



November 22, 2023

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 10:00am 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.

Karen Lyssy presented a Certificate to Judge Meyer and Commissioner Behrens.
Commissioner Reese wished everyone a Happy Thanksgiving.

5. Hear a presentation from a representative of Southern Software regarding software for Calhoun County Constables to be complaint with state regulations to submit monthly reports of the Texas Department of Public Safety.

Mark Jones with Southern Software gave a brief presentation.

6. Consider and take necessary action to approve the updated estimates from G & W Engineers, Inc. regarding Bid Phase Services for the Memorial Medical Center Roof and HVAC project. (DEH)

Scott Mason with G&W Engineers explained the need for the increase of funds requested.

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

7. Consider and take necessary action to approve the GLO – Certificate of Construction Completion (COCC) to the Drainage Improvements in Alamo Beach for Calhoun County, Texas – TX GLO Contract No. 201-065-064-C182 and authorize the County Judge to sign all necessary documents. (DEH)

Scott Mason with G&W Engineers explained the Certificate of Construction Completion contract.

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

8. Consider and take necessary action to remove from Precinct 3 R & B inventory asset #23-0257, a Norman Motor Grader to be used as the trade-in for new equipment. (JMB)

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 approve the lease-purchase agreement with Welch State Bank for the purchase of a 2020 John Deere 672 Motor Grader, serial number 1DW672GPCLF703140 from Anderson Machinery for Precinct 3 R & B and authorize the County Judge to sign all necessary documentation. (JMB)

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

10. Consider and take necessary action to transfer Precinct 4 R & B asset number 24-0441, a Military Cargo Truck, to the Seadrift Fire asset list. (GDR)

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

11. Consider and take necessary action to authorize the Port O'Connor Community Center Board of Directors to enter into an agreement with Lauger Companies, Inc. for the Pavilion improvements. (GDR)

pass

12. Consider and take necessary action to extend the feasibility contract with Texas A & M AgriLife to January 31, 2024. There is no additional cost associated with this extension. (RHM)

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

13. Consider and take necessary action to name the Calhoun County EMS Director as General Contractor over the construction of the First Responder Training Facility and grant him authorization to sign on behalf of the County on items pertaining to its construction. (RHM)

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

14. Consider and take necessary action to authorize the EMS Director to sign the Mueller, Inc. Sales Agreement Quote #93273810. (RHM)

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

15. Consider and take necessary action to authorize a loan in the amount of \$36,000 from the General Fund to the Boggy Bayou Nature Park capital fund for the CMP Cycle 26 Contract approved in Commissioners' Court of November 8, 2023. (RHM)

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

16. Consider and take necessary action to declare the attached list of furniture from the Code Enforcement department as Waste. (RHM)

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 declare the attached list of furniture from the Calhoun County Museum as Waste. (RHM)

Commissioners agreed to send furniture to auction.

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

18. Consider and take necessary action to declare the three (3) pickup trucks on the attached Fixed Asset List as Surplus/Salvage and remove them from the Road & Bridge Precinct 2 Fixed Asset List. (VLL)

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

19. Approve the minutes of the November 8, 2023 meeting.

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

20. Accept Monthly Report from the following County Office:

- i. Justice of the Peace, Precinct 3 – October 2023

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

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

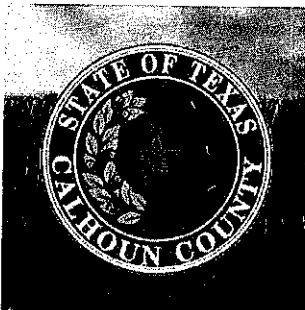
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

22. 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 10:41am



CALHOUN COUNTY COMMISSIONERS' COURT PACKET COMPLETION SHEET

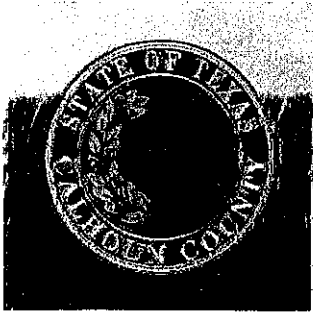
-
- | | |
|----------|---|
| <u>✓</u> | All Agenda Items Properly Numbered |
| <u>✓</u> | Contracts Completed and Signed |
| <u>✓</u> | All 1295's Flagged for Acceptance
(number of 1295's ____) |
| <u>✓</u> | All Documents for Clerk Signature Flagged
(All documents needing to be attested to need to be
signed day of Commissioner's Court.) |

On this 28th day of November 2023, the packet
for the 22nd of November 2023 Commissioners Court
Regular Session was submitted from the Calhoun County Judge's office to
the Calhoun County Clerk's Office.



Calhoun County Judge/Assistant

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, November 22, 2023 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. Hear a presentation from a representative of Southern Software regarding software for Calhoun County Constables to be complaint with state regulations to submit monthly reports of the Texas Department of Public Safety.
6. Consider and take necessary action to approve the updated estimates from G & W Engineers, Inc. regarding Bid Phase Services for the Memorial Medical Center Roof and HVAC project. (DEH)
7. Consider and take necessary action to approve the GLO – Certificate of Construction Completion (COCC) to the Drainage Improvements in Alamo Beach for Calhoun County, Texas – TX GLO Contract No. 201-065-064-C182 and authorize the County Judge to sign all necessary documents. (DEH)
8. Consider and take necessary action to remove from Precinct 3 R & B inventory asset #23-0257, a Norman Motor Grader to be used as the trade-in for new equipment. (JMB)

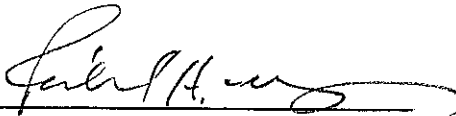
AT 10:35 FILED 10:35 O'CLOCK A M

NOV 17 2023

ANNA GOODWIN
COUNTY CLERK, CALHOUN COUNTY, TEXAS
BY: *[Signature]* DEPUTY

9. Consider and take necessary action to approve the lease-purchase agreement with Welch State Bank for the purchase of a 2020 John Deere 672 Motor Grader, serial number 1DW672GPCLF703140 from Anderson Machinery for Precinct 3 R & B and authorize the County Judge to sign all necessary documentation. (JMB)
10. Consider and take necessary action to transfer Precinct 4 R & B asset number 24-0441, a Military Cargo Truck, to the Seadrift Fire asset list. (GDR)
11. Consider and take necessary action to authorize the Port O'Connor Community Center Board of Directors to enter into an agreement with Lauger Companies, Inc. for the Pavillion improvements. (GDR)
12. Consider and take necessary action to extend the feasibility contract with Texas A & M AgriLife to January 31, 2024. There is no additional cost associated with this extension. (RHM)
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14. Consider and take necessary action to authorize the EMS Director to sign the Mueller, Inc. Sales Agreement Quote #93273810. (RHM)
15. Consider and take necessary action to authorize a loan in the amount of \$36,000 from the General Fund to the Boggy Bayou Nature Park capital fund for the CMP Cycle 26 Contract approved in Commissioners' Court of November 8, 2023. (RHM)
16. Consider and take necessary action to declare the attached list of furniture from the Code Enforcement department as Waste. (RHM)
17. Consider and take necessary action to declare the attached list of furniture from the Calhoun County Museum as Waste. (RHM)
18. Consider and take necessary action to declare the three (3) pickup trucks on the attached Fixed Asset List as Surplus/Salvage and remove them from the Road & Bridge Precinct 2 Fixed Asset List. (VLL)
19. Approve the minutes of the November 8, 2023 meeting.
20. Accept Monthly Report from the following County Office:
 1. Justice of the Peace, Precinct 3 – October 2023
21. Consider and take necessary action on any necessary budget adjustments. (RHM)

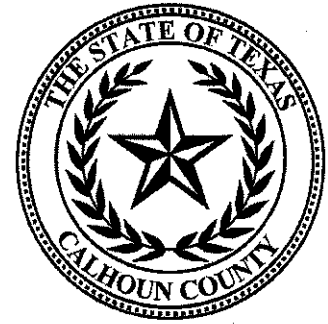
22. Approval of bills and payroll. (RHM)



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.

04



November 22, 2023

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

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Commissioner Pct 1
Commissioner Pct 2
Commissioner Pct 3
Commissioner Pct 4
County Clerk
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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.

Karen Lyssy presented a Certificate to Judge Meyer and Commissioner Behrens.
Commissioner Reese wished everyone a Happy Thanksgiving.

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: Karen P Lysser

ADDRESS: 60 311 Henry Barber Way Suite 1 PLTX 77979

TELEPHONE: 361-552-9747 or 361-920-9747

PLACE OF EMPLOYMENT: Calhoun County AgriLife Extension

EMPLOYMENT TELEPHONE: 361-746-2662

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:

Texas A&M AgriLife Extension

311 Henry Barber Way Suite 1 PLTX 77979

Which agenda item (or items) do you wish to address? None

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

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: Karen P. Lysser

05

5. Hear a presentation from a representative of Southern Software regarding software for Calhoun County Constables to be complaint with state regulations to submit monthly reports of the Texas Department of Public Safety.

Mark Jones with Southern Software gave a brief presentation.

06

6. Consider and take necessary action to approve the updated estimates from G & W Engineers, Inc. regarding Bid Phase Services for the Memorial Medical Center Roof and HVAC project. (DEH)

Scott Mason with G&W Engineers explained the need for the increase of funds requested.

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

Mae Belle Cassel

From: Arnold.Hayden@calhouncotx.org (Arnold Hayden) <Arnold.Hayden@calhouncotx.org>
Sent: Thursday, November 16, 2023 1:22 PM
To: smason@gwengineers.com; 'Richard Meyer'
Cc: 'Mae Belle Cassel'; 'Glynis King'
Subject: RE: MMC Hospital Roof

We could go with:

- Consider and take necessary action on updated cost estimates from G&W Engineers, Inc. regarding Bid Phase Services for the Memorial Medical Center Roof and HVAC project.

Arnold Hayden
Assistant Criminal District Attorney
Calhoun County Criminal District Attorney's Office
211 S. Ann St., Ste. 302
Port Lavaca, Texas 77979
(361) 553-4422
(361) 553-4421 (facsimile)

The information contained in this transmission may be strictly confidential. If you are not the intended recipient of this message, you are notified that you may not disclose, print, copy or disseminate this information. If you have received this transmission in error, please reply and notify the sender (only) and delete the message. Unauthorized interception of this e-mail may be a violation of criminal law.

From: smason@gwengineers.com <smason@gwengineers.com>
Sent: Thursday, November 16, 2023 1:11 PM
To: 'Richard Meyer' <richard.meyer@calhouncotx.org>
Cc: 'Mae Belle Cassel' <MaeBelle.Cassel@calhouncotx.org>; 'Glynis King' <gking@gwengineers.com>; 'Arnold Hayden' <Arnold.Hayden@calhouncotx.org>
Subject: MMC Hospital Roof

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.

Judge,

I would like to request an agenda item to further clarify the professional fees associated with this approval to move forward.

We were approved to move forward with the bid phase (see attached email). However, G&W wants to be upfront about the costs associated as we have gotten deeper into the bid package.

We are asking for approval to have a not-to-exceed amount approved of \$50,000.00 for this phase of the project.

Not sure how this should exactly be worded for the agenda item.

I can explain in court the cost and reasons.

07

7. Consider and take necessary action to approve the GLO – Certificate of Construction Completion (COCC) to the Drainage Improvements in Alamo Beach for Calhoun County, Texas – TX GLO Contract No. 201-065-064-C182 and authorize the County Judge to sign all necessary documents. (DEH)

Scott Mason with G&W Engineers explained the Certificate of Construction Completion contract.

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

Mae Belle Cassel

From: smason@gwengineers.com
Sent: Thursday, November 16, 2023 1:17 PM
To: 'Richard Meyer'
Cc: 'Mae Belle Cassel'; 'David Hall'; 'Katy Sellers'
Subject: Request for Agenda Item for Alamo Beach CDBG-DR Project
Attachments: doc07166720231019094203.pdf

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.

Judge,

As discussed, Katy is in need of this document to be signed in order to get reimbursement for the final pay application.

We are requesting an agenda item to approve of signing.

- Consider and take necessary action to approve GLO - Certificate of Construction Completion (COCC) to the Drainage Improvements in Alamo Beach for Calhoun County, Texas – TX GLO Contract No. 20-065-064-C182 and authorize County Judge to sign.

Thank you,

Scott P. Mason, P.E.

Lead Project Engineer
G&W Engineers, Inc.



COMMUNITY DEVELOPMENT & REVITALIZATION
The Texas General Land Office
Certificate of Construction Completion

Subrecipient: Calhoun County Contract #: 20-065-064-C182 Date: 10/16/2023

This is to certify that a final inspection of the project described below was conducted on 4/26/2023

Contract was entered into on 4/13/2022 between the city/county of Calhoun County and

Lester Contracting, Inc. for the construction of Drainage and Sewer Improvements in Alamo Beach

This is to further certify that:

1. The work has been completed in accordance with the plans and specifications and all addenda, change orders, and supplemental agreements thereto, with the following exceptions:

None

2. The sum of Zero, deducted from the final payment to the Contractor is a fair and equitable settlement for the foregoing excepted work.

3. The Contractor has presented on behalf of itself and its sureties, satisfactory evidence that he or she will repair, replace or make good any faulty workmanship and/or materials discovered in the work within a period of 12 Months from this date, as provided in the Contract.

4. Amount of Original Contract: 1,046,011.50

Cumulative Change Orders: -12,416.00

Final Amount of Contract:

Less Previous Payments: 930,235.94

Less Deductions (from #2 above):

FINAL PAYMENT (Balance): 103,359.56

5. The Final Payment in the amount above is now due and payable.

6. Final Quantities:

Activity Code (dropdown)	Project Name (from Performance Standard)	Description (What is your Activity?)	Quantity	Metric (dropdown)
5 - Flood and Drainage Facilities	Alamo Beach Dainage &Sewer Im	Regrade Exist Ditch	24862	Linear Feet
5 - Flood and Drainage Facilities	Alamo Beach Dainage &Sewer Im	Install 18' HDPE Pipe	2536	Linear Feet
5 - Flood and Drainage Facilities	Alamo Beach Dainage &Sewer Im	Install 24' HDPE Pipe	2892	Linear Feet
5 - Flood and Drainage Facilities	Alamo Beach Dainage &Sewer Im	Install 36' HDPE Pipe	1125	Linear Feet
5 - Flood and Drainage Facilities	Alamo Beach Dainage &Sewer Im	Install 48' HDPE Pipe	60	Linear Feet
5 - Flood and Drainage Facilities	Alamo Beach Dainage &Sewer Im	Modify Outfall Structure	1	# of Public Facilities
5 - Flood and Drainage Facilities	Alamo Beach Dainage &Sewer Im	Install Outfall Structure	3	# of Public Facilities



COMMUNITY DEVELOPMENT & REVITALIZATION
The Texas General Land Office
Certificate of Construction Completion

Activity Code (dropdown)	Project Name (from Performance Standard)	Description (What is your Activity?)	Quantity	Metric (dropdown)
5 - Flood and Drainage Facilities	o Beach Dainage & Sewer Improvm	Hydromulch Seeding	24862	Linear Feet
5 - Flood and Drainage Facilities	o Beach Dainage & Sewer Improvm	Disposal of Spoils	24862	Linear Feet
Certified by :				
Engineer's Signature		Contractor's Signature	Subrecipient's Signature	
Scott P. Mason, P.E., Project Engineer		Ken Lester, Jr., President	Richard H. Meyer, County Judge	
Engineer's Name and Title (Printed)		Contractor's Name and Title (Printed)	Subrecipient Name and Title (Printed)	
G&W Engineers, Inc.		Lester Contracting, Inc.	Calhoun County	
Firm		Firm	City/County of	

Disclaimer: The Texas General Land Office has made every effort to ensure the information contained on this form is accurate and in compliance with the most up-to-date CDBG-DR and/or CDBG-MIT federal rules and regulations, as applicable. It should be noted that the Texas General Land Office assumes no liability or responsibility for any error or omission on this form that may result from the interim period between the publication of amended and/or revised federal rules and regulations and the Texas General Land Office's standard review and update schedule.

08

8. Consider and take necessary action to remove from Precinct 3 R & B inventory asset #23-0257, a Norman Motor Grader to be used as the trade-in for new equipment. (JMB)

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

Joel Behrens
Calhoun County Commissioner, Precinct 3

24627 State Hwy. 172~Olivia, Port Lavaca, Texas 77979 ~ Office (361) 893-5346 ~ Fax (361) 893-5309
Email: joel.behrens@calhouncotx.org



Honorable Richard Meyer
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: Agenda Item

Dear Judge Meyer:

Please place the following item on the Commissioner's Court Agenda for November 22, 2023.

Consider and take necessary action to remove from Precinct 3, R & B inventory asset # 23-0257 a 2017 Norman motor grader to be used as trade in for new equipment.

Sincerely,
Joel Behrens
Commissioner Pct. 3

09

9. Consider and take necessary action to approve the lease-purchase agreement with Welch State Bank for the purchase of a 2020 John Deere 672 Motor Grader, serial number 1DW672GPCLF703140 from Anderson Machinery for Precinct 3 R & B and authorize the County Judge to sign all necessary documentation. (JMB)

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

Joel Behrens
Calhoun County Commissioner, Precinct 3

24627 State Hwy. 172~Olivia, Port Lavaca, Texas 77979 ~ Office (361) 893-5346 ~ Fax (361) 893-5309
Email: joel.behrens@calhouncotx.org



Honorable Richard Meyer
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: Agenda Item

Dear Judge Meyer:

Please place the following item on the Commissioner's Court Agenda for November 22, 2023.

Consider and take necessary action to approve lease purchase agreement with Welch State Bank for purchase of 2020 John Deere 672 motor grader SN# 1DW672GPCLF703140 from Anderson Machinery, and authorized Judge Meyer to sign all necessary documents.

Sincerely,

A handwritten signature in cursive script that reads "Joel Behrens".

Joel Behrens
Commissioner Pct. 3

EQUIPMENT LEASE-PURCHASE AGREEMENT

By and between

Welch State Bank
as Lessor

and

Calhoun County
as Lessee

Dated as of November 22, 2023

EQUIPMENT LEASE-PURCHASE AGREEMENT

This EQUIPMENT LEASE-PURCHASE AGREEMENT (the "Agreement"), dated as of November 22, 2023, and entered into between Welch State Bank, P.O. Box 129, Welch, OK 74369 ("Lessor") and Calhoun County, 211 S. Anna Street, Port Lavaca, TX 77979, ("Lessee"), a political subdivision duly organized and existing under the laws of the State of Texas ("State").

WITNESSETH:

WHEREAS, Lessor desires to lease the Equipment, as hereinafter described in Exhibit "A", to Lessee, and Lessee desires to lease the Equipment from Lessor, subject to the terms and conditions of and for the purposes set forth in this Agreement; and WHEREAS, Lessee is authorized under the Constitution and laws of the State of Texas to enter into this Agreement for the purposes set forth herein; NOW, THEREFORE, in considerations of the premises and the mutual covenants and agreements herein set forth, Lessor and Lessee do hereby covenant and agree as follows:

ARTICLE I. Section 1.01. Definitions. The following terms will have the meanings indicated below unless the context clearly requires otherwise.

"Agreement" means this Equipment Lease-Purchase Agreement and any schedule or exhibit made a part hereof by the parties hereto, together with any amendments to the Agreement made pursuant to Section 13.03 and 13.06.

"Code" means the Internal Revenue Code of 1986, as amended.

"Commencement Date" is the date when the term of this Agreement and Lessee's obligation to pay rent commences, which date shall be the date first above written.

"Equipment" means the property described in Exhibit "A", Equipment Description, and all replacements, repairs, restorations, modifications and improvements thereof or thereto made pursuant to Section 5.04 or Article VIII.

"Event of Default" means any event of default described in Section 12.01.

"Issuance Year" means the calendar year in which this Agreement was entered into by Lessee and Lessor.

"Lease Term" means the Original Term and all Renewal Terms.

"Lessee" means the entity described as such in the first paragraph of this Agreement, its successors and its assigns.

"Lessor" means the entity described as such in the first paragraph of this Agreement, its successors and its assigns.

"Original Term" means the period from the Commencement Date until the end of the budget year of Lessee in effect on the Commencement Date.

"Political Subdivision" means and shall include, but not be limited to, municipalities of the "State" and entities created by those municipalities.

"Purchase Price" means the amount designated as such on Exhibit B hereto, together with all other amounts then due hereunder, that Lessee may, in its discretion, pay to Lessor to purchase the Equipment.

"Renewal Terms" means the renewal terms of this Agreement, each having a duration of one year and a term coextensive with Lessee's budget year.

"Rental Payments" means the basic rental payments payable by Lessee pursuant to Section 4.01.

"Rental Payment Date" means the date upon which any Rental Payment is due and payable as provided in Exhibit B.

"State" means the State of Texas.

"Vendors" means the manufacturer of the Equipment as well as agents or dealers of the manufacturer from whom Lessor purchased or is purchasing the Equipment.

ARTICLE II. Section 2.01. Representations and Covenants of Lessee. Lessee represents, covenants and warrants for the benefit of Lessor as follows:

- (a) Lessee is a political subdivision of the State duly organized and existing under the Constitution and laws of the State with full power and authority to enter into this Agreement, as specified in Texas Statutes, and the transactions contemplated hereby and to perform all of its obligations hereunder.
- (b) Lessee has duly authorized the execution and delivery of this Agreement by proper action by its governing body at a meeting duly called, regularly convened and attended throughout by the requisite majority of the members thereof or by other appropriate official approval, and all requirements have been met and procedures have occurred in order to ensure the validity and enforceability of this Agreement.
- (c) No event or condition that constitutes, or with the giving of notice or the lapse of time or both would constitute, an Event of Default exists at the date hereof.
- (d) Lessee has, in accordance with the requirements of law, fully budgeted and appropriated sufficient funds for the current budget year to make the Rental Payments scheduled to come due during the current budget year, and to meet its other obligations for the current budget year, and such funds have not been expended for other purposes.
- (e) Lessee will do or cause to be done all things necessary to preserve and keep in full force and effect its existence as a public body corporate and politic.

- (f) Lessee has complied with such public bidding requirements as may be applicable to this Agreement and the acquisition by Lessee of the Equipment.
- (g) During the Lease Term, the Equipment will be used by Lessee only for the purpose of performing essential governmental or proprietary functions of Lessee consistent with the permissible scope of Lessee's authority. The Equipment will have a useful life in the hands of Lessee in excess of the Original Term and all Renewal Terms.
- (h) Lessee will annually provide Lessor with current financial statements, budgets, proofs of appropriation for the ensuing budget year and other such financial information relating to the ability of Lessee to continue this Agreement as may be requested by Lessor. Should Lessor assign this Agreement, Lessee will provide updated certificates regarding the use of the Equipment and Lessee's compliance with the terms hereof.
- (i) Lessee will comply with all applicable provisions of the Code, including without limitation Sections 103 and 148 thereof, and the applicable regulations of the Treasury Department to maintain the exclusion of the interest components of Rental Payments from gross income taxation.
- (j) Lessee will use the proceeds of this Agreement as soon as practicable and with all reasonable dispatch for the purpose for which the Agreement has been entered into. No part of the proceeds of the Agreement shall be invested in any securities, obligations or other investments or used, at any time, directly or indirectly, in a manner which, if such use had been reasonably anticipated on the date of issuance of the Agreement, would have caused any portion of the Agreement to become "arbitrage bonds" within the meaning of Section 103(b)(2) or Section 148 of the Code and the applicable regulations of the Treasury Department.
- (k) Lessee represents and warrants that it is a governmental unit under the laws of the State with general taxing powers; the Agreement is not a private activity bond as defined in Section 141 of the Code; 95% or more of the net proceeds of the Agreement will be used for local governmental activities of Lessee; and the aggregate face amount of all tax-exempt obligations (other than private activity bonds) issued or to be issued by Lessee and all subordinate entities thereof during the Issuance Year is not reasonably expected to exceed \$10,000,000. Lessee and all subordinate entities thereof will not issue in excess of \$10,000,000 of tax-exempt bonds (including the Agreement but excluding private activity bonds) during the Issuance Year without first obtaining an opinion of nationally recognized counsel in the area of tax-exempt municipal obligations acceptable to Lessor that the excludability of the interest components of Rental Payments on the agreement from gross income for federal tax purposes will not be adversely affected.

Section 2.02. Certification as to Arbitrage. Lessee hereby represents as follows:

- (a) The Equipment has been ordered or is expected to be ordered within six months of the Commencement Date, and the Equipment is expected to be delivered and installed, and the Vendor fully paid, within one year of the Commencement Date.
- (b) Lessee has not created or established, and does not expect to create or establish, any sinking fund or other similar fund (i) that is reasonably expected to be used to pay the Rental Payments, or (ii) that may be used solely to prevent a default in the payment of the Rental Payments.
- (c) The Equipment has not been and is not expected to be sold or otherwise disposed of by Lessee, either in whole or in major part, prior to the last maturity of the Rental Payments.
- (d) Lessee has not been notified of any listing or proposed listing of it by the Internal Revenue Service as an issuer whose arbitrage certificates may not be relied upon.

ARTICLE III. Section 3.01. Lease of Equipment. Lessor hereby demises, leases and lets to Lessee, and Lessee rents, leases and hires from Lessor, the Equipment in accordance with this Agreement for the Lease Term. This Agreement shall be in effect and shall commence as of the Commencement Date. The Lease Term may be continued, solely at the option of Lessee, at the end of the Original Term or any Renewal Term for an additional Renewal Term up to the maximum Lease Term set forth in Exhibit B hereto. At the end of the Original Term and at the end of each Renewal Term until the maximum Lease Term has been completed, Lessee shall be deemed to have exercised its option to continue this Agreement for the next Renewal Term if Lessee budgets and appropriates or otherwise makes legally available funds to pay Rental Payments for such Renewal Term, unless Lessee shall have terminated this Agreement pursuant to Section 10.01. The terms and conditions during any Renewal Term shall be the same as the terms and conditions during the Original Term, except that the Rental Payments shall be as provided on Exhibit B hereto.

Section 3.02. Continuation of Lease Term. It is the intent of Lessee to continue the Lease Term through the Original Term and all Renewal Terms and to pay the Rental Payments hereunder. Lessee reasonably believes that legally available funds in an amount sufficient to make all Rental Payments during the entire Lease Term can be obtained. Lessee and Lessor acknowledge that appropriation for Rental Payments is a governmental function which Lessee cannot contractually commit itself in advance to perform and this Agreement does not constitute such a commitment. However, Lessee reasonably believes that moneys in an amount sufficient to make all Rental Payments can and will lawfully be appropriated and made available to permit Lessee's continued utilization of the Equipment in the performance of its essential functions during the Lease Term. Lessee will use funds appropriated for this Agreement for no other purpose than to pay the Rental Payments and other amounts due hereunder.

Section 3.03. Nonappropriation. Lessee is obligated only to pay such Rental Payments under this Agreement as may lawfully be made from funds budgeted and appropriated for that purpose during Lessee's then current budget year. Should Lessee fail to

budget, appropriate or otherwise make available funds to pay Rental Payments following the then current Original Term or Renewal Term, this Agreement shall be deemed terminated at the end of the then current Original Term or Renewal Term. Lessee agrees to deliver notice to Lessor of such termination at least 90 days prior to the end of the then current Original Term or Renewal Term, but failure to give such notice shall not extend the term beyond such Original Term or Renewal Term. If this Agreement is terminated in accordance with this Section, Lessee agrees to peaceably deliver the Equipment, at Lessee's sole expense, to Lessor at the location(s) to be specified by Lessor.

ARTICLE IV. Section 4.01. Rental Payments. Lessee shall promptly pay Rental Payments to Lessor, exclusively from legally available funds, in lawful money of the United States of America, without notice or demand, in such amounts and on or before the applicable Rental Payment Dates set forth on Exhibit B hereto, at the address set forth on the first page hereof or such other address as Lessor or its assigns may from time to time request in writing. Lessee shall pay Lessor interest on any Rental Payment not paid on the date such payment is due at the rate of 12% per annum or the maximum amount permitted by law, whichever is less, from such date. A portion of each Rental Payment is paid as and represents payment of, interest, as set forth on Exhibit B hereto.

Section 4.02. Rental Payments to Constitute a Current Expense of Lessee. Lessor and Lessee understand and intend that the obligation of Lessee to pay Rental Payments hereunder shall constitute a current expense of Lessee and shall not in any way be construed to be a debt of Lessee in contravention of any applicable constitutional or statutory limitation or requirement governing the creation of indebtedness by Lessee, nor shall anything contained herein constitute a pledge of the general tax revenues, funds or monies of Lessee.

Section 4.03. RENTAL PAYMENTS TO BE UNCONDITIONAL. EXCEPT AS PROVIDED IN SECTION 3.03, THE OBLIGATIONS OF LESSEE TO MAKE RENTAL PAYMENTS AND TO PERFORM AND OBSERVE THE OTHER COVENANTS AND AGREEMENTS CONTAINED HEREIN SHALL BE ABSOLUTE AND UNCONDITIONAL IN ALL EVENTS WITHOUT ABATEMENT, DIMINUTION, DEDUCTION, SET-OFF OR DEFENSE, FOR ANY REASON, INCLUDING WITHOUT LIMITATION ANY FAILURE OF THE EQUIPMENT TO BE DELIVERED OR INSTALLED, ANY DEFECTS, MALFUNCTIONS, BREAKDOWNS OR INFIRMITIES IN THE EQUIPMENT OR ANY ACCIDENT, CONDEMNATION OR UNFORESEEN CIRCUMSTANCES.

ARTICLE V. Section 5.01. Delivery, Installation and Acceptance of the Equipment. Lessee shall order the Equipment and cause the Equipment to be delivered and installed at the location specified on Exhibit A. When the Equipment has been delivered and installed, Lessee shall immediately accept the Equipment and evidence said acceptance by executing and delivering to Lessor an acceptance certificate acceptable to Lessor.

Section 5.02. Enjoyment of Equipment. Lessor shall provide Lessee with quiet use and enjoyment of the Equipment during the Lease Term, and Lessee shall peaceably and quietly have, hold and enjoy the Equipment during the Lease Term, without suit, trouble or hindrance from Lessor, except as otherwise expressly set forth in this Agreement.

Section 5.03. Location; Inspection. Lessor shall have the right at all reasonable times during regular business hours to enter into and upon the property of Lessee for the purpose of inspecting the Equipment.

Section 5.04. Use and Maintenance of the Equipment. Lessee will not install, use, operate or maintain the Equipment improperly, carelessly, in violation of any applicable law or in a manner contrary to that contemplated by this Agreement. Lessee shall provide all permits and licenses, if any, necessary for the installation and operation of the Equipment. In addition, Lessee agrees to comply in all respects with all applicable laws, regulations and rulings of any legislative, executive, administrative or judicial body, provided that Lessee may contest in good faith the validity or application of any such law, regulation or ruling in any reasonable manner that does not, in the opinion of Lessor, adversely affect the interest of Lessor in and to the Equipment or its interest or rights under this Agreement. Lessee agrees that it will, at Lessee's own cost and expense, maintain, preserve and keep the Equipment in good repair and working order. Lessor shall have no responsibility to maintain, repair or make improvements or additions to the Equipment. Upon the request of Lessor, Lessee will enter into a maintenance contract for the Equipment with one or more Vendors.

ARTICLE VI. Section 6.01. Title to the Equipment. Upon acceptance of the Equipment by Lessee, title to the Equipment shall vest in Lessee subject to Lessor's rights under this Agreement. Once all of the rental payments are made by Lessee, Lessor is divested of all right, title and interest in the equipment, and vested in Lessee. Additionally, upon such instance, the terms of the lease-purchase agreement are fully performed, all obligations of the parties hereunder are terminated. Title shall thereafter immediately and without any action by Lessee vest in Lessor, and Lessee shall immediately surrender possession of the Equipment to Lessor upon (a) any termination of this Agreement other than termination pursuant to Section 10.01 or (b) the occurrence of an Event of Default. It is the intent of the parties hereto that any transfer of title to Lessor pursuant to this Section shall occur automatically without the necessity of any bill of sale, certificate of title or other instrument of conveyance. Lessee shall, nevertheless, execute and deliver any such instruments as Lessor may request to evidence such transfer. Upon termination of this Lease in accordance with Articles 3 and 12 hereof, at the election of Lessor and upon Lessor's written notice to Lessee, full and unencumbered legal title and ownership of the Equipment shall pass to Lessor, Lessee shall have no further interest therein, and

Lessee shall execute and deliver to Lessor such documents as Lessor may request to evidence the passage of legal title and ownership to Lessor and termination of Lessee's interest in the Equipment.

Section 6.02. Security Interest. To secure the payment of all of Lessee's obligations under this Agreement, Lessee hereby grants to Lessor a security interest constituting a first lien on the Equipment and on all additions, attachments and accessions thereto, substitutions therefor and proceeds therefrom. Lessee agrees to execute such additional documents, in form satisfactory to Lessor, which Lessor deems necessary or in form satisfactory to Lessor, which Lessor deems necessary or appropriate to establish and maintain its security interest and the security interest of any assignee of Lessor in the Equipment.

Section 6.03. Personal Property. The Equipment is and will remain personal property. The Equipment will not be deemed to be affixed to or a part of the real estate on which may be situated, notwithstanding that the Equipment or any part thereof may be or hereafter become in any manner physically affixed or attached to such real estate or any building thereon. Upon the request of Lessor, Lessee will, at Lessee's expense, furnish a waiver of any interest in the Equipment from any party having an interest in any such real estate or building.

ARTICLE VII. Section 7.01. Liens, Taxes, Other Governmental Charges and Utility Charges. Lessee shall keep the Equipment free of all levies, liens and encumbrances except those created by this Agreement. The parties to this Agreement contemplate that the Equipment will be used for a governmental or proprietary purpose of Lessee and that the Equipment will therefore be exempt from all property taxes. If the use, possession or acquisition of the Equipment by Lessee is nevertheless determined to be subject to taxation, Lessee shall pay when due all taxes and governmental charges lawfully assessed or levied against or with respect to the Equipment. Lessee shall pay such taxes or charges as the same may become due.

Section 7.02. Insurance. At its own expense, Lessee shall cause casualty, public liability and property damage insurance to be carried and maintained in the amounts and for the coverage set forth in Exhibit G. All insurance proceeds from casualty losses shall be payable as hereinafter provided in this Agreement. Lessee shall furnish to Lessor certificates evidencing such coverage throughout the Lease Term. Alternatively, Lessee may insure the Equipment under a blanket insurance policy or policies which cover not only the Equipment but other properties. All such insurance shall be with insurers that are acceptable to Lessor, shall name Lessee and Lessor as insureds and shall contain a provision to the effect that such insurance shall not be cancelled or modified materially without first giving written notice thereof to Lessor at least 10 days in advance of such cancellation or modification. All such casualty insurance shall contain a provision making any losses payable to Lessee and Lessor as their respective interests may appear. With written consent of Lessor, Lessee may satisfy the insurance requirements of this Section 7.02 by self-insurance.

Section 7.03. Advances. In the event Lessee shall fail to either maintain the insurance required by this Agreement or keep the Equipment in good repair and working order, Lessor may, but shall be under no obligation to, purchase the required insurance and pay the cost of the premiums thereof and maintain and repair the Equipment and pay the cost thereof. All amounts so advanced by Lessor shall constitute additional rent for the then current Original Term or Renewal Term and Lessee covenants and agrees to pay such amounts so advanced by Lessor with interest thereon from the due date until paid at the rate of 12% per annum or the maximum amount permitted by law, whichever is less.

ARTICLE VIII. Section 8.01. Damage, Destruction and Condemnation. If (a) the equipment or any portion thereof is destroyed, in whole or in part, or is damaged by fire or other casualty or (b) title to, or the temporary use of, the Equipment or any part thereof shall be taken under the exercise or threat of the power of eminent domain by any governmental body or by any person, firm or corporation acting pursuant to governmental authority, Lessee and Lessor will cause the Net Proceeds of any insurance claim, condemnation award or sale under threat of condemnation to be applied to the prompt replacement, repair, restoration, modification or improvement of the Equipment, unless Lessee shall have exercised its option to purchase the Equipment pursuant to Section 10.01. Any balance of the Net Proceeds remaining after such work has been completed shall be paid to Lessee. For purposes of this Article, the term "Net Proceeds" shall mean the amount remaining from the gross proceeds of any insurance claim, condemnation award or sale under threat of condemnation after deducting all expenses, including attorneys' fees, incurred in the collection thereof.

Section 8.02. Insufficiency of Net Proceeds. If the Net Proceeds are insufficient to pay in full the cost of any repair, restoration, modification or improvement referred to in Section 8.01, Lessee shall either (a) complete such replacement, repair, restoration, modification or improvement and pay any costs thereof in excess of the amount of the Net Proceeds, or (b) purchase Lessor's interest in the Equipment pursuant to Section 10.01. The amount of the Net Proceeds, if any, remaining after completing such repair, restoration, modification or improvement or after purchasing Lessor's interest in the Equipment shall be retained by Lessee. If Lessee shall make any payments pursuant to this Section, Lessee shall not be entitled to any reimbursement therefor from Lessor nor shall Lessee be entitled to any diminution of the amounts payable under Article IV.

ARTICLE IX. Section 9.01. DISCLAIMER OF WARRANTIES. Lessee acknowledges and agrees that the Equipment is of a size, design and capacity selected by Lessee and that Lessor is neither a manufacturer nor a vendor of such Equipment. LESSOR MAKES NO WARRANTY OR REPRESENTATION, EITHER EXPRESS OR IMPLIED, AS TO THE VALUE, DESIGN, CONDITION,

MERCHANTABILITY OR FITNESS FOR PARTICULAR PURPOSE OR USE OF THE EQUIPMENT OR ANY MANUFACTURER'S OR VENDOR'S WARRANTY WITH RESPECT THERETO. IN NO EVENT SHALL LESSOR BE LIABLE FOR ANY INCIDENTAL INDIRECT, SPECIAL OR CONSEQUENTIAL DAMAGE IN CONNECTION WITH OR ARISING OUT OF THIS AGREEMENT OR THE EXISTENCE, FURNISHING, FUNCTIONING OR LESSEE'S USE OF ANY ITEM, PRODUCT OR SERVICE PROVIDED FOR IN THIS AGREEMENT.

Section 9.02. Vendors' Warranties. Lessor hereby irrevocably appoints Lessee its agent and attorney-in-fact during the Lease Term, so long as Lessee shall not be in default hereunder, to assert from time to time whatever claims and rights (including without limitation warranties) related to the Equipment that Lessor may have against the Vendors. Lessee's representation shall be against the Vendors of the Equipment and not against Lessor. Any such matter shall not have any effect whatsoever on the rights and obligations of Lessor with respect to this Agreement, including the right to receive full and timely payments hereunder. Lessee expressly acknowledges that Lessor makes, and has made, no representations or warranties whatsoever as to the existence or the availability of such warranties by the Vendors of the Equipment.

ARTICLE X. Section 10.01. Purchase Option. Lessee shall have the option to purchase Lessor's interest in the Equipment, upon giving written notice to Lessor at least 60 days before the date of purchase except the final Rental Payment Date, at the following times and upon the following terms:

- (a) On the Rental Payment Dates specified in Exhibit B, upon payment in full of the Rental Payments then due hereunder plus the then applicable Purchase Price to Lessor; or
- (b) In the event of substantial damage to or destruction or condemnation of substantially all of the Equipment, on the day Lessee specifies as the purchase date in Lessee's notice to Lessor of its exercise of the purchase option pursuant to Article VIII, upon payment in full of the Rental Payments then due hereunder plus the then applicable Purchase Price to Lessor.

ARTICLE XI. Section 11.01. Assignment by Lessor. Lessor's right, title and interest in, to and under this Agreement and the Equipment may be assigned and reassigned only in whole but not in part without the necessity of obtaining the consent of Lessee. Any assignment shall not be effective until Lessee has received written notice, signed by the assignor, of the name and address of the assignee. Lessee shall retain all such notices as a register of all assignees and shall make all payments to the assignee currently designated in such register. Lessee agrees to execute all documents, including notices of assignment and chattel mortgages or financing statements that may be reasonably requested by Lessor or any assignee to protect its interests in the Equipment and in this Agreement. Lessee shall not have the right to and shall not assert against any assignee or any claim, counterclaim or other right Lessee may have against Lessor.

Section 11.02. Assignment and Subleasing by Lessee. None of Lessee's right, title and interest in, to and under this Agreement and in the Equipment may be assigned or encumbered by Lessee for any reason, except that Lessee may sublease all or part of the Equipment if Lessee obtains the prior written consent of Lessor and an opinion of nationally recognized counsel in the area of tax-exempt municipal obligations satisfactory to Lessor that such subleasing will not adversely affect the exclusion of the interest components of the Rental Payments from gross income for federal income tax purposes; except where the sub-lessee is a recognized municipality of the "State". Any such sublease of all or part of the Equipment shall be subject to this Agreement and the rights of Lessor in, to and under this Agreement and the Equipment.

ARTICLE XII. Section 12.01. Events of Default Defined. Subject to the provisions of Section 3.03, any of the following events shall constitute an "Event of Default" under this Agreement:

- (a) Failure by Lessee to pay any Rental Payment or other payment required to be paid hereunder at the time specified herein;
- (b) Failure by Lessee to maintain required insurance coverage or to observe and perform any other covenant, condition or agreement on its part to be observed or performed, other than as referred to in subparagraph (a) above, for a period of 30 days after written notice specifying such failure and requesting that it be remedied is given to Lessee by Lessor, unless Lessor shall agree in writing to an extension of such time prior to its expiration; if the failure stated in the notice cannot be corrected within the applicable period, Lessor will not unreasonably withhold its consent to an extension of such time if corrective action is instituted by Lessee within the applicable period and diligently pursued until the default is corrected;
- (c) Any statements, representations or warranty made by Lessee in or pursuant to this Agreement or its execution, delivery or performance shall prove to have been false, incorrect, misleading or breached in any material respect on the date when made;
- (d) Any provision of this Agreement shall be at any time for any reason cease to be valid and binding on Lessee, or shall be declared to be null and void, or the validity or enforceability thereof shall be contested by Lessee or any governmental agency or authority if the loss of such provision would materially adversely affect the rights or security of Lessor, or Lessee shall deny that it has any further liability or obligation under this Agreement;
- (e) Lessee shall (i) apply for or consent to the appointment of a receiver, trustee, custodian or liquidator of Lessee, or of all or a substantial part of the assets of Lessee, (ii) be unable, fail or admit in writing its inability generally to pay its debts as they become due, (iii) make a general assignment for the benefit of creditors, (iv) have an order for relief entered against it under applicable federal bankruptcy law, or (v) file a voluntary petition in bankruptcy or a petition or an answer seeking reorganization or an

arrangement with creditors or taking advantage of any insolvency law or any answer admitting the material allegations of a petition filed against Lessee in any bankruptcy, reorganization or insolvency proceeding; or

(f) An order, judgment or decree shall be entered by any court of competent jurisdiction, approving a petition or appointing a receiver, trustee, custodian or liquidator of Lessee or of all or a substantial part of the assets of Lessee, in each case without its application, approval or consent, and such order, judgment or decree shall continue unstayed and in effect for any period of 30 consecutive days.

Section 12.02. Remedies on Default. Whenever any Event of Default exists, Lessor shall have the right, at its sole option without any further demand or notice, to take one or any combination of the following remedial steps:

(a) With or without terminating this Agreement, may declare all Rental Payments due or to become due during the Original or Renewal Term in effect when the default occurs to be immediately due and payable by Lessee, whereupon such Rental Payments shall be immediately due and payable; and

(b) With or without termination of this Agreement, Lessor may enter the premises where the Equipment is located and disable the Equipment to prevent further use thereof by Lessee. In addition or alternatively, Lessor may take possession of any of all of the Equipment by giving written notice to deliver the Equipment in the manner provided in Section 12.03; in the event Lessee fails to do so within ten (10) days after receipt of such notice, Lessor may enter upon Lessee's premises where the Equipment is kept and take possession of the Equipment and charge Lessee for costs incurred in repossessing the Equipment, including reasonable attorneys' fees. Lessee hereby expressly waives any damages occasioned by such repossession. Notwithstanding the fact that Lessor has taken possession of the Equipment, Lessee shall continue to be responsible for the Rental Payments due with respect thereto during the Fiscal Year then in effect.

(c) If Lessor terminates this Agreement and, in its discretion, takes possession and disposes of the Equipment or any portion thereof, Lessor shall apply the proceeds of any such disposition to pay the following items in the following order: (i) all costs (including, but not limited to, attorney's fees) incurred in securing possession of the Equipment; (ii) all expenses incurred in completing the disposition; (iii) any sales or transfer taxes; (iv) the balance of any Rental Payments owed by Lessee during the Original or Renewal Term then in effect; any disposition proceeds remaining after the requirements of the clauses (i), (ii), (iii), (iv), and (v) have been met shall be paid to Lessee; (v) the applicable Purchase Price of the Equipment and

(d) Lessor may take whatever action at law or in equity may appear necessary or desirable to enforce its rights as the owner of the Equipment, and Lessee shall pay the reasonable attorney's fees and expenses incurred by Lessor in enforcing any remedy hereunder.

Section 12.03. Return of Equipment; Release of Lessee's Interest. Upon termination of this Agreement hereunder prior to the payment of all Rental Payments or the applicable Purchase Price in accordance with Exhibit B: (i) Lessor may enter upon Lessee's premises where the Equipment is kept and disable the Equipment to prevent its further use by Lessee and (ii) Lessee shall promptly, but in any event within ten (10) days after such termination, at its own cost and expense: (a) perform any testing and repairs required to place the Equipment in the condition required by Section 5.04; (b) if deinstallation, disassembly or crating is required, cause the Equipment to be deinstalled, disassembled and crated by an authorized manufacturer's representative or such other service person as is satisfactory to Lessor; and (c) deliver the Equipment to a location specified by Lessor, freight and insurance prepaid by Lessee. If Lessee refuses to deliver the Equipment in the manner designated, Lessor may repossess the Equipment and charge to Lessee the costs of such repossession.

Section 12.04. No Remedy Exclusive. No remedy herein conferred upon or reserved to Lessor is intended to be exclusive and every such remedy shall be cumulative and shall be in addition to every other remedy given under this Agreement now or hereafter existing at law or in equity. No delay or omission to exercise any right or power accruing upon any default shall impair any such right or power or shall be construed to be a waiver thereof, but any such right or power may be exercised from time to time and as often as may be deemed expedient. In order to entitle Lessor to exercise any remedy reserved to it in this Agreement it shall not be necessary to give any notice other than such notice as may be required in this Agreement.

Section 12.05. Force Majeure. If by any reason of Force Majeure Lessee is unable in whole or in part to carry out its agreement on its part herein contained, other than the obligations on the part of Lessee contained in Article IV and Section 7.02 hereof, Lessee shall not be deemed in default during the continuance of such inability. The term "Force Majeure" as used herein shall mean, without limitation, the following: Acts of God, strikes, lockouts or other industrial disturbances; acts of public enemies, orders or restraints of any kind of government of the United States of America or the State or any of their departments, agencies or officials, or any civil or military authority; insurrections; riots; landslides; earthquakes; fires; storms; droughts; floods; or explosions.

ARTICLE XIII. Section 13.01. Notices. All notices, certificates or other communications hereunder shall be sufficiently given and shall be deemed given when delivered or mailed to the parties hereto at the addresses shown at the beginning of this Agreement (or at such other address as either party hereto shall designate in writing to the other for notices to such party) and to any assignee at its address as it appears on the registration books maintained by Lessee.

Section 13.02. Release and Indemnification. To the extent permitted by law, Lessee shall indemnify, protect, hold harmless, save and keep harmless Lessor from and against any and all liability, obligation, loss, claim, tax and damage whatsoever, regardless of cause thereof, and all expenses in connection therewith (including without limitation counsel fees and expenses and

any federal income tax and interest and penalties connected therewith imposed on interest received) arising out of or as the result of (a) the entering into of this Agreement, (b) the ownership of any item of Equipment, (c) the ordering, acquisition, use, operation, condition, purchase, delivery, rejection, storage, or return of any item of the Equipment, (d) or any accident in connection with the operation, use, condition, possession, storage or return of any item of the Equipment resulting in damage to property or injury to or death to any person, and/or (e) the breach of any covenant herein or any material misrepresentation contained herein. The indemnification arising under this paragraph shall continue in full force and effect notwithstanding the full payment of all obligations under this Agreement or the termination of the Lease Term for any reason.

Section 13.03. Entire Agreement. This Agreement constitutes the entire agreement between Lessor and Lessee. There are no understandings, agreements, representations or warranties, express or implied, not specified herein regarding this Agreement or the Equipment leased hereunder. Any terms and conditions of any purchase order or other document submitted by Lessee in connection with this Agreement which are in addition to or inconsistent with the terms and conditions of this Agreement will not be binding on Lessor and will not apply to this Agreement. Lessee by the signature below of its authorized representative acknowledges that it has read this Agreement, understands it, and agrees to be bound by its terms and conditions. No waiver, consent, amendment, modification or change of terms of this Agreement shall bind either party unless in writing, signed by both parties, and then such waiver, consent, amendment, modification or change shall be effective only in the specific instance and for the specific purpose given.

Section 13.04. Binding Effect. This Agreement shall inure to the benefit of and shall be binding upon Lessor and Lessee and their respective successors and assigns.

Section 13.05. Severability. In the event any provision of this Agreement shall be held invalid or unenforceable by any court of competent jurisdiction, such holding shall not invalidate or render unenforceable any other provision hereof.

Section 13.06. Amendments, Changes and Modifications. This Agreement may be amended by Lessor and Lessee.

Section 13.07. Execution in Counterparts. This Agreement may be simultaneously executed in several counterparts, each of which shall be an original and all of which shall constitute but one and the same instrument.

Section 13.08. Applicable Law. This Agreement shall be governed by and construed in accordance with the laws of the State of Texas.

Section 13.09. Captions. The captions or headings in this Agreement are for convenience only and in no way define, limit or describe the scope or intent of any provisions or sections of this Agreement.

IN WITNESS WHEREOF, Lessor has executed this Agreement in its corporate name with its corporate seal hereunto affixed and attested by its duly authorized officers, and Lessee has caused this Agreement to be executed in its corporate name and attested by its duly authorized officers as of the date written above.

LESSOR

Welch State Bank

By: _____

Print Name: Sherri J. Mount

Title: Senior Vice President

LESSEE

Calhoun County

By: 

Print Name: Richard Meyer

Title: County Judge

(SEAL)

ATTEST:

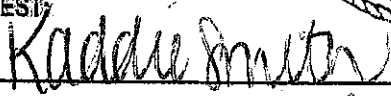
By: _____

Print Name: Kelli Langley

Title: Notary Public

(SEAL)

ATTEST:

By: 

Print Name: Anna Goodman

Title: County Clerk

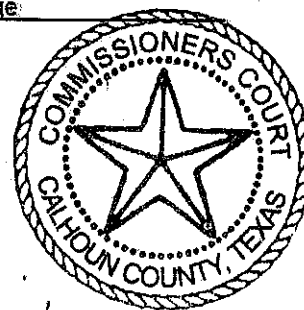


EXHIBIT A TO EQUIPMENT LEASE-PURCHASE AGREEMENT

Dated November 22, 2023 Between Welch State Bank as Lessor and Calhoun County as Lessee.

DESCRIPTION OF EQUIPMENT

The following Equipment description is the subject of the attached Equipment Lease-Purchase Agreement:

<u>Qty.</u>	<u>Description:</u>
1	2020 John Deere 672 Grader SN# 1DW672GPCLF703140 together with all equipment, accessions, additions and attachments thereto.

The Equipment is located at: Precinct #3

Lessee hereby certifies that the description of the Equipment set forth above constitutes an accurate description of the "Equipment", as defined in the attached Equipment Lease-Purchase Agreement.

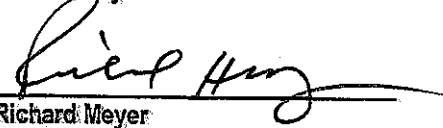
STATEMENT OF ESSENTIAL USE

Please state below, or on the letterhead stationery of Calhoun County, a brief statement about why the equipment listed in Exhibit "A" has been acquired. This statement should address the following questions:

1. What is the essential function(s) to be performed by the equipment? How long do you expect it will be used?
2. Does it replace equipment that performed this (these) same function(s)? If so, how many years was the previous equipment in use?
3. Was this equipment chosen through competitive bidding, or by another method?
4. Which internal fund will be used to make the lease payments?

In answer to the above, the following is submitted:

Calhoun County

By: 
Richard Meyer

Title: County Judge

EXHIBIT B TO EQUIPMENT LEASE-PURCHASE AGREEMENT

LEASE NO. 126714

Dated November 22, 2023 Between Welch State Bank as Lessor and Calhoun County as Lessee.

RENTAL PAYMENT SCHEDULE

RATE: 5.81%

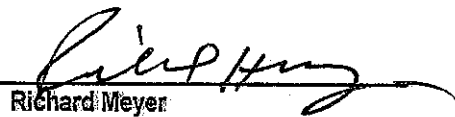
Equipment Cost \$275,861.00 LESS: Trade Allowance \$101,000.00 + Doc Fee \$300.00 = \$175,161.00

	Date	Payment	Interest	Principal	Balance
Loan:	11/22/2023				175,161.00
1	11/22/2024	50,348.21	10,220.54	40,127.67	135,033.33
2	11/22/2025	50,348.21	7,857.59	42,490.62	92,542.71
3	11/22/2026	50,348.21	5,385.06	44,963.15	47,579.56
4	11/22/2027	50,348.21	2,768.65	47,579.56	0.00
Grand Totals:		201,392.84	26,231.84	175,161.00	

Final payment may vary due to the actual date payments were received.

Calhoun County:

By:


Richard Meyer

Title: County Judge

**EXHIBIT C TO EQUIPMENT LEASE-PURCHASE AGREEMENT
ACCEPTANCE CERTIFICATE**

Welch State Bank
PO Box 129
Welch, OK 74369

Re: Equipment Lease-Purchase Agreement, dated November 22, 2023 (the "Agreement") between Welch State Bank ("Lessor") and Calhoun County ("Lessee")

Ladies and Gentlemen:

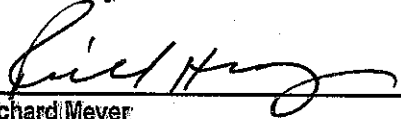
In accordance with the Agreement, the undersigned Lessee hereby certifies and represents to, and agrees with, Lessor as follows:

- (1) All of the Equipment (as defined in the Agreement) has been delivered, installed and accepted on the date hereof.
- (2) Lessee has conducted such inspection and/or testing of the Equipment as it deems necessary and appropriate and hereby acknowledges that it accepts the Equipment for all purposes.
- (3) Lessee is currently maintaining the required insurance coverage.
- (4) No event or condition that constitutes, or with notice or lapse of time, or both, would constitute as Event of Default (as defined in the Agreement) exists at the date hereof.

Acceptance Date: 11/22/23

Equipment Description: 2020 John Deere 672 Grader SN# 1DW672GPCLF703140 together with all equipment, accessions, additions and attachments thereto.

Calhoun County

By: 
Richard Meyer

Title: County Judge

EXHIBIT D TO EQUIPMENT LEASE-PURCHASE AGREEMENT

OPINION OF COUNSEL
(On Counsel's Letterhead)

Welch State Bank
PO Box 129
Welch, OK 74369

As counsel for the Calhoun County ("Lessee"), I have examined duly executed originals of the Equipment Lease-Purchase Agreement (the "Agreement") dated November 22, 2023, by and between Lessee and Welch State Bank ("Lessor"), the proceedings taken by Lessee to authorize and execute the Agreement together with other related documents, and the Constitution of the State of Texas the ("State") as presently enacted and construed. Based upon said examination and upon such other examination as I have deemed necessary or appropriate, it is my opinion that:

Lessee was duly organized and is validly existing under the Constitution and laws of the State as a political subdivision of the State. The Agreement has been duly authorized, executed and delivered by Lessee, pursuant to Constitutional, statutory and/or home rule provisions which authorized this transaction and Lessee's Resolution, attached as Exhibit F to the Agreement.

The Agreement is a legal, valid and binding obligation of Lessee, enforceable in accordance with its terms. In the event Lessor obtains a judgment against Lessee in money damages, as a result of an event of default under the Agreement, Lessee will be obligated to pay such judgment.

Lessee has complied with applicable public bidding requirements.

To the best of our knowledge, no litigation is pending or threatened in any court or other tribunal, state or Federal, in any way affecting the validity of the Agreement.

The signatures of the officers of Lessee which appear on the Agreement are true and genuine; we know said officers and know them to hold the offices set forth below their names.

Lessee is a political subdivision within the meaning of Section 103 of the Internal Revenue Code and the related regulations and rulings.

The Lessee has, in its Resolution, designated the Agreement as a "qualified tax-exempt obligation" under Section 265 (b)(3) of the Internal Revenue Code of 1986, as amended.

Signature: Arnold Hayden

Printed Name: Arnold Hayden

Address: 211 S. Ann, Port Lavaca TX 77979

Telephone: 361-553-4422

Date: 11/28/23

EXHIBIT E TO EQUIPMENT LEASE-PURCHASE AGREEMENT

Dated November 22, 2023 Between Welch State Bank as Lessor and Calhoun County as Lessee.

CERTIFICATE OF CLERK OR SECRETARY OF LESSEE

I, the undersigned, do hereby certify that I am the duly elected or appointed and acting Secretary/Clerk of the Calhoun County and I do hereby certify (i) that the officer of Lessee who executed the foregoing Agreement on behalf of Lessee and whose genuine signature appears thereon, is the duly qualified and acting officer of Lessee as stated beneath his or her signature and has been authorized to execute the foregoing Agreement on behalf of Lessee, and (ii) that the budget year of Lessee is from:

_____ to _____
Dated: 11/22/23
By: Kaddie Smith
Anna Goodman Kaddie Smith
Deputy
Title: County Clerk

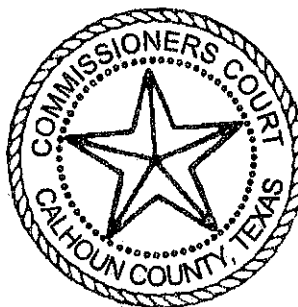


EXHIBIT F TO EQUIPMENT LEASE-PURCHASE AGREEMENT

Dated November 22, 2023 Between Welch State Bank as Lessor and Calhoun County as Lessee.

RESOLUTION OF GOVERNING BODY

At a duly called meeting of the governing body of the Calhoun County (the "Lessee") held on November 22, 2023, the following resolution was introduced and adopted:

RESOLVED, whereas the governing body of Lessee has determined that a true and very real need exists for the acquisition of 2020 John Deere 672 Grader SN# 1DW672GPCLF703140 (the "Equipment"), Lessee desires to finance the Equipment by entering into an Equipment Lease-Purchase Agreement with Welch State Bank as Lessor and Calhoun County as Lessee (the "Agreement") according to the terms set forth in the Bid Proposal from Welch State Bank dated _____, presented at the board meeting; and the Equipment will be used by Lessee for the purpose of:

RESOLVED, whereas the governing body of Lessee has taken the necessary steps, including any legal bidding requirements, under applicable law to arrange for the acquisition of such equipment,

RESOLVED, whereas the governing body hereby directs its legal counsel to review the Agreement and negotiate appropriate modifications to said Agreement so as to assure compliance with state law and local statutory law, prior to execution of the Agreement by those persons so authorized by the governing body for such purpose,

BE IT RESOLVED, by the governing body of Lessee that:

The terms of said Agreement are in the best interests of Lessee for the acquisition of such Equipment and the governing body of Lessee designates and confirms the following persons to execute and deliver, and to or attest, respectively, the Agreement and any related documents necessary to the consummation of the transactions contemplated by the Agreement:

Name and Title of Persons to Execute and Attest Agreement:

Richard Meyer, County Judge

RESOLVED, Lessee covenants that it will perform all acts within its power which are or may be necessary to insure that the interest portion of the Rental Payments coming due under the Agreement will at all times remain exempt from federal income taxation under the laws and regulations of the United States of America as presently enacted and construed or as hereafter amended.

Lessee hereby certifies that it has not issued or effected the issuance of, and reasonably anticipates that it and its subordinate entities shall not issue or effect the issuance of, more than ten million dollars (\$10,000,000.00) of tax-exempt obligations during the 2023 calendar year and hereby designates the Agreement as a "qualified tax-exempt obligation", as defined by Section 265(b)(3) of the Internal Revenue Code of 1986, as amended.

The undersigned further certifies that the above resolution has not been repealed or amended and remains in full force and effect and further certifies that the above and foregoing Agreement is the same as presented at said meeting of the governing body of Lessee.

Kaddie Smith
Anna Goodman *Kaddie Smith*
Secretary/Clerk of Lessee *deputy clerk*



Attachments: Related Board Minutes

EXHIBIT G TO EQUIPMENT LEASE-PURCHASE AGREEMENT

Dated November 22, 2023 Between Welch State Bank as Lessor and Calhoun County as Lessee.

INSURANCE REQUIREMENTS

In accordance with the Equipment Lease-Purchase Agreement requirements for insurance coverage, the Lessee has instructed the insurance agent to issue:

- a. All Risk Physical Damage Insurance on the leased Equipment as defined in the Agreement, and in an amount at least equal to the then applicable Purchase Price of the Equipment, evidenced by a Certificate of Insurance and Long Form Loss Payable Clause naming Lessor "and/or its assigns" Loss Payee.
- b. Public Liability Insurance evidenced by a Certificate of Insurance naming "Lessor and/or its Assigns" as an Additional Insured and with the following minimum coverage:

Equipment Description: 2020 John Deere 672 Grader SN# 1DW672GPCLF703140 together with all equipment, accessions, additions and attachments thereto.

Equipment Value: \$275,861.00

\$500,000.00 per person

\$500,000.00 aggregate bodily injury liability

\$300,000.00 property damage liability

Insurance Agent (provide name, address and telephone number):

Texas Association of Counties

PO Box 2131

Austin, TX 78768

512-478-8753

Proof of insurance coverage or a "Self-Insurance" Letter must be provided to Lessor prior to the time the Equipment is delivered.

EXHIBIT H TO EQUIPMENT LEASE-PURCHASE AGREEMENT

Dated November 22, 2023 Between Welch State Bank as Lessor and Calhoun County as Lessee.

CERTIFICATE OF BANK ELIGIBILITY

This Certificate of Bank Eligibility is entered into and executed by the Calhoun County as Lessee, supplementing and adding to the Equipment Lease-Purchase Agreement (the "Agreement").

Lessee hereby certifies that it has not issued or effected the issuance of, and reasonably anticipates that it and its subordinate entities shall not issue or effect the issuance of, more than ten million dollars (\$10,000,000.00) of tax-exempt obligations during the 2023 calendar year and hereby designates the Agreement as a "qualified tax-exempt obligation", as defined by Section 256(b)(3) of the Internal Revenue Code of 1986, as amended.

Lessee: Calhoun County

By: 

Richard Meyer

Title: County Judge

Form **8038-G****Information Return for Tax-Exempt Governmental Bonds**

(Rev. October 2021)

▶ Under Internal Revenue Code section 149(e)

▶ See separate instructions.

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Caution: If the issue price is under \$100,000, use Form 8038-GC.

▶ Go to www.irs.gov/FS038G for instructions and the latest information.**Part I Reporting Authority**Check box if Amended Return: ☐

1. Issuer's name: Calhoun County		2. Issuer's employer identification number (EIN): 74-6001923	
3a. Name of person (other than issuer) with whom the IRS may communicate about this return (see instructions):		3b. Telephone number of other person shown on 3a:	
4. Number and street (or P.O. box if mail is not delivered to street address): 211 S. Ann Street		Room/suite:	5. Report number (For IRS Use Only): 3
6. City, town, or post office, state, and ZIP code: Port Lavaca, TX 77979		7. Date of issue: 11/22/2023	
8. Name of issue: Lease/Purchase		9. CUSIP number:	
10a. Name and title of officer or other employee of the issuer whom the IRS may call for more information: Anna Goodman, County Clerk		10b. Telephone number of officer or other employee shown on 10a: 361-553-4411	

Part II Type of Issue (Enter the issue price.) See the instructions and attach schedule.

11. Education	11
12. Health and hospital	12
13. Transportation	13
14. Public safety	14
15. Environment (including sewage bonds)	15
16. Housing	16
17. Utilities	17
18. Other: Describe ▶ Lease/Purchase	18 175,161.00
19a. If bonds are TANs or RANs, check only box 19a. ▶ ☐	
b. If bonds are BANs, check only box 19b. ▶ ☐	
20. If bonds are in the form of a lease or installment sale, check box. ▶ ☒	

Part III Description of Bonds. Complete for the entire issue for which this form is being filed.

	(a) Final maturity date	(b) Issue price	(c) Stated redemption price at maturity	(d) Weighted average maturity	(e) Yield
21	11/22/2027	\$ 175,161.00	N/A	4 years	5.81 %

Part IV Uses of Proceeds of Bond Issue (including underwriters' discount)

22. Proceeds used for accrued interest	22
23. Issue price of entire issue (enter amount from line 21, column (b))	23
24. Proceeds used for bond issuance costs (including underwriters' discount)	24
25. Proceeds used for credit enhancement	25
26. Proceeds allocated to reasonably required reserve or replacement fund	26
27. Proceeds used to refund prior tax-exempt bonds. Complete Part V	27
28. Proceeds used to refund prior taxable bonds. Complete Part V	28
29. Total (add lines 24 through 28)	29
30. Nonrefunding proceeds of the issue (subtract line 29 from line 23 and enter amount here)	30

Part V Description of Refunded Bonds. Complete this part only for refunding bonds.

31. Enter the remaining weighted average maturity of the tax-exempt bonds to be refunded ▶	years
32. Enter the remaining weighted average maturity of the taxable bonds to be refunded ▶	years
33. Enter the last date on which the refunded tax-exempt bonds will be called (MM/DD/YYYY) ▶	
34. Enter the date(s) the refunded bonds were issued ▶ (MM/DD/YYYY)	

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 63773S

Form **8038-G** (Rev. 10-2021)

Part VII Miscellaneous

- 35 Enter the amount of the state volume cap allocated to the issue under section 141(b)(5): 35
- 36a Enter the amount of gross proceeds invested or to be invested in a guaranteed investment contract (GIC). See instructions: 36a
- b Enter the final maturity date of the GIC: (MM/DD/YYYY)
- c Enter the name of the GIC provider:
- 37 Pooled financings: Enter the amount of the proceeds of this issue that are to be used to make loans to other governmental units: 37
- 38a If this issue is a loan made from the proceeds of another tax-exempt issue, check box ☐ and enter the following information:
- b Enter the date of the master pool bond: (MM/DD/YYYY)
- c Enter the EIN of the issuer of the master pool bond:
- d Enter the name of the issuer of the master pool bond:
- 39 If the issuer has designated the issue under section 265(b)(3)(B)(i)(iii) (small issuer exception), check box: ☒
- 40 If the issuer has elected to pay a penalty in lieu of arbitrage rebate, check box: ☐
- 41a If the issuer has identified a hedge, check here: ☐ and enter the following information:
- b Name of hedge provider:
- c Type of hedge:
- d Term of hedge:
- 42 If the issuer has superintegrated the hedge, check box: ☐
- 43 If the issuer has established written procedures to ensure that all nonqualified bonds of this issue are remediated according to the requirements under the Code and Regulations (see instructions), check box: ☐
- 44 If the issuer has established written procedures to monitor the requirements of section 148, check box: ☐
- 45a If some portion of the proceeds was used to reimburse expenditures, check here: ☐ and enter the amount of reimbursement:
- b Enter the date the official intent was adopted: (MM/DD/YYYY)

Signature and Consent

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that I consent to the IRS's disclosure of the issuer's return information, as necessary, to process this return, to the person that I have authorized above.



Signature of issuer's authorized representative

Date

Richard Meyer, County Judge

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name

Firm's EIN

Firm's address

Phone no.

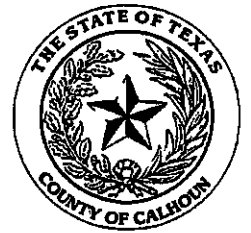
10

10. Consider and take necessary action to transfer Precinct 4 R & B asset number 24-0441, a Military Cargo Truck, to the Seadrift Fire asset list. (GDR)

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



Gary D. Reese
County Commissioner
County of Calhoun
Precinct 4



November 16, 2023

Honorable Richard Meyer
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

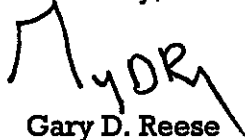
RE: AGENDA ITEM

Dear Judge Meyer:

Please place the following item on the Commissioners' Court Agenda for November 22, 2023.

- Consider and take necessary action to transfer from Precinct 4 R&B asset list to Seadrift Fire asset list, Asset No. 24-0441, Military Cargo Truck.

Sincerely,


Gary D. Reese

GDR/at

Calhoun County, Texas

DEPARTMENTAL INVENTORY TRANSFER REQUEST FORM

Requested By: Commissioner Reese

[illegible]

11

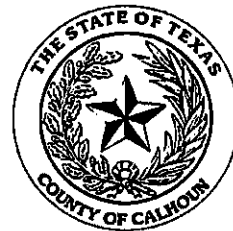
11. Consider and take necessary action to authorize the Port O'Connor Community Center Board of Directors to enter into an agreement with Lauger Companies, Inc. for the Pavilion improvements. (GDR)

pass



Gary D. Reese

*County Commissioner
County of Calhoun
Precinct 4*



November 16, 2023

Honorable Richard Meyer
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: AGENDA ITEM

Dear Judge Meyer:

Please place the following item on the Commissioners' Court Agenda for November 22, 2023.

- Consider and take necessary action to authorize the Port O'Connor Community Center Board of Directors to enter into an agreement with Lauger Companies, Inc. for the Pavilion improvements.

Sincerely,

Gary D. Reese

GDR/at



NOVEMBER 7, 2023

Port O'Connor Community Center Fund Association
PO Box 812
Port O'Connor, TX 77982

Proposal for Addition

Board of Directors,

We propose to add approximately a 16 foot addition to the existing building. This will allow for 3 new toilets on the lady's side plus one ADA toilet. We will change one toilet on the men's side to two urinals and then add one more urinal, two toilets and one ADA toilet. We propose to move the existing overhead door to the back wall of the addition. All construction will match the existing in design and finishes.

- **General Conditions:** includes supervision; demolition; general liability insurance; workers compensation insurance; truck; tools, and haul off.
- **Demolition:** Remove CMU walls, doors, toilets, and toilet partitions as required
- **Concrete:** pour new slab to match existing elevation.
- **Masonry:** install exterior split face CMU, interior install four- and eight-inch block in restrooms to match existing.
- **Carpentry:** Wood framing, partitions, countertops, roll up food service door, insulation, and gypsum board ceiling
- **Sealed concrete:** floors with epoxy paint
- **Painting:** paint walls ceilings and flooring to match existing.
- **Plumbing:** Commercial toilets, urinals, vanity sinks, 3 bay sink, bar sink.
- **Electrical:** Change fluorescent fixtures to LED in bar area

FOR A TOTAL SUM OF \$165,456.00 plus exempt from sales tax

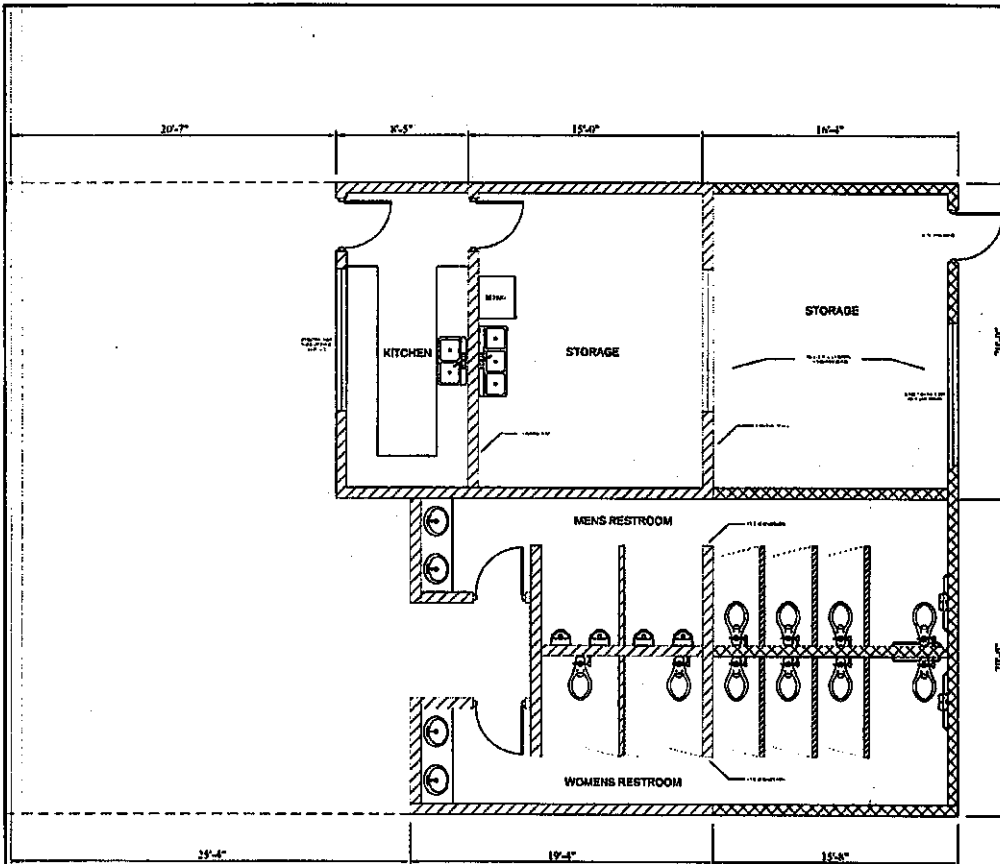
Respectfully submitted,

A handwritten signature in black ink, appearing to read "Craig Lauger".

Craig Lauger
President
Lauger Companies Inc

Accepted,

Jim Cooley, Director
for Port O'Connor Community Center Fund Association



GENERAL NOTES

Construction of ceilings, walls (interior and exterior) to match existing.
 New doors on toilet partitions to match existing.
 New hard surface on all counter tops (Kitchen and restrooms)
 Reseal existing sinks in restrooms.
 New Stainless steel Kitchen sink with new faucet.
 Block fill and paint all new walls with two coats of semi-gloss latex enamel.
 Paint all existing CMU with two coats of Semi-gloss latex enamel.
 Paint all walk doors with two coats of industrial enamel.
 Paint plywood ceilings with primer and two coats of latex semi-gloss enamel.
 Paint floors in Restrooms, Kitchen, and catering area with epoxy paint.
 Add surface mounted outlet for owner supplied Refrigerator.
 Add 2 emergency lights in restrooms.
 Add 2 exhaust fans to restrooms.
 Add 10 new 2 1/2' 4' Flat panel Led fixtures to restrooms.
 Add 4 new 8' LED strip fixtures in Storage area. Replaces two in existing.
 Replace 1 Fixture in Kitchen area with LED.
 Add 1 new 21-Watt wall pack fixture above new walk door
 (Photo-eye Control)
 Add 2 new ADA toilets. Kohler tank type
 Add 5 new Regular toilets. Kohler tank type
 Add 3 new Kohler urinals.
 Add 1 new 48" x 22" three compartment sink in catering use area.

WALL TYPES

EXISTING WALLS 
 NEW 8" SPLIT FACE CMU 
 NEW 4" CMU PARTITION 

PROJECT NO.	1000-00-0000-00
DATE	10/10/2018
PROJECT NAME	PORT COCHRANE ANNEX RESTROOM EXPANSION
PROJECT LOCATION	PORT COCHRANE, TEXAS
DESIGNER	CH2M HILL
CLIENT	U.S. ARMY CORPS OF ENGINEERS
SCALE	AS SHOWN
BY	CH2M HILL
CHECKED BY	CH2M HILL
APPROVED BY	CH2M HILL
DATE	10/10/2018
PROJECT NO.	1000-00-0000-00
DATE	10/10/2018
PROJECT NAME	PORT COCHRANE ANNEX RESTROOM EXPANSION
PROJECT LOCATION	PORT COCHRANE, TEXAS
DESIGNER	CH2M HILL
CLIENT	U.S. ARMY CORPS OF ENGINEERS
SCALE	AS SHOWN
BY	CH2M HILL
CHECKED BY	CH2M HILL
APPROVED BY	CH2M HILL
DATE	10/10/2018

12. Consider and take necessary action to extend the feasibility contract with Texas A & M AgriLife to January 31, 2024. There is no additional cost associated with this extension. (RHM)

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

12

13

13. Consider and take necessary action to name the Calhoun County EMS Director as General Contractor over the construction of the First Responder Training Facility and grant him authorization to sign on behalf of the County on items pertaining to its construction. (RHM)

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

Mae Belle Cassel

From: Dustin.Jenkins@calhouncotx.org (Dustin Jenkins) <Dustin.Jenkins@calhouncotx.org>
Sent: Friday, November 10, 2023 3:37 PM
To: Mae Belle Cassel
Subject: Fwd: RE: Mueller Quote Training Building PO

Mae Belle,

Please put an item on the next available Commissioners Court agenda to:

Consider and take necessary action to name the Calhoun County EMS Director as General Contractor over the construction of the First Responder Training Facility and grant Him authorization to sign on behalf of the County on items pertaining to its construction.

Please see forwarded email below.

Very Respectfully,

Dustin

From: "candice.villarreal@calhouncotx.org (candice villarreal)" <candice.villarreal@calhouncotx.org>
To: <Dustin.Jenkins@calhouncotx.org>
Date: Thu, 9 Nov 2023 16:57:33 -0600
Subject: RE: Mueller Quote Training Building PO

Dustin,

As we discussed, please place an agenda item through Commissioners Court naming you as General Contractor over the construction of the new training building and this will give you the authorization needed to sign off on items related to the construction. I guess similar wording would need to be part of the agenda item giving you authorization to sign for the County on all of these types of things.

Also, we do not have an "information sheet" so you can fill out the information needed.

14

14. Consider and take necessary action to authorize the EMS Director to sign the Mueller, Inc. Sales Agreement Quote #93273810. (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: Dustin.Jenkins@calhouncotx.org (Dustin Jenkins) <Dustin.Jenkins@calhouncotx.org>
Sent: Wednesday, November 15, 2023 2:37 PM
To: Mae Belle Cassel
Cc: Candice Villareal; Arnold Hayden
Subject: Commissioners Court Item
Attachments: Mueller_Quote_Updated_2023.pdf

Mae Belle,

Please add the following to the Next Commissioners Court Agenda:

Consider and take necessary action to allow the EMS Director to sign the Mueller, Inc. Sales Agreement Quote #93273810.

Very Respectfully,

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

15

15. Consider and take necessary action to authorize a loan in the amount of \$36,000 from the General Fund to the Boggy Bayou Nature Park capital fund for the CMP Cycle 26 Contract approved in Commissioners' Court of November 8, 2023. (RHM)

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

Mae Belle Cassel

From: candice.villarreal@calhouncotx.org (candice villarreal)
<candice.villarreal@calhouncotx.org>
Sent: Tuesday, November 14, 2023 1:39 PM
To: maebelle.cassel@calhouncotx.org
Cc: richard.meyer@calhouncotx.org; david.hall@calhouncotx.org;
vern.lyssy@calhouncotx.org; joel.behrens@calhouncotx.org;
gary.reese@calhouncotx.org
Subject: Agenda Item - Loan from General Fund

MaeBelle,

Please add to the next available agenda:

- Consider and take necessary action to authorize a loan in the amount of \$36,000 from the General Fund to the Boggy Bayou Nature Park capital fund for the CMP Cycle 26 Contract approved in Commissioners Court 11/8/23.

Thank you,

*Candice Villarreal
Calhoun County Auditor
Calhoun County Auditor's Office
Port Lavaca, TX 77979
Phone (361)553-4611*

Calhoun County Texas

16

16. Consider and take necessary action to declare the attached list of furniture from the Code Enforcement department as Waste. (RHM)

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

Department Name: Code Enforcement
Requested By: Nathan Lapham

Requested By:

[illegible]

17

17. Consider and take necessary action to declare the attached list of furniture from the Calhoun County Museum as Waste. (RHM)

Commissioners agreed to send furniture to auction.

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

Department Name: Museum
Requested By: Vicki Cox

[illegible]

18

18. Consider and take necessary action to declare the three (3) pickup trucks on the attached Fixed Asset List as Surplus/Salvage and remove them from the Road & Bridge Precinct 2 Fixed Asset List. (VLL)

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

Vern Lyssy

Calhoun County Commissioner, Precinct #2

5812 FM 1090
Port Lavaca, TX 77979



(361) 552-9656
Fax (361) 553-6664

November 13, 2023

Honorable Richard Meyer
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: AGENDA ITEM

Dear Judge Meyer:

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

- Consider and take necessary to Surplus/Salvage 3 pickup trucks and remove from Road & Bridge, Pct. 2 Fixed Asset List.
565-0635 - 2009 Dodge Ram 1500 (VIN 1D3HB18P19S761598, LP 134-6044),
505-0027 - 2004 Chevrolet Silverado with lift gate (VIN1GCGC24U74Z160778, LP 131-7843) and
22-0232 - 2004 Chevrolet Silverado 4X4 (VIN 2GCEK19T341149628, LP 131-7825).

Sincerely,

A handwritten signature in black ink, appearing to read "Vern Lyssy", is written over a horizontal line.

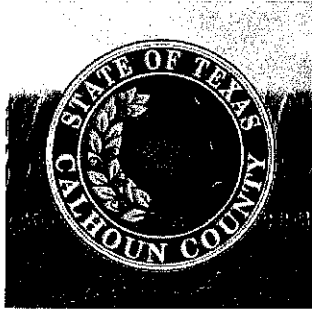
Vern Lyssy
Commissioner, Pct. 2

VL/lj

19

19. Approve the minutes of the November 8, 2023 meeting.

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

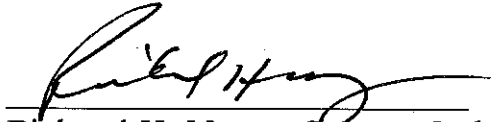


Richard H. Meyer
County Judge

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

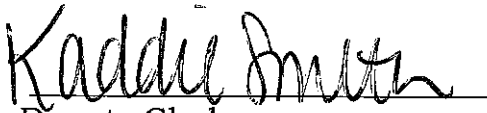
The Commissioners' Court of Calhoun County, Texas met on Wednesday,
November 8, 2023, at 10:00 a.m. in the Commissioners' Courtroom in the County
Courthouse at 211 S. Ann Street, Suite 104, Port Lavaca, Calhoun County, Texas.

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


Richard H. Meyer, County Judge
Calhoun County, Texas

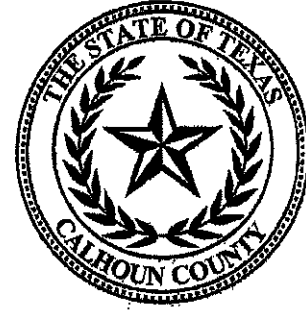
11-22-2023
Date

Anna Goodman, County Clerk


Kaddie Smith
Deputy Clerk

11-22-23
Date





November 8, 2023

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
(ABSENT) 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 10:00am by Judge Richard Meyer

2. Invocation.

Commissioner Joel Behrens

3. Pledges of Allegiance.

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

4. General Discussion of Public Matters and Public Participation.

Commissioners' welcome Candice Villarreal, Calhoun County Auditor.

5. Hear report from Memorial Medical Center.

Roshanda Thomas gave the report for September 2023.

6. Consider and take necessary action to approve the contract documents between Constar Construction and Calhoun County for the Brighton Road wooden bridges replacement and authorize all appropriate signature. (DEH)

Benny with Constar Construction explained the project.

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

7. Public Hearing regarding a Request to Vacate Tracts 1108, 1109, 1110, 1111, 1187, 1188, 1189, 1190, 1259, 1260, 1261, and 1262 in the American Townsite Subdivision as recorded in Volume Z, Page 2 of the Plat Records of Calhoun County, Texas.

Public Hearing opened at 10:18am
Terry Ruddick explained request to vacate.
Public Hearing closed at 10:20am

8. Consider and take necessary action to approve a Request to Vacate Tracts 1108, 1109, 1110, 1111, 1187, 1188, 1189, 1190, 1259, 1260, 1261, and 1262 in the American Townsite Subdivision as recorded in Volume Z, Page 2 of the Plat Records of Calhoun County, Texas. (GDR)

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

9. Consider and take necessary action to accept GLO Contract No. 24-089-000-E345, Coastal Management Program – Cycle 26 Contract (Boggy Bayou Nature Park Improvements, Phase II) and authorize the County Judge to sign all documents. (GDR)

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

10. Consider and take necessary action to authorize Commissioner Reese to fund the 40% local match of \$24,000 for the Texas GLO CMP Cycle #26 grant, Contract No. 24-089-000-E345, from the County's GOMESA funds. (GDR)

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

11. Consider and take necessary action to approve the FY 24 Field Agreement with the Texas Agrilife Extension Service – Wildlife Services for Wildlife Damage Management and Predator Control and authorize the County Judge to sign the agreement. (RHM)

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

12. Consider and take necessary action on the ballot for the election of the (5) five member Calhoun County Appraisal District Board of Directors, and authorize County Judge to sign the Resolution. (RHM)

Calhoun County Appraisal District board of Directors: W.H. Bauer Jr, Benjamin Boone, Kevin Hill, Vern Lyssy and Jessie Rodriguez.

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

13. Consider and take necessary action to approve the estimate for Constable, Precinct 1, to purchase CopSync to be compliant with state regulations to submit monthly reports to the Texas Depart of Public Safety. (RHM)

pass

14. Approve the minutes of the October 25, 2023 and November 1, 2023 meetings.

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

15. Consider and take necessary action to remove the LPR VIN 1M9U50813HD597037, purchased with OSG funds from the Sheriff's Office fixed asset records. (RHM)

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

16. Consider and take necessary action to accept insurance proceeds in the amount of \$52,908.00 to be deposited into the operating budget to purchase OSG equipment and cover the tow bill from the accident with the LPR. (RHM)

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

17. Accept Monthly Reports from the following County Offices:

- i. Floodplain Administration – October 2023
- ii. Justice of the Peace, Precinct 1 – October 2023
- iii. Justice of the Peace, Precinct 2 – October 2023
- iv. Justice of the Peace, Precinct 5 – October 2023
- v. Sheriff's Office – October 2023

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

18. 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

19. 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

SUPPLEMENTAL AGENDA

The subject matter of such meeting is as follows:

20. Consider and take necessary action to accept insurance proceeds from TAC in the amount of \$2,805.00 for damages to a Road and Bridge, Precinct #2 vehicle on September 22, 2023. (RHM)

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

21. Consider and take necessary action to approve the Final Plat of Driftwood Estates. (GDR)

Terry Ruddick explained the final plat.	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Adjourned 10:41am

20

20. Accept Monthly Report from the following County Office:

i. Justice of the Peace, Precinct 3 – October 2023

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

ENTER COURT NAME:		JUSTICE OF PEACE NO. 3
ENTER MONTH OF REPORT		OCTOBER
ENTER YEAR OF REPORT 2022		2023
CODE	AMOUNT	
CASH BONDS		
ADMINISTRATION FEE - ADMF		
BREATH ALCOHOL TESTING - BAT		
CONSOLIDATED COURT COSTS - CCC	301.01	
STATE CONSOLIDATED COURT COST- 2020	636.99	
LOCAL CONSOLIDATED COURT COST- 2020	143.84	
COURTHOUSE SECURITY - CHS	30.10	
CJP		
CIVIL JUSTICE DATA REPOSITORY FEE - CJDR	0.50	
CORRECTIONAL MANAGEMENT INSTITUTE - CMI		
CR		
CHILD SAFETY - CS		
CHILD SEATBELT FEE - CSBF		
CRIME VICTIMS COMPENSATION - CVC		
DPSC/FAILURE TO APPEAR - OMNI - DPSC	20.13	
ADMINISTRATION FEE FTA/FTP (aka OMNI)- 2020	32.24	
ELECTRONIC FILING FEE - EEF		
FUGITIVE APPREHENSION - FA		
GENERAL REVENUE - GR		
CRIM - IND LEGAL SVCS SUPPORT - IDF	15.05	
JUVENILE CRIME & DELINQUENCY - JCD		
JUVENILE CASE MANAGER FUND - JCMF	39.36	
JUSTICE COURT PERSONNEL TRAINING - JCPT		
JUROR SERVICE FEE - JSF	30.11	
LOCAL ARREST FEES - LAF	45.00	
LEMI		
LEOA		
LEOC		
OCL		
PARKS & WILDLIFE ARREST FEES - PWAF	2.62	
STATE ARREST FEES - SAF	41.37	
SCHOOL CROSSING/CHILD SAFETY FEE - SCF		
SUBTITLE C - SUBC	150.00	
STATE TRAFFIC FINES-EST 9.1.19- STF	277.06	
TABC ARREST FEES - TAF		
TECHNOLOGY FUND - TF	30.10	
TRAFFIC - TFC	15.00	
LOCAL TRAFFIC FINE- 2020	16.63	
TIME PAYMENT - TIME	13.13	
TIME PAYMENT REIMBURSEMENT FEE- 2020		
TRUANCY PREVENTION/DIVERSION FUND - TPDF	15.05	
LOCAL & STATE WARRANT FEES - WRNT	694.78	
COLLECTION SERVICE FEE-MVBA - CSRV	1,151.31	
DEFENSIVE DRIVING COURSE - DDC		
DEFERRED FEE - DFF		
DRIVING EXAM FEE - PROV DL		
FILING FEE - FFEE		
STATE CONSOLIDATED CIVIL FEE - 2022	126.00	
LOCAL CONSOLIDATED CIVIL FEE - 2022	198.00	
FILING FEE SMALL CLAIMS - FFSC		
JURY FEE - JF		
COPIES/CERTIFIED COPIES - CG		
INDIGENT FEE - CIFF or INDF		
JUDGE PAY RAISE FEE - JPAY	45.15	
SERVICE FEE - SFEE		
OUT-OF-COUNTY SERVICE FEE		
ELECTRONIC FILING FEE - EEF CV		
EXPUNGEMENT FEE - EXPG		
EXPIRED RENEWAL - EXPR		
ABSTRACT OF JUDGEMENT - AOJ		
ALL WRITS - WOP / WOE		
DPS FTA FINE - DPSF		
LOCAL FINES - FINE	2,633.64	
LICENSE & WEIGHT FEES - LWF		
PARKS & WILDLIFE FINES - PWF	50.00	
SEATBELT/UNRESTRAINED CHILD FINE - SEAT		
V- JUDICIAL & COURT PERSONNEL TRAINING-JCPT		
* OVERPAYMENT (OVER \$10) - OVER		
* OVERPAYMENT (\$10 AND LESS) - OVER		
RESTITUTION - REST		
PARKS & WILDLIFE-WATER SAFETY FINES-WSF		
MARINE SAFETY PARKS & WILDLIFE - MSO		
TOTAL ACTUAL MONEY RECEIVED	\$6,764.17	
TYPE: AMOUNT		
TOTAL WARRANT FEES	694.78	
ENTER LOCAL WARRANT FEES	228.11	RECORD ON TOTAL PAGE OF HILL COUNTRY SOFTWARE MO. REPORT
STATE WARRANT FEES	\$466.67	RECORD ON TOTAL PAGE OF HILL COUNTRY SOFTWARE MO. REPORT
DUE TO OTHERS: AMOUNT		
DUE TO CCISD - 50% of Fine on JV cases	0.00	PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT
DUE TO DA RESTITUTION FUND	0.00	PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT
REFUND OF OVERPAYMENTS	0.00	PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT
OUT-OF-COUNTY SERVICE FEE	0.00	PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT
CASH BONDS	0.00	PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT (IF REQUIRED)
TOTAL DUE TO OTHERS	\$0.00	
TREASURERS RECEIPTS FOR MONTH: AMOUNT		
CASH, CHECKS, M.O.s & CREDIT CARDS		Calculate from ACTUAL Treasurer's Receipts
TOTAL TREAS. RECEIPTS	\$0.00	

Paul H. Howard
11-22-23

MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

11/2/2023

COURT NAME: JUSTICE OF PEACE NO. 3
MONTH OF REPORT: OCTOBER
YEAR OF REPORT: 2023

ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT
CR 1000-001-45013	FINES	2,641.14
CR 1000-001-44190	SHERIFF'S FEES	681.64
ADMINISTRATIVE FEES:		
	DEFENSIVE DRIVING	0.00
	CHILD SAFETY	0.00
	TRAFFIC	31.63
	ADMINISTRATIVE FEES	32.24
	EXPUNGEMENT FEES	0.00
	MISCELLANEOUS	0.00
	TOTAL ADMINISTRATIVE FEES	63.87
CR 1000-001-44363	CONSTABLE FEES-SERVICE	0.00
CR 1000-001-44010	JP FILING FEES	0.00
CR 1000-001-44063	COPIES / CERTIFIED COPIES	0.00
CR 1000-001-44090	OVERPAYMENTS (LESS THAN \$10)	0.00
CR 1000-001-49110	TIME PAYMENT REIMBURSEMENT FEE	0.00
CR 1000-001-44322	SCHOOL CROSSING/CHILD SAFETY FEE	0.00
CR 1000-001-44145	DUE TO STATE-DRIVING EXAM FEE	0.00
CR 1000-999-20741	DUE TO STATE-SEATBELT FINES	0.00
CR 1000-999-20744	DUE TO STATE-CHILD SEATBELT FEE	0.00
CR 1000-999-20745	DUE TO STATE-OVERWEIGHT FINES	0.00
CR 1000-999-20746	DUE TO JP COLLECTIONS ATTORNEY	1,151.31
CR 1000-999-20770	TOTAL FINES, ADMIN. FEES & DUE TO STATE	\$4,537.96
CR 2670-001-44063	COURTHOUSE SECURITY FUND	\$72.92
CR 2720-001-44063	JUSTICE COURT SECURITY FUND	\$7.53
CR 2719-001-44063	JUSTICE COURT TECHNOLOGY FUND	\$71.20
CR 2699-001-44063	JUVENILE CASE MANAGER FUND	\$39.36
CR 2730-001-44063	LOCAL TRUANCY PREVENTION & DIVERSION FUND	\$51.37
CR 2669-001-44063	COUNTY JURY FUND	\$1.03
CR 2728-001-44063	JUSTICE COURT SUPPORT FUND	\$150.00
CR 2677-001-44063	COUNTY DISPUTE RESOLUTION FUND	\$30.00
CR 2725-001-44063	LANGUAGE ACCESS FUND	\$18.00
STATE ARREST FEES		
	DPS FEES	101.61
	P&W FEES	0.52
	TABC FEES	0.00
	TOTAL STATE ARREST FEES	102.13
CR 7020-999-20740	CCC-GENERAL FUND	30.10
CR 7070-999-20610	CCC-STATE	270.91
CR 7070-999-20740		
DR 7070-999-10010		301.01
CR 7072-999-20610	STATE CCC- GENERAL FUND	63.70
CR 7072-999-20740	STATE CCC- STATE	573.29
DR 7072-999-10010		636.99
CR 7860-999-20610	STF/SUBC-GENERAL FUND	7.50
CR 7860-999-20740	STF/SUBC-STATE	142.50
DR 7860-999-10010		150.00
CR 7860-999-20610	STF- EST 9/1/2019- GENERAL FUND	11.08
CR 7860-999-20740	STF- EST 9/1/2019- STATE	265.98
DR 7860-999-10010		277.06

MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

11/2/2023

COURT NAME: JUSTICE OF PEACE NO. 3
MONTH OF REPORT: OCTOBER
YEAR OF REPORT: 2023

CR 7950-999-20610	TP-GENERAL FUND	6.57
CR 7950-999-20740	TP-STATE	6.56
DR 7950-999-10010		13.13
CR 7480-999-20610	CIVIL INDIGENT LEGAL-GEN. FUND	0.00
CR 7480-999-20740	CIVIL INDIGENT LEGAL-STATE	0.00
DR 7480-999-10010		0.00
CR 7865-999-20610	CRIM-SUPP OF IND LEG SVCS-GEN FUND	1.51
CR 7865-999-20740	CRIM-SUPP OF IND LEG SVCS-STATE	13.54
DR 7865-999-10010		15.05
CR 7970-999-20610	TL/FTA-GENERAL FUND	6.71
CR 7970-999-20740	TL/FTA-STATE	13.42
DR 7970-999-10010		20.13
CR 7505-999-20610	JPAY - GENERAL FUND	4.52
CR 7505-999-20740	JPAY - STATE	40.63
DR 7505-999-10010		45.15
CR 7857-999-20610	JURY REIMB. FUND- GEN. FUND	3.01
CR 7857-999-20740	JURY REIMB. FUND- STATE	27.10
DR 7857-999-10010		30.11
CR 7856-999-20610	CIVIL JUSTICE DATA REPOS.- GEN FUND	0.05
CR 7856-999-20740	CIVIL JUSTICE DATA REPOS.- STATE	0.45
DR 7856-999-10010		0.50
CR 7502-999-20740	JUD/CRT PERSONNEL TRAINING FUND- STATE	0.00
DR 7502-999-10010		0.00
7998-999-20740	TRUANCY PREVENT/DIV FUND - STATE	7.53
7998-999-20701	JUVENILE CASE MANAGER FUND	7.53
DR 7998-999-10010		15.05
7403-999-22889	ELECTRONIC FILING FEE - CV STATE	0.00
DR 7403-999-22889		0.00
7858-999-20740	STATE CONSOLIDATED CIVIL FEE	126.00
		126.00

TOTAL (Distrib Req to Oper Acct) **\$6,711.67**

DUE TO OTHERS (Distrib Req Attchd)

CALHOUN COUNTY ISD	0.00	
DA - RESTITUTION	0.00	
REFUND OF OVERPAYMENTS	0.00	
OUT-OF-COUNTY SERVICE FI	0.00	
CASH BONDS	0.00	
PARKS & WILDLIFE FINES	42.50	
WATER SAFETY FINES	0.00	
TOTAL DUE TO OTHERS		\$42.50

TOTAL COLLECTED-ALL FUNDS **\$6,754.17**

LESS: TOTAL TREASUER'S RECEIPTS **\$0.00**

OVER/(SHORT) **(\$6,754.17)**

REVISED 02/02/2021

21

21. 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, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: AMBULANCE OPERATIONS-GENERAL DEPARTMENT NO: 290

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53980	SUPPLIES/OPERATING EXPENSES	999	NO GRANT	\$0	\$0	\$0	\$2,872	\$2,872
71650	EQUIPMENT	999	NO GRANT	\$0	\$0	\$2,872	\$0	(\$2,872)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$2,872	\$2,872	\$0

AMBULANCE OPERATIONS-GENERAL TOTAL

\$0 \$2,872 \$2,872 \$0

DEPARTMENT NAME: COUNTY TAX COLLECTOR DEPARTMENT NO: 200

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
61700	DELINQUENT TAX ATTORNEY FEES	999	NO GRANT	\$0	\$0	\$12,000	\$0	(\$12,000)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$12,000	\$0	(\$12,000)

COUNTY TAX COLLECTOR TOTAL

\$0 \$0 \$12,000 \$0 (\$12,000)

DEPARTMENT NAME: EMERGENCY MEDICAL SERVICES DEPARTMENT NO: 345

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
50815	PARAMEDIC	999	NO GRANT	\$0	\$0	\$0	\$19,500	\$19,500

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: EMERGENCY MEDICAL SERVICES DEPARTMENT NO: 345

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51540	TEMPORARY	999	NO GRANT	\$0	\$0	\$13,500	\$0	(\$13,500)
53610	BUILDING SUPPLIES/PARTS	999	NO GRANT	\$0	\$0	\$500	\$0	(\$500)
63500	MACHINE MAINTENANCE	999	NO GRANT	\$0	\$0	\$500	\$0	(\$500)
63530	MACHINERY/EQUIPMENT REPAIRS	999	NO GRANT	\$0	\$0	\$5,000	\$0	(\$5,000)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$19,500	\$19,500	\$0

EMERGENCY MEDICAL SERVICES TOTAL

\$0

\$19,500

\$19,500

\$0

\$19,500

\$19,500

\$0

\$19,500

\$19,500

\$0

\$0

DEPARTMENT NAME: INFORMATION TECHNOLOGY DEPARTMENT NO: 275

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53020	OFFICE SUPPLIES	999	NO GRANT	\$0	\$0	\$250	\$0	(\$250)
71648	EQUIPMENT-COMPUTER	999	NO GRANT	\$0	\$0	\$0	\$250	\$250
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$250	\$250	\$0

INFORMATION TECHNOLOGY TOTAL

\$0

\$0

\$250

\$0

\$250

\$250

\$0

\$250

\$250

\$0

\$0

DEPARTMENT NAME: JAIL DEPARTMENT NO: 180

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: JAIL

DEPARTMENT NO: 180

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
50615	JAILER	999	NO GRANT	\$0	\$0	\$0	\$22,614	\$22,614
51630	COMP TIME PAY	999	NO GRANT	\$0	\$0	\$2,614	\$0	(\$2,614)
53955	GROCERIES	999	NO GRANT	\$0	\$0	\$20,000	\$0	(\$20,000)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$22,614	\$22,614	\$0

JAIL TOTAL

\$0

\$22,614

\$22,614

\$0

DEPARTMENT NAME: JUSTICE OF PEACE-PRECINCT #4

DEPARTMENT NO: 480

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
50275	COURT CLERK (JP) PART-TIME	999	NO GRANT	\$0	\$0	\$0	\$615	\$615
51540	TEMPORARY	999	NO GRANT	\$0	\$0	\$615	\$0	(\$615)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$615	\$615	\$0

JUSTICE OF PEACE-PRECINCT #4 TOTAL

\$0

\$615

\$615

\$0

DEPARTMENT NAME: MUSEUM

DEPARTMENT NO: 150

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: MUSEUM

DEPARTMENT NO: 150

AMENDMENT NO: 6541 REQUESTOR: MUSEUM

AMENDMENT REASON: LINE ITEM TRANSFER TO COVER EXPENSE

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
53992	SUPPLIES-MISCELLANEOUS	999	NO GRANT	\$0	\$0	\$60	\$0		(\$60)
54020	DUES	999	NO GRANT	\$0	\$0	\$53	\$0		(\$53)
63500	MACHINE MAINTENANCE	999	NO GRANT	\$0	\$0	\$0	\$113		\$113
AMENDMENT NO 6541 TOTAL				\$0	\$0	\$113	\$113	\$0	\$0

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
66322	TRAINING-REGISTRATION FEES	999	NO GRANT	\$0	\$0	\$0	\$1,053		\$1,053
70750	CAPITAL OUTLAY	999	NO GRANT	\$0	\$0	\$1,053	\$0		(\$1,053)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$1,053	\$1,053	\$0	\$0

MUSEUM TOTAL \$0 \$0 \$1,166 \$1,166 \$0 \$0

DEPARTMENT NAME: REVENUE

DEPARTMENT NO: 1

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
41150	TAX ATTORNEY COMMISSIONS	999	NO GRANT	\$12,000	\$0	\$0	\$0		\$12,000
AMENDMENT NO 6544 TOTAL				\$12,000	\$0	\$0	\$0	\$12,000	\$12,000

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: REVENUE

DEPARTMENT NO: 1

REVENUE TOTAL	\$12,000	\$0	\$0	\$0	\$12,000
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DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1

DEPARTMENT NO: 540

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
51630	COMP TIME PAY	999	NO GRANT	\$0	\$0	\$5,381	\$0		(\$5,381)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$9,642	\$9,642	
53630	INSECTICIDES/PESTICIDES	999	NO GRANT	\$0	\$0	\$4,261	\$0		(\$4,261)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$9,642	\$9,642	\$0	\$0
ROAD AND BRIDGE-PRECINCT #1 TOTAL				\$0	\$0	\$9,642	\$9,642	\$0	\$0

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #2

DEPARTMENT NO: 550

AMENDMENT NO: 6542 REQUESTOR: COMMISSIONER PRECINCT #2

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$1,800	\$1,800	
66192	TELEPHONE SERVICES	999	NO GRANT	\$0	\$0	\$1,800	\$0		(\$1,800)
AMENDMENT NO 6542 TOTAL				\$0	\$0	\$1,800	\$1,800	\$0	\$0

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #2 DEPARTMENT NO: 550

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
51540	TEMPORARY	999	NO GRANT	\$0	\$0	\$149	\$0		(\$149)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$1,197	\$1,197	
53580	PIPE	999	NO GRANT	\$0	\$0	\$1,048	\$0		(\$1,048)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$1,197	\$1,197	\$0	\$0

ROAD AND BRIDGE-PRECINCT #2 TOTAL \$0 \$2,997 \$2,997 \$0

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #3 DEPARTMENT NO: 560

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
51540	TEMPORARY	999	NO GRANT	\$0	\$0	\$662	\$0		(\$662)
51630	COMP TIME PAY	999	NO GRANT	\$0	\$0	\$0	\$662	\$662	
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$662	\$662	\$0	\$0

ROAD AND BRIDGE-PRECINCT #3 TOTAL \$0 \$662 \$662 \$0

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #4 DEPARTMENT NO: 570

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #4 DEPARTMENT NO: 570

AMENDMENT NO: 6544 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51545	PART-TIME EMPLOYEES	999	NO GRANT	\$0	\$0	\$0	\$1,856	\$1,856
51630	COMP TIME PAY	999	NO GRANT	\$0	\$0	\$1,856	\$0	(\$1,856)
AMENDMENT NO 6544 TOTAL				\$0	\$0	\$1,856	\$1,856	\$0

ROAD AND BRIDGE-PRECINCT #4 TOTAL \$0 \$0 \$1,856 \$1,856 \$0

DEPARTMENT NAME: SHERIFF

DEPARTMENT NO: 760

AMENDMENT NO: 6543 REQUESTOR: SHERIFF

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)
51540	TEMPORARY	999	NO GRANT	\$0	\$0	\$0	\$4,000	\$4,000
51540	TEMPORARY	999	NO GRANT	\$0	\$0	\$0	\$4,747	\$4,747
51545	PART-TIME EMPLOYEES	999	NO GRANT	\$0	\$0	\$0	\$8,896	\$8,896
53210	MACHINERY PARTS/SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$500	\$500
53520	TIRES AND TUBES	999	NO GRANT	\$0	\$0	\$1,799	\$0	(\$1,799)
53540	GASOLINE/OIL/DIESEL/GREASE	999	NO GRANT	\$0	\$0	\$19,101	\$0	(\$19,101)
53915	FILM SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$200	\$200
53995	UNIFORMS	999	NO GRANT	\$0	\$0	\$0	\$2,500	\$2,500
60360	AUTOMOTIVE REPAIRS	999	NO GRANT	\$0	\$0	\$4,000	\$0	(\$4,000)
60490	BUILDING RENTAL	999	NO GRANT	\$0	\$0	\$0	\$1,799	\$1,799
63150	K-9 SERVICES / SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$2,958	\$2,958
66310	TRAINING REGISTRATION FEES/TR	999	NO GRANT	\$0	\$0	\$300	\$0	(\$300)
66316	TRAINING TRAVEL OUT OF COUNTY	999	NO GRANT	\$0	\$0	\$200	\$0	(\$200)
66498	TRAVEL OUT OF COUNTY	999	NO GRANT	\$0	\$0	\$200	\$0	(\$200)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, November 22, 2023 HEARING TYPE: REGULAR BUDGET YEAR: 2023

FUND NAME GENERAL FUND FUND NO: 1000
DEPARTMENT NAME: SHERIFF DEPARTMENT NO: 760

AMENDMENT NO: 6543 REQUESTOR: SHERIFF

AMENDMENT REASON: LINE ITEM TRANSFER

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
AMENDMENT NO 6543 TOTAL				\$0	\$0	\$25,600	\$25,600	\$0	\$0
SHERIFF TOTAL				\$0	\$0	\$25,600	\$25,600	\$0	\$0
GENERAL FUND TOTAL				\$12,000	\$0	\$99,774	\$87,774	\$0	\$0
Grand Total				\$12,000	\$0	\$99,774	\$87,774	\$0	\$0

22

22. 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 10:41am

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---- November 22, 2023

by:DC

INDIGENT HEALTHCARE FUND:

INDIGENT EXPENSES

HEB Pharmacy (Medimpact) Pharmacy Reimbursement	34.71
MMCenter (In-patient \$0/ Out-patient \$1,191.30 / ER \$0)	1,191.30
Memorial Medical Clinic	80.00

SUBTOTAL

Memorial Medical Center (Indigent Healthcare Payroll and Expenses)

Subtotal

Co-pays adjustments for October 2023
Reimbursement from Medicaid

1,306.01

4,166.67

5,472.68

(20.00)

0.00

TOTAL APPROVED INDIGENT HEALTHCARE FUND EXPENSES

5,452.68

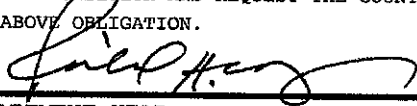
800 00000011/22/2023 01 CALHOUN COUNTY, TEXAS

DATE:

11/16/2023

VENDOR # 852

CC Indigent Health Care

ACCOUNT NUMBER	DESCRIPTION OF GOODS OR SERVICES	QUANTITY	UNIT PRICE	TOTAL PRICE
1000-800-98722-999	Transfer to pay bills for Indigent Health Care approved by Commissioners Court on 11/22/2023			\$5,452.68
1000-001-46010	October 31, 2023 Interest			(\$15.99)
				\$5,436.69
COUNTY AUDITOR APPROVAL ONLY	THE ITEMS OR SERVICES SHOWN ABOVE ARE NEEDED IN THE DISCHARGE OF MY OFFICIAL DUTIES AND I CERTIFY THAT FUNDS ARE AVAILABLE TO PAY THIS OBLIGATION. I CERTIFY THAT THE ABOVE ITEMS OR SERVICES WERE RECEIVED BY ME IN GOOD CONDITION AND REQUEST THE COUNTY TREASURER TO PAY THE ABOVE OBLIGATION.			
APPROVED ON NOV 17 2023	BY:  11/16/2023			
BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS	DEPARTMENT HEAD	DATE		

•IHS
Issued 11/09/23

Source Totals Report
Calhoun Indigent Health Care
Batch Dates 11/01/2023 through 11/01/2023
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
02	Prescription Drugs	34.71	34.71
08	Rural Health Clinics	80.00	80.00
14	Mmc - Hospital Outpatient	2,165.00	1,191.30
	Expenditures	2,287.71	1,314.01
	Reimb/Adjustments	-8.00	-8.00
	Grand Total	2,279.71	1,306.01

Expenses	4,166.67
Co-Pays	< 20.00 >
	<u>5,452.68</u>


11/10/2023

APPROVED ON

NOV 15 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

PHS

Issued 11/09/23

Source Totals Report
 Calhoun Indigent Health Care
 Batch Dates 02/01/2023 through 11/01/2023
 For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	1,795.00	89.29
01-2	Physician Services- Anesthesia	1,265.00	230.39
02	Prescription Drugs	261.63	261.63
08	Rural Health Clinics	753.00	591.62
14	Mmc - Hospital Outpatient	21,619.01	10,610.50
15	Mmc - Er Bills	7,794.00	3,511.80
	Expenditures	33,526.87	15,334.46
	Reimb/Adjustments	-39.23	-39.23
	Grand Total	33,487.64	15,295.23

Expenses 41,667.70

Co-Pays < 110.00 >

56,852.93


 11/10/23

**MEMORIAL MEDICAL CENTER
CHECK REQUEST**

P CALHOUN COUNTY INDIGENT ACCOUNT

Date Requested: 11/7/23

A

Y

E

E

APPROVED ON

NOV 13 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

G/L NUMBER: 50240000

FOR ACCT. USE ONLY

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

AMOUNT \$20.00

EXPLANATION: TO TRANSFER INDIGENT CO-PAYS FROM OPERATING ACCOUNT TO THE INDIGENT

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: 

RUN DATE: 11/07/23
TIME: 08:37

MEMORIAL MEDICAL CENTER
RECEIPTS FROM 10/01/23 TO 10/31/23

PAGE 160
RCMREP

G/L NUMBER	RECEIPT PAY DATE	NUMBER	TYPE	PAYER	CASH AMOUNT	RECEIPT AMOUNT	NUMBER	NAME	DISC DATE	COLL GL INIT CODE	CASH ACCOUNT
50240.000	10/11/23	679077	VI		10.00	10.00			00/00/00	PLB	2
50240.000	10/18/23	679843	VI		10.00	10.00			00/00/00	PLB	2
TOTAL 50240.000 COUNTY INDIGENT COPAYS						20.00					
50460.000	10/11/23	679055	CK	CENTENE MANAGEMENT	5232.12	5232.12			00/00/00	PLB	2
TOTAL 50460.000 RAPPS - OTHER REV						5232.12					
50510.000	10/02/23	677908	CA	CAFE	478.36	478.36			00/00/00	KAH	2
50510.000	10/02/23	677909	VI	CAFE	520.93	520.93			00/00/00	KAH	2
50510.000	10/02/23	677910	MC	CAFE	336.39	336.39			00/00/00	KAH	2
50510.000	10/02/23	677911	AE	CAFE	10.45	10.45			00/00/00	KAH	2
50510.000	10/02/23	677912	DS	CAFE	105.59	105.59			00/00/00	KAH	2
50510.000	10/19/23	679849	CA	CAFE	296.26	296.26			00/00/00	KAH	2
50510.000	10/19/23	679850	OT	CAFE	75.41	75.41			00/00/00	KAH	2
50510.000	10/19/23	679851	VI	CAFE	202.92	202.92			00/00/00	KAH	2
50510.000	10/19/23	679852	MC	CAFE	88.38	88.38			00/00/00	KAH	2
50510.000	10/19/23	679853	AE	CAFE	3.13	3.13			00/00/00	KAH	2
50510.000	10/19/23	679854	DS	CAFE	12.37	12.37			00/00/00	KAH	2
50510.000	10/30/23	680881	CA	CAFE	325.65	325.65			00/00/00	KAH	2
50510.000	10/30/23	680882	OT	CAFE	44.57	44.57			00/00/00	KAH	2
50510.000	10/30/23	680883	VI	CAFE	574.04	574.04			00/00/00	KAH	2
50510.000	10/30/23	680884	MC	CAFE	121.94	121.94			00/00/00	KAH	2
50510.000	10/30/23	680885	AE	CAFE	11.89	11.89			00/00/00	KAH	2
50510.000	10/30/23	680886	DS	CAFE	64.01	64.01			00/00/00	KAH	2
50510.000	10/03/23	678096	VI	CAFE	276.80	276.80			00/00/00	PLB	2
50510.000	10/03/23	678097	MC	CAFE	167.71	167.71			00/00/00	PLB	2
50510.000	10/03/23	678098	DS	CAFE	11.89	11.89			00/00/00	PLB	2
50510.000	10/03/23	678099	OT	CAFE	38.17	38.17			00/00/00	PLB	2
50510.000	10/03/23	678100	CA	CAFE	292.06	292.06			00/00/00	PLB	2
50510.000	10/04/23	678242	VI	CAFE	306.37	306.37			00/00/00	PLB	2
50510.000	10/04/23	678243	MC	CAFE	186.83	186.83			00/00/00	PLB	2
50510.000	10/04/23	678244	AE	CAFE	16.92	16.92			00/00/00	PLB	2
50510.000	10/04/23	678245	DS	CAFE	34.56	34.56			00/00/00	PLB	2
50510.000	10/04/23	678246	OT	CAFE	176.38	176.38			00/00/00	PLB	2
50510.000	10/04/23	678247	CA	CAFE	362.03	362.03			00/00/00	PLB	2
50510.000	10/04/23	678251	VI	CAFE	306.37-	306.37-			00/00/00	PLB	2
50510.000	10/04/23	678252	MC	CAFE	186.83-	186.83-			00/00/00	PLB	2
50510.000	10/04/23	678253	AE	CAFE	16.92-	16.92-			00/00/00	PLB	2
50510.000	10/04/23	678254	DS	CAFE	34.56-	34.56-			00/00/00	PLB	2
50510.000	10/04/23	678255	OT	CAFE	176.38-	176.38-			00/00/00	PLB	2
50510.000	10/04/23	678256	CA	CAFE	362.03-	362.03-			00/00/00	PLB	2
50510.000	10/04/23	678258	VI	CAFE	306.37	306.37			00/00/00	PLB	2
50510.000	10/04/23	678259	MC	CAFE	186.83	186.83			00/00/00	PLB	2
50510.000	10/04/23	678260	AE	CAFE	16.92	16.92			00/00/00	PLB	2
50510.000	10/04/23	678261	DS	CAFE	34.56	34.56			00/00/00	PLB	2
50510.000	10/04/23	678262	OT	CAFE	176.38	176.38			00/00/00	PLB	2
50510.000	10/04/23	678263	CA	CAFE	343.68	343.68			00/00/00	PLB	2
50510.000	10/05/23	678428	VI	CAFE	328.25	328.25			00/00/00	PLB	2
50510.000	10/05/23	678429	MC	CAFE	258.14	258.14			00/00/00	PLB	2
50510.000	10/05/23	678430	DS	CAFE	49.04	49.04			00/00/00	PLB	2
50510.000	10/05/23	678431	OT	CAFE	165.58	165.58			00/00/00	PLB	2

MEMORIAL MEDICAL CENTER

So Much... So Close!

815 N. Virginia St. Port Lavaca, Texas 77979 (361) 552-6713

Date: 11/7/2023

Invoice # 389

For: Oct-23

Bill To:

Calhoun County

DESCRIPTION	AMOUNT
Funds to cover indigent program operating expenses.	\$ 4,166.67

Total \$ 4,166.67

 11/7/23

Andrew De Los Santos
Controller

APPROVED ON

NOV 15 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Calhoun County Indigent Care Patient Caseload 2023

	Approved	Denied	Removed	Active	Pending
January	0	0	0	1	7
February	2	0	1	2	6
March	0	5	0	2	5
April	2	1	0	4	5
May	1	6	1	4	3
June	0	2	2	3	4
July	0	3	0	3	6
August	1	1	0	4	6
September	0	2	0	4	8
October	0	8	0	4	4
November					
December					
YTD	6	28	4	31	54

Monthly Avg 1 3 0 3 5

December 2022 Active 1

Number of Charity patients 218

Number of Charity patients below 50% FPL 124

Number of Charity patients who meet State Indigent Guidelines 115

Calhoun County Pharmacy Assistance Patient Caseload 2023

	Approved	Refills	Removed	Active	Value
January	0	2	0	5	\$1,667.46
February	0	21	0	14	\$14,786.76
March	1	3	0	16	\$2,460.00
April	3	12	0	22	\$11,674.00
May	1	3	0	24	\$2,954.67
June	2	9	0	29	\$5,673.30
July	3	11	0	29	\$6,159.99
August	1	3	0	29	\$2,445.75
September	5	4	0	32	\$2,954.67
October	0	0	0	33	\$0.00
November					
December					
YTD PATIENT SAVINGS					\$50,776.60

Monthly Avg 2 7 - 23 \$5,077.66

December 2022 Active 55



PROSPERITY BANK®

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

Statement Date 10/31/2023
Account No ****4551
Page 1 of 2

13435

STATEMENT SUMMARY

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

10/01/2023	Beginning Balance		\$12,534.91
	3 Deposits/Other Credits	+	\$75.99
	0 Checks/Other Debits	-	\$0.00
10/31/2023	Ending Balance	31	Days in Statement Period
	Total Enclosures		2

DEPOSITS/OTHER CREDITS

Date	Description	Amount	
10/19/2023	Deposit	\$10.00	Aug/Sept copays
10/25/2023	Deposit	\$50.00	Sept/Oct copays
10/31/2023	Accr Earning Pymt Added to Account	\$15.99	

DAILY ENDING BALANCE

Date	Balance	Date	Balance
10-01	\$12,534.91	10-25	\$12,594.91
10-19	\$12,544.91	10-31	\$12,610.90

EARNINGS SUMMARY

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

Interest Paid This Period	\$15.99	Annual Percentage Yield Earned	1.51 %
Interest Paid YTD	\$54.11	Days in Earnings Period	31
		Earnings Balance	\$12,550.39

MEMBER FDIC



NYSE Symbol "PB"

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101201 : 01343501

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR --November 22, 2023

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 929,300.85	✓
TOTAL TRANSFERS BETWEEN FUNDS	\$ 147,968.32	✓
TOTAL NURSING HOME UPL EXPENSES	\$ 1,021,034.73	✓
TOTAL INTER-GOVERNMENT TRANSFERS	\$ 71,899.00	✓
GRAND TOTAL DISBURSEMENTS APPROVED November 22, 2023	\$ 2,170,202.90	✓

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---November 22, 2023

PAYABLES AND PAYROLL

11/16/2023 Weekly Payables	389,913.63	
11/20/2023 Citibank Credit Card-see attached	2,583.06	
11/20/2023 McKesson-340B Prescription Expense	12,898.53	
11/20/2023 Amerisource Bergen-340B Prescription Expense	1,463.18	
11/20/2023 Payroll Liabilities -Payroll Taxes	124,911.66	
11/20/2023 Payroll	396,868.60	
Prosperity Electronic Bank Payments		
11/15/2023 Credit Card & Lease Fees	285.82	
11/13/2023 Debt Management Services-wage garnishment	175.45	
11/13-11/17/23 Pay Plus-Patient Claims Processing Fee	220.92	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS		\$ 929,300.85

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

11/16/2023 MMC Operating to Crescent-correction of NH insurance payment deposited into MMC Operating in error	4,140.00	
11/16/2023 MMC Operating to Golden Creek-correction of NH insurance payment deposited into MMC Operating in error	91,669.32	
11/16/2023 MMC Operating to Gulf Pointe Plaza -correction of NH insurance payment deposited into MMC Operating	1,754.56	
11/16/2023 MMC Operating to Tuscany Village-correction of NH insurance payment deposited into MMC Operating	2,400.00	
11/16/2023 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating	48,004.44	
TOTAL TRANSFERS BETWEEN FUNDS		\$ 147,968.32

NURSING HOME UPL EXPENSES

11/20/2023 Nursing Home UPL-Cantex Transfer	388,391.09
11/20/2023 Nursing Home UPL-Nexion Transfer	125,805.20
11/20/2023 Nursing Home UPL-HMG Transfer	6,923.17
11/20/2023 Nursing Home UPL-Tuscany Transfer	79,227.23
11/20/2023 Nursing Home UPL-HSL Transfer	184,944.73

NURSING HOME BANK FEES

11/15/2023 Ashford-Enhanced analysis fee	74.25
11/15/2023 Solera-Enhanced analysis fee	83.08

Nursing Home Electronic Bank Payments

11/15/2023 Golden Creek-returned check payment for resident	1,592.00
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QIPP CHECKS TO MMC

11/20/2023 Ashford	29,091.86
11/20/2023 Broadmoor	13,475.07
11/20/2023 Crescent	11,236.79
11/20/2023 Fort Bend	14,013.23
11/20/2023 Solera	8,726.73
11/20/2023 Golden Creek	55,556.43
11/20/2023 Tuscany	39,271.62
11/20/2023 Bethany	40,122.25

TRANSFER OF FUNDS BETWEEN NURSING HOMES

11/20/2023 Crescent to Tuscany -Tuscany insurance payment deposited into Crescent in error	22,500.00
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TOTAL NURSING HOME UPL EXPENSES **\$ 1,021,034.73**

INTER-GOVERNMENT TRANSFERS

11/20/2023 IGT CHRIP to be paid November 17, 2023	71,899.00	
TOTAL INTER-GOVERNMENT TRANSFERS		\$ 71,899.00

GRAND TOTAL DISBURSEMENTS APPROVED November 22, 2023 **\$ 2,170,202.90**

RECEIVED BY THE
COUNTY AUDITOR ON

NOV 16 2023

11/16/2023

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 12/08/2023

0

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

11283 ACE HARDWARE 15521 ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
093023		11/16/20	09/30/20	10/25/20		1,350.81	0.00	0.00	1,350.81 ✓

SUPPLIES

103123		11/16/20	10/31/20	11/25/20		1,297.91	0.00	0.00	1,297.91 ✓
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SUPPLIES

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
11283	ACE HARDWARE 15521	2,648.72	0.00	0.00	2,648.72	

Vendor# Vendor Name

Class Pay Code

A1680 AIRGAS USA, LLC - CENTRAL DIV ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
5503364413 ✓		11/15/20	10/31/20	11/25/20		561.27	0.00	0.00	561.27 ✓

OXYGEN

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS USA, LLC - CENTRAL DIV	561.27	0.00	0.00	561.27	

Vendor# Vendor Name

Class Pay Code

A1705 ALIMED INC. ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
RPSV04120289 ✓		11/15/20	11/03/20	11/18/20		191.07	0.00	0.00	191.07 ✓

SUPPLIES

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
A1705	ALIMED INC.	191.07	0.00	0.00	191.07	

Vendor# Vendor Name

Class Pay Code

14028 AMAZON CAPITAL SERVICES ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1TYD-MT1Q-FQ8N ✓		11/15/20	11/01/20	12/01/20		123.92	0.00	0.00	123.92 ✓

SUPPLIES

1FHX-W6V4-L4QL ✓		11/15/20	11/02/20	12/02/20		267.55	0.00	0.00	267.55 ✓
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SUPPLIES

1DVN-G9QC-19LG ✓		11/15/20	11/02/20	12/02/20		278.21	0.00	0.00	278.21 ✓
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SUPPLIES

1PHM-QDFK-YHD3 ✓		11/15/20	11/14/20	12/05/20		185.13	0.00	0.00	185.13 ✓
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SUPPLIES

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
14028	AMAZON CAPITAL SERVICES	854.81	0.00	0.00	854.81	

Vendor# Vendor Name

Class Pay Code

11632 AMERICAN CONSTRUCTION ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1209 ✓		11/15/20	11/09/20	11/10/20		1,260.00	0.00	0.00	1,260.00 ✓

FAN MOTOR

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
11632	AMERICAN CONSTRUCTION	1,260.00	0.00	0.00	1,260.00	

Vendor# Vendor Name

Class Pay Code

A2150 ANNOUNCEMENTS PLUS TOO AGAIN ✓

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
4531 ✓		11/14/20	04/14/20	04/24/20		10.00	0.00	0.00	10.00 ✓

STICKERS

Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		A2150	ANNOUNCEMENTS PLUS TOO AGAIN				10.00	0.00	0.00	10.00
Vendor#	Vendor Name		Class	Pay Code						
11756	AYA HEALTHCARE INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
3683242 ✓		11/15/20	11/09/20	12/05/20		2,976.75	0.00	0.00	2,976.75	✓
KARIANN DUNN 10/27-10/29/23)										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		11756	AYA HEALTHCARE INC				2,976.75	0.00	0.00	2,976.75
Vendor#	Vendor Name		Class	Pay Code						
B1150	BAXTER HEALTHCARE ✓		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
80717708 ✓		11/15/20	10/16/20	11/10/20		43.84	0.00	0.00	43.84	✓
SUPPLIES										
80736112 ✓		11/15/20	10/17/20	11/11/20		983.56	0.00	0.00	983.56	✓
SUPPLIES										
80758397 ✓		11/15/20	10/19/20	11/13/20		235.52	0.00	0.00	235.52	✓
SUPPLIES										
80794860 ✓		11/15/20	10/24/20	11/18/20		521.43	0.00	0.00	521.43	✓
SUPPLIES										
80825557 ✓		11/15/20	10/26/20	11/20/20		305.27	0.00	0.00	305.27	✓
SUPPLIES										
80881706 ✓		11/15/20	11/01/20	11/26/20		631.20	0.00	0.00	631.20	✓
SPECTRUM										
80878172 ✓		11/15/20	11/01/20	11/26/20		3,071.40	0.00	0.00	3,071.40	✓
PUMPS										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		B1150	BAXTER HEALTHCARE				5,792.22	0.00	0.00	5,792.22
Vendor#	Vendor Name		Class	Pay Code						
M2485	BAYER HEALTHCARE ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
6010900731 ✓		11/15/20	10/30/20	11/15/20		828.06	0.00	0.00	828.06	✓
SUPPLIES										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net
		M2485	BAYER HEALTHCARE				828.06	0.00	0.00	828.06
Vendor#	Vendor Name		Class	Pay Code						
B1220	BECKMAN COULTER INC ✓		M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
7350042 ✓		11/15/20	11/01/20	11/26/20		8,703.99	0.00	0.00	8,703.99	✓
METER BILLING										
110954028 ✓		11/15/20	11/01/20	11/26/20		2,670.27	0.00	0.00	2,670.27	✓
SUPPLIES										
110953200 ✓		11/15/20	11/01/20	11/26/20		203.27	0.00	0.00	203.27	✓
SUPPLIES										
110955337 ✓		11/15/20	11/02/20	11/27/20		8,899.91	0.00	0.00	8,899.91	✓
SUPPLIES										
110960289 ✓		11/15/20	11/06/20	12/01/20		7,510.54	0.00	0.00	7,510.54	✓
SUPPLIES										
110959835 ✓		11/15/20	11/06/20	12/01/20		4,470.76	0.00	0.00	4,470.76	✓
CONTRACT										
Vendor Totals		Number	Name				Gross	Discount	No-Pay	Net

	B1220	BECKMAN COULTER INC				32,458.74	0.00	0.00	32,458.74
Vendor#	Vendor Name		Class	Pay Code					
14753	BIOMERIEUX, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
1213127730 ✓		11/15/20	10/24/20	11/24/20		7,969.44	0.00	0.00	7,969.44 ✓
	SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	14753	BIOMERIEUX, INC				7,969.44	0.00	0.00	7,969.44
Vendor#	Vendor Name		Class	Pay Code					
C1325	CARDINAL HEALTH 414, INC. ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
8003346287 ✓		11/15/20	11/01/20	11/26/20		666.24	0.00	0.00	666.24 ✓
	SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C1325	CARDINAL HEALTH 414, INC.				666.24	0.00	0.00	666.24
Vendor#	Vendor Name		Class	Pay Code					
14236	CARRIER CORPORATION ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
90320146 ✓		10/31/20	10/30/20	11/30/20		12,830.00	0.00	0.00	12,830.00 ✓
	CHILLER 8/14-9/10								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	14236	CARRIER CORPORATION				12,830.00	0.00	0.00	12,830.00
Vendor#	Vendor Name		Class	Pay Code					
C1992	CDW GOVERNMENT, INC. ✓		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
MV30593 ✓		11/15/20	10/31/20	11/30/20		111.01	0.00	0.00	111.01 ✓
	SUPPLIES								
MW15711 ✓		11/15/20	11/02/20	12/02/20		254.44	0.00	0.00	254.44 ✓
	SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C1992	CDW GOVERNMENT, INC.				365.45	0.00	0.00	365.45
Vendor#	Vendor Name		Class	Pay Code					
C1600	CITIZENS MEDICAL CENTER ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2023-14 ✓		10/31/20	10/31/20	12/02/20		51,817.95	0.00	0.00	51,817.95 ✓
	CRNA OCT 23 COVERAGE (10/11-10/31/23)								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C1600	CITIZENS MEDICAL CENTER				51,817.95	0.00	0.00	51,817.95
Vendor#	Vendor Name		Class	Pay Code					
C1970	CONMED CORPORATION ✓		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
10391836 ✓		11/15/20	11/06/20	12/06/20		107.53	0.00	0.00	107.53 ✓
	SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net
	C1970	CONMED CORPORATION				107.53	0.00	0.00	107.53
Vendor#	Vendor Name		Class	Pay Code					
L1430	CONMED LINVATEC ✓		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
4268307 ✓		11/01/20	10/16/20	11/01/20		95.04	0.00	0.00	95.04 ✓
	SUPPLIES								
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net

	L1430	CONMED LINVATEC				95.04	0.00	0.00	95.04
Vendor#	Vendor Name		Class	Pay Code					
14400	CULINARY CONCESSIONS LLC ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	INV00000977 ✓		11/14/20	10/31/20	11/30/20	34,383.92	0.00	0.00	34,383.92 ✓
	CONTRACT FEES								
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
	14400	CULINARY CONCESSIONS LLC				34,383.92	0.00	0.00	34,383.92
Vendor#	Vendor Name		Class	Pay Code					
10060	DETAR HOSPITAL ✓		ICP						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	DTR2308019 ✓		11/15/20	09/01/20	10/01/20	510.70	0.00	0.00	510.70 ✓
	LAB SERV								
	093023		11/15/20	09/30/20	10/30/20	646.37	0.00	0.00	646.37 ✓
	LAB SERV								
	DTR2310019 ✓		11/15/20	11/13/20	12/01/20	33.27	0.00	0.00	33.27 ✓
	LAB SERV								
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
	10060	DETAR HOSPITAL				1,190.34	0.00	0.00	1,190.34
Vendor#	Vendor Name		Class	Pay Code					
10368	DEWITT POTH & SON ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	735521-0 ✓		11/15/20	11/02/20	11/27/20	157.56	0.00	0.00	157.56 ✓
	SUPPLIES								
	736232-0 ✓		11/15/20	11/07/20	12/02/20	454.32	0.00	0.00	454.32 ✓
	SUPPLIES								
	736389-0 ✓		11/15/20	11/09/20	12/01/20	18.01	0.00	0.00	18.01 ✓
	SUPPLIES								
	736232-1 ✓		11/15/20	11/09/20	12/04/20	5.05	0.00	0.00	5.05 ✓
	SUPPLIES								
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON				634.94	0.00	0.00	634.94
Vendor#	Vendor Name		Class	Pay Code					
11284	EMERGENCY STAFFING SOLUTIONS ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	42701 ✓		11/15/20	11/15/20	11/25/20	40,062.50	0.00	0.00	40,062.50 ✓
	PHYSICIAN SERV (1-15th)								
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
	11284	EMERGENCY STAFFING SOLUTIONS				40,062.50	0.00	0.00	40,062.50
Vendor#	Vendor Name		Class	Pay Code					
14708	EQUALIZE RCM SERVICES ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net
	533314 ✓		11/15/20	11/01/20	12/01/20	5,500.00	0.00	0.00	5,500.00 ✓
	KPI NOV 23 AR FEE/REVENUE								
	533315 ✓		11/15/20	11/01/20	12/01/20	2,052.00	0.00	0.00	2,052.00 ✓
	AR PERSONNELL FEE OCT 23								
	Vendor Totals	Number Name				Gross	Discount	No-Pay	Net
	14708	EQUALIZE RCM SERVICES				7,552.00	0.00	0.00	7,552.00
Vendor#	Vendor Name		Class	Pay Code					
11944	EQUIFAX WORKFORCE SOLUTIONS ✓								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross	Discount	No-Pay	Net

2057928462 ✓	11/15/20	11/08/20	12/01/20	10.99	0.00	0.00	10.99 ✓		
CREDIT REPORTING									
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
11944	EQUIFAX WORKFORCE SOLUTIONS			10.99	0.00	0.00	10.99		
Vendor#	Vendor Name	Class	Pay Code						
T0383	ERIN CLEVINGER ✓	W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
110923		11/14/20	11/09/20	11/20/20		37.20	0.00	0.00	37.20 ✓
TRAVEL/ADVISORY COMMITTEE 11/9/23									
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
T0383	ERIN CLEVINGER			37.20	0.00	0.00	37.20		
Vendor#	Vendor Name	Class	Pay Code						
C2510	EVIDENT ✓	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
A2311061378 ✓		11/15/20	11/06/20	11/07/20		18,757.00	0.00	0.00	18,757.00 ✓
SOFTWARE SUPPORT/MONTH									
T2311081378 ✓		11/15/20	11/08/20	11/09/20		10,799.49	0.00	0.00	10,799.49 ✓
CODING/BUSINESS SERV									
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
C2510	EVIDENT			29,556.49	0.00	0.00	29,556.49		
Vendor#	Vendor Name	Class	Pay Code						
10889	FASTHEALTH CORPORATION ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
11A23MMC ✓		11/15/20	11/01/20	11/16/20		545.00	0.00	0.00	545.00 ✓
WEBSITE									
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
10889	FASTHEALTH CORPORATION			545.00	0.00	0.00	545.00		
Vendor#	Vendor Name	Class	Pay Code						
F1100	FEDERAL EXPRESS CORP. ✓	W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
8-290-90565 ✓		11/14/20	10/19/20	11/13/20		15.77	0.00	0.00	15.77 ✓
FREIGHT									
8-297-80975 ✓		11/14/20	10/26/20	11/20/20		27.29	0.00	0.00	27.29 ✓
FREIGHT									
8-304-94284 ✓		11/14/20	11/02/20	11/27/20		22.81	0.00	0.00	22.81 ✓
FREIGHT									
8-276-80102 ✓		11/16/20	10/05/20	10/30/20		66.82	0.00	0.00	66.82 ✓
FREIGHT									
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
F1100	FEDERAL EXPRESS CORP.			132.69	0.00	0.00	132.69		
Vendor#	Vendor Name	Class	Pay Code						
13496	FERGUSON ENTERPRISE LLC #61 ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
1238807-1 ✓		11/01/20	11/29/20	12/29/20		29.22	0.00	0.00	29.22 ✓
SUPPLIES									
Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net		
13496	FERGUSON ENTERPRISE LLC #61			29.22	0.00	0.00	29.22		
Vendor#	Vendor Name	Class	Pay Code						
10003	FILTER TECHNOLOGY CO, INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
119806 ✓		11/01/20	10/09/20	11/08/20		1,346.17	0.00	0.00	1,346.17 ✓

SUPPLIES

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
10003	FILTER TECHNOLOGY CO, INC			1,346.17	0.00	0.00	1,346.17

Vendor#	Vendor Name	Class	Pay Code
F1403	FISHER & PAYKEL HEALTHCARE ✓	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
92294125 ✓		11/15/20	11/09/20	12/01/20		62.40	0.00	0.00	62.40 ✓

SUPPLIES

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
F1403	FISHER & PAYKEL HEALTHCARE			62.40	0.00	0.00	62.40

Vendor#	Vendor Name	Class	Pay Code
11183	FRONTIER ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
110223		11/15/20	11/02/20	11/27/20		1,218.24	0.00	0.00	1,218.24 ✓

PHONE

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
11183	FRONTIER			1,218.24	0.00	0.00	1,218.24

Vendor#	Vendor Name	Class	Pay Code
12404	GE PRECISION HEALTHCARE, LLC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
6002527848 ✓		11/14/20	11/01/20	12/01/20		3,588.58	0.00	0.00	3,588.58 ✓

IMAGING CONTRACT

6002527849 ✓		11/14/20	11/01/20	12/01/20		86.67	0.00	0.00	86.67 ✓
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IMAGING CONTRACT

6002527850 ✓		11/14/20	11/01/20	12/01/20		2,422.50	0.00	0.00	2,422.50 ✓
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IMAGING CONTRACT

6002527851 ✓		11/14/20	11/01/20	12/01/20		61.67	0.00	0.00	61.67 ✓
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IMAGING CONTRACT

6002527865 ✓		11/14/20	11/01/20	12/01/20		5,665.83	0.00	0.00	5,665.83 ✓
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IMAGING CONTRACT

6002527960 ✓		11/14/20	11/01/20	12/01/20		810.28	0.00	0.00	810.28 ✓
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IMAGING CONTRACT

6002528132 ✓		11/15/20	11/01/20	12/01/20		204.83	0.00	0.00	204.83 ✓
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MEDRAD

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
12404	GE PRECISION HEALTHCARE, LLC			12,840.36	0.00	0.00	12,840.36

Vendor#	Vendor Name	Class	Pay Code
10653	GLOBAL EQUIPMENT CO. INC. ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
121185281 ✓		11/15/20	11/09/20	12/05/20		242.99	0.00	0.00	242.99 ✓

SUPPLIES

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
10653	GLOBAL EQUIPMENT CO. INC.			242.99	0.00	0.00	242.99

Vendor#	Vendor Name	Class	Pay Code
12948	GREAT AMERICA FINANCIAL SVCS ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
35211634 ✓		11/15/20	11/01/20	11/30/20		10,473.26	0.00	0.00	10,473.26 ✓

COPIER LEASE

Vendor#	Vendor Name	Class	Pay Code	Gross	Discount	No-Pay	Net
12948	GREAT AMERICA FINANCIAL SVCS			10,473.26	0.00	0.00	10,473.26

Vendor#	Vendor Name	Class	Pay Code
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G1210	GULF COAST PAPER COMPANY ✓					M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
2466237 ✓		11/15/20	11/07/20	12/01/20		72.38	0.00	0.00	72.38 ✓		
	SUPPLIES										
2466244 ✓		11/15/20	11/07/20	12/01/20		793.93	0.00	0.00	793.93 ✓		
	SUPPLIES										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		G1210	GULF COAST PAPER COMPANY			866.31	0.00	0.00	866.31		
Vendor#	Vendor Name				Class	Pay Code					
10804	HEALTHCARE CODING & CONSULTING ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
14427 ✓		11/15/20	10/31/20	11/30/20		437.00	0.00	0.00	437.00 ✓		
	OCT 23 CHARTS										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		10804	HEALTHCARE CODING & CONSULTING			437.00	0.00	0.00	437.00		
Vendor#	Vendor Name				Class	Pay Code					
11552	HEALTHCARE FINANCIAL SERVICES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
100816851 ✓		11/14/20	10/27/20	12/01/20		4,610.52	0.00	0.00	4,610.52 ✓		
	LEASE										
100820337 ✓		11/16/20	11/06/20	12/01/20		1,797.44	0.00	0.00	1,797.44 ✓		
	LEASE										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		11552	HEALTHCARE FINANCIAL SERVICES			6,407.96	0.00	0.00	6,407.96		
Vendor#	Vendor Name				Class	Pay Code					
H1227	HEALTHSURE INSURANCE SERVICES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
4442 ✓		11/15/20	11/09/20	12/01/20		500.00	0.00	0.00	500.00 ✓		
	BOND RENEWAL										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		H1227	HEALTHSURE INSURANCE SERVICES			500.00	0.00	0.00	500.00		
Vendor#	Vendor Name				Class	Pay Code					
H1269	HENRY SCHEIN INC. ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
61234997 ✓		11/15/20	11/09/20	12/05/20		34.13	0.00	0.00	34.13 ✓		
	SUPPLIES										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		H1269	HENRY SCHEIN INC.			34.13	0.00	0.00	34.13		
Vendor#	Vendor Name				Class	Pay Code					
H0416	HOLOGIC INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
10725903 ✓		11/15/20	10/31/20	12/05/20		472.50	0.00	0.00	472.50 ✓		
	SUPPLIES										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		
		H0416	HOLOGIC INC			472.50	0.00	0.00	472.50		
Vendor#	Vendor Name				Class	Pay Code					
10922	HUNTER PHARMACY SERVICES ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
5719 ✓		11/14/20	10/31/20	11/20/20		14,738.75	0.00	0.00	14,738.75 ✓		
	PHARMACIST SALARY										
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net		

10922	HUNTER PHARMACY SERVICES					14,738.75	0.00	0.00	14,738.75
Vendor#	Vendor Name	Class	Pay Code						
14976	INOVALON PROVIDER INC. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
23M-0159676 ✓		11/16/20	11/03/20	12/03/20		701.84	0.00	0.00	701.84 ✓
	SCHEDULING								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
14976	INOVALON PROVIDER INC.					701.84	0.00	0.00	701.84
Vendor#	Vendor Name	Class	Pay Code						
L0700	LABCORP OF AMERICA HOLDINGS ✓	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
78234391 ✓		11/14/20	10/28/20	11/22/20		48.30	0.00	0.00	48.30 ✓
	LAB SERV								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
L0700	LABCORP OF AMERICA HOLDINGS					48.30	0.00	0.00	48.30
Vendor#	Vendor Name	Class	Pay Code						
15068	LRS HEALTHCARE ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
642084 ✓		10/24/20	10/20/20	12/04/20		3,078.00	0.00	0.00	3,078.00 ✓
	DELICIA M. GARCIA Radiology Technologist 10/16-10/17/23								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
15068	LRS HEALTHCARE					3,078.00	0.00	0.00	3,078.00
Vendor#	Vendor Name	Class	Pay Code						
11141	MEDICAL DATA SYSTEMS, INC. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
186479 ✓		11/15/20	10/31/20	11/25/20		105.24	0.00	0.00	105.24 ✓
	COLLECTION FEES								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
11141	MEDICAL DATA SYSTEMS, INC.					105.24	0.00	0.00	105.24
Vendor#	Vendor Name	Class	Pay Code						
12588	MEDICAL TECHNOLOGY ASSOCIATES ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV-223460 ✓		11/01/20	09/12/20	10/07/20		1,467.75	0.00	0.00	1,467.75 ✓
	MAINT/VACUUM SYSTEM								
Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
12588	MEDICAL TECHNOLOGY ASSOCIATES					1,467.75	0.00	0.00	1,467.75
Vendor#	Vendor Name	Class	Pay Code						
M2470	MEDLINE INDUSTRIES INC ✓	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
2285496181 ✓		11/01/20	09/20/20	10/29/20		128.92	0.00	0.00	128.92 ✓
	SUPPLIES								
2293051672 ✓		11/15/20	11/06/19	12/01/19		-282.79	0.00	0.00	-282.79 ✓
	CREDIT								
2292162011 ✓		11/15/20	10/31/20	11/25/20		142.68	0.00	0.00	142.68 ✓
	SUPPLIES								
2292162012 ✓		11/15/20	10/31/20	11/25/20		29.99	0.00	0.00	29.99 ✓
	SUPPLIES 6.12 supplies / 23.87 Freight								
2292162013 ✓		11/15/20	10/31/20	11/25/20		59.48	0.00	0.00	59.48 ✓
	SUPPLIES 37.67 supplies / 21.81 Freight								
2292345230 ✓		11/15/20	11/01/20	11/26/20		193.98	0.00	0.00	193.98 ✓
	SUPPLIES								

2292345232 ✓	11/15/20 11/01/20 11/26/20	33.17	0.00	0.00	33.17 ✓
SUPPLIES	5.68 Supplies / 27.57 Freight				
2292345234 ✓	11/15/20 11/01/20 11/26/20	24.50	0.00	0.00	24.50 ✓
SUPPLIES					
2292345237 ✓	11/15/20 11/01/20 11/26/20	6,630.19	0.00	0.00	6,630.19 ✓
SUPPLIES					
2292345238 ✓	11/15/20 11/01/20 11/26/20	242.31	0.00	0.00	242.31 ✓
SUPPLIES	142.95 Supplies / 99.46 Freight				
2292345228 ✓	11/15/20 11/01/20 11/26/20	68.68	0.00	0.00	68.68 ✓
SUPPLIES	63.50 Supplies / 5.19 Freight				
2292345235 ✓	11/15/20 11/01/20 11/26/20	1,436.13	0.00	0.00	1,436.13 ✓
SUPPLIES					
2292345233 ✓	11/15/20 11/01/20 11/26/20	75.00	0.00	0.00	75.00 ✓
SUPPLIES					
2292345236 ✓	11/15/20 11/01/20 11/26/20	26.32	0.00	0.00	26.32 ✓
SUPPLIES	1.49 Supplies / 24.83 Freight				
2292519624 ✓	11/15/20 11/02/20 11/27/20	35.54	0.00	0.00	35.54 ✓
SUPPLIES	11.36 Supplies / 24.18 Freight				
2292519626 ✓	11/15/20 11/02/20 11/27/20	23.78	0.00	0.00	23.78 ✓
SUPPLIES	11.36 Supplies / 12.42 Freight				
2292519625 ✓	11/15/20 11/02/20 11/27/20	23.78	0.00	0.00	23.78 ✓
SUPPLIES	11.36 Supplies / 12.42 Freight				
2292990982 ✓	11/15/20 11/06/20 12/01/20	47.58	0.00	0.00	47.58 ✓
SUPPLIES					
2292990981 ✓	11/15/20 11/06/20 12/01/20	47.58	0.00	0.00	47.58 ✓
SUPPLIES					
2293191253 ✓	11/15/20 11/07/20 12/02/20	26.34	0.00	0.00	26.34 ✓
SUPPLIES	3.43 Supplies / 22.91 Freight				
2293191252 ✓	11/15/20 11/07/20 12/02/20	9.36	0.00	0.00	9.36 ✓
SUPPLIES					
2293191254 ✓	11/15/20 11/07/20 12/02/20	25.09	0.00	0.00	25.09 ✓
SUPPLIES	2.78 Supplies / 22.31 Freight				
2293382036 ✓	11/15/20 11/08/20 12/03/20	246.19	0.00	0.00	246.19 ✓
SUPPLIES					
2293382037 ✓	11/15/20 11/08/20 12/03/20	282.79	0.00	0.00	282.79 ✓
SUPPLIES					
2293382038 ✓	11/15/20 11/08/20 12/03/20	208.27	0.00	0.00	208.27 ✓
SUPPLIES					
2293382035 ✓	11/15/20 11/08/20 12/03/20	83.01	0.00	0.00	83.01 ✓
SUPPLIES	58.87 Supplies / 24.12 Freight				
2293382034 ✓	11/15/20 11/08/20 12/03/20	127.12	0.00	0.00	127.12 ✓
SUPPLIES					
2293382041 ✓	11/15/20 11/08/20 12/03/20	4,266.44	0.00	0.00	4,266.44 ✓
SUPPLIES					
2293382032 ✓	11/15/20 11/08/20 12/03/20	7.14	0.00	0.00	7.14 ✓
SUPPLIES					
2293382040 ✓	11/15/20 11/08/20 12/03/20	1,415.78	0.00	0.00	1,415.78 ✓
SUPPLIES					
2293382045 ✓	11/15/20 11/08/20 12/03/20	57.00	0.00	0.00	57.00 ✓
SUPPLIES					
2293554975 ✓	11/15/20 11/09/20 12/04/20	51.63	0.00	0.00	51.63 ✓

SUPPLIES										
2294237960	✓	11/15/20	11/14/20	12/05/20		24.55	0.00	0.00	24.55	✓
SUPPLIES										
Vendor Totals Number Name						Gross	Discount	No-Pay	Net	
M2470 MEDLINE INDUSTRIES INC						15,817.53	0.00	0.00	15,817.53	
Vendor#	Vendor Name	Class		Pay Code						
10904	MERCK SHARP & DOHME CORP	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
7016580663	✓	11/16/20	11/09/20	12/09/20		2,376.65	0.00	0.00	2,376.65	✓
INVENTORY										
Vendor Totals Number Name						Gross	Discount	No-Pay	Net	
10904 MERCK SHARP & DOHME CORP						2,376.65	0.00	0.00	2,376.65	
Vendor#	Vendor Name	Class		Pay Code						
M2685	MICROTEK MEDICAL INC	✓		M						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
6338747722	✓	11/01/20	06/07/20	07/07/20		380.24	0.00	0.00	380.24	✓
SUPPLIES										
6340717001	✓	11/01/20	09/13/20	10/01/20		380.24	0.00	0.00	380.24	✓
SUPPLIES										
6341634844	✓	11/01/20	10/31/20	11/30/20		380.24	0.00	0.00	380.24	✓
SUPPLIES										
Vendor Totals Number Name						Gross	Discount	No-Pay	Net	
M2685 MICROTEK MEDICAL INC						1,140.72	0.00	0.00	1,140.72	
Vendor#	Vendor Name	Class		Pay Code						
10536	MORRIS & DICKSON CO, LLC	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net	
1260499	✓	11/14/20	11/08/20	11/18/20		4,208.70	0.00	0.00	4,208.70	✓
INVENTORY										
1264739	✓	11/14/20	11/08/20	11/18/20		232.99	0.00	0.00	232.99	✓
INVENTORY										
1266616	✓	11/14/20	11/09/20	11/19/20		64.66	0.00	0.00	64.66	✓
INVENTORY										
1266617	✓	11/14/20	11/09/20	11/19/20		81.50	0.00	0.00	81.50	✓
INVENTORY										
1269509	✓	11/14/20	11/09/20	11/19/20		310.72	0.00	0.00	310.72	✓
INVENTORY										
1266618	✓	11/14/20	11/09/20	11/19/20		96.97	0.00	0.00	96.97	✓
INVENTORY										
1269510	✓	11/14/20	11/09/20	11/19/20		140.89	0.00	0.00	140.89	✓
INVENTORY										
1269511	✓	11/14/20	11/09/20	11/19/20		662.32	0.00	0.00	662.32	✓
INVENTORY										
CM73123	✓	11/14/20	11/10/20	11/20/20		-10.13	0.00	0.00	-10.13	✓
CREDIT										
1274429	✓	11/14/20	11/12/20	11/22/20		3,453.91	0.00	0.00	3,453.91	✓
INVENTORY										
1275617	✓	11/14/20	11/12/20	11/22/20		26.54	0.00	0.00	26.54	✓
INVENTORY										
1275618	✓	11/14/20	11/12/20	11/22/20		6,250.58	0.00	0.00	6,250.58	✓
INVENTORY										
1281351	✓	11/14/20	11/13/20	11/23/20		293.10	0.00	0.00	293.10	✓

1278282	✓ INVENTORY	11/14/20 11/13/20 11/23/20	205.55	0.00	0.00	205.55	✓
1281350	✓ INVENTORY	11/14/20 11/13/20 11/23/20	66.97	0.00	0.00	66.97	✓
1278281	✓ INVENTORY	11/14/20 11/13/20 11/23/20	6.63	0.00	0.00	6.63	✓
CM73454	✓ INVENTORY	11/15/20 11/13/20 11/23/20	-259.25	0.00	0.00	-259.25	✓
CM73455	✓ CREDIT	11/15/20 11/13/20 11/23/20	-77.23	0.00	0.00	-77.23	✓
1279509	✓ CREDIT	11/15/20 11/13/20 11/23/20	425.95	0.00	0.00	425.95	✓
1286528	✓ INVENTORY	11/15/20 11/14/20 11/24/20	809.23	0.00	0.00	809.23	✓
1283711	✓ INVENTORY	11/15/20 11/14/20 11/24/20	468.65	0.00	0.00	468.65	✓
1286529	✓ INVENTORY	11/15/20 11/14/20 11/24/20	328.08	0.00	0.00	328.08	✓
1283712	✓ INVENTORY	11/15/20 11/14/20 11/24/20	152.44	0.00	0.00	152.44	✓
1285305	✓ INVENTORY	11/15/20 11/14/20 11/24/20	135.19	0.00	0.00	135.19	✓
1286176	✓ INVENTORY	11/15/20 11/14/20 11/24/20	2.55	0.00	0.00	2.55	✓
CM74006	✓ INVENTORY	11/15/20 11/14/20 11/24/20	-2.65	0.00	0.00	-2.65	✓
	CREDIT						

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	10536	MORRIS & DICKSON CO, LLC	18,074.86	0.00	0.00	18,074.86

Vendor#	Vendor Name	Class	Pay Code
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12096	NEOGENOMICS LABORATORIES	✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
6925554	✓	11/15/20	10/31/20	11/30/20		2,846.00	0.00	0.00	2,846.00
	LAB SERV								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	12096	NEOGENOMICS LABORATORIES	2,846.00	0.00	0.00	2,846.00

Vendor#	Vendor Name	Class	Pay Code
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11472	OCCUPRO LLC	✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
33069	✓	11/15/20	11/07/20	12/01/20		472.50	0.00	0.00	472.50
	MONTHLY LICENSE								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11472	OCCUPRO LLC	472.50	0.00	0.00	472.50

Vendor#	Vendor Name	Class	Pay Code
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11155	PARAREV	✓							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
908801	✓	11/15/20	11/01/20	12/01/20		3,084.00	0.00	0.00	3,084.00
	REVENUE INTEGRITY PROGR								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11155	PARAREV	3,084.00	0.00	0.00	3,084.00

Vendor#	Vendor Name	Class	Pay Code
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11932 PRESS GANEY ASSOCIATES, INC. ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
IN000610969	✓	11/14/20	09/30/20	10/30/20		2,729.72	0.00	0.00	2,729.72 ✓

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
11932	PRESS GANEY ASSOCIATES, INC.	2,729.72	0.00	0.00	2,729.72

Vendor# Vendor Name Class Pay Code

14544 PRINT RITE INC. ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
23540	✓	11/15/20	11/09/20	11/29/20		240.76	0.00	0.00	240.76 ✓

SUPPLIES

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
14544	PRINT RITE INC.	240.76	0.00	0.00	240.76

Vendor# Vendor Name Class Pay Code

11080 RADSOURCE ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
SC32091223	✓	11/15/20	11/12/20	12/07/20		1,791.67	0.00	0.00	1,791.67 ✓

SERV

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
11080	RADSOURCE	1,791.67	0.00	0.00	1,791.67

Vendor# Vendor Name Class Pay Code

11764 ROBERT RODRIQUEZ ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
111323		11/16/20	11/13/20	11/20/20		71.49	0.00	0.00	71.49 ✓

TRAVEL REIMB *Travel to Dick's Super Market on 11/12 for*

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
11764	ROBERT RODRIQUEZ	71.49	0.00	0.00	71.49

Vendor# Vendor Name Class Pay Code

10927 ROSHANDA THOMAS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
111623		11/16/20	11/16/20	11/25/20		166.37	0.00	0.00	166.37 ✓

TRAVEL REIMB *travel to Tuscany NH on 11/12*

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
10927	ROSHANDA THOMAS	166.37	0.00	0.00	166.37

Vendor# Vendor Name Class Pay Code

10936 SIEMENS FINANCIAL SERVICES ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
56382400005055	✓	11/14/20	10/25/20	11/14/20		4,038.24	0.00	0.00	4,038.24 ✓

LEASE

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
10936	SIEMENS FINANCIAL SERVICES	4,038.24	0.00	0.00	4,038.24

Vendor# Vendor Name Class Pay Code

12288 SPBS CLINICAL EQUIPMENT SRVC ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV019731123	✓	11/14/20	11/01/20	11/02/20		9,458.59	0.00	0.00	9,458.59 ✓

CONTRACT

Vendor Totals Number	Name	Gross	Discount	No-Pay	Net
12288	SPBS CLINICAL EQUIPMENT SRVC	9,458.59	0.00	0.00	9,458.59

Vendor# Vendor Name Class Pay Code

S3960 STERICYCLE, INC. ✓

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

8005012852 ✓	11/16/20 10/18/20 11/17/20	2,795.69	0.00	0.00	2,795.69 ✓
WASTE					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
S3960	STERICYCLE, INC	2,795.69	0.00	0.00	2,795.69
Vendor#	Vendor Name	Class	Pay Code		
S3940	STERIS CORPORATION	M			
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
11869790 ✓		11/15/20	10/13/20	11/07/20	2,235.66 0.00 0.00 2,235.66 ✓
SUPPLIES					
11687594 ✓		11/15/20	10/19/20	11/13/20	199.90 0.00 0.00 199.90 ✓
SUPPLIES					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
S3940	STERIS CORPORATION	2,435.56	0.00	0.00	2,435.56
Vendor#	Vendor Name	Class	Pay Code		
10735	STRYKER SUSTAINABILITY ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
4836749 ✓		11/15/20	11/07/20	12/07/20	2,224.64 0.00 0.00 2,224.64 ✓
SUPPLIES					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
10735	STRYKER SUSTAINABILITY	2,224.64	0.00	0.00	2,224.64
Vendor#	Vendor Name	Class	Pay Code		
14564	TRANSCAT INC ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
11803886 ✓		11/01/20	09/15/20	10/15/20	1,267.29 0.00 0.00 1,267.29 ✓
TRAVEL/PARTS					
3101482 ✓		11/01/20	09/21/20	10/21/20	505.00 0.00 0.00 505.00 ✓
CALIBRATION					
11803964 ✓		11/01/20	09/21/20	10/21/20	1,740.00 0.00 0.00 1,740.00 ✓
PARTS/ONSITE SERV FEE					
3118075 ✓		11/01/20	10/04/20	11/04/20	530.00 0.00 0.00 530.00 ✓
CALIBRATION					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net
14564	TRANSCAT INC	4,042.29	0.00	0.00	4,042.29
Vendor#	Vendor Name	Class	Pay Code		
13616	TRIOSE, INC ✓				
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay Gross Discount No-Pay Net
TRI161152 ✓		11/14/20	08/23/20	09/07/20	172.48 0.00 0.00 172.48 ✓
FREIGHT					
TRI164376 ✓		11/14/20	09/27/20	10/12/20	258.13 0.00 0.00 258.13 ✓
FREIGHT					
TRI164896 ✓		11/14/20	10/03/20	10/18/20	69.29 0.00 0.00 69.29 ✓
FREIGHT					
TRI65460 ✓		11/14/20	10/10/20	10/25/20	46.79 0.00 0.00 46.79 ✓
FREIGHT					
TRI166032 ✓		11/14/20	10/17/20	11/01/20	77.93 0.00 0.00 77.93 ✓
FREIGHT					
TRI167729 ✓		11/14/20	11/02/20	11/17/20	450.29 0.00 0.00 450.29 ✓
FREIGHT					
TRI168048 ✓		11/14/20	11/07/20	11/22/20	70.00 0.00 0.00 70.00 ✓
FREIGHT					
Vendor Totals	Number Name	Gross	Discount	No-Pay	Net

	13616	TRIOSE, INC					1,144.91	0.00	0.00	1,144.91
Vendor#	Vendor Name		Class	Pay Code						
11067	TRIZETTO PROVIDER SOLUTIONS ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
35FK112300 ✓		11/15/20	11/01/20	11/26/20		1,475.80	0.00	0.00	1,475.80	✓
STATEMENTS/ANNUAL FEE										
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11067	TRIZETTO PROVIDER SOLUTIONS				1,475.80	0.00	0.00	1,475.80	
Vendor#	Vendor Name		Class	Pay Code						
U1064	UNIFIRST HOLDINGS INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2921017469 ✓		11/14/20	11/02/20	11/27/20		244.19	0.00	0.00	244.19	✓
	LAUNDRY									
2921017464 ✓		11/14/20	11/02/20	11/27/20		104.00	0.00	0.00	104.00	✓
	LAUNDRY									
2921017465 ✓		11/14/20	11/02/20	11/27/20		222.15	0.00	0.00	222.15	✓
	LAUNDRY									
2921017471 ✓		11/14/20	11/02/20	11/27/20		102.46	0.00	0.00	102.46	✓
	LAUNDRY									
2921017466 ✓		11/14/20	11/02/20	11/27/20		2,319.10	0.00	0.00	2,319.10	✓
	LAUNDRY									
2921017468 ✓		11/14/20	11/02/20	11/27/20		298.08	0.00	0.00	298.08	✓
	LAUNDRY									
2921017467 ✓		11/14/20	11/02/20	11/27/20		29.95	0.00	0.00	29.95	✓
	LAUNDRY									
2921017470 ✓		11/14/20	11/02/20	11/27/20		228.21	0.00	0.00	228.21	✓
	LAUNDRY									
2921017661 ✓		11/14/20	11/06/20	12/01/20		91.80	0.00	0.00	91.80	✓
	LAUNDRY									
2921017660 ✓		11/14/20	11/06/20	12/01/20		2,749.55	0.00	0.00	2,749.55	✓
	LAUNDRY									
2921017984 ✓		11/14/20	11/09/20	12/04/20		191.38	0.00	0.00	191.38	✓
	LAUNDRY									
2921017989 ✓		11/14/20	11/09/20	12/04/20		228.21	0.00	0.00	228.21	✓
	LAUNDRY									
2921017983 ✓		11/14/20	11/09/20	12/04/20		109.05	0.00	0.00	109.05	✓
	LAUNDRY									
2921017988 ✓		11/14/20	11/09/20	12/04/20		244.19	0.00	0.00	244.19	✓
	LAUNDRY									
2921017986 ✓		11/14/20	11/09/20	12/04/20		29.95	0.00	0.00	29.95	✓
	LAUNDRY									
2921017985 ✓		11/14/20	11/09/20	12/04/20		2,209.38	0.00	0.00	2,209.38	✓
	LAUNDRY									
2921017990 ✓		11/14/20	11/09/20	12/04/20		102.46	0.00	0.00	102.46	✓
	LAUNDRY									
2921017987 ✓		11/14/20	11/09/20	12/04/20		298.08	0.00	0.00	298.08	✓
	LAUNDRY									
2921018182 ✓		11/14/20	11/13/20	12/08/20		121.02	0.00	0.00	121.02	✓
	LAUNDRY									
2921018181 ✓		11/14/20	11/13/20	12/08/20		2,696.73	0.00	0.00	2,696.73	✓
	LAUNDRY									

2921005837 ✓	11/15/20 06/08/20 07/03/20	188.64	0.00	0.00	188.64 ✓
LAUNDRY					
2921008079 ✓	11/15/20 07/06/20 07/31/20	29.75	0.00	0.00	29.75 ✓
LAUNDRY					
2921008965 ✓	11/15/20 07/13/20 08/07/20	29.75	0.00	0.00	29.75 ✓
LAUNDRY					
2921009483 ✓	11/15/20 07/20/20 08/14/20	29.75	0.00	0.00	29.75 ✓
LAUNDRY					
2921010039 ✓	11/15/20 07/27/20 08/21/20	39.35	0.00	0.00	39.35 ✓
LAUNDRY					
2921010578 ✓	11/15/20 08/03/20 08/28/20	31.85	0.00	0.00	31.85 ✓
LAUNDRY					
2921011102 ✓	11/15/20 08/10/20 09/04/20	83.40	0.00	0.00	83.40 ✓
LAUNDRY					
2921011650 ✓	11/15/20 08/17/20 09/11/20	29.96	0.00	0.00	29.96 ✓
LAUNDRY					
2921012180 ✓	11/15/20 08/24/20 09/18/20	43.32	0.00	0.00	43.32 ✓
LAUNDRY					
2921012656 ✓	11/15/20 08/31/20 09/25/20	29.75	0.00	0.00	29.75 ✓
LAUNDRY					
2921013204 ✓	11/15/20 09/07/20 10/02/20	29.75	0.00	0.00	29.75 ✓
LAUNDRY					
2921013762 ✓	11/15/20 09/14/20 10/09/20	29.75	0.00	0.00	29.75 ✓
LAUNDRY					
2921014301 ✓	11/15/20 09/21/20 10/16/20	61.73	0.00	0.00	61.73 ✓
LAUNDRY					
2921014820 ✓	11/15/20 09/28/20 10/23/20	34.26	0.00	0.00	34.26 ✓
LAUNDRY					
2921015353 ✓	11/15/20 10/05/20 10/30/20	62.91	0.00	0.00	62.91 ✓
LAUNDRY					

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	U1064	UNIFIRST HOLDINGS INC	13,373.86	0.00	0.00	13,373.86

Vendor#	Vendor Name	Class	Pay Code
V1471	VICTORIA RADIOWORKS, LTD ✓	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
23100170 ✓		11/15/20	10/31/20	11/30/20		160.00	0.00	0.00	160.00 ✓
	ADVERTISING								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	V1471	VICTORIA RADIOWORKS, LTD	160.00	0.00	0.00	160.00

Vendor#	Vendor Name	Class	Pay Code
11018	WEBPT, INC ✓		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
INV-452620 ✓		11/15/20	11/12/20	11/13/20		9,342.00	0.00	0.00	9,342.00 ✓
	PROVIDER SUBSCRIPTION								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11018	WEBPT, INC	9,342.00	0.00	0.00	9,342.00

Report Summary

APPROVED ON	Gross	Discount	No-Pay	Net
NOV 16 2023	389,913.63	0.00	0.00	389,913.63 ✓

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

CITIBA



8.704.42

8.446.92

257.50

0/5 credit
belongs to
Calhoun
County

CARD

Account Inquiries:

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

Account Statement

Commercial Card Account
C0001 CALHOUN COUNTY MMC

Account Number: XXXX-XXXX-XXXX-2799
Invoice # 3653004064

Summary of Account Activity

Previous Balance	\$8,446.92
Payments	\$8,259.09
Credits	\$0.00
Purchases & Other Charges	\$2,117.73
Cash Transactions	\$0.00
Cash Transaction Fees	\$0.00
Interest Charges	\$0.00

Credit Limit	\$30,000
Available Credit Limit	\$27,694
Cash Advance Limit	\$0
Available Cash Advance Limit	\$0

Payment Information

New Balance	\$2,305.56
Past Due Amount	\$187.83
Disputed Amount	\$0.00
Amount Over Credit Limit	\$0.00
Minimum Payment Due	\$2,305.56
Payment Due Date	11/28/2023
Statement Closing Date	11/03/2023
Days in Billing Period	31

+257.50
= 445.33

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

Company Transactions

Account: XXXX-XXXX-XXXX-2799			C0001 CALHOUN COUNTY MMC			Total Activity: (\$8,259.09)	
Post Date	Trans Date	MCC	Reference Number		Description/Location	Amount	
10/27	10/27	0000	75563973300300000006320	1	PAYMENT THANK YOU	8,259.09	PY

Cardholder Transactions

Account: XXXX-XXXX-XXXX-9457			ROSHANDA S THOMAS				Total Activity: \$2,117.73			
Credit Limit: \$15,000			Cash Limit: \$0							
Post Date	Trans Date	MCC	Reference Number		Description/Location				Amount	
10/04	10/03	9399	05134373277600037086941	1	NPDB NPDB.HRSA.GOV FAIRFAX VA		22033	USA	2.50	
					N100009878					
10/04	10/04	8999	55432863277208554578391	2	AMA-CREDENTIALING 800-621-8335 IL		60611	USA	44.00	
10/05	10/04	9399	05134373277600036396423	3	NPDB NPDB.HRSA.GOV FAIRFAX VA		22033	USA	2.50	
					N100054580					
10/06					TXAS HOSPITAL ASSOC AUSTIN TX		78701	USA	219.95	

APPROVED ON

NOV 20 2023

NOTICE: Short paid amount that needs to be reimbursed by MMC

Page 1 of 4

With your payment to ensure proper credit. Retain upper portion for your records.

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXASCITI
PO E
PHO

0/5 credit
that belongs
to county

8.704.42
8.446.92
8.259.09
187.83

187.83
257.50
445.33

Account Number XXXX-XXXX-XXXX-2799
Payment Due Date November 28, 2023
New Balance \$2,305.56 2,573.06
Past Due Amount \$187.83
Minimum Payment Due \$2,305.56 2,573.06
Amount Enclosed

Mail
Checks
To

Current 2,117.73
Past Short paid 445.33
2,562.06

C0001 CALHOUN COUNTY MMC
RHONDA KOKENA
STE A
202 S ANN ST
PORT LAVACA TX 77979-4204

28000 0230556 0230556 0825909 05567090005272799 0309

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

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

Account: XXXX-XXXX-XXXX-2799

Cardholder Transactions (con't)

Post Date	Trans Date	MCC	Reference Number		Description/Location		Amount
10/09	10/06	9399	05134373280600039250177	5	NPDB NPDB.HRSA.GOV FAIRFAX VA N100125299	22033 USA	2.50
10/09	10/07	8999	55432863280209486444202	6	AMA*CREDENTIALING 800-621-8335 IL	60611 USA	44.00
10/12	10/11	9399	05134373285600037633015	7	NPDB NPDB.HRSA.GOV FAIRFAX VA N100277857	22033 USA	2.50
10/12	10/11	9399	05134373285600037633197	8	NPDB NPDB.HRSA.GOV FAIRFAX VA N100277822	22033 USA	2.50
10/12	10/11	4722	55432863284200953813165	9	Orbitz*72676385156415 ORBITZ.COM WA	98119 USA	41.44
10/12	10/11	5912	55436873285162857303335	10	IMPRIMSIX 603B LEDGEWOOD NJ 1824819	USA	370.00
10/12	10/12	8999	55432863285201006355351	11	AMA*CREDENTIALING 800-621-8335 IL	60611 USA	88.00
10/16	10/11	3001	55417343287872873344480	12	AMERICAN 00180390569811 SEATTLE WA FISHER/CHRISTOP DEPARTURE: 10/17/23 OKC AA G DFW AA G CRP AA G DFW AA G OKC	85034 USA	988.40
10/16	10/13	9399	05134373287600039432752	13	NPDB NPDB.HRSA.GOV FAIRFAX VA N100362709	22033 USA	67.50
10/16	10/13	9399	05134373287600039432836	14	NPDB NPDB.HRSA.GOV FAIRFAX VA N100362806	22033 USA	2.50
10/19	10/18	3665	55436873292152924574910	15	HAMPTON INNS PORT LAVACA TX 00962250 CHECK IN: 10/17/2023 00962250	77979 USA	134.47
10/23	10/20	8699	75265863293587002874324	16	TEXAS MEDICAL ASSOCIAT 512-370-1492 TX A1EAPC4ECB8	78701 USA	300.00
10/27	10/26	9399	05134373300600037422220	17	NPDB NPDB.HRSA.GOV FAIRFAX VA N100730886	22033 USA	2.50
10/27	10/27	8999	55432863300205581450447	18	AMA*CREDENTIALING 800-621-8335 IL	60611 USA	44.00
10/31	10/31	8999	55432863304206809459422	19	AMA*CREDENTIALING 800-621-8335 IL	60611 USA	44.00
11/02	11/01	3665	55436873308163062750257	20	HAMPTON INNS PORT LAVACA TX 00957011 CHECK IN: 10/31/2023 00957011	77979 USA	134.47

FINANCE CHARGE SUMMARY

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

Type of Balance	Annual Percentage Rates	Periodic Rate*	Balance Subject to Finance Charges
PURCHASE AND FEES	10.25%	0.8542% (M)	\$0.00
CASH	10.25%	0.8542% (M)	\$0.00

* (D) Daily Rate

(M) Monthly Rate

Account: XXXX-XXXX-XXXX-2799

RECEIVED BY THE
COUNTY AUDITOR ON

NOV 30 2023

CITIBANK CORPORATE CARD

JOHN COUNTY, TEXAS



Account Inquiries:

Toll Free: 1-(800)-248-4553
International: 1-(804)-954-7314
TDD/TTY: 1-(877)-505-7276

Account Number: XXXX-XXXX-XXXX-9457

Account Statement

Commercial Card Account
ROSHANDA S THOMAS

Summary of Account Activity

Total Activity \$2,117.73

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

Not an invoice. For your records only.

Credit Limit \$15,000
Cash Advance Limit \$0
Statement Closing Date 11/03/2023
Days in Billing Period 31

Transactions

Post Date	Trans Date	MCC	Reference Number	Description/Location	Amount
***** NOTICE MEMO ITEM(S) LISTED BELOW *****					
10/04	10/03	9399	05134373277600037086941	1 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	2.50 ✓
				N100009878	
10/04	10/04	8999	55482853277208554578391	2 AMA*CREDENTIALING 800-621-8335 IL 60611 USA	44.00 ✓
10/05	10/04	9399	05134373278600036398423	3 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	2.50 ✓
				N100054580	
10/05	10/04	8062	55457373278200873000024	4 TEXAS HOSPITAL ASSOC AUSTIN TX 78701 USA	218.95 ✓
10/09	10/06	9399	05134373280600039250177	5 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	2.50 ✓
				N100125299	
10/09	10/07	8999	55432853280209486444202	6 AMA*CREDENTIALING 800-621-8335 IL 60611 USA	44.00 ✓
10/12	10/11	9399	05134373285600037633015	7 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	2.50 ✓
				N100277657	
10/12	10/11	9399	05134373285600037633197	8 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	2.50 ✓
				N100277822	
10/12	10/11	4722	55432863284200953813165	9 Orbitz 72676385156415 ORBITZ.COM WA 98119 USA	41.44 ✓
10/12	10/11	5912	55436873265162857303335	10 IMPRIMISRX 503B LEDGEWOOD NJ 1824819 USA	370.00 ✓
10/12	10/12	8999	55432863285201006388531	11 AMA*CREDENTIALING 800-621-8335 IL 60611 USA	88.00 ✓
10/16	10/11	3001	55417343287872873344460	12 AMERICAN 00180390869811 SEATTLE WA 85034 USA	568.40 ✓
				FISHER/CHRISTOP DEPARTURE: 10/17/23 OKC AA G DFW AA G CRP AA G DFW AA G OKC	
10/16	10/13	9399	05134373287600039432752	13 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	67.50 ✓
				N100362709	
10/16	10/13	9399	05134373287600039432836	14 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	2.50 ✓
				N100362908	

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

Page 1 of 4



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

Account Number XXXX-XXXX-XXXX-9457
Statement Closing Date November 03, 2023

Not an invoice.
For your records only.

ROSHANDA S THOMAS
202 S ANN ST
PORT LAVACA TX 77979-4204

00007905040

• **Report a Lost or Stolen Card Immediately:** Our telephone lines are open every day, 24 hours a day. Call the Customer Service telephone number specified on the front of the statement to report a lost or stolen Citi Corporate Card.

• **Cardholder Credit Line:** Each Cardholder has an individual Credit Line (a portion of which may be used for Cash Advances), which is the maximum amount that the Cardholder can charge at any time. The size of each Cardholder's Credit Line (and Cash Limit, if any), is determined by the Company and is a portion of the total Company Credit Line.

• **To Increase or Reallocate a Company or Cardholder Credit Line:** The Company may request changes to credit lines by contacting Citi Corporate Card Customer Services. Our telephone lines are open every day, 24 hours a day at the telephone number specified on the front of the statement.

• **Additional Cardholders:** The Company may request applications for additional Cardholders by contacting Citi Corporate Card Service. Our telephone lines are open every day, 24 hours a day at the telephone number specified on the front of the statement. Limit one Citi Corporate Card per Cardholder.

• **CitiManager Online Tool:** You can easily manage your Citi Corporate Card online using the CitiManager online tool. CitiManager enables you to manage business expenses from anywhere around the globe from your computer or mobile device; you can view statements online as well as confirm account balances. To register for CitiManager, please log on to www.citimanager.com/login and click on the 'Self registration for Cardholders' link. From there, follow the prompts to establish your account.

• **Payments:** You may make a payment to your individually billed card account online using CitiManager. Please note that some organizations do not have the CitiManager online payment feature enabled for cardholders. If paying by mail, please allow sufficient mailing time. Please write your account number on the front of the check. For centrally billed accounts, please be sure to send on Company check as payment for all Cardholder balances. If we receive your mailed payment in proper form at our processing facility by 5:00 p.m. Eastern Time, it will be credited as of that day. Payments can also be made by electronic fund transfer, wire transfer, ACH transfer, direct debit, and other methods. Call the number on the front of this statement for details.

• **Company Ratifications:** By its payment of any amounts charged to the Account, the Company: (i) ratifies the original Application for the Account and the authority of all persons at the time of their signing such Application, and (ii) authorizes the continued use of the Account under the terms of The Corporate Card Agreement by all Cardholders to whom Cards are issued.

• **Special Information on Cash Advances:** Cardholders may get a Cash Advance at over 160,000 locations worldwide.

- The Cardholder's Cash Advance Limit is a part of the Cardholder's Total Credit Line. It is not an additional line of credit.
- For Cash Advances from ATMs, a separate Personal Identification Number (PIN) is required for security purposes.

• **In Case of Errors or Questions About Your Bill:** You are responsible for initiating the dispute resolution process if your Account Statement lists charges that you believe are unauthorized, incorrect, for merchandise that has not been received, or for returned merchandise. You should also initiate the process if your Account Statement incorrectly lists a credit as a charge or if a credit, for which you have been issued a credit slip, is not shown. To begin the dispute resolution process, visit citimanager.com/login.

• You may also dispute a transaction by writing to Citi. You may write to us on a separate sheet at the address specified on the front of this statement as soon as possible. Please notify us no later than 60 days after the date of the bill on which the error or problem first appeared. In the letter please give us the following information:

- Your name and account number. For centrally billed Company Accounts, the Company name and individual account number.
- The dollar amount of the suspected error.
- Describe the error and explain the reason for the error; if more information is needed about an item, please describe it to us.
- **Merchant Disputes:** If the Company or Cardholder was unsuccessful in attempting to resolve a problem with a merchant concerning the quality of goods or services purchased with the Citi Corporate Card, we may be able to help if we are notified in writing within 60 days of the date of the charge. You will be responsible if we are not able to resolve the dispute or if the Bank finds you responsible for the disputed charge.

• In the letter to us, please explain in detail the dispute and the results of the attempt to resolve it with the merchant. The letter must include the amount involved, and must be signed by the individual Cardholder. We will notify you of the results of our efforts.

• If you returned merchandise and received a credit slip which has not yet been posted, please allow 30 days from the date it was issued. If it has not been posted to the Account by then, forward a copy of the credit slip to us at the billing dispute address specified on the front of the statement. Along with the copy of the credit slip please include a letter (signed by the individual Cardholder) stating that credit was not received. If a credit slip was not issued, please request one from the merchant. If the merchant refuses, please write to us and explain the details.

• On non-disputed matters or any matter shown by the Bank not to be in error, the Bank may charge the Company or Cardholder the fee specified in the Corporate Card Agreement for such copy of any document the Company or Cardholder requests, such as duplicate periodic statements, transaction slips, and the like.

• Please save your charge receipts.

Account: XXXX-XXXX-XXXX-9457

Transactions (con't)

Post Date	Trans Date	MCC	Reference Number	Description/Location	Amount
10/19	10/18	3865	55436873292152924574910	15 HAMPTON INNS PORT LAVACA TX 77979 USA	134.47
				00952250	
				CHECK IN: 10/17/2023	
				00952250	
10/23	10/20	8699	75265863293587002874324	16 TEXAS MEDICAL ASSOCIAT 512-370-1492 TX 78701 USA	300.00
				A11EAFCAECES	
10/27	10/26	9399	05134373300600037422220	17 NPDB NPDB.HRSA.GOV FAIRFAX VA 22033 USA	2.50
				N100730886	
10/27	10/27	8999	55432863300205581450447	18 AMA*CREDENTIALING 800-621-8335 IL 60611 USA	44.00
10/31	10/31	8999	55432863304206809459422	19 AMA*CREDENTIALING 800-621-8335 IL 60611 USA	44.00
11/02	11/01	3865	55436873306163062750257	20 HAMPTON INNS PORT LAVACA TX 77979 USA	134.47
				00957011	
				CHECK IN: 10/31/2023	
				00957011	
***** TOTAL AMOUNT OF MEMO ITEM(S): \$2,117.73					

APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Account: XXXX-XXXX-XXXX-9457

MEMORIAL MEDICAL CENTER

PURCHASE ORDER

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

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

Vendor Name: Citicbank

Date: 11/20/2023

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required		Expense #	Department	Deliver To		
Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	—		NPDB x 1 provider (Enroll)			2.50
2	—		AMA x 1 provider - Init + CM			44.00
3	—		NPDB x 1 provider (Enroll)			2.50
4	—		THA - THH Governance Conf			219.95
5			Registration - Kay McPherson			
6			plus 5 HC Term Books - ^{Board} members			
7	—		NPDB x 1 provider (Enroll)			2.50
8	—		AMA x 1 provider - Init + CM			44.00
9	—		NPDB x 1 provider - (Enroll)			2.50
10	—		NPDB x 1 provider - (Enroll)			2.50

Est. Freight

Imprimis - Rx - Pharmacy - Lido FF

Est. Total Cost

TOTAL COST

370.00

NOTES:

Charges moved to Rushmore's MC

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

Dept. Director
Dir. Nursing
Dir. Clinical Services
CFO
Administrator <u>Rushmore 11/20/23</u>

2

MEMORIAL MEDICAL CENTER PURCHASE ORDER

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

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

Vendor Name: Citibank

Date: 11/20/2023

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Form # 9401

Date Required		Expense #	Department	Deliver To		
Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	-		Orkatz - TRIP Protection for			41.44
2			Dr. Christopher Fisher, Hospitalist			
3	-		American - Flight for Dr.			568.40
4			Christopher Fisher, Hospitalist			
5			candidate			
6	-		AMA x 2 providers (Ortiz + CM)			88.00
7	-		NPDB x 2.7 renewals			67.50
8	-		NPDB x 1 provider - renewal			2.50
9	-		Hampton Inns - Room for	10/17/23		134.47
10			Dr. David Hobson, OB/GYN	per contract		

Est. Freight _____

Est. Total Cost _____

TOTAL COST _____

NOTES:

charges made to Roshanda's MC

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

Dept. Director _____
Dir. Nursing _____
Dir. Clinical Services _____
CFO _____
Administrator Roshanda Thomas 11/20/23

MEMORIAL MEDICAL CENTER

PURCHASE ORDER

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

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

Vendor Name: Citibank

Date: 11/20/2023

Vendor Address: _____

P.O. # _____

Vendor _____

Account # _____

Vendor 44-00 _____

Initiated By: _____

Date Req	Expense #	Department	Deliver To	Form # 9401		
2-50	219-95					
Line No.		Description	Unit Cost	Unit Meas.	Extended Cost	
1	44-00	Texas Med Assoc - Training <i>Coding</i>			300.00	✓
2	2-50	for clinic providers - deposit				
3	41-44	NPDB x 1 provider (Enroll)			2.50	
4	88-00	AMA x 1 provider (Unit + CM)			44.00	
5	2-50	"			44.00	
6	134-47	Hampton Inn - Dr. David			134.47	
7	44-00	Hobson, DB/Gym Hotel <i>10/31/23 contract</i>				
8	44-00					
9	134-47					
10						

Est. Freight _____

Est. Total Cost _____

TOTAL COST \$2,117.73

NOTES:

changes made to ROSTER INC

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

Dept. Director _____
Dir. Nursing _____
Dir. Clinical Services _____
CFO _____
Administrator Roshan S. Rao 11/20/23

RECEIPT

MEMORIAL MEDICAL CENTER
815 N VIRGINIA
PORT LAVACA
TX 77979-3025

DATE	RECEIPT NUMBER	TYPE OF PAYMENT	PAYOR NAME
11/14/23	682566	AMERICAN EXPRESS	THOMAS ROSHANDA

ACCOUNT NO.	ACCOUNT NAME	AMOUNT	OFFICE USE
40600041	TRAVEL - M	120.00	40600041

THIS IS YOUR RECEIPT
PLEASE KEEP FOR YOUR RECORDS

120.00

PLB

Amount
Reimbursed
by NMC
employees.

445.35 +
35.00 +
35.00 +
91.65 -
63.68 +
35.00 +
35.00 +
120.00 +

AL CENTER
NA ST
TX 77979
E
0001
REF#: 00000010
IRN: 331820833064
142745
1331078
77979
39
CNP
/

\$120.00

PROVED

RESS

5010801
J 80 00

JANK YOU

TOWER COPY

0.0

T-Shirts 35.00
Additional Room charge 93.68

already paid

RECEIPT		MEMORIAL MEDICAL CENTER 815 N VIRGINIA FORT LAVACA TX 77979-3025	
DATE	RECEIPT NUMBER	TYPE OF PAYMENT	PAYOR NAME
11/16/23	682731	PAYMENT-MASTER C	SILVIA CHRISTI
ACCOUNT NO.	ACCOUNT NAME		AMOUNT
40600041	TRAVEL - M		128.68
			OFFICE USE 40600041
THIS IS YOUR RECEIPT PLEASE KEEP FOR YOUR RECORDS			128.68
PLB			

T-Shirts

RECEIPT

MEMORIAL MEDICAL CENTER
815 N VIRGINIA
PORT LAVACA
TX 77979-3025

DATE	RECEIPT NUMBER	TYPE OF PAYMENT	PAYOR NAME
11/16/23	682716	PAYMENT-CHECK	MUTCHLER HEATHER

ACCOUNT NO.	ACCOUNT NAME	AMOUNT	OFFICE USE
40600041	TRAVEL - M	35.00	40600041

THIS IS YOUR RECEIPT
PLEASE KEEP FOR YOUR RECORDS

35.00

PLB

RECEIPT

MEMORIAL MEDICAL CENTER
815 N VIRGINIA
PORT LAVACA
TX 77979-3025

DATE	RECEIPT NUMBER	TYPE OF PAYMENT	PAYOR NAME
11/14/23	682567	PAYMENT-CHECK	NGUYEN MIMI

ACCOUNT NO.	ACCOUNT NAME	AMOUNT	OFFICE USE
40600041	TRAVEL - M	93.68	40600041

THIS IS YOUR RECEIPT
PLEASE KEEP FOR YOUR RECORDS

93.68

RECEIPT

MEMORIAL MEDICAL CENTER
815 N VIRGINIA
PORT LAVACA
TX 77979-3025

DATE	RECEIPT NUMBER	TYPE OF PAYMENT	PAYOR NAME
11/16/23	682730	PAYMENT-VISA	NGUYEN MINH

ACCOUNT NO.	ACCOUNT NAME	AMOUNT	OFFICE USE
40600041	TRAVEL - M	35.00	40600041

THIS IS YOUR RECEIPT
PLEASE KEEP FOR YOUR RECORDS

35.00

PLB

RECEIPT

MEMORIAL MEDICAL CENTER
815 N VIRGINIA
PORT LAVACA
TX 77979-3025

DATE	RECEIPT NUMBER	TYPE OF PAYMENT	PAYOR NAME
11/20/23	682986	PAYMENT-CHECK	COFFE BARREL LLC

ACCOUNT NO.	ACCOUNT NAME	AMOUNT	OFFICE USE
40600090	TRAVEL -A	35.00	40600090
		35.00	

THIS IS YOUR RECEIPT
PLEASE KEEP FOR YOUR RECORDS

PLB

Dr. Patel - T-shirt

COFFEE BARREL, LLC
100 E. HUTCHINSON ST #238
BEEVILLE, TX 78102

2856

98-2265/1131-33

Nov 3 2023

Date

CHECK AMOUNT

Pay to the
Order of

Memorial Medical Center

\$ 91.65

Ninety one & 65/100

Dollars



Photo
Safe
Deposit
Box



PROSPERITY BANK®

BEEVILLE BANKING CENTER
100 SOUTH WASHINGTON • BEEVILLE, TX 78102
361-358-3612 www.prosperitybankusa.com

For

Travel

[Signature]

AP

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: 11/17/2023

Page: 002

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

DC: 8115
Customer INV SupplID:
Territory:

As of: 11/17/2023 Page: 002
Mail to: Comp: 8000

Customer: 632536
Date: 11/18/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 11/18/2023 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: 13,161.78 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 11/21/2023,
Pay This Amount:

12,898.53 USD

If Paid After 11/21/2023,
Pay this Amount:

13,161.78 USD

Due If Paid On Time:

USD 12,898.53 ✓

Disc: lost if paid late:

263.25

Due If Paid Late:

USD 13,161.78

5,377.01 +
7,515.23 +
6.24 +
12,898.53 +

Andrew Lopez Lentes
11/20/23

APPROVED ON

NOV 20 2023

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: 11/17/2023

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: 11/17/2023 Page: 001
Mail to: Comp: 8000

Customer: 256342
Date: 11/18/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 11/18/2023 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 256342 WALMART 1098/MEM MED PHS										
11/13/2023	11/21/2023	7457348438	95228701	115Invoice	1.34	66.99		65.65	✓	7457348438
11/13/2023	11/21/2023	7457552876	95240522	115Invoice	0.03	1.27		1.24	✓	7457552876
11/14/2023	11/21/2023	7457690083	95561917	115Invoice	16.03	801.74		785.71	✓	7457690083
11/14/2023	11/21/2023	7457884440	95394704	115Invoice	1.03	51.39		50.36	✓	7457884440
11/15/2023	11/21/2023	7457966243	95655089	115Invoice	16.00	799.83		783.83	✓	7457966243
11/15/2023	11/21/2023	7457966244	95725682	115Invoice	2.59	129.70		127.11	✓	7457966244
11/15/2023	11/21/2023	7458129798	95661802	195Invoice	0.03	1.27		1.24	✓	7458129798
11/15/2023	11/21/2023	7458129799	95503022	115Invoice	0.68	33.84		33.16	✓	7458129799
11/15/2023	11/21/2023	7458130300	95668203	115Invoice	0.01	0.32		0.31	✓	7458130300
11/16/2023	11/21/2023	7458260930	95796469	115Invoice	0.03	1.27		1.24	✓	7458260930
11/16/2023	11/21/2023	7458260932	95869245	115Invoice	7.38	369.09		361.71	✓	7458260932
11/16/2023	11/21/2023	7458260933	95869245	115Invoice	0.01	0.32		0.31	✓	7458260933
11/17/2023	11/21/2023	7458524857	95920648	115Invoice	56.91	2,845.51		2,788.60	✓	7458524857
11/17/2023	11/21/2023	7458683794	95927403	195Invoice	0.05	2.53		2.48	✓	7458683794
11/17/2023	11/21/2023	7458683795	95933853	115Invoice	7.63	381.69		374.06	✓	7458683795

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 5,486.76 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 11,739.80
11/13/2023

If Paid By 11/21/2023,
Pay This Amount:

5,377.01 USD

If Paid After 11/21/2023,
Pay this Amount:

5,486.76 USD

Due If Paid On Time:
USD

5,377.01

Disc lost if paid late:

109.75

Due If Paid Late:
USD

5,486.76

APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

Andrew D. [Signature]
11/20/23

McKESSON**STATEMENT**

Company: 8000

As of: 11/17/2023

Page: 001

To ensure proper credit to your
account, detach and return this
stub with your remittance.CVS PHCY 8923/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: 835434
Date: 11/18/2023As of: 11/17/2023 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 835434 PLEASE CHECK ANY
Date: 11/18/2023 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										
11/15/2023	11/21/2023	7458017585	2831876	115Invoice	153.37	7,668.65		7,515.28	✓	7458017585	

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: 7,668.65 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 11,739.80
11/13/2023If Paid By 11/21/2023,
Pay This Amount:

7,515.28 USD

If Paid After 11/21/2023,
Pay this Amount:

7,668.65 USD

Due If Paid On Time:
USD

7,515.28 ✓

Disc lost if paid late:

153.37

Due If Paid Later:
USD

7,668.65

Andrew De la Lanza
11/20/23

APPROVED ON

NOV 20 2023

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: 11/17/2023

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: 11/17/2023 Page: 001
Mail to: Comp: 8000

Customer: 835437
Date: 11/18/2023

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835437 PLEASE CHECK ANY
Date: 11/18/2023 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											
11/15/2023	11/21/2023	7458162914		2829726	115Invoice	0.13	6.37		6.24	✓	7458162914	

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: 6.37 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 0.00

If Paid By 11/21/2023,
Pay This Amount:

6.24 USD

If Paid After 11/21/2023,
Pay this Amount:

6.37 USD

Due if Paid On Time:

USD

6.24 ✓✓

Disc lost if paid late:

0.13

Due if Paid Late:

USD

6.37

Andrew Delas Santos
11/20/23

APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333



STATEMENT

Statement Number: 66334614
Date: 11-17-2023

1 of 1

Served By: ABC DC SUGARLAND
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101

DEA: RA0289276
866-451-9655

Customer: WALGREENS #12494 340B
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2609

Remit To: AMERISOURCEBERGEN
PO Box 905223
CHARLOTTE NC 28290-5223

Customer Number

100135284 / 037028186

Terms

Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	1,463.18
Past Due:	0.00
Total Due:	1,463.18
Account Balance:	1,463.18

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
11-13-2023	11-24-2023	3153857687	7004700062	Invoice	72.89		0.00	72.89
11-13-2023	11-24-2023	3153857688	7004714193	Invoice	85.39		0.00	85.39
11-13-2023	11-24-2023	3153962172	7004726159	Invoice	92.05		0.00	92.05
11-14-2023	11-24-2023	3154148147	7004735479	Invoice	106.44		0.00	106.44
11-14-2023	11-24-2023	355423899	170428	Invoice	(378.54)		0.00	(378.54)
11-14-2023	11-24-2023	355424200	170428	Invoice	376.19		0.00	376.19
11-14-2023	11-24-2023	355424406	171276	Invoice	(378.54)		0.00	(378.54)
11-14-2023	11-24-2023	355424407	171276	Invoice	376.19		0.00	376.19
11-15-2023	11-24-2023	3154306877	7004744868	Invoice	6.26		0.00	6.26
11-16-2023	11-24-2023	3154473755	7004756734	Invoice	221.10		0.00	221.10
11-17-2023	11-24-2023	3154532175	4639581202	Invoice	30.16		0.00	30.16
11-17-2023	11-24-2023	3154627414	7004768112	Invoice	853.59		0.00	853.59

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,463.18	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
11-17-2023	(2,593.35)

APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Reminders

Due Date	Amount
11-24-2023	1,463.18
Total Due:	1,463.18

Andrew Esteves
11/20/23

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

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

☐ "ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"

ENTER:

####

☐ "ENTER YOUR 4-DIGIT PIN"

☐ "MAKE A PAYMENT, PRESS 1"

☐ "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"

★ #

☐ "IF FEDERAL TAX DEPOSIT ENTER 1"

☐ "ENTER 2-DIGIT TAX FILING YEAR"

★

☐ "ENTER 2-DIGIT TAX FILING ENDING MONTH"

★

1ST QTR - 03 (MARCH) - Jan, Feb, Mar

2ND QTR - 06 (JUNE) - Apr, May, June

3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept

4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec

☐ "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"

★ #

"1 TO CONFIRM"

"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"

0 #

"ENTER W/CENTS AMOUNT OF MEDICARE"

#

"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"

#

☐ "6-DIGIT SETTLEMENT DATE"

★

"1 TO CONFIRM"

☐ ACKNOWLEDGEMENT NUMBER

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

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

ENTER VOID CKS AS NEGATIVE NUMBERS

PAY PERIOD: BEGIN	11/3/2023	VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: END	11/16/2023					
PAY DATE:	11/24/2023					
GROSS PAY:	\$ 563,621.55			\$ -		\$ 563,621.55
DEDUCTIONS:						
A/R	\$ 250.00					\$ 250.00
ADVANC						\$ -
BOOTS						\$ -
SUNLIFE CRITICAL ILLNESS	\$ 1,206.28					\$ 1,206.28
SUNLIFE ACCIDENT	\$ 786.88					\$ 786.88
IRS TAX	\$ 117.00					\$ 117.00
SUNLIFE SHORT TERM DIS	\$ 1,968.40					\$ 1,968.40
BCBS VISION	\$ 1,032.38					\$ 1,032.38
CAFÉ-D	\$ 1,608.93					\$ 1,608.93
CAFÉ-H	\$ 23,243.39					\$ 23,243.39
	\$ -					\$ -
	\$ -					\$ -
CAFÉ-P						\$ -
CANCER						\$ -
CHILD	\$ 570.69					\$ 570.69
CLINIC	\$ -					\$ -
COMBIN	\$ 271.83					\$ 271.83
CREDUN	\$ -					\$ -
DENTAL	\$ -					\$ -
DEP-LF						\$ -
SUNLIFE TERM LIFE	\$ 1,063.06					\$ 1,063.06
SUNLIFE HOSP INDEM	\$ 739.47					\$ 739.47
FED TAX	\$ 46,000.40					\$ 46,000.40
FICA-M	\$ 7,671.89					\$ 7,671.89
FICA-O	\$ 31,744.73					\$ 31,744.73
FICA-M ADDITIONAL	\$ 78.02					\$ 78.02
FIRST C						\$ -
FLEX S	\$ 3,447.31					\$ 3,447.31
FLX-FE	\$ -					\$ -
GIFT S	\$ 217.03					\$ 217.03
GRP-IN						\$ -
GTL						\$ -
HOSP-I						\$ -
LEGAL	\$ 1,034.54					\$ 1,034.54
OTHER	\$ 1,837.98					\$ 1,837.98
NATIONAL FARM LIFE	\$ 1,523.92					\$ 1,523.92
MED SURCHARGE	\$ 360.00					\$ 360.00
PR FIN	\$ -					\$ -
RELAY						\$ -
REPAY						\$ -
STONEDF	\$ 1,115.86					\$ 1,115.86
STONE						\$ -
STONE 2						\$ -
STUDEN						\$ -
TSA-R	\$ 38,862.96					\$ 38,862.96
UW/HOS	\$ -					\$ -
TOTAL DEDUCTIONS:	\$ 166,752.95	\$ -	\$ -	\$ -	\$ -	\$ 166,752.95
NET PAY:	\$ 396,868.60	\$ -	\$ -	\$ -	\$ -	\$ 396,868.60
TOTAL CAFÉ 125 PLAN:	\$ 34,526.43	Less Exempt:				
TAXABLE PAY:	\$ 529,095.12	\$ 512,011.64				
		CALCULATED		From MMC Report		Difference
FICA - MED (ER)	1.45% \$ 7,671.88					
FICA - MED (EE)	1.45% \$ 7,671.88	\$ 7,671.89	\$	(0.01)		
FICA - SOC SEC (ER)	6.20% \$ 31,744.72					
FICA - SOC SEC (EE)	6.20% \$ 31,744.72	\$ 31,744.73	\$	(0.01)		
FED WITHHOLDING	\$ 46,000.40	\$ 46,000.40				
Employees over FICA-SS Cap: Roshanda Thomas \$ 8,669.28 Michael Gaines \$ 8,414.20 Paycode S - Employee Reimb: \$ - TOTAL: \$ 17,083.48						
TAX DEPOSIT:	\$ 124,833.60	\$ 124,833.64				
FICA - MEDICARE	2.50% \$ 15,343.76	\$15,343.78				
FICA - SOCIAL SECURITY	12.40% \$ 63,489.44	\$63,489.46				
FED WITHHOLDING	\$ 46,000.40	\$46,000.40				
TOTAL TAX:	\$ 124,833.60	\$124,833.64	\$	(0.04)		
		PREPARED BY:		Andrie Flores		
		PREPARED DATE:		11/20/2023		

Run Date: 11/20/23
Time: 09:04

MEMORIAL MEDICAL CENTER
Payroll Register (Bi-Weekly)
Pay Period 11/03/23 - 11/16/23 Run# 1

Page 107
P2REG

Final Summary

Pay Code Summary					Deductions Summary				
PayCd	Description	Hrs	OT	SH	WB	HO	CB	Gross	Code Amount
1	REGULAR PAY-S1	3946.50	N		N	N		234342.11	A/R 250.00 A/R2 A/R3
1	REGULAR PAY-S1	1945.50	N		N	N	N	94344.23	ADVANC AWARDS BCBSVI 1032.38
1	REGULAR PAY-S1	374.00	Y		N	N		12543.46	BOOTS CAFE H CAFE-1
2	REGULAR PAY-S2	2728.75	N		N	N		75470.64	CAFE-2 CAFE-3 CAFE-4
2	REGULAR PAY-S2	105.00	Y		N	N		4505.81	CAFE-5 CAFE-C CAFE-D 1608.93
3	REGULAR PAY-S3	1571.75	N		N	N		54439.38	CAFE-F 23243.19 CAFE-I
3	REGULAR PAY-S3	101.25	Y		N	N		5293.80	CAFE-L CAFE-P CANCER
4	CALL BACK PAY	20.75	N	1	N	N	Y	901.09	CHILD 570.69 CLINIC COMBIN 271.83
4	CALL BACK PAY	18.50	N	2	N	N	Y	785.36	CREDUN DD ADV DENTAL
4	CALL BACK PAY	.25	Y	1	N	N	Y	17.99	DEP-LF DIS-LF EAT
4	CALL BACK PAY	1.50	Y	2	N	N	Y	104.41	EATCSN FEDTAX 46000.40 FICA-M 7749.91
C	CALL PAY	2274.75	N	1	N	N		4549.50	FICA-O 31744.73 FIRSTC FLEX S 3447.31
D	DOUBLE TIME	19.75	N	1	N	N		1307.44	FLX FB FORT D FUTA
D	DOUBLE TIME	12.00	N	2	N	N		1098.81	GIFT S 217.03 GRANT GRP-IN
D	DOUBLE TIME	2.00	N	3	N	N		241.52	GTL HOSP-I ID TPT
D	DOUBLE TIME	5.50	Y	3	N	N		996.27	INSTAX 117.00 LEAF LEGAL 200.54
E	EXTRA WAGES		N		N	N	N	14320.43	MASA 634.00 MEALS 1837.98 MHTVIS
E	EXTRA WAGES		N	1	N	N	N	2456.45	MISC MISC/ MMSHR
F	FUNERAL LEAVE	24.00	N	1	N	N		850.08	NATFML 1523.92 OTHER PHI
I	INSERVICE	25.75	N	1	N	N		1169.71	PHI*** PR FIN RELAY
I	INSERVICE	2.00	Y	1	N	N		111.12	REPAY SAMS SCRUBS
K	EXTENDED-ILLNESS-BANK	154.00	N	1	N	N		4738.22	SIGNON ST-TX STONDF 1115.86
M	MEAL REIMBURSEMENT		N		N	N	N	106.83	STONE STONE2 STUDEN
P	PAID-TIME-OFF	273.72	N		N	N	N	12400.79	SUNACC 786.88 SUNILL 1206.28 SUNIND 739.47
P	PAID-TIME-OFF	1100.50	N	1	N	N		35905.04	SUNLIF 1063.06 SUNSTD 1968.40 SUNVIS
X	CALL PAY 2	144.00	N	1	N	N		288.00	SURCHS 360.00 TSA-1 TSA-2
Y	YMCA/CURVES		N		N	N	N	45.00	TSA-C TSA-P TSA-R 38862.96
Z	CALL PAY 3	96.00	N	1	N	N		288.00	TUTION UNIFOR UN/HOS
Grand Totals: 20947.72 (Gross: 563621.55 Deductions: 166752.95 Net: 396868.60)									✓
Checks Count:- FT 204 FT 14 Other 34 Female 224 Male 27 Credit OverAmt 13 ZeroNet Term Total: 251									✓

Andrew Delas Santos
11/20/23

Run Date: 11/20/23
Time: 10:13

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 11/03/23--11/16/23 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 1
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
02620	IVONNE AVILES	327.62	00063356	11/24/23
02312	HANNAH M GOOD	55.41	00063357	11/24/23
02963	DOROTHY J RENDON	1523.64	00063358	11/24/23
20012	ALEXIS LOREDO	876.17	00063359	11/24/23
30428	JULIAN HEYSQUIERDO	832.81	00063360	11/24/23
00041	CARL LEE KING	2465.99	DD	11/24/23
00083	SYLVIA A VARGAS	997.28	DD	11/24/23
00094	SYLVIA A MENDOZA	957.28	DD	11/24/23
00113	JACLYN CARREON	1138.13	DD	11/24/23
00132	SANDRA A BRAUN	895.31	DD	11/24/23
00192	BRENDA D PENA	1819.05	DD	11/24/23
00344	SANDRA LEE RUDDICK	2945.66	DD	11/24/23
00387	BILLIE F DUCKWORTH	2425.62	DD	11/24/23
00392	MONICA T CARR	1224.35	DD	11/24/23
00399	LINDA J TIJERINA	2461.57	DD	11/24/23
00401	VELMA J PINA	1698.76	DD	11/24/23
00417	SHERRY L KING	2571.10	DD	11/24/23
00423	DONN V STRINGO	2012.20	DD	11/24/23
00482	PAM FIKAC	1431.38	DD	11/24/23
00581	CYNTHIA L RUSHING	1674.59	DD	11/24/23
00681	RILLA RENEE WOOD	1737.13	DD	11/24/23
00697	MARIA C FARIAS	1194.64	DD	11/24/23
00707	KIMBERLY RESENDEZ	1744.95	DD	11/24/23
00895	EMILIE DIANE WILKEY	680.03	DD	11/24/23
01015	SUSAN B SMALLEY	2253.08	DD	11/24/23
01191	SHARON M SPARKS	507.39	DD	11/24/23
01234	JENISE N SVETLIK	2407.54	DD	11/24/23
01241	MANDY MACE	2407.58	DD	11/24/23
01367	MARILYN A SANDERS	1758.50	DD	11/24/23
01451	JENNIFER L ZISSA	407.09	DD	11/24/23
01791	RAUSHANAH J MONDAY	2131.71	DD	11/24/23
02011	ERIN R CLEVELAND	9807.40	DD	11/24/23
02014	AGAPITA C CANTU	694.29	DD	11/24/23
02021	ERIKA OSORNIA-SANCHEZ	842.00	DD	11/24/23
02022	AMANDA J GRIGGS, OTR	2551.86	DD	11/24/23
02064	ANNA LAURA GARCIA	1870.95	DD	11/24/23
02099	TRACI M SHEPCH	2851.46	DD	11/24/23
02112	LESLIE THOMAS	3698.61	DD	11/24/23
02132	JASMINE RUIZ	1785.54	DD	11/24/23
02135	NORMA ALLISON	1573.93	DD	11/24/23
02136	TAMMY ESQUIVEL	517.86	DD	11/24/23
02154	JUSTINE STRELCEZYK	1617.23	DD	11/24/23
02162	MIRIAM PALUKA	1442.22	DD	11/24/23
02168	JENSICA KNIGHT	3147.89	DD	11/24/23
02193	TIKI VENGLAR	1419.17	DD	11/24/23
02202	SENON I SANCHEZ	83.64	DD	11/24/23
02271	DAWN J BUDENIK	2252.03	DD	11/24/23
02301	NICOLAS TIJERINA	2353.79	DD	11/24/23
02302	CATHERINE MARIE DECILLOS	82.53	DD	11/24/23
02303	CONNIE M LUNA	2227.22	DD	11/24/23
02315	NINA M GREEN	2332.28	DD	11/24/23
02322	RICK OSORNIA	385.79	DD	11/24/23
02331	JESSICA B BIFFLE	1080.75	DD	11/24/23

Run Date: 11/20/23
Time: 10:13

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 11/03/23--11/16/23 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 2
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
02346	JEANNETTE L FALCON	2064.46	DD	11/24/23
02416	JANELLE SCOTT	1887.15	DD	11/24/23
02535	STEFANIE M SOLIZ	377.89	DD	11/24/23
02552	VERONICA RAGUSEIN	1954.81	DD	11/24/23
02678	MELISSA NESLONEY	1485.11	DD	11/24/23
02685	JULIANA TORRES	231.42	DD	11/24/23
02701	RONDA DANIELLE GOHLKE	2341.12	DD	11/24/23
02719	DAWN M MCCLELLAND	2095.14	DD	11/24/23
02720	ELDA M LUERA	2039.13	DD	11/24/23
02733	ROBIN N PLEDGER	2464.78	DD	11/24/23
02763	JESSICA MARQUEZ	1874.15	DD	11/24/23
02794	HEATHER L MUTCHLER	1923.46	DD	11/24/23
02812	BRITTANY N RUDDICK	1805.52	DD	11/24/23
02907	MARIA F LONGORIA	1271.01	DD	11/24/23
02927	MICHAEL L GAINES	6425.23	DD	11/24/23
02970	DIANNE G ATKINSON	2233.66	DD	11/24/23
03864	JACQUELINE R HERRERA	1504.73	DD	11/24/23
05003	COURTNE D THORLAKILL	3225.92	DD	11/24/23
05006	REGINA A MARTINEZ	2883.62	DD	11/24/23
05122	MARISSA RANGEL	829.98	DD	11/24/23
05345	ERICA NGUYEN	1854.83	DD	11/24/23
05641	AMANDA R KEY	1930.72	DD	11/24/23
05757	SHARON T HOLDER	2013.69	DD	11/24/23
07123	CYNTHIA GUERRA	1599.55	DD	11/24/23
07147	CHAD A VORCE	2448.76	DD	11/24/23
07878	DIANA C SNECKDA	1161.95	DD	11/24/23
11197	CATHERINE A SAENZ	2772.27	DD	11/24/23
11412	COURTNEY L MORKOVSKY	1397.92	DD	11/24/23
12011	KIMBERLY J REYNA	1002.15	DD	11/24/23
12115	LISA J MINOJOSA	1003.07	DD	11/24/23
12129	MICHAEL HERMES	1440.13	DD	11/24/23
15097	KYLE L DANIEL	3261.78	DD	11/24/23
15131	SAVANNAH HARLEY	1555.16	DD	11/24/23
15139	KRISTEN NICOLE BALLARD	1721.26	DD	11/24/23
15163	KELSEY HEINOLD	4308.34	DD	11/24/23
15286	DAWN M MAREK	2193.23	DD	11/24/23
15555	STEPHANIE MARTIN	785.81	DD	11/24/23
15909	JULIE NGUYEN	2078.18	DD	11/24/23
15915	BRIANNE J KEY	2692.58	DD	11/24/23
20156	ERIN ASHLEY WISDOM	2248.66	DD	11/24/23
20168	JOSHUA PEPPERS	817.69	DD	11/24/23
20178	AMY GARCIA	3448.01	DD	11/24/23
20184	MELISSA ZAMORANO	945.79	DD	11/24/23
20206	KELLI B GOFF	2482.18	DD	11/24/23
20207	SHAWNA G HARTL, MDT	2645.69	DD	11/24/23
20243	MELANIE CORTEZ	924.34	DD	11/24/23
20272	ANGELA YEAGER	1816.44	DD	11/24/23
20294	JESSICA D WALTHER	895.60	DD	11/24/23
20324	PATRICIA STRIBLEY	2271.87	DD	11/24/23
20343	SAVANNAH N SOCARRAS	547.87	DD	11/24/23
20456	SAYDI A ST CLAIR	746.24	DD	11/24/23
20484	BRIANNA S PASSMORE	403.15	DD	11/24/23
20759	JAMIE SADLER	1194.05	DD	11/24/23
20788	JAYLIN RAMIREZ	383.64	DD	11/24/23

Run Date: 11/20/23
Time: 10:13

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 11/03/23--11/16/23 Run: 1
Type=NET 10093001 OPERATING - PROSPERITY

Page 3
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
20797	BETHANN M DIGGS	2135.31	DD	11/24/23
20977	CHERYL L TESCH	2760.56	DD	11/24/23
20980	SAVANA LENTO	704.26	DD	11/24/23
21450	DIANA E LEAL	1567.40	DD	11/24/23
21629	JACOBY R CRAWFORD	1612.70	DD	11/24/23
22618	HEATHER L LOPEZ	386.20	DD	11/24/23
28034	KRISTINA A BUENGER	1108.47	DD	11/24/23
28120	JESSICA V SELVERA	953.01	DD	11/24/23
29199	KELLY A SCHOTT	2392.22	DD	11/24/23
31035	STACIE L EPLEY	2704.20	DD	11/24/23
31054	LORA L LAMBEKEN	955.91	DD	11/24/23
31219	LAUREN PHILLIPS	1552.20	DD	11/24/23
31241	MONICA SALAZAR	612.42	DD	11/24/23
31251	CYNTHIA L BIAS	1826.66	DD	11/24/23
31313	KATHERINE LYNN JIMENEZ	2080.46	DD	11/24/23
31319	STACY L FARMER	1833.44	DD	11/24/23
31463	EDWARD B MATULA	2552.17	DD	11/24/23
31508	RACHEL A HEFFNER	2015.67	DD	11/24/23
31821	KAYLA M ALVAREZ	1663.66	DD	11/24/23
38118	KRYSTELLA F KISIAH	1059.57	DD	11/24/23
38188	MADELINE ANDERSON	813.19	DD	11/24/23
41112	ANASTASIA L PEREZ	739.51	DD	11/24/23
41171	TOMMIE M TREVINO	869.67	DD	11/24/23
41219	GUADALUPE OLANDEZ	778.15	DD	11/24/23
41225	LESLIE A CRAIGEN	1413.37	DD	11/24/23
41236	PAMELA K VANNOY	1495.30	DD	11/24/23
41251	SARA YBARBO	830.25	DD	11/24/23
41261	BERNICE AGUILAR	831.90	DD	11/24/23
41269	BERENICE LUGO	746.09	DD	11/24/23
41274	KAREN GANN	1165.99	DD	11/24/23
41279	PAMELA R HARMON	931.62	DD	11/24/23
41347	ADRIANNA D STRAKOS	797.07	DD	11/24/23
41418	ANGEL M CASSEL	969.83	DD	11/24/23
41426	TASHA NORMAN	3504.70	DD	11/24/23
41506	JOSEFAT LUGO TORRES	821.28	DD	11/24/23
41612	SONJA A GUJARDO	1108.54	DD	11/24/23
41617	JACQUELINE M MARTINEZ	909.05	DD	11/24/23
41896	RENAE MICHELLE EMERY	606.48	DD	11/24/23
41897	ROXANNA MUNOZ	819.65	DD	11/24/23
41901	JUANITA R MILLER	1328.37	DD	11/24/23
41953	KAYLEEN TREVINO	782.88	DD	11/24/23
42106	CHRISTY SILVAS	965.21	DD	11/24/23
42112	SOCORRO C GONZALES	1013.37	DD	11/24/23
42122	LET ANA CHAVANA	1757.73	DD	11/24/23
42125	LUCY CALZADA	953.18	DD	11/24/23
42304	MIMI T NGUYEN	2238.95	DD	11/24/23
42536	MARIAH A SOCARRAS	691.95	DD	11/24/23
42820	MARIA D CHAVEZ	859.98	DD	11/24/23
42842	SHANNA S O DONNELL	12124.46	DD	11/24/23
50018	MICHELLE M MORALES	1472.92	DD	11/24/23
50148	PENNY GOULDEN	3461.85	DD	11/24/23
50161	BRITTNEY MICHELLE ZMORA	463.02	DD	11/24/23
50250	SUMNER E NICHOLSON	770.73	DD	11/24/23
50282	JACOB W HAMILTON, PT, DPT	2627.68	DD	11/24/23

Run Date: 11/20/23
Time: 10:13

MEMORIAL MEDICAL CENTER BI-WEEKLY
**** Check Register ****
Pay Period 11/03/23--11/16/23 Run: 1
Type=NET 10900001 OPERATING - PROSPERITY

Page 4
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
50310	JASMINE GRIGSBY	754.60	DD	11/24/23
50546	MELANIE K SAMAYCA	2135.84	DD	11/24/23
50573	DEANA R DAVIS	1594.20	DD	11/24/23
50596	BETTY S DAVIS	2057.30	DD	11/24/23
50719	DEBRA K MUSTERED	2366.57	DD	11/24/23
50928	ADINA RODRIGUEZ	727.09	DD	11/24/23
53541	JACLYN B HARTL	1623.40	DD	11/24/23
54024	MONICA A ESCALANTE	1117.39	DD	11/24/23
55025	LEA C RESENDEZ	1411.48	DD	11/24/23
55026	IRENE B PEREZ	803.56	DD	11/24/23
55127	APRIL N KUBALA	2700.91	DD	11/24/23
55371	BLANCA HERNANDEZ	401.69	DD	11/24/23
55382	SHANNON JACILDO	747.71	DD	11/24/23
55658	LAJUAN WILKE	775.74	DD	11/24/23
58510	RITA L POLENSKY	816.43	DD	11/24/23
60112	ROBERT A RODRIQUEZ	1968.91	DD	11/24/23
60131	NORA OVALLE	569.42	DD	11/24/23
60156	DANIELLE M KALISEK	1081.38	DD	11/24/23
60165	TERESA A BENITEZ	1530.81	DD	11/24/23
60587	NANCI S GARCIA	776.25	DD	11/24/23
60589	JASON J LOYA	1092.64	DD	11/24/23
60616	DOROTHY A LONGORIA	1065.62	DD	11/24/23
62322	ALAN KNIGHT	1614.80	DD	11/24/23
63124	SANJUAN M GARCIA	991.84	DD	11/24/23
63193	MICHAEL SOCARRAS	978.92	DD	11/24/23
63458	VIRGINIA C BERNARDINO	966.92	DD	11/24/23
65100	FELICITA BONUZ	674.62	DD	11/24/23
65125	MARTHA CUMPRAN	839.21	DD	11/24/23
65127	VERONICA ORTIZ	719.64	DD	11/24/23
65136	TINA KORANEK	961.02	DD	11/24/23
65148	MARTA INIGUEZ	744.34	DD	11/24/23
65151	ELIA OLACHIA	1069.49	DD	11/24/23
65189	ELVIRA SANCHEZ	730.80	DD	11/24/23
65205	JUANA SANTILLAN	756.22	DD	11/24/23
65213	LEE SIMERLY	1154.00	DD	11/24/23
65269	NATALIE BAREFIELD	960.91	DD	11/24/23
65315	ELVA RODRIGUEZ	937.14	DD	11/24/23
65393	RAMONA A PEREZ	1136.42	DD	11/24/23
65453	AMALIA L FLORES	1298.40	DD	11/24/23
65463	MARIA I VELOZ	771.18	DD	11/24/23
65486	ROSA RODRIGUEZ	870.54	DD	11/24/23
65513	MARIA MORALES	996.09	DD	11/24/23
65705	DOMITILA HERRERA	1053.31	DD	11/24/23
65715	MARIA R GOMEZ	951.79	DD	11/24/23
65865	MARIA F LEDEZMA	846.72	DD	11/24/23
68368	DOMITILA GARCIA	616.50	DD	11/24/23
68568	CHRISTOPHER RUTHERFORD	915.63	DD	11/24/23
68792	NAZARIO DIAZ HERNANDEZ	2097.47	DD	11/24/23
70119	SARA N BLEDSOE	2285.62	DD	11/24/23
72727	CHRISANDRA LYNN KOVAREK	68.28	DD	11/24/23
73749	GLORIA N REID	2269.79	DD	11/24/23
74159	CAROL VILLARREAL	1241.28	DD	11/24/23
75190	RIKA MILLER	2017.41	DD	11/24/23
76003	IRMA DELBON	720.45	DD	11/24/23

Run Date: 11/20/23
Time: 10:13

MEMORIAL MEDICAL CENTER
**** Check Register ****
Pay Period 11/03/23--11/16/23 Run: 1
Type=NET 10000001 OPERATING - PROSPERITY

Page 5
P2DISTP

Num.	Name	Amount	CHECK NUM	DATE
76115	JENNIFER R CARLOCK	801.67	DD	11/24/23
76120	RACHEL CANALES	1248.63	DD	11/24/23
76138	KAREN D GARCIA	749.79	DD	11/24/23
76218	ZOE VILLARREAL	527.64	DD	11/24/23
76300	AIDA JIMENEZ	831.38	DD	11/24/23
76313	PAMELA L BARTON	838.99	DD	11/24/23
76403	KATRINA A POKLUDA	1256.24	DD	11/24/23
76647	CHERYL A SEE	1070.14	DD	11/24/23
76706	GREGORY E MORALES	820.68	DD	11/24/23
76854	MARY PATTERSON	1069.35	DD	11/24/23
76985	VANESSA TRISTAN	348.22	DD	11/24/23
77646	FAREN A GONZALES	1094.47	DD	11/24/23
78020	MISTY R PASSMORE	1554.14	DD	11/24/23
78058	KYANN J POWER	289.26	DD	11/24/23
78072	DONNA W RAWLINGS	1539.60	DD	11/24/23
78128	ALEXA QUINTANILLA	851.63	DD	11/24/23
78287	MARISSA D ALMANZAR	2221.00	DD	11/24/23
78336	JESSICA L GLOVER	1748.46	DD	11/24/23
78566	MELISSA K GEE	850.78	DD	11/24/23
78764	ASHLEY D HADLEY	2017.18	DD	11/24/23
78781	KRISTEN R MACHICEK	2533.40	DD	11/24/23
78787	FARAH I JANAK	2513.60	DD	11/24/23
78897	DAYLE J ROBINSON	646.21	DD	11/24/23
80008	ADAM D BESIO	2472.64	DD	11/24/23
80141	JEANNIE ORTA	1616.08	DD	11/24/23
80928	BRYAN ROBGOOD	1988.35	DD	11/24/23
82227	CAITLIN A CLEVINGER	1285.07	DD	11/24/23
86482	MEGAN M HARPER	809.54	DD	11/24/23
86576	ELSA HERRERA	781.93	DD	11/24/23
88125	LISA M TREVINO	1171.83	DD	11/24/23
88148	MICHELLE CUMBERLAND	2151.83	DD	11/24/23
88321	ANDREW DE LOS SANTOS	2651.53	DD	11/24/23
88435	JOE GARCIA	1840.96	DD	11/24/23
90320	ROSHANDA S THOMAS	6136.03	DD	11/24/23
90929	STEVE BROCK	4923.14	DD	11/24/23
93231	ANDRIE M FLORES	1830.89	DD	11/24/23
98756	ADRIANNA M GALVAN	1634.43	DD	11/24/23

396868.60

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- Nov 13, 2023 - Nov 19, 2023

Date	Bank Description
11/17/2023	STATE COMPTROLR TEXNET 07919702/31116 2100002
11/17/2023	PAY PLUS ACHTrans 000000006845372 1010006955
11/17/2023	AMERISOURCE BERG PAYMENTS 0100007768 2100002
11/16/2023	PAY PLUS ACHTrans 000000006716117 1010006944
11/15/2023	PAY PLUS ACHTrans 000000006487311 1010006933
11/15/2023	TEXAS COUNTY DRS RECEIVABLE 0419 21000025421
11/15/2023	FDMS FDMS PYMT 052-1737276-000 4100012386386
11/15/2023	FDMS FDMS PYMT 052-1743548-000 4100012388357
11/15/2023	FDMS FDMS PYMT 052-2100911-000 4100012389256
11/15/2023	FDMS FDMS PYMT 052-1743547-000 4100012386923
11/14/2023	WEBFILE TAX PYMT 00 902/73972219 21000025579
11/14/2023	PAY PLUS ACHTrans 000000006375111 1010006921
11/14/2023	MCKESSON DRUG AUTO ACH ACH05741203 910000138
11/13/2023	DEBTMGMTSERVICES PAYMENT 0000 41036048226230
11/13/2023	PAY PLUS ACHTrans 000000006271226 1010006902
11/13/2023	IRS USATAXPYMT 270371780222160 6103601003143

MMC Notes
-CHIRP IGT
- 3rd Party Payor Fee
- 340B Drug Program Expense
- 3rd Party Payor Fee
- 3rd Party Payor Fee
- Retirement Funding
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Credit Card Processing Fee
- Sales Tax
- 3rd Party Payor Fee
- 340B Drug Program Expense
- Wage Garnishment
- 3rd Party Payor Fee
- Payroll Taxes

Amount
\$ 52.52
\$ 2,593.35
\$ 25.02
\$ 104.00
\$ 11.82
\$ 27.56
\$ 220.92
\$ 190,641.93
\$ 120.09
\$ 80.06
\$ 45.64
\$ 40.03
\$ 2,063.60
\$ 11,739.80
\$ 175.45
\$ 27.56
\$ 117,623.43
397,243.30

PAY PLUS
52.52
25.02
104.00
11.82
27.56
220.92

IGT
171,899.00

CC fees
120.09
80.06
45.64
40.03

Debt Mgmt.
285.82
175.45

220.92
71,899.00
285.82
175.45
72,581.19

Andrew De Los Santos
ANDREW DE LOS SANTOS
Memorial Medical Center

November 20, 2023
* Approved 11-15-23 cc
* Approved 11-06-23 cc

PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

Date	Description
------	-------------

MMC Notes

Amount
397,243.30
2,593.35
190,641.93
2,063.60
11,739.80
117,623.43
72,581.19
72,581.19
72,581.19
0.00

Andrew De Los Santos
ANDREW DE LOS SANTOS
Memorial Medical Center

November 20, 2023

APPROVED ON
NOV 20 2023
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



Electronic Payment Network



Texas Comptroller of Public Accounts

Transaction Summary

Transaction Complete
Trace #:

Texas Health and Human Services Commission Memorial Medical Center Operating County

Payment Total	\$71,899.00
Bank Routing and Account Number	
Settlement Date	11/17/2023
CHIRP Amount	\$71,899.00 ✓
Entered By	Andrew De Los Santos

RECEIVED BY THE
COUNTY AUDITOR ONNOV 16 2023
11/16/202310:05
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

11824 THE CRESCENT ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
110923		11/14/20	11/09/20	12/09/20		4,140.00	0.00	0.00	4,140.00 ✓
TRANSFER <i>W/ insurance pymt deposited into MML operating</i>									
Vendor Totals:						Gross	Discount	No-Pay	Net
11824 THE CRESCENT						4,140.00	0.00	0.00	4,140.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,140.00	0.00	0.00	4,140.00

APPROVED ON

NOV 16 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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COUNTY AUDITOR ON

NOV 16 2023

11/16/2023

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

0

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Vendor# Vendor Name

Class Pay Code

11836 GOLDENCREEK HEALTHCARE ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
111323A		11/15/20	11/13/20	12/13/20		6,004.95	0.00	0.00	6,004.95 ✓
	TRANSFER	<i>NH insurance pymt deposited into MMHC operating</i>							
111323		11/15/20	11/13/20	12/13/20		889.28	0.00	0.00	889.28 ✓
	TRANSFER								
111023B		11/15/20	11/10/20	12/10/20		20,175.01	0.00	0.00	20,175.01 ✓
	TRANSFER								
111023		11/15/20	11/10/20	12/10/20		3,181.76	0.00	0.00	3,181.76 ✓
	TRANSFER								
111023A		11/15/20	11/10/20	12/10/20		61,418.32	0.00	0.00	61,418.32 ✓
	TRANSFER								

Vendor Totals Number Name

11836 GOLDENCREEK HEALTHCARE

Gross	Discount	No-Pay	Net
91,669.32	0.00	0.00	91,669.32

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	91,669.32	0.00	0.00	91,669.32

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NOV 16 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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11/16/202309:59
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

12696 GULF POINTE PLAZA ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
110623		11/14/20	11/08/20	12/09/20		209.30	0.00	0.00	209.30 ✓
	TRANSFER	NH insurance pymt deposited into mmc operating							
110723		11/14/20	11/07/20	12/09/20		213.60	0.00	0.00	213.60 ✓
	TRANSFER								
110823		11/14/20	11/08/20	12/09/20		437.36	0.00	0.00	437.36 ✓
	TRANSFER								
111023A		11/15/20	11/10/20	12/10/20		224.35	0.00	0.00	224.35 ✓
	TRANSFER								
111023		11/15/20	11/10/20	12/10/20		228.17	0.00	0.00	228.17 ✓
	TRANSFER								
111323		11/15/20	11/13/20	12/13/20		441.78	0.00	0.00	441.78 ✓
	TRANSFER								
Vendor Totals						Gross	Discount	No-Pay	Net
12696 GULF POINTE PLAZA						1,754.56	0.00	0.00	1,754.56

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,754.56	0.00	0.00	1,754.56

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NOV 16 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

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COUNTY AUDITOR ON

NOV 16 2023

11/16/2023
CALHOUN COUNTY, TEXAS
10:03

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
110823		11/14/20	11/08/20	12/09/20		2,400.00	0.00	0.00	2,400.00

TRANSFER NH insurance pymt deposited into MHC open by

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE		2,400.00	0.00	0.00	2,400.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	2,400.00	0.00	0.00	2,400.00

APPROVED ON

NOV 16 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ONNOV 16 2023
11/16/202309:55
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Dates Through:

0

ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

12792 BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
110623		11/14/20	11/08/20	12/09/20		162.26	0.00	0.00	162.26 ✓
	TRANSFER	NH insurance pymt deposited into MHC operating							
110723		11/14/20	11/07/20	12/09/20		155.59	0.00	0.00	155.59 ✓
	TRANSFER								
111023A		11/15/20	11/10/20	12/10/20		23,752.15	0.00	0.00	23,752.15 ✓
	TRANSFER								
111023B		11/15/20	11/10/20	12/10/20		9,483.21	0.00	0.00	9,483.21 ✓
	TRANSFER								
111023		11/15/20	11/10/20	12/10/20		464.31	0.00	0.00	464.31 ✓
	TRANSFER								
111323		11/15/20	11/13/20	12/13/20		10,670.34	0.00	0.00	10,670.34 ✓
	TRANSFER								
110823		11/16/20	11/08/20	12/09/20		3,316.58	0.00	0.00	3,316.58 ✓
	TRANSFER								
Vendor Totals Number Name						Gross	Discount	No-Pay	Net
12792 BETHANY SENIOR LIVING						48,004.44	0.00	0.00	48,004.44

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	48,004.44	0.00	0.00	48,004.44

Account	Previous Beginning Balance	Transfer-Det	ACH Transfer In	Pending Credits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
~~AMERIGROUP~~	98,557.00	98,773.88	153,406.82		153,814.94	124,240.73
					Bank Balance Variance	
					Leave in Balance	100.00
					Molina Y6 Q4 QIPP	10,001.86
					Amerigroup Y6Q4 QIPP	19,090.00
					Oct. November Interest	182.37
					Adjust Balance/Transfer Amt	124,240.71
	10,260.15	96,003.91	101,042.54		101,117.18	87,585.47
					Bank Balance Variance	
					Leave in Balance	100.00
					Molina Y6 Q4 QIPP	4,618.99
					Amerigroup Y6Q4 QIPP	8,116.31
					Oct. November Interest	156.64
					Adjust Balance/Transfer Amt	87,585.47
	250,992.81	236,102.04	133,672.17		134,002.95	99,933.38
					Bank Balance Variance	
					Leave in Balance	100.00
					Molina Y6 Q4 QIPP	3,170.28
					Amerigroup Y6Q4 QIPP	7,366.51
					Claim pymt to Tusculum	21,500.00
					Oct. November Interest	180.78
					Adjust Balance/Transfer Amt	99,933.34
	32,924.20		54,602.05		87,526.25	
					Bank Balance Variance	
					Leave in Balance	100.00
					Y5 IAR/Y5 NOT REFUND	41,902.69
					Molina Y6 Q4 QIPP	6,827.15
					Amerigroup Y6Q4 QIPP	9,185.08
					November Interest	84.48
					Adjust Balance/Transfer Amt	113,574.15
	113,546.39	113,101.35	95,499.34		95,684.38	76,629.53
					Bank Balance Variance	
					Leave in Balance	100.00
					Molina Y6 Q4 QIPP	3,006.31
					Amerigroup Y6Q4 QIPP	5,726.40
					Oct. November Interest	226.12
					Adjust Balance/Transfer Amt	76,629.53
124,240.71						
87,585.47						
99,933.38						
76,629.53						
388,391.09						
TOTAL TRANSFERS						388,391.09

TOTAL TRANSFERS 368,381.06

Approved: Andrew de los Santos
ANDREW DE LOS SANTOS 11/20/2021

APPROVED ON
NOV 20 2023
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	
11/17/2023 1219	64,339.52							
11/17/2023 MOUNA HEALTHCARE MOUNAACH 01238215 42000017		78,335.53			16,396.33	16,342.15	10,061.86	28,332.67
11/17/2023 MANAGEANDNET1718 MNS PMNT 00000000000093 41		7,125.00						7,125.00
11/17/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		3,935.49						3,935.49
11/17/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2		0.90						0.90
11/16/2023 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	34,360.11							
11/16/2023 MANAGEANDNET1718 MNS PMNT 00000000000093 41		5,184.00						5,184.00
11/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000206247		5,067.98						5,067.98
11/16/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2		6,000.00						6,000.00
11/16/2023 AMERIGROUP CORPO E-PAYMENT EES268599 111000		62,638.32			32,163.82	32,163.30	19,050.00	46,343.30
11/15/2023 Enhanced Analysis Ch								
11/14/2023 HNB - ECHO HCCLAIMPMT 746003411 440000224761		7,416.09						7,416.09
11/13/2023 HNB - ECHO HCCLAIMPMT 746003411 440000276453		21,711.51						21,711.51
	98,773.88	153,408.82			49,366.70	47,606.15	29,091.86	124,314.97
	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP-TI	
11/17/2023 MOUNA HEALTHCARE MOUNAACH 01238215 42000017		15,453.29						15,453.29
11/17/2023 MANAGEANDNET1718 MNS PMNT 00000000000093 41		4,320.00			9,309.60	12,153.60	6,636.95	4,320.00
11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000245861		421.44						421.44
11/17/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384		7,500.00						7,500.00
11/17/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2		393.44						393.44
11/16/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III	84,704.04							
11/16/2023 Deposit		1,600.00						1,600.00
11/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000206247		343.62						343.62
11/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000206247		78.49						78.49
11/16/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384		10,650.00						10,650.00
11/16/2023 HUMANA CHA DISB HCCLAIMPMT 34928164 42000018		663.48						663.48
11/16/2023 AMERIGROUP CORPO E-PAYMENT EES268599 111000		25,458.72			6,338.32	23,130.35	8,816.14	20,682.80
11/15/2023 250	11,299.47							
11/15/2023 AARP Supplementa HCCLAIMPMT 746003411 124384		3,800.00						3,800.00
11/13/2023 HNB - ECHO HCCLAIMPMT 746003411 440000276453		21,547.04						21,547.04
11/13/2023 HNB - ECHO HCCLAIMPMT 746003411 440000276453		5,026.12						5,026.12
	98,003.51	101,060.54			9,642.72	36,274.19	13,475.07	87,585.47
	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP-TI	
11/17/2023 308	26,585.29							
11/17/2023 MOUNA HEALTHCARE MOUNAACH 01238215 42000017		12,900.97			3,576.78	9,324.18	9,870.28	9,870.28
11/17/2023 MANAGEANDNET1718 MNS PMNT 00000000000093 41		6,360.00						6,360.00
11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000245298		932.70						932.70
11/17/2023 HUMANA CHA DISB HCCLAIMPMT 35050474 42000013		1,975.00						1,975.00
11/17/2023 DEVOTED HEALTH P HCCLAIMPMT 21000020191722		1,532.00						1,532.00
11/16/2023 309	5,850.00							
11/16/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III	223,169.75							
11/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000106247		146.96						146.96
11/16/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384		1,230.00						1,230.00
11/16/2023 DEVOTED HEALTH P HCCLAIMPMT 21000024641493		9,000.00						9,000.00
11/16/2023 DEVOTED HEALTH P HCCLAIMPMT 21000014641457		2,568.44						2,568.44
11/16/2023 DEVOTED HEALTH P HCCLAIMPMT 21000024641455		10,432.00						10,432.00
11/16/2023 AMERIGROUP CORPO E-PAYMENT EES268599 111000		24,355.02			6,820.78	17,534.28	7,366.81	17,188.51
11/15/2023 HNB - ECHO HCCLAIMPMT 746003411 440000185163		7,634.98						7,634.98
11/15/2023 HUMANA CHA DISB HCCLAIMPMT 34821737 42000016		3,720.00						3,720.00
11/15/2023 AARP Supplementa HCCLAIMPMT 746003411 124384		2,000.00						2,000.00
11/14/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026597440		1,384.85						1,384.85
11/14/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026597438		22,500.00						22,500.00
11/14/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026597436		10,444.00						10,444.00
11/14/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026597434		40.26						40.26
11/14/2023 DEVOTED HEALTH P HCCLAIMPMT 21000026597432		4,322.00						4,322.00
11/13/2023 HNB - ECHO HCCLAIMPMT 746003411 440000276453		8,793.03						8,793.03
	256,202.04	133,672.17			10,397.53	27,058.42	11,216.79	122,435.39
	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP-TI	
11/17/2023 MOUNA HEALTHCARE MOUNAACH 01238215 42000017		16,890.53			5,318.46	10,772.04	4,827.15	11,768.35
11/17/2023 AARP Supplementa HCCLAIMPMT 746003411 124384		9,800.00						9,800.00
11/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000206247		21.71						21.71
11/16/2023 AMERIGROUP CORPO E-PAYMENT EES268599 111000		30,620.15			10,131.48	20,488.67	9,186.08	21,494.18
11/15/2023 HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2		560.60						560.60
11/13/2023 HNB - ECHO HCCLAIMPMT 746003411 440000276453		1,508.99						1,508.99
	54,602.05				15,448.94	31,260.61	14,011.23	40,588.83
	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP-TI	
11/17/2023 1281	5,442.28							
11/17/2023 MOUNA HEALTHCARE MOUNAACH 01238215 42000017		10,001.08			5,085.94	4,915.15	3,000.32	7,000.76
11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000185299		2,713.12						2,713.12
11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000245861		11,467.17						11,467.17
11/17/2023 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000		3,695.50						3,695.50
11/16/2023 WIRE OUT CANTEX HEALTH CARE CENTERS III	107,775.89							
11/16/2023 Deposit		2,200.00						2,200.00
11/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000206247		51.77						51.77
11/16/2023 AMERIGROUP CORPO E-PAYMENT EES268599 111000		19,086.08			9,525.95	9,402.06	5,726.40	13,583.61
11/15/2023 Enhanced Analysis Ch								
11/14/2023 MANAGEANDNET1718 MNS PMNT 0000000000002487 41		3,528.00						3,528.00
11/14/2023 HUMANA CHA DISB HCCLAIMPMT 34714829 42000013		930.00						930.00
11/14/2023 HNB - ECHO HCCLAIMPMT 746003411 440000225191		6,615.67						6,615.67
11/14/2023 HNB - ECHO HCCLAIMPMT 746003411 440000224761		2,298.19						2,298.19
11/14/2023 HNB - ECHO HCCLAIMPMT 746003411 440000224761		3,325.82						3,325.82
11/13/2023 UnitedHealthcare HCCLAIMPMT 746003411 124384		5,400.00						5,400.00
11/13/2023 HUMANA INS CO HCCLAIMPMT 3488991 8300003166		14,125.00						14,125.00
	113,301.95	85,439.34			14,771.89	14,317.31	8,726.73	76,712.61
TOTALS	564,280.78	528,180.92			99,678.78	155,516.78	76,543.67	451,837.25

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❖ DDA (15)

Prior Day Balance	Collected Balance	Available Balance	Current Balance
\$6,017,468.19	\$6,389,125.94	\$6,532,590.26	\$6,389,125.94

Account Name	Account Number	Prior Day Balance	Collected Balance	Available Balance	Current Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357		\$3,197,941.66	\$3,342,144.58	\$3,197,941.66	\$3,054,915.83
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365		\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373		\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381 ✓		\$153,614.94 ✓	\$147,669.56	\$153,614.94	\$173,550.50
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403 ✓		\$101,317.18 ✓	\$101,317.18	\$101,317.18	\$73,219.18
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411 ✓		\$134,062.95 ✓	\$131,897.55	\$134,062.95	\$135,947.61
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438 ✓		\$85,684.38 ✓	\$114,972.60	\$85,684.38	\$63,249.78
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446 ✓		\$87,526.25 ✓	\$89,012.33	\$87,526.25	\$65,635.75
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454		\$181,645.13	\$183,436.13	\$181,645.13	\$18,381.50
MMC - NH GULF POINTE PLAZA - PRIVATE PAY *5433		\$656.44	\$656.44	\$656.44	\$131.36
MMC - NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441		\$7,023.17	\$11,023.17	\$7,023.17	\$5,023.17
MMC - NH BETHANY SENIOR LIVING *5505		\$225,399.23	\$225,399.23	\$225,399.23	\$151,608.02
MMC - NH TUSCANY VILLAGE *7407		\$118,881.88	\$118,881.88	\$118,881.88	\$86,432.80
MMC - BETHANY SR LIVING - OACA *3660		\$100.00	\$100.00	\$100.00	\$100.00
MMC - MONEY MARKET FUND *2998		\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,398.35

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
10/23/2023

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
~~Golden Care~~		67,767.17	69,075.67	182,953.63		181,645.13	125,805.20
					Bank Balance	181,645.13	
					Variance		
					Leave in Balance	100.00	
					Superior Y6Q4	33,305.45	
					Suprelor Y7 September	22,250.98	
					Nov-Interest	183.50	

Adjust Balance/Transfer Amt 125,805.20

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

11/20/2023

APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

11/17/2023 Centene Management ACN008765433516 1110000228

11/16/2023 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC

11/16/2023 Deposit

11/16/2023 TSYS/TRANSFIRST CR CD DEP 543884555876917 81

11/16/2023 HNB - ECHO HCCLAIMPMT 746005411 440000205424

11/15/2023 GOLDENCREKHEALT MERC DEP 1220356 9100001011

11/15/2023 AETNA ASOI HCCLAIMPMT 1588075944 51000011285

11/14/2023 GOLDENCREKHEALT ELEC DENT 1220156 910000016

11/14/2023 Centene Management ACN008765433516 1110000277

MMC PORTION							NM PORTION
Transfer-Out	Transfer-In	QPP/Comp1	QPP/Comp2	QPP/Comp3	QPP/Comp4	QPP/TI	
					BLAZE		
67,483.67	83,783.62			27,490.62	55,778.02	33,305.45	49,588.18
	63,253.43						63,253.43
	800.00						800.00
	9,021.12						9,021.12
	988.31						988.31
	95.50						95.50
1,592.00	25,518.44	20,064.00	5,457.44			32,250.84	3,280.46
69,075.67	182,953.63	20,064.00	5,457.44	27,490.62	55,778.02	55,556.43	127,397.20

returned check payment for resident.
Should be coming out of golden creek
disbursement account. In process
of being corrected.

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DDA (15)

Prior Day Balance	Collected Balance	Available Balance	Current Balance
\$6,017,468.19	\$6,389,125.94	\$6,532,590.26	\$6,389,125.94

Account Name	Account Number	Prior Day Balance	Collected Balance	Available Balance	Current Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357		\$3,197,941.66	\$3,243,349.58	\$3,197,941.66	\$3,059,515.83
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365		\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373		\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381		\$153,614.94	\$153,665.38	\$153,614.94	\$173,559.54
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403		\$101,317.18	\$101,317.18	\$101,317.18	\$73,219.10
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411		\$134,062.95	\$151,597.55	\$134,062.95	\$135,947.61
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438		\$85,684.38	\$114,078.66	\$85,684.38	\$58,049.78
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446		\$87,526.23	\$89,012.15	\$87,526.23	\$85,519.76
MEMORIAL MEDICAL / NH GOLOSIN CREEK HEALTHCARE *4454		\$181,645.13	\$181,436.13	\$181,645.13	\$98,361.50
MMC - NH GULF POINTE PLAZA - PRIVATE PAY *5433		\$656.44	\$656.44	\$656.44	\$151.36
MMC - NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441		\$7,023.17	\$11,023.17	\$7,023.17	\$9,023.17
MMC - NH BETHANY SENIOR LIVING *5506		\$225,399.23	\$225,399.23	\$225,399.23	\$101,606.02
MMC - NH TUSCANY VILLAGE *13407		\$118,881.88	\$118,881.88	\$118,881.88	\$86,492.50
MMC - BETHANY SR LIVING - DACA *3669		\$100.00	\$100.00	\$100.00	\$100.00
MMC - MONEY MARKET FUND *2998		\$2,094,298.35	\$2,094,308.35	\$2,094,298.35	\$2,094,398.35

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
11/20/2023

Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home	15,919.07	15,819.07	556.44			656.44	656.44
Bank Balance						656.44	656.44
Variance							100.00
Leave in Balance							

					Adjust Balance/Transfer Amt.	556.44	
Account	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home	50,107.40	50,007.40	6,923.17			7,023.17	6,923.17
Bank Balance						7,023.17	7,023.17
Variance							100.00
Leave in Balance							

					Adjust Balance/Transfer Amt.	6,923.17	
					TOTAL TRANSFERS	7,479.61	

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

Approved: *Andrew De Los Santos*
ANDREW DE LOS SANTOS
11/20/2023

APPROVED ON
NOV 20 2023
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

SHI-SNG HNS-2023-11

11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000245861
 11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000245594
 11/16/2023 WIRE OUT HMG Rockport SNF, LP - Commercial
 11/13/2023 HNB - ECHO HCCLAIMPMT 746003411 440000274489

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp		QIPP/Comp4		QIPP TI	
		QIPP/Comp1	2	QIPP/Comp3	&Lapse		
-	24.00	-	-	-	-	-	24.00
-	501.08	-	-	-	-	-	501.08
15,819.07	-	-	-	-	-	-	-
-	31.36	-	-	-	-	-	31.36
-	-	-	-	-	-	-	-
15,819.07	556.44	-	-	-	-	-	556.44

SHI-SNG HNS-2023-11

11/17/2023 MERCHANT BANKCO DEPOSIT 496478518889 9100001
 11/16/2023 WIRE OUT HMG Rockport SNF, LP - Commercial
 11/16/2023 Deposit
 11/15/2023 MERCHANT BANKCO DEPOSIT 496478518889 9100001
 11/13/2023 MERCHANT BANKCO DEPOSIT 496478518889 9100001
 11/13/2023 MERCHANT BANKCO DEPOSIT 496478518889 9100001

MMC PORTION							NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp		QIPP/Comp4		QIPP TI	
		QIPP/Comp1	2	QIPP/Comp3	&Lapse		
50,007.40	2,000.00	-	-	-	-	-	2,000.00
-	1,553.26	-	-	-	-	-	1,553.26
-	1,234.91	-	-	-	-	-	1,234.91
-	588.00	-	-	-	-	-	588.00
-	1,547.00	-	-	-	-	-	1,547.00
-	-	-	-	-	-	-	-
50,007.40	6,923.17	-	-	-	-	-	6,923.17
65,826.47	7,479.61	-	-	-	-	-	7,479.61

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DDA (15)

Prev Day Balance	Collected Balance	Available Balance	Current Balance
\$6,017,468.19	\$6,389,125.94	\$6,532,590.26	\$6,389,125.94

MEMORIAL MEDICAL CENTER - OPERATING *4357

\$3,197,941.66

\$3,243,346.66

\$3,197,941.66

\$3,056,915.81

MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365

\$539.81

\$534.81

\$534.81

\$535.81

MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373

\$434.57

\$434.57

\$434.57

\$434.57

MEMORIAL MEDICAL CENTER / NH ASHFORD *4381

\$153,614.94

\$197,565.86

\$153,614.94

\$173,580.54

MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403

\$101,317.18

\$101,317.18

\$101,317.18

\$75,218.10

MEMORIAL MEDICAL CENTER / NH CRESCENT *4411

\$134,062.95

\$151,597.55

\$134,062.95

\$135,947.61

MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438

\$85,684.38

\$114,078.64

\$85,684.38

\$63,249.78

MEMORIAL MEDICAL CENTER / NH FORT BEND *4446

\$87,526.25

\$85,012.88

\$87,526.25

\$65,635.75

MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454

\$181,645.13

\$183,436.13

\$181,645.13

\$98,381.30

MMC - NH GULF POINTE PLAZA - PRIVATE PAY *5433

\$656.44

\$656.44

\$656.44

\$151.36

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

\$7,023.17

\$11,023.17

\$7,023.17

\$5,023.17

MMC - NH BETHANY SENIOR LIVING *5505

\$225,399.23

\$225,399.23

\$225,399.23

\$101,608.02

MMC - NH TUSCANY VILLAGE *3407

\$118,881.88

\$118,881.88

\$118,881.88

\$80,442.80

MMC - BETHANY SR LIVING - DACA *3660

\$100.00

\$100.00

\$100.00

\$100.00

MMC - MONEY MARKET FUND *2998

\$2,094,298.35

\$2,094,298.35

\$2,094,298.35

\$2,094,298.35

Memorial Medical Center ✓
 Nursing Home UPL
 Weekly Tuscany Transfer
 Prosperity Accounts
 11/20/2023

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cls Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home	37,389.16	37,006.14	118,498.86			118,881.88	79,227.23
					Bank Balance	118,881.88	
					Variance		
					Leave in Balance	100.00	
					Molina Y6 Q4 QJPP	13,531.09	
					Amerigroup Y6Q4 QJPP	25,740.54	
					November Interest	283.02	
					Adjust Balance/Transfer Amt	79,227.23	
					Approved: <i>Andrew De Los Santos</i>		
					ANDREW DE LOS SANTOS		11/20/2023

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
 NOV 20 2023
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

11/17/2023

Transfer-Out

Transfer-In

MMC PORTION				
QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI

NH PORTION

11/17/2023	1138	16,672.93	-	-	-	-	-	-	-	-
11/17/2023 MOLINA HEALTHCARE MOLINAACH 01236213 42000037		-	27,062.17	-	-	7,512.30	19,549.87	13,531.09	✓	13,531.09
11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000245299		-	2,613.68	-	-	-	-	-	-	2,613.68
11/17/2023 HNB - ECHO HCCLAIMPMT 746003411 440000245861		-	19,446.16	-	-	-	-	-	-	19,446.16
11/16/2023 WIRE OUT LINBAR ENTERPRISES, LLC		20,333.21	-	-	-	-	-	-	-	-
11/16/2023 Deposit		-	5,850.00	-	-	-	-	-	-	5,850.00
11/16/2023 Deposit		-	8,344.89	-	-	-	-	-	-	8,344.89
11/16/2023 HNB - ECHO HCCLAIMPMT 746003411 440000206247		-	1,044.40	-	-	-	-	-	-	1,044.40
11/16/2023 NOVITAS SOLUTION HCCLAIMPMT 676201 420000105		-	2,656.49	-	-	-	-	-	-	2,656.49
11/16/2023 AMERIGROUP CORP E-PAYMENT EES2698598 111000		-	51,481.07	-	-	14,294.79	37,186.28	25,740.54	✓	25,740.54
		37,006.14	118,498.86	-	-	21,807.09	56,736.15	39,271.62	✓	79,227.24

Accounts

[Quick View](#) [Transaction Search](#) [Account Summary](#)

Account Balances

[Card View](#)[Table View](#)

Search Accounts

☐ Make my Default View Print Download Search

Select View

Select Type

Account Number

Account Nickname

All Accounts By Type

All Types

Collapse All

Sort Display Name

DDA (15)

Prnt Day Balance	Collected Balance	Available Balance	Current Balance
\$6,017,468.19	\$6,389,125.94	\$6,532,590.26	\$6,389,125.94

Account Name	Prnt Day Balance	Collected Balance	Available Balance	Current Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357	\$3,197,941.66	\$3,243,248.38	\$3,197,941.66	\$3,058,915.82
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365	\$539.81	\$539.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING *4373	\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381	\$153,614.94	\$197,565.26	\$153,614.94	\$173,550.94
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403	\$101,317.18	\$101,317.18	\$101,317.18	\$73,219.10
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411	\$134,062.99	\$151,587.55	\$134,062.99	\$135,947.81
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438	\$85,684.38	\$114,978.66	\$85,684.38	\$63,219.78
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446	\$87,526.25	\$89,012.09	\$87,526.25	\$85,838.75
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454	\$181,645.13	\$182,416.13	\$181,645.13	\$138,381.50
MMC - NH GULF POINTE PLAZA - PRIVATE PAY *5439	\$656.44	\$656.44	\$656.44	\$191.16
MMC - NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441	\$7,023.17	\$11,023.17	\$7,023.17	\$5,023.17
MMC - NH BETHANY SENIOR LIVING *5506	\$225,399.23	\$225,399.23	\$225,399.23	\$161,408.00
MMC - NH TUSCANY VILLAGE *3407	\$118,881.88	\$118,881.88	\$118,881.88	\$80,432.60
MMC - BETHANY SR LIVING - OACA *3660	\$100.00	\$100.00	\$100.00	\$100.00
MMC - MONEY MARKET FUND *2998	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,298.35

Memorial Medical Center
 Nursing Home UPL
 Weekly HSLTransfer
 Prosperity Accounts
 11/20/2023

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Che Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
~~Bethany Senior Living~~		100,895.23	100,562.98	215,066.98			225,399.23	184,944.73
						Bank Balance	229,399.23	
						Variance:		
						Leave in Balance	100.00	
						Superior Y6Q4	21,461.65	
						Superior Y7 September	18,660.60	
						WCA		
						November Interest	232.25	
						Adjust Balance/Transfer Amt	184,944.73	
						Approved: <i>Andrew De Los Santos</i>		
						ANDREW DE LOS SANTOS		11/20/2023

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

NOV 20 2023

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

11/17/2023 HDC SWEEP FAC N236 31316969277508 SWEEP FR
 11/17/2023 HOSPICE OF SOUTH Payments NF 113121650045725
 11/17/2023 Centene Manage ACN 0087654331A 1130000223
 11/16/2023 WIRE OUT PORT LAUACA NH, LLC
 11/16/2023 Deposit
 11/16/2023 Deposit
 11/16/2023 Deposit
 11/16/2023 Deposit
 11/16/2023 Deposit
 11/14/2023 HDC SWEEP FAC N236 31316969277508 SWEEP FR
 11/14/2023 Centene Manage ACN 0087654331A 1130000227
 11/13/2023 Deposit
 11/13/2023 Deposit
 11/13/2023 Deposit

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapte	QIPP TI	
-	1,081.00	-	-	-	-	-	1,081.00
-	1,381.22	-	-	-	-	-	1,381.22
-	61,316.98	-	-	16,850.67	44,438.32	23,462.63	39,857.34
100,562.98	-	-	-	-	-	-	-
-	40,079.86	-	-	-	-	-	40,079.86
-	8,283.07	-	-	-	-	-	8,283.07
-	5,850.00	-	-	-	-	-	5,850.00
-	42,799.40	-	-	-	-	-	42,799.40
-	4,156.51	-	-	-	-	-	4,156.51
-	13,356.02	-	-	-	-	-	13,356.02
-	21,675.20	17,035.20	4,644.00	-	-	18,660.60	3,018.60
-	6,740.20	-	-	-	-	-	6,740.20
-	7,161.63	-	-	-	-	-	7,161.63
-	11,169.83	-	-	-	-	-	11,169.83
100,562.98	225,068.98	17,035.20	4,644.00	16,850.67	44,438.32	40,122.25	184,544.73

Accounts

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Account Balances

[Card View](#)[Table View](#)

Search Accounts

☐ Make my Default View

Select View: All Accounts By Type Select Type: All Types Account Number: Account Name: Sort: Display Name:

☒ DDA (15)

Prior Day Balance	Collected Balance	Available Balance	Current Balance
\$6,017,468.19	\$6,389,125.94	\$6,532,590.26	\$6,389,125.94

Account Name	Account Number	Prior Day Balance	Collected Balance	Available Balance	Current Balance
MEMORIAL MEDICAL CENTER - OPERATING *4357		\$3,197,941.66	\$3,241,349.58	\$3,197,941.66	\$3,092,515.33
MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014 *4365		\$539.81	\$534.81	\$539.81	\$539.81
MEMORIAL MEDICAL CENTER - PRIVATE WARMER CLEARING *4373		\$434.57	\$434.57	\$434.57	\$434.57
MEMORIAL MEDICAL CENTER / NH ASHFORD *4381		\$153,614.94	\$157,565.36	\$153,614.94	\$175,550.54
MEMORIAL MEDICAL CENTER / NH BROADMOOR *4403		\$101,317.18	\$101,317.18	\$101,317.18	\$73,210.10
MEMORIAL MEDICAL CENTER / NH CRESCENT *4411		\$134,052.95	\$141,697.55	\$134,052.95	\$135,347.51
MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON *4438		\$85,684.38	\$114,578.00	\$85,684.38	\$62,340.78
MEMORIAL MEDICAL CENTER / NH FORT BEND *4446		\$87,526.25	\$89,012.35	\$87,526.25	\$85,815.75
MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE *4454		\$181,645.13	\$185,436.13	\$181,645.13	\$45,181.50
MMC - NH GULF POINTE PLAZA - PRIVATE PAY *5433		\$656.44	\$656.44	\$656.44	\$131.36
MMC - NH GULF POINTE PLAZA - MEDICARE/MEDICAID *5441		\$7,023.17	\$11,023.17	\$7,023.17	\$5,023.17
MMC - NH BETHANY SENIOR LIVING *5506		\$225,399.23	\$225,399.23	\$225,399.23	\$161,408.02
MMC - NH TUSCANY VILLAGE *3407		\$118,881.88	\$118,881.88	\$118,881.88	\$85,032.80
MMC - BETHANY SR LIVING - OACA *3660		\$100.00	\$100.00	\$100.00	\$100.00
MMC - MONEY MARKET FUND *2958		\$2,094,298.35	\$2,094,298.35	\$2,094,298.35	\$2,094,298.25

Ashford

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

Memorial Medical Center

Date Requested:

11/20/2023

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APPROVED ON

NOV 20 2023

**BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS**

FOR ACCT USE ONLY

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

AMOUNT:

\$

29,091.86 ✓

G/L NUMBER:

10255040

EXPLANATION:

Molina Y6Q4 and Amerigroup Y6Q4

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew J. Dolan, Auditor

11/20/23

Broadmoor ✓

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

Memorial Medical Center

Date Requested:

11/20/2023

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APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALIFORNIA COUNTY 154/6

FOR ACCT USE ONLY

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

AMOUNT:

\$

13,475.07 ✓

G/L NUMBER:

10255040

EXPLANATION:

Molina Y6Q4 and Amerigroup Y6Q4

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew J. Per... [Signature]

11/20/23

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

Memorial Medical Center

Date Requested:

11/20/2023

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APPROVED ON

~~NOV 20 2023~~

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

11,236.79

G/L NUMBER:

10255040

EXPLANATION:

Molina Y6Q4 and Amerigroup Y6Q4

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrea Dely Santor

11/20/23

Fort Bend ✓

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

Memorial Medical Center

Date Requested:

11/20/2023

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APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

14,013.23 ✓

G/L NUMBER:

10255040

EXPLANATION:

Molina Y6Q4 and Amerigroup Y6Q4

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew J. Delo

11/20/23

Solera ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

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Memorial Medical Center

Date Requested: 11/20/2023

FOR ACCT USE ONLY

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

APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
GALHOUN COUNTY, TEXAS

AMOUNT:

\$

8,726.73 ✓

G/L NUMBER:

10255040

EXPLANATION:

Molina Y6Q4 and Amerigroup Y6Q4

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew Solera

11/20/23

Golden Creek ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

Memorial Medical Center

Date Requested:

11/20/2023

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APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

55,556.43 ✓

G/L NUMBER:

10255040

EXPLANATION:

Superior y6q5 and y7 september

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew D. [Signature]

11/20/23

Tusany

MEMORIAL MEDICAL CENTER CHECK REQUEST

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Memorial Medical Center

Date Requested: 11/20/2023

FOR ACCT USE ONLY

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

APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

AMOUNT:

\$

39,271.62 ✓

G/L NUMBER:

10255040

EXPLANATION:

Molina Y6Q4 and Amerigroup Y6Q4

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew DeLaTorre

11/20/23

MEMORIAL MEDICAL CENTER
CHECK REQUEST

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Memorial Medical Center

Date Requested:

11/20/2023

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APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

40,122.25

G/L NUMBER:

10255040

EXPLANATION:

Superior y6q5 and y7 september

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Anderson & Saper Limited

11/20/23

Crescent ✓

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

Tuscany ✓

Date Requested:

11/20/2023

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APPROVED ON

NOV 20 2023

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

22,500.00 ✓

G/L NUMBER:

21400007

EXPLANATION:

Claim payment owed to Tuscany

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY:

Andrew D. [Signature]

11/20/23

November 22, 2023

APPROVAL LIST - 2023 BUDGET

11/22/23

COMMISSIONERS COURT MEETING OF

BALANCE BROUGHT FORWARD FROM APPROVAL LIST REPORT PAGE 19

FICA	PAYROLL 11/22/2023	P/R	\$	57,889.86	✓
MEDICARE	PAYROLL 11/22/2023	P/R	\$	13,755.64	
FWH	PAYROLL 11/22/2023	P/R	\$	39,929.20	
FICA	SUPPLEMENTAL PAYROLL 11/15/2023	P/R	\$	671.42	
MEDICARE	SUPPLEMENTAL PAYROLL 11/15/2023	P/R	\$	157.10	
FWH	SUPPLEMENTAL PAYROLL 11/15/2023	P/R	\$	7.21	
AFLAC	NOVEMBER 2023 PREMIUMS	P/R	\$	2,214.69	
NATIONWIDE RETIREMENT SOLUTIONS	PAYROLL 11/22/2023	P/R	\$	2,637.50	
VOYA	PAYROLL 11/22/2023	P/R	\$	2,170.06	
OFFICE OF THE ATTORNEY GENERAL - CHILD SUPPORT	PAYROLL 11/22/2023	P/R	\$	1,765.00	
CITIBANK	DEPT CREDIT CARD CHARGES	A/P	\$	32,369.41	
	<u>TOTAL VENDOR DISBURSEMENTS:</u>		\$	<u>308,673.24</u>	✓

PAYROLL ON NOVEMBER 22, 2023

	P/R	\$	352,528.35	✓
		\$	<u>352,528.35</u>	✓

NEXBANK (MATURED EASTWEST CD TRANSFER TO MONEY MKT)
NEXBANK (MATURED EASTWEST CD TRANSFER TO MONEY MKT)
NEXBANK (TRANSFER FROM PROSPERITY MONEY MKT ACCOUNT)
CALHOUN COUNTY INDIGENT HEALTH CARE

	\$	4,060,296.14	✓
	\$	3,155,195.39	✓
	\$	10,000,000.00	✓
	\$	5,436.69	✓
	\$	<u>17,220,928.22</u>	✓

TOTAL INVESTMENT ACTIVITY AND TRANSFERS BETWEEN FUNDS:

TOTAL AMOUNT FOR APPROVAL:

\$	<u>17,882,129.81</u>	✓
----	----------------------	---

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
AMBULANCE OPERATIONS-GENERAL	290	SUPPLIES/OPERATING EXPENSES	53980	BOUND TREE MEDICAL, LLC	412	85144895	GNL AMB OP 11/3 6MILE VOL G3 BREATHER	277.26	
		EQUIPMENT	71650	BUTTERFLY NETWORK INC	3311	INVBFI...	GNL AMB OP 11/4 MBVFD IQ+ ULTRASOUND SYSTEM	2,873.00	
AMBULANCE OPERATIONS-GENERAL	Total 290							3,150.26	0.00
BUILDING MAINTENANCE	170	REPAIRS-COURTHOUSE AND JAIL	65454	AGUIRRE SHAWN	92020	QB4975	MAINT 10/17 DRAIN	150.00	
		UTILITIES-AG BLDG/FAIRGROUNDS	66602	CENTERPOINT ENERGY	1805	2942974...	BAUER 11/14 ACT# 2942974-3 CCF 11 10/10 - 11/9	65.07	
			66602	CENTERPOINT ENERGY	1805	2942980...	AG BLDG 11/14 ACT# 2942980-0 CCF 8 10/10 - 11/9	61.21	
		UTILITIES-COURTHOUSE AND JAIL	66604	CENTERPOINT ENERGY	1805	6329420...	CH 11/14 ACT# 6329420-1 CCF 1467 10/10 - 11/9	1,932.28	
			66604	CITY OF PORT LAVACA	861	1218440...	CH 11/15 ACT# 12-1844-00 WATER 10/10 - 11/10	83.16	
		UTILITIES-JAIL	66605	CENTERPOINT ENERGY	1805	6455891...	JAIL 11/14 ACT# 6455891-9 MCF 203 10/10 - 11/9	2,644.94	
			66605	CITY OF PORT LAVACA	861	1218420...	JAIL 11/15 ACT# 12-1842-01 WATER 10/10 - 11/10	4,159.10	
			66605	CITY OF PORT LAVACA	861	1218430...	JAIL 11/15 ACT# 12-1843-00 WATER 10/10 - 11/10	83.16	
		UTILITIES-COURTHOUSE ANNEX	66606	CITY OF PORT LAVACA	861	1219100...	ANNEX 11/15 ACT# 12-1910-00 WATER 10/10 - 11/10	107.37	
		UTILITIES-COURTHOUSE ANNEX II	66621	CITY OF PORT LAVACA	861	1208950...	ANNEX II 11/15 ACT# 12-0895-01 WATER 10/10 - 11/10	65.66	
BUILDING MAINTENANCE	Total 170							9,351.95	0.00
COMMISSIONERS COURT	230	INTERNET SERVICES	62955	FRONTIER COMMUNICATIONS	2855	3611970...	CH 11/11 ACT# 361-197-0053- 122022-5 INTERNET 11/11- 12/10	1,200.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
COMMISSIONERS COURT	Total 230								
			62955	SPARKLIGHT	9988	1128551...	COM CRT 11/1 ACT# 112855176 NOV 2023 INTERNET	1,353.28	
								2,553.28	0.00
CONTINGENCIES	240	GROUP INSURANCE	51920	RELIANCE STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS		0.48
CONTINGENCIES	Total 240								
COUNTY TAX COLLECTOR	200	DELINQUENT TAX ATTORNEY FEES	61700	MCCREARY VESELKA BRAGG	5088	PODTA2...	TAX A/C 11/8 NOV 2023 DTA FEES	0.00 2,962.74	0.48
COUNTY TAX COLLECTOR	Total 200							2,962.74	0.00
DISTRICT ATTORNEY	510	COPY MACHINE LEASE	61340	XEROX CORPORATION	9001	0200276...	DA 11/1 COPIER LEASE 9/30 - 10/21	184.06	
			61340	XEROX CORPORATION	9001	0200276...	DA 11/1 COPIER LEASE 9/30 - 10/21	62.76	
		TRAVEL ADVANCE SUSPENSE	66448	RODRIGUEZ SARA M	EM...	PO5101...	DA 11/13 TRAVEL ADV- FRISCO, TX 11/28 - 12/1	696.77	
DISTRICT ATTORNEY	Total 510							943.59	0.00
DISTRICT COURT	430	ADULT ASSIGNED-ATTORNEY FEES	60050	WEISER KEITH S	8664	2023331	DIST CRT 11/6 C# 2022-CR-8690-DC T. FERNANDEZ	5,603.00	
		ADULT ASSIGNED-INVESTIGATION EXPENSE	60051	WEISER KEITH S	8664	2023331	DIST CRT 11/6 C# 2022-CR-8690-DC T. FERNANDEZ	775.02	
		ADULT ASSIGNED-OTHER LITIGATION EXPENSES	60053	WEISER KEITH S	8664	2023331	DIST CRT 11/6 C# 2022-CR-8690-DC T. FERNANDEZ	243.56	
DISTRICT COURT	Total 430							6,621.58	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
ELECTIONS	270	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	35312847	ELEC 10/24 COMMAND STRIPS, VELCRO COINS	24.29	
		COPY MACHINE LEASE	61340	XEROX CORPORATION	9001	0200276...	ELEC 11/1 COPIER LEASE 9/21 - 10/20	176.17	
		TRAVEL IN COUNTY	66476	WALTON DEREK	EM...	PO423.	ELEC 11/8 TRAVEL REIMB 11/7/23	11.14	
ELECTIONS	Total 270							211.60	0.00
EMERGENCY MEDICAL SERVICES	345	BUILDING SUPPLIES/PARTS	53610	GULF COAST PAPER CO INC	2619	2466245	EMS 11/7 CUPS, FLOOR MAT, CLEANING PADS	227.88	
			53610	O'REILLY AUTO PARTS	5803	0575331...	EMS 10/11 GENERATOR BATTERY	166.60	
			53610	GULF COAST HARDWARE LLC	63198	182607	EMS 11/7 SCREW	2.67	
		SUPPLIES/OPERATING EXPENSES	53980	TELEFLEX LLC	166	9507649...	EMS 11/1 IO TRAINING BLOCKS	149.50	
			53980	BOUND TREE MEDICAL, LLC	412	85148031	EMS 11/7 CAPNO ORAL/NASAL CANNULA	719.28	
			53980	BOUND TREE MEDICAL, LLC	412	85149609	EMS 11/8 RING CUTTER BLADE	9.57	
		COLLECTIONS-ACCOUNTS RECEIVABLE	60890	EMERGICON LLC	2870	14699	EMS 10/31 OCTOBER 2023 COLLECS	10,352.17	
		MACHINE MAINTENANCE	63500	O'REILLY AUTO PARTS	5803	0575331...	EMS 10/9 GLOVES	6.69	
			63500	O'REILLY AUTO PARTS	5803	0575331...	EMS 10/11 FUSE	29.99	
			63500	O'REILLY AUTO PARTS	5803	0575333...	EMS 10/20 M2 REPAIRS	92.42	
			63500	GULF COAST HARDWARE LLC	63198	182538	EMS 11/5 TOW CHAIN	110.98	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3619200...	EMS 11/1 ACT# 287298540337 ADMIN/AMB PHONES 10/2 - 11/1	768.34	
		UTILITIES	66600	SPARKLIGHT	9988	1009808...	EMS CNTRL 11/8 ACT# 100980846 CABLE 11/8 - 12/7	243.44	
EMERGENCY MEDICAL SERVICES	Total 345							12,879.53	0.00
EXTENSION SERVICE	110	GENERAL OFFICE SUPPLIES	53020	DRIESSEN WATER INC	6245	3934358	EXT SVC 10/4 WATER	58.35	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
EXTENSION SERVICE	Total 110		53020	DRIESSEN WATER INC	6245	3995521	EXT SVC 10/31 WATER LATE FEE	5.00	
			53020	LYSSY KAREN	eml...	PO11011...	EXT SVC 11/16 AEROSOL SPRAY	6.45	
HUMAN RESOURCES	265	PROGRAM SUPPLIES	53310	WARD MIKE JR	1823	34811	EXT SVC 11/3 P2P POSTERS	375.00	
		COPY MACHINE LEASE	61340	XEROX CORPORATION	9001	0200276...	EXT SVC 11/1 COPIER LEASE 9/21 - 10/20	206.26	
		TRAVEL/OUT OF COUNTY-CEA/FCS	66460	LYSSY KAREN	eml...	PO11011...	EXT SVC 11/16 TEAFCS MEMBERSHIP DUES	190.00	
		TRAVEL/OUT OF COUNTY-CEA/CMR	66464	SHELLY RALPH	EM...	PO11011...	EXT SVC 10/31 OCT 2023 TRAVEL REIMB	142.14	
EXTENSION SERVICE	Total 110							983.20	0.00
HUMAN RESOURCES	265	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615512...	HR 11/11 ACT# 361-551-2181- 011122-5 FAX 11/11 - 12/10	93.87	
HUMAN RESOURCES	Total 265							93.87	0.00
INFORMATION TECHNOLOGY	275	UTILITIES-117 W. ASH ST. BUILDING	66609	CITY OF PORT LAVACA	861	1213400...	IT 11/15 ACT# 12-1340-00 WATER 10/10 - 11/10	65.66	
INFORMATION TECHNOLOGY	Total 275							65.66	0.00
JAIL OPERATIONS	180	JAIL MAINTENANCE/SUPPLIES	53420	PERFORMANCE FOOD GROUP INC	63650	2896817	JAIL 11/13 HAIR NETS	62.70	
		GROCERIES	53955	PERFORMANCE FOOD GROUP INC	63650	2893461	JAIL 11/6 INMATE GROCERIES	1,819.42	
			53955	PERFORMANCE FOOD GROUP INC	63650	2894617	JAIL 11/8 INMATE GROCERIES	60.83	
			53955	PERFORMANCE FOOD GROUP INC	63650	2896817	JAIL 11/13 INMATE GROCERIES	2,380.60	
			53955	PERFORMANCE FOOD GROUP INC	63650	2898696	JAIL 11/16 INMATE GROCERIES	2,232.36	
JAIL OPERATIONS	Total 180							6,555.91	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
JUSTICE OF PEACE PRECINCT #2	460	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	35407950	JP2 10/30 FILE FOLDERS/ HANGERS, LABELER, TAPE	106.14	
JUSTICE OF PEACE PRECINCT #2	Total 460							106.14	0.00
JUSTICE OF PEACE-PRECINCT #1	450	POSTAGE	64790	U. S. POSTMASTER	8025	PO4504...	JP1 11/13 POSTAGE	660.00	
JUSTICE OF PEACE-PRECINCT #1	Total 450							660.00	0.00
JUSTICE OF PEACE-PRECINCT #4	480	TELEPHONE SERVICES	66192	TISD INC.	7646	8381220...	JP4 11/8 ACT# 083812 DEC 2023 INTERNET	37.49	
JUSTICE OF PEACE-PRECINCT #4	Total 480							37.49	0.00
JUSTICE OF PEACE-PRECINCT #5	490	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3619832...	JP5 11/1 ACT# 361-983-2351- 100102-5 PHONE 11/1 - 11/30	124.01	
JUSTICE OF PEACE-PRECINCT #5	Total 490							124.01	0.00
JUVENILE COURT	500	JUVENILE DETENTION SERVICES	63110	NUECES COUNTY	5473	3490140...	JUV CRT 10/6 SEPT 2023 DETENTION FEES- (2) JUV	7,500.00	
			63110	NUECES COUNTY	5473	3490140...	JUV CRT 11/8 OCT 2023 DETENTION FEES- (4) JUV	9,375.00	
			63110	VICTORIA REGIONAL JUVENILE	8249	1032023	JUV CRT 11/6 OCT 2023 DETENTION SVCS	10,000.00	
JUVENILE COURT	Total 500							26,875.00	0.00
LIBRARY	140	PHOTO COPIES/SUPPLIES	53030	XEROX CORPORATION	9001	0201298...	LIBRARY 11/4 COPIER LEASE 9/30 - 10/30	125.49	
			53030	XEROX CORPORATION	9001	0201298...	PC LIBRARY 11/4 COPIER LEASE 9/30 - 10/30	74.38	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615524...	LIBRARY 11/13 ACT# 361-552-4926- 101592-5 PHONE 11/13- 12/12	114.11	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
LIBRARY	Total 140		66192	FRONTIER COMMUNICATIONS	2855	3615527...	LIBRARY 11/13 ACT# 361-552-7323-042491-5 PHONE 11/13- 12/12	212.29	
				CITY OF PORT LAVACA	861	1217300...	LIBRARY 11/15 ACT# 12-1730-00 WATER 10/10 - 11/10	107.37	
				CITY OF PORT LAVACA	861	1217310...	LIBRARY 11/15 ACT# 12-1731-00 WATER 10/10 - 11/10	38.64	
				CENTERPOINT ENERGY	1805	2981129...	SEA LIBRARY 11/14 ACT# 2981129-6 CCF 0 10/10 - 11/9	49.40	
MISCELLANEOUS	280	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3611970...	CH 11/13 ACT# 361-197-0090-041323-5 PHONE 11/13 - 12/12	721.68	0.00
MISCELLANEOUS	Total 280		66192	FRONTIER COMMUNICATIONS	2855	3615534...	CH/ANNEX 11/13 ACT# 361-553-4465-011607-5 PHONE 11/13-12/12	1,723.11	
				FRONTIER COMMUNICATIONS	2855	3615534...	ANNEX 11/13 ACT# 361-553-4645-012307-5 PHONE 11/13 - 12/12	227.29	
				COX VICKI	EM...	PO676	MUSEUM 11/17 ANCESTRY.COM MEMBERSHIP	2,603.42	0.00
				CENTERPOINT ENERGY	1805	2860820...	MUSEUM 11/14 ACT# 2860820-6 CCF 15 10/10 - 11/9	319.00	
MUSEUM	150	DUES	54020	CITY OF PORT LAVACA	861	1208650...	MUSEUM 11/15 ACT# 12-0865-00 WATER 10/10 - 11/10	70.19	
				QUILL LLC	6602	35413513	MUSEUM 10/31 DESK	63.66	
								1,053.49	
MUSEUM	Total 150							1,508.34	0.00
NO DEPARTMENT	999	ACCRUED UNITED WAY	20525	UNITED WAY OF CALHOUN COUNTY	8019	PO1124...	CALCO 11/20 NOV 2023 DONATIONS	10.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		ACCRUED MISCELLANEOUS	20533	TMPA	7723	PO1124...	CALCO 11/20 NOV 2023 MEMBERSHIP FEES	298.48	
		ACCRUED INSURANCE-LT/ST DISABILITY	20566	RELiance STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	2,427.38	
		ACCRUED INSURANCE-LIFE/LONG TERM CARE	20568	COMBINED INSURANCE, A CHUBB	542	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	1,304.88	
		ACCRUED INSURANCE-VOLUNTARY TERM LIFE	20572	RELiance STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	2,980.17	
		ACCRUED INSURANCE-VOLUNTARY ADandD	20573	RELiance STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	313.90	
		DUE TO JP COLLECTIONS ATTORNEY	20770	MCCREARY VESELKA BRAGG ALLEN	5255	276639	JP1 10/4 COLLECTION FEES	4.42	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	276640	JP3 10/4 COLLECTION FEES	2.94	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	276894	JP1 10/10 COLLECTION FEES	288.30	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	276941	JP2 10/12 COLLECTION FEES	19.66	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	278218	JP3 11/8 COLLECTION FEES	1,148.37	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	278232	JP1 11/9 COLLECTION FEES	2,875.59	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	278233	JP2 11/9 COLLECTION FEES	830.51	
		RENTAL DEPOSITS	20820	SOLIZ JOSIE	RF2...	1881	BAUER 7/14 KEY DEPOSIT REFUND	25.00	
NO DEPARTMENT	Total 999							12,529.60	0.00
REVENUE	001	FEES-EMERGENCY MEDICAL SERVICES	44395	DRISCOLL	1998	1100064...	EMS 11/6 REFUND-DRISCOLL PAID IN ERROR	353.37	
			44395	DRISCOLL	1998	1100099...	EMS 11/6 REFUND-DRISCOLL PAID IN ERROR	396.17	
			44395	DRISCOLL	1998	1100253...	EMS 11/6 REFUND-DRISCOLL PAID IN ERROR	490.36	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
1000 - GENERAL FUND

Dept Title	Dept C...	Gl Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
REVENUE	Total 001								
			44395	DRISCOLL	1998	1102508...	EMS 11/6 REFUND- DRISCOLL PAID IN ERROR	396.17	
								1,636.07	0.00
ROAD AND BRIDGE-PRECINCT #1	540	MACHINERY PARTS/SUPPLIES	53210	DOGGETT HEAVY MACHINERY SERV	234	W28270	RB1 11/7 (2) SNAP RINGS, (2) WASHERS- U0328	32.52	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301110...	RB1 11/6 (2) WHEEL BEARINGS	28.14	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301110...	RB1 11/7 INNER/OUTER AIR ELEMENT	50.73	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301110...	RB1 11/8 (2) REFRIGERANTS	21.14	
		ROAD & BRIDGE SUPPLIES	53510	QUALITY HOT MIX INC	6603	28554	RB1 11/8 119.61T 3/4" LIMESTONE	4,186.35	
		SIGNS	53590	ECONO SIGN & BARRICADE LLC	1825	10986235	RB1 10/26 ROAD SIGNS & POSTS	1,427.01	
		INSECTICIDES/PESTICIDES	53630	TARGET SPECIALTY PRODUCTS	99900	INVP50...	RB1 11/7 TOTE- BVA 13 ULV DILUENT	4,262.50	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4173391...	RB1 11/9 UNIFORMS	100.51	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615529...	RB1 11/13 ACT# 361-552-9242- 021403-5 PHONE 11/13 - 12/12	238.04	
		UTILITIES	66600	CENTERPOINT ENERGY	1805	5118678...	RB1 11/14 ACT# 5118678-1 CCF 1 10/10 - 11/9	52.23	
								10,399.17	0.00
ROAD AND BRIDGE-PRECINCT #1	Total 540								
ROAD AND BRIDGE-PRECINCT #2	550	PIPE	53580	SOUTH TEXAS CORRUGATED PIPE	7624	8958	RB2 10/4 METAL PIPE, COUPLERS	1,167.01	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4173078...	RB2 11/7 SCRAPER MAT	3.98	
		SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63192	182581	RB2 11/7 BATTERIES	20.99	
			53992	B-GREENER INDUSTRIAL CLEANERS	77	955	RB2 11/6 DEGREASER, NON-STICK EQUIP BARRIER	539.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
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 #2		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4173078...	RB2 11/7 UNIFORMS	63.81	
		OUTSIDE MAINTENANCE	64370	HYDRAULICS OF TEXAS	4314	131605	RB2 11/7 REBUILT CYLINDER- BIG FORKER	1,290.00	
		TELEPHONE SERVICES	66192	VICTORIA COMMUNICATION SERVICE	8229	8787	RB2 11/7 CELL PHONE BOOSTER & INSTALLATION	1,052.22	
	Total 550							4,137.01	0.00
ROAD AND BRIDGE-PRECINCT #3	560	TIRES AND TUBES	53520	SOUTHERN TIRE MART LLC	7547	4820076...	RB3 11/3 TRACTOR TIRE	436.90	
			53520	CARY'S TIRE & AUTOMOTIVE LLC	89820	29403	RB3 11/7 MOWER TIRE	171.13	
		GASOLINE/OIL/DIESEL/GRE...	53540	TRI-WHOLESALE COMPANY, INC.	7637	9301110...	RB3 11/8 OIL	63.42	
		TOOLS	53595	GULF COAST HARDWARE LLC	63193	182630	RB3 11/7 WRENCHES	32.98	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4173239...	RB3 11/8 FRESHENER	6.00	
		SUPPLIES-MISCELLANEOUS	53992	PORT LAVACA DODGE	6227	70108	RB3 11/7 FUSES	24.75	
			53992	GULF COAST HARDWARE LLC	63193	182619	RB3 11/7 SOCKETS, TAPE, MISC SUPP	68.87	
			53992	GULF COAST HARDWARE LLC	63193	182630	RB3 11/7 BUSHING	3.59	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301110...	RB3 11/6 CONNECTOR, HARNES	47.20	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301110...	RB3 11/7 BRAKE SPRAY	9.19	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301110...	RB3 11/8 OIL FILTERS, ANTIFREEZE	96.04	
			53992	TRI-WHOLESALE COMPANY, INC.	7637	9301110...	RB3 11/9 FILTERS	41.28	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4173239...	RB3 11/8 UNIFORMS	93.40	
		EQUIPMENT RENTAL	62510	LEGACY DISPOSAL & SANITATION	2988	172054	RB3 11/3 PORTABLE TOILET RENTAL 11/3 - 11/30	105.80	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
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 #3	Total 560	CAPITAL OUTLAY	70750	GOLDEN CRESCENT CONSTRUCTION	2668	INV14815	RB3 11/6 POUR CONCRETE FOR BOLT UP BLDG	13,549.78	
								14,749.53	0.00
ROAD AND BRIDGE-PRECINCT #4	570	MACHINERY PARTS/SUPPLIES	53210	VICTORIA OLIVER COMPANY INC	8232	P09580	RB4 11/13 PTO SHAFT	470.59	
		ROAD & BRIDGE SUPPLIES	53510	MAREK AND MAREK TRUCK WASH INC	4058	13619	RB4 11/3 25 31T CRUSHED GRANITE	1,721.08	
		TOOLS	53595	TRL-WHOLESALE COMPANY, INC.	7637	9301110...	RB4 11/1 SNAP RING PLIER	110.20	
		SUPPLIES-MISCELLANEOUS	53992	CINTAS CORPORATION LOC. 083	958	4173658...	RB4 11/13 MISC SUPP	9.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3619830...	RB4 11/10 ACT# 361-983-0024- 100102-5 PHONE 11/10 - 12/9	56.12	
		UNIFORMS	66590	CINTAS CORPORATION LOC. 083	958	4173658...	RB4 11/13 UNIFORMS	79.74	
ROAD AND BRIDGE-PRECINCT #4	Total 570							2,446.73	0.00
SHERIFF	760	GENERAL OFFICE SUPPLIES	53020	CINTAS CORPORATION LOC. 083	958	4172676...	SO 11/2 SCRAPER MATS	75.48	
		PHOTO COPIES/SUPPLIES	53030	DEWITT POTH & SON LLC	3379	7326510	SO 10/3 COPIER COUNT	130.06	
		LAW ENFORCEMENT SUPPLIES	53430	TRANSUNION RISK & ALTERNATIVE	8168	2953082...	SO 11/1 OCT 2023 SEARCHES	225.00	
		TIRES AND TUBES	53520	FIRESTONE OF PORT LAVACA LLC	5584	0083785	SO 11/3 (4) TIRES- U21	672.24	
		AUTOMOTIVE REPAIRS	60360	KNEUPPER CARROLL	3678	34845	SO 5/23 OIL CHNG- U11	110.06	
			60360	KNEUPPER CARROLL	3678	34927	SO 5/25 OIL CHNG- U35	110.06	
			60360	KNEUPPER CARROLL	3678	38985	SO 10/30 OIL CHNG- U6	83.98	
			60360	AUTO ZONE	6	3512584...	SO 10/31 BATTERY- U34	181.99	
SHERIFF	Total 760							1,588.87	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
WASTE MANAGEMENT	380	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615527...	WASTE MGMT 11/1 ACT# 361-552-7791- 101502-5 PHONE 11/1-11/30	164.11	
WASTE MANAGEMENT	Total 380							164.11	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
 2610 - AIRPORT FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	OTHER SERVICES	64320	AARC ENVIRONMENTAL INC	1139	001115407	AIRPORT 11/9 TIER II REPORT 2023	1,850.00	
			64320	AARC ENVIRONMENTAL INC	1139	0011245...	AIRPORT 10/20 SPCC PLAN INSPECTION	2,550.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615520...	AIRPORT 11/13 ACT# 361-552-0903- 021369-5 PHONE 11/13 -12/12	108.11	
NO DEPARTMENT	Total 999							4,508.11	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
2716 - GRANTS FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCURED MISCELLANEOUS	20533	TMPA	7723	PO1124...	CALCO 11/20 NOV 2023 MEMBERSHIP FEES	17.22	
		ACCURED INSURANCE-LT/ST DISABILITY	20566	RELIANCE STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	15.04	
		ACCURED INSURANCE-VOLUNTARY TERM LIFE	20572	RELIANCE STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	22.15	
		ACCURED INSURANCE-VOLUNTARY ADandD	20573	RELIANCE STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	4.20	
		ENGINEERING SERVICES	62454	G&W ENGINEERS, INC.	2601	5310023...	FORMOSA ENV TRUST 11/6 ENG SVC 10/2 - 10/29 RECYC WST TRANSF	6,248.00	
NO DEPARTMENT	Total 999							6,306.61	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
 2731 - LAW LIBRARY FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	BOOKS-LAW	70500	THOMSON REUTERS - WEST	8612	8492927...	LAW LIBRARY 11/3 DIST CRT 2024 TX CIVIL PRACTICE CODE	170.00	
NO DEPARTMENT	Total 999							170.00	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
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	ACCRUED INSURANCE-LT/ST DISABILITY	20566	RELIANCE STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	1.30	
		UTILITIES-POC COMMUNITY CENTER	66616	FRONTIER COMMUNICATIONS	2855	3619834...	POC CC 11/13 ACT# 361-983-4485- 102899-5 PHONE 11/13 - 12/12	49.12	
NO DEPARTMENT	Total 999							50.42	0.00

CALHOUN COUNTY, TEXAS

Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
5104 - C.PRL-MAGNOLIA_INDIANOLA BEACH PAVILIONS

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SUPPLIES	53974	KACIR VINCENT I	167	5315	CAP PROJ 11/2 CMP BIRDWALK SIGNS	481.50	
NO DEPARTMENT	Total 999							481.50	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
 5111 - CAP PROJ -CDBG-DR 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	5310011...	CAP PROJ 11/6 ENG SVCS CDBG-DR INFRASTRUCTURE- LANE RD	3,898.81	
NO DEPARTMENT	Total 999							3,898.81	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
 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 OTHERS	20751	MCCREARY VESELKA BRAGG	5088	PODTA2...	TAX A/C 11/8 NOV 2023 DTA FEES	160.88	
NO DEPARTMENT	Total 999							160.88	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 11.22.23
9200 - JUVENILE PROBATION FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCURED MISCELLANEOUS	20533	TMPA	7723	PO1124...	CALCO 11/20 NOV 2023 MEMBERSHIP FEES	29.54	
		ACCURED INSURANCE-LIFE/LONG TERM CARE	20568	COMBINED INSURANCE, A CHUBB	542	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	45.74	
		ACCURED INSURANCE-VOLUNTARY TERM LIFE	20572	RELIANCE STANDARD LIFE	6927	PO11172...	CALCO 11/17 NOV 2023 PREMIUMS	67.00	
		MEDICAL/DENTAL FEES	63776	NUECES COUNTY	5473	3492147...	JUV PROB 10/6 SEPT 2023 MEDICAL- (1) JUV	236.10	
			63776	NUECES COUNTY	5473	3492147...	JUV PROB 11/13 OCT 2023 MEDICAL- (3) JUV	291.58	
		RESIDENTIAL SERVICE	65530	NUECES COUNTY	5473	3492140...	JUV PROB 10/6 SEPT 2023 RESIDENTIAL PLMNT- (1) JUV	6,000.00	
			65530	NUECES COUNTY	5473	3492140...	JUV PROB 11/2 OCT 2023 RESIDENTIAL PLCMNT- (1) JUV	6,200.00	
NO DEPARTMENT	Total 999							12,869.96	0.00
Report Total								155,106.63	0.48