024

FOR ACCT USE ONLY

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

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT:

\$

13,808.13 ✓

G/L NUMBER:

10255040

EXPLANATION:

Wellpoint January QIPP Payment

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew D. [Signature]

4/1/24

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested: 4/1/2024

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

705.78 ✓

G/L NUMBER: _____

EXPLANATION:

Quarter 1 2024 Interest

Ashford ✓

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY: Handwritten Signature

4/1/24

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested: _____

4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

693.15 ✓

G/L NUMBER: _____

EXPLANATION:

Quarter 1 2024 Interest

Bradenberry ✓

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY: Andrew F. S. Sinter

41124

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested:

4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

972.37 ✓

G/L NUMBER:

EXPLANATION:

Quarter 1 2024 Interest

Crescent ✓

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew S. Gentry

411124

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested: 4/1/2024

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT: \$ 301.90

G/L NUMBER: _____

EXPLANATION: Quarter 1 2024 Interest

Fort Bend

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: Andrew D. Fox

4/1/24

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested: 4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

738.98

G/L NUMBER: _____

EXPLANATION:

Quarter 1 2024 Interest

Salera

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY: Andrea E. Fortin

4/1/24

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested: _____

4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

621.86 ✓

G/L NUMBER: _____

EXPLANATION:

Quarter 1 2024 Interest

Golden Creek ✓

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY: Andrew S. G. [Signature]

4/1/24

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested: 4/1/2024

APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT: \$ 826.46 ✓

G/L NUMBER: _____

EXPLANATION: Quarter 1 2024 Interest

Bethany

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: Andrew D. Davis

4/1/24

MEMORIAL MEDICAL CENTER

CHECK REQUEST - *Tuscany*

P

Solera ✓

Date Requested:

4/1/2024

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APPROVED
ON

APR 01 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$ 3,150.00 ✓

G/L NUMBER:

21400007

EXPLANATION:

Claim payment owed ^{by} Tuscany

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew J. [Signature]

4/1/24

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
AMBULANCE OPERATIONS-SEADRIFT	340	SERVICES	65740	FRONTIER COMMUNICATIONS	2855	3617852...	SEA AMB 3/25 ACT# 361-785-2911- 010699-5 PHONE 3/25- 4/24	64.60	
AMBULANCE OPERATIONS-SEADRIFT	Total 340							64.60	0.00
BUILDING MAINTENANCE	170	MISCELLANEOUS	63920	VCS SECURITY SYSTEMS, INC.	8244	267460	MAINT 2/23 MARCH 2024 ACCESS CNTRL- BAUER EXHIBIT BLDG	62.95	
			63920	VCS SECURITY SYSTEMS, INC.	8244	268546	MAINT 3/25 APRIL 2024 ACCESS CNTRL- BAUER EXHIBIT BLDG	62.95	
		REPAIRS-COURTHOUSE AND JAIL	65454	FIRETRON INC	2323	246006	MAINT 12/31 REPAIR CH BACKFLOW SYSTEM	2,764.00	
			65454	POWER ELECTRIC LLC	2927	1787	MAINT 3/22 ADDED NEW ELECTRICAL CIRCUIT IN SO	748.00	
		UTILITIES-AG BLDG/FAIRGROUNDS	65454	AGUIRRE SHAWN	92020	QB5145	MAINT 1/10 SEWER REPAIR	150.00	
			66602	REPUBLIC SERVICES #847	8897	0847001...	FG 3/26 ACT# 3-0847-0004638 APRIL 2024 TRASH SVC	231.97	
		UTILITIES-COURTHOUSE AND JAIL	66604	REPUBLIC SERVICES #847	8897	0847001...	CH 3/26 ACT# 3-0847-0004639 APRIL 2024 TRASH SVC	378.52	
		UTILITIES-JAIL	66605	REPUBLIC SERVICES #847	8897	0847001...	JAIL 3/26 ACT# 3-0847-0004640 APRIL 2024 TRASH SVC	378.52	
BUILDING MAINTENANCE	Total 170							4,776.91	0.00
CONSTABLE-PRECINCT #1	580	INTERNET SERVICES	62955	MOBILE WIRELESS LLC	216	5669	CONSTIT 2/16 NETMOTION 2/16- 11/26	93.50	
CONSTABLE-PRECINCT #1	Total 580							93.50	0.00
CONSTABLE-PRECINCT #4	610	SOFTWARE MAINTENANCE (ANNUAL)	65835	KOLOGIK LLC	3643	INV14149	CONST4 3/19 CORPSYNC LICENSE 3/5/24- 12/30/24	629.40	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
CONSTABLE-PRECINCT #4	Total 610							629.40	0.00
COUNTY AUDITOR	190	TRAVEL IN COUNTY	66476	CRUZ ALEXIS	EM...	PO1904...	AUDITOR 3/27 IN-CNTY TRAVEL REIMB 3/13, 3/20	53.27	
COUNTY AUDITOR	Total 190							53.27	0.00
COUNTY CLERK	250	GENERAL OFFICE SUPPLIES	53020	DUDLEY ALYSHA A	1491	5505	CO CLK 1/31 (5) DATE FILE STAMPS- CO CRT @ LAW 1	340.00	
COUNTY CLERK	Total 250							340.00	0.00
COUNTY COURT-AT-LAW	410	ADULT ASSIGNED-ATTORNEY FEES	60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024043	CRT@LAW1 3/21 C# 2023-CR-0201-CC N. MUNOZ	483.00	
			60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024044	CRT@LAW1 3/21 C# 2024-CR-0061/0060-CC T. BLEVINS	216.00	
			60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024045	CRT@LAW1 3/21 C# 2023-CR-0204/0205-CC 2024-CR-0002-CC	683.00	
			60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024046	CRT@LAW1 3/21 C# 24-PF-0014-CC E. JAMES	116.00	
			60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024047	CRT@LAW1 3/21 C# 2023-CR-0118-CC F. GARCIA	516.00	
			60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024048	CRT@LAW1 3/21 C# 2023-CR-0078-CC R. GRIMES	200.00	
			60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024049	CRT@LAW1 3/21 C# 2023-CR-0163-CC A. MUNOZ	591.00	
			60050	ROBERTS ODEFEY WITTE WALL LLP	2606	2024050	CRT@LAW1 3/21 C# 2023-CR-0147-CC A. URESTI	808.00	
			60050	CLARK JERRY	9858	2024037	CRT@LAW1 3/7 C# 2024-CR-0055-CC C. GAMACHE	325.00	
			60050	CLARK JERRY	9858	2024038	CRT@LAW1 3/7 C# 2024-CR-0038-CC Z. BERNAL	100.00	
			60050	CLARK JERRY	9858	2024039	CRT@LAW1 3/7 C# 2024-CR-0037-CC Z. BERNAL	325.00	

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		COURT REPORTER-SUBSTITUTE	61490	DELTA REPORTING & VIDEO	31960	200562	CRT@LAW1 3/7 CRT RPTNG SVC 3/7/24	580.00	
			61490	DELTA REPORTING & VIDEO	31960	200563	CRT@LAW1 3/7 CRT RPTNG SVC 3/6/24	580.00	
		LEGAL SERVICES-COURT APPOINTED	63380	ROBERTS ODEFEY WITTE WALL LLP	2606	2024042	CRT@LAW1 3/18 C# 2023-FAM-0031-CC	625.00	
			63380	R PEREZ LAW PLLC	31800	2024013	CRT@LAW1 1/22 C# 2023-FAM-0032-CC	2,467.88	
		MACHINE MAINTENANCE	63500	RELX INC	4625	3094974...	CRT@LAW1 2/29 FEB 2024 SUBSCRIPTION	56.00	
COUNTY COURT-AT-LAW	Total 410							8,671.88	0.00
DISTRICT ATTORNEY	510	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	37624906	DA 3/8 INDEX CARDS	11.70	
DISTRICT ATTORNEY	Total 510							11.70	0.00
DISTRICT COURT	430	JURORS-PETTIT	51533	RHONDA S. KOKENA	5545	PO0401...	TREAS 4/1 REIMB JURY CASH FUND THROUGH 3/31/2024	2,600.00	
		JURORS-GRAND	51534	RHONDA S. KOKENA	5545	PO0401...	TREAS 4/1 REIMB JURY CASH FUND THROUGH 3/31/2024	1,260.00	
DISTRICT COURT	Total 430							3,860.00	0.00
ELECTIONS	270	ELECTION SUPPLIES	53361	ELECTION SYSTEMS & SOFTWARE	1810	CD2080...	ELEC 3/11 ACTIVATION CARD THERMAL BLANK	25.04	
			53361	ELECTION SYSTEMS & SOFTWARE	1810	CD2080...	ELEC 3/12 CNTRL TABULATOR, RPTNG SETUP, CODING, AUDIO, ETC	1,538.40	
ELECTIONS	Total 270							1,563.44	0.00
EMERGENCY MEDICAL SERVICES	345	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3615504...	EMS 3/11 ACT# 826401254 ADMIN/AMB INTERNET 3/12-4/11	425.17	

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		UTILITIES	66600	WHITE TRASH SERVICES	1952	190675	EMS 3/22 APRIL 2024 TRASH SVC	103.04	
			66600	REPUBLIC SERVICES #847	8897	0847001...	EMS 3/26 ACT# 3-0847-0004637 APRIL 2024 TRASH SVC	188.97	
			66600	SPARKLIGHT	9988	1009808...	EMS 3/8 ACT# 100980846 CABLE 3/8- 4/7	243.76	
		VEHICLE FUEL/OIL/SERVICE	67120	MAYNE JOHN	EM...	PO3453...	EMS 3/24 REIMB GAS PURCHASE- VOYAGER CARD NOT WKNG	56.62	
EMERGENCY MEDICAL SERVICES	Total 345							1,017.56	0.00
FIRE PROTECTION-OLIVIA/P. ALTO	650	SUPPLIES/OPERATING EXPENSES	53980	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	OPA VFD 3/23 FUEL FILTERS- U431	16.26	
FIRE PROTECTION-OLIVIA/P. ALTO	Total 650							16.26	0.00
FIRE PROTECTION-POINT COMFORT	660	SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63193	186734	PC VFD 3/20 HARDWARE, MISC SUPP	15.10	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	PC VFD 3/18 AIR FILTER- U634	60.49	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	PC VFD 3/18 FILTER, THERMOSTAT, ANTIFREEZE- U634	133.36	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	PC VFD 3/19 REFUND ON RETURN OF V-BELT		7.92
			53992	VICTORIA FREIGHTLINER INC	8214	IP02250...	PC VFD 3/19 FILTER, OIL- U632	326.06	
FIRE PROTECTION-POINT COMFORT	Total 660							535.01	7.92

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FIRE PROTECTION-SIX MILE	695	UTILITIES	66600	VICTORIA ELECTRIC COOP, INC	8205	9812700...	6MILE VFD 3/26 ACT# 981270-022 ELEC 2/17- 3/17	101.79	
FIRE PROTECTION-SIX MILE	Total 695							101.79	0.00
FIRE PROTECTION-TRAININ... FIELD	700	SUPPLIES-MISCELLANEOUS	53992	POC HARDWARE & SUPPLY	6242	173041	RB4 2/14 CABLE TIES, HITCH PIN, SAND PAPER	182.96	
FIRE PROTECTION-TRAININ... FIELD	Total 700							182.96	0.00
FLOOD PLAIN ADMINISTRATION	710	TRAINING TRAVEL OUT OF COUNTY	66316	THIGPEN LADONNA	4605	PO7101...	FLOODPLAIN 3/26 REIMB TRAVEL- SAN ANTONIO, TX 3/19- 3/22	368.89	
FLOOD PLAIN ADMINISTRATION	Total 710							368.89	0.00
INFORMATION TECHNOLOGY	275	UTILITIES-117 W. ASH ST. BUILDING	66609	CENTERPOINT ENERGY	1805	2799453...	IT 3/29 ACT# 2799453-2 CCF 2 2/23- 3/26	53.34	
INFORMATION TECHNOLOGY			66609	REPUBLIC SERVICES #847	8897	0847001...	IT 3/26 ACT# 3-0847-0004634 APRIL 2024 TRASH SVC	39.08	
INFORMATION TECHNOLOGY	Total 275							92.42	0.00
JAIL OPERATIONS	180	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	37457017	JAIL 2/28 LAMINATE POUCHES	23.70	
JAIL OPERATIONS		JAIL MAINTENANCE/SUPPLIES	53020	QUILL LLC	6602	37463531	JAIL 2/29 STAMP	56.79	
JAIL OPERATIONS		SUPPLIES-MISCELLANEOUS	53420	GULF COAST PAPER CO INC	2619	2512485	JAIL 3/12 STERIPHENE, AIRLIFT, TOLLET PAPER	902.82	
JAIL OPERATIONS			53992	AXON ENTERPRISE INC	2879	INUS23...	JAIL 3/9 TASER HOLSTERS, SPARE BATTERIES	738.20	
JAIL OPERATIONS		POSTAGE	64790	FEDEX	2222	8438215...	JAIL 3/14 SHIPMENT	68.56	
JAIL OPERATIONS	Total 180							1,790.07	0.00

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JUSTICE OF PEACE PRECINCT #2	460	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	37552004	JP2 3/5 ERASERS, WIPES	46.70	
JUSTICE OF PEACE PRECINCT #2	Total 460							46.70	0.00
JUSTICE OF PEACE-PRECINCT #3	470	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	37513706	JP3 3/4 GLASS CLEANER	20.12	
			53020	QUILL LLC	6602	37528451	JP3 3/4 STAPLES, BATTERIES, PAPER CLIPS	26.98	
			53020	QUILL LLC	6602	37613126	JP3 3/8 NOTEBOOKS	14.95	
			53020	QUILL LLC	6602	37625317	JP3 3/8 STORAGE BOXES, WIRELESS COMBO	92.01	
		TELEPHONE SERVICES	66192	MCI COMM SERVICE	3181	5F82989...	JP3 3/19 ACT# 5P829898 LONG DISTANCE SVC	35.87	
JUSTICE OF PEACE-PRECINCT #3	Total 470							189.93	0.00
JUSTICE OF PEACE-PRECINCT #4	480	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	36132462	JP4 3/13 COPIER LEASE	65.03	
		TRAINING TRAVEL OUT OF COUNTY	66316	TEXAS STATE UNIVERSITY	7745	67861	JP4 3/18 CONF REG-P, SPENCE 4/23- 4/25	50.00	
JUSTICE OF PEACE-PRECINCT #4	Total 480							115.03	0.00
JUSTICE OF PEACE-PRECINCT #5	490	TRAVEL IN COUNTY	66476	GREGORY JANA	EM...	PO880	JP5 4/1 REIMB IN-CNTY MILEAGE MARCH 2024	134.00	
		UTILITIES	66600	VICTORIA ELECTRIC COOP, INC	8205	5292700...	JP5 3/26 ACT# 52927-001 ELEC 2/17- 3/17	52.14	
JUSTICE OF PEACE-PRECINCT #5	Total 490							186.14	0.00
JUSTICE OF THE PEACE-GENERAL	440	JURORS-PETTIT	51533	RHONDA S. KOKENA	5545	PO0401...	TREAS 4/1 REIMB JURY CASH FUND THROUGH 3/31/2024	80.00	

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JUSTICE OF THE PEACE-GENERAL	Total 440							80.00	0.00
JUVENILE COURT	500	JUVENILE ASSIGNED-ATTORNEY FEES	63070	SMITH JAMES	72500	2024040	CRT@LAW1 3/7 C# 2023-JV-0001-CC	275.00	
			63070	SMITH JAMES	72500	2024041	CRT@LAW1 3/7 C# 2024-JV-0004-CC	275.00	
JUVENILE COURT	Total 500							550.00	0.00
LIBRARY	140	INTERNET SERVICES	62955	T-MOBILE USA INC	79681	9966804...	LIBRARY 3/21 ACT# 996680425 (10) HOT SPOTS 2/23- 3/20	263.80	
		UTILITIES-PORT OCONNOR LIBRARY	66620	VICTORIA ELECTRIC COOP, INC	8205	1008600...	POC LIBRARY 3/26 ACT# 10086-002 ELEC 2/17-3/17	164.99	
		UTILITIES-SEADRIFT LIBRARY	66622	CITY OF SEADRIFT	862	1253/0324	SEA LIBRARY 3/28 ACT# 1253 WATER	101.91	
		BOOKS & PRINT MATL-LIBRARY	70550	CENGAGE LEARNING, INC.	26020	84054359	LIBRARY 3/15 (1) BOOK	31.19	
			70550	BAKER & TAYLOR	403	5018804...	LIBRARY 3/8 (8) BOOKS	109.21	
LIBRARY	Total 140							671.10	0.00
MISCELLANEOUS	280	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615536...	MUSEUM 3/22 ACT# 361-553-6868-083005-5 PHONE 3/22-4/21	58.44	
MISCELLANEOUS	Total 280							58.44	0.00
NO DEPARTMENT	999	ACCRUED UNITED WAY	20525	UNITED WAY OF CALHOUN COUNTY	8019	P00328...	CALCO 3/27 MARCH 2024 DONATIONS	15.00	
		ACCRUED MISCELLANEOUS	20533	TMPA	7723	P00328...	CALCO 3/27 MAR 2024 MEMBERSHIP FEES	315.70	
		DUE TO STATE-SEPTIC FEES	20742	TEXAS COMMISSION ON	7597	WTR006...	CALCO 3/31 ACT# 0620035 WASTEWATER TX FEE- DEC 2023	50.00	
			20742	TEXAS COMMISSION ON	7597	WTR006...	CALCO 3/31 ACT# 0620035 WASTEWATER TX FEE- JAN 2024	40.00	

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			20742	TEXAS COMMISSION ON	7597	WTR006...	CALCO 3/31 ACT# 0620035 WASTEWATER TX FEE- FEB 2024	80.00	
		DUE TO JP COLLECTIONS ATTORNEY	20770	MCCREARY VESELKA BRAGG ALLEN	5255	279832	JP1 12/12 COLLECTION FEES	398.10	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	281981	JP3 2/6 COLLECTION FEES	174.00	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	282384	JP1 2/15 COLLECTION FEES	69.91	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	282620	JP1 2/21 COLLECTION FEES	109.50	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	282957	JP1 2/28 COLLECTION FEES	102.30	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	283872	JP3 3/12 COLLECTION FEES	629.19	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	284291	JP1 3/21 COLLECTION FEES	2,009.07	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	284292	JP1 3/21 COLLECTION FEES	3,108.28	
		RENTAL DEPOSITS	20820	MUNIZ SARAH	RF0...	1913	BAUER 2/5 DEPOSIT REFUND	250.00	
			20820	GARCIA RICARDO	RF3...	1909	BAUER 1/11 DEPOSIT REFUND	250.00	
NO DEPARTMENT	Total 999							7,601.05	0.00
ROAD AND BRIDGE-PRECINCT #1	540	ROAD & BRIDGE SUPPLIES	53310	QUALITY HOT MIX INC	6603	28743	RB1 3/14 421.37T PB#4	34,489.13	
		TOOLS	53595	GULF COAST HARDWARE LLC	63191	186777	RB1 3/21 32" LOPPER	49.99	
		SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63191	186692	RB1 3/19 SEPTIC TX, SS SPRING	54.97	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4187042...	RB1 3/21 UNIFORMS	100.55	
		GARBAGE COLLECTION	62659	REPUBLIC SERVICES #847	8897	0847001...	RB1 3/26 ACT# 3-0847-0010464 APRIL 2024 TRASH SVC	616.20	
		MISCELLANEOUS	63920	GREAT AMERICA FINANCIAL	2751	36150253	RB1 3/18 COPIER LEASE 3/14- 4/13	155.00	

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ROAD AND BRIDGE-PRECINCT #1	Total 540	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3612500...	RB1 3/19 ACT# 28736338169 CAMERA WIFI 2/20- 3/19	264.00	
		UTILITIES	66600	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB1 3/26 ACT# 981270-020 ELEC 2/17- 3/17	226.20	
		UTILITIES-PARKS	66614	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB1 3/26 ACT# 981270-002 ELEC 2/17- 3/17	35.65	
			66614	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB1 3/26 ACT# 981270-003 ELEC 2/26- 3/26	32.91	
			66614	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB1 3/26 ACT# 981270-016 ELEC 2/17- 3/17	69.51	
			66614	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB1 3/26 ACT# 981270-025 ELEC 2/17- 3/17	85.44	
			66614	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB1 3/26 ACT# 981270-028 ELEC 2/17- 3/17	53.02	
ROAD AND BRIDGE-PRECINCT #2	550	MACHINERY PARTS/SUPPLIES	53210	NUECES FARM CENTER INC	5406	47338V	RB2 3/18 WINDOW PARTS- CASE BACKHOE	66.58	
		GASOLINE/OIL/DIESEL/GRE...	53340	NEW DISTRIBUTING CO INC	3638	6574224...	RB2 3/26 3014G DIESEL	9,433.79	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4186730...	RB2 3/19 SCRAPER MAT	3.98	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4186730...	RB2 3/19 UNIFORMS	63.81	
		TRAVEL IN COUNTY	66476	JUREK LESA	1088	PO5504...	RB2 4/1 REIMB IN-CNTY MILEAGE MARCH 2024	70.35	
		UTILITIES	66600	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB2 3/26 ACT# 981270-007 ELEC 2/26- 3/26	10.97	
			66600	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB2 3/26 ACT# 981270-010 ELEC 2/26- 3/26	10.97	
			66600	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB2 3/26 ACT# 981270-017 ELEC 2/17- 3/17	222.34	
			66600	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB2 3/26 ACT# 981270-027 ELEC 2/17- 3/17	98.65	
		UTILITIES-PARKS	66614	VICTORIA ELECTRIC COOP, INC	8205	9812700...	RB2 3/26 ACT# 981270-013 ELEC 2/17- 3/17	141.92	

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ROAD AND BRIDGE-PRECINCT #2	Total 550							10,123.36	0.00
ROAD AND BRIDGE-PRECINCT #3	560	MACHINERY PARTS/SUPPLIES	53210	O REILLY AUTO PARTS	5803	0575355...	RB3 3/4 REFUND ON TRAILER JACK RETURN		139.98
			53210	VICTORIA OLIVER COMPANY INC	8232	P11377	RB3 2/15 PARTS- ZERO TURN MOWER	181.38	
			53210	VICTORIA OLIVER COMPANY INC	8232	P12230	RB3 3/18 BLADE WASHER, NUT, O-RING- MOWER	26.78	
		ROAD & BRIDGE SUPPLIES	53510	KC LEASE SERVICE INC	2893	78796	RB3 3/14 197.82T 1-3/4" GRADE 2 LIMESTONE	7,230.33	
		GASOLINE/OIL/DIESEL/ORE...	53340	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB3 3/18 HI TEMP GREASE	64.30	
		TOOLS	53395	FASTENAL COMPANY	2274	TXPOT2...	RB3 3/12 DRILL SET	139.99	
			53395	GULF COAST HARDWARE LLC	63193	186689	RB3 3/19 SCREW DRIVER SET, PIN SET	36.98	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4186891...	RB3 3/20 FRESHENER	6.00	
		SUPPLIES-MISCELLANEOUS	53992	FASTENAL COMPANY	2274	TXPOT2...	RB3 3/12 BALL PEEN, MISC SUPP	96.16	
			53992	O REILLY AUTO PARTS	5803	0575353...	RB3 2/26 REFUND ON CORE RETURN		30.00
			53992	O REILLY AUTO PARTS	5803	0575355...	RB3 3/4 GASKET, GASKET GREASE	61.96	
			53992	O REILLY AUTO PARTS	5803	0575359...	RB3 3/25 DEF. HOSE, CLAMP	122.64	
			53992	GULF COAST HARDWARE LLC	63193	186689	RB3 3/19 FLEX RUBBER, TRASH BAGS	31.98	
			53992	GULF COAST HARDWARE LLC	63193	186736	RB3 3/20 COUPLE HOSE, BRASS FITTINGS	40.13	
			53992	GULF COAST HARDWARE LLC	63193	186783	RB3 3/21 CHAIN, PRIMER, MISC SUPP	151.91	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB3 3/18 TAP	4.86	
		UNIFORMS	53992	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB3 3/19 BATTERY HOLD DOWNS, PUTTY KNIVES	40.32	
			53995	CINTAS CORPORATION LOC. 083	958	4186891...	RB3 3/20 UNIFORMS	74.72	
		EQUIPMENT RENTAL	62510	LEGACY DISPOSAL & SANITATION	2988	173070	RB3 3/22 PORTABLE TOILET RENTAL 3/22- 4/18	105.00	

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ROAD AND BRIDGE-PRECINCT #3	Total 560	CAPITAL OUTLAY	70750	MILLQUIP	52360	0035	RB3 3/25 210 BARREL STEEL TANK	7,500.00	
								15,915.44	169.98
ROAD AND BRIDGE-PRECINCT #4	570	MACHINERY PARTS/SUPPLIES	53210	POC HARDWARE & SUPPLY	6242	173225	RB4 2/28 FUSES, FUSE HOLDER	26.77	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB4 3/18 BATTERIES	266.07	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB4 3/18 RELAY, CIRCUIT BREAKER	84.80	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB4 3/18 ELECTRONIC FLASHER	50.33	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB4 3/19 TURN LAMP, GROMMET, COURTESY LAMP	92.83	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301113...	RB4 3/20 PAN CLUTCH, BATTERIES, LICENSE PLATE LAMP	439.19	
		SIGNS	53590	CUSTOM PRODUCTS CORPORATION	98590	INV4218	RB4 3/15 (11) SIGN BLANKS	415.32	
		TOOLS	53595	POC HARDWARE & SUPPLY	6242	172873	RB4 2/1 SHOVEL, GRINDING WHEEL	25.97	
			53595	POC HARDWARE & SUPPLY	6242	173041	RB4 2/14 NOSE PLIERS	21.49	
			53595	POC HARDWARE & SUPPLY	6242	173385	RB4 2/26 DRILL BITS	14.98	
		SUPPLIES-MISCELLANEOUS	53992	POC HARDWARE & SUPPLY	6242	172873	RB4 2/1 PAINT SUPP, BOLTS, NUTS	110.76	
			53992	POC HARDWARE & SUPPLY	6242	173385	RB4 2/26 PVC PIPE, WASHERS, GROMMETS, BOLTS, NUTS	777.67	
		EQUIPMENT RENTAL	62510	ANDERSON MACHINERY CO, INC.	13	R50101	RB4 3/20 ROLLER RENTAL 3/20- 4/16	3,605.75	
		MACHINERY/EQUIPMENT REPAIRS	63530	ROBBINS ALLEN LEE	52201	1125	RB4 3/21 REPAIR VOLTAGE- TRANS CNTRL MODULE	345.00	

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MAINTENANCE-PARKS	63635	LEGACY DISPOSAL & SANITATION	2988	173083		RB4 3/22 PORTABLE TOILET RENTAL @ BILL SANDERS PK 3/22-4/18	690.00		
	MISCELLANEOUS	63920	DIAMOND INSPECTIONS #2	1422	11737	RB4 3/19 (2) STATE INSPECTIONS	14.00		
		63920	DIAMOND INSPECTIONS #2	1422	11739	RB4 3/20 STATE INSPECTION	7.00		
		63920	KERRI BOYD, TAX ASSESSOR	4041	1118973...	RB4 3/19 REGISTRATION	7.50		
		63920	KERRI BOYD, TAX ASSESSOR	4041	1179653...	RB4 3/20 REGISTRATION	7.50		
TELEPHONE SERVICES	63920	KERRI BOYD, TAX ASSESSOR	4041	9048486...		RB4 3/19 REGISTRATION	7.50		
	66192	FRONTIER COMMUNICATIONS	2855	3617853...		RB4 3/25 ACT# 361-785-3141- 010165-5 PHONE 3/25- 4/24	136.95		
	66192	AT&T MOBILITY	5209	3619209...		RB4 3/19 ACT# 28736341558 CAMERA WIFI 2/20- 3/19	308.25		
	UTILITIES	66600	PORT OCONNOR IMPROVEMENT	62370	7550020...		RB4 4/1 ACT# 7550020000 WATER	97.72	
66600		PORT OCONNOR IMPROVEMENT	62370	7550025...		RB4 4/1 ACT# 7550025300 WATER	93.20		
66600		PORT OCONNOR IMPROVEMENT	62370	7550084...		RB4 4/1 ACT# 7550084500 WATER	61.24		
66600		VICTORIA ELECTRIC COOP, INC	8205	4463680...		RB4 3/26 ACT# 44636806-001 ELEC 2/17-3/17	38.97		
66600		VICTORIA ELECTRIC COOP, INC	8205	9812700...		RB4 3/26 ACT# 981270-001 ELEC 2/17-3/17	172.38		
66600		VICTORIA ELECTRIC COOP, INC	8205	9812700...		RB4 3/26 ACT# 981270-005 ELEC 2/26-3/26	21.72		
66600		VICTORIA ELECTRIC COOP, INC	8205	9812700...		RB4 3/26 ACT# 981270-006 ELEC 2/17-3/17	105.40		
66600		VICTORIA ELECTRIC COOP, INC	8205	9812700...		RB4 3/26 ACT# 981270-009 ELEC 2/17-3/17	109.87		
66600		VICTORIA ELECTRIC COOP, INC	8205	9812700...		RB4 3/26 ACT# 981270-011 ELEC 2/17-3/17	50.86		
66600		VICTORIA ELECTRIC COOP, INC	8205	9812700...		RB4 3/26 ACT# 981270-012 ELEC 2/17-3/17	71.16		

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
ROAD AND BRIDGE-PRECINCT #4	Total 570								
			66600	CITY OF SEADRIFT	862	1166/0324	RB4 3/28 ACT# 1166 WATER	32.60	
			66600	CITY OF SEADRIFT	862	125/0324	RB4 3/28 ACT# 125 WATER	55.85	
								8,366.60	0.00
SHERIFF	760	GENERAL OFFICE SUPPLIES	53020	CINTAS CORPORATION LOC. 083	958	4187042...	SO 3/21 SCRAPER MATS	75.48	
		LAW ENFORCEMENT SUPPLIES	53430	QUILL LLC	6602	37830589	SO 3/21 GLOVES	239.75	
		TIRES AND TUBES	53520	FIRESTONE OF PORT LAVACA LLC	5584	0085223	SO 3/19 INSTALL (2) TIRES- U6	50.00	
		UNIFORMS	53995	FIKES BROOK	2180	031924	SO 3/19 UNIFORM PATCHES	64.00	
		AUTOMOTIVE REPAIRS	60360	KNEUPPER CARROLL	3678	42411	SO 3/18 OIL CHNG- U3	128.22	
			60360	KNEUPPER CARROLL	3678	42514	SO 3/22 OIL CHNG- U35	87.95	
			60360	KNEUPPER CARROLL	3678	42546	SO 3/23 OIL CHNG- U40	128.22	
			60360	KNEUPPER CARROLL	3678	42547	SO 3/23 OIL CHNG- U19	128.22	
			60360	KNEUPPER CARROLL	3678	42551	SO 3/23 OIL CHNG- U47	128.22	
			60360	KEATHLEY BRUCE CLAYTON	4231	1012053	SO 3/18 REPLACE WINDSHIELD- U45	374.41	
			60360	FIRESTONE OF PORT LAVACA LLC	5584	0085223	SO 3/19 BRAKE PADS/ROTORS- U6	1,054.50	
			60360	O'REILLY AUTO PARTS	5803	0575358...	SO 3/19 BULB- U6	6.60	
			60360	PORT LAVACA FORD	6103	309527	SO 3/12 REPAIRS- U21	3,914.50	
		REPAIRS-INSURANCE RECOVERY	65464	FRANKIE'S PAINT & BODY INC	2258	14868	SO 3/8 ACCIDENT REPAIRS- U3	6,323.03	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3612189...	SO 3/19 ACT# 287284474152 PHONE 2/20- 3/19	744.58	
SHERIFF	Total 760							13,447.68	0.00
WASTE MANAGEMENT	380	TELEPHONE SERVICES	66192	INFINIUM BROADBAND INTERNET	3378	72550	WASTE MGMT 3/29 ACT# ACC0002266 INTERNET 3/29- 4/29	59.00	
		UTILITIES	66600	VICTORIA ELECTRIC COOP, INC	8205	9814860...	WASTE MGMT 3/26 ACT# 981486-002 ELEC 2/17- 3/17	74.72	
			66600	VICTORIA ELECTRIC COOP, INC	8205	9814860...	WASTE MGMT 3/26 ACT# 981486-003 ELEC 2/17- 3/17	48.31	

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
WASTE MANAGEMENT	Total 380							182.03	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 2610 - AIRPORT FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	OTHER SERVICES	64320	COMDATA INC	628	AR427175	AIRPORT 3/11 MAR 2024 WEB PRTL ACCESS	40.00	
			64320	COMDATA INC	628	SM89606	AIRPORT 3/11 SMARTSITE EQUIP SPT 4/1/24- 3/31/25	1,474.37	
NO DEPARTMENT	Total 999							1,514.37	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 2716 - GRANTS FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING SERVICES	62454	G&W ENGINEERS, INC.	2601	5310023...	FORMOSA ENVIRON TRUST 3/18 RECYCLE WASTE CNTR SVCS 2/5- 3/3	1,400.00	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3612189...	OSG 3/19 ACT# 287284474152 PHONE 2/20- 3/19	690.00	
			66192	VERIZON WIRELESS	7896	9959891...	OSG 3/23 ACT# 342228328-00001 PHONE 2/24- 3/23	37.99	
NO DEPARTMENT	Total 999							2,127.99	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
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	RENTAL DEPOSITS	20820	KUECKER SIDNEY	RF0...	0941	POC CC 6/16 DEPOSIT/ RENTAL REFUND	200.00	
		UTILITIES-POC COMMUNITY CENTER	66616	PORT O'CONNOR IMPROVEMENT	62370	7550084...	POC CC 4/1 ACT# 7550084300 WATER- PAVILION	181.02	
			66616	PORT O'CONNOR IMPROVEMENT	62370	7550084...	POC CC 4/1 ACT# 7550084400 WATER	190.07	
			66616	VICTORIA ELECTRIC COOP, INC	8205	9812700...	POC CC 3/26 ACT# 981270-023 ELEC 2/17-3/17	714.35	
NO DEPARTMENT	Total 999							1,285.44	0.00
REVENUE	001	RENT INCOME-POC COMMUNITY CENTER	47055	KUECKER SIDNEY	RF0...	0941	POC CC 6/16 DEPOSIT/ RENTAL REFUND	500.00	
REVENUE	Total 001							500.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 2738 - RECORDS MANAGEMENT FUND COUNTY CLERK

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SOFTWARE MAINTENANCE (ANNUAL)	65835	TYLER TECHNOLOGIES INC	5950	0254481...	REC MGMT CO CLK 12/10 EAGLE SAAS 2024 FEE 1/2 PMNT	12,108.00	
NO DEPARTMENT	Total 999							12,108.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 2870 - 6MILE PIER/BOAT RAMP INSUR/MAINT (ALCOA)

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	MAINTENANCE	62635	LESTER CONTRACTING, INC.	4623	2401001	6MILE PIER PK 2/29 DREDGING BOAT RAMP	8,500.00	
NO DEPARTMENT	Total 999							8,500.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 5101 - CPRL-BOGGY BAYOU NATURE PARK

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING SERVICES	62454	URBAN ENGINEERING	8044	17308	CAP PROJ 3/26 BOGGY BAY TRAILS ORTHOMOSAIC SURVEY	6,000.00	
NO DEPARTMENT	Total 999							6,000.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 5112 - CAP PROJ - CDBG-MIT INFRASTRUCTURE

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING SERVICES	62454	G&W ENGINEERS, INC.	2601	5310013...	CAP PROJ 3/18 HERON SLOUGH ENG SVCS 9/4- 3/3	74,736.46	
NO DEPARTMENT	Total 999							74,736.46	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 5189 - CAPITAL PROJECT - EMS TRAINING BUILDING

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	CONSTRUCTION-EMS BUILDING	71040	G&W ENGINEERS, INC.	2601	5310024...	FIRST RESPONDER BLDG 3/18 ENG SVC THROUGH 3/3	5,625.00	
			71040	HIGGINS INC	30300	PO9993...	FIRST RESPONDER BLDG 3/18 DESIGN RETAINER FEE	2,500.00	
NO DEPARTMENT	Total 999							8,125.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 5225 - CAPITAL PROJECT-GREEN LAKE PARK

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING SERVICES	62454	URBAN ENGINEERING	8044	17309	CAP PROJ 3/26 GREEN LAKE PK IMPR ENG SVC PH I	25,990.00	
NO DEPARTMENT	Total 999							25,990.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 5280 - CAPITAL PROJECT-HOSPITAL IMPROVEMENTS

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEER/SURVEYOR/R...	62450	G&W ENGINEERS, INC.	2601	5310014...	CAP PROJ 3/17 MMC HVAC ROOF ENG PROJ 2/5- 3/3	1,082.82	
NO DEPARTMENT	Total 999							1,082.82	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 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. NAVIGATION DIST.	1106	PO2024...	TAX A/C 3/28 MARCH 2024 TAX COLLECS	67.78	
			20749	CALHOUN CO. WATER CONTROL	895	PO2024...	TAX A/C 3/28 MARCH 2024 TAX COLLECS	425.70	
NO DEPARTMENT	Total 999							493.48	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 04.03.24
 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	ACCRUED MISCELLANEOUS	20533	TMFA	7723	PO0328...	CALCO 3/27 MAR 2024 MEMBERSHIP FEES	29.54	
		SUPPLIES/OPERATING EXPENSES	53980	QUILL LLC	6602	37552142	JUV PROB 3/5 STAMP, BINDERS, PAPER	151.18	
		MEDICAL/DENTAL FEES	63776	TCSI LLC	2984	188011	JUV PROB 2/29 FEB 2024 MEDICAL (1) JUV	530.82	
			63776	CAMERON COUNTY JUVENILE	750	PO7401...	JUV PROB 3/13 MEDICAL (1) JUV	174.07	
			63776	CAMERON COUNTY JUVENILE	750	PO7401...	JUV PROB 3/19 MEDICAL (1) JUV	15.00	
		PREVENTION & INTERVENTION - GRANTS	64839	YOUTH ADVOCATE PROGRAMS INC	9212	0220241...	JUV PROB 3/13 FEB 2024 SVCS (4) JUV	3,120.00	
NO DEPARTMENT	Total 999							4,020.61	0.00
Report Total								264,419.90	177.90