



September 24, 2025

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

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

THE FOLLOWING MEMBERS WERE PRESENT:

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

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

The subject matter of such meeting is as follows:

1. Call meeting to order.

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

2. Invocation.

Commissioner Ronald Best

3. Pledges of Allegiance.

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

4. General Discussion of Public Matters and Public Participation.

none

5. Consider and take necessary action on conceptual plans presented by Tania French concerning a Half Marathon – Miles by the Bay crossing multiple jurisdictions within Calhoun County. (RB)

Tania French and Andy Cardona explained. TxDot has been notified.

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

6. Consider and take necessary action to approve Calhoun County Fair Association change location of the Beer Garden at the 2025 Calhoun County Fair. See map suggested for location. (RB)

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

7. Consider and take necessary action to approve Calhoun County Fair Association to partner with 5D to sell alcohol at the 2025 Calhoun County Fair. See map for locations. (RB)

Security will be provided and insurance will be presented to the auditor 2 weeks before event.

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

8. Consider and take necessary action on declaring the month of October, 2025 "Domestic Violence Awareness Month". (VLL)

Martha Perez and Carrissa Solis read an order.

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

9. Consider and take necessary action to declare the items listed on the Waste Declaration Request Form as waste and remove from EMS Inventory. See attached. (VLL)

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

10. Consider and take necessary action to declare the items listed as Surplus/Salvage on the attached Surplus Salvage Request Form from EMS inventory and approve their trade in when new equipment/upgrade was purchased. See attached. (VLL)

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

11. Consider and take necessary action on Matagorda Bay Mitigation Trust Contract No.102 - Green Lake Park Development -- Maintenance Equipment and authorize County Judge to sign. (GDR)

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

12. Consider and take necessary action on authorizing Commissioner Reese to accept Source Well Proposals and sign sales agreements to purchase Maintenance Equipment for Green Lake Park Development. (GDR)

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

13. Consider and take necessary action on insurance proceed checks from TAC in the amount of \$14,033.58 (\$16,533.58 - \$2,500.00 deductible) for damages to a Sheriff's Office vehicle on 8-24-25. (VLL)

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

14. Consider and take necessary action to amend the 2025 Salary Order. (VLL)

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

15. Consider and take necessary action to release final payment and retainage for \$26,081.20 to Shirley & Sons Construction Co. for Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion and authorize County Judge to sign all closeout documentation. (GDR)

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

16. Consider and take necessary action to accept proposal from KSBR, LLC to prepare grant application to the Matagorda Bay Mitigation Trust for the replacement of the bridge at Little Chocolate Bayou Park in Precinct 1; preparation fee of \$1,000, to be paid with GOMESA funds. (GDR)

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

17. Consider and take necessary action to allow Commissioner Best to apply for the Matagorda Bay Mitigation Grant and hire KSBR, LLC to complete the application. (RB)

pass

18. Consider and take necessary action to authorize Judge Lyssy to sign Resolution authorizing Commissioner Best to apply for Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers. (RB)

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

19. Consider and take necessary action to authorize KSBR to prepare and possibly present the grant to Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers for a fee. (RB)

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

20. Consider and take necessary action on insurance proceeds check from United Fire Group Insurance on behalf of Supak Inc. in the amount of \$24,794.63 for water damages that occurred on 6-10-25 at the Port O'Connor Library. (VLL)

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

21. Accept Reports from the following County Offices:

a) District Clerk – August, 2025

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

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

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

23. Approval of bills and payroll. (VLL)

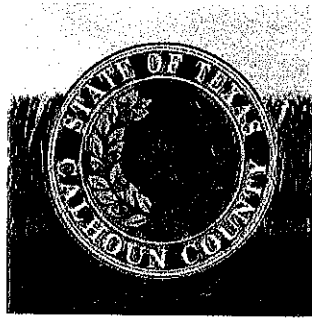
MMC:	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Ronald Best, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Best, Behrens, Reese

County Bills:

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

24. Adjourn.

10:37am GR/RB



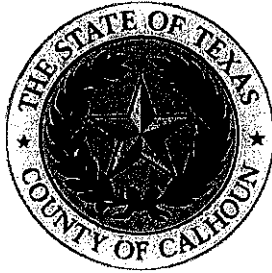
CALHOUN COUNTY COMMISSIONERS' COURT PACKET COMPLETION SHEET

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

On this 25 day of September 2025, the packet
for the 24 day of September 2025 Commissioners'
Special Regular Session was submitted from the Calhoun County Judge's
office to the Calhoun County Clerk's Office.

Debbie Vickery
Calhoun County Judge/Assistant

AGENDA



Vern L. Lyssy
County Judge

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

NOTICE OF MEETING

The Commissioners' Court of Calhoun County, Texas will meet on
Wednesday, September 24, 2025 at 10:00 a.m. in the
Commissioners' Courtroom at the County Courthouse located at 211 S. Ann Street, Suite
104, Port Lavaca, Calhoun County, Texas.

AGENDA

The subject matter of such meeting is as follows:

1. Call meeting to order.
2. Invocation.
3. Pledges of Allegiance.
4. General Discussion of Public Matters and Public Participation.
5. Consider and take necessary action on conceptual plans presented by Tania French concerning a Half Marathon – Miles by the Bay crossing multiple jurisdictions within Calhoun County. (RB)
6. Consider and take necessary action to approve Calhoun County Fair Association change location of the Beer Garden at the 2025 Calhoun County Fair. See map suggested for location. (RB)
7. Consider and take necessary action to approve Calhoun County Fair Association to partner with 5D to sell alcohol at the 2025 Calhoun County Fair. See map for locations. (RB)
8. Consider and take necessary action on declaring the month of October, 2025 "Domestic Violence Awareness Month". (VLL)

AT 8:01 FILED a M
O'CLOCK

SEP 19 2025

ANNA GOODMAN
COUNTY CLERK, CALHOUN COUNTY, TEXAS
DEPUTY:
Anna Goodman

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10. Consider and take necessary action to declare the items listed as Surplus/Salvage on the attached Surplus Salvage Request Form from EMS inventory and approve their trade in when new equipment/upgrade was purchased. See attached. (VLL)
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12. Consider and take necessary action on authorizing Commissioner Reese to accept Source Well Proposals and sign sales agreements to purchase Maintenance Equipment for Green Lake Park Development. (GDR)
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14. Consider and take necessary action to amend the 2025 Salary Order. (VLL)
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18. Consider and take necessary action to authorize Judge Lyssy to sign Resolution authorizing Commissioner Best to apply for Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers. (RB)
19. Consider and take necessary action to authorize KSBR to prepare and possibly present the grant to Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers for a fee. (RB)

20. Consider and take necessary action on insurance proceeds check from United Fire Group Insurance on behalf of Supak Inc. in the amount of \$24,794.63 for water damages that occurred on 6-10-25 at the Port O'Connor Library. (VLL)

21. Accept Reports from the following County Offices:

a) District Clerk – August, 2025

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

23. Approval of bills and payroll. (VLL)

24. Adjourn.


Vern Lyssy, County Judge
Calhoun County, Texas

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

04



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Anna Goodman
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2. Invocation.

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US Flag: Commissioner Joel Behrens
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4. General Discussion of Public Matters and Public Participation.

none

05

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Tania French and Andy Cardona explained. TxDot has been notified.

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

Ronald Best

Calhoun County Commissioner, Precinct #2

5812 FM 1090 N
Port Lavaca, TX 77979



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

September 15, 2025

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

RE: AGENDA ITEM

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

Consider and take necessary action on conceptual plans presented by Tania French concerning a Half Marathon – Miles by the Bay crossing multiple jurisdictions within Calhoun County.

Sincerely,

A handwritten signature in black ink that reads "Ronald B" followed by a long, sweeping horizontal line.

Ronald Best
RB/lj

Lesia Jurek

From: Ronny.Best@calhouncotx.org (Ronny Best) <Ronny.Best@calhouncotx.org>
Sent: Monday, September 15, 2025 1:41 PM
To: Lesia.Jurek@calhouncotx.org
Subject: FW: Agenda request
Attachments: Memo - Miles by the Bay.doc

From: tfrench@portlavaca.org (Tania French) [mailto:tfrench@portlavaca.org]
Sent: Monday, September 15, 2025 11:20 AM
To: Debbie.Vickery@calhouncotx.org
Cc: Commissioner Ronny Best <Ronny.Best@calhouncotx.org>
Subject: Agenda request

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.

Sending again from a different email address.

Hi Debbie -

I am writing to request to be placed on an upcoming Calhoun County Commissioners Court agenda for two separate items:

Calhoun County Fair (October 14–18, 2025)

I had been working directly with David Hall on this, but Judge Lyssy instructed me to now send this request to you. I would like to get on the agenda as soon as possible to discuss this year's fair, scheduled for Oct. 14–18.

"Miles by the Bay" Half-Marathon (March 21, 2026)

On behalf of Andy Cardona and Daniel Lieta, I would like to present a request for conceptual approval of a proposed half-marathon that would take place across multiple jurisdictions, including Calhoun County. This is an early-stage proposal, and we are seeking the County's support in forming a working group to explore the logistics. I've attached a copy of the memo I previously sent to the City of Port Lavaca, which outlines the concept in more detail.

Please let me know the earliest available date I may be added to the agenda, particularly for the fair, and don't hesitate to reach out if you need additional information or documentation.

Sincerely,
Tania French
361-920-9788

Calhoun County Texas

Debbie Vickery

From: tfrench@portlavaca.org (Tania French) <tfrench@portlavaca.org>
Sent: Monday, September 15, 2025 11:20 AM
To: Debbie.Vickery@calhouncotx.org
Cc: Commissioner Ronny Best
Subject: Agenda request
Attachments: Memo - Miles by the Bay.doc

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.

Sending again from a different email address.

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Sincerely,
Tania French
361-920-9788

CITY OF PORT LAVACA

MEMO

DATE: 9/15/2025

TO: MANDY GRANT

FROM: TANIA FRENCH

SUBJECT: COUNCIL AGENDA – MILES BY THE BAY

Andy Cardona and Daniel Leita have approached me with a proposal to host a half-marathon in Calhoun County on Saturday, March 21, 2026. Tentatively titled “Miles by the Bay,” the envisioned 13.1-mile route would begin at the Bayfront in Point Comfort and travel across the causeway, through Lighthouse Beach Park, various parts of Port Lavaca including Chocolate Bayou Park, and ultimately end back at Lighthouse Beach.

The proposed course spans multiple jurisdictions, including the Cities of Port Lavaca and Point Comfort, Calhoun County, and requires TxDOT approval as the route involves four state-maintained roadways: Hwy. 35, Hwy. 87, FM 238, and FM 1090.

Given the complexity and early stage of this concept, my recommendation is to request conceptual approval from each jurisdiction to explore the logistics of this event further.

Specifically, I am requesting City Council’s approval to work collaboratively with the following agencies to develop a traffic control and logistics plan:

- Port Lavaca Police Department
- Calhoun County Sheriff’s Office
- Point Comfort Police Department
- Port Lavaca Public Works

As planning progresses, we anticipate involvement from:

- Port Lavaca Fire Department
- Calhoun County EMS

Andy and Daniel understand that the event will need to meet all insurance and liability requirements and are committed to working with each entity to ensure full compliance.

An event of this nature has the potential to bring positive visibility and overnight visitors to our area, with runners and their families expected to book local hotel accommodations the night before the early morning race.

Action Requested:

At this time, I am asking Council to approve the formation of a working group to explore the feasibility and logistics of moving forward with “Miles by the Bay” Half-Marathon and assign the Port Lavaca Police Chief and Port Lavaca Public Works Director to this working group.

Once a proposed traffic control and operations plan is developed, it will be brought back to Council for formal consideration and approval. At that time, we may also request a waiver of facility use fees for the Bayfront Park Pavilion area.

This request to Council is the first step in the process, to be followed by similar requests to the Calhoun County Commissioner’s Court and the Point Comfort City Council.

06

6. Consider and take necessary action to approve Calhoun County Fair Association change location of the Beer Garden at the 2025 Calhoun County Fair. See map suggested for location. (RB)

RESULT:

APPROVED [UNANIMOUS]

MOVER:

Gary Reese, Commissioner Pct 4

SECONDER:

Joel Behrens, Commissioner Pct 3

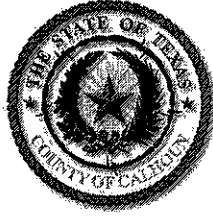
AYES:

Judge Lyssy, Commissioner Best, Behrens, Reese

Ronald Best

Calhoun County Commissioner, Precinct #2

5812 FM 1090 N
Port Lavaca, TX 77979



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

September 16, 2025

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

RE: AGENDA ITEM

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

- Consider and take necessary action to approve Calhoun County Fair Association change location of the Beer Garden at the 2025 Calhoun County Fair. See map suggested for location.

Sincerely,

A handwritten signature in black ink, appearing to read "Ronald Best", followed by a horizontal line.

Ronald Best
RB/lj

TO: Calhoun County Commissioners

FROM: Calhoun County Fair Association

Sept. 15, 2025

RE: Request for Approval – Alcohol Sales and Potential Stage/Beer Garden Relocation at 2025 Calhoun County Fair

Dear Commissioners,

The Calhoun County Fair Association respectfully submits the following requests regarding the 2025 Calhoun County Fair, scheduled for October 14–18, 2025:

1. Approval for Alcohol Sales at the 2025 Fair

We are seeking formal approval to sell alcoholic beverages during this year's fair. As in years past, all sales will occur within a fenced and designated area, ensuring controlled access and compliance with legal and safety regulations. We also request approval to partner with 5D for beverage sales during the fair. 5D is an experienced vendor that provides beverage services for numerous fairs across the state and comes highly recommended. Notable assurances include:

- - Certified and trained personnel for alcohol service
- - Full liability insurance coverage that meets all county and event requirements
- - Will list Calhoun County and the Calhoun County Fair Association as additional insured

2. Consideration for Relocation of Stage and Beer Garden

We would like to explore the possibility of relocating the stage and beer garden to a new area indicated in blue on the attached map. This new location offers several advantages:

- - Improved visibility of activities happening in the pavilion area
- - Proximity to food vendors, which may enhance patron experience
- - Maintains the same fenced-off security and control standards as the current setup
- - Easier load in for musicians
- - We would make sure to leave access to the mailbox.

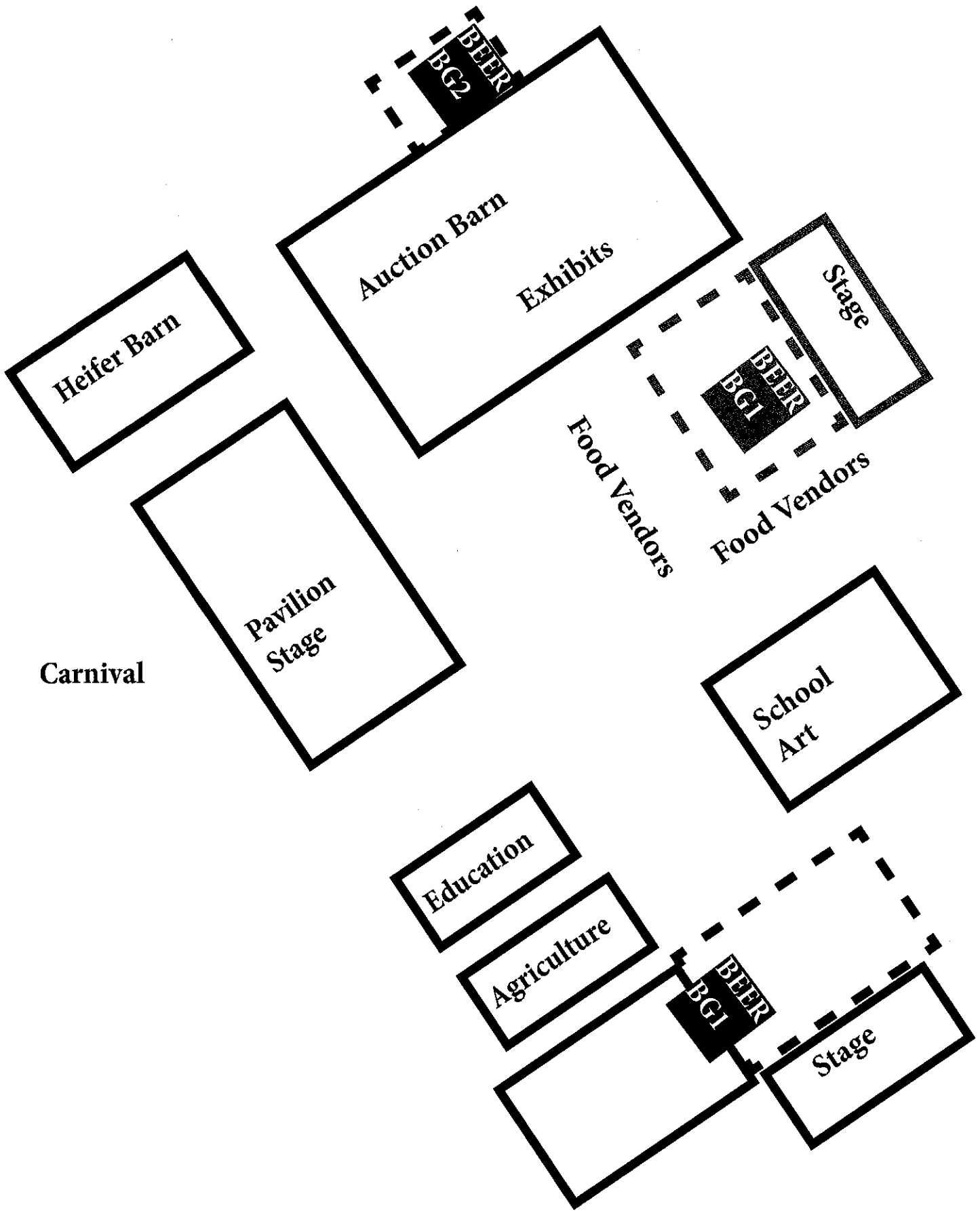
The current location, indicated in red on the map, has served us well, and we may still choose to use it. At this time, we are not committed to the relocation, but are requesting approval for use of either location, depending on final layout logistics and feedback.

We appreciate your continued support and partnership in making the Calhoun County Fair a safe and enjoyable event for all.

Sincerely,

Tania French
Calhoun County Fair
361-920-9788

CALHOUN COUNTY FAIR MAP - 2025



07

7. Consider and take necessary action to approve Calhoun County Fair Association to partner with 5D to sell alcohol at the 2025 Calhoun County Fair. See map for locations. (RB)

Security will be provided and insurance will be presented to the auditor 2 weeks before event.

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

Ronald Best

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Sincerely,

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Ronald Best
RB/lj

TO: Calhoun County Commissioners

FROM: Calhoun County Fair Association

Sept. 15, 2025

RE: Request for Approval – Alcohol Sales and Potential Stage/Beer Garden Relocation at 2025 Calhoun County Fair

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We appreciate your continued support and partnership in making the Calhoun County Fair a safe and enjoyable event for all.

Sincerely,

Tania French
Calhoun County Fair
361-920-9788

Owner of Property Authorization Letter

Date: September 16, 2025

Texas Alcoholic Beverage Commission
2820 S. Padre Island Dr., Suite #120
Corpus Christi, TX 78415
(361) 851-2531

Organization Name: Calhoun County Fair Association

I hereby authorize **SD** to sell alcohol beverages at the following:

Event Description: 2025 Calhoun County Fair

Date(s) of Function: October 13-19, 2025

Time(s) of Function:

Location Address: 186 Henry Barber Way, Port Lavaca, TX 77979

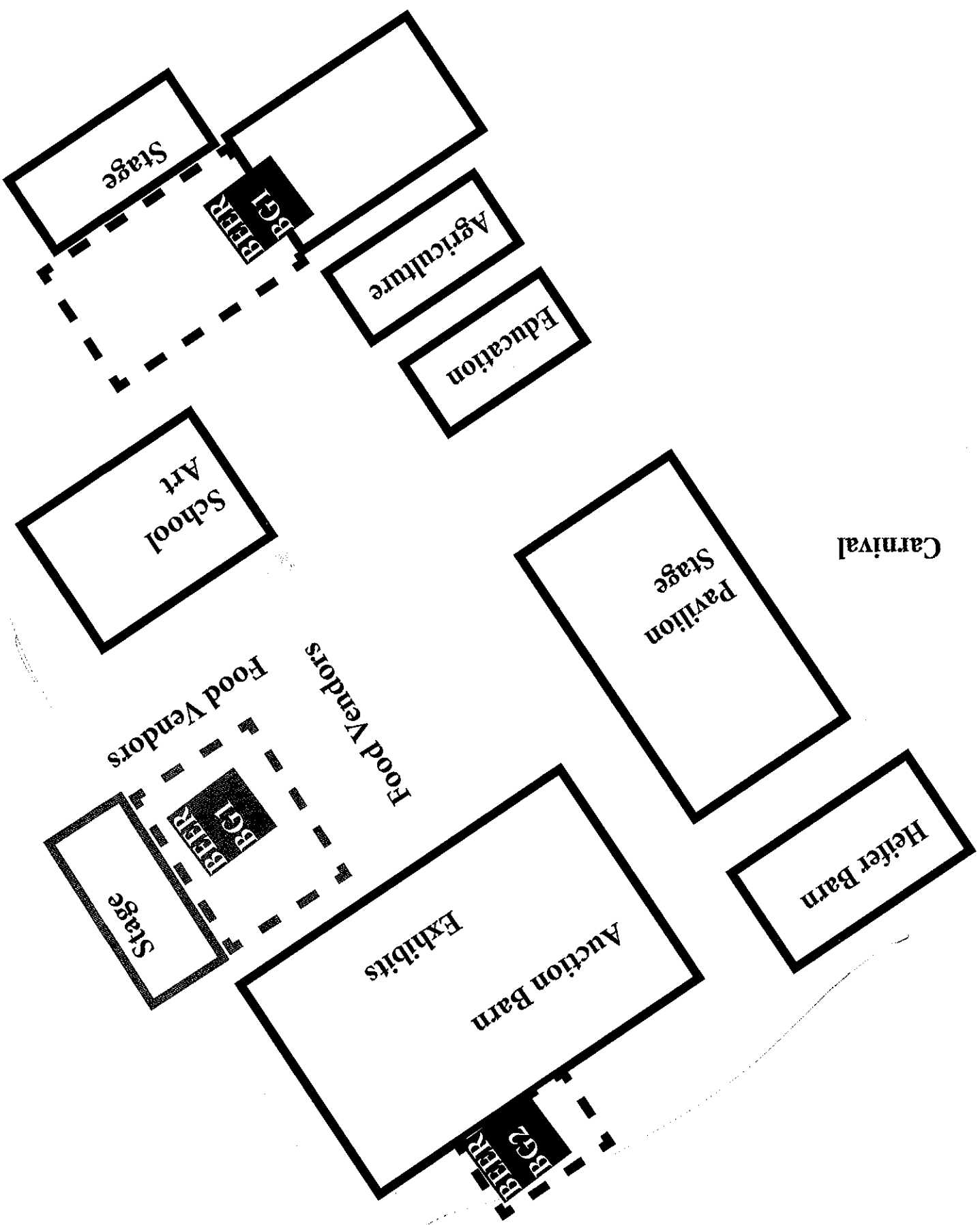
Print Name of Property Owner: Calhoun County

Name and Title: Vern Lyssy, County Judge

Signature: _____

Phone Number: (361) 553-4600

CATHOUN COUNTY FAIR MAP - 2025



08

8. Consider and take necessary action on declaring the month of October, 2025
"Domestic Violence Awareness Month". (VLL)

Martha Perez and Carrissa Solis read an order.

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

RESOLUTION

Domestic Violence Awareness Month

WHEREAS, home should be a place of warmth, unconditional love, tranquility, and security, and most of us, home and family can indeed be counted among our greatest blessings. Tragically, for many Americans, these are blessings that are tarnished by violence and fear; and

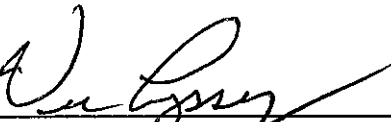
WHEREAS, in the United States, in 2023, nearly one woman was murdered per day by an intimate partner; and there were 205 Texans killed by their intimate partner in 2023.

WHEREAS, women are not the only targets; young children and elderly also are counted among the victims, and sadly, emotional scars are often permanent; and

WHEREAS, a coalition of organizations has emerged in Calhoun County to directly confront this crisis. Law enforcement officials, those involved with shelters and hotline services, health care providers, the clergy and other concerned citizens are helping in the effort to end domestic violence. We must recognize the compassion and dedication of these volunteers and professionals, applaud their efforts and increase public understanding of this important problem.

NOW THEREFORE, let it be resolved that the month of October 2025 is hereby declared Domestic Violence Awareness Month in Calhoun County and all citizens are urged to observe this month by becoming aware of the tragedy of domestic violence, supporting those who are working toward its end, and participating in community efforts.

SIGNED AND SEALED THIS THE 24th day of SEPTEMBER, 2025


Vern L. Lyssy, County Judge

David Hall
Commissioner Precinct 1

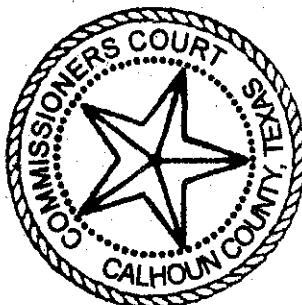

Joel Behrens
Commissioner Precinct 3


Ronald Best
Commissioner Precinct 2


Gary Reese
Commissioner Precinct 4

Attest: Anna Goodman, County Clerk


By: Deputy Clerk



09

9. Consider and take necessary action to declare the items listed on the Waste Declaration Request Form as waste and remove from EMS Inventory. See attached. (VLL)

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

Debbie Vickery

From: Dustin.Jenkins@calhouncotx.org (Dustin Jenkins) <Dustin.Jenkins@calhouncotx.org>
Sent: Monday, September 15, 2025 1:24 PM
To: Debbie Vickery; Erica Perez
Subject: Commissioners Court Items
Attachments: Surplus-Salvage Request_CCEMS_2025_09_09.pdf; Waste Declaration Request_CCEMS_2025_09_09.pdf; LP_12_Stryker_Trade_IN_Email.pdf

Debbie,

Please place the following on the next Commissioners Court Agenda:

Consider and take Necessary Action to declare the items listed on the Waste Declaration Request Form as waste and remove from EMS Inventory (See attached Waste Declaration Request Form).

Consider and take Necessary Action to declare as Surplus/Salvage those assets on the attached Surplus Salvage Request Form and approve their trade in when new equipment/upgrade was purchased (See attached Waste Declaration Request Form).

Thanks,

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

Calhoun County Texas

Calhoun County, Texas
WASTE DECLARATION REQUEST FORM

Department Name: EMS

Requested By: J. Dustin Jenkins, Director

Inventory Number	Description	Serial No.	Reason for Waste Declaration
541-0166	Pulse Ox/End Tidal CO2 Monitor	118303630	No longer Have-Purchased in 2003
541-0157	EVAC V-Splint System	N/A	No longer Have-Purchased in 2002
541-0133	Pulse Oximeter	?	No longer Have-Purchased in 2002
541-0132	Pulse Oximeter	?	No longer Have-Purchased in 2002
541-0112	Pulse Oximeter	20774363	No longer Have-Purchased in 2002
541-0142	Scoop Stretchers	N/A	No longer Have-Purchased in 2002
541-0109	Spineboard	N/A	No longer Have-Purchased in 2002
541-0104	Spineboard	N/A	No longer Have-Purchased in 2002
541-0165	Parapac Transport Automatic	?	No longer Have-Purchased in 2002
541-0458	Evac-U-Splint Mattress	N/A	Not a Fixed Asset
541-0155	Parapac Transport Ventilator	?	No longer Have-Purchased in 2002
541-0119	Rescue Tripod	?	No longer Have-Purchased in 2002
541-0197	Stair Chair EZ Glide PT 5900	?	No longer Have-Purchased in 2008
541-0213	EZ Glide Stair Chair	?	No longer Have-Purchased in 2009
541-0211	EZ Glide Stair Chair	?	Purchased in 2009
541-0210	EZ Glide Stair Chair	?	Purchased in 2009
541-0212	EZ Glide Stair Chair	?	Purchased in 2009
541-0419	Dual Power Recline Sofa	2 of 2	Trashed- Due to Bed Bugs
541-0139	Backboards (6)	N/A	No longer Have/Not Fixed Assets
541-0072	Encoder & Cable Modem	None Listed	No longer Have-Purchased in 2002
541-0177	Computer	None Listed	No longer Have-Purchased in 2004
541-0173	Computer	None Listed	No longer Have-Purchased in 2004
541-0176	Computer	None Listed	No longer Have-Purchased in 2004
541-0174	Computer	None Listed	No longer Have-Purchased in 2004
541-0175	Computer	None Listed	No longer Have-Purchased in 2004
541-0185	Computer	None Listed	No longer Have-Purchased in 2007
541-0184	Computer	None Listed	No longer Have-Purchased in 2007
541-0183	Computer	None Listed	No longer Have-Purchased in 2007
541-0193	Computer	None Listed	No longer Have-Purchased in 2002
541-0199	Computer	None Listed	No longer Have-Purchased in 2008
541-0219	Computer	2MPWVL1 Service Tag#	No longer Have-Purchased in 2010
541-0172	Defibrillator-lifenet computer	LNRS210151	No longer Have-Purchased in 2004
541-0158	Digital Camera	None Listed	No longer Have-Purchased in 2002
541-0201	LAPTOP	None Listed	No longer Have-Purchased in 2008
541-0227	LAPTOP	1 OF 4	No longer Have-Purchased in 2011
541-0230	LAPTOP	4 OF 4	No longer Have-Purchased in 2011
541-0229	LAPTOP	3 OF 4	No longer Have-Purchased in 2011
541-0228	LAPTOP	2 OF 4	No longer Have-Purchased in 2011
541-0488	LAPTOP	None Listed	Broken/Dead
541-0149	COMMUNICATION SYSTEM	None Listed	No longer Have-Purchased in 2002
523-0030	PAGERS (5)	R46BNW2974 Thru R42BNW2978	Obsolete
541-0162	RADIO	None Listed	No longer Have-Purchased in 2002
541-0192	RADIO	None Listed	No longer Have-Purchased in 2002
541-0189	RADIO	518CHF1224	No longer Have-Purchased in 2002
541-0289	RADIO (UNIT 8)	518CQF0252	No longer Have-Purchased in 2016
541-0072	Encoder & Cable Modem	None Listed	No longer Have-Purchased in 2002
541-0384	Batteries (For Lucas)	N/A	Obsolete

10

10. Consider and take necessary action to declare the items listed as Surplus/Salvage on the attached Surplus Salvage Request Form from EMS inventory and approve their trade in when new equipment/upgrade was purchased. See attached. (VLL)

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

Debbie Vickery

From: Dustin.Jenkins@calhouncotx.org (Dustin Jenkins) <Dustin.Jenkins@calhouncotx.org>
Sent: Monday, September 15, 2025 1:24 PM
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Thanks,

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

Calhoun County Texas

Calhoun County, Texas

SURPLUS/SALVAGE DECLARATION REQUEST FORM

Department Name: EMS

Requested By: J. Dustin Jenkins, Director

[illegible]

From: "tim.garza@stryker.com (Garza, Tim)" <tim.garza@stryker.com>
To: Dustin Jenkins <dustin.jenkins@calhouncotx.org>
Cc: Clint Macek <clint.macek@calhouncotx.org>
Date: 08/22/2025 03:12 PM
Subject: Lifepak 12 Trade-In Units

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

Good Afternoon,

This email is to confirm that QTY 2 Lifepak 12 units had been picked up previously from your location as trades towards Lifepak 15's when they were purchased in 2019 and 2021.

The units were collected and shipped so Stryker for disposal/re-purposing.

If you have any questions, please let me know.

Thank you!

Respectfully,

Tim Garza
Account Manager
Stryker

Medical -Emergency Care
C 832-652-6256

Tech Support/Field Service Dispatch 1-800-STRYKER

tim.garza@stryker.com

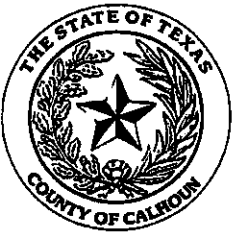
<http://ems.stryker.com>

Follow this link to read our [Privacy Statement](#)

11

11. Consider and take necessary action on Matagorda Bay Mitigation Trust Contract No.102 - Green Lake Park Development – Maintenance Equipment and authorize County Judge to sign. (GDR)

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



Gary D. Reese

County Commissioner
County of Calhoun
Precinct 4



September 16, 2025

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

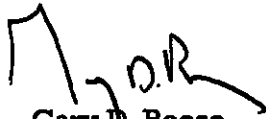
RE: AGENDA ITEM

Dear Judge Lyssy:

Please place the following item on the Commissioners' Court Agenda for September 24, 2025.

- Consider and take necessary action on Matagorda Bay Mitigation Trust Contract No. 102 – Green Lake Park Development – Maintenance Equipment and authorize County Judge to sign.

Sincerely,


Gary D. Reese

GDR/at

MATAGORDA BAY MITIGATION TRUST

CONTRACT COVER/SIGNATURE PAGE

TITLE OF CONTRACT No. 102: Green Lake Park Development – Maintenance Equipment

This Contract is entered into by the Matagorda Bay Mitigation Trust (herein referred to as “the Trust”) and the following named Recipient:

THE TRUST:

Matagorda Bay Mitigation Trust
P. O. Box 1269
Poth, Texas 78147-1269
Email: Trustee@mbmtrust.com
Contact Person: Steven J. Raabe, Trustee

RECIPIENT:

Calhoun County
202 S. Ann Street, Suite A
Port Lavaca, Texas 77979
EMAIL: vern.lyssy@calhouncotx.org
gary.reese@calhouncotx.org
Contact Person: Judge Vern Lyssy and
Commissioner Gary Reese

The Recipient (“Recipient”) agrees to provide Mitigation Project Work and Services (“Mitigation Project”) in compliance with this Contract (“Contract”) and all applicable federal and state laws, regulations, and rules. In accordance with the General Terms & Conditions, it is understood and agreed by both parties hereto that the Trust’s obligations under this Contract are contingent upon Recipient’s compliance with this Contract and federal and state law regulations and rules. This Contract, which constitutes promised performances by the Recipient, consists of the following documents:

Contract (Cover Sheet/Signature Page)
General Terms and Conditions
Statement of Mitigation Project (Attachment A)
Budget (Attachment B)
Invoice Format (Attachment C)

The Recipient hereby acknowledges that it has read and understands this entire Contract. All oral or written agreements between the parties hereto relating to the subject matter of this Contract that were made prior to the execution of this Contract have been reduced to writing and are contained herein. The Recipient agrees to abide by all terms and conditions specified herein and certifies that the information provided to the Trust is true and correct in all respects to the best of its knowledge and belief.

CONTRACT PERIOD: FROM: September 15, 2025 UNTIL: August 31, 2026

FUNDING: This Contract may not exceed \$105,000.00 (“funds”).

APPROVED:

MATAGORDA BAY MITIGATION TRUST

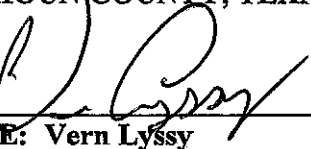
CALHOUN COUNTY, TEXAS

BY: 

NAME: Steven J. Raabe

TITLE: Trustee

DATE: September 15, 2025

BY: 

NAME: Vern Lyssy

TITLE: Calhoun County Judge

DATE: 9-24-2025

GENERAL TERMS AND CONDITIONS

I. PARTIES

- A. Trustee of the Matagorda Bay Mitigation Trust herein referred to as "Trustee" or "Trust" as applicable and "Recipient," have made and entered into this Contract herein referred to as "Contract."
- B. Recipient represents and guarantees that it possesses the legal authority to enter into this Contract, receive the funds authorized by this Contract, and to perform the work and services described on Attachment "A" comprising the Mitigation Project ("Mitigation Project"). The Recipient has obligated itself to perform under this Contract, including subsequent contract amendments or modifications. As may be applicable to Recipient, the Recipient shall comply with appropriate federal and state licensing or certification requirements.
- C. The persons signing this Contract on behalf of the parties hereto warrant that they are the duly authorized representatives authorized to execute this Contract and to validly bind their respective parties to all terms, conditions, performances and provisions herein set forth.

II. PURPOSE

This Contract sets forth the terms and conditions upon which the Trust agrees to provide funds ("funds") to the Recipient to perform the Mitigation Project.

III. RECIPIENT AS INDEPENDENT CONTRACTOR

- A. It is understood and agreed by both parties that the Trust is contracting with Recipient as an independent contractor and that Recipient is and shall be liable to its own employees and is responsible for its own risk of loss.
- B. The Recipient agrees to repay the Trust for all disallowed cost or other claims which may be declared by the Trustee occurring in connection with the Mitigation Project to be performed or administered by the Recipient under this Contract.
- C. Employees of Recipient are not employees or agents of the Trust. Employees of Recipient are subject to the exclusive control and supervision of Recipient and Recipient is solely responsible for employee payroll and claims arising therefrom.

IV. FUNDS

A. Funds and Payment Disbursements

1. Trust agrees to pay Recipient in accordance with the approved budget structure set forth in Attachment B and other provisions of this Contract and such payment shall not exceed the amount specified in the Contract Cover/Signature Page.
2. Recipient agrees that it shall not utilize funds for administration or overhead expenses in an amount that exceeds fifteen percent (15%) of the approved budgeted project salaries of Recipient. Recipient shall ensure salary amounts charged to the project are reasonable and solely for the project(s) identified.
3. Funds will be disbursed to Recipient as follows:
 - a. Mitigation Project Work Plan. The work plan for the execution of the Mitigation Project is described in Attachment A and includes the following:
 - i. Details regarding the specific work and services to be performed;
 - ii. A schedule of estimated time to perform each stage of the Mitigation Project;
 - iii. A budget to perform the Mitigation Project as shown in Attachment B; and
 - iv. Such other information requested by Trustee.
 - b. Invoicing. Upon completion of each stage of the Mitigation Project or as otherwise agreed, the Recipient shall electronically submit an invoice to the Trust with details about the work and services performed, the date(s) performed and a list of all expenditures in the format shown on Attachment C and such other information requested by the Trust. Trustee may approve payment of the invoice or upon review request additional information the Trustee deems necessary for clarification or other purposes prior to payment. Trustee may withhold payment until satisfied that the invoice represents accurately the contents therein. Prior to, during, or subsequent to approval of payment of invoices to Recipient, the Trustee shall have the right to conduct an audit or investigation regarding such invoices or other information provided by Recipient.
 - c. Progress Reports. Recipient shall provide Trust with a progress report with each invoice detailing the Mitigation Project activities performed to date together with a list of all expenditures with supporting documentation such as paid invoices, copies of subcontracts, reports maintained internally by Recipient, such reports to include information regarding potential issues that affect the Mitigation Project and reports submitted to Recipient's governing body and such other information requested by Trustee.

- d. Final Report. Recipient shall provide Trust with a final report detailing the Mitigation Project as completed which shall include copies of all reports maintained internally by Recipient, such reports to include information regarding the resolution of issues that affected the Mitigation Project and reports submitted to Recipient's governing body reflecting the completion of the Mitigation Project and such other information requested by Trustee.
 - e. Additional Reports. Recipient agrees to provide follow-up information and documentation to any report submitted to Trust as Trustee deems reasonable and necessary and such other information requested by Trustee from time to time.
- 4. Recipient agrees to return, refund, or repay to Trust any sum which Trustee determines represents an overpayment to Recipient or represents funds not used in accordance with the terms of this Contract. Trustee's determination of overpayment or funds not used in accordance with the terms of this Contract shall constitute an event of potential default more fully described in Section XIV hereinafter.
 - 5. Trustee may withhold funds to Recipient if Trustee determines that Recipient has not complied with the terms of this Contract. Trustee's determination to withhold funds due to Recipient's failure to comply with the terms of the Contract shall constitute an event of potential default more fully described in Section XIV hereinafter.
 - 6. Recipient agrees that it will not receive duplicate funds from another source for any of the items included in the budget set forth in Attachment B.
 - 7. Following Trustee's approval of the Final Report, any portion of the funds not expended or obligated in accordance with this Contract shall be returned to the Trust by Recipient.
 - 8. This Contract shall not be construed as creating any future financial obligation or debt of or on behalf of Trust. It is understood and agreed that funds may be provided to Recipient only from funds allocated for this Mitigation Project which shall be distributed subject to compliance with this Contract and upon such timing as deemed reasonable by the Trustee.

V. RECORDS MANAGEMENT

- A. Recipient shall maintain all books, records, documents, papers, and other evidence related to Mitigation Project implementation, including financial records, reports maintained internally by Recipient and reports submitted to Recipient's governing body, and Mitigation Project performance information, in accordance with generally accepted business and accounting practices, consistently applied. Recipient shall also maintain the financial data used in the preparation of support for any cost (direct and indirect) information or analysis for the Contract or for any

negotiated subcontract. Recipient shall also maintain a copy of any negotiated subcontract. Recipient shall also maintain a copy of any cost information or analysis submitted to Trustee. Recipient agrees to the disclosure and access of Trustee, or any authorized representative of Trustee to all such books, records, documents, papers, and other evidence for the purposes of review, inspection, audit, excerpts, transcriptions and copying during normal business hours.

- B. Recipient understands that acceptance of funds under this Contract acts as acceptance of the authority of the Trustee or his authorized representative, to conduct an audit or investigation in connection with those funds. Recipient further agrees to fully cooperate with the Trustee, or his authorized representative in the conduct of the audit or investigation, including providing all records requested. Recipient shall ensure that this clause concerning the audit of funds accepted under this Contract is included in any subcontract it awards.
- C. Recipient shall maintain such records and be subject to these audit requirements during the performance under this Contract for a period of five years after Trustee provides written approval of the Final Report. However, if Recipient is aware of any litigation, claim, negotiation, audit, cost recovery or other action, including actions concerning costs of items to which an audit exception has been taken, relating to the Mitigation Project that started before the expiration of the five-year record retention period, Recipient shall maintain all records and be subject to such audit requirements until completion of the action or resolution of all issues which arise from any litigation, claim, negotiation, audit, cost recovery or other action, or until the end of the five-year record retention period, whichever is later. The Trustee will have access to records at any reasonable time for as long as the records are maintained by Recipient. Recipient agrees to transfer records in its custody to Trustee upon his request. This paragraph survives termination of this Contract.
- D. Failure to comply with all records management and reporting requirements of this Contract shall constitute an event of potential default more fully described in Section XIV hereinafter.

VI. FINANCIAL MANAGEMENT

Recipient shall have a financial management or accounting system which accounts for costs in accordance with generally accepted accounting standards and principles. Recipient shall allow Trustee's review of the adequacy of the financial management system. Failure to maintain the financial accounting requirements shall constitute an event of potential default more fully described in Section XIV hereinafter. The accounting requirements shall include:

- A. Provide for the identification of costs in accordance with the approved project budget (Attachment B) and segregation of Mitigation Project costs between the budget categories;

- B. Maintain records which adequately identify the source and application of funds provided under this Contract. Such records must contain information pertaining to awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and income;
- C. Provide internal control by maintaining effective control and accountability for all cash, real and personal property and other assets paid for under this Contract. All such property acquired with Project funds must be adequately safeguarded and used solely for authorized purposes;
- D. Provide budget control by comparing outlays and expenditures with budgeted amounts for the funds provided by the Trust both by category and by task as shown in Attachment C;
- E. Support accounting records with source documentation, including cancelled checks, paid invoices, payrolls, time and attendance records, and subcontract documents;
- F. Permit the tracing of funds to a level of expenditures adequate to establish that such funds have not been used in violation of this Contract or applicable statutes; and
- G. Permit preparation of reports required by this Contract or requested by Trustee.

VII. SUBCONTRACTORS

- A. Recipient may subcontract all or any portion of the Mitigation Project for purposes of this Contract.
- B. Recipient shall be responsible for all acts and omissions of all subcontractors performing or furnishing any portion of the Mitigation Project under a direct or indirect contract with Recipient to the extent provided under applicable laws and regulations. Nothing in this Contract shall create for the benefit of any such subcontractor any contractual relationship between Trust and any such subcontractor, nor shall it create any obligation on the part of Trust to pay or to see to the payment of any money due to any such subcontractor.
- C. Recipient shall be solely responsible for scheduling and coordinating the work of subcontractors performing or furnishing any portion of the Project under a direct or indirect contract with Recipient. Recipient shall require all subcontractors performing or furnishing any portion of the Project who desire to communicate with Trustee to communicate through Recipient with Trustee.
- D. All work performed for Recipient by a subcontractor shall be pursuant to an appropriate written contract between Recipient and the subcontractor which is not inconsistent with the terms and conditions of this Contract. Each subcontractor

shall be provided a copy of this Contract prior to initiating any portion of the Project.

VIII. PUBLICATIONS, NEWS RELEASES, AND OTHER PUBLIC ANNOUNCEMENTS

All public reports, news releases, other publicity, and other materials prepared for publication pursuant to or as a result of this Contract shall acknowledge the Matagorda Bay Mitigation Trust as the funding source. Public reports or other publications, news releases, and other publicity issued by Recipient about the Mitigation Project shall be provided to Trustee.

IX. RIGHTS IN DATA AND OTHER MATERIALS

- A. Recipient and the Trust agree that any data collected as a result of this Contract shall be jointly owned by Recipient and the Trust. Recipient and Trust agree that each shall have complete and unlimited access and use to all data collected as a result of this Contract. Further, at the termination of the Trust, or at such other time deemed appropriate by Trustee, the Trustee has the right, but not the obligation to transfer any interest in the data to Recipient.
- B. Recipient shall act to ensure all subcontractors used for this Mitigation Project are advised of the rights in data and other materials described herein and that the subcontractors are prohibited from asserting any rights at common law or in equity or otherwise seeking to establish any claim to statutory copyright in any data, material or information developed under this Contract.
- C. Recipient and the Trust agree that in addition to the joint ownership by Recipient and the Trust of any data collected as a result of this Contract, that in the event any invention or intellectual property is created as a result of this Contract in which the Recipient retains title, Trust shall have a non-exclusive, nontransferable, irrevocable, paid-up license to practice or have practiced the subject invention throughout the world. Materials developed as a result of this Contract will be made available to the Trustee in written and electronic formats upon request under the non-exclusive, nontransferable, irrevocable, paid-up license.
- D. The Recipient has the responsibility to obtain from its subcontractors all data and rights therein necessary to fulfill the Recipient's obligations to the Trust under this Contract. If a subcontractor refuses to accept terms affording the Trust's such rights, the Recipient shall promptly bring such refusal to the attention of the Trustee.
- E. Recipient shall place a section in all subcontractor contracts that complies with Section IX.

X. AGREEMENT TO HOLD HARMLESS AND INDEMNIFICATION

- A. TO THE EXTENT PERMITTED BY APPLICABLE LAW, RECIPIENT AGREES TO INDEMNIFY, DEFEND AND HOLD HARMLESS THE TRUST, TRUSTEE AND AGENTS, EMPLOYEES, CONSULTANTS, ACCOUNTANTS, ATTORNEYS AND OTHER PROFESSIONALS AND REPRESENTATIVES ENGAGED OR EMPLOYED BY THE TRUST TO THE FULL EXTENT PERMITTED UNDER FEDERAL AND STATE LAW FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS, AND CAUSES OF ACTION TO THE EXTENT ARISING FROM THE MISCONDUCT, NEGLIGENCE, OMISSIONS, OR RECKLESS ACTS OF RECIPIENT OR ITS EMPLOYEES, OFFICERS, OFFICIALS OR AGENTS OR ITS SUBCONTRACTORS IN CONNECTION WITH THE PERFORMANCE OF SERVICES OR WORK BY RECIPIENT UNDER THIS CONTRACT. THE PROVISIONS OF THIS PARAGRAPH SHALL SURVIVE TERMINATION OF THIS CONTRACT.**
- B. TO THE EXTENT PERMITTED BY APPLICABLE LAW, THE RECIPIENT AGREES TO INDEMNIFY, DEFEND AND HOLD HARMLESS THE TRUST, TRUSTEE AND AGENTS, EMPLOYEES, CONSULTANTS, ACCOUNTANTS, ATTORNEYS AND OTHER PROFESSIONALS AND REPRESENTATIVES ENGAGED OR EMPLOYED BY THE TRUST TO THE FULL EXTENT PERMITTED UNDER FEDERAL AND STATE LAW FROM ANY AND ALL CLAIMS AND LOSSES ACCRUING OR RESULTING TO RECIPIENT AND TO ANY AND ALL SUBCONTRACTS, MATERIALS, PERSONS, LABORERS AND AN OTHER PERSONS, FIRMS OR CORPORATION, FURNISHING OR SUPPLYING WORK, SERVICES, MATERIALS, OR SUPPLIES IN CONNECTION WITH THE PERFORMANCE OF THIS CONTRACT.**

XI. CONFLICT OF INTEREST

- A. Recipient shall maintain an internal policy regarding conflicts of interest and shall adhere to said policy with respect to any potential or actual organizational or personal conflict of interest between Recipient and its employees or any**

subcontractor with respect to this Contract. Further, such internal policy shall include a prohibition that funds received by Recipient from the Trust shall not be used to pay, reimburse or otherwise give in any manner or for any purpose to the Plaintiffs and Defendants in Cause No. 6-17-CV-00047, In San Antonio Bay Estuarine Waterkeeper and S. Diane Wilson vs. Formosa Plastics Corp., Texas, and Formosa Plastics, Corp., U.S.A., in the United States District Court for the Southern District of Texas, Victoria Division.

- B. Recipient shall notify Trustee regarding any potential or actual organization or personal conflict of interest involving Recipient's employees or subcontractors and shall keep the Trustee informed regarding any actions taken or decisions made in connection with such employee or subcontractor. In the event that the organizational or personal conflicts of interest does not become known until after performance on the Contract begins, Recipient shall notify Trustee of the conflict and any action taken as soon as Recipient becomes aware of the conflict.
- C. Trustee has sole discretion to make the final determination as to whether an organizational or personal conflict of interest exists, and if the conflict of interest requires action beyond the action taken by Recipient, whatever action that may be. Trustee may request Recipient to terminate any subcontractor in whole or in part, if Trustee deems such termination necessary to avoid an organizational or personal conflict of interest.
- D. If Recipient was aware of an actual organizational or personal conflict of interest prior to award or discovered an actual conflict afterward and did not disclose it or misrepresented relevant information to Trust, Trustee, at his sole discretion, may terminate this Contract for default or pursue such other remedies as may be permitted by law or this Contract.
- E. Recipient shall place a section in all subcontractor contracts that complies with Section XI.

XII. VENUE

Recipient acknowledges and agrees that this Contract is being performed in Calhoun County, Texas. Recipient agrees that any permissible cause of action involving this Contract arises solely in Calhoun County.

XIII. ENTIRE AGREEMENT

This Contract constitutes the entire and full agreement between the Recipient and the Trust, and all previous oral or written agreements relating to the subject matter of this Contract between the Trust and Recipient have been superseded, reduced to written form, and are incorporated herein.

Recipient and Trust expressly agree and understand that all future, oral agreements, representations or modifications shall not have any legal binding effect unless and until reduced to writing and executed by both Recipient and Trustee, except for amendments by operation of law as provided in Section XVII in this Contract.

XIV. DEFAULT AND REMEDIES

A. Recipient shall be considered in default under this Contract if any one or more of the following events occur, provided that Recipient has received written notice of such potential default from Trustee and has failed to cure the potential default within thirty days from the date of said notice. If Recipient has begun a good faith effort to cure the potential default within the thirty-day period, Recipient may be allowed additional time, if deemed reasonable by Trustee in his sole discretion, as needed to cure the potential default.

B. Event of Potential Default. Trustee will, in his sole discretion, determine if an Event of Potential Default exists. Each of the following shall constitute an Event of Potential Default under this Contract:

1. If Recipient makes an assignment for the benefit of creditors or takes any similar action for the protection or benefit of creditors.
2. If at any time Recipient knowingly, negligently, or intentionally makes any representation to Trustee which is incorrect in any material respect.
3. If Recipient knowingly, negligently, or intentionally submits any request for payment to Trust which is incorrect in any material respect.
4. If Recipient knowingly, negligently, or intentionally submits any report or certification to Trust related to the Mitigation Project which is incorrect in any material respect.
5. If Recipient utilizes funds which Trustee determines represents an overpayment to Recipient or represents funds not used in strict accordance with the terms of this Contract.
6. If Recipient fails to perform the Mitigation Project described on Attachment A in any material aspect.
7. If Recipient fails to comply with the reporting and invoicing requirements under this Contract.
8. If Recipient fails to maintain the records management requirements under this Contract.
9. If Recipient fails to maintain the financial accounting requirements under this Contract.

10. If Recipient fails to maintain the insurance requirements under this Contract.

11. If Recipient fails to comply with any term or provision contained in this Contract.

- C. Remedies. Upon the occurrence of any such Event of Potential Default and failure of Recipient to cure such potential default as provided above, Trustee may declare Recipient in default in writing and may, as Trustee determines appropriate, withhold payments to Recipient or require Recipient to return, refund or repay any payments received prior or subsequent to the event of default. In addition, Trustee may terminate this Contract and avail himself of any appropriate legal remedies, including recovery of attorney's fees and expenses incurred in enforcing any such legal remedies, if so awarded by a court of competent jurisdiction.
- D. No Waiver. A waiver of any Event of Potential Default shall not be considered a waiver of any other or subsequent Event of Potential Default, and any delay or omission in the exercise or enforcement of the rights and powers of Trust shall not be construed as a waiver of any rights or powers.

XV. USE OF FUNDS AND LIMITATIONS ON EXPENDITURES

Funds distributed or allocated to Recipient under this Contract, or any modification thereto, shall not be used to support other programs operated by the Recipient under a different contract. Nor can such funds be carried over to a new contract or amended contract without the written permission of the Trustee.

The equipment purchased or acquired under this Contract are dedicated for the exclusive use at Green Lake Park and cannot be used for any other purpose.

XVI. LIMITATION ON LIABILITY

The Recipient understands and agrees that the Trust shall not be liable for expenditures made in violation of terms of this Contract, any laws, regulations, rules, or policies, or any other laws or regulations applicable to the Mitigation Project performed under this Contract. The Recipient also agrees that the Trust shall not be liable for any cost incurred by Recipient which exceeds the funding amount provided hereinabove. The Recipient shall be liable for such funds and shall repay such funds even if the improper expenditure, if any, was made by a subcontractor of the Recipient.

XVII. AMENDMENTS BY OPERATION OF LAW

Any alterations, additions, or deletions to the terms of this Contract which are required by changes in Federal law, State law, by regulations, are automatically incorporated into this Contract as if set forth fully, without written amendment hereto, and shall become effective on the effective date designated by such law, regulation, or policy.

XVIII. COMPLIANCE WITH LAW.

Recipient covenants and agrees to comply with all applicable Federal, State and local laws, and all applicable Federal and State regulations. Recipient shall also be responsible to ensure that its' subcontractors shall comply with applicable Federal, State and local laws, and all applicable Federal and State regulations.

XIX. PATENT INDEMNITY

The Recipient shall include a provision in all of its contracts with contractors and subcontractors that the contractor and subcontractor will indemnify the Trustee, the Trust and its consultants, agents, attorneys, and employees against liability, including costs, for infringement of any United States patent (except a patent issued upon an application that is now or may hereafter be withheld from issue pursuant to a Secrecy Order under 35 U.S.C. §181) arising out of the manufacture or delivery of supplies, the performance of services, or the construction, alteration, modification, or repair of real property under this Contract, or out of the use or disposal by or for the account of the Trust of such supplies or construction work.

XX. DISCLOSURE OF INTEREST

Recipient represents and warrants that the Trustee, the Trust or its' consultants, agents or attorneys have no ownership or beneficial interest of any kind in Recipient or Recipient's subcontractors. Further, Recipient shall ensure subcontractor's compliance with Section XX.

XXI. SEVERABILITY

If for any reason any section, paragraph, subdivision, clause, phrase, word or provision of this Contract shall be held invalid or unconstitutional by final judgment of a court of competent jurisdiction, it shall not affect any other section, paragraph, subdivision, clause, phrase, word or provision of this Contract for it is the definite intent of the parties that every section, paragraph, subdivision, clause, phrase, word or provision hereof be given full force and effect for its purpose, so long as the invalidated matter does not substantially deprive a party of the benefit of this Contract.

XXII. INSURANCE

Recipient shall maintain during the term of this Contract and shall provide Trustee with proof of insurance in amounts sufficient to cover the Recipient's liability subject to applicable constitutional and statutory limitations of liability.

1. The Trust shall not be responsible for the payment of premiums or assessments on such policies.
2. Proof of insurance showing such coverages as required herein shall be submitted to Trustee within 20 days of contract execution.
3. In the event any insurance policy as specified herein is cancelled or in the event Recipient fails to maintain the minimum insurance limits as specified herein or in the event recipient fails to provide certificates of insurance, such event shall constitute an event of potential default more fully described in Section XIV hereinabove.

XXIII. ASSIGNMENT

This Contract shall be binding on and inure to the benefit of the Trust and Recipient and their respective successors and permitted assigns. This Contract may not be assigned by Recipient without the prior written consent of the Trustee.

XXIV. NOTICES/COMMUNICATIONS

All notices, communications, and requests given to or made upon the Trust and Recipient hereto shall, except as otherwise specified herein, be in writing and shall be delivered or mailed to such party at the notice addresses specified on the Contract Cover/Signature Page. The Trust and Recipient may change their notice addresses but shall provide immediate notice to the other and shall provide such notice in writing to the other party.

XXV. DISPUTES

In the event a Recipient has a dispute with the Trust or in the event any Recipient seeks to file a claim or lawsuit, the Recipient's sole recourse shall be by informal dispute resolution between the Recipient and the Trust and if such informal dispute resolution is not resolved, then the Recipient may seek the alternative dispute resolution as provided herein. The alternative dispute resolution process shall consist of a Mediated Settlement Conference in Calhoun County, to be conducted with the Recipient and the Trust and their legal counsel. The mediator shall be selected by agreement of the Recipient and the Trustee. Should the parties fail to agree on a mediator, an attorney mediator shall be selected by the Director of Calhoun County Dispute Resolution Services. The decision made by a Mediator shall be binding on the Recipient and the Trust, and there shall be no further appeal but the decision shall be enforced, if necessary, by the District Court of Calhoun County. The Recipient agrees to submit to such binding alternative dispute resolution as provided herein. Further, Recipient's sole remedy under the informal dispute resolution and under the binding alternative dispute resolution shall be limited to all, none or part of the remaining balance, if any, of Funds allocated to it under the terms of this Contract with the Trust; however, the Trust may recoup any Funds distributed to the Recipient through the same alternative dispute resolution procedure described herein. Any remedy under the mediation shall be sole province of the Mediator unless the Recipient and Trustee agree

otherwise. In no event shall a Recipient be entitled to any other remedy; including, but not limited to, actual damages, compensatory damages, punitive damages, exemplary damages, interest, costs of court, actual expenses and attorneys' fees. These procedures shall be binding on Recipients notwithstanding any conflict with any law or regulation.

XXVI. PERIOD OF CONTRACT

This Contract will remain in effect until the termination of the CONTRACT PERIOD as defined above, unless extended, modified, or terminated by written agreement of the Parties or terminated as provided herein with the exception of the five-year records retention provision in Section V. This provision shall survive termination of this Contract.

END OF TERMS AND CONDITIONS

Matagorda Bay Mitigation Trust ("Trust")
ATTACHMENT A
STATEMENT OF MITIGATION PROJECT

Calhoun County, Texas ("Recipient")
211 S. Ann Street
Port Lavaca, Texas 77979

The Green Lake Park Development Maintenance Equipment Project shall include:

Purchase of necessary equipment to maintain the completed improvements at Green Lake Park:

- Skid Steer Track loader with bucket and grapple rake
- Tree Saw with hydraulic rotation
- 72" Open Front Industrial Bush Cutter

Matagorda Bay Mitigation Trust ("Trust")

ATTACHMENT B

BUDGET

Calhoun County ("Recipient")

211 S. Ann Street

Port Lavaca, Texas 77979

Contract Budget

Equipment \$ 105,000.00

Total Contract Budget \$ 105,000.00

RECIPIENT WILL SUBMIT INVOICES TO TRUST (mark appropriate option):

 X Monthly

OR

 Quarterly

Matagorda Bay Mitigation Trust ("Trust")
ATTACHMENT C
INVOICING INSTRUCTIONS

Below are the instructions on how to complete and submit your invoice. All invoices must be submitted electronically. You do not need to submit a hard copy unless specifically requested to do so. Invoices that don't balance or that lack proper supporting documentation will be delayed, so please ensure that your invoice is in order prior to submission.

The Recipient's Contract includes the budget and invoice form (Attachment C). The Contract's budget is tracked in two ways: Budget by Contract Category and Budget by Task.

Each invoice submitted for payment must track the project costs in compliance with the Recipient's Contract as outlined in Attachment C.

Each field at the top and bottom of the Invoice form must be completed and the invoice must be signed and dated by the person authorize to certify that the invoice is true, correct and complete and in accordance with the Contract.

Each invoice should have the amounts being billed for the current billing period ("This Invoice" columns) and the accumulated amount billed for this Contract to-date, including the current billing period ("Contract To-Date" columns). Please take special note that the two budgets – Budget by Contract Category and Budget by Task – must always equal.

Supporting documentation must be attached to the invoice for each line item being billed in the sequence such items appear in the Budget by Contract Category section. Each supporting document must be clearly labeled *and in the proper budget sequence* in order allow our audit of the invoice and its approval for payment. Failure to properly label or sequence the supporting documentation will cause a rejection of the invoice, so this is very important.

All invoices are to be submitted electronically (email) to: Trustee@mbmTrust.com.

If a Recipient has any questions whatsoever about invoicing procedures, please feel free to contact the Trust office at 361-200-1456 or write to Administrator@mbmTrust.com.

Effective Date: June 1, 2020

Invoice to Matagorda Bay Mitigation Trust

Date of Invoice:

Recipient Name: Calhoun County

Billing Period This Invoice:

Contract #: 102 – Green Lake Park Development - Maintenance Equipment

From To

Contract Amount: \$ 105,000.00

Invoice Amount: \$

Payment Request No:

Is this a final payment application?

Y N

INVOICE RECAP*

BUDGET BY CONTRACT CATEGORY				BUDGET BY TASK			
Category	This Invoice	Contract To-Date	Total Budget	Task	This Invoice	Contract To-Date	Total Budget
Equipment			\$105,000.00	N/A			
Total			\$105,000.00	Total			
*Please see invoicing instructions							

Remittance Address: 202 S. Ann Street, Suite A, Port Lavaca, Texas 77979

Name of Payment Contact Person and contact information: Gary Reese, Calhoun County Commissioner Precinct 4

Certification: I certify that the amounts being invoiced are true, correct, and complete in every material respect.

Signature and Title of Authorized Representative

Date Signed

Print Name and Title of Authorized Representative

For Office Use Only

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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

OFFICE USE ONLY CERTIFICATION OF FILING

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

Matagorda Bay Mitigation Trust
Poth, TX United States

Certificate Number:
2025-1363578

Date Filed:
09/15/2025

Date Acknowledged:

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

Calhoun County

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

Green Lake Park Maint Equipmen
Maintenance Equipment for Green Lake Park

4	Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
			Controlling	Intermediary
	Raabe, Steven	Poth, TX United States	X	
	Aguirre, Robert	Pipe Creek, TX United States	X	
	Wood Boykin & Wolters	Corpus Christi, TX United States		X

5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is Steven J. Raabe, and my date of birth is [REDACTED]

My [REDACTED] [REDACTED] [REDACTED], [REDACTED] [REDACTED] [REDACTED], [REDACTED] [REDACTED] [REDACTED], [REDACTED] [REDACTED] [REDACTED], [REDACTED] [REDACTED] [REDACTED]
(city) (state) (zip code) (country)

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

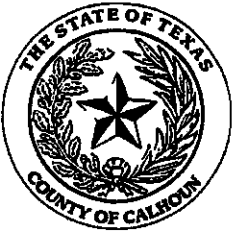
Executed in Wilson County, State of Texas, on the 15th day of Sept, 2025
(month) (year)

[Signature]
Signature of authorized agent of contracting business entity
(Declarant)

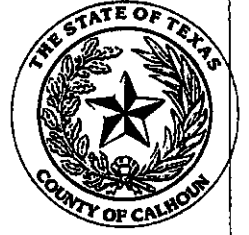
12

12. Consider and take necessary action on authorizing Commissioner Reese to accept Source Well Proposals and sign sales agreements to purchase Maintenance Equipment for Green Lake Park Development. (GDR)

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



Gary D. Reese
County Commissioner
County of Calhoun
Precinct 4



September 16, 2025

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

RE: AGENDA ITEM

Dear Judge Lyssy:

Please place the following item on the Commissioners' Court Agenda for September 24, 2025.

- Consider and take necessary action on authorize Commissioner Reese to accept Source Well proposals and sign sales agreements to purchase Maintenance Equipment for Green Lake Park Development.

Sincerely,

A handwritten signature in black ink, appearing to read "G.D. Reese".

Gary D. Reese

GDR/at



DATE: Aug 13, 2025
QUOTE #:367527-01

CALHOUN COUNTY PCT 4
ATTN: COMMISSIONER GARY REESE
PO BOX 177
SEADRIFT, TEXAS 77983-0177

Spence, Richard
361.935.6243

"2025 SOURCE WELL, BID PROPOSAL"
for, CATERPILLAR 255 Compact Track Loader with Attachments

One (1) New Caterpillar Inc Model: 255 CAB Compact Track Loader, with all standard equipment in addition to the additional specifications listed below:

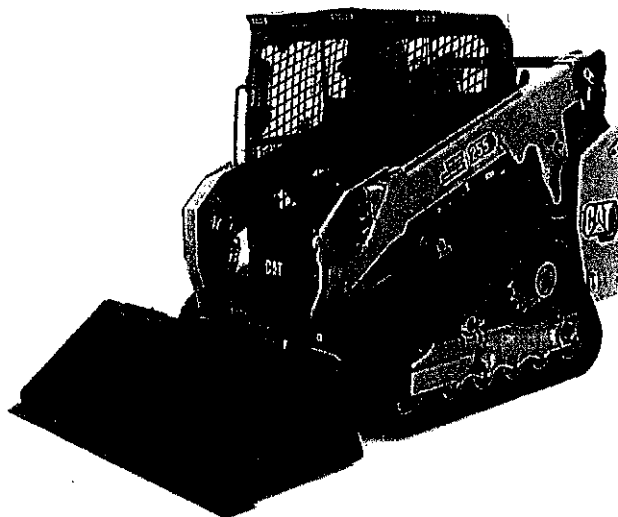
STOCK NUMBER: HL1023852	SERIAL NUMBER: 0FL710772	YEAR: 2025	HOURS: 3
SALE PRICE			\$81,025.95
SUB TOTAL			\$81,025.95
HET (0.181%)			\$146.66
TOTAL PURCHASE PRICE			\$81,172.61

WARRANTY:

Standard Warranty: 24 Month/2000 Hour Total Machine Limited Warranty

NOTES:

Sale Price includes the following TWO (2) Attachments:
#1 CATERPILLAR 72" Industrial Grapple Rake \$5,208.00
#2 CATERPILLAR 74" General Purpose Bucket \$1,593.00



DATE: Aug 13, 2025QUOTE #:Quote 367527-01

MACHINE SPECIFICATIONS

STOCK NUMBER: HL1023852

SERIAL NUMBER: 0FL710772

YEAR: 2025

HOURS: 3

DESCRIPTION	REF.#
255 05A COMPACT TRACK LOADER	586-0258
CAB PACKAGE, PRO PLUS	651-8303
HYDRAULICS, PERFORMANCE, (HP1)	585-9682
WORKLIGHTS, LED, FRONT/REAR	579-2310
COMFORT PKG, ENCLOSED CAB,HVAC	585-9836
SEAT,AIR SUSPENSION,CLOTH,HEAT	585-9587
PACKAGE, TECHNOLOGY (T4)	601-6603
FAN, COOLING, DEMAND	585-9666
QUICK COUPLER, HYD, SELF LEVEL	586-0291
HOSE GUIDE, ATTACHMENT	640-5405
GUARDING / SEALING PKG, (HD1)	586-0092
IDLER WHEELS, TRIPLE FLANGE	642-3004
TRACK,RUBBER,400MM(15.7IN)BLCK	594-1464
RIDE CONTROL	586-0028
STARTING PACKAGE, STANDARD	652-2073
FUEL, MANUAL PRIMING	605-5791
REAR LIGHTS	579-2312
DOOR, CAB, GLASS	593-7243
INTEGRATED RADIO	651-8586
SEAT BELT, 2"	613-1924
PRODUCT LINK, CELLULAR PL243	579-2323
CERTIFICATION ARR, P65	643-7208
INSTRUCTIONS, ANSI, USA	585-9582
SERIALIZED TECHNICAL MEDIA KIT	421-8926
MOUNTING, FIRE EXTINGUISHER	594-1961
BUCKET-GP, 74", BOT	279-5374
RAKE, IND GR-C, 72"	627-6670

Thank you for the opportunity to support your Heavy Equipment needs. Please give me a call when you have time to review and go over Specs, details & any questions you have.

Respectfully,

Richard Spence

HOLT CAT

Heavy Machine Sales, Rentals & Consignments

#361-935-6243 / richard.spence@holtcat.com

Color LCD monitor:

- Creep speed control
- Drive response adjustment
- Implement response adjustment
- Drive Power Priority adjustment
- Language selection (x32)

Interior rear view mirror

Horn

Hand (dial) throttle, electronic

12 volt power port

Rear window breaker hammer

FRAMES

Lift linkage, vertical path

Chassis, one piece welded

Machine tie down points (9)

Removable panels for machine

frame cleanout

Support, lift arm

Steel rear and front bumpers, welded

Fuel fill, machine right hand side

OTHER STANDARD EQUIPMENT

Steel engine door with replaceable louvers

Engine door - lockable

Extended life antifreeze (-37C, -34F)

Work tool attachment coupler

Hydraulic oil level sight gauge

Radiator coolant level sight gauge

Radiator expansion bottle

Cat ToughGuard TM hose

Hydraulic demand cooling fan



STANDARD EQUIPMENT

POWERTRAIN

Cat C2.8T turbocharged diesel engine
-Gross horsepower per ISO 14396
74.2 hp (55.3 kW)
-Glow plugs starting aid
-Liquid cooled, direct injection
Air cleaner, dual element, radial seal
S-O-S sampling valve, hydraulic oil
Ecology drain - coolant
Filter, hydraulic supply, cartridge type
Filter, hydraulic return, cartridge type

Filter, canister type, engine oil
Filter, canister type, fuel
and water separator
Radiator / hydraulic oil
cooler (side-by-side)
Spring applied, hydraulically released,
parking brakes
Hydrostatic transmission
Lockable fuel cap
Auto engine idle

UNDERCARRIAGE

Torsion Suspension (4 independent
torsion axles)
Two speed travel

Integrated tie downs on track
frame (4)

HYDRAULICS

Selectable control pattern - ISO or H
Electro/hydraulic implement control
Electro/hydraulic hydrostatic
transmission control

Speed sensor guarding
Heavy duty flat faced quick disconnects
with integrated pressure release lever

ELECTRICAL

Work Tool Electrical Harness
Heavy duty battery
-includes battery disconnect with
lockout feature
12 volt electrical system
85 ampere alternator
LED work lights
Auto reverse lights

Switch backlighting
Interior LED dome light
Backup alarm
Electrical outlet, beacon
Courtesy lighting, exterior
Automatic Work light notification flash
when parking brake is released

OPERATOR ENVIRONMENT

Operator warning system indicators:
-Air filter restriction
-Alternator output
-Armrest raised / operator out of seat
-Engine coolant temperature
-Engine oil pressure
-Glow plug activation
-Hydraulic supply filter restriction
-Hydraulic oil temperature
-Park brake engages
-Engine emission system
(where applicable)
Control interlock system, when operator
leaves seat or armrest raised:
-Hydraulic system disables
-Hydrostatic transmission disables
-Parking brake engages
ROPS cab, tilt up
FOPS, Level I

-Date, Time, Units, and brightness
settings
-Multi-operator Anti-theft Security
System & Monitoring
-Maintenance schedule and reminders
-Event and Diagnostic Code monitoring
-Smart Technology, enables use of
Smart Attachments
Gauges: fuel level, hour meter,
hydraulic temperature, battery
voltage, tachometer.
Cell Phone Storage Pocket
Cup Holder
Ergonomic contoured armrest
Independently adjustable, seat
mounted joystick controls.
Top and rear windows
Floor mat
Headliner



Skid Pro Attachments
807 McKay Ave S
Alexandria MN 56308
United States

Sales Order

SO20734
9/9/2025

Bill To
Gary Reese
Calhoun County Texas Precinct
#4
104 E DALLAS AVE
SEADRIFT TX 77983
United States

Ship To
Gary Reese
Calhoun County Texas Precinct
#4
104 E DALLAS AVE
SEADRIFT TX 77983
United States

1 361-746-1019
gary.reese@calhouncotx.org

Sales Rep
Jeremy Johnson

Payment Method	Terms	PO #	Shipping Method	Ship Date
	Due on receipt		XPO Logistics	9/9/2025

QTY	Item	Description	Price	Total
	CAT 255	CAT 255:Rated Operating Capacity 2499Lbs. 74.3HP - 69.3" Width - 23gpm SF - 30gpm HF - 3500psi SF - 4061 HF		
	Line			
1	QASA530	XHD Tree Saw - Hydraulic Rotation	\$12,695.00	\$12,695.00
1	FFC	1/2" Flat Faced Couplers	\$95.00	\$95.00
1	D002128	0.79" x 1/2" NPT Female Quick Coupler (Case Drain)	\$95.00	\$95.00
1	-0	LTL Access Appointment	\$0.00	\$0.00
1	Shipping	XPO	\$0.00	\$878.12
1	Discount	***SourceWell Bid*** Discount	\$0.00	\$-900.00
	Subtotal	XHD Tree Saw with Hydraulic Rotation \$12,863.12 Delivered		\$12,863.12
	Line			
1	612-1-0003	X4 Industrial Cutter - 72" Open - 8" Cutting Capacity	\$8,695.00	\$8,695.00
1	FFC	1/2" Flat Faced Couplers	\$95.00	\$95.00
1	-0	LTL Access Appointment	\$0.00	\$0.00
1	Shipping	XPO	\$0.00	\$907.50
1	Discount	***SourceWell Bid*** Discount	\$0.00	\$-700.00
	Subtotal	72" Open Front Industrial Brush Cutter \$8997.50 Delivered		\$8,997.50



SO20734



Skid Pro Attachments
807 McKay Ave S
Alexandria MN 56308
United States

Sales Order

SO20734
9/9/2025

Subtotal	\$21,860.62
Shipping Cost	\$0.00
Tax Total (8%)	\$0.00
Total	\$21,860.62

Sales Tax:

State sales tax to be paid unless a valid exemption form is received prior to shipping. AL & TX Sales Tax calculated at flat 8% rate per state guidelines.

Freight Policy:

Please thoroughly inspect all equipment upon arrival. Should damage be found, please notate on the delivery receipt and sign after taking pictures of the attachment while the driver is present. If the damage is not notated the freight carrier will not consider any remedy for issues that may have occurred in transit.

Return Policy:

Order cancellations will be assessed a 5% fee. Returned items will be assessed a 20% restocking fee plus all applicable freight charges. Only new, unused equipment is eligible for returns. Used equipment may not be returned. All returns on new equipment require pre-approval and written authorization. Custom orders are non-refundable.

CLICK TO PAY NOW



SO20734

13

13. Consider and take necessary action on insurance proceed checks from TAC in the amount of \$14,033.58 (\$16,533.58 - \$2,500.00 deductible) for damages to a Sheriff's Office vehicle on 8-24-25. (VLL)

RESULT:

APPROVED [UNANIMOUS]

MOVER:

Gary Reese, Commissioner Pct 4

SECONDER:

Ronald Best, Commissioner Pct 2

AYES:

Judge Lyssy, Commissioner Best, Behrens, Reese

Debbie Vickery

From: Erica.Perez@calhouncotx.org (Erica Perez) <Erica.Perez@calhouncotx.org>
Sent: Wednesday, September 17, 2025 11:17 AM
To: Debbie.vickery@calhouncotx.org
Subject: Agenda Item - Insurance Proceeds - SO

Debbie,

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

- Consider and take necessary action on insurance proceeds checks from TAC in the amount of \$14,033.58 (\$16,533.58 – \$2,500.00 deductible) for damages to a Sheriff's Office vehicle on 8/24/25.

Thank you.

Best regards,
Erica Perez
First Assistant Auditor
Calhoun County
202 S. Ann, Suite B
Port Lavaca, TX 77979
Phone: 361. 553.4612
Fax: 361.553.4614

Calhoun County Texas

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

CHECK DATE CHECK NO.

9/9/2025

85131

85131

VENDOR ID		VENDOR NAME		ACCOUNT NUMBER
		Calhoun County		
DATE	INVOICE NO.	DESCRIPTION		AMOUNT
9/9/2025	APD20253952-1	MVD-to Clm/Aty Tow bills		\$280.00
9/9/2025	APD20253952-1			\$0.00

DOCUMENT CHEMICAL REACTIVE PROPERTIES AND FEATURES A FOIL HOLOGRAM

85131



TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS
1210 SAN ANTONIO STREET
AUSTIN, TX 78701
(512) 478-8753

FROST BANK

30-9/1140

DATE
9/9/2025

AMOUNT
\$ 280.00

PAY TWO HUNDRED EIGHTY AND 00 / 100 DOLLARS

TO THE
ORDER
OF:

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



VOID AFTER 180 DAYS

Susan M. Ruffert
Julie R. Ruffert

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

85131

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

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

CHECK DATE	CHECK NO.
9/9/2025	85130

85130

VENDOR ID		VENDOR NAME		ACCOUNT NUMBER
		Calhoun County		
DATE	INVOICE NO.	DESCRIPTION		AMOUNT
9/9/2025	APD20253952-1	MVD-to Clm/Aty Payment for the 2023 Chevrolet Tahoe VIN 2205		\$16253.58
9/9/2025	APD20253952-1	Deductible		\$-2500.00

DOCUMENT CHEMICAL REACTIVE PROPERTIES AND FEATURES A FOIL HOLOGRAM

85130



TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS
1210 SAN ANTONIO STREET
AUSTIN, TX 78701
(512) 478-8753

FROST BANK
30-9/1140

DATE
9/9/2025

AMOUNT
\$ 13,753.58

PAY THIRTEEN THOUSAND SEVEN HUNDRED FIFTY-THREE AND 58 / 100 DOLLARS

TO THE
ORDER
OF:

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



VOID AFTER 180 DAYS

Susan M. Ralston
Julie R. Ralston

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

85130

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

14

14. Consider and take necessary action to amend the 2025 Salary Order. (VLL)

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

Debbie Vickery

From: candice.villarreal@calhouncotx.org (candice villarreal)
<candice.villarreal@calhouncotx.org>
Sent: Wednesday, September 17, 2025 12:26 PM
To: Debbie.Vickery@calhouncotx.org; 'vern lyssy'; 'Rhonda Kokena'; 'clarri atkinson';
Ronny.Best@calhouncotx.org; Joel.Behrens@calhouncotx.org; 'Gary Reese'
Subject: Agenda Item Request - Salary Order Amendment
Attachments: SALARY ORDER-2025 AMENDMENT 09.24.2025 Eff 10.01.2025.pdf

Debbie,

Please place the following on the agenda for September 24, 2025:

- Consider and take necessary action to amend the 2025 Salary Order.

This is regarding a TJJD-Texas Juvenile Justice Department grant funded increase.

Sincerely,

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

Calhoun County Texas

**2025 ORDER PASSING MAXIMUM SALARIES, MAKING MONTHLY
APPROPRIATIONS, AND PASSING HOLIDAY SCHEDULE**

AMENDMENT DATE SEPTEMBER 24, 2025
EFFECTIVE DATE OCTOBER 1, 2025

JUVENILE PROBATION

Annual Salary

Increase:

Chief Juvenile Probation Officer

\$12,000

\$88,739

Increase fully funded by the TJJD-Grant.

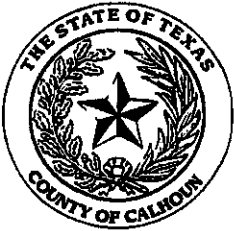
Increase to the 2025 bi-weekly amount is \$461.54, effective October 1, 2025.

Updated 2025 Annual Salary amount used to determine 2026 Annual Salary.

15

15. Consider and take necessary action to release final payment and retainage for \$26,081.20 to Shirley & Sons Construction Co. for Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion and authorize County Judge to sign all closeout documentation. (GDR)

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



Gary D. Reese
County Commissioner
County of Calhoun
Precinct 4



September 17, 2025

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

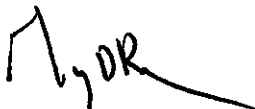
RE: AGENDA ITEM

Dear Judge Lyssy:

Please place the following item on the Commissioners' Court Agenda for September 24, 2025.

- Consider and take necessary action to release final payment and retainage for \$25,081.20 to Shirley & Sons Construction Co. for Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion and authorize County Judge to sign all closeout documentation.

Sincerely,


Gary D. Reese

GDR/at

PO: 999-31844

FUND: 5183

COUNTY TREASURER'S CHECK REQUEST

COMMISSIONERS COURT PAYMENT DATE: 9/24/2025 DATE DUE IN TREASURERS OFFICE: 9/15/2025

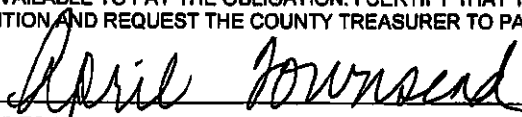
DEPARTMENT NUMBER AND NAME: 999 NO DEPARTMENT

VENDOR CODE AND NAME: 7123 SHIRLEY & SONS CONSTRUCTION
COMPANY, INC.
PO BOX 429
CLEVELAND

TX 77328-0429

INVOICE NUMBER	INVOICE DATE	PURCHASE DESCRIPTION	INVOICE AMOUNT	ACCOUNT NUMBER
3637	9/17/2025	BILL SANDERS MEMORIAL PARK PAVILION - PAY EST. NO. 3 - FINAL	\$25,081.20	73252 - 636
TOTAL			\$25,081.20	

THE ITEMS OR SERVICES SHOWN ABOVE ARE NEEDED IN THE DISCHARGE OF MY OFFICIAL DUTIES AND I CERTIFY THAT FUNDS ARE AVAILABLE TO PAY THE 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.


DEPARTMENT HEAD OR AUTHORIZED SIGNATURE9-17-25
DATE

Wednesday, September 17, 2025



September 17, 2025

Mr. Gary Reese
Calhoun County Commissioner Precinct #4
P.O. Box 177
Seadrift, TX 77983

RE: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion

Dear Commissioner Reese:

Attached is pay estimate request #3 Final & Retainage for work completed on the Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion by Shirley & Sons Construction Co., Inc. The construction of the physical improvements on the project has been completed. I recommend that payment be made in the amount of \$25,081.20.

If you have any questions, please do not hesitate to contact me at (361) 578-9836 or by email at mglaze@urbanvictoria.com. Thank you for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Matt A. Glaze".

Matt A. Glaze, P.E.
Vice President

MAG/dmf

Attachments

cc: The Honorable Vern L. Lyssy, Calhoun County Judge
Ronald R. Shirley II, Shirley & Sons Construction Co., Inc.
Connie Novosad, Urban Engineering

Invoice #3637

Pay Estimate No. 3 Fnal

Project Name:	Owner:	Contract Amount:
Bill sanders park pavilion	Calhoun County	\$250,812.00
		Contract Change Orders:
		\$0.00
		Total Contract Amount:
		\$250,812.00
		Covering Period:
		9/325-9/11/25
		Total Done To Date:
		\$250,812.00
		Amount Retained:
		\$0.00
		Previous Payments:
		\$225,730.80
		Total Deductions:
		\$225,730.80
		Amount Due For Payment:
		\$25,081.20

Contractor:

Shirley & Sons Construction Co., Inc.
P.O. Box 429
Cleveland, Texas 77328-0429

Certificate of the Contractor or His Duly Authorized Representative

To the best of my knowledge, I certify that all items, quantities and prices of work and materials shown on the face of this estimate are correct; that all work has been performed and materials supplied in full accordance with the terms and the conditions of the corresponding construction contractual documents between the Owner and the Contractor, all changes authorized thereto; that the foregoing is a true and correct statement and of the contract account up to and including the last day of the period covered by this estimate and that no part of the "AMOUNT DUE FOR PAYMENT" has been received. I further certify that all just and lawful bills against the below named Contractor for labor, material and expendable equipment employed in the performance of said contract have been paid in full accordance with the contract documents.

Date: 9/11/25

Shirley & Sons Construction Co., Inc.

By: 

Ronald R. Shirley, President

Certificate of Owners Construction Supervisor

By: 

Owner: Calhoun County

Date: 9/11/25

Contractor: Shirley & Sons Construction Co., Inc.

Page: 2 of 2

Item	Description	Unit	Contract Quantity	Total Work Done This Estimate	Total Work Done Previous Estimate	Total Work To Date Quantity	Contract Unit Price	Amount
1	Mobilization and Demobilization	LS	1	0	1	1	\$25,000.00	\$25,000.00
2	Pavilion	SF	1,705	0	1,705	1,705	\$86.00	\$146,630.00
3	concrete flatwork	SF	2,146	0	2,146	2,146	\$27.00	\$57,942.00
4	Select Fill	SF	2,124	0	2,124	2,124	\$10.00	\$21,240.00
6	Total Project							\$250,812.00

SHIRLEY & SONS CONSTRUCTION CO., INC.													
BID NO. 2025.05 - CALHOUN COUNTY													
BILL SANDERS PARK - SWAN POINT PAVILION													
Pay Estimate #3 Final & Retainage Date: 09/17/2025													
Item No.	Description	Estimated Quantity		Approved Contract		Total Price		Quantities		Amounts		% Complete	
		Unit	Quantity	Unit	Price	Unit	Price	This Period	To Date	This Period	To Date	Amount	Amount
BASE BID													
GENERAL													
1.	Mobilization, Insurance and Bonds (Maximum 10% of Base Bid)	LS	1	LS	\$ 25,000.00		\$ 25,000.00	0	1	\$ -	\$ 25,000.00	100%	100%
SUBTOTAL GENERAL													
IMPROVEMENTS													
2.	Pavilion	SF	1,705	SF	\$ 86.00		\$ 146,630.00	0	1,705	\$ -	\$ 146,630.00	100%	100%
3.	Concrete Flatwork	SF	2,146	SF	\$ 27.00		\$ 57,942.00	0	2,146	\$ -	\$ 57,942.00	100%	100%
4.	Select Fill	SF	2,124	SF	\$ 10.00		\$ 21,240.00	0	2,124	\$ -	\$ 21,240.00	100%	100%
SUBTOTAL IMPROVEMENTS													
TOTAL BASE BID													
TOTALS \$ 250,812.00													
Total Work Completed \$ 250,812.00													
Less Retainage \$ -													
Less Previous Invoices \$ -													
Final Payment Due \$ 25,081.20													
Retainage % 10%													

I, Matt A. Glaze, hereby certify that improvements for the
Bid No. 2025.05 - Calhoun County Bill Sanders Park- Swan Point
Pavilion project have been fully completed in accordance with the
Contract Documents.

[Signature] 9/11

STATE OF TEXAS

I, Matt A. Glaze, hereby certify that improvements for the
Bid No. 2025.05 - Calhoun County Bill Sanders Park - Swan Point
Pavilion project have been fully completed in accordance with the
Contract Documents.

[Signature] 9/17/25
Matt A. Glaze, P.E.
Urban Engineering



AFFIDAVIT OF ALL BILLS PAID

THE STATE OF Texas

COUNTY OF Liberty

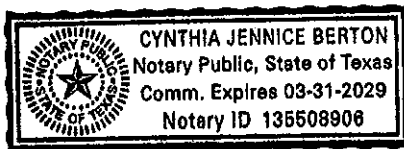
Ronald Shirley personally appeared before the undersigned authority on this day and, having been duly sworn, states under oath that he/she is a duly authorized representative of the Contractor, Shirley & Sons Construction Co., Inc., and that the Contract for the **Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion** has been fully completed and that all bills of the subcontractors for labor, materials and equipment, and supplies furnished in connection with this Project have been fully paid.

[Signature]
Signature

Ronald Shirley
Typed Name

President
Title

Sworn to and subscribed before me this 12 day of September, 2025.



Cynthia Jennice Berton
Notary Signature

Cynthia Jennice Berton
Printed Name

In and for the State of Texas

3-31-2029
Commission Expires

CERTIFICATE OF FINAL COMPLETION

DATE OF ISSUANCE: September 11, 2025

OWNER: Calhoun County
CONTRACTOR: Shirley & Sons Construction Co., Inc.
CONTRACT DATE: June 25, 2025
CONTRACT AMOUNT: \$250,812.00
CONTRACT: Construction of a 30' x 50' pavilion at the Bill Sanders Park – Swan Point in Seadrift, Texas
PROJECT: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion
OWNER's CONTRACT NO: Bid No. 2025.05 ENGINEER's PROJECT NO.: E25470.02

This Certificate of Final Completion applies to all Work under the Contract Documents.

The Work to which this certificate applies has been inspected by authorized representatives of OWNER, CONTRACTOR and ENGINEER, and that the Work is hereby declared to be complete in accordance with the Contract Documents on

September 11, 2025
DATE OF FINAL COMPLETION

Executed by ENGINEER on

September 11, 2025
(Date)



URBAN ENGINEERING
(ENGINEER)

By: _____

(Authorized Signature)

CONTRACTOR accepts this Certificate of Final Completion on September 12, 2025
(Date)

SHIRLEY & SONS CONSTRUCTION CO., INC.
(CONTRACTOR)

By: _____

(Authorized Signature)

OWNER accepts this Certificate of Final Completion on 9-24-2025
(Date)

CALHOUN COUNTY
(OWNER)

By: _____

(Authorized Signature)

CONSENT OF SURETY COMPANY TO FINAL PAYMENT

PROJECT: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion
OWNER: Calhoun County
CONTRACTOR: Shirley & Sons Construction Co., Inc.
CONTRACT DATE: June 25, 2025

In accordance with the provisions of the Contract between the OWNER and the CONTRACTOR as indicated above, West Bend Insurance Company

SURETY COMPANY, on bond of CONTRACTOR, hereby approves of the final payment to the CONTRACTOR, and agrees that final payment to the CONTRACTOR shall not relieve the SURETY COMPANY of any of its obligations to OWNER as set forth in the said SURETY COMPANY's bond.

IN WITNESS WHEREOF, the SURETY COMPANY has hereunto set its hand this 12th day of September, 2025.

ATTEST:

West Bend Insurance Company
SURETY COMPANY




Signature of Authorized Representative

James N. Berry, Attorney-In-Fact
Title

(SEAL)



Bond No. 2299748

POWER OF ATTORNEY

Know all men by these Presents, that West Bend Insurance Company (formerly known as West Bend Mutual Insurance Company prior to 1/1/2024), a corporation having its principal office in the City of West Bend, Wisconsin does make, constitute and appoint:

James N. Berry

lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety and as its act and deed any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of: Thirty Million Dollars (\$30,000,000)

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of West Bend Insurance Company by unanimous consent resolution effective the 1st day of January 2024.

Appointment of Attorney-in-Fact. The president or any vice president, or any other officer of West Bend Insurance Company may appoint by written certificate Attorneys-In-Fact to act on behalf of the company in the execution of and attesting of bonds and undertakings and other written obligatory instruments of like nature. The signature of any officer authorized hereby and the corporate seal may be affixed by facsimile to any such power of attorney or to any certificate relating therefore and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the company, and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the company in the future with respect to any bond or undertaking or other writing obligatory in nature to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any said officer at any time.

Any reference to West Bend Mutual Insurance Company in any Bond and all continuations thereof shall be considered a reference to West Bend Insurance Company.

In witness whereof, West Bend Insurance Company has caused these presents to be signed by its president undersigned and its corporate seal to be hereto duly attested by its secretary this 1st day of January 2024.

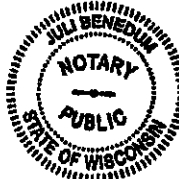
Attest Christopher C. Zwiggart
Christopher C. Zwiggart
Secretary



Robert J. Jacques
Robert J. Jacques
President

State of Wisconsin
County of Washington

On the 1st day of January 2024, before me personally came Robert Jacques, to me known being by duly sworn, did depose and say that he is the President of West Bend Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the board of directors of said corporation and that he signed his name thereto by like order.



Julie Benedum
Lead Corporate Attorney
Notary Public, Washington Co., WI
My Commission is Permanent

The undersigned, duly elected to the office stated below, now the incumbent in West Bend Insurance Company, a Wisconsin corporation authorized to make this certificate, Do Hereby Certify that the foregoing attached Power of Attorney remains in full force effect and has not been revoked and that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at West Bend, Wisconsin this 12th day of September, 2025



Christopher C. Zwiggart
Christopher C. Zwiggart
Secretary

FINAL WAIVER OF LIEN RIGHTS

FROM: Shirley & Sons Construction Co., Inc. (Contractor)

TO: Calhoun County (Owner)

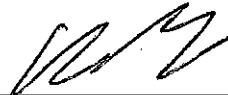
PROJECT: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion

1. The undersigned does hereby waive, release, and surrender any claim, lien, or right of lien resulting from labor, skill, and/or materials, subcontract work, equipment, or other work, rent services, or supplies, heretofore furnished in and for the construction improvement, alteration or additions to the above-described project prior to the date hereof.
2. The undersigned further states that "Pay Estimate No. 3 Final" attached hereto, as it relates to construction costs payable pursuant to its construction contract with Calhoun County is accurate as of the date hereof and that there are no mechanics' or materialmen's liens outstanding at the date of this Waiver. All due and payable bills with respect to the work performed by CONTRACTOR have been paid to date or are included in the amount requested in the attached Final Pay Estimate and there is no known basis for the filing of any mechanics' or materialmen's liens against the land or improvements of the OWNER; and waivers from all subcontractors and materialmen of subcontractor for work done and materials furnished have been obtained in such form as to constitute an effective waiver of all such liens under the laws of the State of Texas.
3. This Waiver of Lien Rights:
 - a. is given to secure payment for the work under the CONTRACTOR's construction contract in the amount of \$250,812.00 as indicated in the attached Pay Estimate No. 3 Final;
 - b. will be fully effective upon receipt of said payment in full.
4. In further consideration of the payment as above set forth, and to induce the OWNER to make said payment, the undersigned agrees to defend and hold harmless the OWNER, Calhoun County, OWNER's lender, and/or any principal or surety from any claims hereinafter made by the undersigned and/or its employees, agents, servants, or assigns of such parties against the project.
5. The undersigned further states that upon receipt of the amount specified in Section 3(a) above, CONTRACTOR will have been fully paid for all sums due from OWNER under the construction contract and due from and after such receipt CONTRACTOR shall have no right or claim to any further payment from OWNER for any materials furnished or work performed by CONTRACTOR or by any person or entity claiming by, through, or under CONTRACTOR.

6. It is acknowledged that the designation of the above project constitutes an adequate description of the property and improvements for the purposes of this instrument.

Dated this 12 day of September, 2025.

Shirley & Sons Construction Co., Inc.



(Signature)

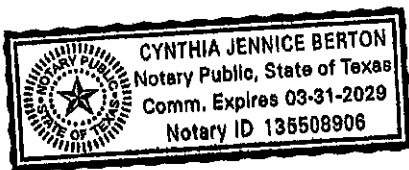
By: Ronald R. Shirley II

Title: President

STATE OF Texas §
COUNTY OF Liberty §
§

The foregoing Final Waiver of Lien Rights was subscribed and sworn to me this 12 day of September, 2025, by Ronald Shirley, as President of Shirley & Sons Construction Co., Inc.

WITNESS MY HAND AND OFFICIAL SEAL.



Cynthia Jennice Berton
Notary Public Signature

Cynthia Jennice Berton
Printed Name

3-31-2029
Commission Expires

GUARANTEE

KNOW ALL MEN BY THESE PRESENTS: That we, Shirley & Sons Construction, Co., Inc. ("CONTRACTOR"), of the City of Cleveland, County of Liberty, and State of Texas, as CONTRACTOR for the Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion, jointly and severally represent, warrant, and guarantee as follows:

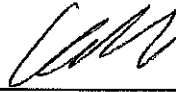
1. That all of the work ("Work") contemplated by that certain Contract dated June 25, 2025, between Calhoun County ("OWNER") and Shirley & Sons Construction Co., Inc. (the undersigned CONTRACTOR) has been completed in accordance with the plans, specifications, and change orders referred to therein.
2. That all Work is free from faulty material in every particular throughout.
3. That all Work is free from improper workmanship throughout.
4. That all Work is guaranteed against unusual damage from proper and usual wear.
5. That CONTRACTOR will replace and/or re-execute, without cost to the OWNER such work as may be found to be defective or not completed in accordance with Contract Documents and Modifications, and will make good all damages caused to other work or materials as a result of such defective work or its required replacement or re-execution.
6. That CONTRACTOR agrees to replace and/or re-execute defective or improperly completed work for maintenance and all other purposes found within one (1) year after the date of final and unconditional acceptance of the Work by OWNER as evidenced by OWNER's Certificate of Acceptance of Work and/or the date of OWNER'S written acceptance of Work.
7. That CONTRACTOR agrees in the event that CONTRACTOR attempts to replace and/or re-execute defective or improperly completed work during the initial one (1) year period of this Guarantee, but CONTRACTOR does not properly replace and/or re-execute such defective or improperly completed work, then the Guarantee period may be extended by OWNER at its sole option for an additional period necessary for proper replacement and/or re-execution of the Work by the CONTRACTOR within the terms of this Guarantee.
8. That CONTRACTOR agrees the one (1) year period of this Guarantee will not limit OWNER's other rights under common law to have defects remedied when discovered after one (1) year.
9. That notice of defective or improperly completed work shall be made in writing by certified or registered mail, return receipt requested, and addressed as follows:

OWNER: Calhoun County
Calhoun County Courthouse
211 S. Ann Street, Suite 301
Port Lavaca, Texas 77979

CONTRACTOR: Shirley & Sons Construction Co., Inc.
P.O. Box 429
Cleveland, Texas 77328

EXECUTED on this the 12 day of September, 2028.

Shirley & Sons Construction Co., Inc.



(Signature)

By: Ronald R. Shirley II

Title: President

CERTIFICATE OF FINAL COMPLETION

DATE OF ISSUANCE: September 11, 2025

OWNER: Calhoun County
CONTRACTOR: Shirley & Sons Construction Co., Inc.
CONTRACT DATE: June 25, 2025
CONTRACT AMOUNT: \$250,812.00
CONTRACT: Construction of a 30' x 50' pavilion at the Bill Sanders Park – Swan Point in Seadrift, Texas
PROJECT: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion
OWNER's CONTRACT NO: Bid No. 2025.05 ENGINEER's PROJECT NO.: E25470.02

This Certificate of Final Completion applies to all Work under the Contract Documents.

The Work to which this certificate applies has been inspected by authorized representatives of OWNER, CONTRACTOR and ENGINEER, and that the Work is hereby declared to be complete in accordance with the Contract Documents on

September 11, 2025
DATE OF FINAL COMPLETION

Executed by ENGINEER on

September 11, 2025.
(Date)



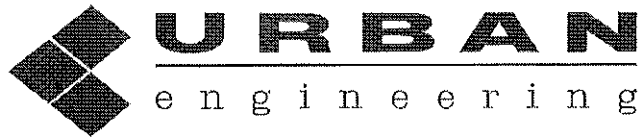
By: [Signature]
(Authorized Signature)
URBAN ENGINEERING
(ENGINEER)

CONTRACTOR accepts this Certificate of Final Completion on September 12, 2025.
(Date)

SHIRLEY & SONS CONSTRUCTION CO., INC.
(CONTRACTOR)
By: [Signature]
(Authorized Signature)

OWNER accepts this Certificate of Final Completion on September 24, 2025.
(Date)

CALHOUN COUNTY
(OWNER)
By: [Signature]
(Authorized Signature)



September 17, 2025

Mr. Gary Reese
Calhoun County Commissioner Precinct #4
P.O. Box 177
Seadrift, TX 77983

RE: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion

Dear Commissioner Reese:

Attached is pay estimate request #3 Final & Retainage for work completed on the Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion by Shirley & Sons Construction Co., Inc. The construction of the physical improvements on the project has been completed. I recommend that payment be made in the amount of \$25,081.20.

If you have any questions, please do not hesitate to contact me at (361) 578-9836 or by email at mglaze@urbanvictoria.com. Thank you for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Matt A. Glaze".

Matt A. Glaze, P.E.
Vice President

MAG/dmf

Attachments

cc: The Honorable Vern L. Lyssy, Calhoun County Judge
Ronald R. Shirley II, Shirley & Sons Construction Co., Inc.
Connie Novosad, Urban Engineering

Project Name:

Bill sanders park pavilion

Owner:

Calhoun County

Contract Amount:

\$250,812.00

Contract Change Orders:

\$0.00

Total Contract Amount:

\$250,812.00

Covering Period:

9/325-9/11/25

Total Done To Date:

\$250,812.00

Amount Retained:

\$0.00

Previous Payments:

\$225,730.80

Total Deductions:

\$225,730.80

Amount Due For Payment:

\$25,081.20

Certificate of the Contractor or His Duly Authorized Representative

To the best of my knowledge, I certify that all items, quantities and prices of work and materials shown on the face of this estimate are correct; that all work has been performed and materials supplied in full accordance with the terms and the conditions of the corresponding construction contractual documents between the Owner and the Contractor, all changes authorized thereto; that the foregoing is a true and correct statement and of the contract account up to and including the last day of the period covered by this estimate and that no part of the "AMOUNT DUE FOR PAYMENT" has been received. I further certify that all just and lawful bills against the below named Contractor for labor, material and expendable equipment employed in the performance of said contract have been paid in full accordance with the contract documents.

Date: 9/11/25

Shirley & Sons Construction Co., Inc.

By: 

Ronald R. Shirley, President

Certificate of Owners Construction Supervisor

By: 

Owner: Calhoun County

Date: 9/11/25

Contractor: Shirley & Sons Construction Co., Inc.

Page: 2 of 2

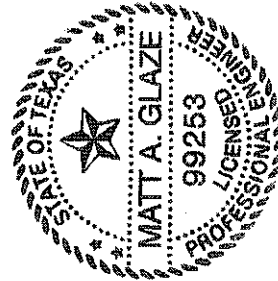
Item	Description	Unit	Contract Quantity	Total Work Done This Estimate	Total Work Done Previous Estimate	Total Work To Date Quantity	Contract Unit Price	Amount
1	Mobilization and Demobilization	LS	1	0	1	1	\$25,000.00	\$25,000.00
2	Pavilion	SF	1,705	0	1705	1705	\$86.00	\$146,630.00
3	concrete flatwork	SF	2,146	0	2,146	2,146	\$27.00	\$57,942.00
4	Select Fill	SF	2,124	0	2,124	2,124	\$10.00	\$21,240.00
6	Total Project							\$250,812.00

SHIRLEY & SONS CONSTRUCTION CO., INC.												
BID NO. 2025.05 - CALHOUN COUNTY												
BILL SANDERS PARK - SWAN POINT PAVILION												
Pay Estimate #3 Final & Retainage Date: 09/17/2025												
Item No.	Description	Estimated Quantity	Approved Contract		Total Price	Quantities		Amounts		% Complete		
			Unit	Unit Price		This Period	To Date	This Period	To Date			
BASE BID												
GENERAL												
1.	Mobilization, Insurance and Bonds (Maximum 10% of Base Bid)	1	LS	\$ 25,000.00	\$ 25,000.00	0	1	\$ -	\$ 25,000.00	100%		
SUBTOTAL GENERAL IMPROVEMENTS												
2.	Pavilion	1,705	SF	\$ 86.00	\$ 146,630.00	0	1,705	\$ -	\$ 146,630.00	100%		
3.	Concrete Flatwork	2,146	SF	\$ 27.00	\$ 57,942.00	0	2,146	\$ -	\$ 57,942.00	100%		
4.	Select Fill	2,124	SF	\$ 10.00	\$ 21,240.00	0	2,124	\$ -	\$ 21,240.00	100%		
SUBTOTAL IMPROVEMENTS												
TOTAL BASE BID												
					TOTALS	\$ 250,812.00			\$ 250,812.00	100%		
I, Matt A. Glaze, hereby certify that improvements for the Bid No. 2025.05 - Calhoun County Bill Sanders Park - Swan Point Pavilion project have been fully completed in accordance with the Contract Documents.												
STATE OF TEXAS												
Total Work Completed												
Less Retainage												
Less Previous Invoices												
Final Payment Due												
Retainage %												
10%												

I, Matt A. Glaze, hereby certify that improvements for the
 Bid No. 2025.05 - Calhoun County Bill Sanders Park - Swan Point
 Pavilion project have been fully completed in accordance with the
 Contract Documents.

[Signature] 7/17/25

Matt A. Glaze, P.E.
 Urban Engineering



CONSENT OF SURETY COMPANY TO FINAL PAYMENT

PROJECT: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion
OWNER: Calhoun County
CONTRACTOR: Shirley & Sons Construction Co., Inc.
CONTRACT DATE: June 26, 2025

In accordance with the provisions of the Contract between the OWNER and the CONTRACTOR as indicated above, West Bend Insurance Company

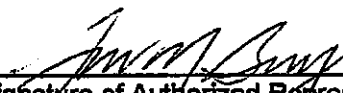
SURETY COMPANY, on bond of CONTRACTOR, hereby approves of the final payment to the CONTRACTOR, and agrees that final payment to the CONTRACTOR shall not relieve the SURETY COMPANY of any of its obligations to OWNER as set forth in the said SURETY COMPANY's bond.

IN WITNESS WHEREOF, the SURETY COMPANY has hereunto set its hand this 12th day of September, 2025.

ATTEST:

West Bend Insurance Company
SURETY COMPANY





Signature of Authorized Representative

James N. Berry, Attorney-In-Fact
Title

(SEAL)



Bond No. 2299748

POWER OF ATTORNEY

Know all men by these Presents, that West Bend Insurance Company (formerly known as West Bend Mutual Insurance Company prior to 1/1/2024), a corporation having its principal office in the City of West Bend, Wisconsin does make, constitute and appoint:

James N. Berry

lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety and as its act and deed any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of: Thirty Million Dollars (\$30,000,000)

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of West Bend Insurance Company by unanimous consent resolution effective the 1st day of January 2024.

Appointment of Attorney-In-Fact. The president or any vice president, or any other officer of West Bend Insurance Company may appoint by written certificate Attorneys-In-Fact to act on behalf of the company in the execution of and attesting of bonds and undertakings and other written obligatory instruments of like nature. The signature of any officer authorized hereby and the corporate seal may be affixed by facsimile to any such power of attorney or to any certificate relating therefore and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the company, and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the company in the future with respect to any bond or undertaking or other writing obligatory in nature to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any said officer at any time.

Any reference to West Bend Mutual Insurance Company in any Bond and all continuations thereof shall be considered a reference to West Bend Insurance Company.

In witness whereof, West Bend Insurance Company has caused these presents to be signed by its president undersigned and its corporate seal to be hereto duly attested by its secretary this 1st day of January 2024.

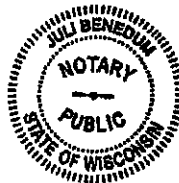
Attest Christopher C. Zwygart
Christopher C. Zwygart
Secretary



Robert J. Jacques
Robert J. Jacques
President

State of Wisconsin
County of Washington

On the 1st day of January 2024, before me personally came Robert Jacques, to me known being by duly sworn, did depose and say that he is the President of West Bend Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the board of directors of said corporation and that he signed his name thereto by like order.



Julie Benedum
Lead Corporate Attorney
Notary Public, Washington Co., WI
My Commission is Permanent

The undersigned, duly elected to the office stated below, now the incumbent in West Bend Insurance Company, a Wisconsin corporation authorized to make this certificate, Do Hereby Certify that the foregoing attached Power of Attorney remains in full force effect and has not been revoked and that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at West Bend, Wisconsin this 12th day of September, 2025



Christopher C. Zwygart
Christopher C. Zwygart
Secretary

AFFIDAVIT OF ALL BILLS PAID

THE STATE OF Texas

COUNTY OF Liberty

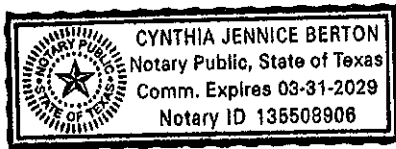
Ronald Shirley personally appeared before the undersigned authority on this day and having been duly sworn, states under oath that he/she is a duly authorized representative of the Contractor, Shirley & Sons Construction Co., Inc., and that the Contract for the **Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion** has been fully completed and that all bills of the subcontractors for labor, materials and equipment, and supplies furnished in connection with this Project have been fully paid.

[Signature]
Signature

Ronald Shirley
Typed Name

President
Title

Sworn to and subscribed before me this 12 day of September, 2025.



Cynthia Jennice Berton
Notary Signature

Cynthia Jennice Berton
Printed Name

In and for the State of Texas

3-31-2029
Commission Expires

GUARANTEE

KNOW ALL MEN BY THESE PRESENTS: That we, Shirley & Sons Construction, Co., Inc. ("CONTRACTOR"), of the City of Cleveland, County of Liberty, and State of Texas, as CONTRACTOR for the Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion, jointly and severally represent, warrant, and guarantee as follows:

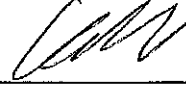
1. That all of the work ("Work") contemplated by that certain Contract dated June 25, 2025, between Calhoun County ("OWNER") and Shirley & Sons Construction Co., Inc. (the undersigned CONTRACTOR) has been completed in accordance with the plans, specifications, and change orders referred to therein.
2. That all Work is free from faulty material in every particular throughout.
3. That all Work is free from improper workmanship throughout.
4. That all Work is guaranteed against unusual damage from proper and usual wear.
5. That CONTRACTOR will replace and/or re-execute, without cost to the OWNER such work as may be found to be defective or not completed in accordance with Contract Documents and Modifications, and will make good all damages caused to other work or materials as a result of such defective work or its required replacement or re-execution.
6. That CONTRACTOR agrees to replace and/or re-execute defective or improperly completed work for maintenance and all other purposes found within one (1) year after the date of final and unconditional acceptance of the Work by OWNER as evidenced by OWNER's Certificate of Acceptance of Work and/or the date of OWNER'S written acceptance of Work.
7. That CONTRACTOR agrees in the event that CONTRACTOR attempts to replace and/or re-execute defective or improperly completed work during the initial one (1) year period of this Guarantee, but CONTRACTOR does not properly replace and/or re-execute such defective or improperly completed work, then the Guarantee period may be extended by OWNER at its sole option for an additional period necessary for proper replacement and/or re-execution of the Work by the CONTRACTOR within the terms of this Guarantee.
8. That CONTRACTOR agrees the one (1) year period of this Guarantee will not limit OWNER's other rights under common law to have defects remedied when discovered after one (1) year.
9. That notice of defective or improperly completed work shall be made in writing by certified or registered mail, return receipt requested, and addressed as follows:

OWNER: Calhoun County
 Calhoun County Courthouse
 211 S. Ann Street, Suite 301
 Port Lavaca, Texas 77979

CONTRACTOR: Shirley & Sons Construction Co., Inc.
 P.O. Box 429
 Cleveland, Texas 77328

EXECUTED on this the 12 day of September, 2028.

Shirley & Sons Construction Co., Inc.



(Signature)

By: Ronald R. Shirley II

Title: President

FINAL WAIVER OF LIEN RIGHTS

FROM: Shirley & Sons Construction Co., Inc. (Contractor)

TO: Calhoun County (Owner)

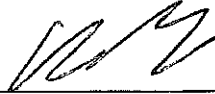
PROJECT: Bid No. 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion

1. The undersigned does hereby waive, release, and surrender any claim, lien, or right of lien resulting from labor, skill, and/or materials, subcontract work, equipment, or other work, rent services, or supplies, heretobefore furnished in and for the construction improvement, alteration or additions to the above-described project prior to the date hereof.
2. The undersigned further states that "Pay Estimate No. 3 Final" attached hereto, as it relates to construction costs payable pursuant to its construction contract with Calhoun County is accurate as of the date hereof and that there are no mechanics' or materialmen's liens outstanding at the date of this Waiver. All due and payable bills with respect to the work performed by CONTRACTOR have been paid to date or are included in the amount requested in the attached Final Pay Estimate and there is no known basis for the filing of any mechanics' or materialmen's liens against the land or improvements of the OWNER; and waivers from all subcontractors and materialmen of subcontractor for work done and materials furnished have been obtained in such form as to constitute an effective waiver of all such liens under the laws of the State of Texas.
3. This Waiver of Lien Rights:
 - a. is given to secure payment for the work under the CONTRACTOR's construction contract in the amount of \$250,812.00 as indicated in the attached Pay Estimate No. 3 Final;
 - b. will be fully effective upon receipt of said payment in full.
4. In further consideration of the payment as above set forth, and to induce the OWNER to make said payment, the undersigned agrees to defend and hold harmless the OWNER, Calhoun County, OWNER's lender, and/or any principal or surety from any claims hereinafter made by the undersigned and/or its employees, agents, servants, or assigns of such parties against the project.
5. The undersigned further states that upon receipt of the amount specified in Section 3(a) above, CONTRACTOR will have been fully paid for all sums due from OWNER under the construction contract and due from and after such receipt CONTRACTOR shall have no right or claim to any further payment from OWNER for any materials furnished or work performed by CONTRACTOR or by any person or entity claiming by, through, or under CONTRACTOR.

6. It is acknowledged that the designation of the above project constitutes an adequate description of the property and improvements for the purposes of this instrument.

Dated this 12 day of September, 2025.

Shirley & Sons Construction Co., Inc.



(Signature)

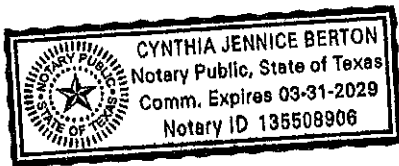
By: Ronald R. Shirley II

Title: President

STATE OF Texas §
COUNTY OF Liberty §

The foregoing Final Waiver of Lien Rights was subscribed and sworn to me this 12 day of September, 2025, by Ronald Shirley, as President of Shirley & Sons Construction Co., Inc.

WITNESS MY HAND AND OFFICIAL SEAL.



Cynthia Jennice Berton
Notary Public Signature

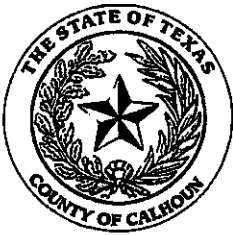
Cynthia Jennice Berton
Printed Name

3-31-2029
Commission Expires

16

16. Consider and take necessary action to accept proposal from KSBR, LLC to prepare grant application to the Matagorda Bay Mitigation Trust for the replacement of the bridge at Little Chocolate Bayou Park in Precinct 1; preparation fee of \$1,000, to be paid with GOMESA funds. (GDR)

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



Gary D. Reese

County Commissioner
County of Calhoun
Precinct 4



September 16, 2025

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

RE: AGENDA ITEM

Dear Judge Lyssy:

Please place the following item on the Commissioners' Court Agenda for September 24, 2025.

- Consider and take necessary action to accept proposal from KSBR, LLC to prepare grant application to the Matagorda Bay Mitigation Trust for the replacement of the bridge at Little Chocolate Bayou Park in Precinct 1; preparation fee of \$1,000, to be paid with GOMESA funds.

Sincerely,

A handwritten signature in black ink, appearing to read "Gary D. Reese".

Gary D. Reese

GDR/at



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

September 12, 2025

Calhoun County Commissioners Court
211 S Ann Street, Suite 102
Port Lavaca, TX 77979

Subject: Matagorda Bay Mitigation Trust Grant Application

Dear Commissioner Reese:

KSBR, LLC is pleased to offer our services to Calhoun County to assist in the preparation of a grant application to the Matagorda Bay Mitigation Trust for the bridge at Little Chocolate Bayou. The application preparation fee is \$1,000.00. We will work with the relevant partners to gather the necessary information to have an application prepared prior to October 14, 2025, grant application deadline. We appreciate the opportunity to assist the County in this endeavor.

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

Sincerely,

Katy Sellers
KSBR, LLC - Principal

17

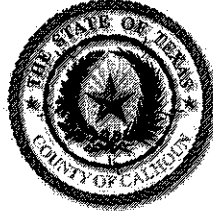
17. Consider and take necessary action to allow Commissioner Best to apply for the Matagorda Bay Mitigation Grant and hire KSBR, LLC to complete the application.
(RB)

pass

Ronald Best

Calhoun County Commissioner, Precinct #2

5812 FM 1090 N
Port Lavaca, TX 77979



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

September 17, 2025

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

RE: AGENDA ITEM

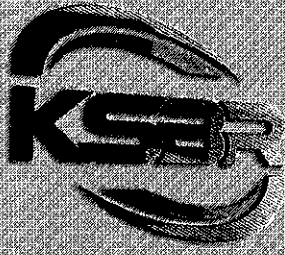
Please place the following item on the next Commissioners' Court Agenda

- Consider and take necessary action to allow Commissioner Best to apply for the Matagorda Bay Mitigation Grant and hire KSBR LLC to complete the application

Sincerely,

A handwritten signature in black ink that reads "Ronald Best". The signature is written in a cursive style with a long, sweeping underline.

Ronald Best
RB/lj



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

September 16, 2025

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

Subject: Matagorda Bay Mitigation Trust Grant Application

Dear Commissioner Best,

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

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

Sincerely,

A handwritten signature in black ink, appearing to be 'Katy', is located below the word 'Sincerely,'.

Katy Sellers
KSBR, LLC - Principal

18

18. Consider and take necessary action to authorize Judge Lyssy to sign Resolution authorizing Commissioner Best to apply for Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers. (RB)

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

Ronald Best

Calhoun County Commissioner, Precinct #2

5812 FM 1090 N
Port Lavaca, TX 77979



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

September 17, 2025

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

RE: AGENDA ITEM

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

- Consider and take necessary action to authorize Judge Lyssy to sign Resolution authorizing Commissioner Best to apply for Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers.

Sincerely,

A handwritten signature in black ink, appearing to read "Ronald Best".

Ronald Best
RB/lj

Resolution

Resolution of Calhoun County authorizing the filing of a grant application with the Golden Crescent Regional Planning Commission for a regional solid waste grants program grant; authorizing Commissioner Ronald Best to act on behalf of Calhoun County in all matters related to the application; and pledging that if a grant is received, Calhoun County will comply with the grant requirements of the Golden Crescent Regional Planning Commission, the Texas Commission On Environmental Quality and the State of Texas.

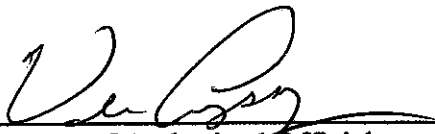
Whereas, the Golden Crescent Regional Planning Commission is directed by the Texas Commission on Environmental Quality to administer solid waste grant funds for implementation of the COG's adopted regional solid waste management plan; and

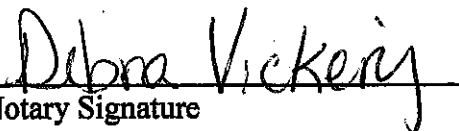
Whereas, Calhoun County in the State of Texas is qualified to apply for grant funds under the Request for Applications.

Now, therefore, be it resolved by Calhoun County, Texas:

1. That Commissioner Ronald Best is authorized to request grant funding under the Golden Crescent Regional Planning Commission Request for Applications of the Regional Solid Waste Grants Program and act on behalf of Calhoun County in all matters related to the grant application and any subsequent grant contract and grant project that may result.
2. That if the project is funded, Calhoun County will comply with the grant requirements of the Golden Crescent Regional Planning Commission, Texas Commission on Environmental Quality and the State of Texas.
3. The grant funds and any grant-funded equipment or facilities will be used only for the purposes for which they are intended under the grant.
4. Activities will comply with and support the adopted regional and local solid waste management plans adopted for the geographical area in which the activities are performed.

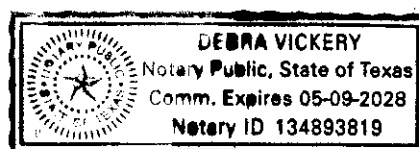
Passed and approved by Calhoun County Commissioners Court, on this the 24th day of September, 2025.


Signature of Authorized Official


Notary Signature

Vern Lyssy
Typed or Printed Name


Type or Printed Name



19

19. Consider and take necessary action to authorize KSBR to prepare and possibly present the grant to Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers for a fee. (RB)

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

Ronald Best

Calhoun County Commissioner, Precinct #2

5812 FM 1090 N
Port Lavaca, TX 77979



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

September 17, 2025

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

RE: AGENDA ITEM

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

- Consider and take necessary action to authorize KSBR to prepare and possibly present the grant to Golden Crescent Regional Planning Commission Regional Solid Waste Grant for four roll-off containers for a fee.

Sincerely,

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

Ronald Best
RB/lj

20

20. Consider and take necessary action on insurance proceeds check from United Fire Group Insurance on behalf of Supak Inc. in the amount of \$24,794.63 for water damages that occurred on 6-10-25 at the Port O'Connor Library. (VLL)

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

Debbie Vickery

From: Erica.Perez@calhouncotx.org (Erica Perez) <Erica.Perez@calhouncotx.org>
Sent: Thursday, September 18, 2025 1:50 PM
To: Debbie.vickery@calhouncotx.org; vern lyssy; 'Ronny Best'; Gary Reese
Cc: dsanchez@cclibrary.org
Subject: Agenda Item - Insurance Proceeds - Library
Attachments: UFG Insurance Proceeds-Library-061025.pdf

Debbie,

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

- Consider and take necessary action on insurance proceeds check from United Fire Group Insurance on behalf of Supak Inc. in the amount of \$24,794.63 for water damages occurred on 6/10/25 at the Port O'Connor Library .

Thank you.

Best regards,
Erica Perez
First Assistant Auditor
Calhoun County
202 S. Ann, Suite B
Port Lavaca, TX 77979
Phone: 361. 553.4612
Fax: 361.553.4614

Calhoun County Texas

UFG Insurance
P O Box 73909
Cedar Rapids IA 52407-3909



*****MIXED AADC 541

8011|39|1

 CALHOUN COUNTY LIBRARY
202 S ANN ST
PORT LAVACA, TX 77979-4204

Policy No: 20114439
Payment Amount: \$24,794.63
Payment No: 907043764
Invoice No:

Claim No: 4220331577
Payment Date: 09/11/2025
Date of Loss: 06/10/2025

Reason for Payment: Settlement of Property Damage claim, water damage at 506 W Main Street, Port O'Connor TX

THE BACK OF THIS CHECK CONTAINS A SECURITY MARK - DO NOT ACCEPT WITHOUT HOLDING AT AN ANGLE TO VERIFY SECURITY MARK



INSURANCE

The Bancorp Bank
Payment No: 907043764
Claim No: 4220331577
Date: 09/11/2025

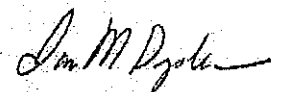
Twenty-Four Thousand Seven Hundred Ninety-Four Dollars and Sixty-Three Cents

Amount

\$24,794.63

VOID AFTER 180 DAYS

Pay To The Calhoun County Library
Order Of



21

21. Accept Reports from the following County Offices:

a) District Clerk – August, 2025

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

ENTER COURT NAME: ENTER MONTH OF REPORT ENTER YEAR OF REPORT		DISTRICT CLERK AUGUST 2025
CODE	AMOUNT	
CR - CCC	0.37	Revised 04/03/23
CR - STATE CCC- 2020	1,414.49	
CR - LOCAL CCC- 2020	802.82	
CR - CRIMINAL JUSTICE PLANNING FUND		
CR - CLERK'S FEE	1.56	
CR - CMI		
CR - CRIME STOPPERS	228.58	
CR - COURTHOUSE SECURITY	0.18	
CR - CVCF	0.12	
CR - CJPT		
CR - DRUG CRT PROG FEE	0.64	
CR - FA	0.01	
CR - JCD		
CR - JCPT	0.02	
CR - JURY REIMBURSEMENT FEE- JRF	0.44	
CR - JUDICIAL SUPPORT FUND- JSF	0.03	
CR - LAW ENFORC. EDUC FUND		
CR - IND LEGALS SVCS (IDF)	0.00	
CR - DUE TO STATE - NONDISCLOSURE FEE		
CR - TIME PAYMENT-TP	0.52	
CR - TIME PAYMENT REIMBURSEMENT- 2020	113.03	
CR - BREATH ALCOHOL TESTING		
CR - CO CHILD ABUSE PREVENTION FUND	0.69	
CR - CLERK'S FEE		
CR - RECORDS MANAGEMENT	1.05	
CR - BOND FORFEITURES		
CR - PRETRIAL DIVERSION FUND		
CR - REBATES ON PREVIOUS EXPENSES	3.15	
CR - REIMB CRT APPOINTED ATTY FEES	1,448.09	
CR - TECHNOLOGY FUND (DIST & CO CLK)	0.35	
CR - STATE ELECTRONIC FILING FEE	0.13	
CR - COUNTY ELECTRONIC FILING FEE		
CR - EMS TRAUMA FUND	7.82	
CR - DNA TESTING FEE	2.09	
CR - FAMILY VIOLENCE FINE	0.87	
CR - RESTITUTION FEE	31.78	
CR - TCLOSE - MVF		
CR - STATE TRAFFIC FINE		
CR - OVERPAYMENTS	0.00	
CR - SHERIFF	308.83	
CR - D.A.		
CR - FINES	630.55	CR-SUBTOTAL \$4,984.12
CV - STATE REIMB- TITLE IV-D COURT COSTS		
CV - COPIES	138.90	
CV - CLERK'S FEES	3,088.92	
CV - COURT RECORDS PRESERVATION FUND	30.00	
CV - RECORDS MGMT FEE - DISTRICT CLERK	20.00	
CV - STENOGRAPHER	366.50	
CV - SHERIFF'S JURY FEE		
CV - LAW LIBRARY	513.10	
CV - (STATE) DIV. & FAMILY LAW		
CV-(STATE) OTHER THAN DIV/FAM LAW	100.00	
CV-(STATE) OTHER CIVIL PROCEEDINGS	30.00	
CV - JURY FEE	168.80	
CV - COUNTY DISPUTE RESOLUTION FUND	219.90	
CV - RECORDS MGMT PRSRV FUND - CLERK	518.20	
CV - COURTHOUSE SECURITY	308.20	
CV - LANGUAGE ACCESS FUND	43.98	
CV - SHERIFF'S SERVICE FEE	2,400.00	
***CV - DUE TO OTHERS		
CV - CRT APPOINTED ATY FEES - CHILD SUPPORT		
CV-JUDICIAL & COURT PERSONNEL TRAINING FEE	5.00	
CV - JUDICIAL SALARIES	128.00	
CV - AJSF	73.30	
CV - COURT FACILITY FEE FUND	293.20	
CV - BOND FORFEITURES		
CV - STATE ELECTRONIC FILING FEE	80.00	
CV - COUNTY ELECTRONIC FILING FEE		
CV - FAMILY PROTECTION FEE		
CV - ADOPTION-BUREAU OF VITAL STATS FEE		
CV- DUE TO STATE- NONDISCLOSURE FEE		
CV - DUE TO STATE - CONOSOLIDATED FEE 2022	473.82	
CV - OVERPAYMENTS	24.00	
CV - OUT-OF-COUNTY SVC OF CITATION	580.00	CV-SUBTOTAL \$9,595.62
TOTAL CASH RECEIPTS	\$14,589.74	
NSF CHECKS		
DUE TO OTHERS:	AMOUNT	
RESTITUTION	31.78	PLEASE INCLUDE P. O. REQUESTING DISBURSEMENT
OUT-OF-COUNTY SERVICE FEE	580.00	PLEASE INCLUDE P. O. REQUESTING DISBURSEMENT
REFUNDS OF OVERPAYMENTS	24.00	PLEASE INCLUDE P. O. REQUESTING DISBURSEMENT
DUE TO OTHERS (CRIME STOPPERS, ETC.)	228.58	
TOTAL DUE TO OTHERS	\$862.36	
TREASURERS RECEIPTS FOR MONTH:		(See Attached Sheet for Treasurer Receipts)
CASH, CHECKS, M.O.s & CREDIT CARDS	14,589.74	Calculate from ACTUAL Treasurer's Receipts

MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

COURT NAME: DISTRICT CLERK
MONTH OF REPORT: AUGUST
YEAR OF REPORT: 2025

ACCOUNT NUMBER	ACCOUNT NAME	DEBIT	CREDIT
1000-001-44190	SHERIFF'S SERVICE FEES	\$	2,708.83
1000-001-44140	JURY FEES	\$	166.60
1000-001-44045	RESTITUTION FEE	\$	-
1000-001-44020	DISTRICT ATTORNEY FEES	\$	-
1000-001-49010	REBATES-PREVIOUS EXPENSE	\$	3.15
1000-001-49030	REBATES-ATTORNEY'S FEES	\$	1,446.09
1000-001-44058	DISTRICT CLERK ELECTRONIC FILING FEES	\$	-
1000-001-44322	TIME PAYMENT REIMBURSEMENT FEES	\$	113.03
1000-001-43049	STATE REIMB- TITLE IV-D COURT COSTS	\$	-
DISTRICT CLERK FEES			
	CERTIFIED COPIES	\$136.90	
	CRIMINAL COURT	\$1.56	
	CIVIL COURT	\$3,088.92	
	STENOGRAPHER	\$366.50	
	CIV FEES DIFF	\$0.00	
1000-001-44050	DISTRICT CLERK FEES	\$	3,593.88
1000-999-20771	FAMILY VIOLENCE FINE	\$	0.87
1000-999-10010	CASH - AVAILABLE	\$ 8,032.45	
2706-001-44055	FAMILY PROTECTION FEE	\$	-
2706-999-10010	CASH - AVAILABLE	\$ -	
2740-001-45055	FINES - DISTRICT COURT	\$	630.66
2740-999-10010	CASH - AVAILABLE	\$ 630.66	
2620-001-44055	APPELLATE JUDICIAL SYSTEM	\$	73.30
2620-999-10010	CASH - AVAILABLE	\$ 73.30	
2648-001-44055	COURT FACILITY FEE FUND	\$	293.20
2648-999-10010	CASH - AVAILABLE	\$ 293.20	
2670-001-44055	COURTHOUSE SECURITY	\$	308.38
2670-999-10010	CASH - AVAILABLE	\$ 308.38	
2673-001-44055	CRT RECS PRESERVATION FUND- CO	\$	30.00
2673-999-10010	CASH - AVAILABLE	\$ 30.00	
2725-001-44055	LANGUAGE ACCESS FUND	\$	43.98
2725-999-10010	CASH - AVAILABLE	\$ 43.98	
2739-001-44055	RECORD MGMT/PRSV FUND - CLERK	\$	517.14
2739-999-10010	CASH - AVAILABLE	\$ 517.14	
2737-001-44055	RECORD MGMT/PRSV FUND -DIST CLRK	\$	20.11
2737-999-10010	CASH - AVAILABLE	\$ 20.11	
2731-001-44055	LAW LIBRARY	\$	513.10
2731-999-10010	CASH - AVAILABLE	\$ 513.10	
2663-001-44050	CO & DIST CRT TECHNOLOGY FUND	\$	0.35
2663-999-10010	CASH - AVAILABL	\$ 0.35	
7040-999-20740	BREATH ALCOHOL TESTING - STATE	\$	-
7040-999-10010	CASH - AVAILABLE	\$ -	
2667-001-44055	CO CHILD ABUSE PREVENTION FUND	\$	0.69
2667-999-10010	CASH - AVAILABLE	\$ 0.69	
7502-999-20740	JUDICIAL & COURT PERSONNEL TRAINING FUND-STATE	\$	5.00
7502-999-10010	CASH-AVAILABE	\$ 5.00	
7383-999-20610	DNA TESTING FEE - COUNTY	\$	0.21
7383-999-20740	DNA TESTING FEE - STATE	\$	1.88
7383-999-10010	CASH - AVAILABLE	\$ 2.09	

7405-999-20610	EMS TRAUMA FUND - COUNTY	\$	0.76
7405-999-20740	EMS TRAUMA FUND - STATE	\$	6.86
7405-999-10010	CASH - AVAILABLE	\$	7.62
7070-999-20610	CONSOL. COURT COSTS - COUNTY	\$	0.05
7070-999-20740	CONSOL. COURT COSTS - STATE	\$	0.47
7070-999-10010	CASH - AVAILABLE	\$	0.52
7072-999-20610	STATE CONSOL. COURT COSTS- COUNTY	\$	141.45
7072-999-20740	STATE CONSOL. COURT COSTS- STATE	\$	1,273.04
7072-999-10010	CASH- AVAILABLE	\$	1,414.49
2698-001-44030-010	DRUG CRT PROG FEE - COUNTY (PROGRAM)	\$	0.32
2698-999-10010-010	CASH - AVAILABLE	\$	0.32
7390-999-20610-999	DRUG COURT PROG FEE - COUNTY (SVC FEE)	\$	0.06
7390-999-20740-999	DRUG COURT PROG FEE - STATE	\$	0.26
7390-999-10010-999	CASH - AVAILABLE	\$	0.32
7865-999-20610-999	CRIM - SUPP OF IND LEGAL SVCS - COUNTY	\$	-
7865-999-20740-999	CRIM - SUPP OF IND LEGAL SVCS - STATE	\$	-
7865-999-10010-999	CASH - AVAILABLE	\$	-
7760-999-20790-010	CRIM - DUE TO STATE - NONDISCLOSURE FEE	\$	-
7760-999-10010-010	CRIM - DUE TO STATE - NONDISCLOSURE FEE	\$	-
7950-999-20610	TIME PAYMENT - COUNTY	\$	0.26
7950-999-20740	TIME PAYMENT - STATE	\$	0.26
7950-999-10010	CASH - AVAILABLE	\$	0.52
7505-999-20610	JUDICIAL SUPPORT-CRIM - COUNTY	\$	-
7505-999-20740	JUDICIAL SUPPORT-CRIM - STATE	\$	0.03
7505-999-10010	CASH - AVAILABLE	\$	0.03
7505-999-20740-010	JUDICIAL SALARIES-CIVIL - STATE(42)	\$	126.00
7505-999-10010-010	CASH AVAILABLE	\$	126.00
2740-001-45050	BOND FORFEITURES	\$	-
2740-999-10010	CASH - AVAILABLE	\$	-
2729-001-44034	PRE-TRIAL DIVERSION FUND	\$	-
2729-999-10010	CASH - AVAILABLE	\$	-
7857-999-20610	JURY REIMBURSEMENT FUND- COUNTY	\$	0.04
7857-999-20740	JURY REIMBURSEMENT FUND- STATE	\$	0.40
7857-999-10010	CASH - AVAILABLE	\$	0.44
7860-999-20610	STATE TRAFFIC FINE- COUNTY	\$	-
7860-999-20740	STATE TRAFFIC FINE- STATE	\$	-
7860-999-10010	CASH - AVAILABLE	\$	-
7403-999-22888	DIST CRT - ELECTRONIC FILING FEE - CIVIL	\$	80.00
7403-999-22991	DIST CRT - ELECTRONIC FILING FEE - CRIMINAL	\$	0.13
	CASH - AVAILABLE	\$	80.13

LOCAL CONSOL. COURT COST

1000-001-44050	DISTRICT CLERK FEES	\$	305.84
1000-999-10010	CASH - AVAILABLE	\$	305.84
2739-001-44055	RECORD MGMT/PRSV FUND - COUNTY	\$	191.15
2739-999-10010	CASH - AVAILABLE	\$	191.15
2669-001-44050	COUNTY JURY FUND	\$	7.65
2669-999-10010	CASH - AVAILABLE	\$	7.65
2670-001-44055	COURTHOUSE SECURITY	\$	76.46
2670-999-10010	CASH - AVAILABLE	\$	76.46
2663-001-44050	CO & DIST CRT TECHNOLOGY FUND	\$	30.58
2663-999-10010	CASH - AVAILABLE	\$	30.58
2676-001-44050	COUNTY SPECIALTY COURT FUND	\$	191.15
2676-999-10010	CASH - AVAILABLE	\$	191.15

TOTAL: \$ 802.82

7855-999-20784-010	DIST CRT - DIVORCE & FAMILY LAW - STATE	\$	-
7855-999-20657-010	DIST CRT - DIVORCE & FAMILY LAW - COUNTY	\$	-
7855-999-20792-010	DIST CRT-OTHER THAN DIVORCE/FAMILY LAW - STATE	\$	99.00
7855-999-20658-010	DIST CRT-OTHER THAN DIVORCE/FAMILY LAW - COUNTY	\$	1.00
7855-999-20740-010	DIST CRT - OTHER CIVIL PROCEEDINGS - STATE	\$	28.50
7855-999-20610-010	DIST CRT - OTHER CIVIL PROCEEDINGS - COUNTY	\$	1.50
7855-999-20790-010	DUE TO STATE - NONDISCLOSURE FEE	\$	-
7855-999-10010-010	CASH - AVAILABLE	\$	130.00
2677-001-44050-999	COUNTY DISPUTE RESOLUTION FUND	\$	219.90
2677-999-10010-999	CASH - AVAILABLE	\$	219.90
7858-999-20740-999	DIST CLK - DUE TO STATE CONSOLIDATED FEE 2022	\$	473.82
7858-999-10010-999	CASH AVAILABLE	\$	473.82

TOTAL (Distrib Req to Oper Acct)	\$ 13,727.38	\$ 13,727.38
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7340-999-20759-999

DUE TO OTHERS (Distrib Req(s) attached)

ATTORNEY GENERAL (RESTITUTION)	\$	31.78
OUT-OF-COUNTY SERVICE FEES	\$	580.00
REFUND OF OVERPAYMENTS	\$	24.00
DUE TO OTHERS	\$	226.58
TOTAL DUE TO OTHERS	\$	862.36

REPORT TOTAL - ALL FUNDS	\$ 14,589.74
PLUS AMT OF RETURNED CKS	\$ -
LESS: TOTAL TREASURER'S RECEIPTS	\$ (14,589.74)
OVER / (SHORT)	\$ -

Revised 04/03/23

DISTRICT COURT

STATE COURT COSTS REPORT

AUGUST

2025

SECTION I: REPORT FOR OFFENSES COMMITTED

	COLLECTED	AUGUST COUNTY	STATE
01/1/20 - Present	\$ 1,414.49	\$ 141.45	\$ 1,273.04
01/01/04 - 12/31/19	\$ 0.37	\$ 0.04	\$ 0.33
09/01/01 - 12/31/03	\$ 0.15	\$ 0.02	\$ 0.13
09/01/99 - 08/31/01		\$ -	\$ -
09/01/97 - 08/31/99		\$ -	\$ -
09/01/95 - 08/31/97		\$ -	\$ -
09/01/91 - 08/31/95		\$ -	\$ -
TOTALS	\$ 1,415.01	\$ 141.51	\$ 1,273.50

BAIL BONDS FEES			
DNA TESTING FEES	\$ 2.09	\$ 0.21	\$ 1.88
EMS TRAUMA FUND	\$ 7.62	\$ 0.76	\$ 6.86
JUV. PROB. DIVERSION FEES			
JURY REIMBURSEMENT FEE	\$ 0.44	\$ 0.04	\$ 0.40
INDIGENT DEFENSE FUND	\$ -	\$ -	\$ -
STATE TRAFFIC FEES	\$ -	\$ -	\$ -
DRUG CRT PROG FEE	\$ 0.64	\$ 0.38	\$ 0.26

SECTION II: AS APPLICABLE

STATE POLICE OFFICER FEES			
FAILURE TO APPEAR/PAY FEES		\$ -	\$ -
JUD. FUND-CONST. CO. CRT.			
JUD. FUND-STATUTORY CO. CRT.			
MOTOR CARRIER WEIGHT VIOLATIONS			
TIME PAYMENT FEE	\$ 0.52	\$ 0.26	\$ 0.26
DRIVING RECORD FEE	\$ 0.03	\$ -	\$ 0.03
JUDICIAL SUPPORT FEES			
ELECTRONIC FILING FEE - CR	\$ 0.13		\$ 0.13
NONDISCLOSURE FEES - CR	\$ -		\$ -

TOTAL STATE COURT COSTS \$ 1,426.48 \$ 143.16 \$ 1,283.32

CIVIL FEES REPORT

	COLLECTED	AUGUST COUNTY	STATE
BIRTH CERTIFICATE FEES			
MARRIAGE LICENSE FEES			
DECL. OF INFORMAL MARRIAGE			
ELECTRONIC FILING FEE - CV		\$80.00	\$80.00
NONDISCLOSURE FEES - CV	\$28 0	\$0.00	\$0.00
JUROR DONATIONS			
JUSTICE CRT. INDIG FILING FEES			
STAT PROB CRT INDIG FILING FEES			
STAT PROB CRT JUDIC FILING FEES			
STAT CNTY CRT INDIG FILING FEES			
STAT CNTY CRT JUDIC FILING FEES			
STAT CNTY CRT-JUDICIAL SUPPORT			
CONST CNTY CRT INDIG FILING FEES			
CNST CNTY CRT JUDIC FILING FEES			
DIST CRT DIV & FAMILY LAW		\$0.00	-
DIST CRT OTHER THAN DIV/FAM LAW	\$50 2	\$100.00	1.00 99.00
DIST CRT OTHER CIVIL FILINGS	\$10 3	\$30.00	1.50 28.50
FAMILY PROTECTION FEE			
JUDICIAL SUPPORT FEE	\$42 3	\$126.00	\$126.00
JUDICIAL & COURT PERSONNEL TRAINING FEE	1	\$5.00	- \$5.00
2022 STATE CONSOLIDATED FEE	6	\$473.82	\$473.82
COUNTY DISPUTE RESOLUTION FUND		219.90	219.90
TOTAL CIVIL FEES REPORT		\$ 1,034.72	\$ 2.50 \$ 1,032.22

TOTAL BOTH REPORTS \$ 2,461.20 \$ 145.66 \$ 2,315.54

22

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

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

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1684 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.09.24

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
9/24/2025	7195	1000	GENERAL FUND	140	LIBRARY	54020	DUES	600.00		LINE ITEM TRANSFER TO COVER PLAN MEMBERSHIP DUES
9/24/2025	7195	1000	GENERAL FUND	140	LIBRARY	54030	PUBLICATIONS		600.00	LINE ITEM TRANSFER TO COVER PLAN MEMBERSHIP DUES
				Total 140	LIBRARY			600.00	600.00	
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	53610	BUILDING SUPPLIES/PARTS	1,000.00		LINE ITEM TRANSFER TO COVER EXPENSES
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	53980	SUPPLIES/OPERAT... EXPENSES	10,000.00		LINE ITEM TRANSFER TO COVER EXPENSES
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	61710	DEPARTMENTAL REPAIRS		6,000.00	LINE ITEM TRANSFER TO COVER EXPENSES
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	62430	EMPLOYMENT EXPENSES	500.00		LINE ITEM TRANSFER TO COVER EXPENSES
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	63500	MACHINE MAINTENANCE	5,000.00		LINE ITEM TRANSFER TO COVER EXPENSES
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	66192	TELEPHONE SERVICES	8,000.00		LINE ITEM TRANSFER TO COVER EXPENSES
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	66505	TRAVEL/DUES/SU...	2,000.00		LINE ITEM TRANSFER TO COVER EXPENSES
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	66600	UTILITIES	10,000.00		LINE ITEM TRANSFER TO COVER EXPENSES

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1684 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025 09 24

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
9/24/2025	7196	1000	GENERAL FUND	345	EMERGENCY MEDICAL SERVICES	70750	CAPITAL OUTLAY		30,500.00	LINE ITEM TRANSFER TO COVER EXPENSES
				Total 345	EMERGENCY MEDICAL SERVICES			36,500.00	36,500.00	
9/24/2025	7197	1000	GENERAL FUND	380	WASTE MANAGEMENT	53020	GENERAL OFFICE SUPPLIES		200.00	LINE ITEM ADJUSTMENT
9/24/2025	7197	1000	GENERAL FUND	380	WASTE MANAGEMENT	53992	SUPPLIES-MISCEL...	200.00		LINE ITEM ADJUSTMENT
				Total 380	WASTE MANAGEMENT			200.00	200.00	
9/24/2025	7198	1000	GENERAL FUND	490	JUSTICE OF PEACE-PRECINCT #5	53020	GENERAL OFFICE SUPPLIES		900.00	LINE ITEM TRANSFER TO COVER INTERNET AND ELCTRICITY
9/24/2025	7198	1000	GENERAL FUND	490	JUSTICE OF PEACE-PRECINCT #5	66600	UTILITIES	900.00		LINE ITEM TRANSFER TO COVER INTERNET AND ELCTRICITY
				Total 490	JUSTICE OF PEACE-PRECINCT #5			900.00	900.00	
9/24/2025	7199	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	53510	ROAD & BRIDGE SUPPLIES		15,000.00	LINE ITEM ADJUSTMENT
9/24/2025	7199	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	53520	TIRES AND TUBES	1,260.00		LINE ITEM ADJUSTMENT
9/24/2025	7199	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	53540	GASOLINE/OIL/DIE...	8,000.00		LINE ITEM ADJUSTMENT

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1684 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025.09.24

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
9/24/2025	7199	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	53580	PIPE		14,260.00	LINE ITEM ADJUSTMENT
9/24/2025	7199	1000	GENERAL FUND	570	ROAD AND BRIDGE-PRECIN... #4	62510	EQUIPMENT RENTAL	20,000.00		LINE ITEM ADJUSTMENT
				Total 570	ROAD AND BRIDGE-PRECIN... #4			29,260.00	29,260.00	
9/24/2025	7200	1000	GENERAL FUND	001	REVENUE	49150	RECOVERIES-INS...	24,794.00		INSURANCE PROCEEDS FOR WATER DAMAGES TO POC LIBRARY 6/10/25
				Total 001	REVENUE			24,794.00	0.00	
9/24/2025	7200	1000	GENERAL FUND	140	LIBRARY	65464	REPAIRS-INSURAN... RECOVERY	24,794.00		INSURANCE PROCEEDS FOR WATER DAMAGES TO POC LIBRARY 6/10/25
				Total 140	LIBRARY			24,794.00	0.00	
9/24/2025	7201	1000	GENERAL FUND	001	REVENUE	49150	RECOVERIES-INS...	14,034.00		INSURANCE PROCEEDS FROM TAC-DAMAGES TO SO VEHICLE ON 8/24/25
				Total 001	REVENUE			14,034.00	0.00	

CALHOUN COUNTY, TEXAS
Unposted Budget Transactions
BUD1684 - 2025 BUDGET-ADJUSTMENTS-REGULAR-CCRT-2025 09.24

Effective Date	Document Number	Fund Code	Fund Title	Dept Code	Dept Title	GL Code	GL Title	Increase	Decrease	Transaction Description
9/24/2025	7201	1000	GENERAL FUND	760	SHERIFF	65464	REPAIRS-INSURAN... RECOVERY	14,034.00		INSURANCE PROCEEDS FROM TAC-DAMAGES TO SO VEHICLE ON 8/24/25
				Total 760	SHERIFF			14,034.00	0.00	
9/24/2025	7202	1000	GENERAL FUND	560	ROAD AND BRIDGE-PRECIN... #3	62672	GARBAGE COLL-OILVIA	1,000.00		LINE ITEM TRANSFER
9/24/2025	7202	1000	GENERAL FUND	560	ROAD AND BRIDGE-PRECIN... #3	63530	MACHINERY/EQU... REPAIRS		1,000.00	LINE ITEM TRANSFER
				Total 560	ROAD AND BRIDGE-PRECIN... #3			1,000.00		
Total BUD1684 - 2025 BUDGET-ADJUSTME...								146,116.00	68,460.00	
								146,116.00	68,460.00	
Report Total										

23

23. Approval of bills and payroll. (VLL)

MMC:

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

County Bills:

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

24. Adjourn.

10:37am GR/RB

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
BUILDING MAINTENANCE	170	BUILDING SUPPLIES/PARTS	53610	GULF COAST HARDWARE LLC	63196	202630	MAINT 9/9 WEATHERPROOF OUTLET COVER	7.99	
			53610	GULF COAST HARDWARE LLC	63196	202650	MAINT 9/10 BOLTS	5.18	
			53610	GULF COAST HARDWARE LLC	63196	202662	MAINT 9/10 TILE GLUE, WALL SCRAPER, PAINT SCRAPER	39.57	
			53610	THIRD COAST DISTRIBUTING, LLC	75930	053737	MAINT 9/12 BELT	29.89	
			53640	GULF COAST PAPER CO INC	2619	2681311	MAINT 9/9 GLOVES, LINERS, CLEANER, PAPER TOWELS	262.17	
			53995	UNIFIRST CORPORATION	80120	2680107...	MAINT 8/26 UNIFORMS	95.02	
			53995	UNIFIRST CORPORATION	80120	2680107...	MAINT 9/2 UNIFORMS	95.02	
			53995	UNIFIRST CORPORATION	80120	2680108...	MAINT 9/9 UNIFORMS	95.02	
			53995	UNIFIRST CORPORATION	80120	2680109...	MAINT 9/16 UNIFORMS	95.02	
			65454	G&W ENGINEERS, INC.	2601	5310030...	MAINT 9/9 ENG/SURV SVC THROUGH 8/31/25- CH- CLEAN/PAINT IMPR	1,711.50	
REPAIRS-COURTHOUSE AND JAIL			66192	AT&T MOBILITY	5209	3615502...	MAINT 9/12 A# 287022659855 PHONE 8/13- 9/12	214.83	
TELEPHONE SERVICES			66192	AT&T MOBILITY	5209	3615502...	MAINT 9/12 A# 287022659855 PHONE 8/13- 9/12	214.83	
UTILITIES-AG BLDG/FAIRGROUNDS			66602	CENTERPOINT ENERGY	1805	2942974...	BAUER 9/17 A# 2942974-3 CCF 0 8/11- 9/11	58.84	
			66602	CENTERPOINT ENERGY	1805	2942980...	AG BLDG 9/17 A# 2942980-0 CCF 0 8/11- 9/11	58.84	
			66602	CITY OF PORT LAVACA	861	1415150...	MOSQ/BAUER/AG 9/16 A# 14-1515-00 WATER 8/15- 9/15	219.41	
			66602	CITY OF PORT LAVACA	861	1415200...	MOSQ/BAUER/AG 9/16 A# 14-1520-00 WATER 8/15- 9/15	195.53	
			66602	CITY OF PORT LAVACA	861	1415200...	MOSQ/BAUER/AG 9/16 A# 14-1520-00 WATER 8/15- 9/15	195.53	
UTILITIES-COURTHOUSE AND JAIL			66604	CENTERPOINT ENERGY	1805	6329420...	CH 9/17 A# 6329420-1 CCF 576 8/11- 9/11	889.86	
			66604	CITY OF PORT LAVACA	861	1218440...	CH 9/12 A# 12-1844-00 WATER 8/10- 9/10	330.12	
			66604	CITY OF PORT LAVACA	861	1218440...	CH 9/12 A# 12-1844-00 WATER 8/10- 9/10	330.12	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
BUILDING MAINTENANCE	Total 170	UTILITIES-JAIL	66605	CENTERPOINT ENERGY	1805	6455891...	JAIL 9/17 A# 6455891-9 MCF 161 8/11- 9/11	1,872.41	
			66605	CITY OF PORT LAVACA	861	1218420...	JAIL 9/12 A# 12-1842-01 WATER 8/10- 9/10	3,899.59	
			66605	CITY OF PORT LAVACA	861	1218430...	JAIL 9/12 A# 12-1843-00 WATER 8/10- 9/10	96.53	
		UTILITIES-COURTHOUSE ANNEX	66606	CITY OF PORT LAVACA	861	1219100...	ANNEX I 9/12 A# 12-1910-00 WATER 8/10- 9/10	142.06	
		UTILITIES-COURTHOUSE ANNEX II	66621	CITY OF PORT LAVACA	861	1208950...	ANNEX II 9/12 A# 12-0895-01 WATER 8/10- 9/10	79.03	
COMMISSIONERS COURT	230	UTILITIES-DISPATCH BUILDING	66623	CENTERPOINT ENERGY	1805	6403494...	EMER COM 9/17 A# 6403494238-9 CCF0 8/11- 9/11	58.84	
COMMISSIONERS COURT	Total 230	INTERNET SERVICES	62955	FRONTIER COMMUNICATIONS	2855	3611970...	CH 9/11 A# 361-197-0053- 122022-5 INTERNET 9/11- 10/12	1,200.00	
COMMISSIONERS COURT	Total 230	PATHOLOGIST FEES	64520	TRAVIS COUNTY MEDICAL EXAMINER	7710	3300009...	COM CRT/JP4 8/29 AUTOPSY FEE- C. BROCKHAUS	4,085.00	
COUNTY AUDITOR	190	TRAVEL IN COUNTY	66476	ORTA GRACIE	EM...	PO1904...	AUDITOR 9/19 IN-CNTY TRAVEL REIMB- 7/25- 9/19 CASH COUNTS	72.10	
COUNTY AUDITOR	Total 190							72.10	0.00
COUNTY CLERK	250	COPY MACHINE LEASE	61340	DEWITT POTH & SON LLC	3379	8058550	CO CLK 8/26 COPY COUNT 7/23- 8/25	85.46	
		MISCELLANEOUS	63920	TEXAS DEPT OF STATE HEALTH	1512	2026142	CO CLK 9/2 AUG 2025 REMOTE BIRTH ACCESS	95.16	
		TRAINING TRAVEL OUT OF COUNTY	66316	GOODMAN ANNA M	EM...	PO2509...	CO CLK 9/19 TRAVEL REIMB- COLLEGE STATION, TX 9/17- 9/19	403.80	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
COUNTY CLERK	Total 250							824.42	0.00
COUNTY COURT-AT-LAW	410	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	45638108	CRT@LAW1 9/5 LEGAL PAPER	92.64	
			53020	QUILL LLC	6602	45638391	CRT@LAW1 9/5 PEN HOLDER	12.74	
			53020	QUILL LLC	6602	45688839	CRT@LAW1 9/10 NAME PLATE-JUDGE BEELDER	26.39	
		ADULT ASSIGNED-ATTORNEY FEES	60050	CLARK JERRY	9858	2025128	CRT@LAW1 9/15 C# 25-PF-0075-CC K. MOON	100.00	
			60050	CLARK JERRY	9858	2025129	CRT@LAW1 9/15 C# 2025-CR-0156-CC K. MOON	325.00	
		COURT REPORTER-SUBSTITUTE	61490	NORRELL DORINDA K	5470	PO2025...	CRT@LAW1 9/12 CRT REPORTING ON 9/10/2025	400.00	
		LEGAL SERVICES-COURT APPOINTED	63380	BRADICICH & USZYNSKI LLP	42601	2025127	CRT@LAW1 9/8 C# 2025-FAM-0010-CC	1,949.20	
			63380	BRADICICH & USZYNSKI LLP	42601	2025130	CRT@LAW1 9/15 C# 2025-FAM-0038-CC	1,560.19	
		MACHINE MAINTENANCE	63500	RELX INC	4625	3096000...	CRT@LAW1 8/31 AUG 2025 SUBSCRIPTION	59.00	
		TRAINING-REGISTRATION FEES	66322	CDCAT REGION VIII	2987	PO2025...	CRT@LAW1 9/8 CONF REG-VICTORIA, TX 10/23/25	40.00	
COUNTY COURT-AT-LAW	Total 410							4,565.16	0.00
COUNTY TAX COLLECTOR	200	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	40148818	TAX A/C 9/17 COPIER LEASE	185.00	
		CAPITAL OUTLAY	70750	DELL MARKETING LP	1466	1083078...	TAX A/C 8/14 DELL PRO 16 PLUS COMPUTER	1,625.25	
COUNTY TAX COLLECTOR	Total 200							1,810.25	0.00
COUNTY TREASURER	210	TRAINING TRAVEL OUT OF COUNTY	66316	MCKISSACK MELISSA	EM...	PO092325	TREAS 9/23 TRAVEL REIMB- SUGARLAND, TX 9/17- 9/18	37.27	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven.. ID	Document Number	Transaction Description	Debit	Credit
COUNTY TREASURER	Total 210							37.27	0.00
DISTRICT ATTORNEY	510	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	40124138	DA 9/15 COPIER LEASE	213.00	
		LEGAL SERVICES	63350	BROOKS DAVID B	5955	DB20258	DA 8/29 AUG 2025 SUBSCRIPTION	100.00	
		BOOKS-LAW	70500	THOMSON REUTERS - WEST	8612	6168936...	DA 9/13 2025 OCONNOR TX CRIM OFF/DEF	349.00	
DISTRICT ATTORNEY	Total 510							662.00	0.00
DISTRICT CLERK	420	PHOTO COPIES/SUPPLIES	53030	GREAT AMERICA FINANCIAL	2751	40102660	DIST CLK 9/10 COPIER LEASE	270.00	
		POSTAGE	64790	PTNEY BOWES GLOBAL FIN. SERV.	6268	3321246...	DIST CLK 8/30 POSTAGE METER LEASE 6/30- 9/29	350.25	
		TRAINING TRAVEL OUT OF COUNTY	66316	CDCAT REGION VIII	2987	PO4209...	DIST CLK 9/22 (3) CONF REG- VICTORIA, TX 10/22-10/24	120.00	
DISTRICT CLERK	Total 420							740.25	0.00
DISTRICT COURT	430	ADULT ASSIGNED-ATTORNEY FEES	60050	RICH POWERS LAW PLLC	63890	2025210	DIST CRT 9/8 C# 2025-CR-9111-DC A. CORTEZ	450.00	
			60050	RICH POWERS LAW PLLC	63890	2025211	DIST CRT 9/8 C# 2025-CR-9136-DC J. HAMILTON	450.00	
		LEGAL SERVICES-COURT APPOINTED	63380	R PEREZ LAW PLLC	31800	2025210A	DIST CRT 9/4 C# 2024-FAM-5205-DC	85.00	
DISTRICT COURT	Total 430							985.00	0.00
ELECTIONS	270	ELECTION SUPPLIES	53361	ELECTION SYSTEMS & SOFTWARE	1810	CD2127...	ELEC 9/3 CODING BALLOT	19.14	
ELECTIONS	Total 270							19.14	0.00
EMERGENCY MANAGEMENT	630	PHOTO COPIES/SUPPLIES	53030	GREAT AMERICA FINANCIAL	2751	40142972	EMER MGMT 9/16 COPIER LEASE	179.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
EMERGENCY MANAGEMENT	Total 630							179.00	0.00
EMERGENCY MEDICAL SERVICES	345	BUILDING SUPPLIES/PARTS	53610	GULF COAST PAPER CO INC	2619	2681310	EMS 9/9 CLEANER, LINERS, TOWELS	209.29	
		SUPPLIES/OPERATING EXPENSES	53980	BOUND TREE MEDICAL, LLC	412	85910789	EMS 9/8 ETCO2, NASAL CANNULAL	834.72	
			53980	BOUND TREE MEDICAL, LLC	412	85910790	EMS 9/8 EPA, ETS, NACL, TOURNIQUETS, IV EXT SET	1,407.27	
			53980	BOUND TREE MEDICAL, LLC	412	85916241	EMS 9/11 ELECTRODES, PROBE COVERS, CIRCUIT w/o PEEP VALVE	1,392.39	
			53980	MED-TECH RESOURCE, INC.	5198	155229	EMS 9/8 PORTABLE JUMP STRTR & BATTERY CHRGR	119.24	
		MACHINE MAINTENANCE	63500	STRYKER SALES CORPORATION	5881	9210217...	EMS 9/5 ECG ASSY, CABLE	212.16	
		MACHINERY/EQUIPMENT REPAIRS	63530	FRAZER LTD	2266	102319	EMS 9/8 EXTERIOR HANDLE	252.56	
			63530	JOHN WRIGHT & ASSOC., INC.	3812	56279	EMS 9/2 CLEAR & RED LED w/ LENS	623.40	
			63530	VICTORIA COMMUNICATION SERVICE	8229	VIC5127...	EMS 9/12 RADIO REPAIR	865.00	
		MEDICAL DIRECTOR CONTRACT	63765	TRM MEDICAL PA	76510	PO3459...	EMS 9/1 AUG 2025 MEDICAL DIRECTOR FEE	1,000.00	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3617461...	EMS 9/1 A# 28729854037 ADMIN/AMB PHONES 8/2-8/1	1,251.69	
		UTILITIES	66600	SEAPORT LAKES WATER SYSTEM LLC	1560	2022	EMS STH 9/3 WATER	33.00	
			66600	CITY OF PORT LAVACA	861	1452250...	EMS 9/16 A# 14-5225-00 WATER 8/15- 9/15	159.56	
EMERGENCY MEDICAL SERVICES	Total 345							8,360.28	0.00
EXTENSION SERVICE	110	TRAVEL/OUT OF COUNTY-CEA/4HYD	66462	DEFOREST EMILLEE	EM...	PO1102...	EXT SVC 9/17 TRAVEL REIMB- SAN ANTONIO, TX 9/3- 9/5	170.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
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							170.00	0.00
HUMAN RESOURCES	265	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615512...	HR 9/11 A# 361-551-2181-011122-5 FAX 9/11- 10/10	121.24	
HUMAN RESOURCES	Total 265							121.24	0.00
INFORMATION TECHNOLOGY	275	UTILITIES-117 W. ASH ST. BUILDING	66609	CITY OF PORT LAVACA	861	1213400...	IT 9/12 A# 12-1340-00 WATER 8/10- 9/10	110.08	
INFORMATION TECHNOLOGY	Total 275							110.08	0.00
JAIL OPERATIONS	180	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	45389207	JAIL 8/19 TONER	444.02	
			53020	QUILL LLC	6602	45394063	JAIL 8/19 TONER	98.99	
		JAIL MAINTENANCE/SUPPLIES	53420	CHARM-TEX INC	1177	0412306...	JAIL 7/30 CURTAIN, TOILET BOWL CLEANER	331.44	
			53420	QUILL LLC	6602	45471608	JAIL 8/25 MASKS	79.15	
			53420	QUILL LLC	6602	45471638	JAIL 8/25 CLOROX WIPES, LYSOL SPRAY	488.28	
		PRISONER CLOTHING/SUPPLIES	53460	CHARM-TEX INC	1177	0415301...	JAIL 8/20 SANDALS	137.28	
		GROCERIES	53460	CHARM-TEX INC	1177	0415721...	JAIL 8/27 SHAMPOO	279.60	
			53955	PERFORMANCE FOOD GROUP INC	63650	3226337	JAIL 9/11 INMATE GROCERIES	1,331.52	
			53955	PERFORMANCE FOOD GROUP INC	63650	3227825	JAIL 9/15 INMATE GROCERIES	3,172.15	
			53955	PERFORMANCE FOOD GROUP INC	63650	3229725	JAIL 9/18 INMATE GROCERIES	838.85	
		SUPPLIES-MISCELLANEOUS	53992	DRIESSEN WATER INC	6245	5535445	JAIL 8/12 WATER	31.65	
			53992	DRIESSEN WATER INC	6245	5598672	JAIL 8/30 LATE FEE	5.00	
			53992	PERFORMANCE FOOD GROUP INC	63650	3226337	JAIL 9/11 HAIR NETS	20.90	
			53992	PERFORMANCE FOOD GROUP INC	63650	3227825	JAIL 9/15 BAGGIES	24.81	
		COPIER RENTALS	61310	DEWITT POTH & SON LLC	3379	8049120	JAIL 8/18 COPY COUNT 7/17- 8/18	92.89	

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		DRUG TESTING	62150	MEMORIAL MEDICAL CENTER	5099	1174869...	JAIL 7/30 DRUG TESTING	41.00	
		POSTAGE	64790	FEDEX	2222	8877098...	JAIL 5/29 SHIPMENT	51.46	
			64790	FEDEX	2222	8912798...	JAIL 7/3 SHIPMENT, LATE FEE	41.71	
			64790	FEDEX	2222	8919951...	JAIL 7/10 SHIPMENT	28.46	
			64790	FEDEX	2222	9700720...	JAIL 8/7 LATE FEE	3.63	
			64790	FEDEX	2222	9701158...	JAIL 8/14 LATE FEE	2.82	
		PRISONER MEDICAL SERVICES	64910	SOUTHERN HEALTH PARTNERS	3460	BASE54...	JAIL 9/2 OCT 2025 PRISONER MEDICAL	13,175.75	
JAIL OPERATIONS	Total 180							20,721.36	0.00
JUSTICE OF PEACE PRECINCT #2	460	GENERAL OFFICE SUPPLIES	53020	AQUA BEVERAGE CO	89	140961	JP2 9/11 WATER	29.98	
JUSTICE OF PEACE PRECINCT #2	Total 460							29.98	0.00
JUSTICE OF PEACE PRECINCT #4	480	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	40116745	JP4 9/12 COPIER LEASE	65.03	
JUSTICE OF PEACE PRECINCT #4	Total 480							65.03	0.00
JUSTICE OF PEACE PRECINCT #5	490	COPY MACHINE LEASE	61340	DEWITT BOTH & SON LLC	3379	8057480	JP5 8/26 COPY COUNT 7/23-8/25	23.06	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	361983...	JP5 9/1 A# 361-983-2351-100102-5 SEPT 2025 PHONE	197.20	
JUSTICE OF PEACE PRECINCT #5	Total 490							220.26	0.00
LIBRARY	140	GENERAL OFFICE SUPPLIES	53020	DEMCO INC	1427	7693491	LIBRARY 9/8 LABEL PROTECTORS	175.47	
		PUBLICATIONS	54030	WORLD JOURNAL LA LLC	2888	P00912...	LIBRARY 9/12 ANNUAL SUBSCRIPTION RENEWAL 10/10/25- 10/10/26	598.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09/24/25
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		INTERNET SERVICES	62955	FRONTIER COMMUNICATIONS	2855	3611970...	LIBRARY 9/10 A# 361-197-0199-070623-5 INTERNET 9/10- 10/9	178.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615524...	LIBRARY 9/13 A# 361-552-4926- 101592-5 PHONE 9/13- 10/12	146.46	
			66192	FRONTIER COMMUNICATIONS	2855	3615527...	LIBRARY 9/13 A# 361-552-7323-042491-5 PHONE 9/13- 10/12	284.94	
		UTILITIES-MAIN LIBRARY	66610	CITY OF PORT LAVACA	861	1217300...	LIBRARY 9/12 A# 12-1730-00 WATER 8/10- 9/10	163.38	
			66610	CITY OF PORT LAVACA	861	1217310...	LIBRARY 9/12 A# 12-1731-00 WATER 8/10- 9/10	52.01	
		UTILITIES-SEADRIFT LIBRARY	66622	CENTERPOINT ENERGY	1805	2981129...	SEA LIBRARY 9/17 A# 2981129-6 CCF 0 8/11- 9/11	56.45	
		BOOKS & PRINT MATL-LIBRARY	70550	BAKER & TAYLOR	403	5019656...	LIBRARY 9/2 BOOK	11.65	
			70550	BAKER & TAYLOR	403	5019656...	LIBRARY 9/2 BOOK	11.07	
			70550	BAKER & TAYLOR	403	5019656...	LIBRARY 9/2 BOOKS	30.62	
			70550	BAKER & TAYLOR	403	5019656...	LIBRARY 9/2 BOOKS	200.81	
LIBRARY	Total 140							1,908.86	0.00
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615521...	MODEM 9/16 A# 361-552-1476-082207-5 9/16-10/15	95.63	
			66192	FRONTIER COMMUNICATIONS	2855	3615534...	CH/ANNEX 9/13 A# 361-553-4465- 011607-5 PHONE 9/13- 10/12	1,481.47	
			66192	FRONTIER COMMUNICATIONS	2855	3615534...	ANNEX 9/13 A# 361-553-4645-012307-5 PHONE 9/13- 10/12	420.33	
MISCELLANEOUS	Total 280							1,997.43	0.00
		SUPPLIES-MISCELLANEOUS	53992	QUILL LLC	6602	45629134	MUSEUM 9/5 WIRELESS MOUSE	56.04	
			53992	QUILL LLC	6602	45638216	MUSEUM 9/5 CARDSTOCK, PAPER	132.53	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
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 #1	540	MACHINERY PARTS/SUPPLIES	53992	QUILL LLC	6602	45644932	MUSEUM 9/8 SCRAPER	9.53	
			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
			53992	QUILL LLC	6602	45645905	MUSEUM 9/8 DISPLAYS, HOOKS	628.83	
			53992	QUILL LLC	6602	45646120	MUSEUM 9/8 CARDSTOCK	53.79	
			63920	CALHOUN CO. INDEPENDENT	807	POT76	MUSEUM 8/26 JULY & AUG 2025 OFFSITE STORAGE RENTAL	100.00	
			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
			66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 9/17 A# 2860820-6 CCF 10 8/11- 9/11	69.27	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86	
			53540	GASOLINE/OIL/DIESEL/GRE...	3638	9290625...	RB1 8/27 1070G DIESEL, TX, 633G UNLEADED	4,536.67	
			53595	TOOLS	7637	9301125...	RB1 9/10 OIL FILTER WRENCH	11.69	
MUSEUM	Total 150								
MUSEUM	540	MACHINERY PARTS/SUPPLIES	53992	QUILL LLC	6602	45644932	MUSEUM 9/8 SCRAPER	9.53	
			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
			53992	QUILL LLC	6602	45645905	MUSEUM 9/8 DISPLAYS, HOOKS	628.83	
			53992	QUILL LLC	6602	45646120	MUSEUM 9/8 CARDSTOCK	53.79	
			63920	CALHOUN CO. INDEPENDENT	807	POT76	MUSEUM 8/26 JULY & AUG 2025 OFFSITE STORAGE RENTAL	100.00	
			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
			66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 9/17 A# 2860820-6 CCF 10 8/11- 9/11	69.27	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86				
53540	GASOLINE/OIL/DIESEL/GRE...	3638	9290625...	RB1 8/27 1070G DIESEL, TX, 633G UNLEADED	4,536.67				
53595	TOOLS	7637	9301125...	RB1 9/10 OIL FILTER WRENCH	11.69				
MUSEUM	Total 150								
MUSEUM	540	MACHINERY PARTS/SUPPLIES	53992	QUILL LLC	6602	45644932	MUSEUM 9/8 SCRAPER	9.53	
			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
			53992	QUILL LLC	6602	45645905	MUSEUM 9/8 DISPLAYS, HOOKS	628.83	
			53992	QUILL LLC	6602	45646120	MUSEUM 9/8 CARDSTOCK	53.79	
			63920	CALHOUN CO. INDEPENDENT	807	POT76	MUSEUM 8/26 JULY & AUG 2025 OFFSITE STORAGE RENTAL	100.00	
			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
			66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 9/17 A# 2860820-6 CCF 10 8/11- 9/11	69.27	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86				
53540	GASOLINE/OIL/DIESEL/GRE...	3638	9290625...	RB1 8/27 1070G DIESEL, TX, 633G UNLEADED	4,536.67				
53595	TOOLS	7637	9301125...	RB1 9/10 OIL FILTER WRENCH	11.69				
MUSEUM	Total 150								
MUSEUM	540	MACHINERY PARTS/SUPPLIES	53992	QUILL LLC	6602	45644932	MUSEUM 9/8 SCRAPER	9.53	
			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
			53992	QUILL LLC	6602	45645905	MUSEUM 9/8 DISPLAYS, HOOKS	628.83	
			53992	QUILL LLC	6602	45646120	MUSEUM 9/8 CARDSTOCK	53.79	
			63920	CALHOUN CO. INDEPENDENT	807	POT76	MUSEUM 8/26 JULY & AUG 2025 OFFSITE STORAGE RENTAL	100.00	
			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
			66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 9/17 A# 2860820-6 CCF 10 8/11- 9/11	69.27	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86				
53540	GASOLINE/OIL/DIESEL/GRE...	3638	9290625...	RB1 8/27 1070G DIESEL, TX, 633G UNLEADED	4,536.67				
53595	TOOLS	7637	9301125...	RB1 9/10 OIL FILTER WRENCH	11.69				
MUSEUM	Total 150								
MUSEUM	540	MACHINERY PARTS/SUPPLIES	53992	QUILL LLC	6602	45644932	MUSEUM 9/8 SCRAPER	9.53	
			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
			53992	QUILL LLC	6602	45645905	MUSEUM 9/8 DISPLAYS, HOOKS	628.83	
			53992	QUILL LLC	6602	45646120	MUSEUM 9/8 CARDSTOCK	53.79	
			63920	CALHOUN CO. INDEPENDENT	807	POT76	MUSEUM 8/26 JULY & AUG 2025 OFFSITE STORAGE RENTAL	100.00	
			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
			66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 9/17 A# 2860820-6 CCF 10 8/11- 9/11	69.27	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86				
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53595	TOOLS	7637	9301125...	RB1 9/10 OIL FILTER WRENCH	11.69				
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			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
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			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
			66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 9/17 A# 2860820-6 CCF 10 8/11- 9/11	69.27	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86				
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			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
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			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
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			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
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			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
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			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86				
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53595	TOOLS	7637	9301125...	RB1 9/10 OIL FILTER WRENCH	11.69				
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			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
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			63920	CALHOUN CO. INDEPENDENT	807	POT76	MUSEUM 8/26 JULY & AUG 2025 OFFSITE STORAGE RENTAL	100.00	
			63920	CALHOUN CO. INDEPENDENT	807	POT76.	MUSEUM 8/26 SEPT-DEC 2025 OFFSITE STORAGE RENTAL	200.00	
			66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 9/17 A# 2860820-6 CCF 10 8/11- 9/11	69.27	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 9/12 A# 12-0865-00 WATER 8/10- 9/10	79.03	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 BATTERY- #0258	1,607.90	0.00
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/8 CREDIT ON CORE RETURN	175.34	22.00
53210	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	RB1 9/9 OIL, FUEL FILTER- #0220	40.86				
53540	GASOLINE/OIL/DIESEL/GRE...	3638	9290625...	RB1 8/27 1070G DIESEL, TX, 633G UNLEADED	4,536.67				
53595	TOOLS	7637	9301125...	RB1 9/10 OIL FILTER WRENCH	11.69				
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			53992	QUILL LLC	6602	45645884	MUSEUM 9/8 FOAM BOARD	278.88	
			53992	QUILL LLC	6602	45645905	MUSEUM 9/8 DISPLAYS, HOOKS	628.83	
			53992	QUILL LLC	6602	45646120			

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
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 #1	Total 540							5,282.23	22.00
		UTILITIES-PARKS	66614	CITY OF PORT LAVACA	861	1421050...	CHOC BAY PK 9/16 A# 14-2105-00 WATER 8/15- 9/15	96.53	
			66614	CITY OF PORT LAVACA	861	1421100...	CHOC BAY PK 9/16 A# 14-2110-00 WATER 8/15- 9/15	52.01	
ROAD AND BRIDGE-PRECINCT #2	550	SUPPLIES-MISCELLANEOUS	53992	O REILLY AUTO PARTS	5803	0575447...	RB2 9/4 TAP	13.37	
			53992	GULF COAST HARDWARE LLC	63192	202473	RB2 9/4 GALV NIPPLE & COUPLING	12.98	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4242701...	RB2 9/9 UNIFORMS	79.16	
		MACHINERY/EQUIPMENT REPAIRS	63530	CROSSROADS TIRE SERVICE LLC	7059	4001884	RB2 9/10 MOWER FLAT REPAIR	27.07	
		OUTSIDE MAINTENANCE	64370	FIRESTONE OF PORT LAVACA LLC	5584	0089740	RB2 6/12 REPL PRES SWITCH, REPL ORIFICE TUBE- 05 FORD	464.37	
		TELEPHONE SERVICES	66192	INFINIUM BROADBAND INTERNET	3378	121357	RB2 9/22 A# ACC0002074 INTERNET 9/22- 10/22	150.00	
ROAD AND BRIDGE-PRECINCT #2	Total 550							746.95	0.00
ROAD AND BRIDGE-PRECINCT #3	560	MACHINERY PARTS/SUPPLIES	53210	FIRESTONE OF PORT LAVACA LLC	5584	0090265	RB3 9/16 TRAILER TIRES	231.90	
			53210	O REILLY AUTO PARTS	5803	0575448...	RB3 9/8 BATTERY- U34	144.10	
		INSECTICIDES/PESTICIDES	53210	O REILLY AUTO PARTS	5803	0575448...	RB3 9/11 BATTERY- U38	169.28	
			53630	GULF COAST HARDWARE LLC	63193	202466	RB3 9/10 WASP KILLER	39.96	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4242861...	RB3 9/10 FRESHENER	12.68	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4242861...	RB3 9/10 UNIFORMS	142.18	
		EQUIPMENT RENTAL	62510	GREAT AMERICA FINANCIAL	2751	40142971	RB3 9/16 COPIER LEASE	69.00	
		MISCELLANEOUS	63920	NEXTRAQ LLC	55122	US1633...	RB3 7/1 JULY 2025 VEHICLE TRACKING SVC	91.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09/24/25
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		63920	NEXTRAQ LLC	55122	US1642...	RB3 8/1 AUG 2025 VEHICLE TRACKING SVC	91.00	
								991.10	0.00
ROAD AND BRIDGE-PRECINCT #4	570	TIRES AND TUBES	53520	FIRESTONE OF PORT LAVACA LLC	5584	0090198	RB4 7/15 TIRES- 2016 DODGE	1,542.24	
		LUMBER	53550	POC HARDWARE & SUPPLY	6242	181851	RB4 8/19 LUMBER	6.99	
		PIPE	53580	POC HARDWARE & SUPPLY	6242	181329	RB4 8/5 PVC PIPE	88.00	
			53580	POC HARDWARE & SUPPLY	6242	181648	RB4 8/4 PVC PIPE	33.00	
		TOOLS	53595	POC HARDWARE & SUPPLY	6242	181648	RB4 8/4 RAKE, SHOVEL, 1/4" DRIVE, BIT	41.56	
			53595	POC HARDWARE & SUPPLY	6242	181851	RB4 8/19 4# DRILLING HMR, BITS	33.98	
		SUPPLIES-MISCELLANEOUS	53992	POC HARDWARE & SUPPLY	6242	180740	RB4 8/12 WASP SPRAY, PLUGS, CAPS, BOLTS, WASHERS, TPOSTS ETC	213.89	
			53992	POC HARDWARE & SUPPLY	6242	181329	RB4 8/5 SCISSORS, PAINT BRUSH, FITTINGS, SPRAY PAINT	45.82	
			53992	POC HARDWARE & SUPPLY	6242	181648	RB4 8/4 CUPS, BLEACH, CLNRS, BRUSHES	84.39	
			53992	POC HARDWARE & SUPPLY	6242	181851	RB4 8/19 LT BULBS, SPRAY PNT, NUTS, BOLTS, WSHRS, WD40	53.16	
			53992	POC HARDWARE & SUPPLY	6242	181809	RB4 8/27 MARKING SPRAY	18.98	
			53992	CINTAS CORPORATION LOC. 083	958	4242860...	RB4 9/10 MAT, MOP	15.51	
		MACHINERY/EQUIPMENT REPAIRS	63530	HOLT CAT	3048	WINMVO...	RB4 9/11 TRAVEL FEE FOR WARRANTY WORK	617.50	
			63530	ROBBINS ALLEN LEE	52201	1425	RB4 9/9 SCAN CODES ON HERBICIDE TRUCK	125.00	
		OUTSIDE SERVICES	64400	DOUGLAS EVA LEE	3778	SEP25	RB4 9/9 SEPT 2025 SEA OFFICE CLEANING	300.00	

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
ROAD AND BRIDGE-PRECINCT #4	Total 570							3,601.75	0.00
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3616558...	RB4 9/15 A# 287354875361 PHONE 8/16- 9/15	246.83	
		UNIFORMS	66590	CINTAS CORPORATION LOC. 083	958	4242860...	RB4 9/10 UNIFORMS	134.90	
SHERIFF	760	TIRES AND TUBES	53520	CROSSROADS TIRE SERVICE LLC	7059	4001883	SO 9/10 TIRE ROTATION- OSG08	37.07	
		AUTOMOTIVE REPAIRS	60360	KNEUPPER CARROLL	3678	54111	SO 8/12 OIL CHG- U11	148.22	
			60360	KNEUPPER CARROLL	3678	54776	SO 9/10 OIL CHG- OSG08	148.22	
			60360	KNEUPPER CARROLL	3678	54777	SO 9/10 OIL CHG- U19	148.22	
			60360	KNEUPPER CARROLL	3678	54898	SO 9/13 OIL CHG- OSG13	118.94	
		TRAINING TRAVEL OUT OF COUNTY	66316	GARCIA JOE	EM...	POT609...	SO 9/12 TRAVEL REIMB- GALVESTON, TX 9/7- 9/12	407.00	
		VEHICLES	74055	PARKWAY CHEVROLET INC	43910	RG275178	SO 8/25 PURCHASE 2024 CHEV SILVERADO	68,250.44	
SHERIFF	Total 760							69,258.11	0.00
WASTE MANAGEMENT	380	SUPPLIES-MISCELLANEOUS	53992	POWER HARDWARE LLC	62260	A122223	WASTE MGMT 9/5 LT BULBS, RAKE, WATER HOSE, NIFTY NABBER	84.95	
			53992	TRL-WHOLESALE COMPANY, INC.	7637	9301125...	WASTE MGMT 9/8 BLOW GUN	23.84	
WASTE MANAGEMENT	Total 380							108.79	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
2610 - AIRPORT FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	MACHINERY/EQUIPMENT REPAIRS	63530	PETROLEUM SOLUTIONS INC	6277	SRVCE4...	AIRPORT #31 INST REWIND MOTOR & ACTIVATION SWITCH	2,055.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615520...	AIRPORT 9/13 A# 361-552-0903- 021369-5 PHONE 9/13- 10/12	140.22	
NO DEPARTMENT	Total 999							2,195.22	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
 2660 - COASTAL PROTECTION FUND (GOMESA)

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING/PERMITS	62457	STANTEC CONSULTING	79650	2444204	GOMESA 8/26 PORT ALTO MARSH RESTORATION PERMIT AMEND #15	761.50	
		TRANSFER TO CAP.PROJ.-BILL SANDERS PARK	98402	CALHOUN CO. CAPITAL PROJECT	92100	PO2660...	CAP PROJ 9/15 GOMESA FUNDS- BILL SANDERS PK IMPR PROJ	80,000.00	
NO DEPARTMENT	Total 999							80,761.50	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
 2697 - DONATIONS FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SOUVENIR/GIFT ITEMS	53973	CIMPRESS USA INCORPORATED	3799	1143193...	MUSEUM DONATIONS FUND 8/28 KEYCHAINS	190.77	
		MISCELLANEOUS	63920	POSITIVE PROMOTIONS	6327	63549020	SO DONATIONS FUND 8/18 300PC THEME KIT- BE STRONG	1,336.89	
NO DEPARTMENT	Total 999							1,527.66	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
 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	8524541...	LAW LIBRARY 9/1 AUG 2025 WEST SUBSCRIPTION CHGS	1,489.42	
NO DEPARTMENT	Total 999							1,489.42	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
 2736 - POC COMMUNITY CENTER

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	RENTAL DEPOSITS	20820	KROLczyk BLAKE	RFO...	1038	POCCC 1/13 DEPOSIT REFUND	200.00	
		CLEANING-P.O.C. COMMUNITY CENTER	60870	RHYNE SERVICES LLC	14930	092025	POCCC 9/9 SEPT 2025 CLEANING	600.00	
		UTILITIES-POC COMMUNITY CENTER	66616	FRONTIER COMMUNICATIONS	2855	3619834...	POCCC 9/13 A# 361-983-4485- 102899-5 PHONE 9/13- 10/12	66.01	
			66616	INFINIUM BROADBAND INTERNET	3378	120895	POCCC 9/17 A# ACC0004004 INTERNET 9/17- 10/17	150.00	
NO DEPARTMENT	Total 999							1,016.01	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
 2738 - RECORDS MANAGEMENT FUND COUNTY CLERK

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Van... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SOFTWARE MAINTENANCE (ANNUAL)	65835	TYLER TECHNOLOGIES INC	5950	0255189...	CO CLK RECS MGMT 7/9 IMAGE UPLOAD OF OPR VOL 1-71	2,500.00	
NO DEPARTMENT	Total 999							2,500.00	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09/24/25
 5112 - CAP PROJ.-CDBG-MIT INFRASTRUCTURE

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	IMPROVEMENTS-DRAINAGE	73153	LESTER CONTRACTING, INC.	4623	2408610	CAP PROJ 8/31 SEA DRAINAGE IMPR-ERON SLOUGH PMNT# 10	176,639.20	
NO DEPARTMENT	Total 999							176,639.20	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 09.24.25
9200 - JUVENILE PROBATION FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	PHOTO COPIES/SUPPLIES	53030	GREAT AMERICA FINANCIAL	2751	40124139	JUV PROB 9/15 COPIER LEASE	208.00	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3617463...	JUV PROB 9/11 A# 287295876979 PHONE 8/12-9/11	321.87	
		TRAVEL	66450	LEILA LUIS	4701	PO7401...	JUV PROB 9/22 TRAVEL REIMB- EDINBURG, TX 9/17- 9/18	102.00	
NO DEPARTMENT	Total 999							631.87	0.00
Report Total								407,794.09	22.00

September 24, 2025

APPROVAL LIST - 2025 BUDGET

COMMISSIONERS COURT MEETING OF

09/24/25

BALANCE BROUGHT FORWARD FROM APPROVAL LIST REPORT PAGE 20

SHIRLEY & SONS
CLARRI ATKINSON

CAP PROJ- BILL SANDERS PARK PAVILION- FINAL PMT
TRAVEL REIMBURSEMENT

\$407,772.09

A/P \$ 25,081.20
A/P \$ 179.90

TOTAL VENDOR DISBURSEMENTS:

\$ 433,033.19

PAYROLL ON SEPTEMBER 26, 2025

P/R \$ 421,909.81

TOTAL PAYROLL AMOUNT:

\$ 421,909.81

TexSTAR WITHDRAWALS TO CONSTRUCTION SERIES 2024 ACCOUNT (CERT OF OBLIGATION)
TexSTAR WITHDRAWALS TO CONSTRUCTION SERIES 2024 ACCOUNT (TAX NOTES)

\$ 977,939.50
\$ 2,817,418.80

TOTAL INVESTMENT ACTIVITY AND TRANSFERS BETWEEN FUNDS:

\$ 3,795,358.30

TOTAL AMOUNT FOR APPROVAL:

\$ 4,650,301.30

RB
2B

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---September 24, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 1,027,785.79
TOTAL TRANSFERS BETWEEN FUNDS	\$ 254,338.96
TOTAL NURSING HOME UPL EXPENSES	\$ 865,898.52
TOTAL INTER-GOVERNMENT TRANSFERS	\$
GRAND TOTAL DISBURSEMENTS APPROVED September 24, 2025	\$ 2,148,023.27

RB JBL

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---September 24, 2025

PAYABLES AND PAYROLL

9/18/2025 Weekly Payables	359,836.90
9/18/2025 Travel Reimbursement - Caitlin Clevenger	276.11
9/22/2025 Citibank Credit Card-see attached (Erin)	4,409.05
9/22/2025 McKesson-3408 Prescription Expense	727.40
9/22/2025 Amerisource Bergen-3408 Prescription Expense	37.06
9/22/2025 Amerisource Bergen-3408 Prescription Expense	228.59
9/22/2025 Payroll Liabilities-Payroll Taxes	117,925.68
9/22/2025 Payroll	370,522.84

Prosperity Electronic Bank Payments

9/22/2025 90 Degree Benefits - employee insurance claims estimate for year end register	60,000.00
9/22/2025 90 Degree Benefits - employee insurance claims	20,130.00
9/22/2025 90 Degree Benefits - employee insurance claims	20,801.00
9/22/2025 90 Degree Benefits - employee insurance claims	70,691.46
9/22/2025 Pay Plus-Patient Claims Processing Fee	866.88
9/22/2025 Credit Card Leasing Fee	285.82
9/22/2025 Health Equity -HSA Contributions	1,047.00

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **1,027,785.79**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

9/18/2025 MMC Operating to Golden Creek Healthcare-Correction of Insurance payment deposited into MMC Operating in error	162,850.37
9/18/2025 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	29,568.82
9/18/2025 MMC Operating to Bethany/Lavaca Bay-Correction of insurance payment deposited into MMC Operating in error	61,919.77

TOTAL TRANSFERS BETWEEN FUNDS \$ **254,338.96**

NURSING HOME UPL EXPENSES

9/22/2025 Nursing Home UPL-Cantex Transfer	4,182.40
9/22/2025 Nursing Home UPL-Nexion Transfer	495,623.05
9/22/2025 Nursing Home UPL-HMG Transfer	17,318.17
9/22/2025 Nursing Home UPL-Tuscany Transfer	192,616.36
9/22/2025 Nursing Home UPL-HSL Transfer	84,090.16

TRANSFER BETWEEN FUNDS FROM NURSING HOMES TO MMC

9/22/2025 Gulfpointe to MMC - Claim owed to MMC	49.00
9/22/2025 Gulfpointe to MMC - Claim owed to MMC	361.07
9/22/2025 Golden Creek to MMC - QIPP Y7 ADJ 2 Portion owed to MMC	274.11
9/22/2025 Golden Creek to MMC-Claim owed to MMC	740.15
9/22/2025 Lavaca Bay to MMC - ATUS Payment	70,644.05

TOTAL NURSING HOME UPL EXPENSES \$ **865,898.52**

TOTAL INTER-GOVERNMENT TRANSFERS

\$

GRAND TOTAL DISBURSEMENTS APPROVED September 24, 2025 \$ **2,148,023.27**

SEP 18 2025

09/18/2025

11:48

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 10/09/2025

0
ap_open_invoice.template

Vendor# Vendor Name

A1680 AIRGAS USA, LLC - CENTRAL DIV

Class Pay Code

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9164770334		09/16/202	09/11/202	10/06/202			929.13	0.00	0.00	929.13 ✓

✓ 5518999614		09/17/202	08/31/202	09/25/202			637.76	0.00	0.00	637.76
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
A1680	AIRGAS USA, LLC - CENTRAL DIV	1,566.89	0.00	0.00	1,566.89

Vendor# Vendor Name

18096

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ AERAER0001		09/17/202	09/17/202	09/17/202			33.80	0.00	0.00	33.80 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
18096		33.80	0.00	0.00	33.80

Vendor# Vendor Name

14028 AMAZON CAPITAL SERVICES

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1FNYTTMN7XH4		09/10/202	09/05/202	10/05/202			28.00	0.00	0.00	28.00 ✓

✓ 1T7PDFHVJCN7		09/10/202	09/09/202	10/09/202			434.59	0.00	0.00	434.59 ✓
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✓ 1X7G9G7QKNNM		09/10/202	09/09/202	10/09/202			246.30	0.00	0.00	246.30 ✓
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✓ 1DRVXHVHKMXH		09/17/202	09/09/202	10/09/202			29.58	0.00	0.00	29.58 ✓
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
14028	AMAZON CAPITAL SERVICES	738.47	0.00	0.00	738.47

Vendor# Vendor Name

A2271 ARTHREX, INC

Class Pay Code

W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 925015405		09/10/202	09/06/202	09/10/202			625.00	0.00	0.00	625.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
A2271	ARTHREX, INC	625.00	0.00	0.00	625.00

Vendor# Vendor Name

12800 AUTHORITYRX, LLC

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 7000115424		09/17/202	09/11/202	09/12/202			17,121.18	0.00	0.00	17,121.18 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12800	AUTHORITYRX, LLC	17,121.18	0.00	0.00	17,121.18

Vendor# Vendor Name

M2485 BAYER HEALTHCARE

Class Pay Code

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 6012207403		09/17/202	09/02/202	09/17/202			877.74	0.00	0.00	877.74 ✓

✓ 6012207404		09/17/202	09/02/202	09/17/202			1,755.48	0.00	0.00	1,755.48 ✓
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✓ 6012219144		09/17/202	09/08/202	09/17/202			1,170.32	0.00	0.00	1,170.32 ✓
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Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	M2485	BAYER HEALTHCARE				3,803.54	0.00	0.00	3,803.54		
Vendor#	Vendor Name		Class	Pay Code							
B1220	BECKMAN COULTER INC		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 112232534		09/17/202	09/08/202	10/03/202			5,759.11	0.00	0.00	5,759.11 ✓
	✓ 112237624		09/17/202	09/10/202	10/05/202			279.92	0.00	0.00	279.92 ✓
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	B1220	BECKMAN COULTER INC				6,039.03	0.00	0.00	6,039.03		
Vendor#	Vendor Name		Class	Pay Code							
11072	BIO-RAD LABORATORIES, INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 908527130		09/15/202	08/28/202	10/05/202			372.82	0.00	0.00	372.82 ✓
	✓ 908559272		09/17/202	09/09/202	09/11/202			888.59	0.00	0.00	888.59 ✓
	✓ 908563777		09/17/202	09/11/202	09/17/202			2,190.48	0.00	0.00	2,190.48 ✓
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	11072	BIO-RAD LABORATORIES, INC				3,451.89	0.00	0.00	3,451.89		
Vendor#	Vendor Name		Class	Pay Code							
B1800	BRIGGS HEALTHCARE		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ B492735		09/17/202	09/09/202	09/17/202			327.30	0.00	0.00	327.30 ✓
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	B1800	BRIGGS HEALTHCARE				327.30	0.00	0.00	327.30		
Vendor#	Vendor Name		Class	Pay Code							
10926	CAITLIN CLEVENGER										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	091125		09/17/202	09/11/202	09/11/202			257.11	0.00	0.00	257.11
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	10926	CAITLIN CLEVENGER				257.11	0.00	0.00	257.11		
Vendor#	Vendor Name		Class	Pay Code							
C1325	CARDINAL HEALTH 414, INC.		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 8003953962		09/17/202	09/11/202	10/06/202			206.00	0.00	0.00	206.00 ✓
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	C1325	CARDINAL HEALTH 414, INC.				206.00	0.00	0.00	206.00		
Vendor#	Vendor Name		Class	Pay Code							
14260	CAREFUSION SOLUTIONS, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 10025901894		09/17/202	09/08/202	09/08/202			1,788.00	0.00	0.00	1,788.00 ✓
	✓ 10025901901		09/17/202	09/08/202	09/08/202			2.00	0.00	0.00	2.00 ✓
Vendor Totals: Number Name						Gross	Discount	No-Pay	Net		
	14260	CAREFUSION SOLUTIONS, LLC				1,790.00	0.00	0.00	1,790.00		
Vendor#	Vendor Name		Class	Pay Code							
10541	CARESFIELD										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 200031128		09/10/202	09/09/202	10/09/202			314.50	0.00	0.00	314.50 ✓

Hardware Billing

Norventany 1

Glycand / Ammonia

Diabetes Lia

Multival prem. assay

Q2 Register Book (2) X 1123.45

Removed amount is less

Supplies

Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
10541		CARESFIELD				314.50	0.00	0.00	314.50	
Vendor#	Vendor Name			Class	Pay Code					
12768	CHEMAQUA									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9307451		09/17/202	09/10/202	09/20/202			635.24	0.00	0.00	635.24
		Water Treatment								
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
12768		CHEMAQUA				635.24	0.00	0.00	635.24	
Vendor#	Vendor Name			Class	Pay Code					
17980	CMG TEXAS MEDIA LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
083125A		09/18/202	08/31/202	10/05/202			1,293.00	0.00	0.00	1,293.00
		Display Ads Prog. 2025								
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
17980		CMG TEXAS MEDIA LLC				1,293.00	0.00	0.00	1,293.00	
Vendor#	Vendor Name			Class	Pay Code					
C1166	COASTAL OFFICE SOLUTIONS			W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
OEQT327992		09/17/202	08/08/202	08/18/202			68.42	0.00	0.00	68.42
		HOUSE KEEPING SUPPLIES								
OE527041		09/17/202	09/12/202	09/22/202			230.28	0.00	0.00	230.28
		Can Liners								
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
C1166		COASTAL OFFICE SOLUTIONS				298.70	0.00	0.00	298.70	
Vendor#	Vendor Name			Class	Pay Code					
13336	COCA COLA SOUTHWEST BEVERAGES									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
48677036008		08/31/202	09/11/202	10/05/202			921.85	0.00	0.00	921.85
		Coke products								
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
13336		COCA COLA SOUTHWEST BEVERAGES				921.85	0.00	0.00	921.85	
Vendor#	Vendor Name			Class	Pay Code					
14400	CULINARY CONCESSIONS LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
INV310504		09/16/202	08/31/202	10/05/202			36,905.90	0.00	0.00	36,905.90
		Contract / Food / Direct Expense								
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
14400		CULINARY CONCESSIONS LLC				36,905.90	0.00	0.00	36,905.90	
Vendor#	Vendor Name			Class	Pay Code					
10368	DEWITT POTH & SON									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8079350		09/17/202	09/12/202	10/07/202			670.56	0.00	0.00	670.56
		Letter Paper / Tape roll / Sharpies / Sticky notes								
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
10368		DEWITT POTH & SON				670.56	0.00	0.00	670.56	
Vendor#	Vendor Name			Class	Pay Code					
14800	DIRECTV ENTERTAINMENT HOLDINGS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
250912		09/16/202	09/12/202	10/05/202			500.80	0.00	0.00	500.80
		Service period 9/11 - 10/10/25								
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net	
14800		DIRECTV ENTERTAINMENT HOLDINGS				500.80	0.00	0.00	500.80	
Vendor#	Vendor Name			Class	Pay Code					
10789	DISCOVERY MEDICAL NETWORK INC									

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ MMC083125		09/11/202	08/31/202	10/05/202			55,947.50	0.00	0.00	55,947.50 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10789	DISCOVERY MEDICAL NETWORK INC	55,947.50	0.00	0.00	55,947.50

Vendor#	Vendor Name	Class	Pay Code
11091 ✓	ECOLAB		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 6354771123		09/17/202	09/10/202	09/10/202			300.00	0.00	0.00	300.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11091	ECOLAB	300.00	0.00	0.00	300.00

Vendor#	Vendor Name	Class	Pay Code
15832 ✓	EVERON		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 159581464		09/17/202	09/02/202	10/02/202			58.43	0.00	0.00	58.43 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
15832	EVERON	58.43	0.00	0.00	58.43

Vendor#	Vendor Name	Class	Pay Code
13016 ✓	FIRST INSURANCE FUNDING		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 091225		09/16/202	09/12/202	10/05/202			3,890.99	0.00	0.00	3,890.99 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13016	FIRST INSURANCE FUNDING	3,890.99	0.00	0.00	3,890.99

Vendor#	Vendor Name	Class	Pay Code
F1400 ✓	FISHER HEALTHCARE	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 3002260		09/01/202	08/15/202	09/09/202			505.12	0.00	0.00	505.12 ✓

✓ 3504399		09/10/202	09/09/202	10/04/202			91.39	0.00	0.00	91.39 ✓
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✓ 3221022		09/15/202	08/26/202	10/05/202			16,140.01	0.00	0.00	16,140.01 ✓
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✓ 3285761		09/15/202	08/28/202	10/05/202			485.36	0.00	0.00	485.36 ✓
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✓ 3504398		09/15/202	09/09/202	10/05/202			132.99	0.00	0.00	132.99 ✓
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✓ 3376494		09/17/202	09/03/202	09/28/202			545.93	0.00	0.00	545.93 ✓
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✓ 3572173		09/17/202	09/11/202	10/08/202			282.84	0.00	0.00	282.84 ✓
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✓ 3603342		09/17/202	09/12/202	10/07/202			361.17	0.00	0.00	361.17 ✓
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✓ 3603341		09/17/202	09/12/202	10/07/202			1,677.64	0.00	0.00	1,677.64 ✓
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✓ 3603340		09/17/202	09/12/202	10/07/202			361.17	0.00	0.00	361.17 ✓
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
F1400	FISHER HEALTHCARE	20,583.62	0.00	0.00	20,583.62

Vendor#	Vendor Name	Class	Pay Code
17244 ✓	FREED INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 7EB963010003		09/09/202	09/04/202	10/04/202			2,494.80	0.00	0.00	2,494.80 ✓

Freed Group Plan 9/4 - 12/3/25

Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	
17244 FREED INC		2,494.80		0.00		0.00		2,494.80	
Vendor#	Vendor Name	Class		Pay Code					
11183	✓ FRONTIER								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ 090225		09/16/202	09/02/202	10/05/202		3,064.25	0.00	0.00	3,064.25 ✓
		phone							
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	
11183 FRONTIER		3,064.25		0.00		0.00		3,064.25	
Vendor#	Vendor Name	Class		Pay Code					
11149	✓ GBS ADMINISTRATORS, INC.								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ 708687476873		09/17/202	08/20/202	09/01/202		6,972.72	0.00	0.00	6,972.72 ✓
		Use Ins.							
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	
11149 GBS ADMINISTRATORS, INC		6,972.72		0.00		0.00		6,972.72	
Vendor#	Vendor Name	Class		Pay Code					
10956	✓ GETINGE USA SALES LLC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ 6992990851		09/17/202	09/08/202	09/17/202		68.08	0.00	0.00	68.08 ✓
		Getinge Catheter							
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	
10956 GETINGE USA SALES LLC		68.08		0.00		0.00		68.08	
Vendor#	Vendor Name	Class		Pay Code					
W1300	✓ GRAINGER			M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ 9626971387		09/17/202	09/02/202	09/27/202		145.27	0.00	0.00	145.27 ✓
✓ 9632053030		09/17/202	09/05/202	09/30/202		242.00	0.00	0.00	242.00 ✓
		Grab bar 24 in. Screws							
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	
W1300 GRAINGER		387.27		0.00		0.00		387.27	
Vendor#	Vendor Name	Class		Pay Code					
10804	✓ HEALTHCARE CODING & CONSULTING								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ 16138		09/17/202	03/31/202	04/30/202		177.50	0.00	0.00	177.50 ✓
		MARCH CHARGES							
✓ INV000164		09/17/202	05/01/202	06/30/202		142.50	0.00	0.00	142.50 ✓
✓ INV000270		09/17/202	06/01/202	07/01/202		82.50	0.00	0.00	82.50 ✓
		Pro 1st / pro SBC charges - May 2025							
		JUNE CHARGES							
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	
10804 HEALTHCARE CODING & CONSULTING		402.50		0.00		0.00		402.50	
Vendor#	Vendor Name	Class		Pay Code					
11285	✓ ITA RESOURCES INC								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ MMC092025		09/17/202	09/01/202	09/21/202		42,343.88	0.00	0.00	42,343.88 ✓
		SEPTEMBER PROF FEES							
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	
11285 ITA RESOURCES INC		42,343.88		0.00		0.00		42,343.88	
Vendor#	Vendor Name	Class		Pay Code					
14468	✓ LIFE SYSTEMS INTERNATIONAL								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
✓ N15335A		09/18/202	06/24/202	09/18/202		5,962.90	0.00	0.00	5,962.90 ✓
		Extended Care Warranty 24 months							
Vendor Totals: Number Name		Gross		Discount		No-Pay		Net	

14468	LIFE SYSTEMS INTERNATIONAL			5,962.90	0.00	0.00	5,962.90
Vendor#	Vendor Name	Class	Pay Code				
15200	MANAGED CARE PARTNERS INC.						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
6837		09/17/202	10/01/202	10/01/202			
	PRF FEES OCT 25						
Vendor Totals:	Number	Name					
	15200	MANAGED CARE PARTNERS INC.					
Vendor#	Vendor Name	Class	Pay Code				
M2178	MCKESSON MEDICAL SURGICAL INC						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
23939042		09/17/202	06/20/202	07/05/202			
24314740	Control UA 1 level	09/17/202	09/10/202	09/25/202			
24326274	PROB Collection Kit	09/17/202	09/11/202	09/26/202			
24338112	Curraige Assembly Proaver #39.34 Freight #40.00	09/17/202	09/15/202	09/30/202			
24338230	Parts mesh/ Cervical collar	09/17/202	09/15/202	09/30/202			
Vendor Totals:	Number	Name					
	M2178	MCKESSON MEDICAL SURGICAL INC					
Vendor#	Vendor Name	Class	Pay Code				
M2470	MEDLINE INDUSTRIES INC	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	
2385961347	Supplies	09/02/202	08/27/202	10/05/202			
2386836609	Suture / Gel ultrasound/wrap band	09/10/202	09/03/202	09/28/202			
2386836615	Suture Chromic Gut	09/10/202	09/03/202	09/28/202			
2387771676	DRD Insula pad	09/10/202	09/09/202	10/04/202			
2388063176	Swabs / WPT / Wipes / Ensure / Drapes / etc.	09/10/202	09/10/202	10/05/202			
2388063187	Omni Jug Suction Canister	09/10/202	09/10/202	10/05/202			
2388063175	Dressing Sheet	09/10/202	09/10/202	10/05/202			
2388063185	Sling / Binder / Splint / Catheter / etc.	09/10/202	09/10/202	10/05/202			
2388063174	Catheter	09/10/202	09/10/202	10/05/202			
2388063188	Suture nylon	09/10/202	09/10/202	10/05/202			
2348892509A	Credix - Trauze Sponge	09/15/202	09/15/202	10/09/202			
2388109310	Backdown Handsoap	09/17/202	09/10/202	10/05/202			
2388787959	Credix - Drape	09/17/202	09/15/202	10/05/202			
Vendor Totals:	Number	Name					
	M2470	MEDLINE INDUSTRIES INC					
Vendor#	Vendor Name	Class	Pay Code				
10536	MORRIS & DICKSON CO, LLC						

Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
10868		NOVA BIOMEDICAL				2,105.01	0.00	0.00	2,105.01		
Vendor#	Vendor Name		Class	Pay Code							
P2100	✓ PORT LAVACA WAVE		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 091225		09/17/202	09/12/202	09/12/202			45.00	0.00	0.00	45.00 ✓
	ANNUAL SUBSCRIPT FOR ADMIN										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
P2100		PORT LAVACA WAVE				45.00	0.00	0.00	45.00		
Vendor#	Vendor Name		Class	Pay Code							
12480	✓ PRO ENERGY PARTNERS LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 25080600		09/17/202	08/31/202	09/15/202			1,865.27	0.00	0.00	1,865.27 ✓
	Natural Gas										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
12480		PRO ENERGY PARTNERS LLC				1,865.27	0.00	0.00	1,865.27		
Vendor#	Vendor Name		Class	Pay Code							
01416	✓ GUIDELORTHO SALES COMPANY LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 9100074491		09/10/202	09/03/202	10/03/202			221.50	0.00	0.00	221.50 ✓
	✓ 9100075566		09/10/202	09/03/202	10/03/202			1,912.77	0.00	0.00	1,912.77 ✓
	✓ 9100080510		09/10/202	09/08/202	10/08/202			430.23	0.00	0.00	430.23 ✓
	✓ 9100083420		09/10/202	09/09/202	10/09/202			424.52	0.00	0.00	424.52 ✓
	MMS Pipex Tips Puka Biocione / 24 Hr Control Ortho Confidence / Affirmagen Supplies										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
01416		GUIDELORTHO SALES COMPANY LLC				2,989.02	0.00	0.00	2,989.02		
Vendor#	Vendor Name		Class	Pay Code							
11080	✓ RADSOURCE										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ PSI007101		09/17/202	09/12/202	10/07/202			1,791.67	0.00	0.00	1,791.67 ✓
	Item 10/12/25 - 11/11/25 Samsung 6080										
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							
11251	✓ RAPID PRINTING LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 302170		09/17/202	09/16/202	10/01/202			42.00	0.00	0.00	42.00 ✓
	✓ 302018		09/18/202	09/11/202	09/26/202			320.00	0.00	0.00	320.00 ✓
	Poster 24 x 36 Single Sided Print 4X6 Double sided post cards										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
11251		RAPID PRINTING LLC				362.00	0.00	0.00	362.00		
Vendor#	Vendor Name		Class	Pay Code							
11215	✓ RICHARD ARROYO-DIAZ		ICP								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 090425A		09/17/202	09/04/202	09/17/202			678.52	0.00	0.00	678.52 ✓
	Dep. into mmlc ope in error - Triwest Healthcare										
Vendor Totals: Number		Name				Gross	Discount	No-Pay	Net		
11215		RICHARD ARROYO-DIAZ				678.52	0.00	0.00	678.52		
Vendor#	Vendor Name		Class	Pay Code							
S1800	✓ SHERWIN WILLIAMS		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

✓	083125A		09/18/202	08/31/202	09/15/202		349.42	0.00	0.00	349.42	✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	S1800	SHERWIN WILLIAMS					349.42	0.00	0.00	349.42	
Vendor#	Vendor Name		Class		Pay Code						
10699	✓ SIGN AD, LTD.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	317542		09/17/202	09/16/202	09/26/202		425.00	0.00	0.00	425.00	✓
AD LEASE SPACE 092425-102125											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	10699	SIGN AD, LTD.					425.00	0.00	0.00	425.00	
Vendor#	Vendor Name		Class		Pay Code						
S2694	✓ STANFORD VACUUM SERVICE		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	866862		09/17/202	09/11/202	09/11/202		625.00	0.00	0.00	625.00	✓
GREASE TRAP SERVICE											
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net	
	S2694	STANFORD VACUUM SERVICE					625.00	0.00	0.00	625.00	
Vendor#	Vendor Name		Class		Pay Code						
S3940	✓ STERIS CORPORATION		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	14236619		09/15/202	08/26/202	10/05/202		48.65	0.00	0.00	48.65	✓
Vendor Totals: Number Name											
	S3940	STERIS CORPORATION					48.65	0.00	0.00	48.65	
Vendor#	Vendor Name		Class		Pay Code						
17248	✓ SUMMIT PAIN AND WELLNESS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	1301		09/16/202	09/12/202	10/05/202		2,840.00	0.00	0.00	2,840.00	✓
Vendor Totals: Number Name											
	17248	SUMMIT PAIN AND WELLNESS					2,840.00	0.00	0.00	2,840.00	
Vendor#	Vendor Name		Class		Pay Code						
14524	✓ SYSMEX AMERICA, INC.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	96065453		09/17/202	08/24/202	08/29/202		527.44	0.00	0.00	527.44	✓
Vendor Totals: Number Name											
	14524	SYSMEX AMERICA, INC.					527.44	0.00	0.00	527.44	
Vendor#	Vendor Name		Class		Pay Code						
10758	✓ TEXAS SELECT STAFFING, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	0025905		09/16/202	09/11/202	10/05/202		3,650.00	0.00	0.00	3,650.00	✓
Vendor Totals: Number Name											
	10758	TEXAS SELECT STAFFING, LLC					3,650.00	0.00	0.00	3,650.00	
Vendor#	Vendor Name		Class		Pay Code						
11067	✓ TRIZETTO PROVIDER SOLUTIONS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
✓	35FK092500		09/17/202	09/01/202	09/26/202		1,740.75	0.00	0.00	1,740.75	✓
Vendor Totals: Number Name											
	11067	TRIZETTO PROVIDER SOLUTIONS					1,740.75	0.00	0.00	1,740.75	
Vendor#	Vendor Name		Class		Pay Code						
C2510	✓ TRUBRIDGE		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	

✓ T2507171378A 09/16/202 07/17/202 10/05/202 73,654.44 0.00 0.00 73,654.44 ✓
Business Services N-Trust Fee Hospital
 Vendor Totals: Number Name Gross Discount No-Pay Net
 C2510 TRUBRIDGE 73,654.44 0.00 0.00 73,654.44

Vendor# Vendor Name Class Pay Code
 11001 ✓ ULINE

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 197393156 09/17/202 09/02/202 10/02/202 345.01 0.00 0.00 345.01 ✓

Medium Sorbent Roll 30X150
 Vendor Totals: Number Name Gross Discount No-Pay Net
 11001 ULINE 345.01 0.00 0.00 345.01

Vendor# Vendor Name Class Pay Code
 U1064 ✓ UNIFIRST HOLDINGS INC

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 2921068658 09/09/202 09/08/202 10/03/202 268.33 0.00 0.00 268.33 ✓
Uniforms
 ✓ 2921068482 09/17/202 09/04/202 09/29/202 201.60 0.00 0.00 201.60 ✓
 ENVIRO SERVICES UNIFORMS
 ✓ 2921068488 09/17/202 09/04/202 09/29/202 207.62 0.00 0.00 207.62 ✓
Laundry
 ✓ 2921068495 09/17/202 09/04/202 09/29/202 289.42 0.00 0.00 289.42 ✓
 PT UNIFORMS
 ✓ 2921068978 09/17/202 09/11/202 10/06/202 289.83 0.00 0.00 289.83 ✓
 SURGERY UNIFORM
 ✓ 2921068997 09/17/202 09/11/202 10/06/202 8,662.89 0.00 0.00 8,662.89 ✓
 PT UNIFORMS
 ✓ 2921068966 09/17/202 09/11/202 10/06/202 66.92 0.00 0.00 66.92 ✓
 MAINT UNIFORMS
 ✓ 2921068984 09/17/202 09/11/202 10/06/202 201.60 0.00 0.00 201.60 ✓
 EVS UNIFORMS
 ✓ 2921068960 09/17/202 09/11/202 10/06/202 3,321.61 0.00 0.00 3,321.61 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 U1064 UNIFIRST HOLDINGS INC 13,509.82 0.00 0.00 13,509.82

Vendor# Vendor Name Class Pay Code
 15444 ✓ VANDERBILT HEALTH

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ C100114245 09/16/202 09/10/202 10/09/202 815.12 0.00 0.00 815.12 ✓

Quartern Admin Fee True UP April - June 2025
 Vendor Totals: Number Name Gross Discount No-Pay Net
 15444 VANDERBILT HEALTH 815.12 0.00 0.00 815.12

Vendor# Vendor Name Class Pay Code
 V1056 ✓ VICTORIA AIR CONDITIONING LTD W

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 220346 09/17/202 09/05/202 09/05/202 415.00 0.00 0.00 415.00 ✓

8/20/25
 Vendor Totals: Number Name Gross Discount No-Pay Net
 V1056 VICTORIA AIR CONDITIONING LTD 415.00 0.00 0.00 415.00

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

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 25080131 09/17/202 08/31/202 09/17/202 40.00 0.00 0.00 40.00 ✓

8/29/25
 Vendor Totals: Number Name Gross Discount No-Pay Net
 V1471 VICTORIA RADIOWORKS, LLC 40.00 0.00 0.00 40.00

Grand Totals:

Gross
~~361,852.63~~

Discount
0.00

No-Pay
0.00

Net
~~361,852.63~~

359,836.90

APPROVED ON

SEP 18 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

361,852.63 +

257.11 -

1,758.62 -

359,836.90 *

359,836.90 *

Pg. 2. Removed Travel Reim. - incorrect amount

Pg. 7. Removed - Incorrect Bill to

RECEIVED BY THE
COUNTY AUDITOR ON

APPROVED ON

SEP 18 2025

SEP 18 2025

Vendor Totals: Number Name

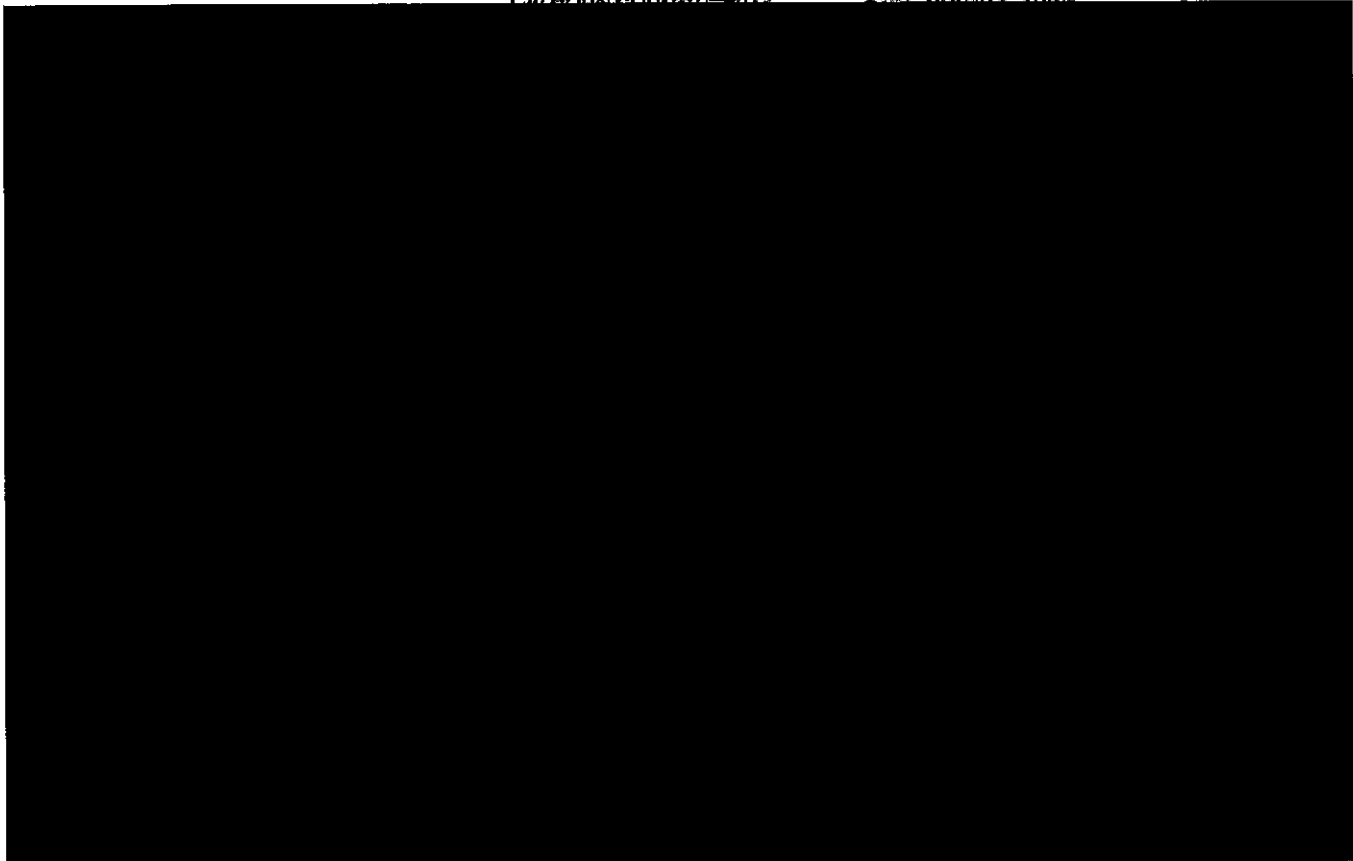
M2485 BAYER HEALTHCARE

Gross
3,803.54

Discount
0.00

No Pay
0.00

Net
3,803.54



Vendor# Vendor Name

10926 CAITLIN CLEVINGER

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay

091125A

08/18/202 09/11/202 09/11/202

Gross
276.11

Discount
0.00

No Pay
0.00

Net
276.11

Vendor Totals: Number

10926

Name

CAITLIN CLEVINGER

Gross
276.11

Discount
0.00

No Pay
0.00

Net
276.11

Travel Reimb for O&P 8/20/25



CITIBANK CORPORATE CARD

Account Statement

Commercial Card Account
ERIN CLEVENGER

Account Inquiries:

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

Account Number: XXXX-XXXX-XXXX-6228

Summary of Account Activity

Total Activity \$4,409.05

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

Not an Invoice. For your records only.

Credit Limit \$20,000
Cash Advance Limit \$5,000
Statement Closing Date 09/03/2025
Days in Billing Period 31

Transactions

Post Date	Trans Date	MCC	Reference Number	Description/Location	Amount
***** NOTICE MEMO ITEM(S) LISTED BELOW *****					
08/04	08/02	8999	55432885214201174460109	1 FAXAGE 303-991-6020 CO	80222 USA 75.42 ✓
08/05	08/04	5046	55546505217431965488298	2 TCS BASYS CONTROLS MIDDLETON WI	63562 USA 420.00 ✓
08/07	08/06	8699	82305095219500002256549	3 TEXAS ORGANIZATION OF ROUND ROCK TX	78664 USA 769.25 ✓
08/07	08/05	9399	05134375219800071430704	4 NPDR NPDR.HRSA.GOV ROCKVILLE MD	20652 USA 2.50 ✓
				N137301173	
08/11	08/09	4466	65506295221437147985589	5 GO2MARINE BELLINGHAM WA	98225 USA 34.07 CR ✓
08/14	08/13	5912	65436875226172262365364	6 IMPRIMSIX 603B LEDGEWOOD NJ	78227 USA 620.00 ✓
				1824819	
08/18	08/15	8734	55457375227191724009442	7 INTOXIMETERS INC SAINT LOUIS MO	63146 USA 170.00 ✓
08/19	08/17	3559	52704875230268849161807	8 CANDLEWOOD SUITES SAN ANTONIO TX	78227 USA 270.86 ✓
				312183	
				CHECK IN: 08/15/2025	
08/19	08/18	7361	12302025230003227666024	9 Indeed US125-02689147 Austin TX	78750 USA 33.27 CR ✓
08/19	08/18	7361	12302025230003227700021	10 Indeed US125-02937398 Austin TX	78750 USA 0.43 CR ✓
08/21	08/19	3695	55417415232449519358337	11 EMBASSY STES AUSTIN AUSTIN TX	78723 USA 162.71 ✓
				80213411	
				CHECK IN: 08/18/2025	
08/21	08/19	3559	52704875232270155123767	12 CANDLEWOOD SUITES SAN ANTONIO TX	78227 USA 270.86 ✓
				312182	
				CHECK IN: 08/18/2025	
08/21	08/20	9399	55800375232450152184166	13 TXDPS CRIME RECS AUSTIN TX	78752 USA 153.63 ✓
				PO 232807941336	
08/27	08/26	7399	82117555238500009271036	14 CIHQ 2025 SUMMIT MEXIA TX	76667 USA 960.00 ✓
08/27	08/26	7399	82117555238500009179205	15 CIHQ 2025 SUMMIT MEXIA TX	76667 USA 478.67 ✓

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-6228

Statement Closing Date

September 03, 2025

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXASERIN CLEVENGER
202 S ANN ST., STE A
PORT LAVACA TX 77979-4204Not an Invoice.
For your records only.

00010079643

Account: XXXX-XXXX-XXXX-6228

Transactions (con't)

Post Date	Trans Date	MCC	Reference Number	Description/Location	Amount	
✓ 09/03	09/02	9399	05134375246600068448013	16 NPDB NPDB.HRSA.GOV ROCKVILLE MD 20852 USA	✓ 42.50 ✓	"
✓ 09/03	09/02	9399	05134375246600068448195	17 NPDB NPDB.HRSA.GOV ROCKVILLE MD 20852 USA	✓ 2.50 ✓	40510000
✓ 09/03	09/02	9399	05134375246600068448278	18 NPDB NPDB.HRSA.GOV ROCKVILLE MD 20862 USA	✓ 2.50 ✓	"
✓ 09/03	09/03	8999	55432855246202314892187	19 FAXAGE 303-891-6020 CO 80222 USA	✓ 75.42 ✓	40510000
***** TOTAL AMOUNT OF MEMO ITEM(S): \$4,409.05						

1

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 Corp

Date:

9/4/2025

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	—		Faxage - Fax lines (July)			✓ 75.42
2	—		TCS Basis Controls - FOR OR			✓ 420.00
3			Temp Control			
4	—		Texas Organization (TORCH)	Austin, TX 9/8/25		✓ 769.25
5			Fall conference registration	9/11/25		
6			Erin Cewenger + Michelle Cumberland			
7	—		NPDB - 1 Doctor Enroll			✓ 2.50
8	—		GO 2 Marine - Cash Refund		CR	✓ 34.07
9			tax adjustment			
10	—	8/15-8/17/25 San Antonio, TX	Candlewood Suites - Hotel expense			✓ 270.86

Est. Freight

Est. Total Cost

TOTAL COST

NOTES:

Charges made to credit card

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

Dept. Director
Dir. Nursing
Dir. Clinical Services
CFO
Administrator

(2)

MEMORIAL MEDICAL CENTER PURCHASE ORDER

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

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

Vendor Name:

Citibank Corp

Date:

9/4/2005

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	—		Indeed - tax adjustment		(CR) ✓	33.27
2	—		Indeed - tax adjustment		(CR) ✓	0.43
3	—		Embassy Suites Austin	8/18 - 8/19/05	✓	162.71
4			Down Market hotel - TX Trauma Forum			
5	—		Intoximeters - dnc - Renewal Exam		✓	170.00
6			fee for instructors - Lab (Kim Resendez)			
7	—		Candlewood Suites - Hotel expense		✓	270.86
8			Kylie Taylor - ER (TNCC)	8/15 - 8/19/05 San Antonio, TX		
9	—		TX OPS - Credit purchase		✓	153.63
10			Criminal Hx - (HR + Credentialing)			

Est. Freight

Est. Total Cost

TOTAL COST

NOTES:

charges made to credit card

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

Dept. Director:
Dir. Nursing:
Dir. Clinical Services:
CFO:
Administrator:

3

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 Corp

Date:

9/4/2025

Vendor Address:

P.O. #

Vendor Phone #:

Account #

Vendor Fax #:

Initiated By:

Form # 9401

Date Required	Expense #	Department	Deliver To		
	number	Description	Unit Cost	Unit Meas.	Extended Cost
75-42 +		CIHQ Accreditation + Regulatory			✓ 960.00
420-00 +		Summit Bethann Biggs +	10/20 -	10/23/25	
710-25 +			Helotes, TX		
2-50 +		Brianne Atkinson Registration			
56-07 -		CIHQ HACCP Preparatory Course			✓ 478.67
270-86 +		+ Exam - Bethann Biggs +	10/20 -	10/23/25	
5-27 -			Helotes, TX		
0-43 -		NPDB - 17 Provider Renewals	2.50		✓ 42.50
152-71 +		NPDB - 1 Doctor Enroll			✓ 2.50
170-00 +		NPDB - 1 Doctor Enroll			✓ 2.50
270-86 +		Faxage - Fax lines (Aug)			✓ 75.42
153-63 +		Dexamethasone, IMOX			
950-00 +		Imprimis RX - 1mg/5mg/mL			✓ 620.00
475-67 +					
62-50 +					
2-50 +					
2-50 +					
75-42 +					
620-00 +					
4-600-05 0					

Est. Freight

Est. Total Cost

TOTAL COST

\$4,409.05

NOTES:

Charges made to Credit card

Contact:

Date:

Quoted By:

Buyer:

E.T.A.

Dept. Director

Dir. Nursing

Dir. Clinical Services

CFO

Administrator

McKESSON

STATEMENT

As of: 09/19/2025

Page: 002

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory:
Customer: 632536
Date: 09/20/2025

As of: 09/19/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 09/20/2025 ITEMS NOT PAID (✓)

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

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 742.25 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 09/23/2025,
Pay This Amount:

727.40 USD

If Paid After 09/23/2025,
Pay this Amount:

742.25 USD

Due If Paid On Time: ✓ 727.40
USD
Disc lost if paid late: 14.85
Due If Paid Late: ✓
USD 742.25

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

599.48 +
9.78 +
118.14 +
727.40 =

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 09/19/2025

Page: 001

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

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

OC: 8115
Customer INV SupplD:
Territory: 7001
Customer: 256342
Date: 09/20/2025

As of: 09/19/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 09/20/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS											
09/19/2025	09/23/2025	7591598929	241473398	115Invoice	5.53	276.46	✓	270.93	✓	7591598929	
09/19/2025	09/23/2025	7591598930	240855707	115Invoice	6.70	334.94	✓	328.24	✓	7591598930	
09/19/2025	09/23/2025	7591598931	241182462	115Invoice	0.01	0.32	✓	0.31	✓	7591598931	

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: 611.72 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 09/08/2025 591.81

If Paid By 09/23/2025,
Pay This Amount:

599.48 USD

If Paid After 09/23/2025,
Pay this Amount:

611.72 USD

Due If Paid On Time:

USD 599.48

Disc lost if paid late:

12.24

Due If Paid Late:

USD 611.72

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON**STATEMENT**

As of: 09/19/2025

Page: 001

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 820405
Date: 09/20/2025

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

As of: 09/19/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 PLEASE CHECK ANY
Date: 09/20/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 820405	HEB PHCY WHSE/MEM MED PHS										
09/19/2025	09/23/2025	7591209175	B2509-055-229332	115Invoices	0.20	9.98		9.78	✓	7591209175	

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

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

Subtotal: 9.98 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 101.03
09/15/2025

If Paid By 09/23/2025,
Pay This Amount:

9.78 USD

If Paid After 09/23/2025,
Pay this Amount:

9.98 USD

Due If Paid On Time:
USD

9.78 ✓

Disc lost if paid late:

0.20

Due If Paid Late:
USD

9.98

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON**STATEMENT**

As of: 09/19/2025

Page: 001

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

Company: 8000

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: 7001
Customer: 835434
Date: 09/20/2025As of: 09/19/2025 Page: 001
Mail to: Comp: 8000AMT DUE REMITTED VIA ACH DEBIT
Statement for information onlyCust: 835434 PLEASE CHECK ANY
Date: 09/20/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835434 CVS PHCY 8923/MEM MC PHS											
09/17/2025	09/23/2025	7591062806	4410425	115Invoice	2.38	118.86	✓	116.48	✓	7591062806	
09/17/2025	09/23/2025	7591062807	4410425	115Invoice	0.03	1.68	✓	1.66	✓	7591062807	

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: 120.55 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/04/2025 111.70

If Paid By 09/23/2025,
Pay This Amount:

118.14 USD

If Paid After 09/23/2025,
Pay this Amount:

120.65 USD

Due If Paid On Time:
USD

118.14

Disc lost if paid late:

2.41

Due If Paid Late:
USD

120.55

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

For AR Inquiries please contact 800-867-0333



STATEMENT

Statement Number: 70564601
Date: 09-19-2025

1 of 1

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

Customer Number

100586356 / 100586356

Terms

Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	37.06
Past Due:	0.00
Total Due:	37.06
Account Balance:	37.06

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
09-15-2025	09-26-2025	3226858572	7010584566	Invoice	8.02		0.00	8.02✓
09-15-2025	09-26-2025	3226858574	7010573142	Invoice	0.57		0.00	0.57✓
09-18-2025	09-26-2025	3227071990	7010579890	Invoice	2.69		0.00	2.69✓
09-18-2025	09-26-2025	3227351239	7010594081	Invoice	25.78		0.00	25.78✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
37.06	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders

Due Date	Amount
09-26-2025	37.06
Total Due:	37.06

✓ COB



STATEMENT

Statement Number: 70548366
Date: 09-19-2025

1 of 1

Served By: AMERISOURCEBERGEN DRUG CORP
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101DEA: RA0289276
866-451-9655Customer: WALGREENS #12494 340B
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2509 ✓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:	228.59
Past Due:	0.00
Total Due:	228.59
Account Balance:	228.59

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
09-15-2025	09-26-2025	3226874685	7010558473	Invoice	23.89		0.00	✓ 23.89 ✓
09-15-2025	09-26-2025	3226874686	7010584646	Invoice	68.30		0.00	✓ 68.30 ✓
09-15-2025	09-26-2025	3226874687	7010571088	Invoice	56.53		0.00	✓ 56.53 ✓
09-17-2025	09-26-2025	3227175270	7010580541	Invoice	1.46		0.00	✓ 1.46 ✓
09-18-2025	09-26-2025	3227308365	7010589545	Invoice	31.16		0.00	✓ 31.16 ✓
09-19-2025	09-26-2025	3227444884	7010593199	Invoice	47.25		0.00	✓ 47.25 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
228.59	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
09-19-2025	(428.26)

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders

Due Date	Amount
09-26-2025	228.59
Total Due:	228.59

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"	1
☐ "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★ 941 #
☐ "IF FEDERAL TAX DEPOSIT ENTER 1"	1
☐ "ENTER 2-DIGIT TAX FILING YEAR"	★ 25
☐ "ENTER 2-DIGIT TAX FILING ENDING MONTH"	★ 09
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"	★ \$ 117,925.68 #
"1 TO CONFIRM"	1
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0 \$ 61,913.44 #
"ENTER W/CENTS AMOUNT OF MEDICARE"	\$ 14,479.80 #
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"	\$ 41,532.44 #
☐ "6-DIGIT SETTLEMENT DATE"	★
"1 TO CONFIRM"	1
☐ ACKNOWLEDGEMENT NUMBER	

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

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED

3/18/2014

PAY PERIOD: BEGIN
 PAY PERIOD: END
 PAY DATE:

9/5/2025
 9/18/2025
 9/26/2025

ENTER VOID CKS AS NEGATIVE NUMBERS

		VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
GROSS PAY:	\$ 535,626.31			\$ -		\$ 535,626.31
DEDUCTIONS:						
A/R	\$ 642.03					\$ 642.03
ADVANC						\$ -
BOOTS						\$ -
MUTUAL-CRITICAL ILLNESS						\$ -
MUTUAL-ACCIDENT						\$ -
IRS TAX						\$ -
MUTUAL-SHORT-TERM-DIS						\$ -
MUTUAL VISION	\$ 802.48					\$ 802.48
CAFÉ-D	\$ 1,208.19					\$ 1,208.19
CAFÉ-H	\$ 29,216.10					\$ 29,216.10
	\$ -					\$ -
	\$ -					\$ -
CAFÉ-P						\$ -
CANCER						\$ -
CHILD	\$ -					\$ -
CLINIC						\$ -
COMBIN	\$ 228.60					\$ 228.60
CREDUN	\$ -					\$ -
DENTAL	\$ -					\$ -
DEP-LF						\$ -
MUTUAL TERM LIFE	\$ 1,159.93					\$ 1,159.93
MUTUAL HOSP INDEM	\$ 563.50					\$ 563.50
FED TAX	\$ 41,532.44					\$ 41,532.44
FICA-M	\$ 7,239.90					\$ 7,239.90
FICA-D	\$ 30,956.72					\$ 30,956.72
FICA-M ADDITIONAL						\$ -
FIRST C						\$ -
FLEX S	\$ 4,202.10					\$ 4,202.10
FLX-FE	\$ -					\$ -
GIFT S	\$ 57.23					\$ 57.23
MUTUAL CRITICAL ILLNESS	\$ 878.88					\$ 878.88
MUTUAL ACCIDENT	\$ 591.88					\$ 591.88
MUTUAL SHORT TERM DIS	\$ 1,802.98					\$ 1,802.98
LEGAL	\$ 922.45					\$ 922.45
OTHER	\$ 4,411.73					\$ 4,411.73
NATIONAL FARM LIFE	\$ 1,277.74					\$ 1,277.74
MED SURCHARGE						\$ -
Blank						\$ -
RELAY						\$ -
REPAY						\$ -
STONEDF	\$ 895.00					\$ 895.00
STONE						\$ -
STONE 2						\$ -
STUDEN						\$ -
TSA-R	\$ 36,513.59					\$ 36,513.59
UW/HOS	\$ -					\$ -
TOTAL DEDUCTIONS:	\$ 165,103.47	\$ -	\$ -	\$ -	\$ -	\$ 165,103.47
NET PAY:	\$ 370,522.84	\$ -	\$ -	\$ -	\$ -	\$ 370,522.84
TOTAL CAFÉ 125 PLAN:	\$ 36,323.87	Less Exempt:				
TAXABLE PAY:	\$ 489,302.44	\$ 489,302.44				

		CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45%	\$ 7,239.89		
FICA - MED (EE)	1.45%	\$ 7,239.89	\$ 7,239.90	\$ (0.01)
FICA - SOC SEC (ER)	0.20%	\$ 30,956.75		
FICA - SOC SEC (EE)	0.20%	\$ 30,956.75	\$ 30,956.72	\$ 0.03
FED WITHHOLDING		\$ 41,532.44	\$ 41,532.44	

Employees over FICA-SS Cap:

Exempt Amt:

Paycode S - Employee Reimb.:

TOTAL: \$ -

TAX DEPOSIT:		\$	117,925.72	\$	117,925.68	
FICA - MEDICARE	2.90%	\$	14,479.78		\$14,479.80	
FICA - SOCIAL SECURITY	12.40%	\$	61,913.50		\$61,913.44	PREPARED BY:
FED WITHHOLDING		\$	41,532.44		\$41,532.44	PREPARED DATE:
TOTAL TAX:		\$	117,925.72		\$117,925.68	\$ 0.04

PREPARED BY:

Sariah Rubio

PREPARED DATE:

9/22/2025

Run Date: 09/22/25
Time: 09:01

MEMORIAL MEDICAL CENTER
Payroll Register { Bi-Weekly }
Pay Period 09/05/25 - 09/18/25 Run# 1

Page 108
P2REG

Final Summary

*-- Pay Code Summary						*-- Deductions Summary			
PayCd	Description	Hrs	OT	SH	WB	HO	CB	Gross	Code Amount
1	REGULAR PAY-S1	9573.25	N	N	N			227885.74	A/R 452.03 A/R2 190.00 A/R3
1	REGULAR PAY-S1	2023.25	N	N	N	N		104283.27	ADVANC AWARDS BCBSVI
1	REGULAR PAY-S1	2.00	N	N	N	Y		105.00	BOOTS CAFE H CAFE-1
1	REGULAR PAY-S1	194.25	Y	N	N			6986.92	CAFE-2 CAFE-3 CAFE-4
2	REGULAR PAY-S2	2478.00	N	N	N			68968.19	CAFE-5 CAFE-C CAFE-D 1208.19 ✓
2	REGULAR PAY-S2	107.75	Y	N	N			4422.15	CAFE-F CAFE-H 29216.10 CAFE-I
3	REGULAR PAY-S3	1501.00	N	N	N			52481.17	CAFE-L CAFE-P CANCER
3	REGULAR PAY-S3	151.50	Y	N	N			7580.69	CHILD CLINIC COMBIN 228.60 ✓
4	CALL BACK PAY	14.50	N	1	N	N	Y	670.10	CREDUN DD ADV DENTAL
4	CALL BACK PAY	4.00	N	2	N	N	Y	172.00	DEP-LF DIS-LF EAT
4	CALL BACK PAY	4.50	N	3	N	N	Y	294.33	EATCSH 260.00 EEDTAX 41532.44 FICA-M 7239.90 ✓
4	CALL BACK PAY	1.00	Y	1	N	N	Y	42.53	FICA-O 30956.72 FIRSTC FLEX S 3730.10 ✓
C	CALL PAY	2263.25	N	1	N	N		4526.50	FLX FE FORT D FUTA
D	DOUBLE TIME	11.25	N	1	N	N		1002.39	GIFT S 57.23 GRANT GRP-IN
D	DOUBLE TIME	1.75	Y	1	N	N		78.44	GTL HCSP-I HSA 472.00 ✓
E	EXTRA WAGES		N	N	N	N		12799.10	ID TFT JRSTAX LEAF
E	EXTRA WAGES		N	1	N	N	N	1915.00	LEGAL 221.95 MASA 700.50 MEALS 4151.73 ✓
F	FUNERAL LEAVE	16.00	N	1	N	N		553.76	METVIS MISC MISC/
K	EXTENDED-ILLNESS-BANK	368.00	N	1	N	N		12863.14	MMCSHR MOORCC 591.88 MOOILL 878.68 ✓
P	PAID-TIME-OFF	116.50	N		N	N	N	4185.39	MOOIND 563.50 MOOLIF 1159.93 MOOSTD 1802.98 ✓
P	PAID-TIME-OFF	784.25	N	1	N	N		23446.56	MOOVIS 802.48 MATFML 1277.74 OTHER
X	CALL PAY 2	94.90	N	1	N	N		188.00	PHI PHI+++ PR FIN
Z	CALL PAY 3	72.00	N	1	N	N		216.00	RELAY REPAY SAMS
C	PHONE & DATA		N		N	N	N	40.00	SCRUBS SIGNON ST-TX
									STONDF 895.00 STONE STONE2
									STUDEN SUNACC SUNILL
									SUNIND SUNLIF SUNSTD
									SUNVIS SURCHG TSA-1
									TSA-2 TSA-C TSA-P
									TSA-R 36513.59 TUTION UNIFOR
									UN/HQS

----- Grand Totals: 19792.00 ----- { Gross: 535626.31 ✓ Deductions: 165103.47 ✓ Net: 370522.84 ✓
Checks Count:- FT 199 PT 12 Other 43 Female 230 Male 23 Credit OverAmt 15 ZeroNet Term Total: 253 }

CCO
9/22/25

Gracie Archer

From: cclevenger@mmcportlavaca.com (Caitlin Clevenger)
<cclevenger@mmcportlavaca.com>
Sent: Monday, September 22, 2025 9:30 AM
To: Gracie Archer
Cc: Emily Vick; Michelle Cumberland
Subject: FW: Upcoming Stop Loss Contract and Year-End Deadlines

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

Hi Gracie,

Please see email thread below. I am going to submit an estimate of \$60,000.00 for the final register from 90 degrees to be sent to court on 9/23/25. Will this email suffice as my submission?

Thank you,

Caitlin

From: Caron Bradley [mailto:Caron.Bradley@90degreebenefits.com]
Sent: Friday, September 19, 2025 11:10 AM
To: Caitlin Clevenger <cclevenger@mmcportlavaca.com>
Cc: Michelle Cumberland <mcumberland@mmcportlavaca.com>; Candace Amaro <candace.amaro@90degreebenefits.com>
Subject: RE: Upcoming Stop Loss Contract and Year-End Deadlines

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

Hi Caitlin,

I wanted to follow up on our email exchange below. The team has been working through the inventory, and as of today, we have about \$32K in paid claims. There are only 25 more claims left in the inventory, which the team will continue to work on over the weekend.

If I had to provide a rough estimate, I'd say Monday's check register will likely not exceed \$50K. I might be estimating a little high, but I wanted to give you the best approximation we have for this week.

Please let me know if you need anything further.

Respectfully,



A Turn For The Better

San Antonio

Caron Bradley
Account Executive

Business: 210.348.7300
Direct: 210.442.4636
Fax: 806.698.5852
Cell: 210.273.5515
Toll Free: 800.747.9446
Caron.Bradley@90degreebenefits.com

11467 Huebner Rd, Suite 300
San Antonio, TX 78230

90DegreeBenefits.com

From: Caitlin Clevenger <cclevenger@mmcportlavaca.com>
Sent: Monday, September 15, 2025 8:52 AM
To: Caron Bradley <Caron.Bradley@90degreebenefits.com>
Subject: RE: Upcoming Stop Loss Contract and Year-End Deadlines

Okay perfect, thank you!

From: Caron Bradley [<mailto:Caron.Bradley@90degreebenefits.com>]
Sent: Monday, September 15, 2025 8:50 AM
To: Caitlin Clevenger <cclevenger@mmcportlavaca.com>; Michelle Cumberland <mcumberland@mmcportlavaca.com>
Cc: Candace Amaro <candace.amaro@90degreebenefits.com>; samanthal@healthsure.com
Subject: RE: Upcoming Stop Loss Contract and Year-End Deadlines

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

Hi Caitlin, good morning.

Yes, we would be happy to do this. Thank you for the information.

Sincerely,



A Turn For The Better

San Antonio

Caron Bradley
Account Executive

Business: 210.348.7300
Direct: 210.442.4636
Fax: 806.698.5852
Cell: 210.273.5515
Toll Free: 800.747.9446
Caron.Bradley@90degreebenefits.com

11467 Huebner Rd, Suite 300
San Antonio, TX 78230

90DegreeBenefits.com

From: Caitlin Clevenger <cclevenger@mmcporthlavaca.com>
Sent: Monday, September 15, 2025 8:43 AM
To: Caron Bradley <Caron.Bradley@90degreebenefits.com>; Michelle Cumberland <mcumberland@mmcporthlavaca.com>
Cc: Candace Amaro <candace.amaro@90degreebenefits.com>; samanthal@healthsure.com
Subject: RE: Upcoming Stop Loss Contract and Year-End Deadlines

*****Security Note: EXTERNAL EMAIL - Please exercise caution and DO NOT open attachments or click on links from unknown or unexpected emails.

Good morning,

As you know, Memorial Medical Center cannot legally release payment before court approval. To ensure we send payment on time, please include as many claims as possible on the register to be sent on 9/22/25. Would it be possible to get an estimate for the amount of the final register to be sent on the 22nd as well so we can submit that to court? If we can get that to them then we will be able to process the final register payment as long it does not exceed the estimated amount sent to court. Please advise.

Thank you,

Caitlin Clevenger

From: Caron Bradley [<mailto:Caron.Bradley@90degreebenefits.com>]
Sent: Friday, September 12, 2025 5:36 PM
To: Caitlin Clevenger <cclevenger@mmcporthlavaca.com>; Michelle Cumberland <mcumberland@mmcporthlavaca.com>
Cc: Candace Amaro <candace.amaro@90degreebenefits.com>; samanthal@healthsure.com
Subject: Upcoming Stop Loss Contract and Year-End Deadlines

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.

Hello,

This is a reminder that your current stop loss contract is set to end on **September 30, 2025**.

We will be running the final plan year register on **Thursday, September 25th**. In order to ensure timely processing and submission under the current stop loss contract, all **claim approvals**—including those for the **year-end register and any outstanding prior registers**—must be received in our office no later than **9:00 AM on Monday, September 29, 2025**.

Sincerely,



A Turn For The Better

San Antonio

Caron Bradley
Account Executive

Business: 210.348.7300
Direct: 210.442.4636
Fax: 806.698.5852
Cell: 210.273.5515
Toll Free: 800.747.9446
Caron.Bradley@90degreebenefits.com

11467 Huebner Rd, Suite 300
San Antonio, TX 78230

90DegreeBenefits.com

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8558 76360 8 21 1 2025 192091528 0 7/14/2025 \$20,180.00 1 LIBERTY DIALYSIS VICTORIA P 465 [REDACTED] HM F 6/1/2025 6/30/2025 262438451
\$20,530.00

CCJ
9/22/25

APPROVED ON
SEP 22 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

5966 76160 3 21 1 2025 225001309 0 8/22/2025 520.861.00 1 LIBERTY DIALYSIS VICTORIA P 455 0 7/1/2025 7/31/2025 302618451

CCJ
9/22/25

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

6197	76154	1	18	0	2025	11000111	1000	9/15/2025	\$20.55	1	THU PHYSICIAN ASSOCIATES, PLLC	P	177	Q	OV	T	4/24/2025	4/24/2025	30052070
6198	76151	1	1	0	2025	114001013	0	9/15/2025	\$13,443.56	1	THU SCOPES MANAGEMENT SERVICE LLC	P	512	Q	PCS	F	4/24/2025	9/7/2025	40431424
6199	76111	2	30	0	2025	114000022	0	9/15/2025	\$76.88	1	COMMUNITY PATHOLOGY ASSOCIATES	P	185	Q	LAB	F	7/29/2025	7/29/2025	760421006
6200	76111	1	25	0	2025	114001040	0	9/15/2025	\$6,714.47	1	CLINIC HEALTHCARE SYSTEM	P	702	Q	ABO	F	8/18/2025	8/18/2025	621754440
6201	76111	1	43	0	2025	114001041	0	9/15/2025	\$9,481.68	1	CLINIC HEALTHCARE SYSTEM	P	406	Q	ER	F	8/18/2025	8/18/2025	621754440
6202	76111	1	78	0	2025	114001041	0	9/15/2025	\$27.18	1	CIGNA HEALTH AND LIFE INSURANCE COMPANY	P	846	Q	DWNC	F	7/8/2025	7/8/2025	551811071
6203	76151	1	78	0	2025	114001041	0	9/15/2025	\$43.51	1	CITIZENS MEDICAL PROFESSIONALS	P	177	Q	TELS	F	4/14/2025	4/14/2025	741341710
6204	76151	1	42	1	2025	114001041	0	9/15/2025	\$54.80	1	HOUSTON CARDIOVASCULAR ASSOCIATES LLC	P	351	Q	DV	F	8/15/2025	8/15/2025	741341710
6205	76151	1	8	0	2025	114001041	0	9/15/2025	\$65.85	1	PORT LAVACA CLINIC ASSOCIATES	P	277	Q	TS	F	8/15/2025	8/15/2025	741341710
6206	76151	1	79	0	2025	114001041	0	9/15/2025	\$40.69	1	VICTORIA E.O. LLC	P	406	Q	DV	F	8/15/2025	8/15/2025	741341710
6207	76151	1	79	0	2025	114001041	0	9/15/2025	\$349.26	1	ESS OF PORT LAVACA LLC	P	189	Q	END	F	7/11/2025	7/11/2025	615248956
6208	76151	1	42	1	2025	114001041	0	9/15/2025	\$140.28	1	ESS OF PORT LAVACA LLC	P	177	Q	END	F	7/11/2025	7/11/2025	615248956
6209	76151	1	76	0	2025	114001041	0	9/15/2025	\$158.24	1	THU PHYSICIAN ASSOCIATES PLLC	P	177	Q	END	F	7/11/2025	7/11/2025	615248956
6210	76151	1	87	0	2025	114001041	0	9/15/2025	\$171.83	1	PORT LAVACA CLINIC ASSOCIATES	P	189	Q	END	F	7/11/2025	7/11/2025	615248956
6211	76151	1	29	0	2025	114001041	0	9/15/2025	\$260.08	1	SUNLETON ASSOCIATES PA	P	189	Q	END	F	7/11/2025	7/11/2025	615248956
6212	76151	1	29	0	2025	114001041	0	9/15/2025	\$341.92	1	THU PHYSICIAN ASSOCIATES, PLLC	P	451	Q	END	F	7/11/2025	7/11/2025	615248956
6213	76151	1	72	0	2025	114001041	0	9/15/2025	\$487.28	1	CITIZENS MEDICAL CENTER	P	386	Q	END	F	7/11/2025	7/11/2025	615248956
6214	76151	1	70	0	2025	114001041	0	9/15/2025	\$18.10	1	PORT LAVACA CLINIC	P	728	Q	END	F	7/11/2025	7/11/2025	615248956
6215	76151	1	35	0	2025	114001041	0	9/15/2025	\$112.08	1	US ANESTHESIA PARTNERS OF TEXAS PA	P	176	Q	END	F	7/11/2025	7/11/2025	615248956
6216	76151	1	35	0	2025	114001041	0	9/15/2025	\$112.08	1	US ANESTHESIA PARTNERS OF TEXAS PA	P	176	Q	END	F	7/11/2025	7/11/2025	615248956
6217	76151	1	35	0	2025	114001041	0	9/15/2025	\$172.35	1	THU PHYSICIAN ASSOCIATES, PLLC	P	457	Q	END	F	7/11/2025	7/11/2025	615248956
6218	76151	1	35	0	2025	114001041	0	9/15/2025	\$228.23	1	THU PHYSICIAN ASSOCIATES, PLLC	P	188	Q	END	F	7/11/2025	7/11/2025	615248956
6219	76151	1	35	0	2025	114001041	0	9/15/2025	\$808.75	1	PORT LAVACA CLINIC	P	372	Q	END	F	7/11/2025	7/11/2025	615248956
6220	76151	1	35	0	2025	114001041	0	9/15/2025	\$690.06	1	THU PHYSICIAN ASSOCIATES, PLLC	P	188	Q	END	F	7/11/2025	7/11/2025	615248956
6221	76151	1	85	0	2025	114001041	0	9/15/2025	\$1,304.22	1	THU PHYSICIAN ASSOCIATES, PLLC	P	188	Q	END	F	7/11/2025	7/11/2025	615248956
6222	76151	1	68	0	2025	114001041	0	9/15/2025	\$40.33	1	SUNLETON ASSOCIATES PA	P	181	Q	END	F	7/11/2025	7/11/2025	615248956
6223	76151	1	124	0	2025	114001041	0	9/15/2025	\$95.89	1	SCOTT P. STEIN, D.O., P.A.	P	457	Q	END	F	7/11/2025	7/11/2025	615248956
6224	76151	1	38	0	2025	114001041	0	9/15/2025	\$61.99	1	SUNLETON ASSOCIATES PA	P	181	Q	END	F	7/11/2025	7/11/2025	615248956
6225	76151	1	132	0	2025	114001041	0	9/15/2025	\$68.89	1	PORT LAVACA CLINIC ASSOCIATES	P	360	Q	END	F	7/11/2025	7/11/2025	615248956
6226	76151	1	120	1	2025	114001041	0	9/15/2025	\$76.71	1	HEALTHWAY COLORADO BEHAVIORAL HEALTH SERV	P	752	Q	END	F	7/11/2025	7/11/2025	615248956
6227	76151	1	71	1	2025	114001041	0	9/15/2025	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	Q	END	F	7/11/2025	7/11/2025	615248956
6228	76151	1	71	1	2025	114001041	0	9/15/2025	\$149.26	1	ESS OF PORT LAVACA LLC	P	189	Q	END	F	7/11/2025	7/11/2025	615248956
6229	76151	1	124	1	2025	114001041	0	9/15/2025	\$148.24	1	ESS OF PORT LAVACA LLC	P	189	Q	END	F	7/11/2025	7/11/2025	615248956
6230	76151	1	32	1	2025	114001041	0	9/15/2025	\$207.99	1	VICTORIA VEM AND SURGERY CLINIC	P	451	Q	END	F	7/11/2025	7/11/2025	615248956
6231	76151	1	114	0	2025	114001041	0	9/15/2025	\$2,789.00	1	VICTORIA EYE CENTER	P	431	Q	END	F	7/11/2025	7/11/2025	615248956
6232	76151	1	35	0	2025	114001041	0	9/15/2025	\$165.70	1	THU PHYSICIAN ASSOCIATES, PLLC	P	188	Q	END	F	7/11/2025	7/11/2025	615248956
6233	76151	1	44	0	2025	114001041	0	9/15/2025	\$1,019.83	1	HOUSTON METRODIST SUGAR LAND HOSPITAL	P	434	Q	END	F	7/11/2025	7/11/2025	615248956
6234	76151	1	44	0	2025	114001041	0	9/15/2025	\$172.84	1	THU PHYSICIAN ASSOCIATES, PLLC	P	752	Q	END	F	7/11/2025	7/11/2025	615248956
6235	76151	1	5	0	2025	114001041	0	9/15/2025	\$311.74	1	SOUTH TEXAS AMBULATORY SURGERY CENTER	P	493	Q	END	F	7/11/2025	7/11/2025	615248956
6236	76151	1	16	0	2025	114001041	0	9/15/2025	\$1,469.24	1	CLINIC HEALTHCARE SYSTEM	P	756	Q	END	F	7/11/2025	7/11/2025	615248956
6237	76151	1	16	0	2025	114001041	0	9/15/2025	\$70,891.46	1	CLINIC HEALTHCARE SYSTEM	P	756	Q	END	F	7/11/2025	7/11/2025	615248956

TOTAL CHECKS \$70,891.46
TOTAL VOIDS (\$734.55)
TOTAL TO FUND \$70,156.91

CCJ
9/22/25

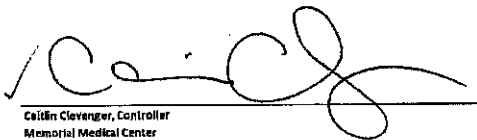
APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

**MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- Sep 15, 2025 - Sep 21, 2025**

Date	Bank Description	MMC Notes	Amount	CPA "Handwritten" Check #
9/19/2025	PAY PLUS ACHTrans 89066975 101000697922705 P	- 3rd Party Payor Fee	491.00	901885
9/19/2025	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	428.26	901886
9/16/2025	PAY PLUS ACHTrans 88854850 101000696730478 P	- 3rd Party Payor Fee	166.87	901887
9/17/2025	PAY PLUS ACHTrans 88548495 101000694991399 P	- 3rd Party Payor Fee	155.17	901888
9/16/2025	PAY PLUS ACHTrans 88360533 101000693516238 P	- 3rd Party Payor Fee	35.57	901889
9/16/2025	MCKESSON DRUG AUTO ACH ACH06685714 910000133	- 340B Drug Program Expense	101.03	901890
9/15/2025	PAY PLUS ACHTrans 88091237 101000691922842 P	- 3rd Party Payor Fee	18.27	901891
9/15/2025	TEXAS COUNTY DRS RECEIVABLE 0419 21000026519	- Retirement Funding	266,981.45	901892
9/15/2025	IRS USA TAXPYMT 270565894288724 6103601015873	- Payroll Taxes	117,354.35	901893
9/15/2025	FDMS FDMS PYMT 052-1743549-000 4100012722587	- Credit Card Machine Lease Fee	.80	901894
9/15/2025	FDMS FDMS PYMT 052-1743547-000 4100012722403	- Credit Card Machine Lease Fee	40.03	901895
9/15/2025	FDMS FDMS PYMT 052-2100911-000 4100012723080	- Credit Card Machine Lease Fee	45.64	901896
9/15/2025	FDMS FDMS PYMT 052-1737276-000 410001272337	- Credit Card Machine Lease Fee	120.08	901897


Caitlin Clevenger, Controller
Memorial Medical Center

PROSPERITY BANK

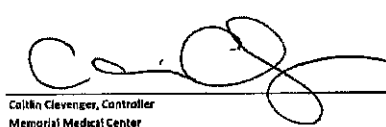
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS

September 22, 2025

*Approved on 9.17.25
**Approved on 9.18.25
***Approved on 9.13.25

386,017.80

Date	Description	MMC Notes	Amount
September 22, 2025			386,017.80 +
			428.26 -
			101.03 -
			117,354.35 -
			1,152.70 +
			1,152.70 -
			0.00 +


Caitlin Clevenger, Controller
Memorial Medical Center

September 22, 2025

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

pay plus
491.00 +
166.87 +
155.17 +
35.57 +
18.27 +
866.88 +

Lease Fee
80.06 +
40.03 +
45.64 +
120.09 +
285.82 +

866.88 +
285.82 +
1,152.70 +

Plan	Start Date	EE Per Pay Cost	ER Per Pay Cost
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$30.00	\$25.00
2025 Heath Equity Health Savings Account	2/1/2025	\$5.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$137.00	\$25.00
2025 Heath Equity Health Savings Account	9/1/2025	\$10.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$25.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	3/1/2025	\$5.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$50.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$25.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$175.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	9/1/2025	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$50.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$10.00	\$25.00
		\$522.00	\$525.00
Total		\$1,047.00	

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 18 2025

MEMORIAL MEDICAL CENTER

09/18/2025

10:55

CALHOUN COUNTY, TEXAS

AP Open Invoice List

Due Dates Through: 10/10/2025

0
ap_open_invoice.template

Vendor# / Vendor Name

Class Pay Code

11836 ✓ GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓ 091025B		09/17/202	09/10/202	10/10/202			74,892.30	0.00	0.00	74,892.30	✓
✓ 091025	INS amt dep. into mmmc opt in error	09/17/202	09/10/202	10/10/202			28,161.86	0.00	0.00	28,161.86	✓
✓ 091025A		09/17/202	09/10/202	10/10/202			508.33	0.00	0.00	508.33	✓
✓ 091125A		09/17/202	09/11/202	10/10/202			395.08	0.00	0.00	395.08	✓
✓ 091125		09/17/202	09/11/202	10/10/202			55,737.79	0.00	0.00	55,737.79	✓
✓ 091225		09/17/202	09/12/202	10/10/202			40.25	0.00	0.00	40.25	✓
✓ 091625		09/17/202	09/16/202	10/10/202			1,147.69	0.00	0.00	1,147.69	✓
✓ 091625B		09/17/202	09/16/202	10/10/202			504.90	0.00	0.00	504.90	✓
✓ 091625A		09/17/202	09/16/202	10/10/202			1,462.17	0.00	0.00	1,462.17	✓

Vendor Totals: Number Name

11836 GOLDENCREEK HEALTHCARE

Gross Discount No-Pay Net
162,850.37 0.00 0.00 162,850.37

Report Summary

Grand Totals:

Gross
162,850.37

Discount
0.00

No-Pay
0.00

Net
162,850.37

APPROVED ON

SEP 18 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 18 2025

MEMORIAL MEDICAL CENTER

09/18/2025

10:56

CALHOUN COUNTY, TEXAS

AP Open Invoice List

Due Dates Through: 10/10/2025

0
ap_open_invoice.template

Vendor# Vendor Name

Class Pay Code

13004 ✓ TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓ 091025		09/17/202	09/10/202	10/10/202			4,346.83	0.00	0.00	4,346.83	✓
✓ 091025A	INS. pmt. dep. into mmc opt. in error	09/17/202	09/10/202	10/10/202			6,135.37	0.00	0.00	6,135.37	✓
✓ 091025B		09/17/202	09/10/202	10/10/202			12,326.82	0.00	0.00	12,326.82	✓
✓ 091125		09/17/202	09/11/202	10/10/202			6,760.00	0.00	0.00	6,760.00	✓

Vendor Totals: Number Name

13004 TUSCANY VILLAGE

Gross	Discount	No-Pay	Net
29,568.82	0.00	0.00	29,568.82

Report Summary

Grand Totals:

Gross
29,568.82

Discount
0.00

No-Pay
0.00

Net
29,568.82

APPROVED ON

SEP 18 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

SEP 18 2025

MEMORIAL MEDICAL CENTER

09/18/2025

10:54

AP Open Invoice List

ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Due Dates Through: 10/10/2025

Vendor# Vendor Name

Class Pay Code

12792 ✓ LAVACA BAY NURSING AND REHAB

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 091225		09/17/202	09/12/202	10/10/202			11,396.55	0.00	0.00	11,396.55 ✓
✓ 091225A	INS. pmt dep. into mmc acct in error	09/17/202	09/12/202	10/10/202			38,609.39	0.00	0.00	38,609.39 ✓
✓ 091225B		09/17/202	09/12/202	10/10/202			3,164.38	0.00	0.00	3,164.38 ✓
✓ 091525		09/17/202	09/15/202	10/10/202			4,048.99	0.00	0.00	4,048.99 ✓
✓ 091625		09/17/202	09/16/202	10/10/202			4,700.46	0.00	0.00	4,700.46 ✓

Vendor Totals: Number Name

12792 LAVACA BAY NURSING AND REHAB

Gross	Discount	No-Pay	Net
61,919.77	0.00	0.00	61,919.77

Report Summary

Grand Totals:

Gross
61,919.77

Discount
0.00

No-Pay
0.00

Net
61,919.77

APPROVED ON

SEP 18 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home						
Asst. Dir. Room	101.24	40.72			60.52	0
					Bank Balance	60.52
					Variance	-
					Leave in Balance	100.00

102.11

-	102.11	0
Bank Balance	102.11	✓
Variance	-	

Leave in Balance	100.00
------------------	--------

104.28 1,933.90

	2,038.18
Bank Balance	2,038.18
Variance	-

Leave In Balance	100.00
------------------	--------

125.36

	125.36
Bank Balance	125.36
Variance	0

Leave in Balance	100.00
------------------	--------

	✓	✓	✓
58,398.26	58,356.54	2,304.50	

	2,344.22
Bank Balance	2,344.22
Variance	-

Leave in Balance	100.00
------------------	--------

b7c 182-40 9

45,922.00

Ashted Bank

9/15/2025

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
✓ 40.72	0		
	✓		
40.72			

Bank of America

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
✓	✓		

Bank of America

9/16/2025

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
0	1933.9		1,933.90
✓			
	✓		
	1,933.90		1,933.90

Bank of America

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
✓	✓		

Bank of America

9/17/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III

9/16/2025

9/15/2025

Transfer-Out	Transfer-In	MMC PORTION	NH PORTION
✓ 58298.26	0		
0	2304.5	✓	2,304.50
✓ 60.28	0		
✓ 58,358.54	2,304.50		2,304.50
	4,238.40		4,238.40

TOTALS

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,852,243.17	\$1,858,238.37	\$1,852,243.17	\$1,953,073.08
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.52 ✓ /	\$60.52	\$60.52	\$60.52
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.11 ✓ /	\$102.11	\$102.11	\$102.11
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$2,038.18 ✓ /	\$2,038.18	\$2,038.18	\$2,038.18
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,344.22 ✓	\$120,544.17	\$2,344.22	\$2,344.22
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$125.36 ✓	\$5,780.18	\$125.36	\$125.36
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$497,044.37 ✓	\$505,939.25	\$497,044.37	\$45,784.27
*4551 CAL CO INDIGENT HEALTHCARE	\$4,843.63	\$4,843.63	\$4,843.63	\$4,843.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$19,103.96 ✓	\$24,607.35	\$19,103.96	\$19,103.96
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.14 ✓	\$100.14	\$100.14	\$100.14
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$155,295.46 ✓	\$229,173.20	\$155,295.46	\$151,314.35
*3407 MMC -NH TUSCANY VILLAGE	\$192,716.36 ✓	\$232,509.86	\$192,716.36	\$192,716.36
*2998 MMC -MONEY MARKET FUND	\$68,728.82	\$68,728.82	\$68,728.82	\$68,728.82
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$12,841.78	\$12,841.78	\$12,841.78	\$12,701.78
Total Balance	\$2,807,588.08	\$3,065,507.56	\$2,807,588.08	\$2,453,036.78

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
9/22/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek		55,186.96	34,779.30	496,637.91		497,044.57	495,623.05
					Bank Balance Variance	497,044.57	
					Leave in Balance	100.00	
					QPP YR 7 ADJ 2	274.12	
					RECOUP FOR MMC	740.15	
					July Interest	229.79	
					Aug Interest	77.27	
					Sept Interest		
					Adjust Balance/Transfer Amt	495,623.05	

Routing Information for Golden Creek:
Nexion Health at Golden Creek
Wells Fargo Bank, N.A.

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

Approved:

Caitlin Clevenger, Controller

9/23/2025

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

9/19/2025
 9/19/2025 HNB - ECHO HCCLAIMPMT 746003411 440000241991
 9/19/2025 Centene Management ACH 008765432514 1110000236
 9/18/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 9/17/2025 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC
 9/17/2025 HNB - ECHO HCCLAIMPMT 746003411 440000259857
 9/17/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2
 9/16/2025
 9/16/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 9/16/2025 AETNA ASD1 HCCLAIMPMT 1588075964 51000012232
 9/15/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 9/15/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 9/15/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2

		MMC	
Transfer-Out	Transfer-In	PORTION	NH PORTION
0	444074.88		444,074.88
0	6499.95		6,499.95
0	685.27		685.27
0	1015		1,015.00
✓ 34779.3	0		-
0	485.15		485.15
0	12225.33		12,225.33
0	20527.27		20,527.27
0	25		25.00
0	4410		4,410.00
0	4118.03		4,118.03
0	407		407.00
0	2164.43		2,164.43
			-
			-
✓ 34,779.30	✓ 496,637.31	-	496,637.31

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,852,243.17	\$1,858,238.37	\$1,852,243.17	\$1,953,073.08
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.52	\$60.52	\$60.52	\$60.52
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.11	\$102.11	\$102.11	\$102.11
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$2,038.18	\$2,038.18	\$2,038.18	\$2,038.18
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,344.22	\$120,544.17	\$2,344.22	\$2,344.22
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$125.36	\$5,780.18	\$125.36	\$125.36
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$497,044.37 ✓	\$505,939.25	\$497,044.37	\$45,784.27
*4551 CAL CO INDIGENT HEALTHCARE	\$4,843.63	\$4,843.63	\$4,843.63	\$4,843.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$19,103.96	\$24,607.35	\$19,103.96	\$19,103.96
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.14	\$100.14	\$100.14	\$100.14
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$155,295.46	\$229,173.20	\$155,295.46	\$151,314.35
*3407 MMC -NH TUSCANY VILLAGE	\$192,716.36	\$232,509.86	\$192,716.36	\$192,716.36
*2998 MMC -MONEY MARKET FUND	\$68,728.82	\$68,728.82	\$68,728.82	\$68,728.82
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$12,841.78	\$12,841.78	\$12,841.78	\$12,701.78
Total Balance	\$2,807,588.08	\$3,065,507.56	\$2,807,588.08	\$2,453,036.78

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
9/22/2025

Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Nursing Home	19,509.61	18,113.69	17,728.24			19,103.96	17,318.17
					Bank Balance	19,103.96	
					Variance		
					Leave in Balance	100.00	
					Claims owed to MMC	1,275.72	
					Claims owed to MMC	49.00	
					Claims owed to MMC	361.07	
					Adjust Balance/Transfer Amt	17,118.17	
Nursing Home	100.14					100.14	NO TRANSFER
					Bank Balance	100.14	
					Variance		
					Leave in Balance	100.00	
					Adjust Balance/Transfer Amt	0.14	
TOTAL TRANSFERS							

Routing Information for Gulf Pointe Plaza:

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

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Approved:

Calvin Clevenger, Controller

9/22/2025

Gulfport, Mississippi

9/18/2025 HNB - ECHO HCCLAIMPMT 746003411 440000205125
 9/17/2025 WIRE OUT HMG Rockport SNF, LP -Commerical
 9/17/2025 HNB - ECHO HCCLAIMPMT 746003411 440000259857
 9/16/2025 HNB - ECHO HCCLAIMPMT 746003411 440000215704
 9/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000259899

Transfer-Out	Transfer-In	MMC	
		PORTION	NH PORTION
0	8259.65		8,253.65
✓ 18133.89	0		-
0	65.63		65.63
0	1070.1		1,070.10
0	8338.86		8,338.86
0	0		-
✓ 0	✓ 0		-
			#VALUE!
18,133.89	17,728.24	-	#VALUE!

Gulfport, Mississippi

Transfer-Out	Transfer-In	MMC	
		PORTION	NH PORTION
✓ 0	✓ 0		-
			-
			-
			-
18,133.89	17,728.24	-	#VALUE!

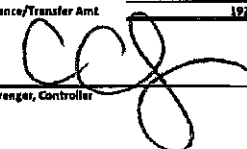
Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,852,243.17	\$1,858,238.37	\$1,852,243.17	\$1,953,073.08
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.52	\$60.52	\$60.52	\$60.52
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.11	\$102.11	\$102.11	\$102.11
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$2,038.18	\$2,038.18	\$2,038.18	\$2,038.18
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,344.22	\$120,544.17	\$2,344.22	\$2,344.22
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$125.36	\$5,780.18	\$125.36	\$125.36
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$497,044.37	\$505,939.25	\$497,044.37	\$45,784.27
*4551 CAL CO INDIGENT HEALTHCARE	\$4,843.63	\$4,843.63	\$4,843.63	\$4,843.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$19,103.96	\$24,607.35	\$19,103.96	\$19,103.96
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.14	\$100.14	\$100.14	\$100.14
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$155,295.46	\$229,173.20	\$155,295.46	\$151,314.35
*3407 MMC -NH TUSCANY VILLAGE	\$192,716.36	\$232,509.86	\$192,716.36	\$192,716.36
*2998 MMC -MONEY MARKET FUND	\$68,728.82	\$68,728.82	\$68,728.82	\$68,728.82
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$12,841.78	\$12,841.78	\$12,841.78	\$12,701.78
Total Balance	\$2,807,588.08	\$3,065,507.56	\$2,807,588.08	\$2,453,036.78

Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
9/22/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Chs Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
		98,433.35	98,333.35	192,616.36	-	-	192,716.36	192,616.36
						Bank Balance Variance	192,716.36	
						Leave in Balance	100.00	

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

Adjust Balance/Transfer Amt 192,616.36
Approved: 
Cathin Clavenger, Controller 9/22/2025

APPROVED ON
SEP 22 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



9/18/2025
9/18/2025 HNB - ECHO HCCLAIMPMT 746003411 440000205125
9/17/2025 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE
9/17/2025 HNB - ECHO HCCLAIMPMT 746003411 440000259857
9/17/2025 HNB - ECHO HCCLAIMPMT 746003411 440000260401
9/16/2025 Deposit
9/16/2025 HNB - ECHO HCCLAIMPMT 746003411 440000215774
9/16/2025 HNB - ECHO HCCLAIMPMT 746003411 440000215613
9/15/2025
9/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000259614
9/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000260110

<u>Transfer-Out</u>	<u>Transfer-In</u>	MMC	
		<u>PORTION</u>	<u>NH PORTION</u>
	209.5		209.50
✓ 98333.35	5468.98		5,468.98
	0		-
	17258.64		17,258.64
	2475.73		2,475.73
	45085.2		45,085.20
	41433.86		41,433.86
	22164.96		22,164.96
	6120		6,120.00
	34460.72		34,460.72
	17938.77		17,938.77
✓	✓		-
			-
98,333.35	192,616.36	-	192,616.36

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,852,243.17	\$1,858,238.37	\$1,852,243.17	\$1,953,073.08
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.52	\$60.52	\$60.52	\$60.52
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.11	\$102.11	\$102.11	\$102.11
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$2,038.18	\$2,038.18	\$2,038.18	\$2,038.18
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,344.22	\$120,544.17	\$2,344.22	\$2,344.22
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$125.36	\$5,780.18	\$125.36	\$125.36
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$497,044.37	\$505,939.25	\$497,044.37	\$45,784.27
*4551 CAL CO INDIGENT HEALTHCARE	\$4,843.63	\$4,843.63	\$4,843.63	\$4,843.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$19,103.96	\$24,607.35	\$19,103.96	\$19,103.96
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.14	\$100.14	\$100.14	\$100.14
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$155,295.46	\$229,173.20	\$155,295.46	\$151,314.35
*3407 MMC -NH TUSCANY VILLAGE	\$192,716.36	\$232,509.86	\$192,716.36	\$192,716.36
*2998 MMC -MONEY MARKET FUND	\$68,728.82	\$68,728.82	\$68,728.82	\$68,728.82
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$12,841.78	\$12,841.78	\$12,841.78	\$12,701.78
Total Balance	\$2,807,588.08	\$3,065,507.56	\$2,807,588.08	\$2,453,036.78

Nursing Home	Account Number	Beginning Balance	Transfer-Out	Transfer-In	Cts Cleared	Medicare Reimbursement	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Alfred Hill Home Care		245,974.74	174,759.44	84,090.16				84,090.16
						Bank Balance	155,299.46	
						Variance	155,299.46	
						Leave in Balance	100.00	
						ATLIS OWED TO MMC	70,644.47	
						July Interest	249.98	
						August Interest	210.65	

Adjust Balance/Transfer Amt	14,090.16
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9/22/2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

WIRE OUT IN - HOSPITAL

9/19/2025 HOSPICE OF SOUTH Payments NF 113122650033926
 9/19/2025 HNB - ECHO HCCLAIMPMT 746003411 440000241991
 9/18/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2
 9/17/2025 WIRE OUT REG Leased OpCo LLC
 9/17/2025 NDC SWEEP FAC 02330 56009680011521 SWEEP FR
 9/17/2025
 9/17/2025 HNB - ECHO HCCLAIMPMT 746003411 440000259857
 9/17/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2
 9/17/2025 CENTENE CORP HCCLAIMPMT 53101120132699
 9/16/2025
 9/16/2025 HNB - ECHO HCCLAIMPMT 746003411 440000215712
 9/16/2025 CENTENE CORP HCCLAIMPMT 53101123705060
 9/16/2025 36 TREAS 310 MISC PAY 746003411360012 1010
 9/15/2025 HNB - ECHO HCCLAIMPMT 746003411 440000259899

Transfer-Out	Transfer-In	MMC	
		PORTION	NH PORTION
	1205.35		1,205.35
	2775.76		2,775.76
	1148.4		1,148.40
✓ 174769.44	0		-
	4102		4,102.00
	22732.42		22,732.42
	225.72		225.72
	2757.32		2,757.32
	5320.56		5,320.56
	28171.12		28,171.12
	7152.62		7,152.62
	2736.09		2,736.09
	805.46		805.46
	4957.34		4,957.34
✓ 174,769.44	84,090.16	-	84,090.16

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$1,852,243.17	\$1,858,238.37	\$1,852,243.17	\$1,953,073.08
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$60.52	\$60.52	\$60.52	\$60.52
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$102.11	\$102.11	\$102.11	\$102.11
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$2,038.18	\$2,038.18	\$2,038.18	\$2,038.18
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$2,344.22	\$120,544.17	\$2,344.22	\$2,344.22
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$125.36	\$5,780.18	\$125.36	\$125.36
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$497,044.37	\$505,939.25	\$497,044.37	\$45,784.27
*4551 CAL CO INDIGENT HEALTHCARE	\$4,843.63	\$4,843.63	\$4,843.63	\$4,843.63
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$19,103.96	\$24,607.35	\$19,103.96	\$19,103.96
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$100.14	\$100.14	\$100.14	\$100.14
*5506 MMC -NH LAVACA BAY NURSING & REHAB	\$155,295.46 ✓ /	\$229,173.20	\$155,295.46	\$151,314.35
*3407 MMC -NH TUSCANY VILLAGE	\$192,716.36	\$232,509.86	\$192,716.36	\$192,716.36
*2998 MMC -MONEY MARKET FUND	\$68,728.82	\$68,728.82	\$68,728.82	\$68,728.82
*7168 MEMORIAL MEDICAL CENTER MONEY MKT 2	\$12,841.78	\$12,841.78	\$12,841.78	\$12,701.78
Total Balance	\$2,807,588.08	\$3,065,507.56	\$2,807,588.08	\$2,453,036.78

From Gulf Pointe

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P

MMC Operating

Date Requested:

9/22/2025

A

Y

E

E

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

AMOUNT:

\$

49.00 ✓

G/L NUMBER:

EXPLANATION:

MMCs payment went to Gulf Pointe

REQUESTED BY:

Emily Vick

AUTHORIZED BY:

✓
CCJ

From Gulf Pointe

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested: 9/22/2025

A

Y

E

E

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$ 361.07 ✓

G/L NUMBER: _____

EXPLANATION:

claim sent to Gulf Point, MMC's Patient

REQUESTED BY:

Emily Vick

AUTHORIZED BY: ✓



From Golden Creek

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested:

9/22/2025

A

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E

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

274.11 ✓

G/L NUMBER:

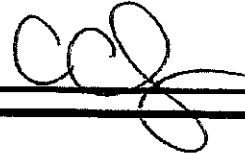
EXPLANATION:

QIPP Y8 Adj 2 portion owed to MMC

REQUESTED BY:

Caitlin Clevenger

AUTHORIZED BY: ✓



From Golden Creek

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested:

9/22/2025

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E

APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT:

\$

740.15 ✓

454.56-10222000

G/L NUMBER: 285.59- 26530000

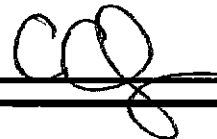
EXPLANATION:

recouped on MMCs payment for Golden Creek pt,

REQUESTED BY:

Emily Vick

AUTHORIZED BY:



From Lavaca Bay

MEMORIAL MEDICAL CENTER CHECK REQUEST

P

MMC Operating

Date Requested:

9/22/2025

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APPROVED ON

SEP 22 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

☐ Imprest Cash

☐ A/P Check

☐ Mail Check to Vendor

☐ Return Check to Dept

AMOUNT:

\$

70,644.05 ✓

G/L NUMBER:

EXPLANATION:

ATLIS PAYMENT

REQUESTED BY:

Emily Vick

AUTHORIZED BY: ✓

C. C. O.