



February 26, 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
(ABSENT) Anna Goodman
By: Kaddie Smith

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

The subject matter of such meeting is as follows:

1. Call meeting to order.

Meeting was called order at 10am by Judge Vern Lyssy

2. Invocation.

Commissioner David Hall

3. Pledges of Allegiance.

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

4. General Discussion of Public Matters and Public Participation.

Gerhardt (Gary) Jackson speaks about the school system.

5. Approve February 12, 2025 Commissioners' Court Meeting Minutes. (VLL)

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

6. Consider and take necessary action to accept completion of the Brighton Bridge project, pay the final invoice, and release the retainage authorizing all appropriate signatures. (DEH)

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

7. Consider and take necessary action to accept a cash donation of \$50.00 from Mr. George Ganam for CC EMS Motivational Fund. (VLL)

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

8. Consider and take necessary action to allow The Calhoun County Judge Vern Lyssy sign the Voting Equipment Lease between Calhoun County Elections and The Calhoun Port Authority. (VLL)

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

9. Accept the 2024 Certificate of Completion for Continuing Education Hours from the County Clerk and enter into Official Records. (VLL)

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

10. Receive the record of retirement letter from Anna Kobela, District Clerk, effective March 31, 2025, and take appropriate action. (VLL)

pass

11. Consider and take necessary action for Tax Assessor-Collector to enter into an agreement #3119835 with Great America Financial Services Corporation for the rental of a new Kyocera 3500cifax copier and allow the County Judge to sign all documents. (VLL)

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

12. Consider and take necessary action to approve a request from Kinder Morgan Tejas pipeline LLC, for a temporary workspace and access agreement in the Sea Lake Subdivision situated in Calhoun County, TX. (JMB)

James with Kinder Morgan Tejas pipeline LLC asked for permission.	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

13. Public Hearing concerning Petition to Vacate a 1.82 acre portion of Outblock 44, Port O'Connor Townsite Outlots as recorded in Volume 2, Page 1 of the Deed Records of Calhoun County, Texas. (GDR)

Regular Meeting was closed at 10:16am.
Terry Ruddick explained the Petition to vacate.
Regular Meeting was opened at 10:17

14. Consider and take necessary action to Vacate a 1.82 acre portion of Outblock 44, Port O'Connor Townsite Outlots as recorded in Volume 2, Page 1 of the Deed Records of Calhoun County, Texas. (GDR)

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

15. Consider and take necessary action on Proposal for Engineering Services – King Fisher Pier Extension – Port O'Connor, Texas in the amount of \$48,000 plus reimbursable expenses of \$108.24 and authorize Commissioner Reese to sign proposal. (GDR)

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

16. Consider and take necessary action to approve Change Order No. 1 for the Calhoun County Recycle Waste Transfer Station Project for Calhoun County, Texas and authorize County Judge to sign. (RB)

Scott Mason explained the change order.	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

17. Consider and take necessary action to authorize Commissioner Reese to enter into a Peak Performance HVAC Maintenance Agreement with Victoria Air Conditioning for the Port O'Connor Community Center in the amount of \$3,108 annually, billed at \$777 quarterly and sign all documents. (GDR)

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

18. Consider and take nearly action on allowing Commissioner Hall to sign a non-disclosure agreement for possible interest of purchase of real property located in Alamo Beach PID number 25090. (DEH)

pass

19. Consider and take necessary action to award qualified bidder on Bid No. 2024.12 - Calhoun County Green Lake Park - Phase 1; Project 1. (GDR)

Matt Glaze with Urban Engineering recommended the court award the bid to BLS Construction.

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

20. Consider and take action to grant a variance to Purple Crab, LLC as to the front building setback line for Lot 1, Block 37, Port O'Connor Townsite, Calhoun County, Texas. (GDR)

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

21. Accept Reports from the following County Offices:

- a) Texas Agrilife Extension Service – January 2025
 - i. 4-H and Youth Development
 - ii. Agriculture and Nature Resources
 - iii. Family and Community Health
 - iv. Coastal and Marine y, 2025
- b) Justice of the Peace Pct. 4 – January, 2025
- c) Tax Assessor/Collector – December, 2024
- d) County Clerk – January, 2025

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

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

2024

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

2025

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

23. Approval of bills and payroll. (VLL)

MMC Bills:

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

Indigent Healthcare:

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

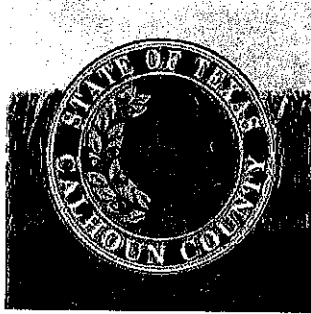
County 2024:

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

County 2025:

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

Adjourned 10:35am



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 26th day of February 2025, the packet

for the 26th day of February 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, February 26, 2025 at 10:00 a.m. in the Commissioners' Courtroom in the County Courthouse at 211 S. Ann Street, Suite 104, Port Lavaca, Calhoun County, Texas.

AGENDA

The subject matter of such meeting is as follows:

1. Call meeting to order.
2. Invocation.
3. Pledges of Allegiance.
4. General Discussion of Public Matters and Public Participation.
5. Approve February 12, 2025 Commissioners' Court Meeting Minutes. (VLL)
6. Consider and take necessary action to accept completion of the Brighton Bridge project, pay the final invoice, and release the retainage authorizing all appropriate signatures. (DEH)
7. Consider and take necessary action to accept a cash donation of \$50.00 from Mr. George Ganam for CC EMS Motivational Fund. (VLL)
8. Consider and take necessary action to allow The Calhoun County Judge Vern Lyssy sign the Voting Equipment Lease between Calhoun County Elections and The Calhoun Port Authority. (VLL)
9. Accept the 2024 Certificate of Completion for Continuing Education Hours from the County Clerk and enter into Official Records. (VLL)
10. Receive the record of retirement letter from Anna Kobela, District Clerk, effective March 31, 2025, and take appropriate action. (VLL)
11. Consider and take necessary action for Tax Assessor-Collector to enter into an agreement #3119835 with Great America Financial Services Corporation for the rental of a new Kyocera 3500cifix copier and allow the County Judge to sign all documents. (VLL)

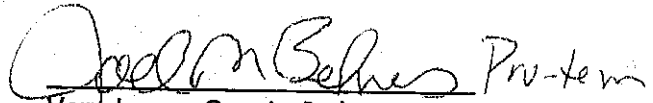
AT 9:14 FILED 9 O'CLOCK A M

FEB 21 2025

ANNA GOODMAN
COUNTY CLERK, CALHOUN COUNTY, TEXAS

DEPUTY: Kadda Simon

12. Consider and take necessary action to approve a request from Kinder Morgan Tejas pipeline LLC, for a temporary workspace and access agreement in the Sea Lake Subdivision situated in Calhoun County, TX. (JMB)
13. Public Hearing concerning Petition to Vacate a 1.82 acre portion of Outblock 44, Port O'Connor Townsite Outlots as recorded in Volume 2, Page 1 of the Deed Records of Calhoun County, Texas. (GDR)
14. Consider and take necessary action to Vacate a 1.82 acre portion of Outblock 44, Port O'Connor Townsite Outlots as recorded in Volume 2, Page 1 of the Deed Records of Calhoun County, Texas. (GDR)
15. Consider and take necessary action on Proposal for Engineering Services – King Fisher Pier Extension – Port O'Connor, Texas in the amount of \$48,000 plus reimbursable expenses of \$108.24 and authorize Commissioner Reese to sign proposal. (GDR)
16. Consider and take necessary action to approve Change Order No. 1 for the Calhoun County Recycle Waste Transfer Station Project for Calhoun County, Texas and authorize County Judge to sign. (RB)
17. Consider and take necessary action to authorize Commissioner Reese to enter into a Peak Performance HVAC Maintenance Agreement with Victoria Air Conditioning for the Port O'Connor Community Center in the amount of \$3,108 annually, billed at \$777 quarterly and sign all documents. (GDR)
18. Consider and take necessary action on allowing Commissioner Hall to sign a non-disclosure agreement for possible interest of purchase of real property located in Alamo Beach PID number 25090. (DEH)
19. Consider and take necessary action to award qualified bidder on Bid No. 2024.12 - Calhoun County Green Lake Park - Phase 1; Project 1. (GDR)
20. Consider and take action to grant a variance to Purple Crab, LLC as to the front building setback line for Lot 1, Block 37, Port O'Connor Townsite, Calhoun County, Texas. (GDR)
21. Accept Reports from the following County Offices:
 - a) Texas Agrilife Extension Service – January 2025
 - i. 4-H and Youth Development
 - ii. Agriculture and Nature Resources
 - iii. Family and Community Health
 - iv. Coastal and Marine y, 2025
 - b) Justice of the Peace Pct. 4 – January, 2025
 - c) Tax Assessor/Collector – December, 2024
 - d) County Clerk – January, 2025
22. Consider and take necessary action on budget adjustments. (VLL)
23. Approval of bills and payroll. (VLL)


Verly 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 72 hours preceding the scheduled meeting time. For your convenience, you may visit the county's website at www.calhouncobx.org under "Commissioners' Court Agenda" for any official court postings.

04



February 26, 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
(ABSENT) Anna Goodman
By: Kaddie Smith

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

The subject matter of such meeting is as follows:

1. Call meeting to order.

Meeting was called order at 10am by Judge Vern Lyssy

2. Invocation.

Commissioner David Hall

3. Pledges of Allegiance.

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

4. General Discussion of Public Matters and Public Participation.

Gerhardt (Gary) Jackson speaks about the school system.

#4

Calhoun County Commissioners Court

Public Participation Form

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

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

NAME: Berhardt Jackson

ADDRESS: 2205 Larry Pt Lanes

TELEPHONE: 361 652 5912

PLACE OF EMPLOYMENT: retire

EMPLOYMENT TELEPHONE: _____

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

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

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

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

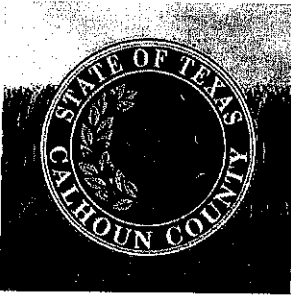
I hereby swear that any statement I make will be the truth, and nothing but the truth, to the best of my knowledge and ability.

Signature: Berhardt Jackson

05

5. Approve February 12, 2025 Commissioners' Court Meeting Minutes. (VLL)

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

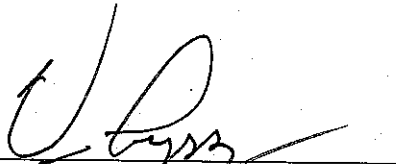


Vern L. Lyssy
County Judge

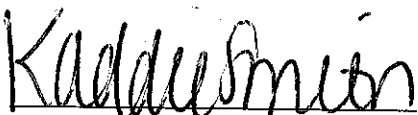
David Hall, Commissioner, Precinct 1
Ronny Best, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

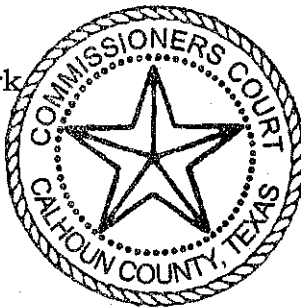
The Commissioners' Court of Calhoun County, Texas met on Wednesday,
February 12, 2025, at 10:00 a.m. in the Commissioners' Courtroom in the County
Courthouse at 211 S. Ann Street, Suite 104, Port Lavaca, Calhoun County, Texas.

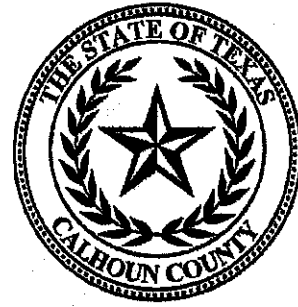
Attached are the true and correct minutes of the above referenced meeting.


Vern Lyssy, County Judge
Calhoun County, Texas

Anna Goodman, County Clerk


Deputy Clerk





February 12, 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	County Judge
David Hall	Commissioner Pct 1
Ronald Best	Commissioner Pct 2
Joel Behrens	Commissioner Pct 3
Gary Reese	Commissioner Pct 4
(ABSENT) Anna Goodman	County Clerk
By: Kaddie Smith	Deputy Clerk

The subject matter of such meeting is as follows:

1. Call meeting to order.

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

2. Invocation.

Commissioner David Hall

3. Pledges of Allegiance.

US Flag: Commissioner Gary Reese

Texas Flag: Commissioner Joel Behrens

4. General Discussion of Public Matters and Public Participation.

Gary Jackson speaks on Human Trafficking.

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

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

6. Public Hearing on Petition to create Calhoun County Hospital District. (VLL)

Public Meeting opened at 10:06am
Anne Marie Odefey explained the process to the public.
Erin Clevenger explained they are hosting public Q&A.
Loretta Brown expressed concern on creating a sanctuary city.
Allissa Jarvis expressed her concerns on cost.
Scott Mason and Ed Reese expressed their concerns.
Cindy Krause expressed her concerns and asked for additional public hearings.

7. Consider and take necessary action to consider the Petition to create Calhoun County Hospital District and if found in due order, grant the petition and order an election for May 3, 2025 to confirm the District's creation and authorize the levy of a tax not to exceed \$0.40 cents. (VLL)

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

8. Consider and take necessary action on Matagorda Bay Mitigation Trust, Contract No. 095 - King Fisher Pier Project, and authorize Judge Lyssy to sign all documents. (GDR)

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

9. Consider and take necessary action on Matagorda Bay Mitigation Trust, Contract No. 096 – Calhoun County Extension Office Truck for Public Education on Waterbodies and Surrounding Ecosystems, and authorize Judge Lyssy to sign all documents. (GDR)

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

10. Consider and take necessary action on the following FY 2025 Interlocal Agreements and authorize payment of purchase orders and authorize Judge Lyssy to sign all documents.

- | | |
|---|--------------|
| (a) City of Port Lavaca – Fire Protection | \$252,216.80 |
| (b) Crimestoppers | \$1,000.00 |

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

11. Consider and take necessary action for Emergency Management to enter into an agreement #3117560 with Great America Financial Services Corporation for the rental of a new Kyocera 358ci copier and allow the County Judge to sign all documents. (VLL)

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

12. Discuss and take necessary action to allow Ronald Best to sign for an aerobic septic system service contract for Calhoun County Airport with Silverback Septic Solutions. (RB)

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

13. Consider and take necessary action for Calhoun County Building Maintenance to renew the contract with CFI Mechanical, Inc. to provide (3) Quarterly and (1) Annual inspection and for maintenance on chillers and pumps and allow County Judge to sign all documents. (VLL)

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

14. Consider and take necessary action to approve the contract with Weaver & Jacobs Constructors, Inc. for Bid No. 2024.06 – Memorial Medical Center HVAC & Roof Improvements for Calhoun County, and authorize the County Judge to sign. (VLL)

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

15. Consider and take necessary action to approve the Specifications and the Project Manual for Bid Number 2025.05 – Calhoun County Bill Sanders Park – Swan Point Pavilion, Seadrift, Texas and authorize the County Auditor and Urban Engineering to advertise for bids. A Pre-Bid Conference will be held at 10:00 am, Tuesday, March 4, 2025 at the Bill Sanders Park located off Swan Point Road in Seadrift, Texas. Bids will be due on Thursday, March 27, 2025. (GDR)

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

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

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

17. Consider and take necessary action to accept donation of additions and renovations to the Port O'Connor Community Center and Pavilion. (GDR)

pass

18. Consider and take necessary action to accept revised Contract Agreement and Rules & Regulations for the Port O'Connor Community Center. (GDR)

Pass

19. Consider and take necessary action for Commissioners Court to accept an offer from TxDOT to acquire a 6.413 acre right-of-way parcel located at Green Lake Park for \$145,062 to facilitate the construction of a new and improved bridge on SH 35 over the Victoria Barge Canal, and authorize counsel to seek the approval from the U.S. Fish and Wildlife as required by the property's deed restrictions. (VLL)

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

20. Consider and take necessary action to accept the attached list of Donations to the Calhoun County Library for the month of January 2025. (VLL)

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

21. Consider and take necessary action to declare the attached list of items for the Calhoun County Library as Surplus/Salvage for the month of January 2025. (VLL)

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

22. Accept Reports from the following County Offices:

- a) Justice of the Peace Pct 1 – January, 2025
- b) Justice of the Peace Pct 2 – January, 2025
- c) Justice of the Peace Pct 3 – January, 2025
- d) District Clerk – January, 2025
- e) Sheriff Department, January, 2025
- f) Floodplain Administration – January, 2025

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

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

2024	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

2025	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

24. Approval of bills and payroll. (VLL)

MMC Bills:

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

2024 County Bills:

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

2025 County Bills:

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

Adjourned 11:13am

06

6. Consider and take necessary action to accept completion of the Brighton Bridge project, pay the final invoice, and release the retainage authorizing all appropriate signatures. (DEH)

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

David E. Hall

Calhoun County Commissioner, Precinct #1

202 S. Ann

Port Lavaca, TX 77979



(361)552-9242

Fax (361)553-8734

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 February 12th, 2025.

Consider and take necessary action to accept completion of the Brighton Bridge project, pay the final invoice, and release the retainage authorizing all appropriate signatures.

Sincerely,

A handwritten signature in black ink, appearing to read "David E. Hall", written over the word "Sincerely,".

David E. Hall

DEH/apt

01-24-2025

Invoice #122024 FINAL

Replacement of North and South Timber Bridges on Brighton Road

PAGE 1 of 2

Calhoun County
211 South Ann St. 3rd Floor Suite 301
Port Lavaca, Texas 77979

CONTRACTOR: Constar Construction
349 Reid Drive
Victoria, Texas 77904

WORK PERFORMED

12/1/2024

12/20/2024

CONTRACT CHANGE ORDER SUMMARY

361-485-9100

ESTIMATE

No.	Date	Amount	
		Additions	Deductions
1	5/22/2024		\$85,246.40
TOTALS			\$85,246.40

1. Original Contract.....	\$	928,396.40
2. Change Orders.....	\$	(85,246.40)
3. Revised Contract (1+2).....	\$	843,150.00
4. Work Completed*.....	\$	838,168.00
5. Stored Materials.....	\$	-
6. Subtotal (4+5).....	\$	838,168.00
7. Retainage*.....	\$	-
8. Previous Payments.....	\$	754,351.20
9. Amount Due(6-7-8).....	\$	83,816.80

*Detailed Breakdown attached

CONTRACT TIME

Original (days) _____

Revised _____

Remaining _____

On Schedule

Yes

Starting Date _____

No

Projected Completion _____

CONTRACTOR'S CERTIFICATION

The undersigned Contractor certifies that to the best of their knowledge, information and belief the work covered by this pay estimate has been completed in accordance with the Contract Documents, that all amounts have been paid by the contractor for work for which previous payment estimates was issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

CONSTAR CONSTRUCTION

By

Sandy W. Tesch
Sandy W. Tesch, General Partner

Date

1-24-25

ENGINEER:

CIVILCORP

By

Rene Soto, P.E.

FOR Ben Galvan, PE

Date

01-31-2025

OWNER

Calhoun County

By

Date

By

Date

[Signature]

2-26-2025

07

7. Consider and take necessary action to accept a cash donation of \$50.00 from Mr. George Ganam for CC EMS Motivational Fund. (VLL)

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

Debbie Vickery

From: Donna.Hall@calhouncotx.org (Donna Hall) <Donna.Hall@calhouncotx.org>
Sent: Tuesday, February 11, 2025 9:04 AM
To: Debbie Vickery; Dustin Jenkins; Clint Macek
Subject: Commissioners' Court Agenda Item: Cash Donation
Attachments: Ganem, George_20250211_\$50.00_Donation.pdf

Debbie,

Please add the following to the next Commissioners' Court Agenda -

Consider and take necessary action to accept a cash donation of \$50.00 from Mr. George Ganam for CC EMS Motivational Fund.

Attached excel deposit sheet.

Thank you in advance,

Donna Hall

Admin Asst
Calhoun Co EMS
361-552-1140

Donna Hall
Admin Asst
Calhoun Co EMS

Calhoun County Texas

Date Rec'd	Name	Descript.	CheckDate	Check#	Amount	Purpose
------------	------	-----------	-----------	--------	--------	---------

2/11/2025	George Ganem	Cash	2/11/2025		\$50.00	Donation
-----------	--------------	------	-----------	--	---------	----------



08

8. Consider and take necessary action to allow The Calhoun County Judge Vern Lyssy sign the Voting Equipment Lease between Calhoun County Elections and The Calhoun Port Authority. (VLL)

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



CALHOUN COUNTY ELECTIONS DEPARTMENT

211 S. ANN ST, PORT LAVACA, TX 77979 • PH: 361-553-4440 • FAX: 361-553-4443

February 12, 2025

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

RE: AGENDA ITEM

Dear Judge Lyssy:

Please place the following item on the Commissioner's Court Agenda for February 26, 2025.

* Consider and take necessary action to allow The Calhoun County Judge Vern Lyssy sign the Voting Equipment Lease between Calhoun County Elections and The Calhoun Port Authority.

Thank You,,

A handwritten signature in cursive script that reads "Mary Ann Orta".

Mary Ann Orta
Calhoun County Elections Administrator

VOTING EQUIPMENT LEASE

BASIC TERMS

DATE: 02/18/25

Lessor: Calhoun County, Texas

Lessor's Address: Calhoun County Courthouse

211 S. Ann, Port Lavaca, Texas 77979

Lessee: Calhoun Port Authority

Lessee's Address: P.O. Box 397 Point Comfort, Texas 77978

Equipment

1 (number) voting machine described as **ES&S Express Vote BMD**

Term (days): 7

Commencement Date: April 22, 2025

Termination Date: May 03, 2025

Rent: Early voting 1 machine @ \$3,325.00 for 6 days X 3% = \$598.50

Election Day 5 machines @ \$3,325.00 for 1 day X 3% = \$498.75

Rent Total: \$1,097.25

Security Deposit: \$0.00

Permitted Use: Election Voting

Clauses and Covenants

A. Lessee agrees to –

1. Lease the Equipment for the entire Term beginning on the Commencement Date and ending on the Termination Date.
2. Accept the voting equipment in its present condition "AS IS," the equipment being currently suitable for the Permitted Use.
3. Obey (a) all applicable laws relating to the use of the voting equipment and (b) any requirements imposed by the utility companies serving or insurance companies covering the Premises.
4. Take reasonable care not to damage or destroy the equipment.

5. Purchase and provide at the renters' own expense all ballots, software, programming and supplies necessary for the proper use of the voting machines.
6. Repair, replace, and maintain the voting equipment, normal wear excepted.
7. Return the voting machines to the County at the end of the lease term.
8. INDEMNIFY, DEFEND AND HOLD LESSOR AND LIENHOLDER HARMLESS FROM ANY INJURY (AND ANY RESULTING OR RELATED CLAIM, ACTION, LOSS, LIABILITY, OR REASONABLE EXPENSE, INCLUDING ATTORNEY'S FEE AND OTHER FEES AND COURT AND OTHER COSTS) OCCURRING IN THE USE OF THESE VOTING MACHINES. THE INDEMNITY CONTAINED IN THIS PARAGRAPH (a) IS INDEPENDENT OF ANY INSURANCE, (b) WILL NOT BE LIMITED BY COMPARATIVE NEGLIGENCE STATUTES OR DAMAGES PAID UNDER THE WORKERS' COMPENSATION ACT OR SIMILAR EMPLOYEE BENEFIT ACTS, (c) WILL SURVIVE THE END OF THE TERM, AND (d) WILL APPLY EVEN IF AN INJURY IS CAUSED IN WHOLE OR IN PART BY THE ORDINARY NEGLIGENCE OR STRICT LIABILITY OF CALHOUN BUT WILL NOT APPLY TO THE EXTENT AN INJURY IS CAUSED BY THE GROSS NEGLIGENCE OR WILLFUL MISCONDUCT OR CALHOUN COUNTY.

B. Lessee agrees not to –

1. Use the equipment for any purpose other than the Permitted Use.
2. Create a nuisance.
3. Permit any waste.
4. Use the equipment in any way that would increase insurance premiums or void insurance on the equipment.
5. Change Lessor's equipment.
6. Alter the equipment.
7. Allow a lien to be placed on the equipment.

C. Lessor agrees to –

1. Lease to Lessee the equipment for the entire Term beginning on the Commencement Date and ending on the Termination Date.
2. Provide the Essential Services and instruction on the use and function of the equipment.

3. Repair, replace, and maintain the equipment as provided by the manufacture warranty on the equipment and to the extent of this warranty only.

D. Lessor agrees not to –

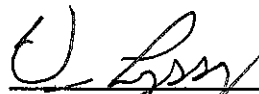
1. Interfere with Lessee's possession of the equipment as long as Lessee is not in default.
2. Interfere in any way with the election and the use of the equipment during the election being held by the Lessee.

E. Lessor and Lessee agree to the following:

1. *Alterations.* Any physical additions or improvements to the equipment made by Lessee will become the property of Lessor. Lessor may require that Lessee, at the of the Term and at Lessee's expense, remove any physical additions and improvements, repair any alternations, and restore the equipment to the condition existing at the Commencement Date, normal wear excepted.
2. *Abatement.* Lessee's covenant to pay Rent and Lessor's covenants are independent. Except as otherwise provided, Lessee will not be entitled to abate Rent for any reason.
3. *Insurance.* Lessee and Lessor will maintain the respective PERSONAL PROPERTY insurance coverage's on equipment owned by them, being used by them or under their protection, possession or control.
4. *Release of Claim/Subrogation.* LESSOR AND LESSEE RELEASE EACH OTHER AND LEINHOLDER FROM ALL CLAIMS OR LIABILITIES FOR DAMAGE TO THE EQUIPMENT, DAMAGE TO OR LOSS OF PERSONAL PROPERTY WITHIN THE EQUIPMENT, AND LOSS THAT ARE COVERED BY THE RELEASING INSURANCE OR THAT WOULD HAVE BEEN COVERED BY THE REQUIRED INSURANCE IF THE PARTY FAILS TO MAINTAIN THE PERSONAL PROPERTY COVERAGES REQUIRED BY THIS LEASE. THE PARTY INCURRING THE DAMAGE OR LOSS WILL BE RESPONSIBLE FOR ANY DEDUCTIBLE OR SELF-INSURED RETENTION UNDER ITS PROPERTY INSURANCE. LESSOR AND LESSEE WILL NOTIFY THE ISSUING PROPERTY INSURANCE COMPANIES OF THE RELEASE SET FORTH IN THIS PARAGRAPH AND WILL HAVE THE PERSONAL PROPERTY INSURANCE POLICIES ENDORSED, IF NECESSARY, TO PREVENT INVALIDATION OF COVERAGE. THIS RELEASE WILL NOT APPLY IF IT INVALIDATES THE PROPERTY INSURANCE COVERAGE OF THE RELEASING PARTY. THE RELEASE IN THIS PARAGRAPH WILL APPLY EVEN IF THE DAMAGE OR LOSS IS CAUSED IN THE WHOLE OR IN PART BY THE ORDINARY NEGLIGENCE OR STRICT LIABILITY OF THE RELEASED PARTY BUT WILL NOT APPLY TO THE EXTENT THE DAMAGE OR LOSS IS CAUSED BY THE GROSS NEGLIGENCE OR WILLFUL MISCONDUCT OF THE RELEASED PARTY.
5. *Alternative Dispute Resolution.* Lessor and Lessee agree to mediate in good faith before filing suit for damages.

6. *Attorney's Fees.* If either party retains an attorney to enforce this lease, the party prevailing in litigation is entitled to recover reasonable attorney's fees and other fees and court and other costs.
7. *Venue.* Exclusive venue is in the county in which the Premises are located.
8. *Entire Agreement.* This lease is the entire agreement of the parties, and there are no oral representations, warranties, agreements, or promises pertaining to this lease or to any expressly mentioned exhibits and riders not incorporated in writing in this lease.
9. *Amendment of Lease.* This lease may be amended only by an instrument in writing signed by Lessor and Lessee.
10. *Limitation of Warranties.* THERE ARE NO IMPLIED WARRANTIES OF MERCHANTABILITY, OF FITNESS FOR A PARTICULAR PURPOSE, OR OF ANY OTHER KIND ARISING OUT OF THIS LEASE, AND THERE ARE NO WARRANTIES THAT EXTEND BEYOND THOSE EXPRESSLY STATED IN THIS LEASE.
11. *Notices.* Any notice required or permitted under this lease must be in writing. Any notice required by this lease will be deemed to be delivered (whether actually received or not) when deposited with the United States Postal Service, postage prepaid, certified mail, return receipt requested, and addressed to the intended recipient at the address shown in this lease. Notice may also be given by regular mail, personal delivery, courier delivery, facsimile transmission, or other commercially reasonable means and will be effective when actually received. Any address for notices may be changed by written notice delivered as provided herein.

Lessor: Calhoun County Texas



Vern Lyssy, Calhoun County Judge

Lessee: Calhoun Port Authority



By: Jay Coker

Title: Board Chairman

09

9. Accept the 2024 Certificate of Completion for Continuing Education Hours from the County Clerk and enter into Official Records. (VLL)

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



COUNTY & DISTRICT CLERKS' ASSOCIATION OF TEXAS


Certificate of Completion Awarded to

Anna Goodman

County Clerk

For completing the required 20 hours of Continuing Education for 2024 as prescribed in Section 51.605 of the Texas Government Code.

In witness therefore, recognition is hereby made this January 2025.


John F. Warren, President


Sandra Roblez, Vice President

10

10. Receive the record of retirement letter from Anna Kobela, District Clerk, effective March 31, 2025, and take appropriate action. (VLL)

pass

11

11. Consider and take necessary action for Tax Assessor-Collector to enter into an agreement #3119835 with Great America Financial Services Corporation for the rental of a new Kyocera 3500cfx copier and allow the County Judge to sign all documents. (VLL)

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



625 First Street SE, Suite 800
Cedar Rapids, IA 52401
Toll Free 866-339-9778

February 6, 2025

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

Re: Agreement No. 3119835 (the "Agreement")

To Whom It May Concern:

We understand that you are contemplating entering into an agreement with GreatAmerica for the rental of certain office equipment ("Equipment") and that you desire to have GreatAmerica sign the Agreement before delivery and the installation of the Equipment. Ordinarily, we do not sign agreements until after the customer has signed the document(s) and after we have confirmed with the customer that the Equipment has been delivered and is installed satisfactorily. However, you have a strong desire that we sign the Agreement prior to installation, and we are okay with that; provided that you understand that the Agreement will not become binding until we confirm your unconditional acceptance of the installed Equipment either by telephone verification with you or by receipt of a signed delivery and acceptance certificate in a form acceptable to us.

Accordingly, enclosed please find two copies of the Agreement bearing our original signature, one of which has a legend in the margin that states as follows: "This is a copy. This is a copy view of the authoritative copy held by the designated custodian." You may keep the copy with that legend on it. The other copy will be our original. You will need to sign our original and return it to us before we can fund your transaction.

If you have any questions, feel free to contact us.

Thank you.

Sincerely,

AGREEMENT



GREATAMERICA FINANCIAL SERVICES CORPORATION
PAYMENT ADDRESS:
PO BOX 660831, DALLAS TX 75266-0831

AGREEMENT NO.: 3119835

CUSTOMER ("YOU" OR "YOUR")

FULL LEGAL NAME: Calhoun, County of

ADDRESS: 211 S Ann St

Port Lavaca TX 77979-4203

VENDOR (VENDOR IS NOT OUR AGENT AND IS NOT AUTHORIZED BY US TO ACT ON OUR BEHALF OR TO WAIVE OR ALTER ANY PROVISION OF THIS AGREEMENT)

Dewitt Poth & Son

Yoakum, TX

EQUIPMENT AND PAYMENT TERMS

TYPE, MAKE, MODEL NUMBER, SERIAL NUMBER, AND INCLUDED ACCESSORIES

1 Kyocera 3500cifx

SEE ATTACHED SCHEDULE

EQUIPMENT LOCATION: As Stated Above

TERM IN MONTHS: 63

MONTHLY PAYMENT AMOUNT: \$185.00

(*PLUS TAX)

PURCHASE OPTION: Fair Market Value

ADDITIONAL TERMS AND CONDITIONS

AGREEMENT. You want us to now pay your Vendor for the equipment and/or software referenced herein ("Equipment") and the amounts your Vendor included on the invoice to us for the Equipment for related installation, training, and/or implementation costs, and you unconditionally agree to pay us the amounts payable under the terms of this agreement ("Agreement") each period by the due date. This Agreement will begin on the date the Equipment is delivered to you or any later date we designate. We may charge you a one-time origination fee of \$125.00. If we do not receive by the due date, at the remittance address indicated on your invoice, any amount payable to us, you will pay a late charge equal to: 1) the greater of ten (10) cents for each dollar overdue or twenty-six dollars (\$26.00); or 2) the highest lawful charge, if less.

NET AGREEMENT. THIS AGREEMENT IS NON-CANCELABLE FOR THE ENTIRE AGREEMENT TERM. YOU UNDERSTAND WE ARE PAYING FOR THE EQUIPMENT BASED ON YOUR UNCONDITIONAL ACCEPTANCE OF IT AND YOUR PROMISE TO PAY US UNDER THE TERMS OF THIS AGREEMENT, WITHOUT SET-OFFS FOR ANY REASON, EVEN IF THE EQUIPMENT DOES NOT WORK OR IS DAMAGED, EVEN IF IT IS NOT YOUR FAULT.

EQUIPMENT USE. You will keep the Equipment in good working order, use it for business purposes only, and not modify or move it from its initial location without our consent. You must resolve any dispute you may have concerning the Equipment with the manufacturer or Vendor. Payments under this Agreement may include amounts you owe your Vendor under a separate arrangement (for maintenance, service, supplies, etc.), which amounts may be invoiced by us on your Vendor's behalf for your convenience.

SOFTWARE/DATA. Except as provided in this paragraph, references to "Equipment" include any software referenced above or installed on the Equipment. We do not own the software and cannot transfer any interest in it to you. We are not responsible for the software or the obligations of you or the licensor under any license agreement. You are solely responsible for protecting and removing any confidential data/images stored on the Equipment prior to its return for any reason.

NO WARRANTY. WE MAKE NO WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. YOU HAVE ACCEPTED THE EQUIPMENT "AS-IS". YOU CHOSE THE EQUIPMENT, THE VENDOR AND ANY/ALL SERVICE PROVIDER(S) BASED ON YOUR JUDGMENT. YOU MAY CONTACT YOUR VENDOR FOR A STATEMENT OF THE WARRANTIES, IF ANY, THAT THE MANUFACTURER OR VENDOR IS PROVIDING. WE ASSIGN TO YOU ANY WARRANTIES GIVEN TO US.

ASSIGNMENT. You may not sell, assign or sublease the Equipment or this Agreement without our written consent. We may sell or assign this Agreement or our rights in the Equipment, in whole or in part, to a third party without notice to you. You agree that if we do so, the assignee will have our rights but will not be subject to any claim, defense, or set-off assertable against us or anyone else.

LAW/FORUM. This Agreement and any claim related to this Agreement will be governed by Iowa law. Any dispute will be adjudicated in a state or federal court located in Linn County, Iowa. You consent to personal jurisdiction and venue in such courts and waive transfer of venue. Each party waives any right to a jury trial.

LOSS OR DAMAGE. You are responsible for any damage to or loss of the Equipment. No such loss or damage will relieve you from your payment obligations hereunder. We are not responsible for, and you will indemnify us against, any claims, losses or damages, including attorney fees, in any way relating to the Equipment or data stored on it. This indemnity will survive the expiration of this Agreement. In no event will we be liable for any consequential or indirect damages.

INSURANCE. You agree to maintain commercial general liability insurance acceptable to us. You also agree to: 1) keep the Equipment fully insured against loss at its replacement cost, with us named as loss payee; and 2) provide proof of insurance satisfactory to us no later than 30 days following the commencement of this Agreement, and thereafter upon our written request. If you fail to maintain property loss insurance satisfactory to us and/or you fail to timely provide proof of such insurance, we have the option, but not the obligation, to secure property loss insurance on the Equipment from a carrier of our choosing in such forms and amounts as we deem reasonable to protect our interests. If we secure insurance on the Equipment, we will not name you as an insured party, your interests may not be fully protected, and you will reimburse us the premium which may be higher than the premium you would pay if you obtained insurance, and which may result in a profit to us through an investment in reinsurance. If you are current in all of your obligations under the Agreement at the time of loss, any insurance proceeds received will be applied, at our option, to repair or replace the Equipment, or to pay us the remaining payments due or to become due under this Agreement, plus our booked residual, both discounted at 3% per annum.

TAXES. We own the Equipment. You will pay when due, either directly or by reimbursing us, all taxes and fees relating to the Equipment and this Agreement. Sales or use tax due upfront will be payable over the term with a finance charge.

END OF TERM. At the end of the term of this Agreement (or any renewal term) (the "End Date"), this Agreement will renew month to month unless a) we receive written notice from you, at least 30 days prior to the End Date, of your intent to return the Equipment, and b) you timely return the Equipment to the location designated by us, at your expense. If a Purchase Option is indicated above and you are not in default on the End Date, you may purchase the Equipment from us "AS IS" for the Purchase Option price. If the returned Equipment is not immediately available for use by another without need of repair, you will reimburse us for all repair costs. You cannot pay off this Agreement or return the Equipment prior to the End Date without our consent. If we consent, we may charge you, in addition to other amounts owed, an early termination fee equal to 5% of the amount we paid for the Equipment.

DEFAULT/REMEDIES. If a payment becomes 10+ days past due, or if you otherwise breach this Agreement, you will be in default, and we may require that you return the Equipment to us at your expense and pay us: 1) all past due amounts and 2) all remaining payments for the unexpired term, plus our booked residual, discounted at 3% per annum; and we may disable or repossess the Equipment and use all other legal remedies available to us. You agree to pay all costs and expenses (including reasonable attorney fees) we incur in any dispute with you related to this Agreement. You agree to pay us interest on all past due amounts at the rate of 1.5% per month, or at the highest rate allowed by applicable law, if less.

UCC. You agree that this Agreement is (and/or shall be treated as) a "Finance Lease" as that term is defined in Article 2A of the Uniform Commercial Code ("UCC"). You agree to forgo the rights and remedies provided under sections 507-522 of Article 2A of the UCC.

MISCELLANEOUS. This Agreement is the entire agreement between you and us relating to the Equipment and supersedes any prior representations or agreements, including any purchase orders. Amounts payable under this Agreement may include a profit to us. The parties agree that the original hereof for enforcement and perfection purposes, and the sole "record" constituting "chattel paper" under the UCC, is the paper copy hereof bearing (i) the original or a copy of either your manual signature or an electronically applied indication of your intent to enter into this Agreement, and (ii) our original manual signature. If any provision of this Agreement is unenforceable, the other provisions herein shall remain in full force and effect to the fullest extent permitted by law. Any change must be in writing signed by each party.

APPLICABLE TO GOVERNMENTAL ENTITIES ONLY

You hereby represent and warrant to us that as of the date of the Agreement: (a) the individual who executed the Agreement had full power and authority to execute the Agreement on your behalf; (b) all required procedures necessary to make the Agreement a legal and binding obligation against you have been followed; (c) the Equipment will be operated and controlled by you and will be used for essential government purposes for the entire term of the Agreement; (d) that all payments due and payable for the current fiscal year are within the current budget and are within an available, unexhausted, and unencumbered appropriation; (e) you intend to pay all amounts payable under the terms of the Agreement when due, if funds are legally available to do so; (f) your obligations to remit amounts under the Agreement constitute a current expense and not a debt under applicable state law; (g) no provision of the Agreement constitutes a pledge of your tax or general revenues; and (h) you will comply with any applicable information reporting requirements of the tax code, which may include 8038-G or 8038-GC Information Returns. If funds are not appropriated to pay amounts due under the Agreement for any future fiscal period, you shall have the right to return the Equipment and terminate the Agreement on the last day of the fiscal period for which funds were available, without penalty or additional expense to you (other than the expense of returning the Equipment to the location designated by us), provided that at least thirty (30) days prior to the start of the fiscal period for which funds were not appropriated, your Chief Executive Officer (or Legal Counsel) delivers to us a certificate (or opinion) certifying that (a) you are a state or a fully constituted political subdivision or agency of the state in which you are located; (b) funds have not been appropriated for the applicable fiscal period to pay amounts due under the Agreement; (c) such non-appropriation did not result from any act or failure to act by you; and (d) you have exhausted all funds legally available for the payment of amounts due under the Agreement. You agree that this paragraph shall only apply if, and to the extent that, state law precludes you from entering into the Agreement if the Agreement constitutes a multi-year unconditional payment obligation.

OWNER ("WE", "US", "OUR")

CUSTOMER'S AUTHORIZED SIGNATURE

THIS AGREEMENT IS NON-CANCELABLE FOR THE FULL AGREEMENT TERM. THIS AGREEMENT IS BINDING WHEN WE EXECUTE THIS AGREEMENT AND PAY FOR THE EQUIPMENT.

OWNER: GreatAmerica Financial Services Corporation

CUSTOMER: (As Stated Above)

SIGNATURE: *Carrie Kelson*

DATE: 2/6/2025

SIGNATURE: *X Vern Hestby*

DATE: 2-26-2025

PRINT NAME & TITLE: Carrie Kelson

PRINT NAME & TITLE: Vern Hestby Judge

CERTIFICATE OF DELIVERY AND ACCEPTANCE

The Customer hereby certifies that all the Equipment: 1) has been received, installed, and inspected, and 2) is fully operational and unconditionally accepted.

SIGNATURE: X

NAME AND TITLE:

DATE:



Amendment

This Amendment amends that certain agreement by and between GreatAmerica Financial Services Corporation ("Owner") and Calhoun, County of _____ ("Customer") which agreement is identified in the Owner's internal books and records as Agreement No. 3119835 _____ (the "Agreement"). All capitalized terms used in this Amendment, which are not otherwise defined herein, shall have the meanings given to such terms in the Agreement. Owner and Customer have mutually agreed that the following modifications be made to the Agreement.

The Section entitled INSURANCE is hereby deleted in its entirety and replaced with the following:

"You Agree: (a) to keep the Equipment fully insured against loss at its replacement cost; and (b) to maintain comprehensive public liability insurance."

Except as specifically modified by this Amendment, all other terms and conditions of the Agreement remain in full force and effect. If, and to the extent there is a conflict between the terms of this Amendment and the terms of the Agreement, the terms of this Amendment shall control. A facsimile copy of this Amendment bearing authorized signatures may be treated as an original. This Amendment is not binding until accepted by Owner.

GreatAmerica Financial Services Corporation

Calhoun, County of _____

By: Carrie Kelso
Signature

By: X [Signature]
Signature

Carrie Kelso Docs. Spec.
Print Name & Title

Vern Lyssy
Print Name & Title

Date Accepted: 2/6/2025

Date: 2-26-2025

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
2025-1267918

Date Filed:
02/11/2025

Date Acknowledged:

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

Dewitt Poth & Son, LLC
Yoakum, TX United States

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.

1936246
Copier and supplies - 3119835

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO interested Party.

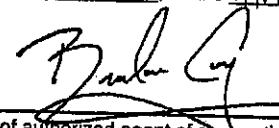
6 UNSWORN DECLARATION

My name is Brandon Cowley and my date of birth is 04/20/1985

My address is 102 West Street Yoakum TX 77995 USA
(street) (city) (state) (zip code) (country)

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

Executed in De Witt County, State of Texas, on the 11th day of Feb, 2025.
(month) (year)


Signature of authorized agent of contracting business entity (Declarant)

12

12. Consider and take necessary action to approve a request from Kinder Morgan Tejas pipeline LLC, for a temporary workspace and access agreement in the Sea Lake Subdivision situated in Calhoun County, TX. (JMB)

James with Kinder Morgan Tejas pipeline LLC asked for permission.	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

Joel Behrens
Calhoun County Commissioner, Precinct 3

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



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

RE: Agenda Item

Dear Judge Lyssy:

Please place the following item on the Commissioner's Court Agenda for February 26, 2025.

Consider and take necessary action to approve a request from Kinder Morgan Tejas pipeline LLC, for a temporary workspace and access agreement in the Sea Lake Subdivision situated in Calhoun County, TX.

Sincerely,
Joel Behrens
Commissioner Pct. 3

Line No: KM Tejas Formosa Interconnect
County: Calhoun
State: Texas

TEMPORARY WORKSPACE AND ACCESS AGREEMENT

This Temporary Workspace and Access Agreement (the "Agreement"), is by and between Eugene and Renda Hozibal, whose address is 683 Seakist Road, Port Lavaca, Texas 77979, (hereinafter "Grantor" whether one or more), and Kinder Morgan Tejas Pipeline LLC, a Delaware limited liability company, whose address for all correspondence is 1001 Louisiana Street, Suite 1000, Houston, Texas 77002, and its successors and assigns (collectively, "Grantee") (Grantor and Grantee each a "Party" and collectively the "Parties"). Grantor, for themselves, their heirs, successors and assigns, for and in consideration of the sum of Two Thousand Five Hundred Dollars (\$2,500.00) and other valuable consideration, the receipt and adequacy of which are hereby acknowledged, does hereby grant, sell, warrant, convey, transfer and confer effective this the 8 day of February 2025, ("Effective Date") unto Grantee the following temporary workspace and access easements for the purposes of accessing, the Temporary Workspace Easement for the new KM Tejas Formosa Interconnect Pipeline (the "Pipeline"), including, but not limited to the right of ingress and egress and the rights to engage in surveying, construction activities, clearing trees, staging and operation of equipment, machinery, vehicles and materials of the Pipeline in, on, over, under, across, upon, and through the following described property ("Grantor's Lands") situated in the County of Calhoun, State of Texas, to wit:

Being Lot 26, Block 2, Section 1, Sea Lake Subdivision, Calhoun County, Texas.

1. Grantor conveys a temporary workspace easement to Grantee for the above-described purposes, being a tract of land approximately 50-ft x by 120-ft or 6,000 Square Feet located as generally depicted on Exhibit "A" attached hereto and made a part hereof (the "TWS Easement"). The TWS Easement shall be for a period of up to (60) consecutive days from the commencement of construction activities to the end of construction on the Property (the "Term").
2. Grantor further conveys a temporary, non-exclusive, unobstructed access easement (the "Access Easement") (the Access Easement and TWS Easement collectively the "Easements") to Grantee for the above-described purposes providing Grantee the right of ingress and egress over, across, and through Grantor's Lands as generally depicted on Exhibit "A", in order that Grantee may access its TWS Easement or otherwise exercise the rights granted herein. The Access Easement shall be for a period not to exceed the Term as and shall be used during such hours as outlined in Section 1, above.
3. This grant shall include, without limitation, Grantee's, its agents, employees, designees, contractors, guests, invitees, successors and assigns, the right of ingress and egress over, across, and through the Easements and to access the easements where same intersects any public road or public rights-of-way or other easement which Grantee has the right to access.
4. The right to use the Easements shall belong to Grantee, its agents, employees, designees, contractors, invitees, successors and assigns and all those acting by or on behalf of Grantee for the purposes established herein. Grantee shall have the right, without paying damages to Grantor, to cut, mow, and/or trim or cut down or eliminate all trees, brush, undergrowth, plantings, invasive plants or noxious weeds from the Easements. Grantee shall have the right, without paying damages to Grantor, to remove or prevent the construction of any buildings, fences, structures, or other obstructions that may endanger or interfere with Grantee's use of the Easements or the exercise of its rights granted herein.
5. Upon expiration of the Term (or upon receipt of Grantee's written confirmation that Grantee has completed its use of the TWS Easement), Grantee shall restore the Easements to the condition in which they existed prior to

Grantee's use of same, including the repair or restoration of any fencing, at which point all of Grantee's right, title and interest in the Easements shall terminate unless the Parties agree in writing otherwise.

6. The consideration paid by Grantee in this Agreement includes the market value of the Easements and any and all damages to Grantor's remaining property and for reasonably anticipated damages caused to the surface of Grantor's Lands within the Easements. It is agreed that any payment due hereunder may be made directly to Grantor, or any one of them as directed in writing.

7. Grantee and all persons entering or leaving Grantor's Lands in connection with Grantee's operations hereunder shall keep all outside and interior gates along the route designated for the Access Easement in Exhibit "A" securely closed except immediately before and immediately after each such separate use. To the extent applicable, Grantee shall place its own lock (or the type designated by Grantor) on the designated entrance gate and shall provide Grantor with a key to each lock. Grantee will maintain approaches, gates, cattle guards and roadways used by Grantee in connection with its operations in a good state of repair and will promptly cause to be repaired and restored any damage thereto occasioned by or resulting from Grantee's operations under the terms of this Agreement.

8. No delay of Grantee in the use or enjoyment of any right or Easements herein granted shall result in the loss, limitation, or abandonment of any of the right, title, interest, Easements, or estate granted herein.

9. Grantee agrees to defend, indemnify and hold harmless Grantor from any claims or suits that may be asserted against Grantor by third-parties arising or resulting from Grantee's use of the Easements to the extent caused by Grantee's gross negligence or intentional misconduct. Notwithstanding this commitment to indemnify, Grantee shall not defend, indemnify or hold harmless Grantor for any claim, suits or losses that are caused by or arise from the sole or comparative negligence, or willful acts or omissions of Grantor, Grantor's affiliates, and their respective employees, agents, contractors, subcontractors, tenants, licensees, or invitees. Neither Party shall be liable hereunder for indirect, special, speculative, remote, consequential or punitive damages (including lost profits or savings) even if it has been advised of their possible existence, except that the foregoing shall not restrict a Party's ability to recover actual damages for breach of this Agreement.

10. This Agreement may be signed in counterparts and all such counterparts shall be deemed as originals and binding upon each Party executing any counterpart and upon their respective heirs, personal representatives, successors, and assigns. Similarly, electronic mail or facsimile signatures shall be deemed as an original signature by the enforcing Party.

11. The terms and provisions hereof shall inure to the benefit of and be binding upon Grantor and Grantee and their respective heirs, successors, and assigns.

12. This grant covers all the agreements and stipulations between Grantor and Grantee and no representations or statements, verbal or written, have been made modifying, adding to, or changing the terms or consideration for this grant. This Agreement, together with exhibits incorporated herein by reference, if any, embodies the entire agreement between the Parties. There are no promises, terms, conditions, or obligations other than those contained herein; and this Agreement shall supersede all previous communications, representations, or agreements, either verbal or written, between the parties.

IN WITNESS WHEREOF, Grantor and Grantee herein have duly executed this Agreement to be effective on the date first set forth above.

(Signatures on following page)

Line No: KM Tejas Formosa Interconnect
County: Calhoun
State: Texas

ACCEPTED AND AGREED:

GRANTOR(S):

EUGENE AND RENDA HOZIBAL

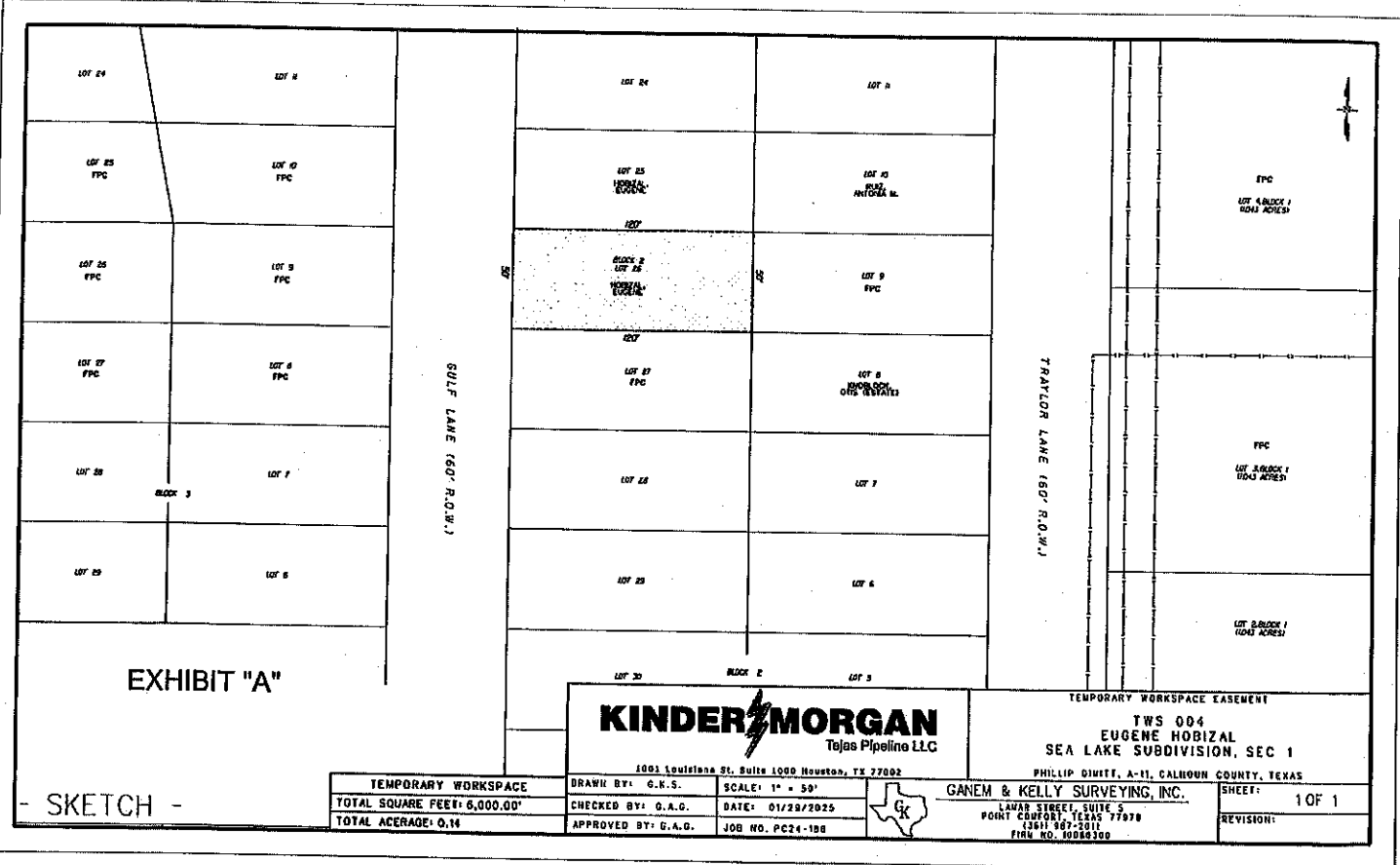
By: *Renda Hozibal*
Name: ~~David Renda~~ Renda Hozibal
Date: 2-8-25

By: *Eugene Hozibal*
Name: Eugene HOZIBAL
Date: 2/8/25

GRANTEE:

KINDER MORGAN TEJAS PIPELINE L.L.C.
a Delaware limited liability company

By: *Brittany Stoltz*
Name: Brittany Stoltz
Title: Attorney in fact
Date: 2/12/25



- SKETCH -

EXHIBIT "A"

KINDER MORGAN
Tejas Pipeline LLC

1001 Louisiana St, Suite 1000 Houston, TX 77002

TEMPORARY WORKSPACE EASEMENT
TWS 004
EUGENE HOBIZAL
SEA LAKE SUBDIVISION, SEC 1
PHILLIP DIMITT, A-11, CALHOUN COUNTY, TEXAS

TEMPORARY WORKSPACE
TOTAL SQUARE FEET: 6,000.00"
TOTAL ACERAGE: 0.11

DRAWN BY: G.K.S.
CHECKED BY: G.A.G.
APPROVED BY: G.A.G.

SCALE: 1" = 50'
DATE: 01/29/2025
JOB NO. PC24-188



GANEM & KELLY SURVEYING, INC.
LAWAR STREET, SUITE 5
POINT COMFORT, TEXAS 77978
(361) 987-5011
FIRM NO. 10088300

SHEET: 1 OF 1
REVISION:

Line No: KM Tejas Formosa Interconnect
County: Calhoun
State: Texas

TEMPORARY WORKSPACE AND ACCESS AGREEMENT

This Temporary Workspace and Access Agreement (the "Agreement"), is by and between David Rutherford, whose address is 1648 County Road 430, Lolita, Texas 77971, (hereinafter "Grantor" whether one or more), and Kinder Morgan Tejas Pipeline LLC, a Delaware limited liability company, whose address for all correspondence is 1001 Louisiana Street, Suite 1000, Houston, Texas 77002, and its successors and assigns (collectively, "Grantee") (Grantor and Grantee each a "Party" and collectively the "Parties"). Grantor, for themselves, their heirs, successors and assigns, for and in consideration of the sum of One Thousand Dollars (\$1,000.00) and other valuable consideration, the receipt and adequacy of which are hereby acknowledged, does hereby grant, sell, warrant, convey, transfer and confer effective this the ___ day of _____, 2025, ("Effective Date") unto Grantee the following temporary workspace and access easements for the purposes of accessing, the Temporary Workspace Easement for the new KM Tejas Formosa Interconnect Pipeline (the "Pipeline"), including, but not limited to the right of ingress and egress and the rights to engage in surveying, construction activities, clearing trees, staging and operation of equipment, machinery, vehicles and materials of the Pipeline in, on, over, under, across, upon, and through the following described property ("Grantor's Lands") situated in the County of Calhoun, State of Texas, to wit:

Being Lot 8, Block 2, Section 1, Sea Lake Subdivision, Calhoun County, Texas.

1. Grantor conveys a temporary workspace easement to Grantee for the above-described purposes, being a tract of land approximately 50-ft x by 120-ft or 6,000 Square Feet located as generally depicted on Exhibit "A" attached hereto and made a part hereof (the "TWS Easement"). The TWS Easement shall be for a period of up to (60) consecutive days from the commencement of construction activities to the end of construction on the Property (the "Term").
2. Grantor further conveys a temporary, non-exclusive, unobstructed access easement (the "Access Easement") (the Access Easement and TWS Easement collectively the "Easements") to Grantee for the above-described purposes providing Grantee the right of ingress and egress over, across, and through Grantor's Lands as generally depicted on Exhibit "A", in order that Grantee may access its TWS Easement or otherwise exercise the rights granted herein. The Access Easement shall be for a period not to exceed the Term as and shall be used during such hours as outlined in Section 1, above.
3. This grant shall include, without limitation, Grantee's, its agents, employees, designees, contractors, guests, invitees, successors and assigns, the right of ingress and egress over, across, and through the Easements and to access the easements where same intersects any public road or public rights-of-way or other easement which Grantee has the right to access.
4. The right to use the Easements shall belong to Grantee, its agents, employees, designees, contractors, invitees, successors and assigns and all those acting by or on behalf of Grantee for the purposes established herein. Grantee shall have the right, without paying damages to Grantor, to cut, mow, and/or trim or cut down or eliminate all trees, brush, undergrowth, plantings, invasive plants or noxious weeds from the Easements. Grantee shall have the right, without paying damages to Grantor, to remove or prevent the construction of any buildings, fences, structures, or other obstructions that may endanger or interfere with Grantee's use of the Easements or the exercise of its rights granted herein.
5. Upon expiration of the Term (or upon receipt of Grantee's written confirmation that Grantee has completed its use of the TWS Easement), Grantee shall restore the Easements to the condition in which they existed prior to

Grantee's use of same, including the repair or restoration of any fencing, at which point all of Grantee's right, title and interest in the Easements shall terminate unless the Parties agree in writing otherwise.

6. The consideration paid by Grantee in this Agreement includes the market value of the Easements and any and all damages to Grantor's remaining property and for reasonably anticipated damages caused to the surface of Grantor's Lands within the Easements. It is agreed that any payment due hereunder may be made directly to Grantor, or any one of them as directed in writing.

7. Grantee and all persons entering or leaving Grantor's Lands in connection with Grantee's operations hereunder shall keep all outside and interior gates along the route designated for the Access Easement in Exhibit "A" securely closed except immediately before and immediately after each such separate use. To the extent applicable, Grantee shall place its own lock (or the type designated by Grantor) on the designated entrance gate and shall provide Grantor with a key to each lock. Grantee will maintain approaches, gates, cattle guards and roadways used by Grantee in connection with its operations in a good state of repair and will promptly cause to be repaired and restored any damage thereto occasioned by or resulting from Grantee's operations under the terms of this Agreement.

8. No delay of Grantee in the use or enjoyment of any right or Easements herein granted shall result in the loss, limitation, or abandonment of any of the right, title, interest, Easements, or estate granted herein.

9. Grantee agrees to defend, indemnify and hold harmless Grantor from any claims or suits that may be asserted against Grantor by third-parties arising or resulting from Grantee's use of the Easements to the extent caused by Grantee's gross negligence or intentional misconduct. Notwithstanding this commitment to indemnify, Grantee shall not defend, indemnify or hold harmless Grantor for any claim, suits or losses that are caused by or arise from the sole or comparative negligence, or willful acts or omissions of Grantor, Grantor's affiliates, and their respective employees, agents, contractors, subcontractors, tenants, licensees, or invitees. Neither Party shall be liable hereunder for indirect, special, speculative, remote, consequential or punitive damages (including lost profits or savings) even if it has been advised of their possible existence, except that the foregoing shall not restrict a Party's ability to recover actual damages for breach of this Agreement.

10. This Agreement may be signed in counterparts and all such counterparts shall be deemed as originals and binding upon each Party executing any counterpart and upon their respective heirs, personal representatives, successors, and assigns. Similarly, electronic mail or facsimile signatures shall be deemed as an original signature by the enforcing Party.

11. The terms and provisions hereof shall inure to the benefit of and be binding upon Grantor and Grantee and their respective heirs, successors, and assigns.

12. This grant covers all the agreements and stipulations between Grantor and Grantee and no representations or statements, verbal or written, have been made modifying, adding to, or changing the terms or consideration for this grant. This Agreement, together with exhibits incorporated herein by reference, if any, embodies the entire agreement between the Parties. There are no promises, terms, conditions, or obligations other than those contained herein; and this Agreement shall supersede all previous communications, representations, or agreements, either verbal or written, between the parties.

IN WITNESS WHEREOF, Grantor and Grantee herein have duly executed this Agreement to be effective on the date first set forth above.

(Signatures on following page)

Line No: KM Tejas Formosa Interconnect
County: Calhoun
State: Texas

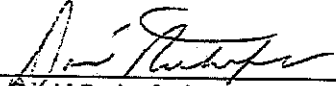
ACCEPTED AND AGREED:


GRANTOR(S):

DAVID RUTHERFORD

GRANTEE:

KINDER MORGAN TEJAS PIPELINE LLC,
a Delaware limited liability company

By: 
Name: David Rutherford
Date: 2/10/15

By: 
Name: Britany Stahl
Title: Attorney in fact
Date: 2/10/15

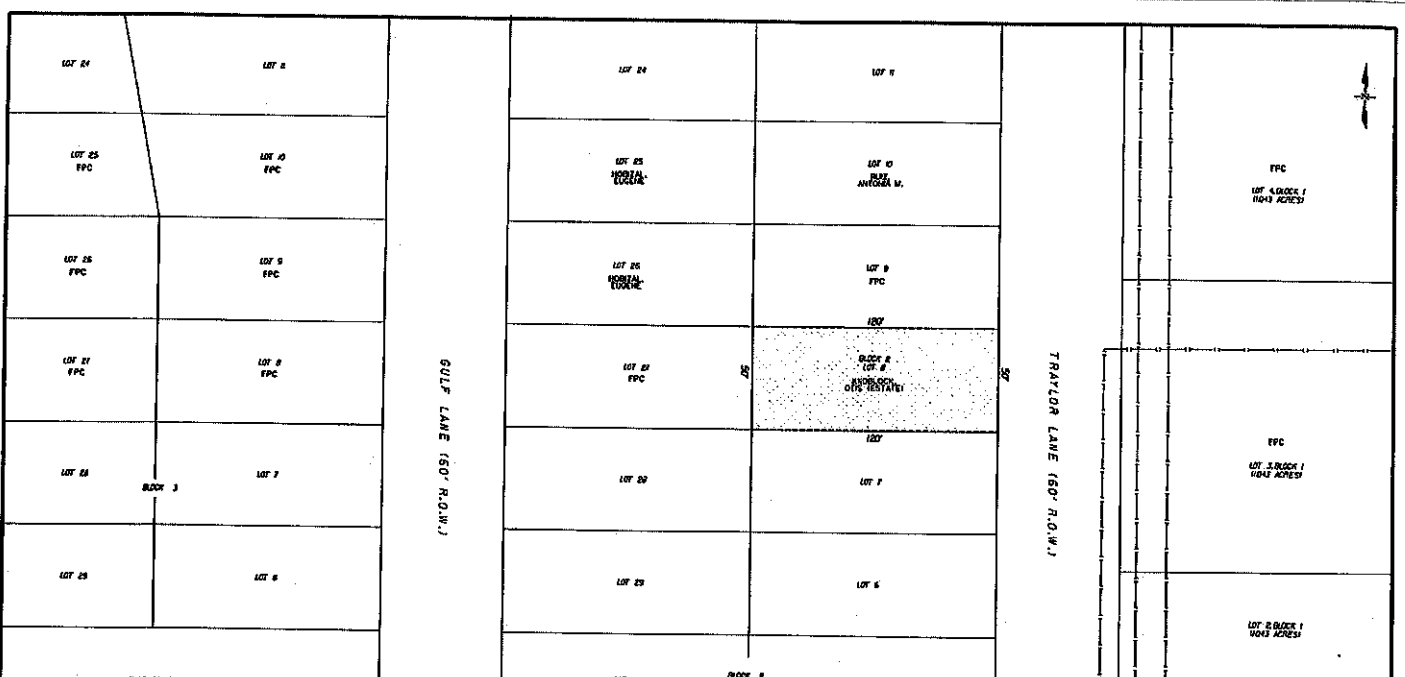


EXHIBIT "A"

- SKETCH -

KINDER MORGAN
 Tejas Pipeline LLC
 1001 Louisiana St. Suite 1000 Houston, TX 77002

TEMPORARY WORKSPACE EASEMENT
 TWS 003
 OTIS KNOBLOCK (ESTATE)
 SEA LAKE SUBDIVISION, SEC 1
 PHILLIP OMIFF, A-11, CALHOUN COUNTY, TEXAS

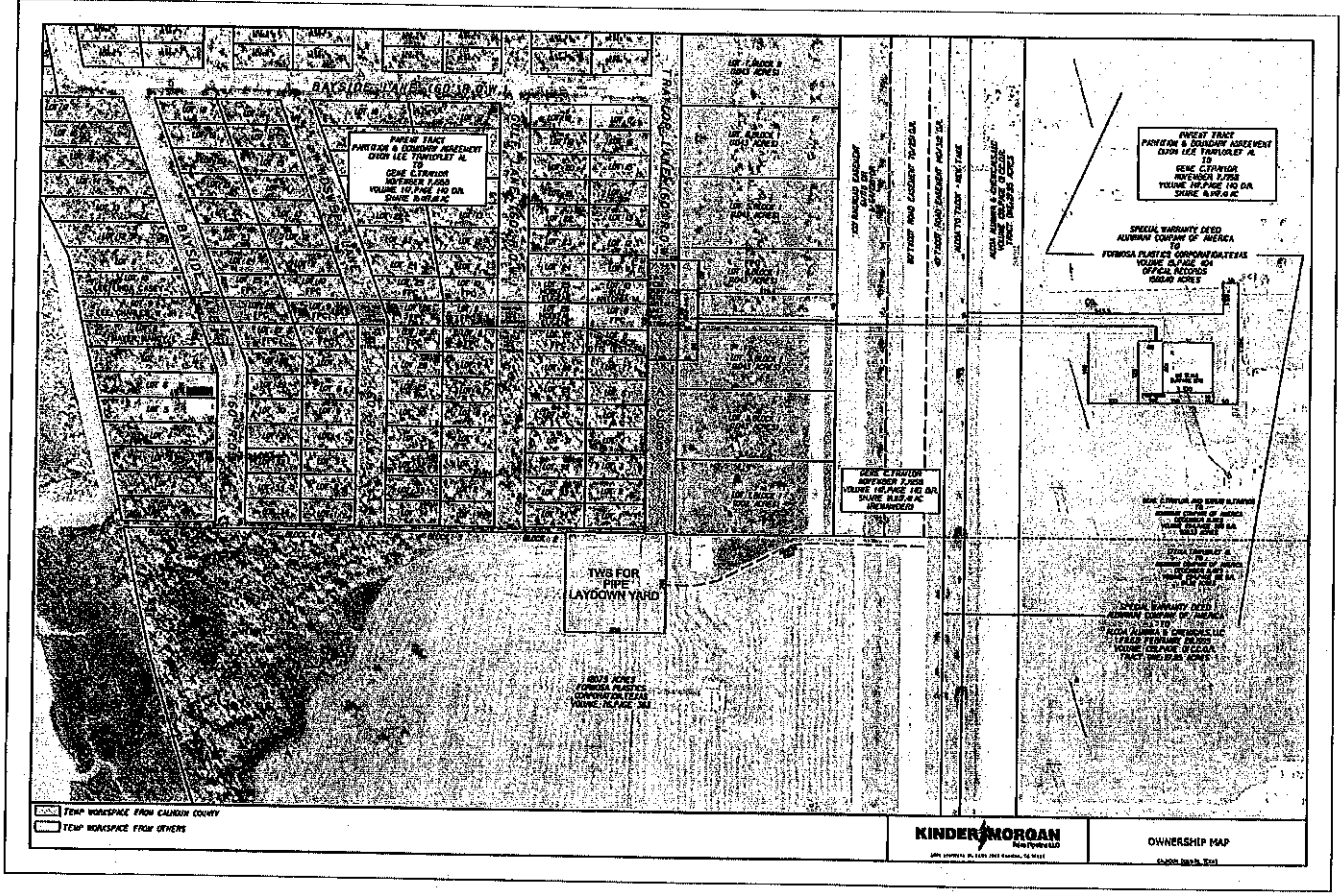
TEMPORARY WORKSPACE
TOTAL SQUARE FEET: 6,000.00'
TOTAL ACERAGE: 0.14

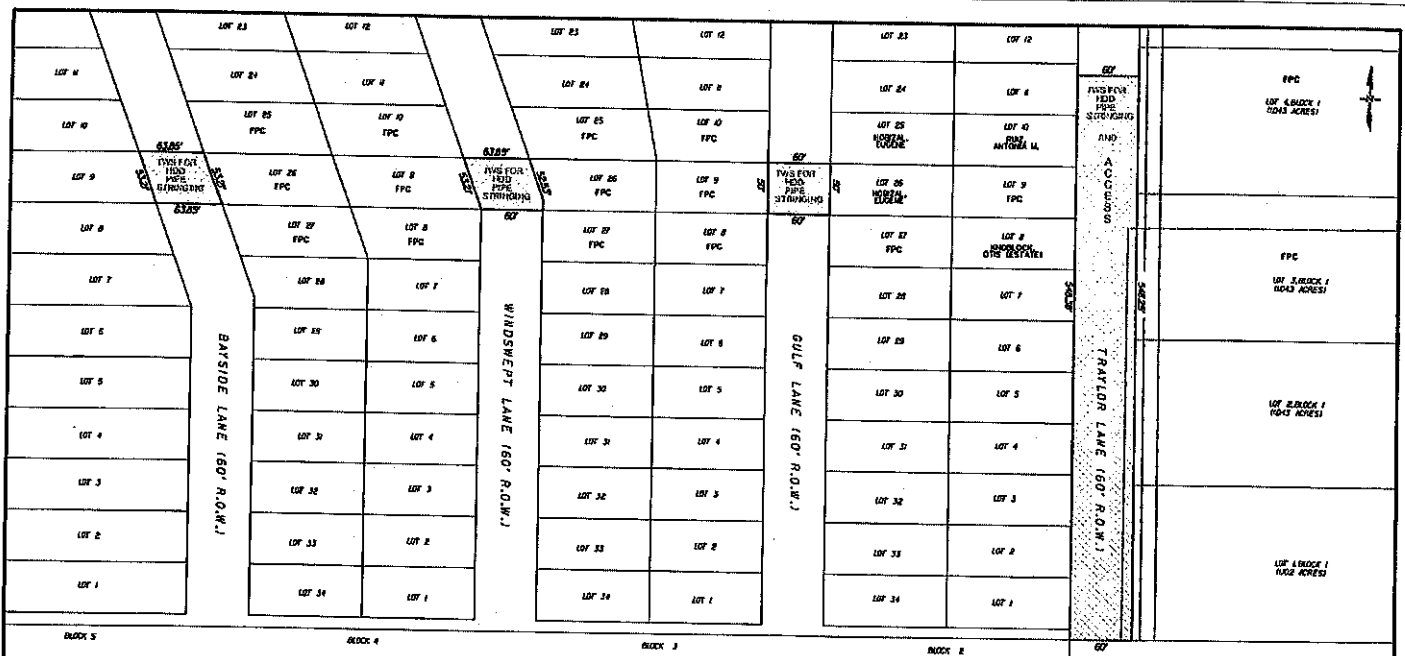
DRAWN BY: G.K.S.	SCALE: 1" = 50'
CHECKED BY: G.A.G.	DATE: 01/29/2025
APPROVED BY: G.A.G.	JOB NO. PC24-198



GANEM & KELLY SURVEYING, INC.
 LAMAR STREET, SUITE 3
 POINT COMFORT, TEXAS 77978
 (361) 987-5018
 FIRM NO. 10080390

SHEET: 1 OF 1
REVISION:





-PRELIMINARY-
THIS DOCUMENT SHALL NOT BE RECORDED FOR ANY
PURPOSE AND SHALL NOT BE USED OR VIEWED
OR RELIED UPON AS A FINAL SURVEY DOCUMENT

KINDER MORGAN
Texas Pipeline LLC
1001 Louisiana St, Suite 1000 Houston, TX 77002

TEMPORARY WORKSPACE EASEMENT
TWS 001, TWS 005, TWS 009 & TWS 012
CALHOUN COUNTY COMMISSIONER, PRECINCT #3
SEA LAKE SUBDIVISION, SEC. 1
PHILLIP DINI, A-11, CALHOUN COUNTY, TEXAS

TEMPORARY WORKSPACE
TOTAL SQUARE FEET: 42,263.83'
TOTAL ACERAGE: 0.97

DRAWN BY: G.K.S.	SCALE: 1" = 100'
CHECKED BY: G.A.G.	DATE: 01/28/2025
APPROVED BY: G.A.G.	JOB NO. PC24-188



GANEM & KELLY SURVEYING, INC.
LAWAR STREET, SUITE 3
POINT COMFORT, TEXAS 77978
(281) 987-3011
FIRM NO. 180893DD

SHEET#	1 OF 1
REVISION#	

13

13. Public Hearing concerning Petition to Vacate a 1.82 acre portion of Outblock 44, Port O'Connor Townsite Outlots as recorded in Volume 2, Page 1 of the Deed Records of Calhoun County, Texas. (GDR)

**Regular Meeting was closed at 10:16am.
Terry Ruddick explained the Petition to vacate.
Regular Meeting was opened at 10:17**

14

14. Consider and take necessary action to Vacate a 1.82 acre portion of Outblock 44, Port O'Connor Townsite Outlots as recorded in Volume 2, Page 1 of the Deed Records of Calhoun County, Texas. (GDR)

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

15

15. Consider and take necessary action on Proposal for Engineering Services – King Fisher Pier Extension – Port O’ Connor, Texas in the amount of \$48,000 plus reimbursable expenses of \$108.24 and authorize Commissioner Reese to sign proposal. (GDR)

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

G&W ENGINEERS, INC.

205 W. Live Oak • Port Lavaca, TX 77979 • p: (361)552-4509 • f: (361)552-4987
Texas Firm Registration No. F04188

February 17, 2025

Calhoun County Precinct #4
P.O. Box 177
Seadrift, Texas 77983

Attn: Commissioner Gary Reese

RE: PROPOSAL –Engineering Services – King Fisher Pier Extension – Port O’ Connor, Texas

G&W Engineers is pleased to submit this proposal for Engineering Services associated with the pier extension project at King Fisher Pier. We understand the Scope of Work to be as follows:

1. Perform topographic survey as required including, water depth elevations at the extension.
2. The preparation of construction plans for project including all applicable details and plan sheets for a pier extension of 188 linear feet at 10 foot wide and 80 linear feet by 12-foot-wide T-Head. The plan shall also include necessary design for additional lighting.
3. Submission of a Letter to the USACE for Concurrence of NWP for the project.
4. Prepare contract/bid documents and technical specifications for the project, coordinate pre-bid meeting, issue addendums, if necessary, review bids, and provide recommendation for award.
5. Submission of the project to TDLR to a RAS agent is included.
6. Provide construction phase services, including site construction observations, review pay applications and assist with questions if they arise. Also, provide contract support services, conduct a pre-construction meeting and issue a notice to proceed. Conduct a final inspection of the project with Owner and Contractor.

Clarifications:

1. The professional engineering services fee provided is based on the above Scope of Work. Any additions and/or changes to the Scope of Work will require additional funding. Any additions and/or changes will be estimated based upon the current rate schedule.
2. Any fees (if any) incurred by public entities are not included within the scope of this project.
3. It is assumed that the existing electrical infrastructure and service is capable of supporting the additional pier lighting. Upsizing of the service and primary service is not a consideration made when preparing this proposal.
4. CivCastUSA bid fee of \$108.24 shall be a reimbursable fee.

Exclusions:

1. Geotechnical Investigation is not included within this Scope of Work.
2. Advertisement fees not included.

3. Environmental assessments are not included within this scope.
4. Water utility to new dock is not included within the design.
5. Should USACE require a new permit to be filled, the County should contract the work to a qualified environmental firm for the project and pay for those expenses concerning permitting directly with the firm.

G&W Engineers, Inc. proposes to perform this Scope of Work for on a lump sum basis for each task and to be billed on a progress basis. Any costs estimated to be over and above this amount shall be authorized by the owner prior to continuation of work.

A breakdown of phases and their lump sum fees are as follows:

Topographic Survey	\$3,000.00
Construction Plans	\$26,000.00
USACE Permitting Letter	\$3,000.00
Specification and Bidding Phase	\$4,000.00
TDLR Submission	\$2,000.00
Construction Phase	\$10,000.00
TOTAL:	\$48,000.00

Reimbursable Expenses CivCastUSA \$108.24

If this proposal meets with your approval, please sign below and return to G&W Engineers, Inc. as acknowledgement of Notice to Proceed with the project.

We appreciate the opportunity to work with you on this project.

Sincerely,

G&W Engineers, Inc.

Authorize by signing below:

Gary D. Reese Commissioner [Signature] 02-26-25
Printed Name Title Signature Date

File: 9045.017

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**

Certificate Number:
2025-1271322

Date Filed:
02/19/2025

Date Acknowledged:

2/26/25

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

G&W Engineers, Inc.
Port Lavaca, TX United States

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

Calhoun County Precinct #4, Calhoun County, Texas

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.

9045.017
Engineering Services – King Fisher Pier Extension – Port O' Connor, Texas

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Novian, Brian	Port Lavaca, TX United States	X	
Danysh, Henry	Port Lavaca, TX United States	X	
Gohlke, Anthony	Port Lavaca, TX United States	X	
Sappington, Michial	Port Lavaca, TX United States	X	
Mason, Scott	Port Lavaca, TX United States	X	
Parker, Jonathan	Port Lavaca, TX United States	X	

5 Check only if there is NO Interested Party.

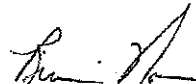
6 UNSWORN DECLARATION

My name is Brian Novian, and my date of birth is [REDACTED]

My address is [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] USA
(street) (city) (state) (zip code) (country)

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

Executed in Calhoun County, State of TEXAS, on the 19 day of Feb., 2025.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

16

16. Consider and take necessary action to approve Change Order No. 1 for the Calhoun County Recycle Waste Transfer Station Project for Calhoun County, Texas and authorize County Judge to sign. (RB)

Scott Mason explained the change order.

RESULT:	APPROVED [UNANIMOUS]
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Ronald Best, Commissioner Pct 2
AYES:	Judge Lyssy, Commissioner Hall, 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

February 18, 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 next Commissioners' Court Agenda

1. Consider and take necessary action to approve Change Order No. 1 for the Calhoun County Recycle Waste Transfer Station Project for Calhoun County, Texas and authorize County Judge to sign.

Sincerely,

Ronald Best

RB/lj

CHANGE ORDER

No. One (1)

PROJECT CALHOUN COUNTY RECYCLE WASTE TRANSFER STATION PROJECT

DATE OF ISSUANCE 02/19/25 EFFECTIVE DATE 2/7/2025

OWNER CALHOUN COUNTY

OWNER's Contract No. 2024.04

CONTRACTOR CON-METAL CONTRACTORS, INC. ENGINEER G & W ENGINEERS, INC.
Job# 5310.023

You are directed to make the following changes in the Contract Documents.

Reason for Change Order:

Use of the testing allowance per the contract documents and Addendum No. 1; which was set at \$20,000.00 total. Additional days added to contract for weather delays between May 2024 and February 2025.

Attachments (List documents supporting change)

**Invoice for Testing from Con-Metal & Addendum No. 1
(reference)**

CHANGE IN CONTRACT PRICE:	CHANGE IN CONTRACT TIMES:
Original Contract Price \$ <u>650,452.75</u>	Original Contract Times Substantial Completion: <u>Feb. 7, 2025</u> Ready for final payment: <u>270</u> <small>days or dates</small>
Net changes from previous Change Orders No. <u>-</u> to No. <u>-</u> \$ <u>-</u>	Net changes from previous Change Orders No. <u>-</u> to No. <u>-</u> <u>N/A</u> <small>days</small>
Contract Price prior to this Change Order \$ <u>650,452.75</u>	Contract Times prior to this Change Order Substantial Completion: <u>Feb. 7, 2025</u> Ready for final payment: <u>270</u> <small>days or dates</small>
Net Increase (decrease) of this Change Order \$ <u>15,509.25</u>	Net Increase (decrease) of this Change Order <u>21 Days</u>
Contract Price with all approved Change Orders \$ <u>665,962.00</u>	Contract Times with all approved Change Orders Substantial Completion: <u>Feb. 28, 2025</u> Ready for final payment: <u>291</u> <small>days or dates</small>

RECOMMENDED:

APPROVED:

ACCEPTED:

By: [Signature], P.E.
Engineer (Authorized Signature)
G & W Engineers, Inc.

By: [Signature]
Owner (Authorized Signature)
Calhoun County

By: [Signature]
Contractor (Authorized Signature)
Con-Metal Contractors, Inc.

Date: 02/13/2025

Date: 2-26-2025

Date: 2/13/25



INVOICE

BILL TO: Calhoun County
 211 South Ann Street, Third Floor, Ste 301
 Port Lavaca, TX 77979

INVOICE #26624-CO
DATE: 02/13/2025

ATTN: Accounting Dept.

SHIPPED VIA	PROJECT NO.	TERMS
Con-Metal Contractors	2024.04 – Recycle Waste Transfer Station Project	NET 10

QUANTITY	DESCRIPTION OF WORK	UNIT PRICE	TOTAL
	<p>Recycle Waste Transfer Station</p> <p><u>Change Order</u></p> <p>TSI Laboratories - Soil Sample Testing and Cylinder Testing</p>		\$ 15,509.25
Total Due This Invoice			\$ 15,509.25

A D D E N D U M N O . 1

to the

CONTRACT DOCUMENTS

FOR

RECYCLE WASTE TRANSFER STATION PROJECT

FOR

CALHOUN COUNTY, TX

BID NUMBER 2024.04

FEBRUARY 23, 2024

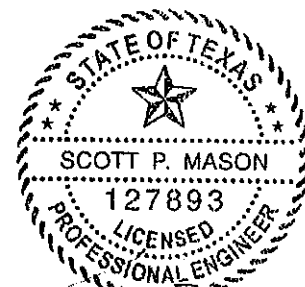
RELEASE DATE: FEBRUARY 28, 2024



Prepared by:

G&W Engineers, Inc.
205 West Live Oak
Port Lavaca, Texas 77979
(361) 552-4509

Approved By:



Scott P. Mason, P.E.

Scott P. Mason, P.E.
Texas Serial No. 127893

Date: 02.23.24

G & W Engineers, Inc.
Texas Registered Engineering Firm F-04188
Project No. 5310.023

Clarifications to the original Contract Documents, Contract Drawings and/or Specifications have been deemed necessary, and in certain cases, revisions to the original Contract Documents, Contract Drawings and/or Specifications are required. If discrepancies and/or inconsistencies exist between these specified revisions and the original Contract Documents, Contract Drawings and/or Specifications, said Addendum No. 1 shall govern.

CLARIFICATIONS:

1. Forms required with proposal as part of the bid package will be acceptable with signature using electronic signature.
2. The Pre-Bid meeting minutes, questions and RFI answers shall be incorporated into the Contract Documents and be officially binding.
3. Submission of a bid with "Clarifications" or "Exclusions" and/or any other stipulations will not be accepted. It shall be the Bidder responsibility to provide a complete bid and ask any questions necessary within the questions period.
4. This project is TAX EXEMPT. Owner will provide a tax-exempt certificate to awarded contractor after contract execution.
5. SAM.gov form, proof, etc. is not required at this time to be submitted with the bid documents. Bidder can still submit if they choose, however, not submitting this will not disqualify the bid. County can elect to request documentation after award if necessary or required.
6. G&W will include on the G&W produced bid tabulations accounting for the testing allowances added to the project and contract. The bidder shall fill in "bid amounts" as normal. Bidder will **not** have to factor or account for any of the testing allowances into the total dollar amount written on the bid form or any of the bid items.

BID FORM "BID" (ITEM 3 FROM TABLE OF CONTENTS)

REMOVE: Entire Section
REPLACE with: "Revised" Section Attached to Addendum DATED 02/28/2024

ITEM 10 FROM TABLE OF CONTENTS

INSERT: Item 10 Certification Regarding Debarment & Suspension and other Responsibility Matters attached to this Addendum No. 1.
REASON: *It was inadvertently left out of the contract documents.*

TECHINCAL SPECIFICATIONS

INSERT: Technical Specification No. 01210 "ALLOWANCES"

Recycle Waste Transfer Station Project 2024.04

Pre-Bid Meeting 02-15-24 Calhoun County Commissioner Courtroom.

Meeting Minutes

- Meeting Starts: 10:00 AM
- Scott Mason calls meeting to order
- Will need to turn 3 physical copies / 1 electronic copy
- Bids due: March 12th @ 2PM
 - To be turned in to Judges office
- Last day to receive questions is February 22nd @ 2 PM
 - Prefer to ask questions on CIVCAST
- 5% required BID Bond
- Bid Proposal Form
 - Can write in, but must be able to read hand writing
- May be an Addendum 1 modify break out bare bid/ owner options
 - May have to do meet budget requirements, but will not affect quantities.
- Specification Notes Sheets
 - Must be turned in
 - Calendar dates must be filled in
 - Acknowledge and sign Addendum #1
- SAM.GOV if you're registered ok, but if no registered that's ok. May not need SAM.GOV form, but it will be addressed during Addendum.
- County is strict on answering questions within timeline of Bids/form in Bid package.
- 1295 form will be done when awarded contract
- Did include GeoTech in Bid proposal
- Topo survey
 - Included the Area used for Solid Waste Proposal
 - Make sure aware of where that area is located there
- Building 70x75 on Civil Site Plan. Structural Foundation and Architect the building is 71x76 which is correct.
- Staking not included
 - G&W can verify or work with the contractor to ensure contractor measurements are correct. G&W can provide CAD file after contract is executed.
- Architectural Notes
 - Column spacing is required
- Please not page S0.0 #3 foundation detail (GeoTech)
- The building is a Transfer Station for recycle
 - Truck will go to this building dump on floor, then machinery will then pick up and put in bins. Finally other trucks will come pick up bins and drive them to Corpus Christi, TX.

- Discussions and questions were had and it was discussed that official answers to these questions would be posted in an addendum to CivCastUSA.
- Meeting was adjourned.

G&W ENGINEERS, INC.

205 W. Live Oak • Port Lavaca, TX 77979 • p: (361)552-4509 • f: (361)552-4987
Texas Firm Registration No. F04188

RECYCLE WASTE TRANSFER STATION PROJECT 2024.04

CIVCASTUSA Q/A

1. Is the contractor responsible for providing a windstorm engineer to inspect and certify the metal building to TDI?
 - Contractor is **NOT** responsible for providing windstorm engineer to inspect and certify building construction to TDI. G&W Engineers, Inc. has been contracted to perform windstorm inspections and submit necessary paperwork to TDI.
2. Would you please post the pre-bid meeting attendees list?
 - Pre-Bid Sign in has been posted and uploaded to CIVCASTUSA
3. Will the contractor have site access to water for compaction efforts?
 - Contractor will have access to free water for construction approximately 3 miles away at the Pct. #2 County Barn which can fill 2,000 gallons in 20 minutes and then truck back to site. Or account for paying for water from City of Port Lavaca and trucking to site.
4. Does the engineer have any cut to fill quantities or a take off on the needed amount of fill for the subgrade on the roadway sections under limestone?
 - Cut/fill quantities were not calculated for the project for the amount of fill under the roadway. It will be up to the contractor to account for quantities required.

PRE-BID MEETING Q/A

Questions:

5. Does the County take care of 3rd party testing?
 - 3rd Party Testing to be paid for by contractor. We have added an allowance for 3rd party testing to be included in the final contract price. Bidder does not need to account for this in the bid form on any items or totals. G&W will add this to the contract price when G&W constructs the bid tabulation tables. However, it shall be noted that failed test, re-testing and associated fees shall not be pulled/used from the allowance. Please see addendum and technical specification for "Allowances".
6. It states in the general notes of structural that County (Owner) will pay for testing?
 - Specification 01410 shall govern over the plans when it comes to testing. Please see answer above.

-
7. Do you know if the County will require building permits?
 - Contractor will **not** have to apply for any County building permits, site located outside of city limits.
 8. Gate access?
 - County will put a combination lock so contractors can come and go, without having employees being there.
 9. Any control points to work off of?
 - Yes, control points/benchmarks are provided on the plans
 - Will not be able to provide a CAD file during bidding process but after award and contract execution we can give access to a CAD file of the project.
 10. Any digging contractor has to do to stabilize dirt?
 - Yes, the road will need to be dug out per the plan grades, stabilize the subgrade and then base course will go down.
 - If you have excess dirt, it can be piled/ left on property, anticipated to be within 100 ft+/- away from project area.
 11. Is this site big enough of 1 AC of Disturbance (SSWP)?
 - The project area is anticipated to be 1 ac or less.
 12. Metal building manufacturer may ask about cross bracing, we are open to it.
 - Bracing of most bays is acceptable. Not opposed to rigid or cable bracing on vertical walls. Roof bracing if required shall not limit the clearance height for working machinery inside the building lifting loads into bins.
 13. Drainage gutters need to clear?
 - We do not intend for underground drainage of the gutter system. Simple Splash pads shall be provided to direct the water to the sides of the building/yard and flow overland.
 14. In GeoTech also allowed suspended slab?
 - Yes, however, we have elected to design the building with spread footing due to ground water and depth of drilled shafts necessary. It will be required to construct the foundation as structural engineer has designed.
 15. Can we use select fill from local places?
 - Yes, but need to meet project plans and specifications.
 16. Questions during construction about construction joints.
 - We will be open to contractor questions and will entertain alternative construction joints with awarded contractor.

BID Revised Addendum No. 1 – 02-28-2024

PROJECT NAME: Bid Number 2024.04 - Recycle Waste Transfer Station Project

DUE DATE: Tuesday, March 12, 2024 before 2:00:00 p.m.

NAME: _____

WORK SCOPE is Bids are invited for items and quantities of work generally as follows: a new 5,250 SF Recycling Transfer Station Building. The structure will be a pre-engineered Metal building. The facility will have reinforced concrete foundation, various concrete (push) walls, grading of the site, drainage improvements, new limestone roadway pavement and concrete approach ramps.

BASE BID				
Item	Quantity	Unit	Unit Price	Total Bid Price
1. Furnish all necessary equipment, materials, and labor for mobilization, demobilization, barricades, and insurance.	1	LS		
2. Furnish all necessary equipment, materials, and labor for the installation of the building foundation complete in place, including select fill as designed and includes incorporated concrete push walls and in accordance with the drawings and specifications	1	LS		
3. Furnish all necessary equipment, materials, and labor for the installation of the pre-engineered metal building, siding, gutter system, and roof in accordance with the drawings and specifications. This item includes any engineering cost/fees to receive stamped PEMB drawings from manufacturer.	1	LS		
Total Base Bid				

OWNER'S OPTIONS				
Item	Quantity	Unit	Unit Price	Total Bid Price
Option 1) Furnish all necessary equipment, materials, and labor for the installation of the 8" thick reinforced concrete pavement in accordance with the drawings and specifications	3,470	SF		

OWNER'S OPTIONS Continued..				
Item	Quantity	Unit	Unit Price	Total Bid Price
Option 2) Furnish all necessary equipment, materials, and labor for the installation of the 8" thick limestone pavement (complete in place and in final position) in accordance with the drawings and specifications	17,160	SF		
Option 3) Furnish all necessary equipment, materials, and labor for the installation of the 24" HDPE storm pipe in accordance with the drawings and specifications	77	LF		
Option 4) Furnish all necessary equipment, materials, and labor for the installation of the 15" HDPE storm pipe in accordance with the drawings and specifications	77	LF		
Option 5) Furnish all necessary equipment, materials, and labor for the installation of the precast concrete safety end treatments for 15" storm pipes in accordance with the drawings and specifications	2	EA		
Option 6) Furnish all necessary equipment, materials, and labor for the installation of the precast safety end treatments for 24" storm pipes in accordance with the drawings and specifications	2	EA		
Option 7) Furnish all necessary equipment, materials, and labor for the installation of the drainage swales in accordance with the drawings and specifications	370	LF		
Option 8) Furnish all necessary equipment, materials, and labor for the installation of the general fill material and site grading in accordance with the drawings and specifications. Use/reuse of excavated onsite materials from foundation excavation acceptable.	1	LS		

Note: The award will be based on the BASE BID with consideration of the Owner's Options 1 through 8. The Owner reserves the right to choose all, none or any combination of the Owner's Options at their discretion.

**CERTIFICATION REGARDING DEBARMENT & SUSPENSION
AND OTHER RESPONSIBILITY MATTERS**

In accordance with the Executive Order 12549, the prospective primary participant certifies to the best of his / her knowledge and belief, that its principals:

- a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
- b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification.
- d. Have not within a three-year period preceding this application / proposal had one or more public transactions (federal, state, or local) terminated for cause of default.
- e. Acknowledge that all sub-contractors selected for this project must be in compliance with paragraphs (1) (a - d) of this certification.

Name and Title of Authorized Agent

Date

Signature of Authorized Agent

_____ I am unable to certify to the above statements. My explanation is attached.

DEBARMENT & SUSPENSION

Executive Order 12549--Debarment and Suspension

Source: The provisions of Executive Order 12549 of Feb. 18, 1986, appear at 51 FR 6370, 3 CFR, 1986 Comp., p. 189, unless otherwise noted.

By the authority vested in me as President by the Constitution and laws of the United States of America, and in order to curb fraud, waste, and abuse in Federal programs, increase agency accountability, and ensure consistency among agency regulations concerning debarment and suspension of participants in Federal programs, it is hereby ordered that:

Section 1. (a) To the extent permitted by law and subject to the limitations in Section 1(c), Executive departments and agencies shall participate in a system for debarment and suspension from programs and activities involving Federal financial and nonfinancial assistance and benefits. Debarment or suspension of a participant in a program by one agency shall have government-wide effect.

(b) Activities covered by this Order include but are not limited to: grants, cooperative agreements, contracts of assistance, loans, and loan guarantees.

(c) This Order does not cover procurement programs and activities, direct Federal statutory entitlements or mandatory awards, direct awards to foreign governments or public international organizations, benefits to an individual as a personal entitlement, or Federal employment.

Sec. 2. To the extent permitted by law, Executive departments and agencies shall:

(a) Follow government-wide criteria and government-wide minimum due process procedures when they act to debar or suspend participants in affected programs.

(b) Send to the agency designated pursuant to Section 5 identifying information concerning debarred and suspended participants in affected programs, participants who have agreed to exclusion from participation, and participants declared ineligible under applicable law, including Executive Orders. This information shall be included in the list to be maintained pursuant to Section 5.

(c) Not allow a party to participate in any affected program if any Executive department or agency has debarred, suspended, or otherwise excluded (to the extent specified in the exclusion agreement) that party from participation in an affected program. An agency may grant an exception permitting a debarred, suspended, or excluded party to participate in a particular transaction upon a written determination by the agency head or authorized designee stating the reason(s) for deviating from this Presidential policy. However, I intend that exceptions to this policy should be granted only infrequently.

Sec. 3. Executive departments and agencies shall issue regulations governing their implementation of this Order that shall be consistent with the guidelines issued under Section 6. Proposed regulations shall be submitted to the Office of Management and Budget for review within four months of the date of the guidelines issued under Section 6. The Director of the Office of Management and Budget may return for reconsideration proposed regulations that the Director believes are inconsistent with the guidelines. Final regulations shall be published within twelve months of the date of the guidelines.

Sec. 4. There is hereby constituted the Interagency Committee on Debarment and Suspension, which shall monitor implementation of this Order. The Committee shall consist of representatives of agencies designated by the Director of the Office of Management and Budget.

Sec. 5. The Director of the Office of Management and Budget shall designate a Federal agency to perform the following functions: maintain a current list of all individuals and organizations excluded from program participation under this Order, periodically distribute the list to Federal agencies, and study the feasibility of automating the list; coordinate with the lead agency responsible for government-wide debarment and suspension of contractors; chair the Interagency Committee established by Section 4; and report periodically to the Director on implementation of this Order, with the first report due within two years of the date of the Order.

Sec. 6. The Director of the Office of Management and Budget is authorized to issue guidelines to Executive departments and agencies that govern which programs and activities are covered by this Order, prescribe government-wide criteria and government-wide minimum due process procedures, and set forth other related details for the effective administration of the guidelines.

Sec. 7. The Director of the Office of Management and Budget shall report to the President within three years of the date of this Order on Federal agency compliance with the Order, including the number of exceptions made under Section 2(c), and shall make recommendations as are appropriate further to curb fraud, waste, and abuse.

Implementation in the SRF Programs

A company or individual who is debarred or suspended cannot participate in primary and lower-tiered covered transactions. These transactions include SRF loans and contracts and subcontracts awarded with SRF loan funds.

Under 40 C.F.R. 32.510, the SRF agency must submit a certification stating that it shall not knowingly enter into any transaction with a person who is proposed for debarment, suspended, declared ineligible, or voluntarily excluded from participation in the SRF program. This certification is reviewed by the EPA regional office before the capitalization grant is awarded.

A recipient of SRF assistance directly made available by capitalization grants must provide a certification that it will not knowingly enter into a contract with anyone who is ineligible under the regulations to participate in the project. Contractors on the project have to provide a similar certification prior to the award of a contract and subcontractors on the project have to provide the general contractor with the certification prior to the award of any subcontract.

In addition to actions taken under 40 C.F.R. Part 32, there are a wide range of other sanctions that can render a party ineligible to participate in the SRF program. Lists of debarred, suspended and otherwise ineligible parties are maintained by the General Services Administration and should be checked by the SRF agency and all recipients of funds directly made available by capitalization grants to ensure the accuracy of certifications.

Additional References

C 40 C.F.R. Part 32: EPA Regulations on Debarment and Suspension.

DIVISION 1 - GENERAL REQUIREMENTS

SECTION 01210 - ALLOWANCES

PART I - GENERAL

I.1 RELATED DOCUMENTS

- A. Drawings and general provisions of the Contract, including General and Supplementary Conditions and other Division Specification Sections, apply to this Section.**

1.2 SUMMARY

- A. Section includes administrative and procedural requirements governing allowances.**
 - 1. Certain items are specified in the Contract Documents by allowances. Allowances have been established in lieu of additional requirements and to defer selection of actual services, materials and equipment to a later date when direction will be provided to Contractor. If necessary, additional requirements will be issued by Change Order.**
- B. Types of allowances include the following:**
 - 1. Testing allowances.**

1.3 DEFINITIONS

- A. Allowance: A quantity of work or dollar amount included in the Contract, established in lieu of additional requirements, used to defer selection of actual services, materials and equipment to a later date when direction will be provided to Contractor. If necessary, additional requirements will be issued by Change Order.**

1.4 SELECTION AND PURCHASE

- A. At the earliest practical date after award of the Contract, advise Engineer of the date when final selection of service provider described by an allowance must be completed to avoid delaying the Work.**
- B. At Engineer's request, obtain proposals for each allowance for use in making final selections. Include recommendations that are relevant to performing the Work.**

- C. Execute agreement from the designated service provider.

1.5 SUBMITTALS

- A. Submit proposals for purchase of services included in allowances, in the form specified for Change Orders.

1.6 INFORMATIONAL SUBMITTALS

- A. Submit invoices to show actual quantities of services provided for the project for use in fulfillment of each allowance.
- B. Submit time sheets and other documentation to show labor time and cost for coordination of allowance items that include installation as part of the allowance.
- C. Coordinate and process submittals for allowance items in same manner as for other portions of the Work.

1.7 COORDINATION

- A. Coordinate allowance items with other portions of the Work. Furnish templates/schedules as required to coordinate these services.

1.8 TESTING ALLOWANCES

- A. Use the testing allowance only as directed by Engineer for Owner's purposes and only by Change Orders that indicate amounts to be charged to the allowance.
- B. Contractor's overhead, profit, and related costs for products and equipment ordered by Owner under the testing allowance are included in the allowance and are not part of the Contract Sum. These costs include coordination, meetings, taxes, insurance, equipment rental, and similar costs.
- C. Change Orders authorizing use of funds from the testing allowance will include Contractor's related costs and reasonable overhead and profit margins.
- D. At Project closeout, credit unused amounts remaining in the allowance to Owner by Change Order.

1.9 ADJUSTMENT OF ALLOWANCES

- A. Allowance Adjustment: To adjust allowance amounts, prepare a Change Order proposal based on the difference between purchase amount and the allowance, multiplied by final measurement of work-in-place where

applicable.

1. Include installation costs in purchase amount only where indicated as part of the allowance.
 2. If requested, prepare explanation and documentation to substantiate distribution of overhead costs and other margins claimed.
 3. Submit substantiation of a change in scope of work, if any, claimed in Change Orders related to unit-cost allowances.
 4. Owner reserves the right to establish the quantity of work-in-place by independent quantity survey, measure, or count.
- B. Submit claims for increased costs because of a change in scope or nature of the allowance described in the Contract Documents, whether for the purchase order amount or Contractor's handling, labor, installation, overhead, and profit.
1. Do not include Contractor's or subcontractor's indirect expense in the Change Order cost amount unless it is clearly shown that the nature or extent of work has changed from what could have been foreseen from information in the Contract Documents.
 2. No change to Contractor's indirect expense is permitted for selection of higher- or lower- priced materials or systems of the same scope and nature as originally indicated.
- C. Deniable use of allowance, shall include:
1. Re-testing, additional services, additional trips, and additional overhead associated with failed test. Reference technical specification 01410.
 2. Testing fees completed outside of normal business hours and days, which are the result of being behind schedule or lack of preparation and/or scheduling.
 3. Invoices received after close-out of the project and retainage released. It shall be the CONTRACTOR's responsibility to ensure all invoices are paid and received prior to close out.

PART 2 - PRODUCTS (Not Used)

PART 3 - EXECUTION

3.1 DOCUMENTS/RESULTS

- A. All testing results shall be made available to ENGINEER at all times, and

testing service provider shall provide a copy of results to ENGINEER at the time they are transmitted to CONTRACTOR.

3.2 PREPARATION

- A. Coordinate services for each allowance with related materials and installations to ensure that each allowance item is completely integrated and interfaced with related work.

3.3 SCHEDULE OF ALLOWANCES

- A. Allowance No. 1 (Base Bid) (To be included in final/total contract cost/price) (Testing): Include the net sum of Fifteen Thousand Dollars (\$15,000.00) to be used as directed by the Engineer for making change orders associated with testing for the betterment of the project. All change orders using monies from this allowance will be coordinated and approved by the Owner prior to work being done.
- B. Allowance No. 2 (Owner's Option 1) (To be included in final/total contract cost/price if the owner exercises award of Owner Option) (Testing): Include the net sum of Two Thousand Five Hundred Dollars (\$2,500.00) to be used as directed by the Engineer for making change orders associated with testing for the betterment of the project. All change orders using monies from this allowance will be coordinated and approved by the Owner prior to work being done.
- C. Allowance No. 3 (Owner's Option 2) (To be included in final/total contract cost/price if the owner exercises award of Owner Option) (Testing): Include the net sum of Two Thousand Five Hundred Dollars (\$2,500.00) to be used as directed by the Engineer for making change orders associated with testing for the betterment of the project. All change orders using monies from this allowance will be coordinated and approved by the Owner prior to work being done.

END OF SECTION

17

17. Consider and take necessary action to authorize Commissioner Reese to enter into a Peak Performance HVAC Maintenance Agreement with Victoria Air Conditioning for the Port O'Connor Community Center in the amount of \$3,108 annually, billed at \$777 quarterly and sign all documents. (GDR)

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



Gary D. Reese

County Commissioner
County of Calhoun
Precinct 4



February 19, 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 February 26, 2025.

- Consider and take necessary action to authorize Commissioner Reese to enter into a Peak Performance HVAC Maintenance Agreement with Victoria Air Conditioning for the Port O'Connor Community Center in the amount of \$3,108 annually, billed at \$777 quarterly and sign all documents.

Sincerely,

Gary D. Reese

GDR/at



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

Proposal Date: 2/17/2025

Peak Performance HVAC Maintenance Agreement

4 Maintenance & Filter Change with Task List

Designed Especially For

CALHOUN CTY PRECINCT 4 – PORT O' CONNOR
COMMUNITY CENTER

ATTENTION: APRIL TOWNSEND

PO BOX 177, SEADRIFT TX 77983

EQUIPMENT LOCATED AT:

3674 W ADAMS, PORT O' CONNOR, TX 77982

PHONE NUMBER

APRIL.TOWNSEND@CALHOUNCOTX.ORG

361-785-3141

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

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

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

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

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

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

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

Annual Cost of this agreement shall be \$ 3108.00 plus sales tax (if applicable)

Billing will occur in increments of \$777.00 plus sales tax (if applicable) to be billed upon completion of each maintenance trip.

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

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

5-DX SPLIT SYSTEMS ELECTRIC HEAT

Victoria Air Conditioning, LTD.

By



VAC Sales

VAC Service Manager

Date: 2/17/2025

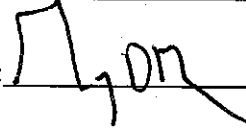
Customer:

Address:

Name: Gary Reese

Title: Commissioner, Pct. 4

Signature:



Date: 02/26/2025

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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

**OFFICE USE ONLY
CERTIFICATION OF FILING**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Victoria Air Conditioning Ltd
Victoria, TX United States

Certificate Number:
2025-1270225

Date Filed:
02/17/2025

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Calhoun County Precinct 4 Commissioners Court

Date Acknowledged:
2/19/25

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

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Heilker, Gay	Victoria, TX United States	X	
Heilker, Warren	Victoria, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Brandon Sappington and my date of birth is [REDACTED]

My address is [REDACTED] USA
(street) (city) (state) (zip code) (country)

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

Executed in Calhoun County, State of Texas, on the 17th day of February, 2025.
(month) (year)

Brandon Sappington
Signature of authorized agent of contracting business entity
(Declarant)

18

18. Consider and take nearly action on allowing Commissioner Hall to sign a non-disclosure agreement for possible interest of purchase of real property located in Alamo Beach PID number 25090. (DEH)

Pass

19

19. Consider and take necessary action to award qualified bidder on Bid No. 2024.12 - Calhoun County Green Lake Park - Phase 1; Project 1. (GDR)

Matt Glaze with Urban Engineering recommended the court award the bid to BLS Construction.

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



Gary D. Reese

County Commissioner
County of Calhoun
Precinct 4



February 20, 2025

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

RE: AGENDA ITEM

Dear Judge Lyssy:

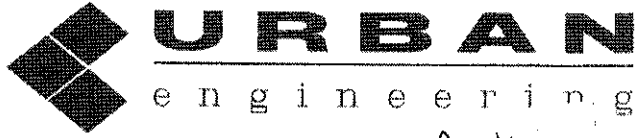
Please place the following item on the Commissioners' Court Agenda for February 26, 2025.

- Consider and take necessary action to award qualified bidder on Bid No. 2024.12 - Calhoun County Green Lake Park - Phase 1; Project 1.

Sincerely,

Gary D. Reese

GDR/at



Green Lake Park
agenda item.

February 20, 2025

The Honorable Vern L. Lyssy, Calhoun County Judge
Calhoun County Courthouse
211 South Ann Street, 3rd Floor, Suite 301
Port Lavaca, TX 77979

RE: Recommendation of Award
U.E. Job No. E23596.00
Bid No. 2024.12 - Calhoun County Green Lake Park – Phase 1; Project 1
Calhoun County, Texas

Dear Judge Lyssy:

On February 13, 2025 at 2:00:00 p.m., public bids were opened for the Bid No. 2024.12 – Calhoun County Green Lake Park – Phase 1; Project 1. The following bids were received:

Bidder	Total Base Bid	Calendar Days to Substantial Completion
B&A Ag-Land Services, LLC	Incomplete	
BLS Construction, Inc.	\$389,038.30	180
Lester Contracting, Inc.	\$478,400.00	180

BLS Construction, Inc. submitted the lowest Bid and stated a completion time of 180 calendar days. I recommend that the contract for the aforementioned project be awarded to BLS Construction, Inc. for the Total Base Bid. (See attached Bid Tabulation)

B&A Ag-Land Services, LLC did not have an active registration with the System for Award Management. Therefore, their bid was determined to be incomplete.

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

Sincerely,

Matt A. Glaze, P.E.
Vice President

MAG/dmf

Attachment

BID TABULATION											
BID NO. 2024.12 - CALHOUN COUNTY											
GREEN LAKE PARK - PHASE 1; PROJECT 1											
BID OPENING: FEBRUARY 13, 2025											
ITEM NO.	DESCRIPTION	ESTIMATED QUANTITY	UNIT	BLS Construction, Inc.		Lester Contracting, Inc.		B&A Ag-Land Services, LLC			
				UNIT PRICE	TOTAL PRICE	UNIT PRICE	TOTAL PRICE	UNIT PRICE	TOTAL PRICE		
BASE BID											
GENERAL											
1.	Mobilization, Insurance and Bonds (Maximum 10% of Base Bid)	1	LS	\$ 33,000.00	\$ 33,000.00	\$ 25,000.00	\$ 25,000.00				
2.	Construction Staking	1	LS	\$ 14,500.00	\$ 14,500.00	\$ 15,000.00	\$ 15,000.00				
SUBTOTAL GENERAL					\$ 47,500.00		\$ 40,000.00				
IMPROVEMENTS											
3.	Mowed Trail (10' TYP)	7,400	LF	\$ 0.85	\$ 6,290.00	\$ 1.00	\$ 7,400.00				
4.	Limestone Trail (10' TYP)	7,300	LF	\$ 39.09	\$ 286,357.00	\$ 45.00	\$ 328,500.00				
5.	Mulched Trail (10' TYP)	2,500	LF	\$ 1.63	\$ 4,075.00	\$ 3.00	\$ 7,500.00				
6.	Culvert Pipe 12" HDPE (20' TYP)	5	EA	\$ 1,520.76	\$ 7,603.80	\$ 1,000.00	\$ 5,000.00				
7.	Bird Blind (Permanent)	1	EA	\$ 11,150.00	\$ 11,150.00	\$ 25,000.00	\$ 25,000.00				
8.	Bird Blind (Portable)	2	EA	\$ 11,150.00	\$ 22,300.00	\$ 20,000.00	\$ 40,000.00				
9.	Berm Cut & Fill	1,250	LF	\$ 3.81	\$ 4,762.50	\$ 20.00	\$ 25,000.00				
SUBTOTAL IMPROVEMENTS					\$ 341,538.30		\$ 438,400.00				
TOTAL BASE BID					\$ 389,038.30		\$ 478,400.00				Incomplete
CALENDAR DAYS TO SUBSTANTIAL COMPLETION					180		180				

BID SUBMITTED BY: BLS Construction, Inc.

BID OPENING: 2:00:00 PM, THURSDAY, FEBRUARY 13, 2025

Bid Submittal Checklist

(Submit one USB flash drive, one original and three copies of the following items):

- Bid Form
- Bid Security
- Schedule of Proposed Subcontractors
- Statement of Bidder's Qualifications
- Affidavit
- Certificate of Liability Insurance
- Conflict of Interest Questionnaire Form CIQ
- Certification Regarding Debarment & Suspension and Other Responsibility Matters
- Certification Regarding Lobbying
- Disclosure of Lobbying Activities and Instructions
- House Bill 89 Verification
- Residence Certification
- System for Award Management (Print out of search results)
- W-9

General Conditions for Calhoun County, Texas

A copy of the General Conditions for Calhoun County, Texas is attached for reference and will also be included in the Project Manual in Section 00810.

BID PACKAGE

FOR

**BID NO. 2024.12 – CALHOUN COUNTY
GREEN LAKE PARK – PHASE 1; Project 1
CALHOUN COUNTY, TEXAS**

PREPARED BY:

**URBAN ENGINEERING
TREF# F-160
CONSULTING ENGINEERS
2004 N. COMMERCE ST.
VICTORIA, TEXAS 77901-5510
U.E. JOB NO. E23596.00**

REVISED PER ADDENDUM NO. 1

BID FORM

PROJECT IDENTIFICATION:

Bid No 2024.12 – Calhoun County Green Lake Park – Phase 1; Project 1
Calhoun County, Texas

CONTRACT IDENTIFICATION AND NUMBER:

Bid No. 2024.12

THIS BID IS SUBMITTED TO:

Calhoun County Judge's Office
Calhoun County Courthouse
211 S. Ann Street, Suite 301
Port Lavaca, Texas 77979

1.01 The undersigned Bidder proposes and agrees, if this Bid is accepted, to enter into an Agreement with OWNER in the form included in the Bidding Documents to perform all Work as specified or indicated in the Bidding Documents for the prices and within the times indicated in this Bid and in accordance with the other terms and conditions of the Bidding Documents.

2.01 Bidder accepts all of the terms and conditions of the Advertisement or Invitation to Bid and Instructions to Bidders, including without limitation those dealing with the disposition of Bid security. The Bid will remain subject to acceptance for 60 days after the Bid opening, or for such longer period of time that Bidder may agree to in writing upon request of OWNER.

3.01 In submitting this Bid, Bidder represents, as set forth in the Agreement, that:

A. Bidder has examined and carefully studied the Bidding Documents, the other related data identified in the Bidding Documents, and the following Addenda, receipt of which is hereby acknowledged.

<u>Addendum No.</u>	<u>Addendum Date</u>
<u>Addendum One</u>	<u>2/5/2025</u>
_____	_____
_____	_____

B. Bidder has visited the Site and become familiar with and is satisfied as to the general, local and Site conditions that may affect cost, progress, and performance of the Work.

C. Bidder is familiar with and is satisfied as to all federal, state and local Laws and Regulations that may affect cost, progress, and performance of the Work.

D. Bidder has carefully studied all: (1) reports of explorations and tests of subsurface conditions at or contiguous to the Site and all drawings of physical conditions in or relating to existing surface or subsurface structures at or contiguous to the Site (except Underground Facilities) which have been identified in the Supplementary Conditions as provided in paragraph 4.02 of the General Conditions, and (2) reports and drawings of a Hazardous Environmental Condition, if any, which has been identified in the Supplementary Conditions as provided in paragraph 4.06 of the General Conditions.

E. Bidder has obtained and carefully studied (or assumes responsibility for having done so) all additional or supplementary examinations, investigations, explorations, tests, studies and data concerning conditions (surface, subsurface and Underground Facilities) at or contiguous to the Site which may affect cost, progress, or performance of the Work or which relate to any aspect of the means, methods, techniques, sequences, and procedures of construction to be employed by Bidder, including applying the specific means, methods, techniques, sequences, and procedures of construction expressly required by the Bidding Documents to be employed by Bidder, and safety precautions and programs incident thereto.

REVISED PER ADDENDUM NO. 1

F. Bidder does not consider that any further examinations, investigations, explorations, tests, studies, or data are necessary for the determination of this Bid for performance of the Work at the price(s) bid and within the times and in accordance with the other terms and conditions of the Bidding Documents.

G. Bidder is aware of the general nature of work to be performed by OWNER and others at the Site that relates to the Work as indicated in the Bidding Documents.

H. Bidder has correlated the information known to Bidder, information and observations obtained from visits to the Site, reports and drawings identified in the Bidding Documents, and all additional examinations, investigations, explorations, tests, studies, and data with the Bidding Documents.

I. Bidder has given ENGINEER written notice of all conflicts, errors, ambiguities, or discrepancies that Bidder has discovered in the Bidding Documents, and the written resolution thereof by ENGINEER is acceptable to Bidder.

J. The Bidding Documents are generally sufficient to indicate and convey understanding of all terms and conditions for the performance of the Work for which this Bid is submitted.

4.01 Bidder further represents that this Bid is genuine and not made in the interest of or on behalf of any undisclosed individual or entity and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid; Bidder has not solicited or induced any individual or entity to refrain from bidding; and Bidder has not sought by collusion to obtain for itself any advantage over any other Bidder or over OWNER.

5.01 Bidder will complete the Work in accordance with the Contract Documents for the price(s) on the following page(s):

REVISED PER ADDENDUM NO. 1

BID NO. 2024.12 - CALHOUN COUNTY					
GREEN LAKE PARK - PHASE 1; PROJECT 1					
(BIDDER)					
PREPARED BY: URBAN ENGINEERING					
ITEM NO.	DESCRIPTION	ESTIMATED QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
BASE BID					
GENERAL					
1.	Mobilization, Insurance and Bonds (Maximum 10% of Base Bid)	1	LS	\$ 33,000.00	\$ 33,000.00
2.	Construction Staking	1	LS	\$ 14,500.00	\$ 14,500.00
SUBTOTAL GENERAL					\$ 47,500.00
IMPROVEMENTS					
3.	Mowed Trail (10' TYP)	7,400	LF	\$.85	\$ 6,290.00
4.	Limestone Trail (10' TYP)	7,300	LF	\$ 39.09	\$ 285,357.00
5.	Mulched Trail (10' TYP)	2,500	LF	\$ 1.63	\$ 4,075.00
6.	Culvert Pipe 12" HDPE (20' TYP)	5	EA	\$ 1,520.76	\$ 7,603.80
7.	Bird Blind (Permanent)	1	EA	\$ 11,150.00	\$ 11,150.00
8.	Bird Blind (Portable)	2	EA	\$ 11,150.00	\$ 22,300.00
9.	Berm Cut & Fill	1,250	LF	\$ 3.81	\$ 4,762.50
SUBTOTAL IMPROVEMENTS					\$ 341,538.30
TOTAL BASE BID					\$ 389,038.30

Unit Prices have been computed in accordance with paragraph 11.03.B of the General Conditions.

Bidder acknowledges that estimated quantities are not guaranteed, and are solely for the purpose of comparison of Bids, and final payment for all Unit Price Bid items will be based on actual quantities provided, determined as provided in the Contract Documents.

It is the intent of the OWNER to award a Contract for all work items and quantities listed on the Bid Form. In the event that the low Bid submitted by a qualified Bidder exceed the funds budgeted for this Project, the OWNER reserves the right to reduce the scope of the work so that the Project can be completed within the budgeted amount; this may be done by eliminating any or all parts of the Project. The Bidder hereby agrees to maintain the unit prices shown on the Bid Form should this reduction in the scope of the work be necessary.

6.01 Bidder agrees that the Work will be substantially complete within 180 calendar days (TO BE FILLED IN BY BIDDER) after the date when the Contract Times commence to run as provided in paragraph 2.03 of the General Conditions, and completed and ready for final payment in accordance with paragraph 14.07 of the General Conditions within 14 calendar days after the date of substantial completion.

6.02 Bidder accepts the provisions of the Agreement as to liquidated damages in the event of failure to complete the Work within the times specified above, which shall be stated in the Agreement.



207 FAHRENTHOLD STREET
EL CAMPO, TX 77437

Office: 979-543-2696
Fax: 979-543-5006

CLARIFICATIONS: CALHOUN COUNTY GREEN LAKE PARK PHASE 1

1. We understand from the engineer that none of this land is in an area classified as wetlands.
2. Any third party testing to be paid direct by owner.
3. We are not aware of any authority having jurisdiction for permitting. Any permit fees required to be paid direct by the owner.
4. We have not included any SWPPP plan.

Prices listed above is limited to the work detailed on this proposal. Any changes or additions to the scope of work may affect the total cost. Proposal pricing is good for 30 calendar days from the date of this letter.

REVISED PER ADDENDUM NO. 1

7.01 The following document(s) are attached to and made a condition of this Bid:

- A. Required Bid Security in the form of Bid Bond (specify type of Bid Security: Bond, Cashier's Check, Certified Check);
- B. Schedule of Proposed Subcontractors to be identified in this Bid;
- C. Statement of Bidder's Qualifications with supporting data;
- D. Affidavit;
- E. Certificate of Liability Insurance;
- F. Conflict of Interest Questionnaire Form CIQ;
- G. Certification Regarding Debarment & Suspension and Other Responsibility Matters;
- H. Certification Regarding Lobbying;
- I. Disclosure of Lobbying Activities and Instructions;
- J. House Bill 89 Verification;
- K. Residence Certification;
- L. System for Award Management (Print out of search results);
- M. W-9.

8.01 The terms used in this Bid with initial capital letters have the meanings indicated in the Instructions to Bidders, the General Conditions, and the Supplementary Conditions.

SUBMITTED on February 13, 2025

State Contractor License No. _____ (If applicable)

If Bidder is:

An Individual

Name (typed or printed): _____

By: _____ (SEAL)
(Individual's signature)

Doing business as: _____

Business address: _____

Phone No.: _____ FAX No.: _____

REVISED PER ADDENDUM NO. 1

A Partnership

Partnership Name: _____ (SEAL)

By: _____
(Signature of general partner -- attach evidence of authority to sign)

Name (typed or printed): _____

Business address: _____

Phone No.: _____ FAX No.: _____

A Corporation

Corporation Name: BLS Construction, Inc. (SEAL)

State of Incorporation: Texas

Type (General Business, Professional Service, Limited Liability): General Contractor

By: _____
(Signature -- attach evidence of authority to sign)

Name (typed or printed): William Key

Title: President (CORPORATE SEAL)

Attest: _____
(Signature of Corporate Secretary)

Business address: 207 Farenthold Street, El Campo, TX, 77437

Phone No.: 979-543-2696 FAX No.: 979-543-5006

Date of Qualification to do business is October 1982

A Joint Venture

Joint Venturer Name: _____ (SEAL)

By: _____
(Signature of joint venture partner -- attach evidence of authority to sign)

Name (typed or printed): _____

Title: _____

Business address: _____

REVISED PER ADDENDUM NO. 1

Phone No.: _____ FAX No.: _____

Joint Venturer Name: _____ (SEAL)

By: _____
(Signature -- attach evidence of authority to sign)

Name (typed or printed): _____

Title: _____

Business address: _____

Phone No.: _____ FAX No.: _____

Phone and FAX Number, and Address for receipt of official communications:

(Each joint venturer must sign. The manner of signing for each individual, partnership, and corporation that is a party to the joint venture should be in the manner indicated above.)

BID BOND

BIDDER (Name and Address):

BLS Construction Inc
207 Fahrenthold Street
El Campo TX 77437

SURETY (Name and Address of Principal Place of Business):

Merchants Bonding Company (Mutual)
6700 Weston Parkway
West Des Moines IA 50266

OWNER (Name and Address):

Calhoun County
211 South Ann Street, 3rd Floor, Suite 301
Port Lavaca TX 77979

BID

BID DUE DATE: 02/13/2025
PROJECT (Brief Description Including Location):
Calhoun County Green Lake Park - Phase I

BOND

BOND NUMBER: _____
DATE (Not later than Bid due date): 02/13/2025
PENAL SUM: 5% Greatest Amount Bid (Words) 5% GAB (Figures)

IN WITNESS WHEREOF, Surety and Bidder, intending to be legally bound hereby, subject to the terms printed on the reverse side hereof, do each cause this Bid Bond to be duly executed on its behalf by its authorized officer, agent, or representative.

BIDDER

BLS Construction Inc (Seal)
Bidder's Name and Corporate Seal

By: _____
William Key Signature and Title President

Attest: Marisa White
Signature and Title Asst. Project Manager

SURETY

Merchants Bonding Company (Mutual) (Seal)
Surety's Name and Corporate Seal

By: Ana Rodriguez
Ana Rodriguez Signature and Title Attorney-in-Fact
(Attach Power of Attorney)

Attest: Marissa Sosa
Marissa Sosa Signature and Title Secretary

- Note: (1) Above addresses are to be used for giving required notice.
(2) Any singular reference to Bidder, Surety, OWNER or other party shall be considered plural where applicable.

1. Bidder and Surety, jointly and severally, bind themselves, their heirs, executors, administrators, successors and assigns to pay to OWNER upon default of Bidder the penal sum set forth on the face of this Bond.
2. Default of Bidder shall occur upon the failure of Bidder to deliver within the time required by the Bidding Documents (or any extension thereof agreed to in writing by OWNER) the executed Agreement required by the Bidding Documents and any performance and payment Bonds required by the Bidding Documents.
3. This obligation shall be null and void if:
 - 3.1. OWNER accepts Bidder's Bid and Bidder delivers within the time required by the Bidding Documents (or any extension thereof agreed to in writing by OWNER) the executed Agreement required by the Bidding Documents and any performance and payment Bonds required by the Bidding Documents, or
 - 3.2. All Bids are rejected by OWNER, or
 - 3.3. OWNER fails to issue a Notice of Award to Bidder within the time specified in the Bidding Documents (or any extension thereof agreed to in writing by Bidder and, if applicable, consented to by Surety when required by paragraph 5 hereof).
4. Payment under this Bond will be due and payable upon default by Bidder and within 30 calendar days after receipt by Bidder and Surety of written notice of default from OWNER, which notice will be given with reasonable promptness, identifying this Bond and the Project and including a statement of the amount due.
5. Surety waives notice of and any and all defenses based on or arising out of any time extension to issue Notice of Award agreed to in writing by OWNER and Bidder, provided that the total time for issuing Notice of Award including extensions shall not in the aggregate exceed 120 days from Bid due date without Surety's written consent.
6. No suit or action shall be commenced under this Bond prior to 30 calendar days after the notice of default required in paragraph 4 above is received by Bidder and Surety and in no case later than one year after Bid due date.
7. Any suit or action under this Bond shall be commenced only in a court of competent jurisdiction located in the state in which the Project is located.
8. Notices required hereunder shall be in writing and sent to Bidder and Surety at their respective addresses shown on the face of this Bond. Such notices may be sent by personal delivery, commercial courier or by United States Registered or Certified Mail, return receipt requested, postage pre-paid, and shall be deemed to be effective upon receipt by the party concerned.
9. Surety shall cause to be attached to this Bond a current and effective Power of Attorney evidencing the authority of the officer, agent or representative who executed this Bond on behalf of Surety to execute, seal and deliver such Bond and bind the Surety thereby.
10. This Bond is intended to conform to all applicable statutory requirements. Any applicable requirement of any applicable statute that has been omitted from this Bond shall be deemed to be included herein as if set forth at length. If any provision of this Bond conflicts with any applicable statute, then the provision of said statute shall govern and the remainder of this Bond that is not in conflict therewith shall continue in full force and effect.
11. The term "Bid" as used herein includes a Bid, offer or proposal as applicable.

MERCHANTS
BONDING COMPANY™
POWER OF ATTORNEY

Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of Iowa, d/b/a Merchants National Indemnity Company (in California only) (herein collectively called the "Companies") do hereby make, constitute and appoint, individually,

Ana Rodriguez; Coy T Sunderman; Denise Dugan; JD Steanson; James Russell; Kristie Rodriguez; Ronda Brown; Shanna Wagner

their true and lawful Attorney(s)-in-Fact, to sign its name as surety(ies) and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

This Power-of-Attorney is granted and is signed and sealed by facsimile under and by authority of the following By-Laws adopted by the Board of Directors of Merchants Bonding Company (Mutual) on April 23, 2011 and amended August 14, 2015 and April 27, 2024 and adopted by the Board of Directors of Merchants National Bonding, Inc., on October 16, 2015 and amended on April 27, 2024.

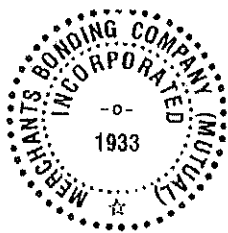
"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof."

"The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed."

In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and authority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner-Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

In Witness Whereof, the Companies have caused this instrument to be signed and sealed this 29th day of July, 2024



MERCHANTS BONDING COMPANY (MUTUAL)
MERCHANTS NATIONAL BONDING, INC.
d/b/a MERCHANTS NATIONAL INDEMNITY COMPANY

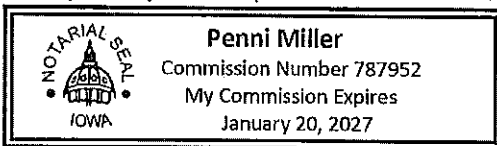
By

Larry Taylor

President

STATE OF IOWA
COUNTY OF DALLAS ss.

On this 29th day of July, 2024, before me appeared Larry Taylor, to me personally known, who being by me duly sworn did say that he is President of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC.; and that the seals affixed to the foregoing instrument are the Corporate Seals of the Companies; and that the said instrument was signed and sealed in behalf of the Companies by authority of their respective Boards of Directors.



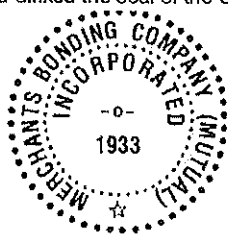
Penni Miller

Notary Public

(Expiration of notary's commission does not invalidate this instrument)

I, Elisabeth Sandersfeld, Secretary of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., do hereby certify that the above and foregoing is a true and correct copy of the POWER-OF-ATTORNEY executed by said Companies, which is still in full force and effect and has not been amended or revoked.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Companies on this 13th day of February, 2025



Elisabeth Sandersfeld

Secretary

SCHEDULE OF PROPOSED SUBCONTRACTORS

Bidder proposes the following subcontractors to be used for major portions of the Project. All major subcontractors must be listed and submitted with the Bid. Bidder may change subcontractors after Bid submittal only as approved by the Engineer. Major subcontractors are those who will do work having a total value of more than five percent (5%) of the Contract amount. The maximum total value of work performed by all subcontractors on the Project shall not exceed seventy-five percent (75%) of the Contract amount.

Subcontractor	Address & Telephone Number	Speciality	Subcontract Amount
1. BLS to self perform			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

STATEMENT OF BIDDER'S QUALIFICATIONS

All questions must be answered and the data given must be clear and comprehensive. This statement must be notarized. If necessary, questions may be answered on separate attached sheets. The Bidder may submit any additional information he desires.

Name of Bidder: BLS Construction, Inc.

Address: 207 Fahrenthold Street, El Campo, TX, 77437

Date Organized: October 1982 Date Incorporated: October 1982

Number of years in contracting business under present name: 42 years

CONTRACTS ON HAND:

Contract	Dollar Amount	Completion Date
<u>See attached Current Project List</u>		

Type of work performed by your company: Commercial Construction-concrete, carpentry, & miscellaneous construction

Have you ever failed to complete any work awarded to you? No

Have you ever defaulted on a contract? No

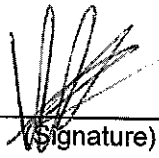
List the projects most recently completed by your firm (include projects of similar importance):

Project	Dollar Amount	Mo/Yr Completed
<u>Camp Aranzazu Nature Building & Wetland Park</u>	<u>\$924,138.00</u>	<u>02/2017</u>
<u>Calhoun County Combined Dispatch Facility</u>	<u>\$1,877,350.00</u>	<u>05/2024</u>
<u>Wharton County Storage/Office Facility #2</u>	<u>\$413,735.94</u>	<u>03/2024</u>
<u>Wharton County Storage Facility</u>	<u>\$793,016.75</u>	<u>09/2023</u>

Major equipment available for this contract:

See attached Equipment List

Executed this 6th day of February, 2024

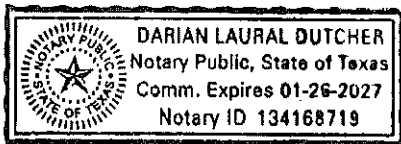
By:  President
(Signature) (Title)


William Key
(Print Name)

State of Texas

County of Wharton

Sworn to and subscribed before me this 6th day of February, 2024




Notary Signature

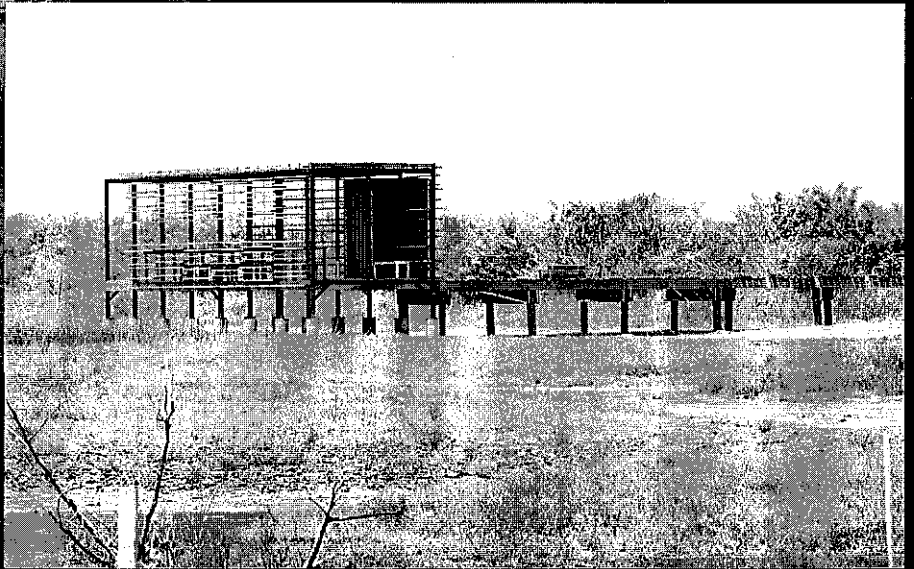
Darian Dutcher
Printed Name

In and for the State of Texas

Commission Expires 01-26-2027



CAMP ARANZAZU NATURE BUILDING & WETLAND PARK



new construction of a nature building,
wetland boardwalk and associated paving in
wetlands

Construction Cost: \$924,138.09

Completion Date: January 2017

Reference: Tom Forney

Phone#: 713-224-1900

Email: tom.forney@forneyconstruction.com

BLS CONSTRUCTION, INC



CURRENT PROJECTS

Project	Job Description	Delivery Method	% Complete	Start Date	End Date	Contract Amount	Final Contract	P&P Bond	Job Contact Information
Wharton Trailer Place-New Shop 2507 CR 231 Wharton, TX 77488	New construction of a pre-engineered metal building with a show room and shop	CMAR	0%	TBD	TBD	TBD	TBD	No	979-453-1745; Jon Cochran, Owner; jcochrn@bri.com
Park Palmetto-Office Buildout 109 Highee Street El Campo, TX 77437	Interior buildout renovations including new doors, ceiling, flooring and painting	Bid	25%	12/01/24	04/01/25	\$370,350.25	TBD	No	979-543-3922; Atehi Merchant, Owner; ahehi@gmail.com
Port Lavaca City Hall Renovations-Phase 3 202 N. Virginia Street Port Lavaca, TX 77979	Interior renovations to the existing City Hall including new security vestibule	Bid	0%	02/01/25	05/30/25	\$151,415.00	TBD	Yes	361-552-9793; Jody Weaver, City Manager; jweaver@portlavaca.org 361-573-1642; Brian Parker, Architect; brian@bmaarch.com
Indale-Victoria Plant 2695 Old Bloomington Rd N Victoria, TX 77985	Interior renovations of multiple buildings including demolition, new flooring, painting, cabinetry work, etc.	Bid	15%	01/06/25	TBD	\$385,524.00	TBD	No	(713) 888-4049 Sundresh Kamath, JLL Owner's Representative; sundresh.kamath@jll.com
JOHD New Clinic & Wellness Center 912 S Wells Street Euna, TX 77957	New construction of an approximately 9,000 sq ft clinic building and a roughly 16,818 sq ft wellness center	CMAR	IN DESIGN	TBD	TBD	TBD	TBD	No	361-782-7852; Lance Smigaj; lsmigaj@chd.org; Jackson County Hospital District CEO 719-374-0151; Stephen Lucchesi; Architect; slucchesi@reglincroper.com 361-782-7867; Russell Hudgins; rhdgins@jchd.org
Fort Bend Co-Blaunridge Park Restrooms 5500 Court Road Houston, TX 77051	New construction of an estimated 506 sq ft precast, pre-engineered modular structured restrooms	Design/Bid	0%	TBD	TBD	TBD	TBD	Yes	832-471-4175; Swendylyn Clammar; Assistant Park Director swendylyn.clammar@fortbendcountytx.gov
ACHD Cove Harbor Bart Stand 111 Cove Harbor Street Rockport, TX 78382	New construction of a 16'x32' bart stand facility	Bid	0%	02/01/25	TBD	\$180,197.28	TBD	Yes	361-729-6651; Kelib Barnett; Harbor Master; karnasner1@yahoo.com 361-552-4539; Scott Mason; Architect; smason@gweengineers.com
Junior's Smokehouse- 2024 Sausage Plant Expansion 1205 Frank Stubbs Rd El Campo, TX 77437	Addition of roughly 27,500 sq ft structural steel building with removal of existing 12,000 sq ft space	CMAR	IN DESIGN	TBD	12/01/25	\$10,800,000.00	TBD	No	979-541-5914; Lance Smith; Director of Operations; lance.smith@underleavins.com (817) 533-3914; Scott Chambers, Owner of Junior's Smokehouse scotchambers@hotmail.com
Blessing Community Center-Generator 560 FM 616 Blossing, TX 77414	Install a new generator at the community center	Bid	20%	09/09/24	02/01/25	\$92,731.24	TBD	No	Charles Frick; Commissioner Precinct 4; pct4@co.matagorda.tx.us 979-479-7266; Crystal Morones; Grant Administrator; cmorones@co.matagorda.tx.us 361-573-1642; Patrick Oht; Architect; patrick@bmaarch.com
Camp Aranzaza Maintenance Building 5420 FM 1781 Rockport, TX 78382	Supply and install a new maintenance building (50' x 64' x 14'5")	Bid	50%	11/01/24	12/01/24	\$148,754.00	TBD	No	208-705-8216; Mandy Hood, Facilities Director; mandy@samparanzaza.org
City of Edna-Shelby Park Concession Stand/Restrooms 100 Shelby Park Edna, TX 77957	New construction of a 36'x52'x16' pre-engineered metal building with 12,457' lean to. The metal building will include a concession stand and restrooms.	Bid	80%	08/01/24	02/01/25	\$395,718.41	TBD	No	361-782-3122; Gary Braz; City Manager; gbraz@cityofedna.com
Aranas County Generator Project 421 John D Wendall Rd, 1934 FM 2165, 872 Airport Rd Rockport, TX 78382	Installation of (3) permanent diesel-powered generators, one (1) located at the Airport, one (1) at the Road & Bridge Office, and one (1) at the Transfer Station including all electrical work and two (2) concrete foundations	Bid	90%	04/01/24	11/01/24	\$299,748.00	TBD	Yes	361-790-0114; Eric Smith; Contracts & Procurement Specialist; esmith@transsascountry.org 361-790-0114; Elle Moralez; emoralez@transsascountry.org 361-552-4509; Scott Mason; smason@gweengineers.com; P.E., G&W Engineers, Inc.
LURA West Pump Station Storage Building 5238 FM 3131 Edna, TX 77957	New construction of a 4,800 SF pre-engineered metal building for storage	Bid	95%	05/01/24	11/01/24	\$693,296.86	TBD	Yes	361-782-5229; Patrick Brozowski; General Manager; pbrozowski@lura.org 361-782-5229; Scott Hart; shart@lura.org; Assistant Manager; Operations; shart@lura.org 979-245-8900; Michael Cantillo; Principal Architect; michael.cantillo@lyngroup.com
Blessing Community Center 560 FM 616 Blossing, TX 77414	Demolition of existing Community Center and new construction of a 3,800 SF community center	Bid	85%	06/01/24	02/01/25	\$920,740.00	TBD	Yes	Charles Frick; Commissioner Precinct 4; pct4@co.matagorda.tx.us 979-479-7266; Crystal Morones; Grant Administrator; cmorones@co.matagorda.tx.us 361-573-1642; Patrick Oht; Architect; patrick@bmaarch.com
First Colony Storage Building Expansion 4950 Avondale Drive Sugarland, TX 77479	Addition of an emergency operations center including a bathroom with a shower, kitchen, and a roughly 750 SF bunk room	Design/Bid	75%	08/01/24	01/01/25	\$411,520.41	TBD	Yes	713-737-5337; Marlin Murdoch; PE; mmurdoch@quidity.com



CURRENT PROJECTS

Project	Job Description	Delivery Method	% Complete	Start Date	End Date	Contract Amount	Final Contract	P&P Bond	Job Contact Information
JDW Reese Rd Rosenberg, TX, 77471	New 80,000 sq ft office park warehouse	Design/Bid	10%	09/24/24	10/25/25	\$5,700,000.00	TBD	No	281-238-8656; Jerry Shelton, Partial Owner; jshelton@backupinc.net 979-637-0427; William Key; Partial Owner; william.key@hisonstudion.com
Fesco Midland 23-New wash Bay 5000 W E Interstate 20 Midland, TX, 79703	New construction of a 280' x 80' x 32' pre-engineered metal building	Design/Bid	75%	07/01/24	TBD	\$3,567,054.75	TBD	No	Steve Findley, President; steve.findley@lescolinc.com 432-691-6146; Kallie Ward, Civil Engineer; kward@parkhill.com 361-920-6240; Victor Fredrickson, Structural Engineer; victor@vefeengineering.com
Northside Education Center 2nd Floor 707 Fehrenthold Street El Campo, TX, 77437	Revisions to the second floor of existing building to include new stage stage equipment for convention center aspects	CMAR	65%	10/23/23	05/24/24	\$1,630,862.00	\$1,630,862.00	No	979-543-6750; Leanna Shimek (Executive Director); northside_center@yahoo.com 979-637-0245; Ken Shanks AIA; ksaka1@sbcglobal.net; Ken Shanks & Associates, LLC
Jackson County Hospital District Kitchen & Dining Project 1013 South Wells Street Edna, TX, 77657	Alterations and/or removal of an approximately 5,523 sq. ft. building with a focus on the kitchen and dining room	CMAR	95%	08/01/23	08/24/24	\$3,305,761.86	\$3,305,761.86	Yes	361-782-7852; Larrea Smiga; lsmiga@jchd.org; Jackson County Hospital District CEO 713-627-5658; Leonard Lane; lane@jphouston.com; Architect; Chelsea Place Design, Inc.
TOTAL						\$28,391,316.61			

Equipment List

2017 Caterpillar compact track loader

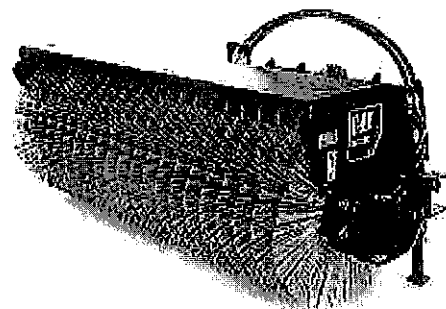
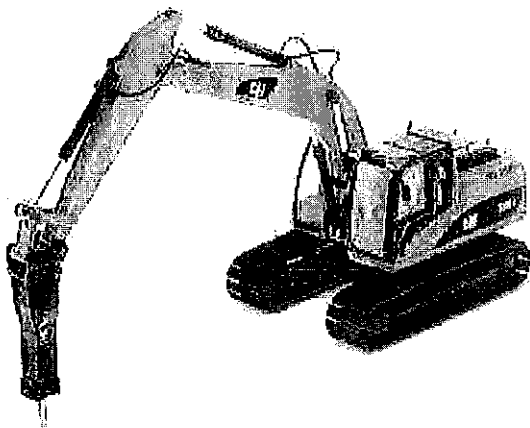
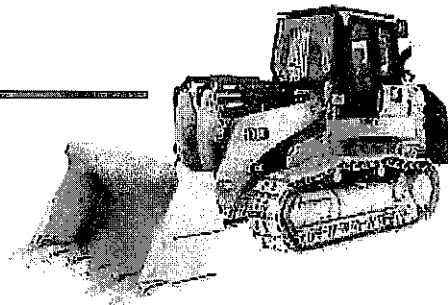
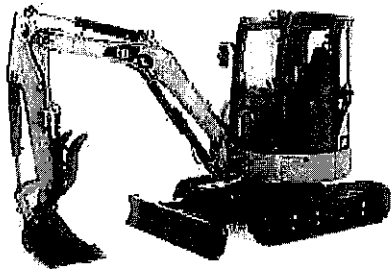
2014 Caterpillar track loader with bucket

2013 Caterpillar Mini excavator

Generator

Caterpillar broom attachment

2022 Agrotk Jackhammer for Skidsteer



STATE OF TEXAS }

AFFIDAVIT

COUNTY OF Wharton }

William Key being first duly sworn, deposes and says: that he or she is
(Type or Print Name)
the President of BLS Construction, Inc., having its
(Type or Print Title) (Type or Print Name of Company/Firm)
principal address at 207 Fahrenthold Street, El Campo, TX, 77437
(Type or Print Physical and Mailing Address)

who submits herewith to Calhoun County the attached bid/proposal; that he or she is the person whose name is signed to the attached bid/proposal; that said bid/proposal is genuine; that the same is not sham or collusive; that all statements of fact herein are true; and that such bid/proposal was not made in the interest or behalf of any person, partnership, company, association, organization or corporation not herein named or disclosed.

Affiant further deposes and says: that the bidder/proposer has not directly or indirectly by agreement, communication or conference with anyone, attempted to induce action prejudicial to the interests of Calhoun County, or of any other bidder/proposer, or anyone else interested in the bid/proposal contract; and that the bidder/proposer has not in any manner sought by collusion to secure for himself/herself/itself/themselves an advantage over any other bidder/proposer.

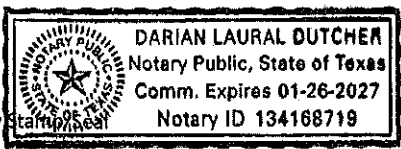
Affiant further deposes and says: that prior to the public opening and reading of bids/proposals, said bidder/proposer:

- a) did not, directly or indirectly, induce or solicit anyone else to submit a false or sham bid/proposal;
- b) did not, directly or indirectly, collude, conspire, connive or agree with anyone else that said bidder/proposer or anyone else would submit a false or sham bid/proposal, or that anyone should refrain from submitting a bid/proposal or withdraw their bid/proposal;
- c) did not, in any manner, directly or indirectly, seek by agreement, communication or conference with anyone to raise or fix the bid price/proposal of said bidder/proposer or of anyone else, or to raise or fix any overhead, profit or cost element of their price/fee or of that of anyone else;
- d) did not give, offer to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to any official, employee or agent of Calhoun County in connection with the submitted bid/proposal; and
- e) did not, directly or indirectly, submit their bid/proposal price or any breakdown thereof, or the contents thereof, or divulge information or data relative hereto, to any corporation, partnership, company, association, organization, bid depository, or to any member or agent, thereof, to any individual or group of individuals, or to any official, employee or agent of Calhoun County prior to the official opening of this bid/proposal.

Affiant further deposes and says: that the bid price(s) or proposed fees contained in this bid/proposal have been carefully checked and is submitted as true and correct, agrees to furnish any and/or all items/services upon which bid prices or proposed fees are awarded and upon the conditions and requirements contained in the bid/proposal.

[Signature]
Signature of Affiant
William Key
Printed Name and Title of Affiant

SWORN TO AND SUBSCRIBED BEFORE ME by the above Affiant, who, on oath, states that the facts contained in the above are true and correct, this 6th day of February, 2025



[Signature]
Signature of Notary Public

Notary



BLSCONS-01

TXARODRIQUEZ

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/27/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

PRODUCER: AssuredPartners Austin, 1120 S Capital of Texas Hwy... CONTACT NAME, PHONE (512) 328-7676, FAX... INSURER(S) AFFORDING COVERAGE: National Trust Insurance Co, FCCI Insurance Company, Sirius International Insurance Corporation...

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Workers Compensation, and Leased/Rented/Prof/Pollution.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Calhoun County, Calhoun County's Employees and Owner's Engineer are all named as an additional insured.

CERTIFICATE HOLDER: Calhoun County, 211 S Ann Street 3rd Floor, Port Lavaca, TX 77979. CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: Brady K Go

CONFLICT OF INTEREST QUESTIONNAIRE
For vendor doing business with local governmental entity

FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

BLS Construction, Inc.

2 Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

Yes No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

Yes No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

6 Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7 _____
Signature of vendor doing business with the governmental entity

Date 2-6-25

CONFLICT OF INTEREST QUESTIONNAIRE
For vendor doing business with local governmental entity

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

Local Government Code § 176.001(1-a): "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

Local Government Code § 176.003(a)(2)(A) and (B):

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

Local Government Code § 176.006(a) and (a-1)

(a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

- (1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);
- (2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or
- (3) has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

- (A) begins discussions or negotiations to enter into a contract with the local governmental entity; or
- (B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

- (A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);
- (B) that the vendor has given one or more gifts described by Subsection (a); or
- (C) of a family relationship with a local government officer.

**CERTIFICATION REGARDING DEBARMENT & SUSPENSION
AND OTHER RESPONSIBILITY MATTERS**

In accordance with the Executive Order 12549, the prospective primary participant certifies to the best of his / her knowledge and belief, that its principals:

- a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
- b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification.
- d. Have not within a three-year period preceding this application / proposal had one or more public transactions (federal, state, or local) terminated for cause of default.
- e. Acknowledge that all sub-contractors selected for this project must be in compliance with paragraphs (1) (a - d) of this certification.

William Key-President
Name and Title of Authorized Agent

2-6-25
Date


Signature of Authorized Agent

I am unable to certify to the above statements. My explanation is attached.

DEBARMENT & SUSPENSION

Executive Order 12549--Debarment and Suspension

Source: The provisions of Executive Order 12549 of Feb. 18, 1986, appear at 51 FR 6370, 3 CFR, 1986 Comp., p. 189, unless otherwise noted.

By the authority vested in me as President by the Constitution and laws of the United States of America, and in order to curb fraud, waste, and abuse in Federal programs, increase agency accountability, and ensure consistency among agency regulations concerning debarment and suspension of participants in Federal programs, it is hereby ordered that:

Section 1. (a) To the extent permitted by law and subject to the limitations in Section 1(c), Executive departments and agencies shall participate in a system for debarment and suspension from programs and activities involving Federal financial and nonfinancial assistance and benefits. Debarment or suspension of a participant in a program by one agency shall have government-wide effect.

(b) Activities covered by this Order include but are not limited to: grants, cooperative agreements, contracts of assistance, loans, and loan guarantees.

(c) This Order does not cover procurement programs and activities, direct Federal statutory entitlements or mandatory awards, direct awards to foreign governments or public international organizations, benefits to an individual as a personal entitlement, or Federal employment.

Sec. 2. To the extent permitted by law, Executive departments and agencies shall:

(a) Follow government-wide criteria and government-wide minimum due process procedures when they act to debar or suspend participants in affected programs.

(b) Send to the agency designated pursuant to Section 5 identifying information concerning debarred and suspended participants in affected programs, participants who have agreed to exclusion from participation, and participants declared ineligible under applicable law, including Executive Orders. This information shall be included in the list to be maintained pursuant to Section 5.

(c) Not allow a party to participate in any affected program if any Executive department or agency has debarred, suspended, or otherwise excluded (to the extent specified in the exclusion agreement) that party from participation in an affected program. An agency may grant an exception permitting a debarred, suspended, or excluded party to participate in a particular transaction upon a written determination by the agency head or authorized designee stating the reason(s) for deviating from this Presidential policy. However, I intend that exceptions to this policy should be granted only infrequently.

Sec. 3. Executive departments and agencies shall issue regulations governing their implementation of this Order that shall be consistent with the guidelines issued under Section 6. Proposed regulations shall be submitted to the Office of Management and Budget for review within four months of the date of the guidelines issued under Section 6. The Director of the Office of Management and Budget may return for reconsideration proposed regulations that the Director believes are inconsistent with the guidelines. Final regulations shall be published within twelve months of the date of the guidelines.

Sec. 4. There is hereby constituted the Interagency Committee on Debarment and Suspension, which shall monitor implementation of this Order. The Committee shall consist of representatives of agencies designated by the Director of the Office of Management and Budget.

Sec. 5. The Director of the Office of Management and Budget shall designate a Federal agency to perform the following functions: maintain a current list of all individuals and organizations excluded from program participation under this Order, periodically distribute the list to Federal agencies, and study the feasibility of automating the list; coordinate with the lead agency responsible for government-wide debarment and suspension of contractors; chair the Interagency Committee established by Section 4; and report periodically to the Director on implementation of this Order, with the first report due within two years of the date of the Order.

Sec. 6. The Director of the Office of Management and Budget is authorized to issue guidelines to Executive departments and agencies that govern which programs and activities are covered by this Order, prescribe government-wide criteria and government-wide minimum due process procedures, and set forth other related details for the effective administration of the guidelines.

Sec. 7. The Director of the Office of Management and Budget shall report to the President within three years of the date of this Order on Federal agency compliance with the Order, including the number of exceptions made under Section 2(c), and shall make recommendations as are appropriate further to curb fraud, waste, and abuse.

Implementation in the SRF Programs

A company or individual who is debarred or suspended cannot participate in primary and lower-tiered covered transactions. These transactions include SRF loans and contracts and subcontracts awarded with SRF loan funds.

Under 40 C.F.R. 32.510, the SRF agency must submit a certification stating that it shall not knowingly enter into any transaction with a person who is proposed for debarment, suspended, declared ineligible, or voluntarily excluded from participation in the SRF program. This certification is reviewed by the EPA regional office before the capitalization grant is awarded.

A recipient of SRF assistance directly made available by capitalization grants must provide a certification that it will not knowingly enter into a contract with anyone who is ineligible under the regulations to participate in the project. Contractors on the project have to provide a similar certification prior to the award of a contract and subcontractors on the project have to provide the general contractor with the certification prior to the award of any subcontract.

In addition to actions taken under 40 C.F.R. Part 32, there are a wide range of other sanctions that can render a party ineligible to participate in the SRF program. Lists of debarred, suspended and otherwise ineligible parties are maintained by the General Services Administration and should be checked by the SRF agency and all recipients of funds directly made available by capitalization grants to ensure the accuracy of certifications.

Additional References

C 40 C.F.R. Part 32: EPA Regulations on Debarment and Suspension.

Certification Regarding Lobbying

(To be submitted with each bid or offer exceeding \$100,000)

The undersigned certifies, to the best of his or her knowledge and belief, that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(c) The undersigned shall require that the language paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995).

The Contractor, BLS Construction, Inc., certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 et seq., apply to this certification and disclosure, if any.



Signature of Contractor's Authorized Official

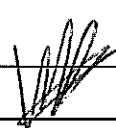
William Key-President

Printed Name and Title of Contractor's Authorized Official

2-6-75

Date

Disclosure of Lobbying Activities
 Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
 (See reverse for public burden disclosure)

1. Type of Federal Action: a. contract <u>a</u> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: a. bid/offer/application <u>a</u> b. initial award c. post-award	3. Report Type: a. initial filing <u>a</u> b. material change For material change only: Year _____ quarter _____ Date of last report _____
4. Name and Address of Reporting Entity: <u>x</u> Prime _____ Subawardee Tier _____, if Known: BLS Construction, Inc. 207 Fahrenthold Street El Campo, TX, 77437 Congressional District, if known:	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: <u>William Key</u> Title: <u>President</u> Telephone No.: <u>979-543-2696</u> Date: <u>2-6-2025</u>	
Federal Use Only	Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)	

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether sub awardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the sub awardee, e.g., the first sub awardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Sub awardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in Item 1 (e.g., Request for Proposal (RFP) number; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Included prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in Item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503 Approved by OMB 0348-0046

HOUSE BILL 89 VERIFICATION FORM

Certification Required by Texas Government Code Section 2270.001

The 85th Texas Legislature approved new legislation, effective September 1, 2017, which amends Texas Local Government Code Section 1, Subtitle F, Title 10, Government Code by adding Chapter 2270 which states that a government entity may not enter into a contract (which includes contracts formed through purchase orders) with a company for goods or services unless the contract contains a written verification from the company that it:

- 1) Does not boycott Israel; and
- 2) Will not boycott Israel during the term of the contract

Pursuant to Section 2270.001, Texas Government Code:

1. "Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and
2. "Company" means a for profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.

I, (authorized official) William Key, do hereby verify the truthfulness and accuracy of the contents of the statements submitted on this certification under the provisions of Subtitle F, Title 10, Government Code Chapter 2270 and that the company named below:

- 1) Does not boycott Israel currently;
- 2) Will not boycott Israel during the term of the contract; and
- 3) Is not currently listed on the State of Texas Comptroller's Companies that Boycott Israel List located at <https://comptroller.texas.gov/purchasing/publications/divestment.php>

BLS Construction, Inc.

Company Name

Signature of Authorized Official

President

Title of Authorized Official

William Key

Printed Name of Authorized Official

Date

2-6-2015

RESIDENCE CERTIFICATION

Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Calhoun County requests Residence Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contract; pertinent provisions of §2252.001 are stated below:

Sec. 2252.001 (3) "Nonresident bidder" refers to a person who is not a resident.

(4) "Resident bidder" refers to a person whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

I certify that _____ is a "Nonresident Bidder" of Texas
(Company Name)
as defined in Government Code §2252.001 and our principal place of business is

(City and State)

I certify that BLS Construction, Inc. _____ is a "Resident Bidder" of Texas as
(Company Name)
defined in Government Code §2252.001.



Signature of Authorized Agent

William Key-President

Printed Name and Title of Authorized Agent

2-6-25

Date


INSERT

SYSTEM FOR AWARD MANAGEMENT (SAM) RECORD SEARCH FOR COMPANY AND COMPANY'S PRINCIPAL(S)

- Company, Corporation, Firm or Partnership, and its Principals, must not be debarred or suspended nor otherwise on the Excluded Parties List System (EPLS) in the System for Award Management (SAM) or the State of Texas Comptroller Debarred Vendor List and must have an active registration with the System for Award Management (www.SAM.gov).

Include verification that your Company, Corporation, Firm or Partnership is registered and that the Company, Corporation, Firm or Partnership, and its Principals, are not listed (are not debarred) through the System for Award Management (www.SAM.gov).

Include a printout of the search results that includes the required information and the record date.

B.L.S. CONSTRUCTION, INC.  Active Registration

 View  Update

More 

Unique Entity ID:
GGG4NM7FHBF1

Doing Business As:
BLS CONSTRUCTION INC

Expiration Date
Apr 10, 2025

CAGE/NCAGE:
5T8C2

Physical Address:
207 FAHRENTHOLD ST
EL CAMPO, TX 77437-4319 USA

Purpose of Registration:
All Awards

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p>B.L.S. Construction, Inc.</p>	
	<p>2 Business name/disregarded entity name, if different from above.</p> <p>BLS Construction, Inc.</p>	
	<p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input checked="" type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) <small>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</small></p> <p><input type="checkbox"/> Other (see instructions) _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions. <input type="checkbox"/></p>	
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p>207 Fahrenthold Street</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p> <p>El Campo, TX. 77437</p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
or									
Employer identification number									
9	0	-	0	9	2	0	4	3	8

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person <i>Nesther Reese</i>	Date <i>7/11/2024</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



**WE LOOK FORWARD TO
WORKING WITH YOU!**

WWW.BLSCONSTRUCTION.COM

BID SUBMITTED BY: LESTER CONTRACTING, INC.

BID OPENING: 2:00:00 PM, THURSDAY, FEBRUARY 13, 2025

Bid Submittal Checklist

(Submit one USB flash drive, one original and three copies of the following items):

- Bid Form
- Bid Security
- Schedule of Proposed Subcontractors
- Statement of Bidder's Qualifications
- Affidavit
- Certificate of Liability Insurance
- Conflict of Interest Questionnaire Form CIQ
- Certification Regarding Debarment & Suspension and Other Responsibility Matters
- Certification Regarding Lobbying
- Disclosure of Lobbying Activities and Instructions
- House Bill 89 Verification
- Residence Certification
- System for Award Management (Print out of search results)
- W-9

General Conditions for Calhoun County, Texas

A copy of the General Conditions for Calhoun County, Texas is attached for reference and will also be included in the Project Manual in Section 00810.

BID PACKAGE

FOR

**BID NO. 2024.12 – CALHOUN COUNTY
GREEN LAKE PARK – PHASE 1; Project 1
CALHOUN COUNTY, TEXAS**

PREPARED BY:

**URBAN ENGINEERING
TREF# F-160
CONSULTING ENGINEERS
2004 N. COMMERCE ST.
VICTORIA, TEXAS 77901-5510
U.E. JOB NO. E23596.00**

REVISED PER ADDENDUM NO. 1

BID FORM

PROJECT IDENTIFICATION:

Bid No 2024.12 – Calhoun County Green Lake Park – Phase 1; Project 1
Calhoun County, Texas

CONTRACT IDENTIFICATION AND NUMBER:

Bid No. 2024.12

THIS BID IS SUBMITTED TO:

Calhoun County Judge's Office
Calhoun County Courthouse
211 S. Ann Street, Suite 301
Port Lavaca, Texas 77979

1.01 The undersigned Bidder proposes and agrees, if this Bid is accepted, to enter into an Agreement with OWNER in the form included in the Bidding Documents to perform all Work as specified or indicated in the Bidding Documents for the prices and within the times indicated in this Bid and in accordance with the other terms and conditions of the Bidding Documents.

2.01 Bidder accepts all of the terms and conditions of the Advertisement or Invitation to Bid and Instructions to Bidders, including without limitation those dealing with the disposition of Bid security. The Bid will remain subject to acceptance for 60 days after the Bid opening, or for such longer period of time that Bidder may agree to in writing upon request of OWNER.

3.01 In submitting this Bid, Bidder represents, as set forth in the Agreement, that:

A. Bidder has examined and carefully studied the Bidding Documents, the other related data identified in the Bidding Documents, and the following Addenda, receipt of which is hereby acknowledged.

<u>Addendum No.</u>	<u>Addendum Date</u>
<u>2</u>	<u>1-30-25</u>
_____	_____
_____	_____

B. Bidder has visited the Site and become familiar with and is satisfied as to the general, local and Site conditions that may affect cost, progress, and performance of the Work.

C. Bidder is familiar with and is satisfied as to all federal, state and local Laws and Regulations that may affect cost, progress, and performance of the Work.

D. Bidder has carefully studied all: (1) reports of explorations and tests of subsurface conditions at or contiguous to the Site and all drawings of physical conditions in or relating to existing surface or subsurface structures at or contiguous to the Site (except Underground Facilities) which have been identified in the Supplementary Conditions as provided in paragraph 4.02 of the General Conditions, and (2) reports and drawings of a Hazardous Environmental Condition, if any, which has been identified in the Supplementary Conditions as provided in paragraph 4.06 of the General Conditions.

E. Bidder has obtained and carefully studied (or assumes responsibility for having done so) all additional or supplementary examinations, investigations, explorations, tests, studies and data concerning conditions (surface, subsurface and Underground Facilities) at or contiguous to the Site which may affect cost, progress, or performance of the Work or which relate to any aspect of the means, methods, techniques, sequences, and procedures of construction to be employed by Bidder, including applying the specific means, methods, techniques, sequences, and procedures of construction expressly required by the Bidding Documents to be employed by Bidder, and safety precautions and programs incident thereto.

REVISED PER ADDENDUM NO. 1

F. Bidder does not consider that any further examinations, investigations, explorations, tests, studies, or data are necessary for the determination of this Bid for performance of the Work at the price(s) bid and within the times and in accordance with the other terms and conditions of the Bidding Documents.

G. Bidder is aware of the general nature of work to be performed by OWNER and others at the Site that relates to the Work as indicated in the Bidding Documents.

H. Bidder has correlated the information known to Bidder, information and observations obtained from visits to the Site, reports and drawings identified in the Bidding Documents, and all additional examinations, investigations, explorations, tests, studies, and data with the Bidding Documents.

I. Bidder has given ENGINEER written notice of all conflicts, errors, ambiguities, or discrepancies that Bidder has discovered in the Bidding Documents, and the written resolution thereof by ENGINEER is acceptable to Bidder.

J. The Bidding Documents are generally sufficient to indicate and convey understanding of all terms and conditions for the performance of the Work for which this Bid is submitted.

4.01 Bidder further represents that this Bid is genuine and not made in the interest of or on behalf of any undisclosed individual or entity and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid; Bidder has not solicited or induced any individual or entity to refrain from bidding; and Bidder has not sought by collusion to obtain for itself any advantage over any other Bidder or over OWNER.

5.01 Bidder will complete the Work in accordance with the Contract Documents for the price(s) on the following page(s):

REVISED PER ADDENDUM NO. 1

BID NO. 2024.12 - CALHOUN COUNTY					
GREEN LAKE PARK - PHASE 1; PROJECT 1					
(BIDDER)					
PREPARED BY: URBAN ENGINEERING					
ITEM NO.	DESCRIPTION	ESTIMATED QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
BASE BID					
GENERAL					
1.	Mobilization, Insurance and Bonds (Maximum 10% of Base Bid)	1	LS	\$ 25,000.00	\$ 25,000.00
2.	Construction Staking	1	LS	\$ 15,000.00	\$ 15,000.00
SUBTOTAL GENERAL					\$ 40,000.00
IMPROVEMENTS					
3.	Mowed Trail (10' TYP)	7,400	LF	\$ 1.00	\$ 7,400.00
4.	Limestone Trail (10' TYP)	7,300	LF	\$ 45.00	\$ 328,500.00
5.	Mulched Trail (10' TYP)	2,500	LF	\$ 3.00	\$ 7,500.00
6.	Culvert Pipe 12" HDPE (20' TYP)	5	EA	\$ 1,000.00	\$ 5,000.00
7.	Bird Blind (Permanent)	1	EA	\$ 25,000.00	\$ 25,000.00
8.	Bird Blind (Portable)	2	EA	\$ 20,000.00	\$ 40,000.00
9.	Berm Cut & Fill	1,250	LF	\$ 20.00	\$ 25,000.00
SUBTOTAL IMPROVEMENTS					\$ 438,400.00
TOTAL BASE BID					\$ 478,400.00

Unit Prices have been computed in accordance with paragraph 11.03.B of the General Conditions.

Bidder acknowledges that estimated quantities are not guaranteed, and are solely for the purpose of comparison of Bids, and final payment for all Unit Price Bid items will be based on actual quantities provided, determined as provided in the Contract Documents.

It is the intent of the OWNER to award a Contract for all work items and quantities listed on the Bid Form. In the event that the low Bid submitted by a qualified Bidder exceed the funds budgeted for this Project, the OWNER reserves the right to reduce the scope of the work so that the Project can be completed within the budgeted amount; this may be done by eliminating any or all parts of the Project. The Bidder hereby agrees to maintain the unit prices shown on the Bid Form should this reduction in the scope of the work be necessary.

6.01 Bidder agrees that the Work will be substantially complete within 180 calendar days (TO BE FILLED IN BY BIDDER) after the date when the Contract Times commence to run as provided in paragraph 2.03 of the General Conditions, and completed and ready for final payment in accordance with paragraph 14.07 of the General Conditions within 14 calendar days after the date of substantial completion.

6.02 Bidder accepts the provisions of the Agreement as to liquidated damages in the event of failure to complete the Work within the times specified above, which shall be stated in the Agreement.

REVISED PER ADDENDUM NO. 1

7.01 The following document(s) are attached to and made a condition of this Bid:

- A. Required Bid Security in the form of BOND (specify type of Bid Security: Bond) Cashier's Check, Certified Check);
- B. Schedule of Proposed Subcontractors to be identified in this Bid;
- C. Statement of Bidder's Qualifications with supporting data;
- D. Affidavit;
- E. Certificate of Liability Insurance;
- F. Conflict of Interest Questionnaire Form CIQ;
- G. Certification Regarding Debarment & Suspension and Other Responsibility Matters;
- H. Certification Regarding Lobbying;
- I. Disclosure of Lobbying Activities and Instructions;
- J. House Bill 89 Verification;
- K. Residence Certification;
- L. System for Award Management (Print out of search results);
- M. W-9.

8.01 The terms used in this Bid with initial capital letters have the meanings indicated in the Instructions to Bidders, the General Conditions, and the Supplementary Conditions.

SUBMITTED on FEBRUARY 13, 2025.

State Contractor License No. NA (If applicable)

If Bidder is:

An Individual

Name (typed or printed): _____

By: _____ (SEAL)
(Individual's signature)

Doing business as: _____

Business address: _____

Phone No.: _____ FAX No.: _____

REVISED PER ADDENDUM NO. 1

A Partnership

Partnership Name: _____ (SEAL)

By: _____
(Signature of general partner -- attach evidence of authority to sign)

Name (typed or printed): _____

Business address: _____

Phone No.: _____ FAX No.: _____

A Corporation

Corporation Name: LESTER CONTRACTING, INC. (SEAL)

State of Incorporation: TEXAS

Type (General Business, Professional, Service, Limited Liability): GENERAL BUSINESS

By: [Signature]
(Signature -- attach evidence of authority to sign)

Name (typed or printed): TARRANT TAGLEMAN

Title: VICE PRESIDENT (CORPORATE SEAL)

Attest: [Signature]
(Signature of Corporate Secretary)

Business address: P.O. BOX 986

PORT LAUDERDALE, FL 33479

Phone No.: 361-552-3024 FAX No.: 361-552-4049

Date of Qualification to do business is 1959

A Joint Venture

Joint Venturer Name: _____ (SEAL)

By: _____
(Signature of joint venture partner -- attach evidence of authority to sign)

Name (typed or printed): _____

Title: _____

Business address: _____

REVISED PER ADDENDUM NO. 1

Phone No.: _____ FAX No.: _____

Joint Venturer Name: _____ (SEAL)

By: _____
(Signature -- attach evidence of authority to sign)

Name (typed or printed): _____

Title: _____

Business address: _____

Phone No.: _____ FAX No.: _____

Phone and FAX Number, and Address for receipt of official communications:

(Each joint venturer must sign. The manner of signing for each individual, partnership, and corporation that is a party to the joint venture should be in the manner indicated above.)

BID BOND

KNOW ALL MEN BY THESE PRESENTS, that we Lester Contracting, Inc.
PO Box 986, Port Lavaca, Tx 77979

as Principal, hereinafter called the Principal, and Continental Casualty Company
151 N. Franklin Street, Chicago, IL 60606

a corporation duly organized under the laws of the State of Illinois as Surety, hereinafter
called the Surety, are held and firmly bound unto Calhoun County

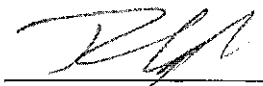
211 South Ann Street 3rd Floor, Suite 301, Port Lavaca, Tx 77979 as Obligee, hereinafter called the Obligee, in the sum of
5% Greatest Amount Bid Dollars (\$ 5% GAB),

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors,
administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has submitted a bid
Calhoun County Green Lake Park-Phase 1; Project 1

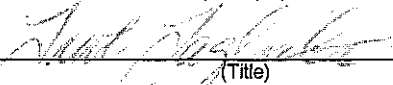
NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a Contract with the Obligee in
accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with
good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in
the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the
Principal shall pay to the Obligee the difference not to exceed the penalty hereof between the amount specified in said bid and such
larger amount for which the Obligee may in good faith contract with another party to perform the Work covered by said bid, then this
obligation shall be null and void, otherwise to remain in full force and effect.

Signed and sealed this 13th day of February, 2025.



(Witness)

Lester Contracting, Inc.
(Principal) (Seal)


By: 

(Title)
Trent Tagliabue General Manager



(Witness)
Leticia Ballejo Witness

Continental Casualty Company
(Surety) (Seal)

By: 

(Title)
Kristie Rodriguez Attorney in Fact

Printed in cooperation with the American Institute of Architects (AIA) by the CNA Insurance Companies.
The language in this document conforms exactly to the language used in AIA Document A310 - Bid Bond - February 1970 Edition.

POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company (herein called "the CNA Companies"), are duly organized and existing insurance companies having their principal offices in the City of Chicago, and State of Illinois, and that they do by virtue of the signatures and seals herein affixed hereby make, constitute and appoint

Gary Grissom, Laurie J Barnes, Ronda Brown, Denise Dugan, James Russell, Ana Rodriguez, Kristie Rodriguez, Shanna Wagner, Coy Sunderman, J D Steanson, Individually

of Austin, TX, their true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on their behalf bonds, undertakings and other obligatory instruments of similar nature

- In Unlimited Amounts -

and to bind them thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of their insurance companies and all the acts of said Attorney, pursuant to the authority hereby given is hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Laws and Resolutions, printed on the reverse hereof, duly adopted, as indicated, by the Boards of Directors of the insurance companies.

In Witness Whereof, the CNA Companies have caused these presents to be signed by their Vice President and their corporate seals to be hereto affixed on this 29th day of August, 2023.



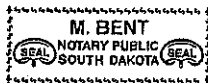
Continental Casualty Company
National Fire Insurance Company of Hartford
American Casualty Company of Reading, Pennsylvania

Larry Kasten

Larry Kasten Vice President

State of South Dakota, County of Minnehaha, ss:

On this 29th day of August, 2023, before me personally came Larry Kasten to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company described in and which executed the above instrument; that he knows the seals of said insurance companies; that the seals affixed to the said instrument are such corporate seals; that they were so affixed pursuant to authority given by the Boards of Directors of said insurance companies and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said insurance companies.



My Commission Expires March 2, 2026

M. Bent

M. Bent Notary Public

CERTIFICATE

I, D. Johnson, Assistant Secretary of Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company do hereby certify that the Power of Attorney herein above set forth is still in force, and further certify that the By-Laws and Resolutions of the Board of Directors of the insurance companies printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said insurance companies this 13th day of February, 2025.



Continental Casualty Company
National Fire Insurance Company of Hartford
American Casualty Company of Reading, Pennsylvania

D. Johnson

D. Johnson Assistant Secretary

Form F6853-4-2023

Go to www.cnasurety.com > Owner / Oblige Services > Validate Bond Coverage, if you want to verify bond authenticity.

Authorizing By-Laws and Resolutions

This Power of Attorney is signed by Larry Kasten, Vice President of each of the CNA Companies (as defined in the Power of Attorney), who has been authorized pursuant to the below Bylaws and Resolutions to execute power of attorneys on behalf of each of the CNA Companies.

ADOPTED BY THE BOARD OF DIRECTORS OF CONTINENTAL CASUALTY COMPANY:

This Power of Attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the Board of Directors of the Company at a meeting held on May 12, 1995:

"RESOLVED: That any Senior or Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Senior or Group Vice President to the Secretary of the Company prior to such execution becoming effective."

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 25th day of April, 2012:

"Whereas, the bylaws of the Company or specific resolution of the Board of Directors has authorized various officers (the "Authorized Officers") to execute various policies, bonds, undertakings and other obligatory instruments of like nature; and

Whereas, from time to time, the signature of the Authorized Officers, in addition to being provided in original, hard copy format, may be provided via facsimile or otherwise in an electronic format (collectively, "Electronic Signatures"); Now therefore be it resolved: that the Electronic Signature of any Authorized Officer shall be valid and binding on the Company."

This Power of Attorney may be signed by digital signature and sealed by a digital or otherwise electronic-formatted corporate seal under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 27th day of April, 2022:

"RESOLVED: That it is in the best interest of the Company to periodically ratify and confirm any corporate documents signed by digital signatures and to ratify and confirm the use of a digital or otherwise electronic-formatted corporate seal, each to be considered the act and deed of the Company."

ADOPTED BY THE BOARD OF DIRECTORS OF NATIONAL FIRE INSURANCE COMPANY OF HARTFORD:

This Power of Attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the Board of Directors of the Company by unanimous written consent dated May 10, 1995:

"RESOLVED: That any Senior or Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Senior or Group Vice President to the Secretary of the Company prior to such execution becoming effective."

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 25th day of April, 2012:

"Whereas, the bylaws of the Company or specific resolution of the Board of Directors has authorized various officers (the "Authorized Officers") to execute various policies, bonds, undertakings and other obligatory instruments of like nature; and

Whereas, from time to time, the signature of the Authorized Officers, in addition to being provided in original, hard copy format, may be provided via facsimile or otherwise in an electronic format (collectively, "Electronic Signatures"); Now therefore be it resolved: that the Electronic Signature of any Authorized Officer shall be valid and binding on the Company."

This Power of Attorney may be signed by digital signature and sealed by a digital or otherwise electronic-formatted corporate seal under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 27th day of April, 2022:

"RESOLVED: That it is in the best interest of the Company to periodically ratify and confirm any corporate documents signed by digital signatures and to ratify and confirm the use of a digital or otherwise electronic-formatted corporate seal, each to be considered the act and deed of the Company."

ADOPTED BY THE BOARD OF DIRECTORS OF AMERICAN CASUALTY COMPANY OF READING, PENNSYLVANIA:

This Power of Attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the Board of Directors of the Company by unanimous written consent dated May 10, 1995:

"RESOLVED: That any Senior or Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Senior or Group Vice President to the Secretary of the Company prior to such execution becoming effective."

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 25th day of April, 2012:

"Whereas, the bylaws of the Company or specific resolution of the Board of Directors has authorized various officers (the "Authorized Officers") to execute various policies, bonds, undertakings and other obligatory instruments of like nature; and

Whereas, from time to time, the signature of the Authorized Officers, in addition to being provided in original, hard copy format, may be provided via facsimile or otherwise in an electronic format (collectively, "Electronic Signatures"); Now therefore be it resolved: that the Electronic Signature of any Authorized Officer shall be valid and binding on the Company."

This Power of Attorney may be signed by digital signature and sealed by a digital or otherwise electronic-formatted corporate seal under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 27th day of April, 2022:

"RESOLVED: That it is in the best interest of the Company to periodically ratify and confirm any corporate documents signed by digital signatures and to ratify and confirm the use of a digital or otherwise electronic-formatted corporate seal, each to be considered the act and deed of the Company."

SCHEDULE OF PROPOSED SUBCONTRACTORS

Bidder proposes the following subcontractors to be used for major portions of the Project. All major subcontractors must be listed and submitted with the Bid. Bidder may change subcontractors after Bid submittal only as approved by the Engineer. Major subcontractors are those who will do work having a total value of more than five percent (5%) of the Contract amount. The maximum total value of work performed by all subcontractors on the Project shall not exceed seventy-five percent (75%) of the Contract amount.

Subcontractor	Address & Telephone Number	Speciality	Subcontract Amount
1. MAINTENANCE	VICTORIA, TX 77904 361-425-2352	Landscaping	\$20,000.00
2. STAFF CONCRETE	4703 John St. Victoria, TX 77904 361-212-5246	Concrete	\$45,810.00
3.			
4.			
5.			
6.			
7.			
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11.			
12.			
13.			
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16.			
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18.			
19.			
20.			

STATEMENT OF BIDDER'S QUALIFICATIONS

All questions must be answered and the data given must be clear and comprehensive. This statement must be notarized. If necessary, questions may be answered on separate attached sheets. The Bidder may submit any additional information he desires.

Name of Bidder: LESTER CONTRACTING, INC.

Address: P.O. BOX 986
PORT LAUREN, TX 77979

Date Organized: 1959 Date Incorporated: 1976

Number of years in contracting business under present name: 30

CONTRACTS ON HAND:

Contract	Dollar Amount	Completion Date
City of Redwood City, Drainage	\$4,036,056.25	8/25
City of Port Lavaca, Alamo Heights	\$3,972,231.00	10/26
City of Port Lavaca, Independence St.	\$4,656,880.00	4/26
CCESD Parking Lot Imp.	\$1,138,894.15	8/25
TX610 Independence Beach Repair	\$470,710.00	6/25

Type of work performed by your company: SITE WORK & UTILITIES

Have you ever failed to complete any work awarded to you? No

Have you ever defaulted on a contract? No

List the projects most recently completed by your firm (include projects of similar importance):

Project	Dollar Amount	Mo/Yr Completed
City of Victoria County, Plat 500	\$1,577,033.50	11/24
Bluewood Ranch - Victoria	\$1,389,120.75	10/24
City of Victoria, Springwood 2000	\$604,115.00	9/24

Major equipment available for this contract:

SEE ATTACHMENT

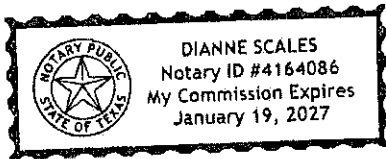
Executed this 13th day of FEBRUARY, 2025

By: *Trent Tagliabue* (Signature) *Vice President* (Title)
TRENT TAGLIABUE (Print Name)

State of Texas

County of Calhoun

Sworn to and subscribed before me this 13th day of February, 2025



Dianne Scales
Notary Signature

Dianne Scales
Printed Name

In and for the State of Texas

Commission Expires 01-19-27



LESTER CONTRACTING, inc.

P.O. Box 986 • Port Lavaca • TX • 77979 • (361) 552-3024 • FAX (361) 552-4049

OWNED EQUIPMENT

HEAVY EQUIPMENT

Cat 330 Excavator	Cat 140H Motorgrader
Cat 325L Excavator	Cat 120H Motorgrader
Cat 325D Excavators (2)	Cat 120M Motorgrader
Cat 322BL Excavator	Cat 420D Backhoe/Loaders (2)
Cat 320CL Excavator	Cat 430 Backhoe/Loader
Cat 314 Excavator	Cat 924F 2 - C.Y. Loaders (2)
Cat 307 Excavator	Cat 950 Loader
Cat D3C Dozer	Cat CP56 Compactor
Cat D5C Dozer	Smooth & Sheepfoot Compactors
Cat D5M Dozer	Cat 267 Multi-Terrain Loader with Bucket or Shredder
Cat D6K Dozer	Cat 279 Multi-Terrain Loader
Cat D6N Dozer	Tractor & Shredder or Offset Disc
Cat D6R 180 H.P. Dozer	Rental Equipment as Needed
Komatsu D65P Dozer	

TRUCKS

Haul Truck with 50 Ton Lowboy	One Ton Truck with Gooseneck Trailer
14 C.Y. Tandem axle Dump Trucks (3)	2,000 Gallon Water Truck
20 C.Y. End Dumps (2)	3,000 Gallon Water Truck
Service/Lube Truck	Mechanic Truck

MISCELLANEOUS EQUIPMENT

Pickups	Timber Dragline and Crane Mats
Crew Trucks	Electric & Pneumatic Tools
Air Compressors with Hoses	Tool Sheds or Job Shacks
Centrifugal Pumps with Hoses	Chain Saws
Work Barges	Concrete Breakers
2,000# Pile Driver & 30' Leads	Compactors
6" Boring machine	Generators

Note:

We lease or rent equipment as needed to supplement our owned equipment.

STATE OF TEXAS {}

AFFIDAVIT

COUNTY OF CALHOUN {}

TRENT THOLLADUE being first duly sworn, deposes and says: that he or she is
(Type or Print Name)
the Vice President of LESTER CONTRACTING, INC., having its
(Type or Print Title) (Type or Print Name of Company/Firm)
principal address at P.O. Box 966 3677 Hwy 35 South Port Lavaca, TX 77979,
(Type or Print Physical and Mailing Address)

who submits herewith to Calhoun County the attached bid/proposal; that he or she is the person whose name is signed to the attached bid/proposal; that said bid/proposal is genuine; that the same is not sham or collusive; that all statements of fact herein are true; and that such bid/proposal was not made in the interest or behalf of any person, partnership, company, association, organization or corporation not herein named or disclosed.

Affiant further deposes and says: that the bidder/proposer has not directly or indirectly by agreement, communication or conference with anyone, attempted to induce action prejudicial to the interests of Calhoun County, or of any other bidder/proposer, or anyone else interested in the bid/proposal contract; and that the bidder/proposer has not in any manner sought by collusion to secure for himself/herself/itself/themselves an advantage over any other bidder/proposer.

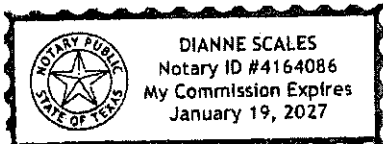
Affiant further deposes and says: that prior to the public opening and reading of bids/proposals, said bidder/proposer:

- a) did not, directly or indirectly, induce or solicit anyone else to submit a false or sham bid/proposal;
- b) did not, directly or indirectly, collude, conspire, connive or agree with anyone else that said bidder/proposer or anyone else would submit a false or sham bid/proposal, or that anyone should refrain from submitting a bid/proposal or withdraw their bid/proposal;
- c) did not, in any manner, directly or indirectly, seek by agreement, communication or conference with anyone to raise or fix the bid price/proposal of said bidder/proposer or of anyone else, or to raise or fix any overhead, profit or cost element of their price/fee or of that of anyone else;
- d) did not give, offer to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to any official, employee or agent of Calhoun County in connection with the submitted bid/proposal; and
- e) did not, directly or indirectly, submit their bid/proposal price or any breakdown thereof, or the contents thereof, or divulge information or data relative hereto, to any corporation, partnership, company, association, organization, bid depository, or to any member or agent, thereof, to any individual or group of individuals, or to any official, employee or agent of Calhoun County prior to the official opening of this bid/proposal.

Affiant further deposes and says: that the bid price(s) or proposed fees contained in this bid/proposal have been carefully checked and is submitted as true and correct, agrees to furnish any and/or all items/services upon which bid prices or proposed fees are awarded and upon the conditions and requirements contained in the bid/proposal.

Trent Tholladue
Signature of Affiant
TRENT THOLLADUE Vice President
Printed Name and Title of Affiant

SWORN TO AND SUBSCRIBED BEFORE ME by the above Affiant, who, on oath, states that the facts contained in the above are true and correct, this 13th day of February, 2025.



Notary Stamp/Seal

Dianne Scales
Signature of Notary Public



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/13/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER AssuredPartners Austin 1120 S Capital of Texas Hwy Bldg 3, Suite 300 Austin TX 78746	CONTACT NAME: Natalie Stewart		
	PHONE (A/C, No, Ext): 512-652-7578	FAX (A/C, No):	
E-MAIL ADDRESS: Natalie.Stewart@assuredpartners.com			
INSURER(S) AFFORDING COVERAGE		NAIC #	
INSURED Lester Contracting, Inc. P.O. Box 986 Port Lavaca TX 77979	LESTCOON-01	INSURER A: BITCO Insurance Companies	
		INSURER B: Bitco General Insurance Corporation	20095
		INSURER C: Texas Mutual Insurance Company	22945
		INSURER D: Lloyds Of London Underwriters (AII# AA1120098)	15792
		INSURER E:	
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 2130145782

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	CLP3752463	12/31/2024	12/31/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Lmt'd Wksite Poll \$ 1,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	CAP3752464	12/31/2024	12/31/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	Y	Y	CUP3752465	12/31/2024	12/31/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A	TSF0001298772	12/31/2024	12/31/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Leased/Rented			CLP3752463	12/31/2024	12/31/2025	Per Item 700,000
D	Prof/Poll Liab			ANE4946824.24	12/31/2024	12/31/2025	Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

\$5Mx\$5M Excess Liability
 Policy #LHA603870
 Landmark American Ins. Co.
 Effective 12-1-24 to 12-31-25
 \$5,000,000 limit
 Calhoun County Green Lake Park-Phase 1; Project 3

CERTIFICATE HOLDER**CANCELLATION**

Calhoun County, Texas 211 South Ann Street, 3rd Floor, Suite 301 Port Lavaca TX 77979 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Budy Kgo</i>
--	--

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CONFLICT OF INTEREST QUESTIONNAIRE
For vendor doing business with local governmental entity

FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

None

2 Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

Yes No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

Yes No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

6 Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7
[Signature]

Signature of vendor doing business with the governmental entity

2-13-25

Date

CONFLICT OF INTEREST QUESTIONNAIRE
For vendor doing business with local governmental entity

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

Local Government Code § 176.001(1-a): "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

Local Government Code § 176.003(a)(2)(A) and (B):

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

(i) a contract between the local governmental entity and vendor has been executed; or

or

(ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

(i) a contract between the local governmental entity and vendor has been executed; or

(ii) the local governmental entity is considering entering into a contract with the vendor.

Local Government Code § 176.006(a) and (a-1)

(a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

(1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);

(2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or

(3) has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

(A) begins discussions or negotiations to enter into a contract with the local governmental entity; or

(B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

(A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);

(B) that the vendor has given one or more gifts described by Subsection (a); or

(C) of a family relationship with a local government officer.

**CERTIFICATION REGARDING DEBARMENT & SUSPENSION
AND OTHER RESPONSIBILITY MATTERS**

In accordance with the Executive Order 12549, the prospective primary participant certifies to the best of his / her knowledge and belief, that its principals:

- a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
- b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification.
- d. Have not within a three-year period preceding this application / proposal had one or more public transactions (federal, state, or local) terminated for cause of default.
- e. Acknowledge that all sub-contractors selected for this project must be in compliance with paragraphs (1) (a - d) of this certification.

Trent MacFarland Vice President
Name and Title of Authorized Agent

2-13-25
Date

[Signature]
Signature of Authorized Agent

I am unable to certify to the above statements. My explanation is attached.

DEBARMENT & SUSPENSION

Executive Order 12549--Debarment and Suspension

Source: The provisions of Executive Order 12549 of Feb. 18, 1986, appear at 51 FR 6370, 3 CFR, 1986 Comp., p. 189, unless otherwise noted.

By the authority vested in me as President by the Constitution and laws of the United States of America, and in order to curb fraud, waste, and abuse in Federal programs, increase agency accountability, and ensure consistency among agency regulations concerning debarment and suspension of participants in Federal programs, it is hereby ordered that:

Section 1. (a) To the extent permitted by law and subject to the limitations in Section 1(c), Executive departments and agencies shall participate in a system for debarment and suspension from programs and activities involving Federal financial and nonfinancial assistance and benefits. Debarment or suspension of a participant in a program by one agency shall have government-wide effect.

(b) Activities covered by this Order include but are not limited to: grants, cooperative agreements, contracts of assistance, loans, and loan guarantees.

(c) This Order does not cover procurement programs and activities, direct Federal statutory entitlements or mandatory awards, direct awards to foreign governments or public international organizations, benefits to an individual as a personal entitlement, or Federal employment.

Sec. 2. To the extent permitted by law, Executive departments and agencies shall:

(a) Follow government-wide criteria and government-wide minimum due process procedures when they act to debar or suspend participants in affected programs.

(b) Send to the agency designated pursuant to Section 5 identifying information concerning debarred and suspended participants in affected programs, participants who have agreed to exclusion from participation, and participants declared ineligible under applicable law, including Executive Orders. This information shall be included in the list to be maintained pursuant to Section 5.

(c) Not allow a party to participate in any affected program if any Executive department or agency has debarred, suspended, or otherwise excluded (to the extent specified in the exclusion agreement) that party from participation in an affected program. An agency may grant an exception permitting a debarred, suspended, or excluded party to participate in a particular transaction upon a written determination by the agency head or authorized designee stating the reason(s) for deviating from this Presidential policy. However, I intend that exceptions to this policy should be granted only infrequently.

Sec. 3. Executive departments and agencies shall issue regulations governing their implementation of this Order that shall be consistent with the guidelines issued under Section 6. Proposed regulations shall be submitted to the Office of Management and Budget for review within four months of the date of the guidelines issued under Section 6. The Director of the Office of Management and Budget may return for reconsideration proposed regulations that the Director believes are inconsistent with the guidelines. Final regulations shall be published within twelve months of the date of the guidelines.

Sec. 4. There is hereby constituted the Interagency Committee on Debarment and Suspension, which shall monitor implementation of this Order. The Committee shall consist of representatives of agencies designated by the Director of the Office of Management and Budget.

Sec. 5. The Director of the Office of Management and Budget shall designate a Federal agency to perform the following functions: maintain a current list of all individuals and organizations excluded from program participation under this Order, periodically distribute the list to Federal agencies, and study the feasibility of automating the list; coordinate with the lead agency responsible for government-wide debarment and suspension of contractors; chair the Interagency Committee established by Section 4; and report periodically to the Director on implementation of this Order, with the first report due within two years of the date of the Order.

Sec. 6. The Director of the Office of Management and Budget is authorized to issue guidelines to Executive departments and agencies that govern which programs and activities are covered by this Order, prescribe government-wide criteria and government-wide minimum due process procedures, and set forth other related details for the effective administration of the guidelines.

Sec. 7. The Director of the Office of Management and Budget shall report to the President within three years of the date of this Order on Federal agency compliance with the Order, including the number of exceptions made under Section 2(c), and shall make recommendations as are appropriate further to curb fraud, waste, and abuse.

Implementation in the SRF Programs

A company or individual who is debarred or suspended cannot participate in primary and lower-tiered covered transactions. These transactions include SRF loans and contracts and subcontracts awarded with SRF loan funds.

Under 40 C.F.R. 32.510, the SRF agency must submit a certification stating that it shall not knowingly enter into any transaction with a person who is proposed for debarment, suspended, declared ineligible, or voluntarily excluded from participation in the SRF program. This certification is reviewed by the EPA regional office before the capitalization grant is awarded.

A recipient of SRF assistance directly made available by capitalization grants must provide a certification that it will not knowingly enter into a contract with anyone who is ineligible under the regulations to participate in the project. Contractors on the project have to provide a similar certification prior to the award of a contract and subcontractors on the project have to provide the general contractor with the certification prior to the award of any subcontract.

In addition to actions taken under 40 C.F.R. Part 32, there are a wide range of other sanctions that can render a party ineligible to participate in the SRF program. Lists of debarred, suspended and otherwise ineligible parties are maintained by the General Services Administration and should be checked by the SRF agency and all recipients of funds directly made available by capitalization grants to ensure the accuracy of certifications.

Additional References

C 40 C.F.R. Part 32: EPA Regulations on Debarment and Suspension.

Certification Regarding Lobbying

(To be submitted with each bid or offer exceeding \$100,000)

The undersigned certifies, to the best of his or her knowledge and belief, that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(c) The undersigned shall require that the language paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995).

The Contractor, Lester Construction, Inc., certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 et seq., apply to this certification and disclosure, if any.

[Signature]
Signature of Contractor's Authorized Official

TRENT TABLIANUS Vice President
Printed Name and Title of Contractor's Authorized Official

2-13-25
Date

NONE

Approved by OMB

0348-0046

Disclosure of Lobbying Activities
Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure)

1. Type of Federal Action: a. contract <input type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: a. bid/offer/application <input type="checkbox"/> b. initial award c. post-award	3. Report Type: a. initial filing <input type="checkbox"/> b. material change For material change only: Year _____ quarter _____ Date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if Known: Congressional District, if known:	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Trent Tagliacozzo</u> Print Name: <u>TRENT TAGLIACOZZO</u> Title: <u>Vice President</u> Telephone No.: <u>361-852-3004</u> Date: <u>2-13-75</u>	
Federal Use Only	Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)	

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether sub awardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the sub awardee, e.g., the first sub awardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Sub awardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Included prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503 Approved by OMB 0348-0046

HOUSE BILL 89 VERIFICATION FORM

Certification Required by Texas Government Code Section 2270.001

The 85th Texas Legislature approved new legislation, effective September 1, 2017, which amends Texas Local Government Code Section 1, Subtitle F, Title 10, Government Code by adding Chapter 2270 which states that a government entity may not enter into a contract (which includes contracts formed through purchase orders) with a company for goods or services unless the contract contains a written verification from the company that it:

- 1) Does not boycott Israel; and
- 2) Will not boycott Israel during the term of the contract

Pursuant to Section 2270.001, Texas Government Code:

1. "Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and
2. "Company" means a for profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.

I, (authorized official) TRENT TAGLIABUE, do hereby verify the truthfulness and accuracy of the contents of the statements submitted on this certification under the provisions of Subtitle F, Title 10, Government Code Chapter 2270 and that the company named below:

- 1) Does not boycott Israel currently;
- 2) Will not boycott Israel during the term of the contract; and
- 3) Is not currently listed on the State of Texas Comptroller's Companies that Boycott Israel List located at <https://comptroller.texas.gov/purchasing/publications/divestment.php>

LESTER CONTRACTING, INC.
Company Name

Trent Tagliabue
Signature of Authorized Official

TRENT TAGLIABUE
Printed Name of Authorized Official

Vice President
Title of Authorized Official

2-13-25
Date

RESIDENCE CERTIFICATION

Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Calhoun County requests Residence Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contract; pertinent provisions of §2252.001 are stated below:

Sec. 2252.001 (3) "Nonresident bidder" refers to a person who is not a resident.

(4) "Resident bidder" refers to a person whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

I certify that _____ is a "Nonresident Bidder" of Texas
(Company Name)

as defined in Government Code §2252.001 and our principal place of business is

(City and State)

I certify that Lester Contracting, Inc is a "Resident Bidder" of Texas as
(Company Name)

defined in Government Code §2252.001.

Aunt. [Signature]
Signature of Authorized Agent

TAMM TAGLEBANE Vice President
Printed Name and Title of Authorized Agent

2-13-25
Date

INSERT

SYSTEM FOR AWARD MANAGEMENT (SAM) RECORD SEARCH FOR COMPANY AND COMPANY'S PRINCIPAL(S)

- Company, Corporation, Firm or Partnership, and its Principals, must not be debarred or suspended nor otherwise on the Excluded Parties List System (EPLS) in the System for Award Management (SAM) or the State of Texas Comptroller Debarred Vendor List and must have an active registration with the System for Award Management (www.SAM.gov).

Include verification that your Company, Corporation, Firm or Partnership is registered and that the Company, Corporation, Firm or Partnership, and its Principals, are not listed (are not debarred) through the System for Award Management (www.SAM.gov).

Include a printout of the search results that includes the required information and the record date.

page 1 of 1 results per page 25


Sort by Expiration Date Ascending

LESTER CONTRACTING INC

Active Registration

 View

 Update

More 

Unique Entity ID:
YSFTEM85M881

CAGE/NCAGE:
1JMS4

Doing Business As:
(blank)

Physical Address:
**3677 STATE HIGHWAY
35 S
PORT LAVACA, TX
77979-5584 USA**

Expiration Date
Nov 22, 2025

Purpose of Registration:
All Awards



Feedback

Our Website

- About This Site
- Our Community
- Release Notes
- System Alerts

Policies

- Terms of Use
- Privacy Policy
- Restricted Data Use
- Freedom of Information Act
- Accessibility

Our Partners

- Acquisition.gov
- USASpending.gov
- Grants.gov
- More Partners

Customer Service

- Help
- Check Entity Status
- Federal Service Desk
- External Resources
- Contact



⚠ WARNING

This is a U.S. General Services Administration Federal Government computer system that is **"FOR OFFICIAL USE ONLY."** This system is subject to monitoring. Individuals found performing unauthorized activities are subject to disciplinary action including criminal prosecution.

This system contains Controlled Unclassified Information (CUI). All individuals viewing, reproducing or disposing of this information are required to protect it in accordance with 32 CFR Part 2002 and GSA Order CIO 2103.2 CUI Policy.

SAM.gov

An official website of the U.S. General Services Administration

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p>Lester Contracting, inc.</p> <p>2 Business name/disregarded entity name, if different from above.</p>
	<p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____</p> <p>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) _____</p>
	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right; font-size: small;">(Applies to accounts maintained outside the United States.)</p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/></p>
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p>PO Box 986</p>
	<p>Requester's name and address (optional)</p> <p>CALHOUN COUNTY</p> <p>202 S ANN ST, PORT LAVACA, TX 77979</p> <p>361-553-4610 FAX: 361-553-4614</p>
	<p>6 City, state, and ZIP code</p> <p>Port Lavaca, TX 77979</p>
	<p>7 List account number(s) here (optional)</p>

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number											
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or											
Employer identification number											
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7	4	-	1	6	7	6	1	3	8		

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person <i>[Handwritten Signature]</i>	Date <i>2/11/25</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

00810
CALHOUN COUNTY
GENERAL CONDITIONS

CALHOUN COUNTY, TEXAS GENERAL CONDITIONS

General Conditions apply to all advertised Invitations to Bid (hereinafter called Bid), Request for Proposals (hereinafter called RFP), Request for Qualifications (hereinafter called RFQ), Contracts/Agreements/Leases (hereinafter called Contract); however these may be superseded in whole or in part by the scope, special requirements, specifications or special sections of Texas Government Code and/or Texas Local Government Code.

Governing Law:

Bidder/Vendor is advised that the Bid, RFP, RFQ, and/or Contract shall be fully governed by the laws of the State of Texas and that Calhoun County may request and rely on advice, decisions and opinions of the Attorney General of Texas and the County Attorney concerning any portion of the Bid, RFP, RFQ, and/or Contract.

All parties agree that the venue for any litigation arising from this Bid, RFP, RFQ, and/or Contract shall be held in Port Lavaca, Calhoun County, Texas.

Completion of Bid, RFP, RFQ, and/or Contract Forms:

Once the Bid, RFP, RFQ, and/or Contract is released for bidding, Calhoun County will not answer any questions except through an addendum that has been approved by Calhoun County Commissioners Court or at a mandatory pre-bid meeting.

Complete, sign, and return to the Calhoun County Judge's Office the required number of Bid forms, RFP forms, RFQ forms, and/or Contracts, and any other required information by the day and time the Bid, RFP, RFQ, and/or Contract is due.

The Bid, RFP, RFQ, and/or Contract must be signed and dated by an officer, employee or agent who is duly authorized to execute this Bid, RFP, RFQ, and/or Contract, and affirms that this company, corporation, firm, partnership or individual has not prepared this Bid, RFP, RFQ, and/or Contract in collusion with any other bidder/vendor or any official or employee of Calhoun County, and that the contents of this Bid, RFP, RFQ, and/or Contract as to prices, terms or conditions of said Bid, RFP, RFQ, and/or Contract have not been communicated by the individual signing nor by any employee or agent to any other person engaged in this type of business or to any official or employee of Calhoun County prior to the official opening of this Bid, RFP, RFQ, and/or Contract.

The use of liquid paper or white out is not acceptable and may result in the disqualification of the bidders/vendor's Bid, RFP, RFQ, and/or Contract. If an error is made, the bidder/vendor must draw a line through the error and initial each change. All responses typed or handwritten in ink must be clear and legible.

Submission of Sealed Bid, RFP, RFQ, and/or Contract:

All Bids, RFPs, RFQs, and/or Contracts must be delivered to the County Judge's Office in a SEALED envelope. When submitting a SEALED Bid, RFP, RFQ, and/or Contract the envelope must be taped and/or glued closed in order for it to be accepted as a SEALED Bid, RFP, RFQ, and/or Contract.

The bidder/vendor must submit the original and required number of copies of their completed Bid, RFP, RFQ, and/or Contract and any additional required information/forms in a SEALED envelope to the Calhoun County Judge's Office, Calhoun County Courthouse, 211 South Ann Street, 3rd Floor, Suite 301, Port Lavaca, Texas. The Bid, RFP, RFQ, and/or Contract will specify the date and time due.

The cell phone in the County Judge's office or the cell phone of the County Auditor's Representative is the official clock that will be used in determining the time the Bid, RFP, RFQ, and/or Contract is received and the time deadline that the Bid, RFP, RFQ, and/or Contract will be opened. A late delivery with an early postmark or delivery of the Bid, RFP, RFQ, and/or Contract to the wrong office will not suffice. Bids, RFPs, RFQs, and/or Contracts received after the deadline will not be considered for award, regardless of whether or not the delay was outside of the control of the submitting bidder/vendor. The door to the County Judge's office will be closed once the due date and time has been reached and no other bids will be accepted.

Calhoun County will not be responsible for the delivery of your Bid, RFP, RFQ, and/or Contract to the office of the Calhoun County Judge. Calhoun County is not responsible for late deliveries due to postal mail or other mail delivery services delays. Calhoun County is not responsible for the delivery of the Bid, RFP, RFQ, and/or Contract to the wrong office. Calhoun County does not accept faxed or emailed Bids, RFPs, RFQs, and/or Contracts. If the bidder/vendor would like to confirm the delivery of their Bid, RFP, RFQ, and/or Contract, the bidder/vendor may call the Calhoun County Judge's office at 361-553-4600. Late Bids, RFPs, RFQs, and/or Contracts will not be accepted. Bids, RFPs, RFQs, and/or Contracts received after the deadline will not be opened and shall be considered void and unacceptable.

Bids, RFPs, RFQs, and/or Contracts must be submitted in a SEALED 9 x 12 or larger envelope, addressed as follows: Richard H. Meyer, County Judge, Calhoun County Courthouse, 211 S. Ann St., Suite 301, Port Lavaca, TX 77979.

The outside of the SEALED envelope must be clearly marked: SEALED BID (RFP, RFQ, or Contract) and the name of the Bid, RFP, RFQ, or Contract.

If the Bid, RFP, RFQ, and/or Contract is sent by UPS, FedEx or other delivery service, the outside of this envelope must be clearly marked: SEALED Bid (RFP, RFQ, or Contract) and the name of the Bid, RFP, RFQ, or Contract.

Withdrawal of Bid, RFP, RFQ, and/or Contract:

A bidder/vendor may withdraw their Bid, RFP, RFQ, and/or Contract before Calhoun County's acceptance of the Bid, RFP, RFQ, and/or Contract without prejudice to the bidder/vendor, by submitting a written request for its withdrawal to the Calhoun County Judge and mail or hand deliver to the address the Bid, RFP, RFQ, and/or Contract was submitted to.

A Bid, RFP, RFQ, and/or Contract that was opened are not subject to amendment, alteration, or change for the purpose of correcting an error in the Bid, RFP, RFQ, and/or Contract price. Bids, RFPs, RFQs, and/or Contracts containing an error may be offered "as is" or withdrawn by the bidder/vendor in accordance with applicable State Laws.

Opening and Award of Bid, RFP, RFQ, and/or Contract:

Bidders/vendors are invited to be present at the opening and awarding of the Bid, RFP, RFQ, and/or Contract.

Governing Forms:

In the event of any conflict between the terms and provisions of these conditions, the Bid, RFP or RFQ specifications or contract, if applicable, shall govern. In the event of any conflict of interpretation of any part of this overall document, Calhoun County's interpretation shall govern.

Addendums:

When specifications are revised, the Calhoun County Auditor's Office will send each bidder/vendor that received a Bid, RFP, RFQ, and/or Contract packet the addendum once it has been approved by Calhoun County Commissioners Court. No addendum can be sent out until Calhoun County Commissioners Court has approved the addendum or approved the addendum to be sent out by the Engineer with the approval from the County Commissioner or County Department in charge of the project.

Indemnification/Hold Harmless:

The successful bidder/vendor shall defend, indemnify and hold Calhoun County and its officials, agents, and employees harmless from all suits, actions, or for personal injury, death and/or property damage arising from any cause whatsoever, resulting directly or indirectly from bidder's/vendor's performance. Bidder/vendor shall procure and maintain, with respect to the subject matter of this Bid, RFP, RFQ, and/or Contract, appropriate insurance coverage including, as a minimum, general liability and property damage, workers' compensation, employer's liability and auto insurance with adequate limits to cover bidder's/vendor's liability as may arise directly or indirectly from work performed under terms of this Bid, RFP, RFQ, and/or Contract. Certification of such coverage shall name, by policy endorsement, Calhoun County as an additional insured and be provided to Calhoun County upon request.

Waiver of Subrogation:

Bidder/vendor and bidder's/vendor's insurance carrier shall waive any and all rights whatsoever with regard to subrogation against Calhoun County and its respective officials, employees, and insurers as an indirect party to any suit arising out of personal or property damages resulting from bidder's/vendor's performance under this Bid, RFP, RFQ, and/or Contract. Insurers and all policies of insurance provided shall contain a provision and/or endorsement stating that the insurance carriers and underwriters waive all rights of subrogation in favor of Calhoun County and its respective officials, employees, and insurers.

Bonds:

If the Bid, or RFP, requires submission of bid or proposal guarantee and performance bond, there will be a separate page explaining those requirements. Bids or RFPs submitted without the required bid bond or cashier's checks are not acceptable.

Taxes:

Calhoun County is exempt from all sales tax (state, city and county sales tax) and federal excise taxes under Section 151.309 of the Texas Tax Code. Tax exempt forms will be furnished upon request to the bidder/vendor. Tax exempt forms can be obtained from the Calhoun County Auditor's Office. Bidder/vendor is to issue its Texas Resale Certificate to vendors and subcontractors for such items qualifying for this exemption, and further, bidder/vendor should state these items at cost.

Pricing:

Prices for all products/goods, services, and/or contracts shall be firm for the duration of the Bid, RFP, and/or Contract and shall be stated on the Bid, RFP, and/or Contract form. Prices shall be all inclusive. All prices must be written in ink or typewritten and must be legible.

Pricing on all transportation, freight, and other charges are to be prepaid by the bidder/vendor and included in the Bid, RFP, and/or Contract prices. If there are any additional charges of any kind, other than those mentioned above, specified or unspecified, bidder/vendor must indicate the items required and their costs or forfeit the right to payment for such items. Additional charges added to the Bid, RFP, and/or Contract prices may void the Bid, RFP, and/or Contract.

Where unit pricing and extended pricing differ, unit pricing prevails.

Inspections:

Calhoun County reserves the right to inspect any products/goods or service location for compliance with specifications and requirements and needs of the using department before accepting them.

When applicable, Calhoun County reserves the right to enter upon any County leased premises at any time to inspect said premises.

Testing:

Calhoun County reserves the right to test equipment, supplies, materials, and products/goods bid, proposed, and/or agreed upon for quality, compliance with specifications and ability to meet the needs of the user. Should the equipment, supplies, materials, products/goods and/or services fail to meet requirements and/or be unavailable for evaluation, the Bid, RFP, and/or Contract is subject to rejection.

Material Safety Data Sheets:

Under the "Hazardous Communications Act", commonly known as the "Texas Right To Know Act", a bidder/vendor must provide to Calhoun County with each delivery, material safety data sheets which are applicable to hazardous substances defined in the Act. Failure of the bidder/vendor to furnish this documentation will be cause to reject any Bid, RFP, and/or Contract applying thereto.

Awards:

Calhoun County reserves the right to award this Bid, RFP, RFQ, and/or Contract on the basis of lowest and/or best Bid, RFP, RFQ, and/or Contract that met specifications in accordance with the laws of the State of Texas, to waive any formality or irregularity, to make awards to more than one bidder/vendor, to reject any or all Bids, RFPs, RFQs, and/or Contracts and to be the sole judge in determining which Bid, RFP, RFQ, and/or Contract will be most advantageous to Calhoun County.

Calhoun County will evaluate and may award a Bid, RFP, RFQ, and/or Contract based on lowest and/or best Bid, RFP, RFQ, and/or Contract meeting specifications. "Lowest and/or best Bid, RFP, RFQ, and/or Contract" means a bid or offer providing the best value considering associated direct and indirect costs, including transport, maintenance, reliability, life cycle, warranties, the county's past experience with the bidder/vendor and customer service after a sale.

Calhoun County reserves the right to accept and/or reject any/all of the options Bid, any/all of the RFPs, any/all of the RFQs, and/or any/all of the Contracts as it deems to be in the best interest of the County. An award is final only upon formal execution by Calhoun County Commissioners Court.

Per Local Government Code, Sec. 262.027, Calhoun County reserves the right to reject all Bids, RFPs, RFQs, and/or Contracts and to go out for new Bids, RFPs, RFQs, and/or Contracts.

In the event of tie Bids, RFPs, RFQs, and/or Contracts, the winning Bid, RFP, RFQ, and/or Contract is determined per the Texas Local Governmental Code 262.027(b).

Calhoun County, Texas is an Affirmative Action/Equal Opportunity Employer. The County does not discriminate on the basis of race, color, national origin, sex, sexual orientation, gender identity, religion, age or handicapped status in employment or the provision of services. Section 3 Residents, Minority Business Enterprises, Small Business Enterprises, Women Business Enterprises, and labor surplus area firms are encouraged to submit Bids, RFPs, RFQs, and/or Contracts.

Assignment:

The successful bidder/vendor may not assign, sell, sublease or otherwise transfer the Bid, RFP, RFQ, and/or Contract without first obtaining the written approval of Calhoun County Commissioners Court.

A change in ownership or management shall cancel the Bid, RFP, RFQ, and/or Contract unless a mutual agreement is reached with the new owner or manager to continue the Bid, RFP, RFQ, and/or Contract under the awarded provisions and approved by Calhoun County Commissioners Court.

Term of the Bid, RFP, RFQ, and/or Contract:

If the Bid, RFP, RFQ, and/or Contract is intended to cover a specific time period, said time will be given in the specifications, instructions, and/or contracts.

Obligation of the Bid, RFP, RFQ, and/or Contract:

Bids, RFPs, RFQs, and/or Contracts are awarded only upon formal execution by Calhoun County Commissioners Court. If a contract is required, the Calhoun County Judge or other person authorized by Calhoun County Commissioners Court must sign the contract before it becomes binding on Calhoun County. No person is authorized to sign contracts until authorized by Calhoun County Commissioners Court. Calhoun County is not responsible for any contract signed without Commissioners Court approval.

Delivery:

All items shall be shipped F.O.B. inside (or site location) delivery unless otherwise stated in the specifications. Default in promised delivery (without accepted reasons) or failure to meet specifications, authorizes Calhoun County to purchase supplies from the next lowest bidder/vendor that met specifications.

Rejections:

Articles not in accordance with samples and specifications must be removed by the bidder/vendor at the bidder's/vendor's expense.

All disputes concerning quality of equipment, supplies, materials, products/goods, and/or services delivered under this Bid, RFP, RFQ, and/or contract will be determined by Calhoun County Commissioners Court or their designated representative.

Termination:

Calhoun County reserves the right to terminate the Bid, RFP, RFQ, and/or Contract for default if the bidder/vendor breaches any of the terms therein, including warranties of bidder/vendor or if the bidder/vendor becomes insolvent or commits acts of bankruptcy. Such right of termination is in addition to and not in lieu of any other remedies, which Calhoun County may have in law or equity.

Default may be construed as, but not limited to, failure to deliver the proper products/goods and/or services within the proper amount of time, and/or to properly perform any and all services required to Calhoun County's satisfaction and/or to meet all other obligations and requirements.

Bids, RFPs, RFQs, and/or Contracts may be terminated without cause upon thirty (30) days written notice to either party unless otherwise specified. The bidder/vendor or Calhoun County must state therein the reasons for such cancellation. Calhoun County reserves the right to award cancelled Bid, RFP, RFQ, and/or Contract to the next lowest and best bidder/vendor that met specifications and is deemed to be in the best interest of Calhoun County.

Delinquent Property Taxes:

Calhoun County reserves the right to reject any Bid, RFP, RFQ, and/or Contract submitted by a bidder/vendor owing delinquent property taxes to Calhoun County, Texas.

If the bidder/vendor subsequently becomes delinquent in the payment of Calhoun County taxes this may be grounds for cancellation of the Bid, RFP, RFQ, and/or Contract. Despite anything to the contrary, if the bidder/vendor is delinquent in payment of Calhoun County taxes at the time of invoicing, bidder/vendor assigns any payments to be made under this Bid, RFP, RFQ, and/or Contract to the Calhoun County Tax Assessor Collector for the payment of delinquent taxes.

Certificate of Interested Parties – Form 1295

Section 2252.908 was added to the Government Code by the 84th Texas Legislature through adoption of House Bill 1295.

Senate Bill 255 adopted by the 85th Legislature Regular Session amended the law effective for contracts entered into or amended on or after January 1, 2018.

Additional exemptions from Form 1295 requirement were added for 1) a contract with a publicly traded business entity, including a wholly owned subsidiary of the business entity, 2) a contract with an electric utility as defined by Section 31.002 of the Utilities Code, or 3) a contract with a gas utility as defined by Section 121.001 of the Utilities Code.

Notarization of Form 1295 has been replaced by an unsworn statement under penalty of perjury by an authorized representative of the business entity.

The Texas Ethics Commission promulgated rules to implement the law and established an online portal: https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

The law states that a County may not enter into a contract with a business entity unless a Certificate of Interested Parties (Form 1295) has been completed and provided to the County at the time the contract is considered for action by Commissioners Court.

The term "business entity" includes a sole proprietorship, partnership or corporation (whether for-profit or non-profit). The term "contract" includes amendment, extension or renewal of an existing contract (Bids, RFPs, and/or RFQs also require Form 1295).

The law does not apply to a Bid, RFP, RFQ, and/or Contract between the County and another governmental entity or state agency.

The county is required to file Form 1295 with the state within thirty (30) days of approving a contract, and/or awarding a Bid, RFP, RFQ, and/or Contract with a business entity. Governmental transparency is the objective of the law.

A business entity must generate Form 1295 online. A business entity must use the application at the Texas Ethics Commission website to enter the required information on Form 1295 and print a copy of the completed form, which will include a certification of filing that will contain a unique certification number and date filed in the box marked "Office Use Only" located at the top right hand corner of the form.

An authorized agent of the business entity must sign and complete the bottom portion of the printed copy of the form affirming under the penalty of perjury that the completed form is true and correct.

Calhoun County Commissioners Court will not consider for action any Contract with a business entity unless it is accompanied by a completed and signed Form 1295 or a signed statement declaring the provision of the law under which the business entity is exempt. A business entity will generate Form 1295 online after notification of award and submit with their signed contract. (See Attachment A to General Conditions)

No later than thirty (30) days after Calhoun County Commissioners Court approves a contract with a business entity, the Calhoun County Clerk will file acknowledgement of receipt of the Form 1295 with the Texas Ethics Commission. The Texas Ethics Commission will post the completed Form 1295 to its website within seven (7) business days after Calhoun County acknowledges receipt of the form.

Debarment:

Bidder/vendor certifies that at the time of submission of its (their) Bid, RFP, RFQ, and/or Contract, the bidder/vendor, as well as the bidder's/vendor's principals, are not on the federal government's list of suspended, ineligible or debarred bidders/vendors and that the bidder/vendor and its (their) principals have not been placed on this list between the time of the Bid, RFP, RFQ, and/or Contract submission and the time of execution of the Bid, RFP, RFQ, and/or Contract.

A print out of the search results that includes the record date showing that the Company, and its Principals, if any, have an active registration with the System for Award Management (www.SAM.gov) AND are not

debarred or suspended nor otherwise on the Excluded Parties List System (EPLS) in the System for Award Management (SAM) must be included with the bidder's/vendor's Bid, RFP, RFQ, and/or Contract.

If bidder/vendor or its (their) principals are placed on this list during the term of the Bid, RFP, RFQ, and/or Contract, the bidder/vendor shall notify the Calhoun County Auditor. False certification or failure to notify may result in termination of the Bid, RFP, RFQ, and/or Contract for default.

Invoices and Payments:

All invoices are subject to approval by the Calhoun County Auditor's Office.

Invoices shall be billed to Calhoun County to the attention of the County Department that the invoice pertains to and, if applicable, have all necessary backup information needed.

Invoices shall be itemized (detailed) and free of sales tax (state, city and county sales tax) and federal excise taxes, if applicable.

Invoices that are not billed to Calhoun County to the attention of the County Department that the invoice pertains to, not itemized (detailed) and/or free of sales tax (state, city and county sales tax) and federal excise taxes, if applicable, may be returned to the bidder/vendor for corrections. Calhoun County will not incur any fees and/or charges for this request and/or delay in payment of the invoice(s) that was originally submitted incorrectly.

Approval of payment of all invoices will be made once the purchase order and invoice(s) are properly and timely submitted to the Calhoun County Treasurer's Office by the appropriate County department. Each County department is responsible for submitting their purchase orders for payment to the Calhoun County Treasurer's Office by the deadline time and date set forth by the Treasurer's office. No payment can be made or mailed out until approved by Calhoun County Commissioners Court. Purchase order due dates/times and Commissioners Court dates/times are subject to change.

Calhoun County's obligation is payable only and solely from funds available for the purpose of this purchase. Lack of funds shall render the order null and void to the extent funds are not available and any delivered but unpaid goods will be returned to the seller by the county.

Gratuities:

Calhoun County may, by written notice to the bidder/vendor, cancel any order and/or service without liability, if it is determined by Calhoun County that gratuities, in the form of entertainment, gifts, or otherwise were offered or given by the bidder/vendor, or any agent or representative of the bidder/vendor to any official, employee, or agent of Calhoun County with a view toward securing a Bid, RFP, RFQ, Contract, order, and/or service.

In the event a Bid, RFP, RFQ, Contract, order, and/or service is canceled by Calhoun County pursuant to this provision, the County shall be entitled, in addition to any other rights and remedies, to recover or withhold the amount of the cost incurred by bidder/vendor in providing such gratuities.

Warranty Product:

Bidder/vendor warrants that products/goods sold to and/or services provided to Calhoun County shall conform to the highest commercial and/or professional standards in the industry and laws established by the U.S. Department of Labor, U.S. Department of Homeland Security, Occupational Safety and Health Administration and OSHA Act of 1970.

In the event products/goods sold and/or services provided do not conform to OSHA Standards, where applicable, Calhoun County shall return the product/item for correction or replacement at the bidder's/vendor's expense. In the event that services do not conform to OSHA Standards, Calhoun County

may immediately stop the services and seek reimbursement for said services at the bidder's/vendor's expense.

In the event the bidder/vendor fails to make the appropriate correction within a reasonable time, correction made by Calhoun County shall be at the bidder's/vendor's expense.

Bidder/vendor shall not limit or exclude any implied warranties and any attempt to do so shall render this Bid, RFP, RFQ, and/or Contract voidable at the option of Calhoun County.

Bidder/vendor warrants that the products/goods and/or services furnished and/or performed will conform to the specifications, scope of work, general conditions, drawings, and/or descriptions listed in the Bid, RFP, RFQ, and/or Contract and to the sample(s) furnished by bidder/vendor, if any.

In the event of a conflict between the specifications, scope of work, general conditions, drawings, and/or descriptions, the specifications shall govern.

All products/goods must be new, in first class condition, unless otherwise specified. The design, strength and quality of materials must conform to the highest standards of manufacturing practice.

Products/goods, and/or services supplied and/or performed under this Bid, RFP, RFQ, and/or Contract shall be subject to Calhoun County's approval.

Successful bidder/vendor shall warrant that all products/goods and/or services shall conform to the proposed specifications and/or all warranties as stated in the Uniform Commercial Code and be free from all defects in material, workmanship and title. Any products/goods and are services found defective or not meeting specifications shall be picked up and promptly replaced or corrected to Calhoun County's satisfaction by the successful bidder/vendor at no expense to Calhoun County.

Cancellation:

Calhoun County shall have the right to cancel for default all or any part of the undelivered portion of an order and/or services if bidder/vendor breaches any of the terms hereof including warranties of bidder/vendor, or if the bidder/vendor becomes insolvent or files for protection under the bankruptcy laws. Such rights of cancellation are in addition to and not in lieu of any other remedies, which Calhoun County may have in law or equity. Calhoun County shall not incur any fees and/or charges related to the cancellation. The bidder/vendor shall be responsible for any fees and/or charges that are related to the cancellation.

Force Majeure:

Force Majeure means a delay encountered by a party in the performance of its obligations under this Bid, RFP, RFQ, and/or Contract, which is caused by an event beyond the reasonable control of that party. Without limiting the generality of the foregoing, "Force Majeure" shall include but not be restricted to the following types of events: acts of God or public enemy; acts of governmental or regulatory authorities; fires, floods, epidemics or serious accidents; unusually severe weather conditions; strikes, lockouts, or other labor disputes; and defaults by subcontractors.

In the event of a Force Majeure, the affected party shall not be deemed to have violated its obligations under this Bid, RFP, RFQ, and/or Contract, and the time for performance of any obligations of that party shall be extended by a period of time necessary to overcome the effects of the Force Majeure, provided that the foregoing shall not prevent this Bid, RFP, RFQ, and/or Contract from terminating in accordance with the termination provisions.

If any event constituting a Force Majeure occurs, the affected party shall notify the other parties in writing, within twenty-four (24) hours, and disclose the estimated length of delay, and cause of the delay.

Waiver:

No claim or right arising out of a breach of any Bid, RFP, RFQ, and/or Contract can be discharged in whole or in part by a waiver or renunciation of the claim or right unless the waiver or renunciation is supported by consideration and is in writing signed by the aggrieved party.

Applicable Law:

To the extent it is applicable, this Bid, RFP, RFQ, and/or Contract shall be governed by the Uniform Commercial Code. Whenever the term "Uniform Commercial Code" is used it shall be construed as meaning the "Uniform Commercial Code" as adopted in the State of Texas as effective and in force on the date of this Bid, RFP, RFQ, and/or Contract. Otherwise, Texas state and federal law shall apply.

Prohibition against Personal Interest in Bids, RFPs, RFQs, and/or Contracts:

No official, employee, or agent of Calhoun County shall have financial interest, direct or indirect, in any Bid, RFP, RFQ, and/or Contract with Calhoun County, or shall be financially interested, directly or indirectly, in the sale/lease to Calhoun County of any land, materials, supplies, or service, except on behalf of Calhoun County as an official, employee, or agent. Any willful violation of this section shall constitute malfeasance in office, and any official, employee, or agent guilty thereof shall be subject to disciplinary action under applicable laws, statutes and codes of the State of Texas. Any violation of this section, with the knowledge, expressed or implied of the company, corporation, firm, partnership, or individual contracting with Calhoun County shall render the Bid, RFP, RFQ, and/or Contract involved voidable by the Calhoun County Commissioners Court.

Insurance:

Proof (copy of bidder's/vendor's current insurance) of the below listed insurance may be required to be returned with the Bid, RFP, RFQ, and/or Contract.

As additional security for Calhoun County and as separate obligations of bidder/vendor not in conjunction with any other provisions of the Bid, RFP, RFQ, and/or Contract, bidder/vendor agrees to carry and maintain during the term of the Bid, RFP, RFQ, and/or Contract the minimum insurance coverages stated below.

Before commencing work, the successful bidder/vendor shall be required, at his own expense, to furnish the Calhoun County Auditor within ten (10) days of notification of award with a certificate(s) of liability insurance (Form ACORD 25 or equivalent) showing, at least, the following minimum insurance coverage to be in force throughout the term of the Bid, RFP, RFQ, and/or Contract. Higher rates and/or additional coverage may apply depending upon type of Bid, RFP, RFQ, and/or Contract.

- General Liability (\$100,000/\$300,000 or greater)
- Workers' Compensation (at Statutory Limits)
- Employer's Liability (\$1,000,000 or greater)
- Auto Insurance (\$100,000 BIPP/\$300,000 BIPO/\$100,000 PD or greater)
- Professional Liability Insurance (if applicable)
- Farm Liability Insurance (if applicable)

Coverages shall apply on an occurrence basis.

The certificate(s) must reflect, by policy endorsement, that Calhoun County, Texas is an additional insured on all required policies.

Each certificate of liability insurance (Form ACORD 25 or equivalent) to be furnished by successful bidder's/vendor's insurance agent shall include, by endorsement to the policy, a statement that a notice shall

be given to the Calhoun County Auditor by certified mail thirty (30) days prior to cancellation, material change, or non-renewal in coverage.

Calhoun County's receipt of or failure to object to any insurance certificates or policies submitted by the bidder/vendor does not release or diminish in any manner the liability or obligations of the bidder/vendor or constitute a waiver of any of the insurance requirements for the Bid, RFP, RFQ, and/or Contract.

Replacement certificate(s) of liability insurance (Form ACORD 25 or equivalent) evidencing continuation of such coverage and naming, by policy endorsement, Calhoun County as an additional insured, shall be furnished to the Calhoun County Auditor's office prior to the expiration of the current policies.

Should bidder/vendor at any time neglect, refuse to provide, or cancel the insurance required, Calhoun County shall have the right to terminate the Bid, RFP, RFQ, and/or Contract or pursue any remedy available by law.

The insurance coverage requirements in the Bid, RFP, RFQ, and/or contract will in no way be construed as limiting the scope of indemnification.

OSHA Requirements:

Bidder/vendor must meet all Federal and State OSHA requirements.

The bidder/vendor hereby guarantees to Calhoun County that all materials, supplies, equipment and/or services listed on the Bid, RFP, RFQ, Contract, Purchase Order or Invoice shall conform to the requirements, specifications and standards promulgated by the U.S. Department of Labor under the Occupational Safety and Health Act of 1970, as amended and in force at the date hereof.

Protest Procedures:

All protests and disputes will be held in Port Lavaca, Calhoun County, Texas.

Any actual or prospective bidder/vendor who believes they are aggrieved in connection with or pertaining to a Bid, RFP, RFQ, and/or Contract may file a protest. The protest must be delivered in writing to the Calhoun County Auditor's Office, in person or by certified mail return receipt requested prior to award. The written protest must include:

- o Name, mailing address and business phone number of the protesting party;
- o Appropriate identification of the Bid, RFP, RFQ, and/or Contract being protested;
- o A precise statement of the reasons for the protest; and
- o Any documentation or other evidence supporting the protest and any alleged claims.

The Calhoun County Auditor's Office will attempt to resolve the protest, including at the County Auditor's option, meeting with the protesting party. If the protest is successfully resolved by mutual agreement, written verification of the resolution, with specifics on each point addressed in the protest, will be forwarded to Calhoun County Commissioners Court.

If the Calhoun County Auditor's Office is not successful in resolving the protest, the protesting party may request in writing that the protest be considered by Calhoun County Commissioners Court. Applicable documentation and other information applying to the protest will be forwarded to Calhoun County Commissioners Court, who will promptly review such documentation and information.

If additional information is required, Calhoun County Commissioners Court will notify the protesting party to provide such information. The decision of Calhoun County Commissioners Court will be final.

Public Information Act:

All governmental information is presumed to be available to the public. Certain exceptions may apply to the disclosure of the information. Bidder/Vendor waives any obligation to the release to the public of any documents submitted in accordance with the Bid, RFP, RFQ, and/or Contract. Governmental bodies shall promptly release requested information that is not confidential by law, either constitutional, statutory, or by judicial decision, or information for which an exception to disclosure has not been sought.

CALHOUN COUNTY AUDITOR

To request information from Calhoun County, please contact:

Calhoun County Auditor
Calhoun County Courthouse Annex II
202 S Ann St, Suite B
Port Lavaca, TX 77979
Phone: 361-553-4610
Fax: 361-553-4614

The Packet, Invitation for Bids, Request for Proposals and/or Request for Qualifications are posted on Calhoun County's website, www.calhouncotx.org, under Public Notices, Bid Notices and Results.

ATTACHMENT A
CALHOUN COUNTY, TEXAS
GENERAL CONDITIONS

CERTIFICATE OF INTERESTED PARTIES
FORM 1295

A business entity will generate Form 1295 online after notification of award and submit with their signed contract. Form 1295 must be filled out and submitted online, printed, complete #6, signed and returned with the Agreement, Contract, or Lease. See *Calhoun County, Texas – Policy of Compliance*

TO FILL OUT FORM 1295:

Go to: <https://www.ethics.state.tx.us/File>

1. If you have an account, log in and proceed with the process or if you do not have an account, follow the instructions to set up an account and then proceed with the process.
2. Submit and print a copy of the form which will contain a unique certification number and date submitted in the upper right hand box that is marked "Office Use Only".
3. The Respondent or an authorized agent of the Respondent must sign and date the printed copy of the form (making sure all of #6 is completed).
4. The completed Form 1295 must be included with your Agreement, Contract or Lease, when it is submitted to Calhoun County.

For help in filling out the form:

- #1 Name of Business Entity filing the form, and the City, State and Country of the Entity's place of business
- #2 Calhoun County, Texas
(Also, if applicable, insert name of County Department)
- #3
 - Contract number, if not given, can be the year or dates associated with the Agreement, Contract, Lease or if for a Bid, RFP, or RFQ, the Bid, RFP, RFQ number and dates the Bid, RFP, RFQ pertains to
 - Description is description of Agreement, Contract, Lease or name of Bid, RFP, RFQ

On #4 and #5, complete only the one that applies to you

#4 Fill in the correct information if this applies

OR

#5 Mark an X in the Box if this applies

#6 Fill in the correct information, submit and print
After printing, the respondent or an authorized agent of the respondent must sign and date (making sure all of #6 is completed)

When you print you should see a Certificate Number and Date in the upper right hand box that is marked "Office Use Only".

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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
1 Name of business entity filing form, and the city, state and country of the business entity's place of business.	
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.	

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.

4 Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
		Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country).

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

Signature of authorized agent of contracting business entity
(Declarant)

ADD ADDITIONAL PAGES AS NECESSARY

Calhoun County, Texas

POLICY OF COMPLIANCE

SECTION 2252.908 TEXAS GOVERNMENT CODE

Approved by Commissioners Court January 28, 2016

Amended by Commissioners Court January 31, 2018 and September 14, 2022

BACKGROUND

Section 2252.908 was added to the Government Code by the 84th Texas Legislature through the adoption of House Bill 1295. The law states that the County may not enter into a contract with a business entity unless a Certificate of Interested Parties (Form 1295) is provided to the county at the time the contract is considered for action by Commissioner's Court. The term "business entity" includes a sole proprietorship, partnership or corporation (whether for-profit or non-profit). The term "contract" includes amendment, extension or renewal of an existing contract. The law does not apply to a contract between the County and another governmental entity or state agency. The county is required to file Form 1295 with the state within 30 days of approving a contract with a business entity. Governmental transparency is the objective of the law.

Senate Bill 255 adopted by the 85th Legislature Regular Session amended the law effective for contracts entered into or amended on or after January 1, 2018. Additional exemptions from Form 1295 requirement were added for 1) a contract with a publicly traded business entity, including a wholly owned subsidiary of the business entity, 2) a contract with an electric utility as defined by Section 31.002 of the Utilities Code, or 3) a contract with a gas utility as defined by Section 121.001 of the Utilities Code. Notarization of Form 1295 has been replaced by an unsworn statement under penalty of perjury by an authorized representative of the business entity.

The Texas Ethics Commission promulgated rules to implement the law and established an online portal https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm. A business entity will generate Form 1295 online. Calhoun County will acknowledge online the receipt of Form 1295 after a contract is executed. Within seven business days, Form 1295 will be available for public viewing on the Commission's website.

COMPLIANCE

Calhoun County Commissioners Court will not consider for action any contract with a business entity unless it is accompanied by a completed, signed Form 1295 or a signed statement declaring the provision of the law under which the business entity is exempt.

No later than 30 days after Commissioner's Court approves a contract with a non-exempt business entity, the **County Clerk** will file acknowledgement of receipt of the Form 1295 with the Texas Ethics Commission.

CALHOUN COUNTY GREEN LAKE PARK-PHASE 1

BID NO. 2024.12

GENERAL CONTRACTOR

PORT LAVACA, TX

CONSTRUCTION

PROPOSED TO:
Calhoun County

SUBMITTED BY:
BLS Construction, Inc.

BID SUBMITTED BY: BIA Ag-Land Services LLC

BID OPENING: 2:00:00 PM, THURSDAY, FEBRUARY 13, 2025

Bid Submittal Checklist

(Submit one USB flash drive, one original and three copies of the following items):

- Bid Form
- Bid Security
- Schedule of Proposed Subcontractors
- Statement of Bidder's Qualifications
- Affidavit
- Certificate of Liability Insurance
- Conflict of Interest Questionnaire Form CIQ
- Certification Regarding Debarment & Suspension and Other Responsibility Matters
- Certification Regarding Lobbying
- Disclosure of Lobbying Activities and Instructions
- House Bill 89 Verification
- Residence Certification
- System for Award Management (Print out of search results)
- W-9

General Conditions for Calhoun County, Texas

A copy of the General Conditions for Calhoun County, Texas is attached for reference and will also be included in the Project Manual in Section 00810.

BID PACKAGE

FOR

**BID NO. 2024.12 – CALHOUN COUNTY
GREEN LAKE PARK – PHASE 1; Project 1
CALHOUN COUNTY, TEXAS**

PREPARED BY:

**URBAN ENGINEERING
TREF# F-160
CONSULTING ENGINEERS
2004 N. COMMERCE ST.
VICTORIA, TEXAS 77901-5510
U.E. JOB NO. E23596.00**

REVISED PER ADDENDUM NO. 1

BID FORM

PROJECT IDENTIFICATION:

Bid No 2024.12 – Calhoun County Green Lake Park – Phase 1; Project 1
Calhoun County, Texas

CONTRACT IDENTIFICATION AND NUMBER:

Bid No. 2024.12

THIS BID IS SUBMITTED TO:

Calhoun County Judge's Office
Calhoun County Courthouse
211 S. Ann Street, Suite 301
Port Lavaca, Texas 77979

1.01 The undersigned Bidder proposes and agrees, if this Bid is accepted, to enter into an Agreement with OWNER in the form included in the Bidding Documents to perform all Work as specified or indicated in the Bidding Documents for the prices and within the times indicated in this Bid and in accordance with the other terms and conditions of the Bidding Documents.

2.01 Bidder accepts all of the terms and conditions of the Advertisement or Invitation to Bid and Instructions to Bidders, including without limitation those dealing with the disposition of Bid security. The Bid will remain subject to acceptance for 60 days after the Bid opening, or for such longer period of time that Bidder may agree to in writing upon request of OWNER.

3.01 In submitting this Bid, Bidder represents, as set forth in the Agreement, that:

A. Bidder has examined and carefully studied the Bidding Documents, the other related data identified in the Bidding Documents, and the following Addenda, receipt of which is hereby acknowledged.

<u>Addendum No.</u>	<u>Addendum Date</u>
_____	2/7/25
_____	_____
_____	_____

B. Bidder has visited the Site and become familiar with and is satisfied as to the general, local and Site conditions that may affect cost, progress, and performance of the Work.

C. Bidder is familiar with and is satisfied as to all federal, state and local Laws and Regulations that may affect cost, progress, and performance of the Work.

D. Bidder has carefully studied all: (1) reports of explorations and tests of subsurface conditions at or contiguous to the Site and all drawings of physical conditions in or relating to existing surface or subsurface structures at or contiguous to the Site (except Underground Facilities) which have been identified in the Supplementary Conditions as provided in paragraph 4.02 of the General Conditions, and (2) reports and drawings of a Hazardous Environmental Condition, if any, which has been identified in the Supplementary Conditions as provided in paragraph 4.06 of the General Conditions.

E. Bidder has obtained and carefully studied (or assumes responsibility for having done so) all additional or supplementary examinations, investigations, explorations, tests, studies and data concerning conditions (surface, subsurface and Underground Facilities) at or contiguous to the Site which may affect cost, progress, or performance of the Work or which relate to any aspect of the means, methods, techniques, sequences, and procedures of construction to be employed by Bidder, including applying the specific means, methods, techniques, sequences, and procedures of construction expressly required by the Bidding Documents to be employed by Bidder, and safety precautions and programs incident thereto.

REVISED PER ADDENDUM NO. 1

F. Bidder does not consider that any further examinations, investigations, explorations, tests, studies, or data are necessary for the determination of this Bid for performance of the Work at the price(s) bid and within the times and in accordance with the other terms and conditions of the Bidding Documents.

G. Bidder is aware of the general nature of work to be performed by OWNER and others at the Site that relates to the Work as indicated in the Bidding Documents.

H. Bidder has correlated the information known to Bidder, information and observations obtained from visits to the Site, reports and drawings identified in the Bidding Documents, and all additional examinations, investigations, explorations, tests, studies, and data with the Bidding Documents.

I. Bidder has given ENGINEER written notice of all conflicts, errors, ambiguities, or discrepancies that Bidder has discovered in the Bidding Documents, and the written resolution thereof by ENGINEER is acceptable to Bidder.

J. The Bidding Documents are generally sufficient to indicate and convey understanding of all terms and conditions for the performance of the Work for which this Bid is submitted.

4.01 Bidder further represents that this Bid is genuine and not made in the interest of or on behalf of any undisclosed individual or entity and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid; Bidder has not solicited or induced any individual or entity to refrain from bidding; and Bidder has not sought by collusion to obtain for itself any advantage over any other Bidder or over OWNER.

5.01 Bidder will complete the Work in accordance with the Contract Documents for the price(s) on the following page(s):

REVISED PER ADDENDUM NO. 1

BID NO. 2024.12 - CALHOUN COUNTY					
GREEN LAKE PARK - PHASE 1; PROJECT 1					
(BIDDER)					
PREPARED BY: URBAN ENGINEERING					
ITEM NO.	DESCRIPTION	ESTIMATED QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
BASE BID					
GENERAL					
1.	Mobilization, Insurance and Bonds (Maximum 10% of Base Bid)	1	LS	\$	\$ 30961 ⁸⁶
2.	Construction Staking	1	LS	\$	\$ 1000 ⁰⁰
SUBTOTAL GENERAL					\$
IMPROVEMENTS					
3.	Mowed Trail (10' TYP)	7,400	LF	\$ 0.26	\$ 1942 ⁸⁰
4.	Limestone Trail (10' TYP)	7,300	LF	\$ 37 ⁶	\$ 275,589 ⁶⁰
5.	Mulched Trail (10' TYP)	2,500	LF	\$ 17 ⁶	\$ 4400 ⁰⁰
6.	Culvert Pipe 12" HDPE (20' TYP)	5	EA	\$ 505 ⁰³	\$ 2525 ¹⁶
7.	Bird Blind (Permanent)	1	EA	\$ 4999 ⁴⁵	\$ 4999 ⁴⁵
8.	Bird Blind (Portable)	2	EA	\$ 4580 ⁹⁶	\$ 9161 ⁹²
9.	Berm Cut & Fill	1,250	LF	\$ 8 ⁸⁰	\$ 11000 ⁰⁰
SUBTOTAL IMPROVEMENTS					\$ 309618 ⁶³
TOTAL BASE BID					\$ 341,580 ⁴⁹

Unit Prices have been computed in accordance with paragraph 11.03.B of the General Conditions.

Bidder acknowledges that estimated quantities are not guaranteed, and are solely for the purpose of comparison of Bids, and final payment for all Unit Price Bid items will be based on actual quantities provided, determined as provided in the Contract Documents.

It is the intent of the OWNER to award a Contract for all work items and quantities listed on the Bid Form. In the event that the low Bid submitted by a qualified Bidder exceed the funds budgeted for this Project, the OWNER reserves the right to reduce the scope of the work so that the Project can be completed within the budgeted amount; this may be done by eliminating any or all parts of the Project. The Bidder hereby agrees to maintain the unit prices shown on the Bid Form should this reduction in the scope of the work be necessary.

6.01 Bidder agrees that the Work will be substantially complete within _____ calendar days (TO BE FILLED IN BY BIDDER) after the date when the Contract Times commence to run as provided in paragraph 2.03 of the General Conditions, and completed and ready for final payment in accordance with paragraph 14.07 of the General Conditions within 14 calendar days after the date of substantial completion.

6.02 Bidder accepts the provisions of the Agreement as to liquidated damages in the event of failure to complete the Work within the times specified above, which shall be stated in the Agreement.

7.01 The following document(s) are attached to and made a condition of this Bid:

- A. Required Bid Security in the form of Cashier's Check (specify type of Bid Security: Bond, Cashier's Check, Certified Check);
- B. Schedule of Proposed Subcontractors to be identified in this Bid;
- C. Statement of Bidder's Qualifications with supporting data;
- D. Affidavit;
- E. Certificate of Liability Insurance;
- F. Conflict of Interest Questionnaire Form CIQ;
- G. Certification Regarding Debarment & Suspension and Other Responsibility Matters;
- H. Certification Regarding Lobbying;
- I. Disclosure of Lobbying Activities and Instructions;
- J. House Bill 89 Verification;
- K. Residence Certification;
- L. System for Award Management (Print out of search results);
- M. W-9.

8.01 The terms used in this Bid with initial capital letters have the meanings indicated in the Instructions to Bidders, the General Conditions, and the Supplementary Conditions.

SUBMITTED on February 13, 2024.

State Contractor License No. _____ (If applicable)

If Bidder is:

An Individual

Name (typed or printed): _____

By: _____ (SEAL)
(Individual's signature)

Doing business as: _____

Business address: _____

Phone No.: _____ FAX No.: _____

A Partnership

Partnership Name: B&A Ag-Land Services LLC (SEAL)

By: [Signature]
(Signature of general partner -- attach evidence of authority to sign)

Name (typed or printed): Matthew Behrens

Business address: 2626 CR 305 Pt. LAUACA, TX 77979

Phone No.: 361-920-2172 FAX No.: _____

A Corporation

Corporation Name: _____ (SEAL)

State of Incorporation: _____

Type (General Business, Professional, Service, Limited Liability): _____

By: _____
(Signature -- attach evidence of authority to sign)

Name (typed or printed): _____

Title: _____ (CORPORATE SEAL)

Attest: _____
(Signature of Corporate Secretary)

Business address: _____

Phone No.: _____ FAX No.: _____

Date of Qualification to do business is _____

A Joint Venture

Joint Venturer Name: _____ (SEAL)

By: _____
(Signature of joint venture partner -- attach evidence of authority to sign)

Name (typed or printed): _____

Title: _____

Business address: _____

SCHEDULE OF PROPOSED SUBCONTRACTORS

Bidder proposes the following subcontractors to be used for major portions of the Project. All major subcontractors must be listed and submitted with the Bid. Bidder may change subcontractors after Bid submittal only as approved by the Engineer. Major subcontractors are those who will do work having a total value of more than five percent (5%) of the Contract amount. The maximum total value of work performed by all subcontractors on the Project shall not exceed seventy-five percent (75%) of the Contract amount.

Subcontractor	Address & Telephone Number	Speciality	Subcontract Amount
1. Mataquada Construction	1212 TX-35 Bay City TX 77414	Road Construction	208,000
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

STATE OF TEXAS {}

COUNTY OF Calhoun {}

AFFIDAVIT

MATTHEW BEHRENS being first duly sworn, deposes and says: that he or she is
(Type or Print Name)

the Owner/Operator of B&A Ag-Land Services LLC, having its
(Type or Print Title) (Type or Print Name of Company/Firm)

principal address at 2626 CR 305 Port Lavaca, TX 77979
(Type or Print Physical and Mailing Address)

who submits herewith to Calhoun County the attached bid/proposal; that he or she is the person whose name is signed to the attached bid/proposal; that said bid/proposal is genuine; that the same is not sham or collusive; that all statements of fact herein are true; and that such bid/proposal was not made in the interest or behalf of any person, partnership, company, association, organization or corporation not herein named or disclosed.

Affiant further deposes and says: that the bidder/proposer has not directly or indirectly by agreement, communication or conference with anyone, attempted to induce action prejudicial to the interests of Calhoun County, or of any other bidder/proposer, or anyone else interested in the bid/proposal contract; and that the bidder/proposer has not in any manner sought by collusion to secure for himself/herself/itself/themselves an advantage over any other bidder/proposer.

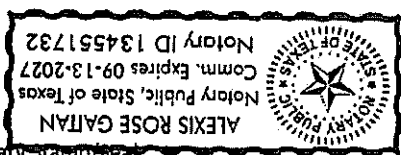
Affiant further deposes and says: that prior to the public opening and reading of bids/proposals, said bidder/proposer:

- a) did not, directly or indirectly, induce or solicit anyone else to submit a false or sham bid/proposal;
- b) did not, directly or indirectly, collude, conspire, connive or agree with anyone else that said bidder/proposer or anyone else would submit a false or sham bid/proposal, or that anyone should refrain from submitting a bid/proposal or withdraw their bid/proposal;
- c) did not, in any manner, directly or indirectly, seek by agreement, communication or conference with anyone to raise or fix the bid price/proposal of said bidder/proposer or of anyone else, or to raise or fix any overhead, profit or cost element of their price/fee or of that of anyone else;
- d) did not give, offer to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to any official, employee or agent of Calhoun County in connection with the submitted bid/proposal; and
- e) did not, directly or indirectly, submit their bid/proposal price or any breakdown thereof, or the contents thereof, or divulge information or data relative hereto, to any corporation, partnership, company, association, organization, bid depository, or to any member or agent, thereof, to any individual or group of individuals, or to any official, employee or agent of Calhoun County prior to the official opening of this bid/proposal.

Affiant further deposes and says: that the bid price(s) or proposed fees contained in this bid/proposal have been carefully checked and is submitted as true and correct, agrees to furnish any and/or all items/services upon which bid prices or proposed fees are awarded and upon the conditions and requirements contained in the bid/proposal.

[Signature]
Signature of Affiant
Matthew Behrens
Printed Name and Title of Affiant

SWORN TO AND SUBSCRIBED BEFORE ME by the above Affiant, who, on oath, states that the facts contained in the above are true and correct, this 13 day of February, 2025.



[Signature]
Signature of Notary Public

Notary Stamp/Seal

CONFLICT OF INTEREST QUESTIONNAIRE

For vendor doing business with local governmental entity

FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

B&A Ag-Land Services LLC

2 Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.

Joel M Behrens

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

Yes

No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

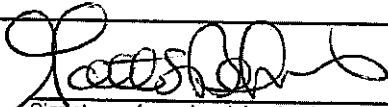
Yes

No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

Owner of business is the son of the Government officer.

6 Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7 
Signature of vendor doing business with the governmental entity

2/13/2024
Date

CONFLICT OF INTEREST QUESTIONNAIRE
For vendor doing business with local governmental entity

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

Local Government Code § 176.001(1-a): "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

Local Government Code § 176.003(a)(2)(A) and (B):

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

(i) a contract between the local governmental entity and vendor has been executed;

or

(ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

(i) a contract between the local governmental entity and vendor has been executed; or

(ii) the local governmental entity is considering entering into a contract with the vendor.

Local Government Code § 176.006(a) and (a-1)

(a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

(1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);

(2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or

(3) has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

(A) begins discussions or negotiations to enter into a contract with the local governmental entity; or

(B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

(A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);

(B) that the vendor has given one or more gifts described by Subsection (a); or

(C) of a family relationship with a local government officer.

STATEMENT OF BIDDER'S QUALIFICATIONS

All questions must be answered and the data given must be clear and comprehensive. This statement must be notarized. If necessary, questions may be answered on separate attached sheets. The Bidder may submit any additional information he desires.

Name of Bidder: B & A Ag-Land Services LLC

Address: 2626 CR 305

PORT LAVACA, TX 77979

Date Organized: 2018 Date Incorporated: 2018

Number of years in contracting business under present name: 7

CONTRACTS ON HAND:

Contract	Dollar Amount	Completion Date
ALCOA LANDSCAPING	\$171,000.00 per year	12/31/2025

Type of work performed by your company: CIVIL MAINTENANCE

Have you ever failed to complete any work awarded to you? No

Have you ever defaulted on a contract? No

List the projects most recently completed by your firm (include projects of similar importance):

Project	Dollar Amount	Mo/Yr Completed
Replace 8" underground piping	\$42,910.94	7/28/2024
Mulching of Powerline ROW	\$15,015.00	10/26/2024
Road Construction (Gravel Concrete)	\$23,230.00	12/31/2024
Clearing Brush (near Industrial Plant)	\$6,510.00	12/31/2024

Major equipment available for this contract:

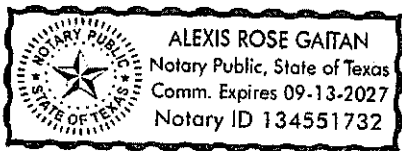
Facon 128 mulcher, Case Maxxum 115 tractor with backwing shredder, (3) 60' mowers, (2) Tracked skid steers, Deere 650 J Dozer, rental equipment - smooth drum roller, Padfoot roller.

Executed this 13th day of February, 2025.

By: [Signature] (Signature) OWNER (Title)
Matthew Behrens (Print Name)

State of Texas
County of Calhoun

Sworn to and subscribed before me this 13th day of February, 2025.



[Signature] (Notary Signature)
Alexis Rose Gaitan (Printed Name)

In and for the State of Texas
Commission Expires 09-13-2027

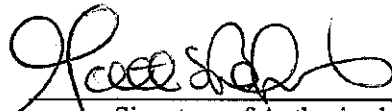
**CERTIFICATION REGARDING DEBARMENT & SUSPENSION
AND OTHER RESPONSIBILITY MATTERS**

In accordance with the Executive Order 12549, the prospective primary participant certifies to the best of his / her knowledge and belief, that its principals:

- a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
- b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification.
- d. Have not within a three-year period preceding this application / proposal had one or more public transactions (federal, state, or local) terminated for cause of default.
- e. Acknowledge that all sub-contractors selected for this project must be in compliance with paragraphs (1) (a – d) of this certification.

MATTHEW BEHNENS, OWNER
Name and Title of Authorized Agent

2/13/2024
Date


Signature of Authorized Agent

I am unable to certify to the above statements. My explanation is attached.

DEBARMENT & SUSPENSION

Executive Order 12549--Debarment and Suspension

Source: The provisions of Executive Order 12549 of Feb. 18, 1986, appear at 51 FR 6370, 3 CFR, 1986 Comp., p. 189, unless otherwise noted.

By the authority vested in me as President by the Constitution and laws of the United States of America, and in order to curb fraud, waste, and abuse in Federal programs, increase agency accountability, and ensure consistency among agency regulations concerning debarment and suspension of participants in Federal programs, it is hereby ordered that:

Section 1. (a) To the extent permitted by law and subject to the limitations in Section 1(c), Executive departments and agencies shall participate in a system for debarment and suspension from programs and activities involving Federal financial and nonfinancial assistance and benefits. Debarment or suspension of a participant in a program by one agency shall have government-wide effect.

(b) Activities covered by this Order include but are not limited to: grants, cooperative agreements, contracts of assistance, loans, and loan guarantees.

(c) This Order does not cover procurement programs and activities, direct Federal statutory entitlements or mandatory awards, direct awards to foreign governments or public international organizations, benefits to an individual as a personal entitlement, or Federal employment.

Sec. 2. To the extent permitted by law, Executive departments and agencies shall:

(a) Follow government-wide criteria and government-wide minimum due process procedures when they act to debar or suspend participants in affected programs.

(b) Send to the agency designated pursuant to Section 5 identifying information concerning debarred and suspended participants in affected programs, participants who have agreed to exclusion from participation, and participants declared ineligible under applicable law, including Executive Orders. This information shall be included in the list to be maintained pursuant to Section 5.

(c) Not allow a party to participate in any affected program if any Executive department or agency has debarred, suspended, or otherwise excluded (to the extent specified in the exclusion agreement) that party from participation in an affected program. An agency may grant an exception permitting a debarred, suspended, or excluded party to participate in a particular transaction upon a written determination by the agency head or authorized designee stating the reason(s) for deviating from this Presidential policy. However, I intend that exceptions to this policy should be granted only infrequently.

Sec. 3. Executive departments and agencies shall issue regulations governing their implementation of this Order that shall be consistent with the guidelines issued under Section 6. Proposed regulations shall be submitted to the Office of Management and Budget for review within four months of the date of the guidelines issued under Section 6. The Director of the Office of Management and Budget may return for reconsideration proposed regulations that the Director believes are inconsistent with the guidelines. Final regulations shall be published within twelve months of the date of the guidelines.

Sec. 4. There is hereby constituted the Interagency Committee on Debarment and Suspension, which shall monitor implementation of this Order. The Committee shall consist of representatives of agencies designated by the Director of the Office of Management and Budget.

Sec. 5. The Director of the Office of Management and Budget shall designate a Federal agency to perform the following functions: maintain a current list of all individuals and organizations excluded from program participation under this Order, periodically distribute the list to Federal agencies, and study the feasibility of automating the list; coordinate with the lead agency responsible for government-wide debarment and suspension of contractors; chair the Interagency Committee established by Section 4; and report periodically to the Director on implementation of this Order, with the first report due within two years of the date of the Order.

Sec. 6. The Director of the Office of Management and Budget is authorized to issue guidelines to Executive departments and agencies that govern which programs and activities are covered by this Order, prescribe government-wide criteria and government-wide minimum due process procedures, and set forth other related details for the effective administration of the guidelines.

Sec. 7. The Director of the Office of Management and Budget shall report to the President within three years of the date of this Order on Federal agency compliance with the Order, including the number of exceptions made under Section 2(c), and shall make recommendations as are appropriate further to curb fraud, waste, and abuse.

Implementation in the SRF Programs

A company or individual who is debarred or suspended cannot participate in primary and lower-tiered covered transactions. These transactions include SRF loans and contracts and subcontracts awarded with SRF loan funds.

Under 40 C.F.R. 32.510, the SRF agency must submit a certification stating that it shall not knowingly enter into any transaction with a person who is proposed for debarment, suspended, declared ineligible, or voluntarily excluded from participation in the SRF program. This certification is reviewed by the EPA regional office before the capitalization grant is awarded.

A recipient of SRF assistance directly made available by capitalization grants must provide a certification that it will not knowingly enter into a contract with anyone who is ineligible under the regulations to participate in the project. Contractors on the project have to provide a similar certification prior to the award of a contract and subcontractors on the project have to provide the general contractor with the certification prior to the award of any subcontract.

In addition to actions taken under 40 C.F.R. Part 32, there are a wide range of other sanctions that can render a party ineligible to participate in the SRF program. Lists of debarred, suspended and otherwise ineligible parties are maintained by the General Services Administration and should be checked by the SRF agency and all recipients of funds directly made available by capitalization grants to ensure the accuracy of certifications.

Additional References

C 40 C.F.R. Part 32: EPA Regulations on Debarment and Suspension.

Certification Regarding Lobbying

(To be submitted with each bid or offer exceeding \$100,000)

The undersigned certifies, to the best of his or her knowledge and belief, that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(c) The undersigned shall require that the language paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995).

The Contractor, B&A Ag-Land Services, certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 et seq., apply to this certification and disclosure, if any.



Signature of Contractor's Authorized Official

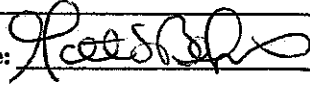
Matthew Behrens, owner

Printed Name and Title of Contractor's Authorized Official

2/23/2024

Date

Disclosure of Lobbying Activities
 Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
 (See reverse for public burden disclosure)

1. Type of Federal Action: a. contract _____ b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: a. bid/offer/application _____ b. initial award c. post-award	3. Report Type: a. initial filing _____ b. material change For material change only: Year _____ quarter _____ Date of last report _____
4. Name and Address of Reporting Entity: _____ Prime _____ Subawardee Tier _____, if Known: Congressional District, if known:	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u></u> Print Name: <u>MATTHEW BEHRENS</u> Title: <u>OWNER</u> Telephone No.: <u>361 920-2177</u> Date: <u>2/13/24</u>	
Federal Use Only	Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)	

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether sub awardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the sub awardee, e.g., the first sub awardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Sub awardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Included prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503 Approved by OMB 0348-0046

HOUSE BILL 89 VERIFICATION FORM

Certification Required by Texas Government Code Section 2270.001

The 85th Texas Legislature approved new legislation, effective September 1, 2017, which amends Texas Local Government Code Section 1, Subtitle F, Title 10, Government Code by adding Chapter 2270 which states that a government entity may not enter into a contract (which includes contracts formed through purchase orders) with a company for goods or services unless the contract contains a written verification from the company that it:

- 1) Does not boycott Israel; and
- 2) Will not boycott Israel during the term of the contract

Pursuant to Section 2270.001, Texas Government Code:

1. "Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and
2. "Company" means a for profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.

I, (authorized official) Matthew Behrens, do hereby verify the truthfulness and accuracy of the contents of the statements submitted on this certification under the provisions of Subtitle F, Title 10, Government Code Chapter 2270 and that the company named below:

- 1) Does not boycott Israel currently;
- 2) Will not boycott Israel during the term of the contract; and
- 3) Is not currently listed on the State of Texas Comptroller's Companies that Boycott Israel List located at <https://comptroller.texas.gov/purchasing/publications/divestment.php>

BIA Ag-Land Services LLC

Company Name

[Signature]

Signature of Authorized Official

Matthew Behrens

Printed Name of Authorized Official

owner

Title of Authorized Official

2/13/2024

Date

RESIDENCE CERTIFICATION

Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Calhoun County requests Residence Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contract; pertinent provisions of §2252.001 are stated below:

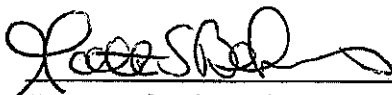
Sec. 2252.001 (3) "Nonresident bidder" refers to a person who is not a resident.

(4) "Resident bidder" refers to a person whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

I certify that _____ is a "Nonresident Bidder" of Texas
(Company Name)
as defined in Government Code §2252.001 and our principal place of business is

(City and State)

I certify that B&A Ag-Land Services LLC is a "Resident Bidder" of Texas as
(Company Name)
defined in Government Code §2252.001.



Signature of Authorized Agent

Matthew Behrens owner

Printed Name and Title of Authorized Agent

2/13/2024

Date

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p>			
<p>2 Business name/disregarded entity name, if different from above</p>	B&A Ag-Land Services LLC		
<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input type="checkbox"/> C Corporation</p> <p><input type="checkbox"/> S Corporation</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Trust/estate</p> <p><input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small></p> <p><input type="checkbox"/> Other (see Instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>		
<p>5 Address (number, street, and apt. or suite no.) See instructions.</p>	2626 CR 305		Requester's name and address (optional)
<p>6 City, state, and ZIP code</p>	Port Lavaca, TX 77979		CALHOUN COUNTY 202 S ANN ST, PORT LAVACA TX 77979 361-553-4610 FAX: 361-553-4614
<p>7 List account number(s) here (optional)</p>			

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number

--	--	--	--	--	--	--	--	--	--

OR

Employer identification number

8	3	-	1	7	1	5	9	5	1
---	---	---	---	---	---	---	---	---	---

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶

Date ▶ 02/13/2024

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/30/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Harris & Harris Insurance PO Box 1380 Orange Grove TX 78372-	CONTACT NAME: Jennifer Green	
	PHONE (A/C, No., Ext): (361)490-4105	FAX (A/C, No.): (361)490-4108
	E-MAIL ADDRESS: Jennifer@h-hins.com	
INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Kinsale Insurance Co.	
INSURED B & A Ag-Land Services, LLC 2626 CR 305 Port Lavaca TX 77979-	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	
	INSURER G:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			0100283461-1	02/13/2025	02/13/2026	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ Excluded
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED: RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
General Liability policy provides blanket Additional Insured and Waiver of Subrogation as required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

AI 005357

Calhouns County Texas PO Drawer 6 211 S Ann Street Port Lavaca TX 77979-	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE <i>Neil Green</i>

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/30/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Risk Transfer Insurance Agency, LLC 47 E. Robinson Street Suite 200 Orlando, FL 32801	CONTACT NAME: Tim Buttler PHONE (A/C, No, Ext): E-MAIL ADDRESS: tbuttler@halcyonhr.com FAX (A/C, No):
INSURED Halcyon HR, Inc. 522 Scotland Drive Corpus Christi, TX 78418	INSURER(S) AFFORDING COVERAGE INSURER A :Service American Indemnity Company INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :
	NAIC # 39152

COVERAGES CERTIFICATE NUMBER: P25LZ8QS REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/PO/ AGG \$ \$
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB OCCUR <input type="checkbox"/> EXCESS LIAB CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below		RT24MWC0670262202	10/01/2024	10/01/2025	X PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 \$ \$ \$ \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Coverage is extended to the covered employees, not subcontractors, in all states except in monopolistic states (ND, OH, WA, WY) of alternate employer: B&A Ag Land Services LLC (Added Eff 10/01/23)
Evidence of Coverage

CERTIFICATE HOLDER

B&A Ag Land Services LLC
2626 CR 305
Port Lavaca, TX 77979

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

TEXAS LIABILITY INSURANCE CARDS

Cut out your Texas Liability Insurance Card(s) below.

IMPORTANT: If you want this official card written in Spanish, call this number: 1-800-772-6535.

IMPORTANTE: Si usted desea una tarjeta oficial de comprobante de seguro escrita en español, comuníquese con su agente de seguros a este número: 1-800-772-6535.

CUT ALONG DOTTED LINES

Name and Address of Insured
MATTHEW BEHRENS
 26648 SH 172
 PORT LAVACA TX 77979-5366

BUSINESS AUTO POLICY

For Consumer Inquiries Call: 800-772-6535
 To Report a Claim Call: 800-266-5458
 Insurance Company
FARM BUREAU COUNTY MUTUAL OF TEXAS
 Agent
LAUREN HAJOVSKY
 AC (361) 782-3065

Policy Number	Effective Date	Expiration Date
21968543	11-04-2024	05-04-2025

Vehicle Make/Model	Year
CHEVY PKUP 1GBM7H1J6MJ104774	1991
FORD PKUP 2FTPF17Z53CB11227	2003
CHEVY PKUP 1GCHC29U62E248304	2002
FORD PKUP 1FT8W3BT2FEC52905	2015

This policy provides at least the minimum amounts of liability insurance required by the Texas Motor Vehicle Safety Responsibility Act for the specified vehicle and named insureds and may provide coverage for other persons and other vehicles as provided by the insurance policy.

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 26648 SH 172
 PORT LAVACA TX 77979-5366

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PROSPERITY BANK[®]

Member FDIC

CASHIER'S CHECK

No.5605032

REMITTER: B&A AG-LAND SERVICES LLC

AS/87/6

February 13, 2025

PAY TO THE ORDER OF: CALHOUN COUNTY

\$17,079.02

**** SEVENTEEN THOUSAND SEVENTY NINE AND 02/100****

DOLLARS

NOTICE TO CUSTOMERS
THE PURCHASE OF AN INDEMNITY BOND WILL BE REQUIRED
BEFORE THIS CHECK WILL BE REPLACED OR REFUNDED IN
THE EVENT IT IS LOST, MISPLACED OR STOLEN

CUSTOMER COPY
NON-NEGOTIABLE



PROSPERITY BANK[®]

Member FDIC

CASHIER'S CHECK

No.5605032

REMITTER: B&A AG-LAND SERVICES LLC

AS/87/6

February 13, 2025

PAY TO THE ORDER OF: CALHOUN COUNTY

\$17,079.02

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NOTICE TO CUSTOMERS
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THE EVENT IT IS LOST, MISPLACED OR STOLEN

TWO SIGNATURES REQUIRED

Alexandra Samaly
AUTHORIZED SIGNATURE

Laura King
AUTHORIZED SIGNATURE



20

20. Consider and take action to grant a variance to Purple Crab, LLC as to the front building setback line for Lot 1, Block 37, Port O'Connor Townsite, Calhoun County, Texas. (GDR)

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

**ORDER GRANTING VARIANCE OF FRONT BUILDING SETBACK
IN PORT O'CONNOR, CALHOUN COUNTY, TEXAS**

A Motion was made by Commissioner Reese and seconded by Commissioner Best to Grant a Variance to Purple Crab, LLC, as to the front building setback for Lot 1, Block 37, Port O'Connor Townsite, Calhoun County, Texas. Commissioners Hall, Best, Behrens and Reese voted in favor of the motion.

**ORDER GRANTING VARIANCE
IN PORT O'CONNOR, CALHOUN COUNTY, TEXAS**

WHEREAS, on the 26th day of February, 2025, the Commissioner's Court of Calhoun County, Texas considered the request of Purple Crab, LLC (the "Owner") being the owner of Lot 1, Block 37, Port O'Connor Townsite, Calhoun County, Texas (the "Property"), to grant a variance as to the front setback line for the structure built on the Property, more fully described and shown on Exhibit "A" which is attached to this order and incorporated by reference.

WHEREAS, the Commissioners' Court finds that strict application of the Subdivision Regulations for Calhoun County, specifically the front setback line required by Section 301.4., would deprive the Owner of the reasonable use of its land in that the structure located on the Property has been partially constructed and in error, the front of the structure was constructed at a fifteen and nine tenths foot (15.9') setback, when the Subdivision Regulations require a twenty foot (20') setback in Section 301.4.; and,

WHEREAS, the Commissioners' Court further finds that the Owner has provided evidence herein that the grant is absolutely necessary for the preservation and enjoyment of its property rights in that the Owner will have extensive loss if it is required to rebuild the structure and further, the structure is not located in such a location that this affects any third party; and,

WHEREAS, the Commissioners' Court further finds that the variance will not be detrimental to the health safety, and general welfare or real property in Calhoun County; and,

WHEREAS, the Commissioners' Court further finds that the granting of the variance will not be simply a matter of convenience or expedience but is founded on the principles of reasonable and substantial justice;

NOW, THEREFORE, ON MOTION DULY MADE BY Commissioner Reese and SECONDED by Commissioner Best, and upon said Motion having been approved by the Commissioner's Court in a properly posted public meeting;

IT IS ORDERED AND DECREED, that the Commissioners' Court hereby GRANTS Owner a variance as to the front building setback line of the structure located on the Property and allow the front setback line to be fifteen and nine tenths feet (15.9') instead of twenty feet (20').

IT IS FURTHER ORDERED AND DECREED that a copy of this Order is to be filed in the Official Records of Calhoun County, Texas.

SIGNED this 26th day of February, 2025.

CALHOUN COUNTY, TEXAS


HONORABLE VERN LYSSY,
CALHOUN COUNTY JUDGE

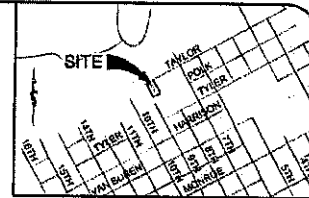
ATTESTED TO BY:
ANNA GOODMAN
CALHOUN COUNTY CLERK

By: Anna Goodman, Deputy Clerk



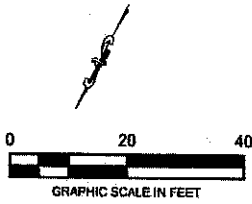
SLAB SURVEY

BEING LOT NUMBER ONE (1), IN BLOCK NUMBER THIRTY-SEVEN (37), OF PORT O'CONNOR TOWNSITE, BLOCK 37, RESUBDIVISION NO. 1, AN ADDITION TO CALHOUN COUNTY, TEXAS, ACCORDING TO THE ESTABLISHED MAP AND PLAT OF SAID ADDITION OF RECORD IN VOLUME 2, PAGE 720 OF THE PLAT RECORDS OF CALHOUN COUNTY, TEXAS.

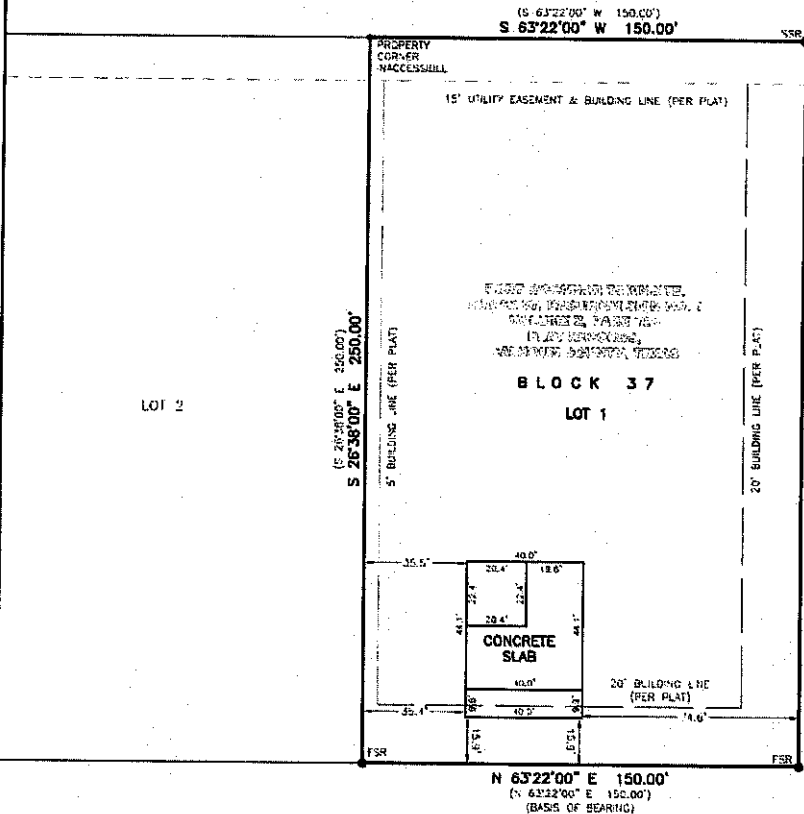


VICINITY MAP

NOTE:
THIS SURVEY WAS COMPLETED WITHOUT THE BENEFIT OF AN ABSTRACT OF TITLE. THERE MAY BE EASEMENTS, OR OTHER MATTERS, NOT SHOWN.
BASIS OF BEARING IS BASED ON PLAT RECORDED IN VOLUME 2, PAGE 720, PLAT RECORDS, CALHOUN COUNTY, TEXAS.



GENERAL WARRANTY DEED
JOHN W. HICKLAND
TO
BRYAN J. CAMPBELL AND SHERENE CAMPBELL
TRACT TWO
INSTRUMENT NO. 151120
OFFICIAL PUBLIC RECORDS
CALHOUN COUNTY, TEXAS
MAR. 28, 2017



9TH STREET
(60' RIGHT-OF-WAY)

AWC

809 WEST TAYLOR AVENUE
(60' RIGHT-OF-WAY)

LEGEND

- These standard symbols will be found in the drawing.
- SSR ○ SET 50' STEEL REBAR WITH "USP" CAP
- FSR ● FOUND 54" STEEL REBAR
- EASEMENT LINE
- - - BUILDING SETBACK LINE
- (N 00°00'00" E 0.00')
- RECORD BEARING & DISTANCE

THIS SLAB SURVEY WAS MADE ON THE GROUND OF THE PROPERTY DESCRIBED ON 04/28/2023, AND WAS PREPARED TO SHOW THE LOCATION OF THE EXISTING SLAB IN RELATION TO PROPERTY LINES, BUILDING LINES, AND EASEMENTS SHOWN ON THE PLAT OF THE ABOVE REFERENCED SUBDIVISION ONLY.

ACCORDING TO THE FLOOD INSURANCE RATE MAP (FIRM) FOR CALHOUN COUNTY, TEXAS, COMMUNITY PANEL NUMBER 48057C 0383 E, MAP REVISED OCTOBER 16, 2014, THE SUBJECT PROPERTY IS LOCATED IN ZONE AE (EL 9) WHICH IS A SPECIAL FLOOD HAZARD AREA, BASE FLOOD ELEVATION DETERMINED.

SIGNED:
 05/04/2023
 URBAN SURVEYING, INC.
 BY: MICHAEL K. WILLIAMS
 REGISTERED PROFESSIONAL LAND SURVEYOR
 TEXAS No. 6616



VICTORIA, TEXAS (361) 578-8837 FIRM # 10621104
 CUERO, TEXAS (361) 277-9066 FIRM # 10021101
 SAN ANTONIO, TEXAS (210) 267-8054 FIRM # 10193943

DRAWN BY: MMB
 JOB NO.: S25859.00

**ORDER GRANTING VARIANCE OF FRONT BUILDING SETBACK
IN PORT O'CONNOR, CALHOUN COUNTY, TEXAS**

A Motion was made by Commissioner Reese and seconded by Commissioner Best to Grant a Variance to Purple Crab, LLC, as to the front building setback for Lot 1, Block 37, Port O'Connor Townsite, Calhoun County, Texas. Commissioners Hill, Best, Benrens and Reese voted in favor of the motion.

**ORDER GRANTING VARIANCE
IN PORT O'CONNOR, CALHOUN COUNTY, TEXAS**

WHEREAS, on the 26th day of February, 2025, the Commissioner's Court of Calhoun County, Texas considered the request of Purple Crab, LLC (the "Owner") being the owner of Lot 1, Block 37, Port O'Connor Townsite, Calhoun County, Texas (the "Property"), to grant a variance as to the front setback line for the structure built on the Property, more fully described and shown on Exhibit "A" which is attached to this order and incorporated by reference.

WHEREAS, the Commissioners' Court finds that strict application of the Subdivision Regulations for Calhoun County, specifically the front setback line required by Section 301.4., would deprive the Owner of the reasonable use of its land in that the structure located on the Property has been partially constructed and in error, the front of the structure was constructed at a fifteen and nine tenths foot (15.9') setback, when the Subdivision Regulations require a twenty foot (20') setback in Section 301.4.; and,

WHEREAS, the Commissioners' Court further finds that the Owner has provided evidence herein that the grant is absolutely necessary for the preservation and enjoyment of its property rights in that the Owner will have extensive loss if it is required to rebuild the structure and further, the structure is not located in such a location that this affects any third party; and,

WHEREAS, the Commissioners' Court further finds that the variance will not be detrimental to the health safety, and general welfare or real property in Calhoun County; and,

WHEREAS, the Commissioners' Court further finds that the granting of the variance will not be simply a matter of convenience or expedience but is founded on the principles of reasonable and substantial justice;

NOW, THEREFORE, ON MOTION DULY MADE BY Commissioner Reese and SECONDED by Commissioner Best, and upon said Motion having been approved by the Commissioner's Court in a properly posted public meeting;

IT IS ORDERED AND DECREED, that the Commissioners' Court hereby GRANTS Owner a variance as to the front building setback line of the structure located on the Property and allow the front setback line to be fifteen and nine tenths feet (15.9') instead of twenty feet (20').

IT IS FURTHER ORDERED AND DECREED that a copy of this Order is to be filed in the Official Records of Calhoun County, Texas.

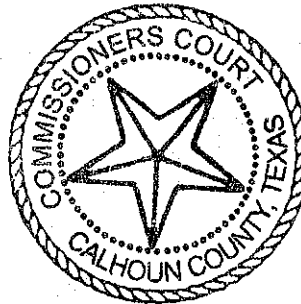
SIGNED this 26th day of February, 2025.

CALHOUN COUNTY, TEXAS


HONORABLE VERN LYSSY,
CALHOUN COUNTY JUDGE

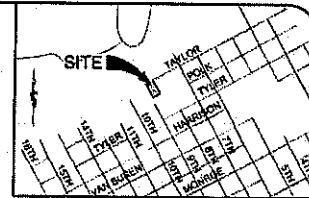
ATTESTED TO BY:
ANNA GOODMAN
CALHOUN COUNTY CLERK

By: Kaddie Smith, Deputy Clerk

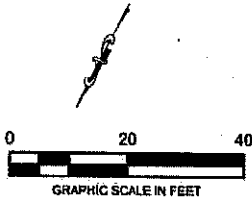


SLAB SURVEY

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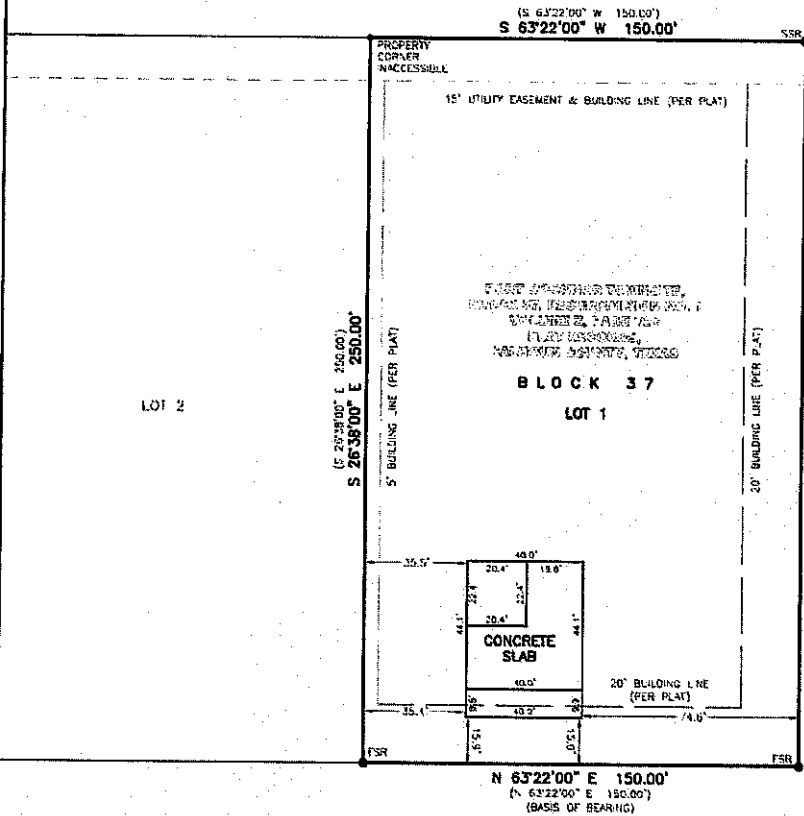


VICINITY MAP



GENERAL WARRANTY DEED
 JOHN W. HOLLAND
 TO
 BRYAN J. CAMPBELL AND SHERENE CAMPBELL
 TRACT TWO
 INSTRUMENT NO. 51320
 OFFICIAL PUBLIC RECORDS
 CALHOUN COUNTY, TEXAS
 MAR. 26, 2017

NOTE:
 THIS SURVEY WAS CONDUCTED WITHOUT THE BENEFIT OF AN ABSTRACT OF TITLE. THERE MAY BE EASEMENTS, OR OTHER MATTERS, NOT SHOWN.
 BASIS OF BEARING IS BASED ON PLAT RECORDED IN VOLUME Z, PAGE 720, PLAT RECORDS, CALHOUN COUNTY, TEXAS.



809 WEST TAYLOR AVENUE
 (60' RIGHT-OF-WAY)

9TH STREET
 (60' RIGHT-OF-WAY)

AWC

LEGEND

- These standard symbols will be found in this drawing.
- GSR ○ SET 5W" STEEL REBAR WITH "USP" CAP
 - FSR ● FOUND 5W" STEEL REBAR
 - EASEMENT LINE
 - - - BUILDING SETBACK LINE
 - RECORD BEARING & DISTANCE

THIS SLAB SURVEY WAS MADE ON THE GROUND OF THE PROPERTY DESCRIBED ON 04/28/2023, AND WAS PREPARED TO SHOW THE LOCATION OF THE EXISTING SLAB IN RELATION TO PROPERTY LINES, BUILDING LINES, AND EASEMENTS SHOWN ON THE PLAT OF THE ABOVE REFERENCED SUBDIVISION ONLY.

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SIGNED:
 05/04/2023
 URBAN SURVEYING, INC.
 BY: MICHAEL K. WILLIAMS
 REGISTERED PROFESSIONAL LAND SURVEYOR
 TEXAS No. 6616



Ausi
 Land Surveying + Aerial Imaging
 Since 1971
 VICTORIA, TEXAS (361) 578-8437 FIRM # 10021100
 CUERO, TEXAS (281) 272-0081 FIRM # 10021101
 SAN ANTONIO, TEXAS (210) 287-8654 FIRM # 10193343

DRAWN BY: MMB
 JOB NO.: S25859.00

21

21. Accept Reports from the following County Offices:

- a) Texas Agrilife Extension Service – January 2025
 - i. 4-H and Youth Development
 - ii. Agriculture and Nature Resources
 - iii. Family and Community Health
 - iv. Coastal and Marine y, 2025
- b) Justice of the Peace Pct. 4 – January, 2025
- c) Tax Assessor/Collector – December, 2024
- d) County Clerk – January, 2025

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

CALHOUN COUNTY EXTENSION OFFICE
TRAVEL REPORT TO COMMISSIONER'S COURT
 January 2025

Date	Travel Description*	Miles	Meals	Lodging	Other (Listed)	Other (Cost)
01/07/2025	TPWD Oyster Certificate of Location Meeting - Rockport - CMR - CT	102				
01/08/2025	Control Burn - Kamey - CMR - CT	20.0				
01/09/2025	Oyster Farming Program CCA Meeting - Port O' Connor - CMR - CT	48.0				
01/14/2025	LEPC Meeting - DOW Chemical - AGNR - PV	28.0				
01/17/2025	Jackson Co. ANR Agent Retirement - Edna - 4-H, CMR, FCH - CT	68.0				
01/22/2025	TXGLO Adopt-a-Beach Meeting - Corpus Christi - CMR - CT	102.0				
01/24/2025	TXGLO Adopt-a-Beach Meeting - Corpus Christi - CMR - CT	102.0				
01/27/2025	Calhoun YMCA Summer Camp Planning Meeting - Port Lavaca - CMR - CT	8.0				
01/26 - 01/28/2025	Young Farmer and Rancher - San Antonio - AGNR - PV	286.0				
01/28/2025	Dewitt County Facility Tour - Cuero - 4-H, FCH - CT	108.0				
01/29-01/31/2025	Healthy County Boot Camp - Austin - FCH - CT	153.0				
01/30/2025	First Aid/CPR/AED Training for TPWD Coastal Fisheries - CMR - CT	12.0				
		1037.0		\$ -		

* CT - denotes use of county truck; PV - denotes use of personal vehicle; CP - denotes agent carpooled to event; CV - denotes use of county van
 CEA-AGNR denotes Hailey Hayes; CEA-4-H denotes Emilee DeForest ; CEA-FCH denotes Karen Lyssy; CEA-CMR denotes RJ Shelly

I hereby certify that this is a true and correct report of travel (mileage) and other expenses incurred by me in performance of my official duties for the month shown.

Emilee DeForest
 Emilee DeForest
 County Extension Agent
 4-H & Youth Development

Hailey Hayes
 Hailey Hayes
 Signed by Ellen Herman
 Hailey Hayes
 County Extension Agent
 Ag & Natural Resources

Karen Lyssy
 Karen Lyssy
 County Extension Agent
 Family & Community Health

R. J. Shelly
 R. J. Shelly
 County Extension Agent
 Coastal Marine Resource

Family and Community Health
EXTENSION ACTIVITY REPORT TO COUNTY COMMISSIONERS COURT
January 2025

Miles traveled: Small trips in County Austin out of County

Selected major activities since last report:

- Jan 3, 6, 8-10, 13, 15-17, 22-24, 27, & 29-31 Strong People Strong Bodies morning and evening (6 classes per week)
- Jan 2 & 3 & 7 Working on Bay to Plate Program to Enhance and Encourage the Seafood Industry
- Jan 9 Calhoun County Library Board Meeting
- Jan 12 Olivia 4-H program – Encouraging participation in Homemaking area
- Jan 13 Our Lady of the Gulf School Advisory Committee Meeting
- Jan 14 FCH PAC Meeting and luncheon – Program planning and Education
- Jan 14 Regional Health and Human Services Advisory Committee Meeting – in Victoria or Virtual
- Jan 16 Senior Citizen’s Center Board Meeting
- Jan 18 Judging in Wilson County for their Baked Goods Food Show
- Jan 21 United Way Board Meeting
- Jan 28 DeWitt County to check their facilities
- Jan 28 Early Childhood Educator Training
- Jan 29 State Volunteer Steering Committee Meeting - Virtual
- Jan 29-31 Healthy County Boot Camp – Hoping to learn how to better serve our county employees

Direct Contacts by:

Office: 3 Volunteers: 2 Facebook Page Post 15 Followers 719 Instagram Posts 6
Site:0 Newsletters: 0 Facebook profile 1025+ Friends 3 posts
Phone/Texts: 54 In Person Educational Participant Contacts – 186

Major events for next month –Feb 2025

- February Meetings 4, 7, 10, 17, 18, & 20 – School Nutrition Meeting CalCoISD, OLG Finance and School Advisory Council, Volunteer Steering Committee, United Way and Senior Citizen’s Committee
- Jan 3, 5-7, 10, 12-14, 17?, 19-21, 24 & 26-28 Strong People Strong Bodies morning and evening (6 classes per week Aerobics included with evening classes)
- Feb Pickleball led by volunteers weather permitting (Tuesdays and Thursdays)
- Feb 4 Calhoun County School Health Advisory Board presenting Program Strong Teens for Healthy Schools Texas A&M AgriLife Research – Alisha George
- Feb 5 Cooking Oysters Casino at the High School with Marine agents – Culinary Classes (153students)
- Feb 6 County Lunch and Learn on Cancer Screening – 32 attendees
- Feb 11 Working on Bay to Plate Program to Enhance and Encourage the Seafood Industry
- Feb 13 Manger 101 Training with the County
- Feb 18-20 VG Young Institute with spouse
- Feb 24 Presenting Healthy South Texas Recognized School Certificate and Banners to Seadrift school at School Board Meeting
- Feb 25 Early Childhood Educator Training
- Feb 28 Judging in La Vernia for their Baked Goods Food Show

Karen P. Lyssy
Name

Calhoun
County

CEA – Family and Community Health
Title

December 2024

**Coastal and Marine
EXTENSION ACTIVITY REPORT TO COUNTY COMMISSIONERS COURT
January 2025**

Miles traveled: County Vehicle xxx Personal Vehicle 0

Selected major activities since last report

1/6/25 – Meet with Olivia Oyster Farm Business Owners
1/7/25- TPWD Oyster Certificate of Location Meeting – Rockport
1/9/25 – Calhoun County Oyster Farm Presentation to POC CCA
1/15/25 – Marine Advisory Committee Meeting
1/21/25 – Unload truck for Oyster Cage Construction Workshop
1/22 to 1/24/25 – TXGLO Adopt-a-Beach Coordinator Conference
1/27/25 – YMCA Camp Planning Meeting
1/28/25 – Oyster Cage Construction Workshop
1/30/25 – TPWD First Aid/CPR/AED Training

Direct Contacts by:

Office: 8 E-mail/Letters: 341 Instagram Posts/Followers: 4 / 1048
Site: 2 Newsletters:
Phone/Texts: 285 Volunteers:

Major events for next month – February 2025

2/4 to 2/5/25 – CHS Oyster Program
2/12 to 2/14/25 – Houston Fishing Show
2/19 – YMCA Planning Meeting
2/22 – Matagorda Bay Fishing Cooperative Annual Assembly Program

RJ Shelly
Name

Calhoun
County

Coastal and Marine Agent

January 2025

Agriculture and Natural Resources
EXTENSION ACTIVITY REPORT TO COUNTY COMMISSIONERS COURT
January 2025

Miles traveled: County Vehicle: 0 Personal Vehicle: 314

Selected major activities since last report

4th- Matagorda Swine Clinic
8th- Row Crop 3 Hour CEU
9-10- Young Farmer and Rancher Virtual Orientation
14th- LEPC Meeting
15th – Calhoun County Cattlemen Association Meeting
26-28- American Farm Bureau Conference Farm Bill Update
30th – 5 Hour Virtual CEU
Every Thursday – Livestock Judging

Direct Contacts by:

Office: 10 **E-mail:** 30 **Facebook Posts/Followers:** 8 posts/670 followers
Site: 3 **Newsletters:** 0 **Instagram Posts/Followers:** 0 Post/ 0 followers
Phone/Texts: 60

Major events for next month – February 2025

Every Thursday- Livestock Judging practice
15th – Beef Cattle CEU (no one has signed up)
20th – Victoria County Commercial Heifer Interviews
23- San Antonio Livestock Show Judging Contest
24- Pesticide Test
26-27- Texas Farm Bureau State Board Presentation

Hailey Hayes

Calhoun

4-H and Youth Development
EXTENSION ACTIVITY REPORT TO COUNTY COMMISSIONERS COURT
January 2025

Miles traveled: County Vehicle 176; Personal Vehicle 0

Selected major activities since last report

January 6 – State 4-H Fishing Tournament Meeting (virtual)
January 8&9 – Assisted 4-H member with videoing Speech for Major Livestock Show Contest
January 15 – CCF Livestock Committee Meeting
January 17 – Attended Jackson Co. ANR Agent, Mike Hiller's retirement party
January 24 – Virtual Volunteer Training
January 27 – County 4-H Council Meeting
January 28 – Went to Cuero to look at facilities
January 31 – Dollars & Sense Program – Port O'Connor 4th & 5th Grades

Direct Contacts by:

Office: 23	E-mail: 189	Facebook Posts/Followers: 10 posts/724 followers
Site: 5	Newsletters: 1	Instagram Posts/Followers: 9 posts/264 followers
Phone/Texts: 17	4-H Enrollment: 183 youth; 29 adult volunteers	

Major events for next month – February 2025

February 4 – Set Incubator at JR Kinder Class
Took Incubators to Seadrift Kinder & 3rd Grade Classes
Livestock Quiz Bowl Practice
February 5 – Egg to Chick Lesson 1 – JR Kinder Class
Egg to Chick Lesson 1 – Seadrift Kinder & 3rd Grade Classes
February 6 – San Antonio Livestock Show Food Challenge Contest
February 10-12 – San Antonio Livestock Show Jr Beef Heifers
February 13 – Egg to Chick Lesson 2 – JR Kinder Class
Coastal Bend 4-H Sportfishing Day Meeting (virtual)
Egg to Chick Lesson 2 – Seadrift Kinder & 3rd Grade Classes
February 18 – Mindful SELF Lesson 1 - Seadrift 1st Period Class
Livestock Quiz Bowl Practice
February 19 – Egg to Chick Lesson 3 – JR Kinder Class
Egg to Chick Lesson 3 – Seadrift Kinder & 3rd Grade Classes
Mindful SELF Lesson 1 – Seadrift 8th Period Class
February 20 – 4-H PALA Meeting
February 24 – County 4-H Council Meeting
February 25 – Mindful SELF Lesson 2 - Seadrift 1st Period Class
Livestock Quiz Bowl Practice
February 26 - Egg to Chick Lesson 4 – JR Kinder Class
Egg to Chick Lesson 4 – Seadrift Kinder & 3rd Grade Classes
Mindful SELF Lesson 2 – Seadrift 8th Period Class
February 27 – Livestock Judging Practice
February 28 – Dollars & Sense Program – Port O'Connor 4th & 5th Grades

Emilee S. DeForest

Calhoun

CEA – 4-H and Youth Development

January 2025

Texas A&M AgriLife Extension · The Texas A&M University System · College Station, Texas

**CALHOUN COUNTY CLERK
MONTHLY REPORT RECAPITULATION**

JANUARY 2025						
DESC	GL CODE	CIVIL/FAMILY	CRIMINAL	OFFICIAL PUBLIC RECORDS	PROBATE	TOTAL
DISTRICT ATTORNEY FEES	1000-44020		\$ 80.27			\$ 80.27
BEER LICENSE	1000-42010			\$ 5.00		\$ 5.00
COUNTY CLERK FEES	1000-44030	\$ 112.00	\$ 160.55	\$ 11,568.05	\$ 376.00	\$ 12,216.60
APPEAL FROM JP COURTS	1000-44030					
COUNTY COURT AT LAW #1 JURY FEE	1000-44140					
JURY FEE	1000-44140					
ELECTRONIC FILING FEES FOR E-FILINGS	1000-44058					
JUDGE'S EDUCATION FEE	1000-44160				\$ 30.00	\$ 30.00
JUDGE'S ORDER/SIGNATURE	1000-44180	\$ 8.00			\$ 64.00	\$ 72.00
SHERIFF'S FEES	1000-44190	\$ 75.00	\$ 107.04		\$ 200.00	\$ 382.04
VISUAL RECORDER FEE	1000-44250		\$ 30.00			\$ 30.00
TIME PAYMENT FEE - COUNTY **NEW 2020**	1000-44332					
COURT REPORTER FEE	1000-44270	\$ 25.00			\$ 150.00	\$ 175.00
RESTITUTION DUE TO OTHERS	1000-49020					
ATTORNEY FEES - COURT APPOINTED	1000-49030					
APPELLATE FUND (TGC) FEE	2620-44030	\$ 5.00			\$ 30.00	\$ 35.00
COURT FACILITY FEE FUND	2648-44030	\$ 20.00			\$ 120.00	\$ 140.00
TECHNOLOGY FUND	2663-44030		\$ 16.05			\$ 16.05
COUNTY JURY FUND **NEW 2020**	2669-44030	\$ 10.00	\$ 4.01		\$ 60.00	\$ 74.01
COURTHOUSE SECURITY FEE	2670-44030	\$ 20.00	\$ 40.14		\$ 125.00	\$ 185.14
COURT INITIATED GUARDIANSHIP FEE	2672-44030				\$ 180.00	\$ 180.00
COURT RECORD PRESERVATION FUND	2673-44030					
COURT REPORTER SERVICE FUND **NEW 2020**	2674-44030		\$ 12.04			\$ 12.04
RECORDS ARCHIVE FEE	2675-44030			\$ 2,670.00		\$ 2,670.00
COUNTY SPECIALTY COURT **NEW 2020**	2676-44030		\$ 80.27			\$ 80.27
COUNTY DISPUTE RESOLUTION FUND	2677-44030	\$ 15.00			\$ 90.00	\$ 105.00
DRUG & ALCOHOL COURT PROGRAM	2698-44030-005					
JUVENILE CASE MANAGER FUND	2699-44033					
FAMILY PROTECTION FUND	2706-44030					
JUVENILE CRIME & DELINQUENCY FUND	2715-44030		\$ 0.00			
LANGUAGE ACCESS FUND	2725-44030	\$ 3.00			\$ 18.00	\$ 21.00
PRE-TRIAL DIVERSION AGREEMENT	2729-44034					
LAW LIBRARY FEE	2731-44030	\$ 35.00			\$ 210.00	\$ 245.00
RECORDS MANAGEMENT FEE - COUNTY CLERK	2738-44380			\$ 2,730.00		\$ 2,730.00
RECORDS MANGEMENT FEE - COUNTY	2739-44030	\$ 30.00	\$ 100.34		\$ 95.00	\$ 225.34
FINES - COUNTY COURT	2740-45040		\$ 1,146.99			\$ 1,146.99
BOND FORFEITURE	2740-45050					
STATE POLICE OFFICER FEES - STATE (DPS) (20%)	7020-20740		\$ 0.28			\$ 0.28
CONSOLIDATED COURT COSTS - COUNTY	7070-20610					
CONSOLIDATED COURT COSTS - STATE	7070-20740					
CONSOLIDATED COURT COSTS - COUNTY **NEW 2020 7072-20610	7072-20610		\$ 102.00			\$ 102.00
CONSOLIDATED COURT COSTS - STATE **NEW 2020** 7072-20740	7072-20740		\$ 918.00			\$ 918.00
JUDICIAL AND COURT PERSONNEL TRAINING - ST (100%)	7502-20740					
DRUG & ALCOHOL COURT PROGRAM - COUNTY	7390-20610					
DRUG & ALCOHOL COURT PROGRAM - STATE	7390-20740					
STATE ELECTRONIC FILING FEE - CIVIL	7403-22887					
STATE ELECTRONIC FILING FEE CRIMINAL	7403-22990					
EMS TRAUMA - COUNTY (10%)	7405-20610		\$ 198.91			\$ 198.91
EMS TRAUMA - STATE (90%)	7405-20740		\$ 22.10			\$ 22.10
CIVIL INDIGENT FEE - COUNTY	7480-20610					
CIVIL INDIGENT FEE - STATE	7480-20740					
JUDICIAL FUND COURT COSTS	7495-20740					
JUDICIAL SALARY FUND - COUNTY (10%)	7505-20610					
JUDICIAL SALARY FUND - STATE (90%)	7505-20740					
JUDICIAL SALARY FUND (CIVIL & PROBATE) - STATE	7505-20740-005					
TRAFFIC LOCAL (ADMINISTRATIVE FEES)	7538-22884,1000-44359					
COURT COST APPEAL OF TRAFFIC REG (JP APPEAL)	7538-22885					
BIRTH - STATE	7855-20780			\$ 241.20		\$ 241.20
INFORMAL MARRIAGES - STATE	7855-20782					
JUDICIAL FEE	7855-20786					
FORMAL MARRIAGES - STATE	7855-20788			\$ 270.00		\$ 270.00
NONDISCLOSURE FEE - STATE	7855-20790					
TCLEOSE COURT COST - COUNTY (10%)	7856-20610					
TCLEOSE COURT COST - STATE (90%)	7856-20740					
JURY REIMBURSEMENT FEE - COUNTY (10%)	7857-20610					
JURY REIMBURSEMENT FEE - STATE (90%)	7857-20740					
CONSOLIDATED CRT COSTS - STATE (PR, FAM, CV) SB41 7858-20740	7858-20740	\$ 137.00				\$ 137.00
STATE TRAFFIC FINE - COUNTY (5%)	7860-20610					
STATE TRAFFIC FINE - STATE (95%)	7860-20740					
STATE TRAFFIC FINE - COUNTY (4%) 9/1/2019	7860-20610					
STATE TRAFFIC FINE - STATE (96%) 9/1/2019	7860-20740					

**CALHOUN COUNTY CLERK
MONTHLY REPORT RECAPITULATION**

JANUARY 2025						
DESC	GL CODE	CIVIL/FAMILY	CRIMINAL	OFFICIAL PUBLIC RECORDS	PROBATE	TOTAL
INDIGENT DEFENSE FEE - CRIMINAL - COUNTY (10%)	7865-20610		\$ -			\$ -
INDIGENT DEFENSE FEE - CRIMINAL - STATE (90%)	7865-20740		\$ -			\$ -
TIME PAYMENT - COUNTY (50%)	7950-20610		\$ -			\$ -
TIME PAYMENT - STATE (50%)	7950-20740		\$ -			\$ -
BAIL JUMPING AND FAILURE TO APPEAR - COUNTY	7970-20610					\$ -
BAIL JUMPING AND FAILURE TO APPEAR - STATE	7970-20740					\$ -
DUE PORT LAVACA PD	9990-99991		\$ 15.00			\$ 15.00
DUE SEADRIFT PD	9990-99992		\$ -			\$ -
DUE TO POINT COMFORT PD	9990-99993		\$ -			\$ -
DUE TO TEXAS PARKS & WILDLIFE	9990-99994		\$ -			\$ -
DUE TO TEXAS PARKS & WILDLIFE WATER SAFETY	9990-99995					\$ -
DUE TO TABC	9990-99996					\$ -
DUE TO ATTORNEY AD LITEMS	9990-99997					\$ -
DUE TO OPERATING/NSF CHARGES/DUE TO OTHERS	7120-20759	\$ -	\$ -	\$ (591.00)	\$ 1,000.00	\$ 409.00
		\$ 495.00	\$ 3,034.00	\$ 16,893.25	\$ 2,748.00	\$ 23,170.25
TOTAL FUNDS COLLECTED						\$ 23,170.25 (0.00)
FUNDS HELD IN ESCROW:						\$ -
AMOUNT DUE TO TREASURER (2DR'S):						\$ 22,746.25
TOTAL RECEIPTS:						\$ 23,170.25
AMOUNT DUE TO OTHERS (LESS SF'S):						\$ 424.00

REGISTRY DEPOSITS, CASH BONDS, AND CERTIFICATES OF DEPOSIT			
CASH ON HAND, REGISTRY OF COURT FUNDS (PROSPERITY)			
BEGINNING BOOK BALANCE	12/31/2024	\$ 60,848.62	
FUND RECEIVED		\$ 11,861.31	**BALANCE OF CASH BONDS**
DISBURSEMENTS		\$ (12,411.31)	
ENDING BOOK BALANCE	1/31/2025	\$ 60,298.62	**OTHER REGISTRY ITEMS**
			\$ 8,096.12
			IBC CASH BOND CHECKS
			\$ (25.00)
BANK RECONCILIATION REGISTRY OF COURT FUNDS			
ENDING BANK BALANCE	1/31/2025	\$ 71,093.62	**TOTAL REGISTRY FUNDS**
OUTSTANDING DEPOSITS**		\$ -	
OUTSTANDING CHECKS**		\$ (10,795.00)	
RECONCILED BANK BALANCE	1/31/2025	\$ 60,298.62	Reconciled: \$ -
BB OFF \$5K - CK#5724 ENTERED WRONG			

CERTIFICATES OF DEPOSITS HELD IN TRUST - PROSPERITY BANK					
CD'S	Date Issued	Balance	Purchases/	Withdrawals	Balance
		12/31/2024	Interest		01/31/25
10440	1/24/2018	\$ -		\$ -	\$ -
10441	1/24/2018	\$ -			\$ -
10442	1/24/2018	\$ 1,332.88	\$ 8.89		\$ 1,341.77
10443	1/25/2018	\$ 1,332.88	\$ 8.89		\$ 1,341.77
10444	1/25/2018	\$ 10,065.48	\$ 67.10		\$ 10,132.58
10445	1/25/2018	\$ 10,065.48	\$ 67.10		\$ 10,132.58
10446	1/25/2018	\$ 10,065.48	\$ 67.10		\$ 10,132.58
10449	6/9/1955	\$ 21,371.45			\$ 21,371.45
10454	3/2/2018	\$ -			\$ -
10455	3/2/2018	\$ -			\$ -
10486	8/26/2020	\$ 6,177.64			\$ 6,177.64
10495	12/22/2021	\$ 36,003.40			\$ 36,003.40
10496	12/22/2021	\$ 36,003.38			\$ 36,003.38
10504	2/14/2023	\$ 11,473.80	\$ 43.11	\$ 11,516.91	\$ -
10505	2/14/2023	\$ 9,729.33			\$ 9,729.33
TOTALS:		\$ 153,621.20	\$ 262.19	\$ 11,516.91	\$ 142,366.48

Anna M. Goodman
Submitted by: Anna M Goodman, County Clerk

2/18/2025
Date

[Signature]
Calhoun County Judge

2-26-2025
Date

Facsimile Cover Sheet

Date: February 10, 2025

Page (s) 5
(Including Cover)

FROM: JUSTICE COURT PCT. 4, CALHOUN COUNTY
103 W. Dallas Street, P.O. Box 520
Seadrift, Texas 77983

FAX: 1-361-785-2179

PHONE: 361-785-7082

TO: County Commissioner Court Office
Attn:

FAX: 361-553-4444

PHONE: 361-553-4600

Ref: January 2025 – JP4 Monthly Money Distribution Report

Please give me a call if you have any questions.

Thank you,
Patsy Spence, JP4 Court Clerk
Judge Wesley J. Hunt

ENTER COURT NAME:		JUSTICE OF PEACE NO. 4
ENTER MONTH OF REPORT		JANUARY
ENTER YEAR OF REPORT		2026
	CODE	AMOUNT
CASH BONDS		
ADMINISTRATION FEE - ADMF		20.00
BREATH ALCOHOL TESTING - BAT		
CONSOLIDATED COURT COSTS - CCC		
STATE CONSOLIDATED COURT COST- 2020		393.87
LOCAL CONSOLIDATED COURT COST- 2020		89.62
COURTHOUSE SECURITY - CHS		
CJP		
CIVIL JUSTICE DATA REPOSITORY FEE - CJDR		
CORRECTIONAL MANAGEMENT INSTITUTE - CMI		
CR		
CHILD SAFETY - CS		
CHILD SEATBELT FEE - CSBF		
CRIME VICTIMS COMPENSATION - CVC		
DPSC/FAILURE TO APPEAR - OMNI - DPSC		
ADMINISTRATION FEE FTA/FTP (aka OMNI)- 2020		30.00
ELECTRONIC FILING FEE - EEF		
FUGITIVE APPREHENSION - FA		
GENERAL REVENUE - GR		
CRIM - IND LEGAL SVCS SUPPORT - IDF		
JUVENILE CRIME & DELINQUENCY - JCD		
JUVENILE CASE MANAGER FUND - JCMF		
JUSTICE COURT PERSONNEL TRAINING - JCPT		
JUROR SERVICE FEE - JSF		
LOCAL ARREST FEES - LAF		27.01
LEMI		
LEOA		
LEOC		
OCL		
PARKS & WILDLIFE ARREST FEES - PWF		
STATE ARREST FEES - SAF		5.00
SCHOOL CROSSING/CHILD SAFETY FEE - SCF		
SUBTITLE C - SUBC		
STATE TRAFFIC FINES-EST 9.1.19- STF		99.00
TABC ARREST FEES - TAF		
TECHNOLOGY FUND - TF		
TRAFFIC - TFC		
LOCAL TRAFFIC FINE- 2020		6.00
TIME PAYMENT - TIME		
TIME PAYMENT REIMBURSEMENT FEE- 2020		15.00
TRUANCY PREVENTION/DIVERSION FUND - TPDF		
LOCAL & STATE WARRANT FEES - WRNT		50.00
COLLECTION SERVICE FEE-MVBA - CSRV		245.67
DEFENSIVE DRIVING COURSE - DDC		
DEFERRED FEE - DFF		
DRIVING EXAM FEE- PROV DL		
FILING FEE - FFEE		
STATE CONSOLIDATED CIVIL FEE - 2022		128.00
LOCAL CONSOLIDATED CIVIL FEE - 2022		198.00
FILING FEE SMALL CLAIMS - FFSC		
JURY FEE - JF		
COPIES/CERTIFIED COPIES - CC		
INDIGENT FEE - CIFF or INDF		
JUDGE PAY RAISE FEE - JPAY		
SERVICE FEE - SFEE		75.00
OUT-OF-COUNTY SERVICE FEE		
ELECTRONIC FILING FEE - EEF CV		
EXPUNGEMENT FEE- EXPG		
EXPIRED RENEWAL - EXPR		
ABSTRACT OF JUDGEMENT - AOJ		
ALL WRITS - WOP / WOE		188.00
DPS FTA FINE - DPSF		
LOCAL FINES - FINE		823.43
LICENSE & WEIGHT FEES - LWF		
PARKS & WILDLIFE FINES - PWF		
SEATBELT/UNRESTRAINED CHILD FINE - SEAT		
JUDICIAL & COURT PERSONNEL TRAINING-JCPT		
* OVERPAYMENT (OVER \$10) - OVER		
* OVERPAYMENT (\$10 AND LESS) - OVER		
RESTITUTION - REST		
PARKS & WILDLIFE-WATER SAFETY FINES-WVSF		
MARINE SAFETY PARKS & WILDLIFE - MSO		
TOTAL ACTUAL MONEY RECEIVED		\$2,158.50
TYPE: AMOUNT		
TOTAL WARRANT FEES		50.00
ENTER LOCAL WARRANT FEES		50.00
STATE WARRANT FEES		50.00
RECORD ON TOTAL PAGE OF HILL COUNTRY SOFTWARE MO. REPORT		
DUE TO OTHERS: AMOUNT		
DUE TO CCISD - 50% of Fine on JV cases		0.00
DUE TO DA RESTITUTION FUND		0.00
REFUND OF OVERPAYMENTS		0.00
OUT-OF-COUNTY SERVICE FEE		0.00
CASH BONDS		0.00
PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT		
PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT		
PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT		
PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT		
PLEASE INCLUDE D.R. REQUESTING DISBURSEMENT (IF REQUIRED)		
TOTAL DUE TO OTHERS		\$0.00
TREASURERS RECEIPTS FOR MONTH: AMOUNT		
CASH, CHECKS, M.O.s & CREDIT CARDS		\$2,158.50
Calculate from ACTUAL Treasurer's Receipts		
TOTAL TREAS. RECEIPTS		\$2,158.50

MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

2/5/2025

COURT NAME: JUSTICE OF PEACE NO. 4
MONTH OF REPORT: JANUARY
YEAR OF REPORT: 2025

ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT
CR 1000-001-45014	FINES	623.43
CR 1000-001-44190	SHERIFF'S FEES	81.01
	ADMINISTRATIVE FEES:	
	DEFENSIVE DRIVING	0.00
	CHILD SAFETY	0.00
	TRAFFIC	6.00
	ADMINISTRATIVE FEES	50.00
	EXPUNGEMENT FEES	0.00
	MISCELLANEOUS	0.00
	TOTAL ADMINISTRATIVE FEES	56.00
CR 1000-001-44364	CONSTABLE FEES-SERVICE	230.00
CR 1000-001-44010	JP FILING FEES	0.00
CR 1000-001-44064	COPIES / CERTIFIED COPIES	0.00
CR 1000-001-44090	OVERPAYMENTS (LESS THAN \$10)	0.00
CR 1000-001-49110	TIME PAYMENT REIMBURSEMENT FEE	15.00
CR 1000-001-44322	SCHOOL CROSSING/CHILD SAFETY FEE	0.00
CR 1000-001-44145	DUE TO STATE-DRIVING EXAM FEE	0.00
CR 1000-999-20741	DUE TO STATE-SEATBELT FINES	0.00
CR 1000-999-20744	DUE TO STATE-CHILD SEATBELT FEE	0.00
CR 1000-999-20745	DUE TO STATE-OVERWEIGHT FINES	0.00
CR 1000-999-20746	DUE TO JP COLLECTIONS ATTORNEY	245.57
CR 1000-999-20770	TOTAL FINES, ADMIN. FEES & DUE TO STATE	\$1,251.01
CR 2670-001-44064	COURTHOUSE SECURITY FUND	\$31.37
CR 2720-001-44064	JUSTICE COURT SECURITY FUND	\$0.00
CR 2719-001-44064	JUSTICE COURT TECHNOLOGY FUND	\$25.61
CR 2699-001-44064	JUVENILE CASE MANAGER FUND	\$0.00
CR 2730-001-44064	LOCAL TRUANCY PREVENTION & DIVERSION FUND	\$32.01
CR 2889-001-44064	COUNTY JURY FUND	\$0.64
CR 2728-001-44064	JUSTICE COURT SUPPORT FUND	\$150.00
CR 2677-001-44064	COUNTY DISPUTE RESOLUTION FUND	\$30.00
CR 2725-001-44064	LANGUAGE ACCESS FUND	\$18.00
	STATE ARREST FEES	
	DPS FEES	1.00
	P&W FEES	0.00
	TABC FEES	0.00
	TOTAL STATE ARREST FEES	1.00
CR 7020-999-20740	CCC-GENERAL FUND	0.00
CR 7070-999-20610	CCC-STATE	0.00
CR 7070-999-20740		
DR 7070-999-10010		0.00
CR 7072-999-20610	STATE CCC- GENERAL FUND	39.39
CR 7072-999-20740	STATE CCC- STATE	354.48
DR 7072-999-10010		393.87
CR 7860-999-20610	STF/SUBC-GENERAL FUND	0.00
CR 7860-999-20740	STF/SUBC-STATE	0.00
DR 7860-999-10010		0.00
CR 7860-999-20610	STF- EST 9/1/2019- GENERAL FUND	3.96
CR 7860-999-20740	STF- EST 9/1/2019- STATE	95.04
DR 7860-999-10010		99.00

MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

2/5/2025

COURT NAME: JUSTICE OF PEACE NO. 4
MONTH OF REPORT: JANUARY
YEAR OF REPORT: 2025

CR 7950-999-20610	TP-GENERAL FUND	0.00
CR 7950-999-20740	TP-STATE	0.00
DR 7950-999-10010		<hr/> 0.00

MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

2/5/2025

COURT NAME: JUSTICE OF PEACE NO. 4
 MONTH OF REPORT: JANUARY
 YEAR OF REPORT: 2025

CR 7480-999-20610	CIVIL INDIGENT LEGAL-GEN. FUND	0.00
CR 7480-999-20740	CIVIL INDIGENT LEGAL-STATE	0.00
DR 7480-999-10010		<u>0.00</u>
CR 7865-999-20610	CRIM-SUPP OF IND LEG SVCS-GEN FUND	0.00
CR 7865-999-20740	CRIM-SUPP OF IND LEG SVCS-STATE	0.00
DR 7865-999-10010		<u>0.00</u>
CR 7970-999-20610	TL/FTA-GENERAL FUND	0.00
CR 7970-999-20740	TL/FTA-STATE	0.00
DR 7970-999-10010		<u>0.00</u>
CR 7505-999-20610	JPAY - GENERAL FUND	0.00
CR 7505-999-20740	JPAY - STATE	0.00
DR 7505-999-10010		<u>0.00</u>
CR 7857-999-20610	JURY REIMB. FUND- GEN. FUND	0.00
CR 7857-999-20740	JURY REIMB. FUND- STATE	0.00
DR 7857-999-10010		<u>0.00</u>
CR 7856-999-20610	CIVIL JUSTICE DATA REPOS.- GEN FUND	0.00
CR 7856-999-20740	CIVIL JUSTICE DATA REPOS.- STATE	0.00
DR 7856-999-10010		<u>0.00</u>
CR 7502-999-20740	JUD/CRT PERSONNEL TRAINING FUND- STATE	0.00
DR 7502-999-10010		<u>0.00</u>
7998-999-20740	TRUANCY PREVENT/DIV FUND - STATE	0.00
7998-999-20701	JUVENILE CASE MANAGER FUND	0.00
DR 7998-999-10010		<u>0.00</u>
7403-999-22889	ELECTRONIC FILING FEE - CV STATE	0.00
DR 7403-999-22889		<u>0.00</u>
7858-999-20740	STATE CONSOLIDATED CIVIL FEE	126.00
		<u>126.00</u>
	TOTAL (Distrib Req to Oper Acct)	<u>\$2,158.50</u>
DUE TO OTHERS (Distrib Req Attchd)		
	CALHOUN COUNTY ISD	0.00
	DA - RESTITUTION	0.00
	REFUND OF OVERPAYMENTS	0.00
	OUT-OF-COUNTY SERVICE FI	0.00
	CASH BONDS	0.00
	PARKS & WILDLIFE FINES	0.00
	WATER SAFETY FINES	0.00
	TOTAL DUE TO OTHERS	<u>\$0.00</u>
	TOTAL COLLECTED-ALL FUNDS	<u>\$2,158.50</u>
	LESS: TOTAL TREASURER'S RECEIPTS	<u>\$2,158.50</u>
	OVER/(SHORT)	<u>\$0.00</u>

0

22

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

2024	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

2025	
RESULT:	APPROVED [UNANIMOUS]
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, February 26, 2025

HEARING TYPE: REGULAR

BUDGET YEAR: 2024

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: COUNTY TAX COLLECTOR

DEPARTMENT NO: 200

AMENDMENT NO: 6988 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE	FUND BAL DECREASE
53020	GENERAL OFFICE SUPPLIES	999	NO GRANT	\$0	\$0	\$0	\$315	\$315	
63500	MACHINE MAINTENANCE	999	NO GRANT	\$0	\$0	\$315	\$0		(\$315)
AMENDMENT NO 6988 TOTAL				\$0	\$0	\$315	\$315	\$0	\$0
COUNTY TAX COLLECTOR TOTAL				\$0	\$0	\$315	\$315	\$0	\$0

DEPARTMENT NAME: EMERGENCY COMMUNICATION DIVISION DEPARTMENT NO: 635

AMENDMENT NO: 6988 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE	FUND BAL DECREASE
66192	TELEPHONE SERVICES	999	NO GRANT	\$0	\$0	\$0	\$2,062	\$2,062	
70654	BUILDING-EMERGENCY COMMUNIC	999	NO GRANT	\$0	\$0	\$2,062	\$0		(\$2,062)
AMENDMENT NO 6988 TOTAL				\$0	\$0	\$2,062	\$2,062	\$0	\$0
EMERGENCY COMMUNICATION DIVISION TOTAL				\$0	\$0	\$2,062	\$2,062	\$0	\$0

DEPARTMENT NAME: EMERGENCY MEDICAL SERVICES DEPARTMENT NO: 345

AMENDMENT NO: 6988 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE	FUND BAL DECREASE

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, February 26, 2025

HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: EMERGENCY MEDICAL SERVICES

DEPARTMENT NO: 345

AMENDMENT NO: 6988 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE/DECREASE
50900	SPECIAL LICENSE	999	NO GRANT	\$0	\$0	\$0	\$3,629	\$3,629
51940	WORKMENS COMPENSATION	999	NO GRANT	\$0	\$0	\$0	\$5,196	\$5,196
70750	CAPITAL OUTLAY	999	NO GRANT	\$0	\$0	\$8,825	\$0	(\$8,825)
AMENDMENT NO 6988 TOTAL				\$0	\$0	\$8,825	\$8,825	\$0
EMERGENCY MEDICAL SERVICES TOTAL				\$0	\$0	\$8,825	\$8,825	\$0

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1

DEPARTMENT NO: 540

AMENDMENT NO: 6988 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE/DECREASE
62659	GARBAGE COLLECTION	999	NO GRANT	\$0	\$0	\$32	\$0	(\$32)
63920	MISCELLANEOUS	999	NO GRANT	\$0	\$0	\$0	\$32	\$32
AMENDMENT NO 6988 TOTAL				\$0	\$0	\$32	\$32	\$0
ROAD AND BRIDGE-PRECINCT #1 TOTAL				\$0	\$0	\$32	\$32	\$0

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #4

DEPARTMENT NO: 570

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, February 26, 2025

HEARING TYPE: REGULAR

BUDGET YEAR: 2024

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #4

DEPARTMENT NO: 570

AMENDMENT NO: 6987 REQUESTOR: COMMISSIONER PRECINCT #4

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE		EXPENDITURE		FUND BAL	
				INCREASE	DECREASE	INCREASE	DECREASE	INCREASE	DECREASE
53550	LUMBER	0	NO GRANT	\$0	\$0	\$0	\$3,000	\$3,000	
53580	PIPE	999	NO GRANT	\$0	\$0	\$5,621	\$0	(\$5,621)	
53590	SIGNS	999	NO GRANT	\$0	\$0	\$0	\$4,064	\$4,064	
53595	TOOLS	999	NO GRANT	\$0	\$0	\$0	\$677	\$677	
53630	INSECTICIDES/PESTICIDES	999	NO GRANT	\$0	\$0	\$22,095	\$0	(\$22,095)	
60520	BUILDING REPAIRS	999	NO GRANT	\$0	\$0	\$0	\$4,486	\$4,486	
63350	LEGAL SERVICES	999	NO GRANT	\$0	\$0	\$0	\$1,799	\$1,799	
63500	MACHINE MAINTENANCE	999	NO GRANT	\$0	\$0	\$0	\$499	\$499	
63920	MISCELLANEOUS	999	NO GRANT	\$0	\$0	\$108	\$0	(\$108)	
66498	TRAVEL OUT OF COUNTY	999	NO GRANT	\$0	\$0	\$0	\$3,403	\$3,403	
70750	CAPITAL OUTLAY	999	NO GRANT	\$0	\$0	\$0	\$9,896	\$9,896	
AMENDMENT NO 6987 TOTAL				\$0	\$0	\$27,824	\$27,824	\$0	\$0
ROAD AND BRIDGE-PRECINCT #4 TOTAL				\$0	\$0	\$27,824	\$27,824	\$0	\$0
GENERAL FUND TOTAL				\$0	\$0	\$39,058	\$39,058	\$0	\$0
Grand Total				\$0	\$0	\$39,058	\$39,058	\$0	\$0

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, February 26, 2025

HEARING TYPE: REGULAR

BUDGET YEAR: 2025

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: BUILDING MAINTENANCE

DEPARTMENT NO: 170

AMENDMENT NO: 6986 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
63920	MISCELLANEOUS	999	NO GRANT	\$0	\$0	\$0	\$109	\$109
66498	TRAVEL OUT OF COUNTY	999	NO GRANT	\$0	\$0	\$109	\$0	(\$109)
AMENDMENT NO 6986 TOTAL				\$0	\$0	\$109	\$109	\$0
BUILDING MAINTENANCE TOTAL				\$0	\$0	\$109	\$109	\$0

DEPARTMENT NAME: DISTRICT COURT

DEPARTMENT NO: 430

AMENDMENT NO: 6986 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51533	JURORS-PETT	999	NO GRANT	\$0	\$0	\$0	\$1,000	\$1,000
51534	JURORS-GRAND	999	NO GRANT	\$0	\$0	\$1,000	\$0	(\$1,000)
61270	CONTRIB. TO EXP - CRT REPORTER	999	NO GRANT	\$0	\$0	\$5,678	\$0	(\$5,678)
61460	COURT REPORTER-SPECIAL	999	NO GRANT	\$0	\$0	\$0	\$5,678	\$5,678
AMENDMENT NO 6986 TOTAL				\$0	\$0	\$6,678	\$6,678	\$0
DISTRICT COURT TOTAL				\$0	\$0	\$6,678	\$6,678	\$0

DEPARTMENT NAME: EMERGENCY MEDICAL SERVICES

DEPARTMENT NO: 345

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, February 26, 2025

HEARING TYPE: REGULAR

BUDGET YEAR: 2025

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: EMERGENCY MEDICAL SERVICES

DEPARTMENT NO: 345

AMENDMENT NO: 6986 REQUESTOR: COUNTY AUDITOR OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
66505	TRAVEL/DUES/SUBSCRIPTIONS	999	NO GRANT	\$0	\$0	\$10,000	\$0	(\$10,000)
70750	CAPITAL OUTLAY	999	NO GRANT	\$0	\$0	\$0	\$10,000	\$10,000
AMENDMENT NO 6986 TOTAL				\$0	\$0	-\$10,000	\$10,000	\$0
EMERGENCY MEDICAL SERVICES TOTAL				\$0	\$0	-\$10,000	\$10,000	\$0

DEPARTMENT NAME: FIRE PROTECTION-PORT O'CONNOR

DEPARTMENT NO: 680

AMENDMENT NO: 6984 REQUESTOR: FIRE PROTECTION-PORT O'CONNOR

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53980	SUPPLIES/OPERATING EXPENSES	999	NO GRANT	\$0	\$0	\$0	\$2,693	\$2,693
65740	SERVICES	999	NO GRANT	\$0	\$0	\$2,693	\$0	(\$2,693)
AMENDMENT NO 6984 TOTAL				\$0	\$0	\$2,693	-\$2,693	\$0
FIRE PROTECTION-PORT O'CONNOR TOTAL				\$0	\$0	\$2,693	-\$2,693	\$0

DEPARTMENT NAME: OTHER FINANCING

DEPARTMENT NO: 520

AMENDMENT NO: 6985 REQUESTOR: COMMISSIONER PRECINCT #1

AMENDMENT REASON: ADJ BUDGET FOR TRADE-IN APPRVD CC 1/29/25

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, February 26, 2025 HEARING TYPE: REGULAR BUDGET YEAR: 2025

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: OTHER FINANCING DEPARTMENT NO: 520

AMENDMENT NO: 6985 REQUESTOR: COMMISSIONER PRECINCT #1

AMENDMENT REASON: ADJ BUDGET FOR TRADE-IN APPRVD CC 1/29/25

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
90005	GAINLOSS ON SALE OF ASSETS	999	NO GRANT	\$0	\$0	\$0	\$20,000	\$20,000
AMENDMENT NO 6985 TOTAL				\$0	\$0	\$0	\$20,000	\$20,000
OTHER FINANCING TOTAL				\$0	\$0	\$0	\$20,000	\$20,000

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

AMENDMENT NO: 6985 REQUESTOR: COMMISSIONER PRECINCT #1

AMENDMENT REASON: ADJ BUDGET FOR TRADE-IN APPRVD CC 1/29/25

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
73400	MACHINERY AND EQUIPMENT	999	NO GRANT	\$0	\$0	\$20,000	\$0	(\$20,000)
AMENDMENT NO 6985 TOTAL				\$0	\$0	\$20,000	\$0	(\$20,000)
ROAD AND BRIDGE-PRECINCT #1 TOTAL				\$0	\$0	\$20,000	\$0	(\$20,000)

DEPARTMENT NAME: WASTE MANAGEMENT DEPARTMENT NO: 380

AMENDMENT NO: 6986 REQUESTOR: COUNTY AUDITOR/OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53992	SUPPLIES-MISCELLANEOUS	999	NO GRANT	\$0	\$0	\$50	\$0	(\$50)
60012	ADVERTISING	999	NO GRANT	\$0	\$0	\$0	\$50	\$50

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, February 26, 2025

HEARING TYPE: REGULAR

BUDGET YEAR: 2025

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: WASTE MANAGEMENT

DEPARTMENT NO: 380

AMENDMENT NO: 6986 REQUESTOR: COUNTY AUDITOR OVERDRAWN

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
AMENDMENT NO 6986 TOTAL				\$0	\$0	\$50	\$50	\$0
WASTE MANAGEMENT TOTAL				\$0	\$0	\$50	\$50	\$0
GENERAL FUND TOTAL				\$0	\$0	\$39,530	\$39,530	\$0
Grand Total				\$0	\$0	\$39,530	\$39,530	\$0

23

23. Approval of bills and payroll. (VLL)

MMC Bills:

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

Indigent Healthcare:

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

County 2024:

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

County 2025:

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

Adjourned 10:35am

February 26, 2025

APPROVAL LIST - 2024 BUDGET
COMMISSIONERS COURT MEETING OF

02/26/25

BALANCE BROUGHT FORWARD FROM APPROVAL LIST REPORT PAGE 2

\$17,796.21

CONSTAR CONSTRUCTION

CAP PROJ - BRIGHTON BRIDGES - FINAL BILL

A/P \$ 83,816.80

TOTAL VENDOR DISBURSEMENTS:

\$ 101,613.01

TOTAL AMOUNT FOR APPROVAL:

\$ 101,613.01

February 26, 2025

APPROVAL LIST - 2025 BUDGET
COMMISSIONERS COURT MEETING OF

02/26/25

BALANCE BROUGHT FORWARD FROM APPROVAL LIST REPORT PAGE 28

\$630,993.31

FICA	PAYROLL 2/14/2025	P/R	\$	66,390.84
MEDICARE	PAYROLL 2/14/2025	P/R	\$	15,526.94
FMH	PAYROLL 2/14/2025	P/R	\$	42,838.66
NATIONWIDE RETIREMENT SOLUTIONS	PAYROLL 2/14/2025	P/R	\$	1,732.50
OFFICE OF THE ATTORNEY GENERAL - CHILD SUPPORT	PAYROLL 2/14/2025	P/R	\$	2,587.45
VOYA	PAYROLL 2/14/2025	P/R	\$	1,885.00
CITIBANK	DEPT CREDIT CARD CHARGES	A/P	\$	45,916.85
GREAT AMERICA FINANCIAL SERVICE	JAIL - NEW COPIER LEASE AGREEMENT	A/P	\$	2,507.00

TOTAL VENDOR DISBURSEMENTS:

\$ 810,378.55

PAYROLL ON FEBRUARY 28, 2025

P/R \$ 412,006.63

TOTAL PAYROLL AMOUNT:

\$ 412,006.63

CALHOUN COUNTY OPERATING ACCOUNT (OPENING OF INTERBANK MONEY MKT ACCT)
INTERBANK (TRANSFER FROM NEXBANK MONEY MKT FOR HIGHER INTEREST RATE)
CALHOUN COUNTY INDIGENT HEALTH CARE

\$ 6,000,000.00
\$ 5,000,000.00
\$ 4,157.77

TOTAL INVESTMENT ACTIVITY AND TRANSFERS BETWEEN FUNDS:

\$ 11,004,157.77

TOTAL AMOUNT FOR APPROVAL:

\$ 12,226,542.95

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 02.26.25 / 2024 BUDGET
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Van... ID	Document Number	Transaction Description	Debit	Credit
BUILDING MAINTENANCE	170	INSPECTIONS-COURTHOUSE	62834	THYSSENKRUPP ELEVATOR CORP.	7795	6000763...	MAINT 11/27 STATE ELEVATOR INSPECTION-CH	775.00	
		INSPECTIONS-JAIL	62838	THYSSENKRUPP ELEVATOR CORP.	7795	6000763...	MAINT 11/27 STATE ELEVATOR INSPECTION-JAIL	775.00	
	Total 170							1,550.00	0.00
BUILDING MAINTENANCE								1,550.00	0.00
CONSTABLE-PRECINCT #5	620	LAW ENFORCEMENT SUPPLIES	53430	GT DISTRIBUTORS INC	2679	INV3019...	CONSTS 9/30/24 LAW ENFORCEMENT SUPPLIES	3,449.16	
CONSTABLE-PRECINCT #5	Total 620							3,449.16	0.00
COUNTY TAX COLLECTOR	200	MACHINE MAINTENANCE	63500	OFFICE SYSTEMS CENTER	5806	01185215	TAX A/C 9/1/23 TYPEWRITER MAINT CONTRACT 9/1/23- 8/31/24	216.50	
								216.50	
								236.50	
									138.35
	Total 200							453.00	138.35
COUNTY TAX COLLECTOR								453.00	138.35
EMERGENCY COMMUNICATION DIVISION	635	BUILDING-EMERGENCY COMMUNICATIONS	70654	AGUIRRE SHAWN	92020	QB5708	EMER COM 11/1 GENERATOR WORK	2,063.20	
EMERGENCY COMMUNICATION DIVISION	Total 635							2,063.20	0.00
EMERGENCY COMMUNICATION DIVISION								2,063.20	0.00
EMERGENCY MEDICAL SERVICES	345	CAPITAL OUTLAY	70750	SANCHEZ ROSALJO ROMERO	73690	25002	EMS 2/12 COVERED AWNING	9,100.00	
EMERGENCY MEDICAL SERVICES								9,100.00	

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 02.26.25 / 2024 BUDGET
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
EMERGENCY MEDICAL SERVICES	Total 345							9,100.00	0.00
HUMAN RESOURCES	265	EMPLOYMENT EXPENSES	62430	AGENCY 405/CRIME RECORDS SERV	85	CRS202...	HR 12/31 CCH NAME SEARCH	3.00	
HUMAN RESOURCES	Total 265							3.00	0.00
LIBRARY	140	REPAIRS-SEADRIFT LIBRARY	65478	AGUIRRE SHAWN	92020	QB3631	SEA LIBRARY 9/23 REPAIR BROKEN WATER LINE	946.20	
LIBRARY	Total 140							946.20	0.00
ROAD AND BRIDGE-PRECINCT #1	540	GARBAGE COLLECTION	62659	LEGACY DISPOSAL & SANITATION	2988	11299	RB1 12/27 TOILET RENTAL-MILLERS POINT 12/27- 1/23	370.00	
ROAD AND BRIDGE-PRECINCT #1	Total 540							370.00	0.00
Report Total								17,934.56	138.35

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 02.26.25 / 2025 BUDGET
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
AMBULANCE OPERATIONS-GENERAL	290	MACHINE MAINTENANCE	63500	MORTON MORROW INC	4046	INV5070	GNL AMB 2/14 SEMI-ANNUAL PREV MAINT & AIR TESTING	732.85	
AMBULANCE OPERATIONS-GENERAL	Total 290							732.85	0.00
BUILDING MAINTENANCE	170	BUILDING SUPPLIES/PARTS	53610	TURTLE & HUGHES INC	3635	6682333...	MAINT 1/27 (75) LIGHT BULBS	152.25	
			53610	GULF COAST HARDWARE LLC	63196	196235	MAINT 2/5 GLUE	11.99	
			53610	GULF COAST HARDWARE LLC	63196	196352	MAINT 2/10 KITCHEN FAUCET	59.99	
			53610	GULF COAST HARDWARE LLC	63196	196367	MAINT 2/10 SUPP LINE, FLANGE, WAX RING	19.17	
			53610	GULF COAST HARDWARE LLC	63196	196372	MAINT 2/10 DRAIN BLADDER	16.99	
			53610	GULF COAST HARDWARE LLC	63196	196385	MAINT 2/11 ELEC TAPE, SNAP QUIK, HARDWARE	50.27	
			53610	GULF COAST HARDWARE LLC	63196	196478	MAINT 2/13 TAPING KNIFE, FLOOR SCRAPER	101.96	
			53610	GULF COAST HARDWARE LLC	63196	196485	MAINT 2/13 CREDIT ON RETUR- FLOOR SCRAPER, TAPING KNIFE		50.98
		JANITOR SUPPLIES	53610	SHERWIN WILLIAMS	7215	866082	MAINT 2/10 PAINT	38.65	
			53640	GULF COAST PAPER CO INC	2619	2619381	MAINT 2/11 (2) MATS	391.78	
			53640	GULF COAST PAPER CO INC	2619	2619389	MAINT 2/11 SCRUBBER	45.20	
			53640	GULF COAST PAPER CO INC	2619	2620401	MAINT 2/13 (5) 5G FLOOR STRIPPER/CLEANER	458.26	
			53640	GULF COAST PAPER CO INC	2619	2621581	MAINT 2/18 MAT	197.23	
			53640	GULF COAST PAPER CO INC	2619	2621595	MAINT 2/18 (3) STRIPPING PAD	44.87	
			53640	GULF COAST PAPER CO INC	2619	2621673	MAINT 2/18 FLOOR CLEANER	61.40	
		REPAIRS-COURTHOUSE AND JAIL	65454	CFI MECHANICAL INC	2005	SD25307	MAINT 2/17 1ST QTR 2025 JAIL CHILLER P/M	2,216.25	

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 02.26.25 / 2025 BUDGET
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
TELEPHONE SERVICES		66192	AT&T MOBILITY	5209	3615502...	MAINT 2/12 ACT# 287022659855 PHONE 1/13- 2/12	220.99		
TRAVEL OUT OF COUNTY		66498	WOOD EVERETT	7847	PO1700...	MAINT 2/20 TRAVEL REIMB-CORPUS CHRISTI, TX 2/13/25	109.20		
UTILITIES-AG BLDG/FAIRGROUNDS		66602	CENTERPOINT ENERGY	1805	2942974...	BAUER 2/13 ACT# 2942974-3 CCF 163 1/9- 2/7	215.08		
		66602	CENTERPOINT ENERGY	1805	2942980...	AG BLDG 2/13 ACT# 2942980-0 CCF 235 1/9- 2/7	287.77		
		66602	CITY OF PORT LAVACA	861	1415150...	MOSO/BAUER/AG 2/18 ACT# 14-1515-00 WATER 1/15- 2/15	831.08		
		66602	CITY OF PORT LAVACA	861	1415200...	MOSO/BAUER/AG 2/18 ACT# 14-1520-00 WATER 1/15- 2/15	419.15		
UTILITIES-COURTHOUSE AND JAIL		66604	CENTERPOINT ENERGY	1805	6329420...	CH 2/13 ACT# 6329420-1 CCF 96 1/9- 2/7	1,127.17		
		66604	CITY OF PORT LAVACA	861	1218440...	CH 2/13 ACT# 12-1844-00 WATER 1/10- 2/10	161.01		
UTILITIES-JAIL		66605	CENTERPOINT ENERGY	1805	6455891...	JAIL 2/13 ACT# 6455891-9 MCF 324 1/9- 2/7	3,238.41		
		66605	CITY OF PORT LAVACA	861	1218420...	JAIL 2/13 ACT# 12-1842-01 WATER 1/10- 2/10	3,378.73		
		66605	CITY OF PORT LAVACA	861	1218430...	JAIL 2/13 ACT# 12-1843-00 WATER 1/10- 2/10	87.32		
UTILITIES-COURTHOUSE ANNEX		66606	CITY OF PORT LAVACA	861	1219100...	ANNEX I 2/13 ACT# 12-1910-00 WATER 1/10- 2/10	143.51		
UTILITIES-COURTHOUSE ANNEX II		66621	CITY OF PORT LAVACA	861	1208950...	ANNEX II 2/13 ACT# 12-0895-01 WATER 1/10- 2/10	69.82		
UTILITIES-DISPATCH BUILDING		66623	CENTERPOINT ENERGY	1805	6403494...	EMER COM 2/13 ACT# 6403494238-9 CCF 0 1/9- 2/7	50.53		
MACHINERY AND EQUIPMENT		73400	GULF COAST PAPER CO INC	2619	2619380	MAINT 2/11 BUFFER	1,714.22		
BUILDING MAINTENANCE		Total 170					15,920.25	50.98	

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 02.26.25 / 2025 BUDGET
 1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
COMMISSIONERS COURT	230	DUES	54020	TEXAS ASSOCIATION OF COUNTIES	7819	95746	COM CRT 1/1 2025 ANNUAL DUES	1,090.00	
		CONTRIB. TO EXP.-CRIME STOPPERS	61285	CALHOUN COUNTY CRIME STOPPERS	9899	PO2302...	COM CRT 2/12 2025 CONTRIBUTION TO EXPENSE	1,000.00	
		COUNTY HEALTH/WEILLNESS PROGRAM	61425	LYSSY KAREN	em1...	PO2302...	COM CRT 2/6 REIMB HEALTH CNTY SUPP FOR LUNCH & LEARN	141.42	
		INTERNET SERVICES	62955	FRONTIER COMMUNICATIONS	2855	3611970...	CH 2/11 ACT# 361-197-0053-122022-5-INTERNET 2/11-3/10	1,200.00	
			62955	SPARKLIGHT	9988	1128551...	COM CRT 2/1 ACT# 112855176 FEB 2025 INTERNET	1,353.28	
		PATHOLOGIST FEES	64520	TRAVIS COUNTY MEDICAL EXAMINER	7710	3300009...	COM CRT/IPS 1/31 AUTOPSY FEE- R KEY, J BUSBY, L LAMBDEN	11,673.00	
		SOFTWARE MAINTENANCE (ANNUAL)	65835	EDOCTEC	1893	20740	COM CRT 2/1 LASERFICHE MAINT CONTRACT 04/2025 -03/2026	375.00	
		EQUIPMENT-RADIO/AMATE..	72503	AUTOSALES INCORPORATED	230	429593	COM CRT 2/10 MOBILE TRANSCIEVER	519.95	
COMMISSIONERS COURT	Total 230							17,352.65	0.00
COUNTY AUDITOR	190	DUES	54020	TEXAS ASSOCIATION OF COUNTIES	2924	95539	AUDITOR 1/1 2025 ANNUAL DUES	451.00	
COUNTY AUDITOR	Total 190							451.00	0.00
COUNTY CLERK	250	GENERAL OFFICE SUPPLIES	53020	AQUA BEVERAGE CO	89	192912	CO CLK 2/5 WATER	42.50	
		MISCELLANEOUS	63920	TEXAS DEPT OF STATE HEALTH	1512	2024283	CO CLK 2/3 JAN 2025 REMOTE BIRTH ACCESS	140.91	
		POSTAGE	64790	USPS-POC	7061	0803250...	CO CLK 2/14 POSTAGE METER REFIL ACT# 08032508	1,000.00	
		TRAINING TRAVEL OUT OF COUNTY	66316	GOODMAN ANNA M	EM...	PO2502...	CO CLK 2/5 TRAVEL REIMB-DENTON, TX 2/2- 2/5	601.00	

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COUNTY CLERK	Total 250							1,784.41	0.00
COUNTY COURT-AT-LAW	410	JURORS-PETTIT	51333	RHONDA S. KOKENA	5545	PO0225...	CALCO 2/25 REIMB JURY CASH THROUGH 02.25.25	1,220.00	
		ADULT ASSIGNED-ATTORNEY FEES	60050	SMITH JAMES	72500	2025011	CRT@LAW1 2/12 C#	100.00	
			60050	SMITH JAMES	72500	2025012	2025-CR-0028-CC C. BROWN	325.00	
		COURT REPORTER-SUBSTITUTE	61490	DELTA REPORTING & VIDEO	31960	202897	CRT@LAW1 2/14 CRT	580.00	
		LEGAL SERVICES-COURT APPOINTED	63380	KLIEM & BALUSEK LLC	59570	2025010	REPORTING SVCS 2/12/25	591.54	
		MACHINE MAINTENANCE	63500	RELX INC	4625	3095556...	2024-FAM-0050-CC	59.00	
		TRAINING TRAVEL OUT OF COUNTY	66316	TEXAS COLLEGE OF PROBATE JUDGE	7763	41021125	CRT@LAW1 2/11 CONF REG- AUSTIN, TX 3/13- 3/14	425.00	
COUNTY COURT-AT-LAW	Total 410							3,300.54	0.00
COUNTY TAX COLLECTOR	200	POSTAGE	64790	U. S. POSTMASTER	8025	PO2000D...	TAX A/C 1/28 STAMPS	418.00	
COUNTY TAX COLLECTOR	Total 200							418.00	0.00
COUNTY TREASURER	210	MACHINE MAINTENANCE	63500	CSI	8885	134333	TREAS 2/15 MARCH 2025 ALARM MONITORING	35.00	
COUNTY TREASURER	Total 210							35.00	0.00
DISTRICT ATTORNEY	510	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	38552089	DA 2/11 COPIER LEASE	213.00	
		POSTAGE	64790	PTNEY BOWES GLOBAL FIN. SERV.	6268	3320328...	DA 2/8 POSTAGE METER LEASE 12/20/24- 3/29/25	279.45	
DISTRICT ATTORNEY	Total 510							492.45	0.00
DISTRICT CLERK	420	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	42725330	DIST CLK 2/5 (6) OFFICE CHAIRS	1,065.00	

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Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ver... ID	Document Number	Transaction Description	Debit	Credit
		PHOTO COPIES/SUPPLIES	53030	GREAT AMERICA FINANCIAL	2751	38534471	DIST CLK 2/10 COPIER LEASE	244.00	
		SOFTWARE MAINTENANCE (ANNUAL)	65835	EDOCTEC	1893	20741	DIST CLK 2/1 ANNUAL MAINT CONTRACT 04/2025 - 03/2026	2,750.00	
DISTRICT CLERK	Total 420							4,059.00	0.00
		JURORS-PETTIT	51533	RHONDA S. KOKENA	5545	PO0225...	CALCO 2/25 REIMB JURY CASH THROUGH 02.25.25	500.00	
DISTRICT COURT	430	JURORS-GRAND	51534	RHONDA S. KOKENA	5545	PO0225...	CALCO 2/25 REIMB JURY CASH THROUGH 02.25.25	4,600.00	
		ADULT ASSIGNED-ATTORNEY FEES	60050	DISHER DAVID A	1398	2025041	DIST CRT 2/13 C# 2024-CR-8947-DC, 24-PF-0008-DC SANDOVAL, JR	250.00	
		ADULT ASSIGNED- INVESTIGATION EXPENSE	60050	LAMERSON JOHN MICHAEL	8315	2025036	DIST CRT 1/27 C# 2023-CR-8789-DC A. CARDENAS	6,750.00	
		ADULT ASSIGNED- OTHER LITIGATION EXPENSES	60050	WEISER KEITH S	8664	2025037	DIST CRT 2/7 C# 2024-CR-9053-DC R. GONZALES	450.00	
			60050	GARZA JOSEPH G	8835	2025040	DIST CRT 2/13 C# 2024-CR-8983-DC K. JACOWAY	3,000.00	
			60051	WEISER KEITH S	8664	2025037	DIST CRT 2/7 C# 2024-CR-9053-DC R. GONZALES	160.20	
			60053	GARZA JOSEPH G	8835	2025040	DIST CRT 2/13 C# 2024-CR-8983-DC K. JACOWAY	113.40	
DISTRICT COURT	Total 430							15,823.60	0.00
		GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	42714735	ELEC 2/4 SWIFER, FOLDERS, TAPE, MISC SUPP	46.15	
ELECTIONS	270		53020	QUILL LLC	6602	42715202	ELEC 2/4 STORAGE BOXES	63.99	
			53020	VICTORIA ADVOCATE PUBLISHING	8225	82708/2...	ELEC 2/16 ANNUAL SUBSCRIPTION RENEWAL	325.00	

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Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
ELECTIONS	Total 270							513.73	0.00
EMERGENCY MEDICAL SERVICES	345	GENERAL OFFICE SUPPLIES	53020	DRIESSEN WATER INC	6245	4907362	EMS CNTL 12/16 WATER	37.20	
			53020	DRIESSEN WATER INC	6245	4909493	EMS STH 12/17 WATER	30.15	
			53020	DRIESSEN WATER INC	6245	4940859	EMS STH 12/26 WATER COOLER RENTAL	57.95	
			53020	DRIESSEN WATER INC	6245	4940961	EMS CNTL 12/26 WATER COOLER RENTAL	57.95	
			53020	DRIESSEN WATER INC	6245	4945073	EMS STH 12/26 WATER SOFTENER RENTAL	71.45	
			53020	DRIESSEN WATER INC	6245	4973213	EMS CNTL 1/13 WATER	58.35	
			53020	DRIESSEN WATER INC	6245	4979496	EMS STH 1/20 WATER	65.40	
			53020	DRIESSEN WATER INC	6245	5013435	EMS STH 1/26 WATER COOLER RENTAL	57.95	
			53020	DRIESSEN WATER INC	6245	5013436	EMS CNTL 1/26 WATER COOLER RENTAL	57.95	
			53020	DRIESSEN WATER INC	6245	5015606	EMS STH 1/26 WATER SOFTENER RENTAL	71.45	
			53020	DRIESSEN WATER INC	6245	5019657	EMS CNTL 1/27 WATER	44.15	
			53020	DRIESSEN WATER INC	6245	5029700	EMS STH 1/31 LATE FEE	7.98	
		BUILDING SUPPLIES/PARTS	53610	GULF COAST PAPER CO INC	2619	2616949	EMS CNTL 2/4 PAPER TOWELS, TISSUE, CUPS, CLOROX WIPES	273.44	
			53610	GULF COAST PAPER CO INC	2619	2619385	EMS STH 2/11 WASH & WAX, TISSUES	213.75	
		SUPPLIES/OPERATING EXPENSES	53980	AIRGAS USA, LLC	136	5514189...	EMS 1/31 JAN 2025 CYLINDER RENTAL	1,784.28	
			53980	BOUND TREE MEDICAL, LLC	412	66195384	EMS 1/27 OPERATIVE IQ LICENSES	6,756.00	
			53980	BOUND TREE MEDICAL, LLC	412	85621508	EMS 1/13 IV CATHS, CRAP SYSTEMS, ALCOHOL PADS	2,681.14	
			53980	BOUND TREE MEDICAL, LLC	412	85643517	EMS 1/30 ANAPHYLAXIS KIT, I-GEL BLADES	763.42	
			53980	BOUND TREE MEDICAL, LLC	412	85643519	EMS 1/30 QUIKLOT GAUZE, SEADUC SUCTION	207.16	

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Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Van... ID	Document Number	Transaction Description	Debit	Credit
			53980	BOUND TREE MEDICAL, LLC	412	85645337	EMS 1/31 MISC TRAINING SUPP	106.17	
			53980	BOUND TREE MEDICAL, LLC	412	85645338	EMS 1/31 CRIC KIT	119.50	
			53980	BOUND TREE MEDICAL, LLC	412	85645339	EMS 1/31 TAPE, BLOOD GLUCOSE METER	84.19	
			53980	BOUND TREE MEDICAL, LLC	412	85651059	EMS 2/5 IV CATHS, IV FLUID, EPI	697.37	
			53980	BOUND TREE MEDICAL, LLC	412	85654512	EMS 2/7 IV SOLUTION	277.23	
			53980	BOUND TREE MEDICAL, LLC	412	85656228	EMS 2/10 ELECTRODES, O2 MASKS	819.90	
			53980	MEMORIAL MEDICAL CENTER	5099	20/2025	EMS 2/6 (1) WHOLE BLOOD	418.00	
			53980	STRYKER SALES CORPORATION	5881	9208307...	EMS 1/22 (2) BP CUFFS	86.64	
			53980	STRYKER SALES CORPORATION	5881	9208385...	EMS 1/31 (2) BP TUBING	226.30	
			60890	EMERGICON LLC	2870	15350	EMS 1/31 JAN 2025 COLLECS	14,277.54	
			61080	EMERGICON LLC	2870	15328	EMS 1/15 CONF REG	250.00	
			61080	EMERGICON LLC	2870	15378	EMS 2/10 CONF REG	50.00	
			63500	O REILLY AUTO PARTS	5803	0575409...	EMS 1/16 CAPSULE FOR ALL AMBULANCES	253.00	
			63500	O REILLY AUTO PARTS	5803	0575409...	EMS 1/16 MAINT ON ALL AMBULANCES	253.00	
			63500	O REILLY AUTO PARTS	5803	0575409...	EMS 1/17 MAINT- U11	160.48	
			63500	O REILLY AUTO PARTS	5803	0575410...	EMS 1/24 FIL TER- U11	15.74	
			63500	O REILLY AUTO PARTS	5803	0575411...	EMS 1/26 MAINT FOR ALL AMBULANCES	14.99	
			63500	STRYKER SALES CORPORATION	5881	9205979...	EMS 4/12 SVC CONTRACT LIFEPAKS/STRETCHERS 4/1/24- 3/31/25	26,345.60	
			63500	GULF COAST HARDWARE LLC	63198	196124	EMS CNTL 2/1 ICE MACHINE REPAIRS	27.99	
			63530	O REILLY AUTO PARTS	5803	0575411...	EMS 1/27 MIRROR REPAIR- M7	4.99	
			63530	PORT LAVACA CHEVROLET	6250	159658	EMS 2/5 REPAIRS- U12	4,419.45	

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Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Van... ID	Document Number	Transaction Description	Debit	Credit
MISCELLANEOUS			63920	GULF COAST HARDWARE LLC	63198	196201	EMS 2/4 DRILL BIT SET	20.99	
TELEPHONE SERVICES			66192	FRONTIER COMMUNICATIONS	2855	3615521...	EMS CNTL 1/28 A# 361-552-1140-032410-5 PHONE 1/28- 2/27	836.51	
			66192	FRONTIER COMMUNICATIONS	2855	3617852...	EMS STH 1/28 A# 361-785-2000-022718-5 PHONE 1/28- 2/27	337.43	
			66192	AT&T MOBILITY	5209	3617461...	EMS 2/1 ACT# 287298540337 ADMIN/AMB PHONE 1/2- 2/1	1,221.82	
TRAVEL/DUES/SUBSCRIPT...			66505	GIRARD & ASSOCIATES	58910	843	EMS 1/31 REPORT WRITING PROGRAM MGMT	10,625.00	
			66505	PENGIN MANAGEMENT INC	8157	81842	EMS 2/1 (12) MONTH PLAN- GDISPATCH	1,572.00	
			66505	HALL DONNA	EM...	PO3452...	EMS 2/8 TRAVEL REIMB- LOLITA, TX 1/7, 2/7, 2/8	105.00	
UNIFORMS			66590	FIKES BROOK	2180	PO3452...	EMS 2/10 UNIFORM VELCRO & EMBROIDERY	36.95	
			66590	GALLS PARENT HOLDINGS LLC	26140	0303512...	EMS 2/3 UNIFORMS	71.59	
			66590	GALLS PARENT HOLDINGS LLC	26140	0304212...	EMS 2/10 UNIFORMS	56.03	
			66590	KISIAH JOHN THOMAS IV	8187	PO3452...	EMS 2/7 SEW ON (11) UNIFORM PATCHES	176.00	
UTILITIES			66600	INFINIUM BROADBAND INTERNET	3378	99211	EMS CNTL 2/5 ACT# ACC0002126 INTERNET 2/5- 3/5	160.00	
			66600	INFINIUM BROADBAND INTERNET	3378	99870	EMS STH 2/12 ACT# ACC0002127 INTERNET 2/12- 3/12	160.00	
			66600	VICTORIA ELECTRIC COOP, INC	8205	9870170...	EMS STH 1/27 ACT# 987017-001 ELEC 12/17- 1/17	329.68	
			66600	CITY OF PORT LAVACA	861	1452250...	EMS 2/18 ACT# 14-5225-00 WATER 1/15- 2/15	171.67	
			66600	SPARKLIGHT	9988	1009808...	EMS CNTL 2/8 ACT# 100980846 CABLE & LATE FEE 2/8- 3/7	258.69	
VEHICLE FUEL/OIL/SERVICE			67120	AZALIA BONIUZ, TAX ASSESSOR	4042	1437622...	EMS 2/7 REGISTRATION	7.50	

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EMERGENCY MEDICAL SERVICES	Total 345							79,925.04	5,400.00
		COMPUTER SUPPLIES	53110	TEXAS A&M AGRILIFE EXT SERV	7872	ES12478	EXT SVC 2/13 CAMTASIA/SNAG-IT UPGRADE	12.50	
		COPY MACHINE LEASE	61340	XEROX CORPORATION	9001	0229346...	EXT SVC 2/1 COPIER LEASE 12/21 - 1/21	144.37	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3619209...	EXT SVC 1/19 ACT# 287335811011 PHONE 12/20-1/19	40.75	
		TRAVEL/ OUT OF COUNTY-CEA/FCS	66460	LYSSY KAREN	eml...	PO1102...	EXT SVC 1/29 TRAVEL, REIMB- AUSTIN, TX 1/29-1/31	19.00	
		TRAVEL/OUT OF COUNTY-CEA4HYD	66462	DEFOREST EMILEE	EM...	PO1102...	EXT SVC 2/12 TRAVEL REIMB- SAN ANTONIO, TX 2/11/25	63.00	
EXTENSION SERVICE	Total 110							279.62	0.00
		SUPPLIES/OPERATING EXPENSES	53980	MOMENTUM RENTAL AND SALES	5523	1832251	OPA VFD 1/28 CUT OFF SAW	66.12	
			53980	GULF COAST HARDWARE LLC	63193	196225	OPA VFD 2/5 HARDWARE	16.48	
FIRE PROTECTION-OLVIA/P. ALTO	Total 650							82.60	0.00

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FIRE PROTECTION-PORT OCONNOR	680	SERVICES	65740	SIDDONS-MARTIN EMERGENCY GROUP	8192	3160000...	POC VFD 2/7 REPAIRS-TANKER 793	6,757.90	0.00
FIRE PROTECTION-PORT OCONNOR	Total 680							6,757.90	0.00
HEALTH DEPARTMENT	350	ENVIRONMENTAL HEALTH SERVICES	62480	VICTORIA COUNTY PUBLIC	8219	ENV2503	HEALTH DEPT 2/3 MARCH 2025 ENVIRONMENTAL HEALTH SVCS	7,043.75	0.00
HEALTH DEPARTMENT	Total 350							7,043.75	0.00
HUMAN RESOURCES	265	MISCELLANEOUS	63920	GREAT AMERICA FINANCIAL	2751	38443764	HR 1/30 COPIER LEASE	79.00	0.00
HUMAN RESOURCES	Total 265	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615512...	HR 2/11 ACT# 361-551-2181-011122-5 FAX 2/11-3/10	108.79	0.00
HUMAN RESOURCES	Total 265	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3615539...	IT 1/19 ACT# 287289192983 PHONE 12/20- 1/19	121.51	0.00
INFORMATION TECHNOLOGY	275	TELEPHONE SERVICES	66609	CITY OF PORT LAVACA	861	1213400...	IT 2/13 ACT# 12-1340-00 WATER 1/10- 2/10	69.82	0.00
INFORMATION TECHNOLOGY	Total 275							191.33	0.00
JAIL OPERATIONS	180	JAIL MAINTENANCE/SUPPLIES	53420	PERFORMANCE FOOD GROUP INC	63650	3117916	JAIL 2/6 HAIR NETS	41.80	0.00
JAIL OPERATIONS		GROCERIES	53420	PERFORMANCE FOOD GROUP INC	63650	3124868	JAIL 2/20 LABELS	12.11	0.00
JAIL OPERATIONS		GROCERIES	53955	PERFORMANCE FOOD GROUP INC	63650	3117916	JAIL 2/6 INMATE GROCERIES	2,014.01	0.00
JAIL OPERATIONS		GROCERIES	53955	PERFORMANCE FOOD GROUP INC	63650	3119416	JAIL 2/10 INMATE GROCERIES	1,669.11	0.00
JAIL OPERATIONS		GROCERIES	53955	PERFORMANCE FOOD GROUP INC	63650	3121429	JAIL 2/13 INMATE GROCERIES	3,024.07	0.00

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JAIL OPERATIONS	Total 180							23,956.98	70.00
JUSTICE OF PEACE PRECINCT #2	460	TRAVEL OUT OF COUNTY	66498	SANCHEZ ESMERALDA	1182	PO2025...	JP2 1/27 TRAVEL REIMB-CORPUS CHRISTI, TX 2/12-2/14	456.88	
JUSTICE OF PEACE PRECINCT #2	Total 460							456.88	0.00
JUSTICE OF PEACE-PRECINCT #1	450	TRAINING TRAVEL OUT OF COUNTY	66316	CORDELL KATHERINE	EM...	PO4504...	JP1 2/18 TRAVEL REIMB-CORPUS CHRISTI, TX 2/12-2/14	114.90	
JUSTICE OF PEACE-PRECINCT #1	Total 450							114.90	0.00
JUSTICE OF PEACE-PRECINCT #3	470	UTILITIES	66600	ADT SECURITY SERVICES	9766	1120635...	JP3 2/9 ACT# 401589100 SECURITY SVCS 2/28- 5/27	488.10	
JUSTICE OF PEACE-PRECINCT #3	Total 470							488.10	0.00
JUSTICE OF PEACE-PRECINCT #4	480	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	38534473	JP4 2/10 COPIER LEASE	65.03	

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JUSTICE OF PEACE-PRECINCT #4	Total 480								
		TRAINING TRAVEL OUT OF COUNTY	66316	HUNT WESLEY J	EM...	PO2025...	JP4 2/12 TRAVEL REIMB-CORPUS CHRISTI, TX 1/12-2/15	299.60	
JUSTICE OF PEACE-PRECINCT #5	490	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3619832...	JP5 2/1 ACT# 361-983-2351-100102-5 FEB 2025 PHONE, LATE FEE	185.80	
	Total 490							185.80	0.00
JUSTICE OF THE PEACE-GENERAL	440	JURORS-PETTIT	51533	RHONDA S. KOKENA	5545	PO0225...	CALCO 2/25 REIMB JURRY CASH THROUGH 02.25.25	640.00	
	Total 440							640.00	0.00
JUVENILE COURT	500	JUVENILE ASSIGNED-ATTORNEY FEES	63070	SMITH JAMES	72500	2025013	CRT@LAW1 2/13 C# 2025-JV-0004-CC	275.00	
			63070	SMITH JAMES	72500	2025014	CRT@LAW1 2/13 C# 2023-JV-0017-CC	275.00	
	Total 500							550.00	0.00
LIBRARY	140	INTERNET SERVICES	62955	FRONTIER COMMUNICATIONS	2855	3611970...	LIBRARY 2/10 ACT# 361-197-0199- 070623-5 INTERNET 2/10- 3/9	178.00	
		REPAIRS-MAIN LIBRARY	65470	COASTAL REFRIGERATION	812	8612035	LIBRARY 2/5 INSPECT & REPLACE BLOWER MOTOR IN HEATING SYSTEM	1,135.95	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615524...	LIBRARY 2/13 ACT# 361-552-4926- 101592-5 PHONE 2/13- 3/12	145.94	
			66192	FRONTIER COMMUNICATIONS	2855	3615527...	LIBRARY 2/13 ACT# 361-552-7323- 042491-5 PHONE 2/13- 3/12	277.11	

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		UTILITIES-MAIN LIBRARY	66610	CITY OF PORT LAVACA	861	1217300...	LIBRARY 2/13 ACT# 12-1730-00 WATER 1/10- 2/10	100.87	
			66610	CITY OF PORT LAVACA	861	1217310...	LIBRARY 2/13 ACT# 12-1731-00 WATER 1/10- 2/10	42.80	
		UTILITIES-SEADRIFT LIBRARY	66622	CENTERPOINT ENERGY	1805	2981129...	SEA LIBRARY 2/13 ACT# 2981129-6 CCF 0 1/9- 2/7	48.98	
		BOOKS & PRINT MATL-LIBRARY	70550	CENGAGE LEARNING, INC.	26020	86779303	LIBRARY 2/6 (7) BOOKS	227.13	
			70550	BAKER & TAYLOR	403	5019330...	LIBRARY 1/28 (3) BOOKS	46.49	
			70550	BAKER & TAYLOR	403	5019330...	LIBRARY 1/28 (12) BOOKS	152.76	
			70550	BAKER & TAYLOR	403	5019330...	LIBRARY 1/28 (6) BOOKS	77.27	
LIBRARY	Total 140							2,433.30	0.00
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3611970...	CH 2/13 ACT# 361-197-0090- 041323-5 PHONE 2/13- 3/12	659.71	
			66192	FRONTIER COMMUNICATIONS	2855	3615521...	MODEM 2/16 ACT# 361-552-1476-082207-5 2/16- 3/15	95.11	
			66192	FRONTIER COMMUNICATIONS	2855	3615534...	CH/ANNEX 2/13 ACT# 361-553-4465-011607-5 PHONE 2/13- 3/12	1,952.63	
			66192	FRONTIER COMMUNICATIONS	2855	3615534...	ANNEX 2/13 ACT# 361-553-4645-012307-5 PHONE 2/13- 3/12	339.31	
MISCELLANEOUS	Total 280							3,046.76	0.00
		MISCELLANEOUS	63920	PORT LAVACA WAVE	62340	PO707	MUSEUM 2/7 ANNUAL SUBSCRIPTION	45.00	
MUSEUM	150		63920	SECURITY ONE INC	81570	1192606	MUSEUM 2/5 FIRE SYSTEM CHECK	135.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615535...	MUSEUM 2/2 ACT# 361-553-5858-122716-5 ALARM 2/2- 3/1	120.31	
		UTILITIES-MUSEUM	66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 2/13 ACT# 2860820-6 CCF 9 1/9- 2/7	59.62	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 2/13 ACT# 12-0865-00 WATER 1/10- 2/10	69.82	

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MUSEUM	Total 150							429.75	0.00
NO DEPARTMENT	999	PETTY CASH - JURY PAY	10162	RHONDA S. KOKENA	5545	PO0225...	CALCO 2/25 REIMB JURY CASH THROUGH 02.25.25		3,000.00
		DUE TO JP COLLECTIONS ATTORNEY	20770	MCCRERY VESELKA BRAGG ALLEN	5255	298948	JP4 2/10 COLLECTION FEES	130.50	
		RENTAL DEPOSITS	20820	CRAIN ROXANNA	RF3...	1955	BAUER 1/7 DEPOSIT REFUND	450.00	
NO DEPARTMENT	Total 999							580.50	3,000.00
REVENUE	001	RENT-BAUER EXHIBIT BUILDING/PAYILLION	47030	KURTZ HOPE	RF3...	1964	BAUER 2/5 CX BLDG RENTAL	450.00	
REVENUE	Total 001							450.00	0.00
ROAD AND BRIDGE-PRECINCT #1	540	MACHINERY PARTS/SUPPLIES	53210	THIRD COAST DISTRIBUTING, LLC	75930	041491	RBI 2/11 HOSE, HOSE FITTINGS-#0293	93.25	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4220958...	RBI 2/13 UNIFORMS	173.32	
		EQUIPMENT RENTAL	62510	AIRGAS USA, LLC	136	5514195...	RBI 1/31 JAN 2025 CYLINDER RENTAL	108.32	
		GARBAGE COLLECTION	62510	GREAT AMERICA FINANCIAL	2751	38563127	RBI 2/13 COPPER LEASE 2/14- 3/13	155.00	
		UTILITIES	62659	LEGACY DISPOSAL & SANITATION	2988	11646	RBI 2/21 TOILET RENTAL- CHOC BAY 2/21- 3/20	370.00	
		UTILITIES	62659	LEGACY DISPOSAL & SANITATION	2988	11664	RBI 2/21 TOILET RENTAL- MILLER'S PNT 2/21- 3/20	370.00	
		UTILITIES-PARKS	66600	CENTERPOINT ENERGY	1805	5118678...	RBI 2/13 ACT# 5118678-1 CCF 250 1/9- 2/7	302.94	
		BUILDING	66614	CITY OF PORT LAVACA	861	1421050...	CHOC BAY PK 2/18 ACT# 14-2105-00 WATER 1/15- 2/15	87.32	
			66614	CITY OF PORT LAVACA	861	1421100...	CHOC BAY PK 2/18 ACT# 14-2110-00 WATER 1/15- 2/15	42.80	
			70650	POWER ELECTRIC LLC	2927	1884	RBI 2/11 ELECTRICAL INSTALL @ NEW LAYDOWN YARD	8,453.00	
ROAD AND BRIDGE-PRECINCT #1	Total 540							10,155.95	0.00

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ROAD AND BRIDGE-PRECINCT #2	550	MACHINERY PARTS/SUPPLIES	53210	HATEC INTERNATIONAL INC	3116	2840191...	RB2 2/11 DUMP TRUCK PARTS & SUPP	64.16	
			53210	DANIEL INDUSTRIES	3695	19171	RB2 1/30 BUSHING, STARTER, BLADE	333.13	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301120...	RB2 2/10 BATTERY	122.25	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301120...	RB2 2/10 BATTERY	122.25	
			53210	TRL-WHOLESALE COMPANY, INC.	7637	9301120...	RB2 2/10 CRF FUEL	55.32	
		ROAD & BRIDGE SUPPLIES	53510	MARTIN ASPHALT	5238	1562447	RB2 1/31 5741G RC-250	22,676.95	
		GASOLINE/OIL/DIESEL/GRE...	53540	NEW DISTRIBUTING CO INC	3638	8176025...	RB2 2/4 3000G DIESEL, 782G FUEL	10,493.15	
		SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63192	196365	RB2 2/10 HARDWARE	3.39	
			53992	TRACTOR SUPPLY CREDIT PLAN	7995	1005727...	RB2 1/9 2" WIRE WHEEL	7.99	
			53992	TRACTOR SUPPLY CREDIT PLAN	7995	2005715...	RB2 1/23 ROUND WORK LIGHT	34.99	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4220637...	RB2 2/11 UNIFORMS	78.92	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615529...	RB2 2/13 ACT# 361-552-9656- 010165-5 PHONE 2/13- 3/12	234.71	
			66192	INFINIUM BROADBAND INTERNET	3378	100780	RB2 2/22 ACT# ACC0002074 INTERNET 2/22- 3/22	150.00	
			66192	AT&T MOBILITY	5209	9972862...	RB2 2/4 ACT# 997286221 IPADS 2/5- 3/4	54.98	
ROAD AND BRIDGE-PRECINCT #2	Total 550							34,309.94	0.00
ROAD AND BRIDGE-PRECINCT #3	560	MACHINERY PARTS/SUPPLIES	53210	GULF COAST HARDWARE LLC	63193	196010	RB3 1/29 ELECTRIC TESTER- U305	54.99	
		SIGNS	53590	SIGN WORKS	7272	25046	RB3 2/18 DECALS- 24 F250 & 21 F250	141.00	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4220801...	RB3 2/12 FRESHENER	9.48	
		SUPPLIES-MISCELLANEOUS	53992	FASTENAL COMPANY	2274	TXP072...	RB3 1/28 OVERALLS	100.70	
			53992	MOMENTUM RENTAL AND SALES	5523	1832241	RB3 1/27 RAGS	34.99	

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ROAD AND BRIDGE-PRECINCT #3	Total 560							7,912.14	0.00
ROAD AND BRIDGE-PRECINCT #4	570	MACHINERY PARTS/SUPPLIES	53210	ATZENHOFER CHEVROLET CO. INC.	22	158523C...	RB4 2/13 FILTERS	199.80	
			53210	HOLT TRUCK CENTERS OF TEXAS	30480	X501079...	RB4 2/6 (6) FILTERS	365.44	
			53210	NUCEGS POWER EQUIPMENT	5449	50513V	RB4 2/12 (5) FILTERS	255.33	
			53210	THIRD COAST DISTRIBUTING, LLC	75930	041417	RB4 2/10 FILTERS	13.58	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3617461...	RB3 2/3 ACT# 287275183899 PHONE 2/4- 3/3	171.96	
		CAPITAL OUTLAY	70750	PORT LAVACA AUTO DEALERS	5964	634225	RB3 2/11 GRILL, GUARD, RUN BRDS, HEAD RACK, MIS SUP- 24 F250	5,445.00	
		MISCELLANEOUS	63920	ALLAN'S WRECKER SERVICE INC	86	0007663	RB3 2/13 TOW STERLING DUMP TRUCK	840.65	
		PERMITS	64640	AZALIA BONUZ, TAX ASSESSOR	4042	1317847...	RB3 2/10 REGISTRATION	7.50	
		TELEPHONE SERVICES	64640	AZALIA BONUZ, TAX ASSESSOR	4042	1388644...	RB3 2/11 REGISTRATION	7.50	
		GARBAGE COLL-OLIVIA	62672	WHITE TRASH SERVICES	1952	277241	RB3 2/20 MARCH 2025 TRASH SVC	187.35	
		EQUIPMENT RENTAL	62510	LEGACY DISPOSAL & SANITATION	2988	11604	RB3 2/21 TOILET RENTAL 2/21- 3/20	290.00	
		UNIFORMS	53995	AIRGAS USA, LLC	136	5514186...	RB3 1/31 JAN 2025 CYLINDER RENTAL	158.58	
			53992	GULF COAST HARDWARE LLC	63193	196363	RB3 2/12 UNIFORMS	144.30	
			53992	GULF COAST HARDWARE LLC	63193	196218	RB3 2/4 HARDWARE, BLADE, TORCH, MISC SUPP	45.28	
			53992	GULF COAST HARDWARE LLC	63193	196218	RB3 2/5 LATCH BOX, PADLOCK, BENCH, MISC SUPP	259.87	
			53992	GULF COAST HARDWARE LLC	63193	196363	RB3 2/10 WIRE	12.99	

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			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301120...	RB4 2/6 FILTERS	24.73	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301120...	RB4 2/10 FILTERS	39.01	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301120...	RB4 2/10 OIL FILTER	2.65	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301120...	RB4 2/10 AIR FILTERS	23.54	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301120...	RB4 2/11 FILTERS, DRAIN PLUG	67.16	
		ROAD & BRIDGE SUPPLIES	53510	POC HARDWARE & SUPPLY	6242	178838	RB4 1/9 SALT	189.80	
		GASOLINE/OIL/DIESEL/GRE...	53540	ARNOLD OIL COMPANY - VICTORIA	1472	102LK7...	RB4 2/12 DRUM OF OIL	849.88	
			53540	TRI-WHOLESALE COMPANY, INC.	7637	9301120...	RB4 2/6 OIL	110.04	
			53540	TRI-WHOLESALE COMPANY, INC.	7637	9301120...	RB4 2/10 OIL	23.99	
		LUMBER	53550	POC HARDWARE & SUPPLY	6242	179215	RB4 1/13 LUMBER	257.71	
		PIPE	53580	JCK GROUP	118	91571	RB4 2/11 (12) CULVERTS	554.64	
		TOOLS	53595	POC HARDWARE & SUPPLY	6242	179215	RB4 1/13 TORX BIT, MANDREL TOOL	27.86	
			53595	POC HARDWARE & SUPPLY	6242	179285	RB4 1/22 ALLEN KEY SET, WRENCH, LEVEL	66.83	
		SUPPLIES-MISCELLANEOUS	53992	JCK GROUP	118	91659	RB4 2/17 STRAW WATTLES	269.55	
			53992	FASTENAL COMPANY	2274	TXPOT12...	RB4 2/6 MARKING PAINT	21.48	
			53992	POC HARDWARE & SUPPLY	6242	178447	RB4 1/27 WASHERS, NUTS, PVC PIPE, MIS SUPP	182.50	
			53992	POC HARDWARE & SUPPLY	6242	178838	RB4 1/9 COUPLING, PVC PRIMER & CEMENT, BRUSH	87.59	
			53992	POC HARDWARE & SUPPLY	6242	179215	RB4 1/13 DECK SCREWS, FAUCET COVERS	78.93	
			53992	POC HARDWARE & SUPPLY	6242	179229	RB4 1/14 SAW BLADE, PAINT, PVC PIPE	206.59	
			53992	POC HARDWARE & SUPPLY	6242	179285	RB4 1/22 BATTERIES, BULBS, SPRAY ADHESIVE, PVC PIPE	292.13	

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			53992	CINTAS CORPORATION LOC. 083	958	4220061...	RB4 2/5 MAT, MOP	13.17	
			53992	CINTAS CORPORATION LOC. 083	958	4220800...	RB4 2/12 MAT, MOP	13.17	
		GARBAGE COLL-POC PARKS	62664	WHITE TRASH SERVICES	1952	276247	RB4 POC 2/20 MARCH 2025 TRASH SVC	346.68	
		GARBAGE COLL-SEADRIFT	62676	WHITE TRASH SERVICES	1952	276246	RB4 SEA 2/20 MARCH 2025 TRASH SVC	624.02	
		MAINTENANCE-PARKS	63635	LEGACY DISPOSAL & SANITATION	2988	11635	RB4 2/21 TOILET RENTAL- BILL SANDERS 2/21 - 3/20	850.00	
		MISCELLANEOUS	63920	AZALIA BONUZ, TAX ASSESSOR	4042	1118973...	RB4 2/10 REGISTRATION	7.50	
			63920	AZALIA BONUZ, TAX ASSESSOR	4042	1179653...	RB4 2/10 REGISTRATION	7.50	
			63920	AZALIA BONUZ, TAX ASSESSOR	4042	1437574...	RB4 2/11 REGISTRATION	7.50	
			63920	AZALIA BONUZ, TAX ASSESSOR	4042	1568086...	RB4 2/10 REGISTRATION	7.50	
			63920	AZALIA BONUZ, TAX ASSESSOR	4042	9048481...	RB4 2/11 REGISTRATION	7.50	
			63920	AZALIA BONUZ, TAX ASSESSOR	4042	9048486...	RB4 2/10 REGISTRATION	7.50	
			63920	AZALIA BONUZ, TAX ASSESSOR	4042	9084157...	RB4 2/10 REGISTRATION	7.50	
		OUTSIDE SERVICES	64400	DOUGLAS EVA LEE	3778	FEB25	RB4 2/13 FEB 2025 SEA OFFICE CLEANING	300.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3619830...	RB4 2/10 ACT# 361-983-0024- 100102-5 PHONE 2/10- 3/9	72.54	
			66192	AT&T MOBILITY	5209	3616558...	RB4 2/4 ACT# 287241943702 PHONE 2/5- 3/4	326.77	
		UNIFORMS	66590	CINTAS CORPORATION LOC. 083	958	4220061...	RB4 2/5 UNIFORMS	102.11	
			66590	CINTAS CORPORATION LOC. 083	958	4220800...	RB4 2/12 UNIFORMS	102.11	
		MACHINERY AND EQUIPMENT	73400	AUSTIN MAC HAIK FORD LINCOLN	74350	20252	RB4 2/11 BUY BOARD FEE	400.00	
			73400	AUSTIN MAC HAIK FORD LINCOLN	74350	20252	RB4 2/11 PURCHASE (2) 2024 FORD RANGERS	75,483.50	

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ROAD AND BRIDGE-PRECINCT #4	Total 570							82,897.33	0.00
SHERIFF	760	LAW ENFORCEMENT SUPPLIES	53430	LABSOURCE INC	46410	0066477...	SO 1/29 GLOVES	238.59	
		TIRES AND TUBES	53520	FIRESTONE OF PORT LAVACA LLC	5584	0088549	SO 2/6 MNT/BAL (4) TIRES-U35	96.00	
		UNIFORMS	53995	DUDLEY ALYSHA A	1491	6608	SO 2/6 (18) UNIFORM NAME PLATES	144.00	
		AUTOMOTIVE REPAIRS	60360	KNEUPPER CARROLL	3678	49917	SO 2/6 OIL CHG- U35	126.94	
			60360	AUTO ZONE	6	0351284...	SO 2/9 WIPER BLADES, RAIN-X- U21	61.41	
			60360	STAR W EQUIPMENT REPAIR INC	741	6398	SO 1/31 REPL CYLINDER 4 & SPARK PLUGS- U6	650.00	
		TELEPHONE SERVICES	60360	COWAN COBY D	772	6577	SO 2/9 TOW U10	416.00	
			66192	FRONTIER COMMUNICATIONS	2855	2100064...	SO 2/13 ACT# 210-006-4378-100174-5 PHONE 2/13- 3/12	5.00	
		TRAVEL OUT OF COUNTY	66498	MENDOZA GRACIE	5158	PO7602...	SO 1/23 TRAVEL REIMB- WASHINGTON 1/18- 1/23	172.39	
			66498	HARRIS PLYVIUS	6340	PO7602...	SO 1/23 TRAVEL REIMB- WASHINGTON 1/18- 1/23	148.35	
			66498	ROMERO MARIO	EM...	PO7602...	SO 1/23 TRAVEL REIMB- WASHINGTON 1/18- 1/23	196.09	
			66498	SANCHEZ MELISSA	EM...	PO7602...	SO 1/23 TRAVEL REIMB- WASHINGTON 1/18- 1/23	126.35	
			66498	KIRKPATRICK CRAIG	EM...	PO7602...	SO 1/23 TRAVEL REIMB- WASHINGTON 1/18- 1/23	149.35	
SHERIFF	Total 760							2,530.47	0.00
TAX APPRAISAL DISTRICT	220	TAX APPRAISAL SERVICES	66100	CALHOUN CO. APPRAISAL DISTRICT	816	2025-2	TAX A/C 2/13 2025 2ND QTR APPRAISAL SVCS	96,328.51	
		TAX COLLECTION SERVICES	66130	CALHOUN CO. APPRAISAL DISTRICT	816	2025-2	TAX A/C 2/13 2025 2ND QTR COLLEC SVCS	43,609.58	
TAX APPRAISAL DISTRICT	Total 220							139,938.09	0.00

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Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
WASTE MANAGEMENT	380	SUPPLIES-MISCELLANEOUS	53992	TRACTOR SUPPLY CREDIT PLAN	7995	1005735...	WASTE MGMT 1/4 ROPE, HARDWARE, MISC SUPP	74.64	
			53992	TRACTOR SUPPLY CREDIT PLAN	7995	1005759...	WASTE MGMT 1/28 GRABBER	16.99	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615527...	WASTE MGMT 2/1 ACT# 361-552-7791 - 101502-5 FEB 2025 PHONE	203.15	
WASTE MANAGEMENT	Total 380							294.78	0.00

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 2610 - AIRPORT FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2835	3615520...	AIRPORT 2/13 ACT# 361-552-0903-021369-5 PHONE 2/13- 3/12	139.80	
NO DEPARTMENT	Total 999							139.80	0.00

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 2731 - LAW LIBRARY FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Yea... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	BOOKS-LAW	70500	THOMSON REUTERS - WEST	8612	8514262...	LAW LIBRARY 2/1 JAN 2025 WEST SUBSCRIPTION CHGS	1,330.29	
NO DEPARTMENT	Total 999							1,330.29	0.00

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 2736 - POC COMMUNITY CENTER

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Yea... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	CLEANING-P.O.C. COMMUNITY CENTER	60870	RHYNE SERVICES LLC	14930	022025	POCCC 2/13 FEB 2025 CLEANING	600.00	
		UTILITIES-POC COMMUNITY CENTER	66616	WHITE TRASH SERVICES	1952	276610	POCCC 2/20 MARCH 2025 TRASH SVC	346.68	
			66616	FRONTIER COMMUNICATIONS	2855	3619834...	POCCC 2/13 ACT# 361-983-4485-102899-5 PHONE 2/13- 3/12	65.54	
			66616	INFINIUM BROADBAND INTERNET	3378	100349	POCCC 2/17 ACT# ACC0004004 INTERNET 2/17- 3/17	150.00	
NO DEPARTMENT	Total 999							1,162.22	0.00

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 2738 - RECORDS MANAGEMENT FUND COUNTY CLERK

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SOFTWARE MAINTENANCE (ANNUAL)	65835	CITIES DIGITAL INC	3674	62629	RECS MGMT- CO CLK 1/28 LASERFICHE ANN SUPT 4/28/25-4/27/26	4,057.52	
NO DEPARTMENT	Total 999							4,057.52	0.00

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 5189 - CAPITAL PROJECT - EMS TRAINING BUILDING

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	CONSTRUCTION-EMS BUILDING	71040	TURTLE & HUGHES INC	3635	6676968...	1ST RESP TRAINING BLDG 1/22 HIGH BAY LIGHTS	990.00	
			71040	PANIAGO ALVARO	63150	PO99992...	1ST RESP TRAINING BLDG 2/3 PRIM & PAINT WALLS & TRIM	1,800.00	
			71040	ROJAS OMAR GONZALEZ	85680	198581	1ST RESP TRAINING BLDG 2/10 INSTALL TILE, BASEBOARD, TRIM...	1,910.00	
			71040	GUERRERO CONSTRUCTION	85901	00000012	1ST RESP TRAINING BLDG 2/1 SHEETROCK, TAPING, TEXTURE, DOORS	14,250.00	
NO DEPARTMENT	Total 999							18,950.00	0.00

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 5266 - CPRL-SWAN POINT BULKHEAD IMPROVEMENTS

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Yea... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING SERVICES	62454	URBAN ENGINEERING	8044	17532	CAP PROJ 2/8 SWAN PNT BULKHEAD IMPR- ENG SVCS	1,212.68	
		IMPROVEMENTS-BULKHE...	73262	SHIRLEY & SONS	7123	3575	CAP PROJ 1/31 SWAN PNT BULKHEAD IMPR	127,296.00	
NO DEPARTMENT	Total 999							128,508.68	0.00

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 7750 - MISCELLANEOUS CLEARING FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Year... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	DUE TO OTHER GOVERNMENTS	20749	CALHOUN CO. NAVIGATION DIST.	1106	PO2025F...	TAX A/C 2/14 FEB 2025 TAX COLLECS	163.06	
			20749	CALHOUN CO. NAVIGATION DIST.	1106	PO2025F...	TAX A/C 2/21 FEB 2025 TAX COLLECS	214.04	
			20749	CALHOUN CO. WATER CONTROL	895	PO2025F...	TAX A/C 2/14 FEB 2025 TAX COLLECS	148.03	
			20749	CALHOUN CO. WATER CONTROL	895	PO2025F...	TAX A/C 2/21 FEB 2025 TAX COLLECS	2,154.83	
NO DEPARTMENT	Total 999							2,679.96	0.00

CALHOUN COUNTY, TEXAS
 Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 02.26.25 / 2025 BUDGET
 9280 - JUVENILE PROBATION FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	PHOTO COPIES/SUPPLIES	53030	GREAT AMERICA FINANCIAL	2751	38557259	JUV PROB 2/12 COPIER LEASE	208.00	
		SUPPLIES/OPERATING EXPENSES	53980	AQUA BEVERAGE CO	89	192938	JUV PROB 2/5 WATER	26.50	
		MEDICAL/DENTAL FEES	63776	NUECES COUNTY	5473	C1001019	JUV PROB 1/31 MEDICAL (1) JUV	12.00	
		REGIONAL DIVERSION ALTERNATIVE	65410	TCSI LLC	2984	19656	JUV PROB 1/31 JAN 2025 RESIDENTIAL PLACEMENT	9,151.51	
		RESIDENT SERV & DETENT-PR&POST ADJUDICA	65543	NUECES COUNTY	5473	C1001019	JUV PROB 1/31 RESIDENTIAL PLACEMENT (1) JUV	6,200.00	
NO DEPARTMENT	Total 999							15,598.01	0.00
Report Total								639,514.29	8,520.98

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR — February 26, 2025

by:CT

INDIGENT HEALTHCARE FUND:

INDIGENT EXPENSES

SUBTOTAL

Memorial Medical Center (Indigent Healthcare Payroll and Expenses)

Subtotal

0.00

4,166.67

4,166.67

Co-pays adjustments for January 2025

0.00

Reimbursement from Medicaid

0.00

TOTAL APPROVED INDIGENT HEALTHCARE FUND EXPENSES

4,166.67

800 0000002/26/2025 01 CALHOUN COUNTY, TEXAS

DATE: 2/26/2025
 CC Indigent Health Care

VENDOR # 852

ACCOUNT NUMBER	DESCRIPTION OF GOODS OR SERVICES	QUANTITY	UNIT PRICE	TOTAL PRICE
1000-800-98722-999	Transfer to pay bills for Indigent Health Care approved by Commissioners Court on 02/26/2025			\$4,166.67
1000-001-46010	January 31, 2025 Interest			(\$8.90)
				\$4,157.77

COUNTY AUDITOR
 APPROVAL ONLY
APPROVED ON
FEB 21 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

THE ITEMS OR SERVICES SHOWN ABOVE ARE NEEDED IN THE DISCHARGE OF MY OFFICIAL DUTIES AND I CERTIFY THAT FUNDS ARE AVAILABLE TO PAY THIS OBLIGATION.
 I CERTIFY THAT THE ABOVE ITEMS OR SERVICES WERE RECEIVED BY ME IN GOOD CONDITION AND REQUEST THE COUNTY TREASURER TO PAY THE ABOVE OBLIGATION
 BY: *[Signature]* 2/26/2025
 DEPARTMENT HEAD DATE

•IHS
Issued 02/11/25

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

Source	Description	Amount Billed	Amount Paid
	Expenditures	0.00	0.00
	Reimb/Adjustments		
	Grand Total		

NO INVOICES FOUND FOR THIS TIME FRAME!

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

APPROVED ON

FEB 21 2025

CT
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

So Much... So Close!

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

Date: 2/13/2025

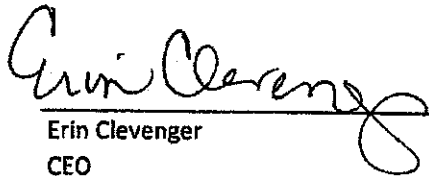
Invoice # 404

For: Jan-25

Bill To:
Calhoun County

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

Total \$ 4,166.67


Erin Clevenger
CEO

Calhoun County Indigent Care Patient Caseload 2025

	Approved	Denied	Removed	Active	Pending
January	0	1	0	1	2
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					
YTD	0	1	0	1	2
Monthly Avg	-	1	-	1	2
December 2024 Active		1			
Number of Charity patients					209
Number of Charity patients below <u>50% FPL</u>					91
Number of Charity patients who meet State Indigent Guidelines					83

Calhoun County Pharmacy Assistance Patient Caseload 2025

	Approved	Refills	Removed	Active	Value
January	2	6	0	4	\$3,841.00
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					
YTD PATIENT SAVINGS					\$3,841.00
Monthly Avg	2	6	-	4	\$3,841.00
December 2024 Active		35			



PROSPERITY BANK®

Statement Date 1/31/2025
 Account No ****4551
 Page 1 of 2

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

13035

STATEMENT SUMMARY

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

01/01/2025	Beginning Balance		\$5,502.81
	2 Deposits/Other Credits	+	\$4,201.65
	3 Checks/Other Debits	-	\$4,201.58
01/31/2025	Ending Balance	31 Days in Statement Period	\$5,502.88
	Total Enclosures		4

DEPOSITS/OTHER CREDITS

Date	Description	Amount
01/03/2025	Deposit	\$4,192.75
01/31/2025	Accr Earning Pymt Added to Account	\$8.90

of PO approved in Nov

CHECKS

Check Number	Date	Amount	Check Number	Date	Amount	Check Number	Date	Amount
12654	01-14	\$4,166.67	12655	01-14	\$30.25	12656	01-14	\$4.66

DAILY ENDING BALANCE

Date	Balance	Date	Balance
01-01	\$5,502.81	01-14	\$5,493.98
01-03	\$9,695.56	01-31	\$5,502.88

EARNINGS SUMMARY

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

Interest Paid This Period	\$8.90	Annual Percentage Yield Earned	1.51 %
Interest Paid YTD	\$8.90	Days in Earnings Period	31
		Earnings Balance	\$6,985.43

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101471 : 01303501

MEMBER FDIC



NYSE Symbol "PB"

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---February 26, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 1,785,248.23
TOTAL TRANSFERS BETWEEN FUNDS	\$ 230,629.53
TOTAL NURSING HOME UPL EXPENSES	\$ 1,318,273.79
TOTAL INTER-GOVERNMENT TRANSFERS	\$ -
GRAND TOTAL DISBURSEMENTS APPROVED February 26, 2025	\$ 3,334,151.55

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---February 26, 2025

PAYABLES AND PAYROLL

2/20/2025 Weekly Payables	941,028.78
2/24/2025 Nitor - Critical	12,709.33
2/13/2025 Citibank Credit Card-see attached (Erin)	2,651.98
2/24/2025 McKesson-340B Prescription Expense	5,861.36
2/24/2025 McKesson-340B Prescription Expense	1,528.02
2/24/2025 Amerisource Bergen-340B Prescription Expense	1,439.34
2/24/2025 Amerisource Bergen-340B Prescription Expense	471.73
2/24/2025 Amerisource Bergen-340B Prescription Expense	1,272.39
2/24/2025 Amerisource Bergen-340B Prescription Expense	1,008.00
2/24/2025 Payroll Liabilities-Payroll Taxes	114,116.20
2/24/2025 Payroll	364,663.38

Prosperity Electronic Bank Payments

2/24/2025 90 Degree Benefits - employee insurance claims	3,598.29
2/24/2025 90 Degree Benefits - employee insurance claims	27,240.12
2/24/2025 Sales Tax - January 2025	1,934.63
2/24/2025 Humana Ins Co Reversal Payment	25,417.42
2/24/2025 TCDRS January Retirement	268,165.45
2/24/2025 Expert Pay- Child Support	570.69
2/24/2025 Pay Plus-Patient Claims Processing Fee	2,556.06
2/24/2025 Credit Card Machine Lease Fee	285.82
2/24/2025 Credit Card Processing Fee	7,617.24
2/24/2025 Health Equity -HSA Contributions	1,112.00

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS \$ **1,785,248.29**

TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES

2/20/2025 MMC Operating to The Crescent-Correction of insurance payment deposited into MMC Operating in error	5,508.00
2/20/2025 MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	156,924.13
2/20/2025 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	41,914.84
2/20/2025 MMC Operating to Bethany-Correction of insurance payment deposited into MMC Operating in error	26,282.56

TOTAL TRANSFERS BETWEEN FUNDS \$ **230,629.53**

NURSING HOME UPL EXPENSES

2/24/2025 Nursing Home UPL-Cantex Transfer	201,363.74
2/24/2025 Nursing Home UPL-Nexion Transfer	149,688.54
2/24/2025 Nursing Home UPL-HMG Transfer	2,210.77
2/24/2025 Nursing Home UPL-Tuscany Transfer	591,944.04
2/24/2025 Nursing Home UPL-HSL Transfer	175,004.02

QIPP CHECKS TO MMC

2/24/2025 Golden Creek - QIPP Y7 ADJ1	6,595.68
2/24/2025 Bethany-QIPP Y7 ADJ1	4,714.56

TRANSFER OF FUNDS BETWEEN NURSING HOMES

2/24/2025 Crescent to Tuscany -Tuscany insurance payment deposited into Crescent in error	186,752.44
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TOTAL NURSING HOME UPL EXPENSES \$ **1,318,273.79**

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

GRAND TOTAL DISBURSEMENTS APPROVED February 26, 2025 \$ **3,334,151.55**

FEB 20 2025

MEMORIAL MEDICAL CENTER

02/20/2025
12:18

AP Open Invoice List

0
ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Due Dates Through: 03/06/2025

Vendor#	Vendor Name	Class	Pay Code								
11237	3WON, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	4571		02/10/202	02/03/202	03/03/202			398.00	0.00	0.00	398.00
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	11237	3WON, LLC						398.00	0.00	0.00	398.00
A1680	AIRGAS USA, LLC - CENTRAL DIV	M									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	5514102346		01/31/202	01/31/202	02/25/202			615.92	0.00	0.00	615.92
	5514102680		02/10/202	01/31/202	02/25/202			1,055.10	0.00	0.00	1,055.10
	9157880691		02/10/202	01/31/202	03/02/202			2,580.41	0.00	0.00	2,580.41
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	A1680	AIRGAS USA, LLC - CENTRAL DIV						4,251.43	0.00	0.00	4,251.43
14028	AMAZON CAPITAL SERVICES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	1TJ64MKR6QVY		01/27/202	01/27/202	02/26/202			436.61	0.00	0.00	436.61
	1DW97J77VFHL		01/29/202	01/22/202	02/21/202			115.22	0.00	0.00	115.22
	1CCGJQDC1KPL		01/29/202	01/23/202	02/22/202			117.89	0.00	0.00	117.89
	1GVYR4VRM34J		01/29/202	01/24/202	02/23/202			255.97	0.00	0.00	255.97
	1N45TYRC19X		02/04/202	01/30/202	03/01/202			637.80	0.00	0.00	637.80
	1R9CJH6QPCGX		02/17/202	01/30/202	03/01/202			437.23	0.00	0.00	437.23
	1C3MX6ROFTLC		02/17/202	01/31/202	03/02/202			929.96	0.00	0.00	929.96
	1XR4CQVWP6RN		02/17/202	02/01/202	03/03/202			241.83	0.00	0.00	241.83
	1WTCXMF9C9PV		02/17/202	02/04/202	03/06/202			723.95	0.00	0.00	723.95
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	14028	AMAZON CAPITAL SERVICES						3,896.46	0.00	0.00	3,896.46
A1360	AMERISOURCEBERGEN DRUG CORP	W									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	805185322		02/18/202	02/15/202	02/21/202			20.02	0.00	0.00	20.02
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
	A1360	AMERISOURCEBERGEN DRUG CORP						20.02	0.00	0.00	20.02
16524	[REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	GARANG0004		02/19/202	01/27/202	02/19/202			20.00	0.00	0.00	20.00

Vendor Totals: Number		Name	Gross	Discount	No-Pay	Net				
16524		[REDACTED]	20.00	0.00	0.00	20.00				
Vendor#	Vendor Name	Class	Pay Code							
A2218	✓ AQUA BEVERAGE COMPANY	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 013125		02/10/202	01/31/202	02/25/202			30.50	0.00	0.00	30.50 ✓
✓ 013025		02/10/202	01/31/202	02/25/202			17.00	0.00	0.00	17.00 ✓

Vendor Totals: Number		Name	Gross	Discount	No-Pay	Net				
A2218		AQUA BEVERAGE COMPANY	47.50	0.00	0.00	47.50				
Vendor	Vendor Name	Class	Pay Code							
16668	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
CHAZZ0001		02/19/202	01/29/202	02/19/202			20.00	0.00	0.00	20.00

minor - removed

Vendor Totals: Number		Name	Gross	Discount	No-Pay	Net				
16668		[REDACTED]	20.00	0.00	0.00	20.00				
Vendor#	Vendor Name	Class	Pay Code							
B1150	✓ BAXTER HEALTHCARE	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 83465618		02/17/202	01/23/202	02/17/202			64.12	0.00	0.00	64.12 ✓
✓ 83511582		02/17/202	01/31/202	02/25/202			240.45	0.00	0.00	240.45 ✓
✓ 83522738		02/17/202	02/03/202	02/28/202			3,071.40	0.00	0.00	3,071.40 ✓
✓ 83251881		02/17/202	02/03/202	02/28/202			631.20	0.00	0.00	631.20 ✓
✓ 83548572		02/17/202	02/07/202	03/04/202			165.30	0.00	0.00	165.30 ✓

Vendor Totals: Number		Name	Gross	Discount	No-Pay	Net
B1150		BAXTER HEALTHCARE	4,172.47	0.00	0.00	4,172.47

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
✓ 111826359		02/04/202	01/28/202	02/22/202			1,198.65	0.00	0.00	1,198.65 ✓
✓ 111828639		02/04/202	01/29/202	02/23/202			6,638.15	0.00	0.00	6,638.15 ✓
✓ 111838560		02/10/202	02/04/202	03/01/202			3,254.73	0.00	0.00	3,254.73 ✓
✓ 111839259		02/10/202	02/04/202	03/01/202			3,160.05	0.00	0.00	3,160.05 ✓
✓ 111841022		02/10/202	02/04/202	03/01/202			10,634.50	0.00	0.00	10,634.50 ✓
✓ 111847573		02/11/202	02/07/202	03/04/202			5,759.11	0.00	0.00	5,759.11 ✓
✓ 111841886		02/17/202	02/04/202	03/01/202			192.98	0.00	0.00	192.98 ✓

Vendor Totals: Number		Name	Gross	Discount	No-Pay	Net
B1220		BECKMAN COULTER INC	30,838.17	0.00	0.00	30,838.17

Vendor#	Vendor Name	Class	Pay Code							
16640	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

BOOBET0001 02/19/202 01/29/202 02/19/202 78.29 0.00 0.00 ~~78.29~~

Vendor Totals: Number Name *minor - removed* 16640 [REDACTED] Gross 78.29 Discount 0.00 No-Pay 0.00 Net ~~78.29~~

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
	907964311		02/17/202	01/29/202	02/08/202			363.02	0.00	0.00	363.02 ✓
	907287589		02/18/202	05/16/202	02/18/202			2,124.67	0.00	0.00	2,124.67 ✓
	907287588		02/18/202	05/16/202	02/18/202			358.67	0.00	0.00	358.67 ✓
	907494200		02/18/202	08/02/202	02/18/202			414.09	0.00	0.00	414.09 ✓

Vendor Totals: Number Name 11072 BIO-RAD LABORATORIES, INC Gross 3,260.45 Discount 0.00 No-Pay 0.00 Net 3,260.45

Vendor#	Vendor Name	Class	Pay Code								
11224	CABLES AND SENSORS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	194632		02/04/202	01/31/202	02/05/202			151.00	0.00	0.00	151.00 ✓

Vendor Totals: Number Name 11224 CABLES AND SENSORS Gross 151.00 Discount 0.00 No-Pay 0.00 Net 151.00

Vendor#	Vendor Name	Class	Pay Code								
16592	[REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	DAVCAI0002		02/19/202	02/03/202	02/19/202			27.30	0.00	0.00	27.30 ✓

Vendor Totals: Number Name 16592 [REDACTED] Gross 27.30 Discount 0.00 No-Pay 0.00 Net 27.30

Vendor#	Vendor Name	Class	Pay Code								
C1048	CALHOUN COUNTY	W									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	53260914		01/31/202	01/27/202	02/26/202			587.55	0.00	0.00	587.55 ✓
	53295660	<i>101 N. Virginia St.</i>	01/31/202	01/27/202	02/26/202			31,272.53	0.00	0.00	31,272.53 ✓
	53292660	<i>Hospital St.</i>	01/31/202	01/27/202	02/26/202			668.87	0.00	0.00	668.87 ✓
	53295668	<i>101 N. Virginia St.</i>	01/31/202	01/27/202	02/26/202			20.00	0.00	0.00	20.00 ✓
	53260381	<i>Hospital St. 002</i>	01/31/202	01/27/202	02/26/202			1,405.88	0.00	0.00	1,405.88 ✓
	53292580	<i>101 N. Virginia St.</i>	01/31/202	01/27/202	02/26/202			1,326.86	0.00	0.00	1,326.86 ✓
	53260378	<i>101 N. Virginia St.</i>	01/31/202	01/27/202	02/26/202			21.02	0.00	0.00	21.02 ✓

Vendor Totals: Number Name C1048 CALHOUN COUNTY Gross 35,302.71 Discount 0.00 No-Pay 0.00 Net 35,302.71

Vendor#	Vendor Name	Class	Pay Code								
16692	[REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	SPECAL0001		02/19/202	01/29/202	02/19/202			46.52	0.00	0.00	46.52 ✓

Vendor Totals: Number Name 16692 [REDACTED] Gross 46.52 Discount 0.00 No-Pay 0.00 Net 46.52

	16692						46.52	0.00	0.00	46.52	
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
	8003733408		01/27/202	01/12/202	02/22/202			181.71	0.00	0.00	181.71
	8003746079		01/31/202	01/26/202	02/25/202			383.62	0.00	0.00	383.62
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	C1325	CARDINAL HEALTH 414, INC.						565.33	0.00	0.00	565.33
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
	10024547665		02/19/202	02/07/202	03/01/202			2.00	0.00	0.00	2.00
	10024547657		02/19/202	02/07/202	03/01/202			1,788.00	0.00	0.00	1,788.00
	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
	200029050		01/29/202	01/23/202	02/22/202			196.95	0.00	0.00	196.95
	200029110		02/04/202	01/31/202	03/02/202			34.80	0.00	0.00	34.80
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	10541	CARESFIELD						231.75	0.00	0.00	231.75
Vendor#	Vendor Name		Class	Pay Code							
16532											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	WEBCAR0001		02/19/202	01/27/202	02/19/202			63.85	0.00	0.00	63.85
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16532							63.85	0.00	0.00	63.85
Vendor#	Vendor Name		Class	Pay Code							
16560											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	BUECAT0001		02/19/202	02/03/202	02/19/202			40.00	0.00	0.00	40.00
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16560							40.00	0.00	0.00	40.00
Vendor#	Vendor Name		Class	Pay Code							
C1992	CDW GOVERNMENT, INC.		M								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	AC5MR6X		02/17/202	01/28/202	02/27/202			26.48	0.00	0.00	26.48
	AC5S47S		02/17/202	01/29/202	02/28/202			81.63	0.00	0.00	81.63
	AC57T2D		02/17/202	01/31/202	03/02/202			263.81	0.00	0.00	263.81
	AB79I7J		02/17/202	12/04/202	01/03/202			1,174.03	0.00	0.00	1,174.03
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	C1992	CDW GOVERNMENT, INC.						1,545.95	0.00	0.00	1,545.95
Vendor#	Vendor Name		Class	Pay Code							

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
C1390 ✓	CENTRAL DRUG			W						
✓ 0239		02/03/202	01/27/202	02/26/202			67.90	0.00	0.00	67.90 ✓
✓ 20250131		02/19/202	01/31/202	02/15/202			24.25	0.00	0.00	24.25 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 C1390 CENTRAL DRUG 92.15 0.00 0.00 92.15

Vendor#	Vendor Name	Class	Pay Code
13264 ✓	CERVEY, LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 33382		01/31/202	02/06/202	03/02/202			1,650.00	0.00	0.00	1,650.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 13264 CERVEY, LLC 1,650.00 0.00 0.00 1,650.00

Vendor#	Vendor Name	Class	Pay Code
11202 ✓	CFI MECHANICAL INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ SD25158		02/19/202	01/30/202	02/19/202			1,100.00	0.00	0.00	1,100.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 11202 CFI MECHANICAL INC 1,100.00 0.00 0.00 1,100.00

1,100.00
 1,075.00
 1,100.00

Vendor#	Vendor Name	Class	Pay Code
16732 ✓	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ SOELB0001		02/19/202	01/28/202	02/19/202			24.00	0.00	0.00	24.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 16732 [REDACTED] 24.00 0.00 0.00 24.00

Vendor#	Vendor Name	Class	Pay Code
12768 ✓	CHEMAQUA		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 9031580		02/19/202	02/10/202	02/20/202			593.69	0.00	0.00	593.69 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 12768 CHEMAQUA 593.69 0.00 0.00 593.69

Vendor#	Vendor Name	Class	Pay Code
16504 ✓	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ DICCHR0001		02/19/202	01/27/202	02/19/202			20.00	0.00	0.00	20.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 16504 [REDACTED] 20.00 0.00 0.00 20.00

Vendor#	Vendor Name	Class	Pay Code
16616 ✓	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ AGUCHR000		02/19/202	01/16/202	02/19/202			30.00	0.00	0.00	30.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 16616 [REDACTED] 30.00 0.00 0.00 30.00

Vendor#	Vendor Name	Class	Pay Code
16580 ✓	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ CORCHR0003		02/19/202	02/03/202	02/19/202			15.90	0.00	0.00	15.90 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 16580 [REDACTED] 15.90 0.00 0.00 15.90

Vendor#	Vendor Name	Class	Pay Code		15.90	0.00	0.00	15.90		
15060	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ SILCHR0002		02/19/202	01/29/202	02/19/202			20.00	0.00	0.00	20.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	15060	[REDACTED]					20.00	0.00	0.00	20.00
Vendor#	Vendor Name	Class	Pay Code							
C1600	✓ CITIZENS MEDICAL CENTER		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 202429		01/31/202	02/04/202	02/11/202			54,090.61	0.00	0.00	54,090.61 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C1600	CITIZENS MEDICAL CENTER					54,090.61	0.00	0.00	54,090.61
Vendor#	Vendor Name	Class	Pay Code							
16540	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
STRCLA0001		02/19/202	01/27/202	02/19/202			47.25	0.00	0.00	47.25
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	16540	[REDACTED]					47.25	0.00	0.00	47.25
Vendor#	Vendor Name	Class	Pay Code							
15188	✓ CLARITY ENROLLMENT SOLUTIONS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 1997		01/31/202	02/01/202	03/03/202			331.50	0.00	0.00	331.50 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	15188	CLARITY ENROLLMENT SOLUTIONS					331.50	0.00	0.00	331.50
Vendor#	Vendor Name	Class	Pay Code							
10212	✓ CLINICAL PATHOLOGY LABS									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 17656013125		01/31/202	01/31/202	02/25/202			11,066.41	0.00	0.00	11,066.41 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10212	CLINICAL PATHOLOGY LABS					11,066.41	0.00	0.00	11,066.41
Vendor#	Vendor Name	Class	Pay Code							
C1166	✓ COASTAL OFFICE SOLUTONS		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ OEQT300091		02/18/202	02/10/202	02/20/202			4,547.69	0.00	0.00	4,547.69 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	C1166	COASTAL OFFICE SOLUTONS					4,547.69	0.00	0.00	4,547.69
Vendor#	Vendor Name	Class	Pay Code							
11029	✓ COASTAL REFRIGERATION									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 020325		02/11/202	02/03/202	02/11/202			530.00	0.00	0.00	530.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11029	COASTAL REFRIGERATION					530.00	0.00	0.00	530.00
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
✓ 45476174018		01/31/202	01/31/202	02/25/202			660.08	0.00	0.00	660.08 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net

Minor - removed

Vendor#	Vendor Name	Class	Pay Code		20.00	0.00	0.00	20.00		
16612	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
BUEDEN0001		02/19/202	01/16/202	02/19/202			26.02	0.00	0.00	26.02
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	16612	[REDACTED]					26.02	0.00	0.00	26.02
Vendor#	Vendor Name	Class	Pay Code							
D1200	DETAR HOSPITAL		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
DTR2501018		01/31/202	02/03/202	02/25/202			79.44	0.00	0.00	79.44
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	D1200	DETAR HOSPITAL					79.44	0.00	0.00	79.44
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
7760241		01/01/202	12/12/202	02/25/202			24.60	0.00	0.00	24.60
7810760		02/04/202	01/22/202	02/16/202			194.37	0.00	0.00	194.37
7823180		02/04/202	01/29/202	02/23/202			91.04	0.00	0.00	91.04
7822970		02/04/202	01/29/202	02/23/202			622.28	0.00	0.00	622.28
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON					932.29	0.00	0.00	932.29
Vendor#	Vendor Name	Class	Pay Code							
10842	DH PACE COMPANY									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
SMINV393950		02/03/202	01/22/202	02/21/202			385.00	0.00	0.00	385.00
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	10842	DH PACE COMPANY					385.00	0.00	0.00	385.00
Vendor#	Vendor Name	Class	Pay Code							
11011	DIAMOND HEALTHCARE CORP									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
IN20056494		01/31/202	02/01/202	02/26/202			19,166.67	0.00	0.00	19,166.67
IN20056493		01/31/202	02/01/202	02/26/202			31,239.58	0.00	0.00	31,239.58
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	11011	DIAMOND HEALTHCARE CORP					50,406.25	0.00	0.00	50,406.25
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
250212		02/19/202	02/12/202	03/03/202			495.05	0.00	0.00	495.05
Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
	14800	DIRECTV ENTERTAINMENT HOLDINGS					495.05	0.00	0.00	495.05
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
MMC013125		01/31/202	01/31/202	02/01/202			172,641.34	0.00	0.00	172,641.34

no invoice - removed

Jan. 2025 CPR
Jan. 2025 Bev Health

Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net		
		10789	DISCOVERY MEDICAL NETWORK INC		172,641.34	0.00	0.00	172,641.34		
Vendor#	Vendor Name		Class	Pay Code						
16652	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 16652-001	VASDOR0001	02/19/202	01/29/202	02/19/202			29.90	0.00	0.00	29.90 ✓
Vendor Totals:		16652	[REDACTED]				29.90	0.00	0.00	29.90
Vendor#	Vendor Name		Class	Pay Code						
11291	✓ DOWELL PEST CONTROL									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 11291-44211		02/03/202	01/29/202	02/23/202			505.00	0.00	0.00	505.00 ✓
✓ 11291-44246		02/03/202	01/29/202	02/23/202			105.00	0.00	0.00	105.00 ✓
Vendor Totals:		11291	DOWELL PEST CONTROL				610.00	0.00	0.00	610.00
Vendor#	Vendor Name		Class	Pay Code						
G0501	✓ DR JEANNINE GRIFFIN		W							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ G0501-013125		01/31/202	02/05/202	02/25/202			1,500.00	0.00	0.00	1,500.00 ✓
Vendor Totals:		G0501	DR JEANNINE GRIFFIN				1,500.00	0.00	0.00	1,500.00
Vendor#	Vendor Name		Class	Pay Code						
14832	✓ DR JOHN CLINTON									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 14832-013125		01/31/202	02/05/202	02/25/202			1,500.00	0.00	0.00	1,500.00 ✓
Vendor Totals:		14832	DR JOHN CLINTON				1,500.00	0.00	0.00	1,500.00
Vendor#	Vendor Name		Class	Pay Code						
14924	✓ DR. TIMU KWI									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 14924-013125		01/31/202	02/01/202	02/25/202			2,600.00	0.00	0.00	2,600.00 ✓
Vendor Totals:		14924	DR. TIMU KWI				2,600.00	0.00	0.00	2,600.00
Vendor#	Vendor Name		Class	Pay Code						
15240	✓ ECLINICAL WORKS LLC									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 15240-0003159691		01/31/202	02/03/202	03/05/202			473.60	0.00	0.00	473.60 ✓
Vendor Totals:		15240	ECLINICAL WORKS LLC				473.60	0.00	0.00	473.60
Vendor#	Vendor Name		Class	Pay Code						
11091	✓ ECOLAB									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 11091-6350589817		01/31/202	02/01/202	03/03/202			231.38	0.00	0.00	231.38 ✓
Vendor Totals:		11091	ECOLAB				231.38	0.00	0.00	231.38
Vendor#	Vendor Name		Class	Pay Code						
16520	✓ [REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net

113-115/25

117-119/25

✓	CAMEDW0002		02/19/202	01/27/202	02/19/202		120.00	0.00	0.00	120.00	✓	
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		16520					120.00	0.00	0.00	120.00		
Vendor#	Vendor Name		Class				Pay Code					
12484	✓ EL CAMPO REFRIGERATION											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	198214		02/11/202	01/28/202	02/11/202			474.50	0.00	0.00	474.50	
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		12484	EL CAMPO REFRIGERATION				474.50	0.00	0.00	474.50		
Vendor#	Vendor Name		Class				Pay Code					
16680	✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	KIRELLO001		02/19/202	01/29/202	02/19/202			40.00	0.00	0.00	40.00	
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		16680					40.00	0.00	0.00	40.00		
Vendor#	Vendor Name		Class				Pay Code					
11284	✓ EMERGENCY STAFFING SOLUTIONS											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	43957		02/18/202	02/15/202	02/25/202			40,062.50	0.00	0.00	40,062.50	
			<i>1-15hr Services</i>									
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		11284	EMERGENCY STAFFING SOLUTIONS				40,062.50	0.00	0.00	40,062.50		
Vendor#	Vendor Name		Class				Pay Code					
11944	✓ EQUIFAX WORKFORCE SOLUTIONS											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	2064161184		01/31/202	01/31/202	03/02/202			10.99	0.00	0.00	10.99	
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		11944	EQUIFAX WORKFORCE SOLUTIONS				10.99	0.00	0.00	10.99		
Vendor#	Vendor Name		Class				Pay Code					
16660	✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	ESCERN0003		02/19/202	01/29/202	02/19/202			49.56	0.00	0.00	49.56	
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		16660					49.56	0.00	0.00	49.56		
Vendor#	Vendor Name		Class				Pay Code					
16708	✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	ESCEST0001		02/19/202	01/29/202	02/19/202			11.00	0.00	0.00	11.00	
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		16708					11.00	0.00	0.00	11.00		
Vendor#	Vendor Name		Class				Pay Code					
16728	✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	LAREST001		02/19/202	01/29/202	02/19/202			64.71	0.00	0.00	64.71	
	Vendor Totals: Number	Name					Gross	Discount	No-Pay	Net		
		16728					64.71	0.00	0.00	64.71		
Vendor#	Vendor Name		Class				Pay Code					
16588	✓											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	

✓	BLEEVE0001		02/19/202	02/03/202	02/19/202		60.00	0.00	0.00	60.00	✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
	16588						60.00	0.00	0.00	60.00	
Vendor#	Vendor Name		Class	Pay Code							
10889	✓ FASTHEALTH CORPORATION										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	02A25MMC		01/31/202	02/01/202	02/16/202			545.00	0.00	0.00	545.00
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
	10889	FASTHEALTH CORPORATION					545.00	0.00	0.00	545.00	
Vendor#	Vendor Name		Class	Pay Code							
F1100	✓ FEDERAL EXPRESS CORP.		W								
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	875551633		02/10/202	01/30/202	02/24/202			96.29	0.00	0.00	96.29
✓	876234384		02/10/202	02/06/202	03/03/202			192.20	0.00	0.00	192.20
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
	F1100	FEDERAL EXPRESS CORP.					288.49	0.00	0.00	288.49	
Vendor#	Vendor Name		Class	Pay Code							
14336	✓ FIRETRON, INC										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	279237		02/03/202	01/30/202	03/01/202			280.00	0.00	0.00	280.00
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
	14336	FIRETRON, INC					280.00	0.00	0.00	280.00	
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
✓	021125		02/18/202	02/11/202	03/01/202			3,891.02	0.00	0.00	3,891.02
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
	13016	FIRST INSURANCE FUNDING					3,891.02	0.00	0.00	3,891.02	
Vendor#	Vendor Name		Class	Pay Code							
F1403	✓ FISHER & PAYKEL HEALTHCARE		M								
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	93161347		02/20/202	01/09/202	02/23/202			38.58	0.00	0.00	38.58
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net	
	F1403	FISHER & PAYKEL HEALTHCARE					38.58	0.00	0.00	38.58	
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
✓	8499710		02/04/202	01/29/202	02/23/202			95.35	0.00	0.00	95.35
✓	8288763		02/17/202	01/21/202	02/15/202			10,795.81	0.00	0.00	10,795.81
✓	8354266		02/17/202	01/23/202	02/17/202			11,376.44	0.00	0.00	11,376.44
✓	8538401		02/17/202	01/30/202	02/24/202			1,812.27	0.00	0.00	1,812.27
✓	8642362		02/17/202	02/04/202	03/01/202			251.50	0.00	0.00	251.50
✓	8642363		02/17/202	02/04/202	03/01/202			210.01	0.00	0.00	210.01

Net
38.58
38.58
38.58

✓ 8712592 02/17/202 02/06/202 03/03/202 10,020.90 0.00 0.00 10,020.90 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 F1400 FISHER HEALTHCARE 34,562.28 0.00 0.00 34,562.28

Vendor# Vendor Name Class Pay Code
 10599 ✓ FORVIS
 Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 2379547 02/18/202 01/28/202 02/22/202 15,750.00 0.00 0.00 15,750.00 ✓
 ✓ 2380119 02/18/202 01/29/202 02/23/202 7,667.00 0.00 0.00 7,667.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 10599 FORVIS 23,417.00 0.00 0.00 23,417.00

Vendor# Vendor Name Class Pay Code
 11183 ✓ FRONTIER
 Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 020225 02/18/202 02/02/202 02/26/202 2,657.17 0.00 0.00 2,657.17 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 11183 FRONTIER 2,657.17 0.00 0.00 2,657.17

Vendor# Vendor Name Class Pay Code
 11078 ✓ FUSION MEDICAL STAFFING, LLC
 Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ INV795676 02/18/202 02/01/202 02/26/202 3,320.00 0.00 0.00 3,320.00 ✓
 ✓ INV799487 02/18/202 02/08/202 03/05/202 3,320.00 0.00 0.00 3,320.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 11078 FUSION MEDICAL STAFFING, LLC 6,640.00 0.00 0.00 6,640.00

Vendor# Vendor Name Class Pay Code
 12404 ✓ GE PRECISION HEALTHCARE, LLC
 Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ 6002866428 01/31/202 02/01/202 03/03/202 61.67 0.00 0.00 61.67 ✓
 ✓ 6002866427 01/31/202 02/01/202 03/03/202 2,422.50 0.00 0.00 2,422.50 ✓
 ✓ 6002866430 01/31/202 02/01/202 03/03/202 5,665.83 0.00 0.00 5,665.83 ✓
 ✓ 6002866425 01/31/202 02/01/202 03/03/202 3,588.58 0.00 0.00 3,588.58 ✓
 ✓ 6002866426 01/31/202 02/01/202 03/03/202 86.67 0.00 0.00 86.67 ✓
 ✓ 6002866737 02/17/202 02/01/202 03/03/202 1,044.26 0.00 0.00 1,044.26 ✓
 ✓ 6002866717 02/18/202 02/01/202 03/03/202 38.59 0.00 0.00 38.59 ✓

FEB 1- FEB 5

Vendor Totals: Number Name Gross Discount No-Pay Net
 12404 GE PRECISION HEALTHCARE, LLC 12,908.10 0.00 0.00 12,908.10

Vendor# Vendor Name Class Pay Code
 16164 ✓ [REDACTED]
 Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 ✓ DADGEO0001 02/19/202 02/05/202 02/19/202 20.00 0.00 0.00 20.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 16164 [REDACTED] 20.00 0.00 0.00 20.00

Vendor# Vendor Name Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9156321458		06/30/202	06/19/202	02/25/202			-2,000.16	0.00	0.00	-2,000.16
	CREDIT									
9380544511		02/17/202	01/21/202	02/15/202			566.80	0.00	0.00	566.80 ✓
9382158369		02/17/202	01/23/202	02/17/202			314.66	0.00	0.00	314.66 ✓
9389430456		02/17/202	01/29/202	02/23/202			105.46	0.00	0.00	105.46 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
W1300 GRAINGER -1,013.24 0.00 0.00 -1,013.24

Vendor#	Vendor Name	Class	Pay Code							
16528 ✓	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
FLOGUA0002		02/19/202	01/27/202	02/19/202			80.00	0.00	0.00	80.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
16528 [REDACTED] 80.00 0.00 0.00 80.00

Vendor#	Vendor Name	Class	Pay Code							
G1210 ✓	GULF COAST PAPER COMPANY	M								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2616971		01/31/202	02/04/202	03/06/202			5.00	0.00	0.00	5.00 ✓
2612980		02/04/202	01/22/202	02/21/202			781.83	0.00	0.00	781.83 ✓
2615215		02/04/202	01/29/202	02/28/202			286.49	0.00	0.00	286.49 ✓
2616960		02/17/202	02/04/202	03/06/202			675.56	0.00	0.00	675.56 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
G1210 GULF COAST PAPER COMPANY 1,748.68 0.00 0.00 1,748.68

Vendor#	Vendor Name	Class	Pay Code							
H0032 ✓	H + H SYSTEM, INC.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
045897		02/17/202	01/28/202	11/14/202			46.50	0.00	0.00	46.50 ✓
046001		02/19/202	02/07/202	02/19/202			93.00	0.00	0.00	93.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
H0032 H + H SYSTEM, INC. 139.50 0.00 0.00 139.50

Vendor#	Vendor Name	Class	Pay Code							
H1100 ✓	HAYES ELECTRIC SERVICE	W								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
A225011302		02/19/202	01/13/202	01/23/202			280.00	0.00	0.00	280.00 ✓
A225011405		02/19/202	01/14/202	01/24/202			140.00	0.00	0.00	140.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
H1100 HAYES ELECTRIC SERVICE 420.00 0.00 0.00 420.00

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
15939		02/18/202	01/31/202	03/02/202			142.50	0.00	0.00	142.50 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net

	10804	HEALTHCARE CODING & CONSULTING					142.50	0.00	0.00	142.50	
Vendor#	Vendor Name		Class		Pay Code						
11552	HEALTHCARE FINANCIAL SERVICES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	100982036		02/10/202	01/25/202	03/01/202			465.13	0.00	0.00	465.13
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11552	HEALTHCARE FINANCIAL SERVICES						465.13	0.00	0.00	465.13
Vendor#	Vendor Name		Class		Pay Code						
16624	[REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	KURHOP0001		02/19/202	01/26/202	02/19/202			20.00	0.00	0.00	20.00
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	16624	[REDACTED]						20.00	0.00	0.00	20.00
Vendor#	Vendor Name		Class		Pay Code						
15208	HOSPITAL CARE CONSULTANTS INC.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	6776		02/18/202	02/15/202	02/25/202			23,663.00	0.00	0.00	23,663.00
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	15208	HOSPITAL CARE CONSULTANTS INC.						23,663.00	0.00	0.00	23,663.00
Vendor#	Vendor Name		Class		Pay Code						
10922	HUNTER PHARMACY SERVICES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	6359		01/31/202	02/01/202	02/21/202			15,037.15	0.00	0.00	15,037.15
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10922	HUNTER PHARMACY SERVICES						15,037.15	0.00	0.00	15,037.15
Vendor#	Vendor Name		Class		Pay Code						
14976	INOVALON PROVIDER INC.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	25M0015586		02/18/202	02/11/202	02/18/202			773.76	0.00	0.00	773.76
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	14976	INOVALON PROVIDER INC.						773.76	0.00	0.00	773.76
Vendor#	Vendor Name		Class		Pay Code						
11200	IRON MOUNTAIN										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	KCKY440		01/31/202	01/31/202	03/02/202			5,059.80	0.00	0.00	5,059.80
	9MX6089		02/18/202	12/31/202	01/30/202			340.40	0.00	0.00	340.40
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11200	IRON MOUNTAIN						5,400.20	0.00	0.00	5,400.20
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
	MMC022025		02/05/202	02/01/202	02/21/202			42,710.95	0.00	0.00	42,710.95
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11285	ITA RESOURCES INC						42,710.95	0.00	0.00	42,710.95
Vendor#	Vendor Name		Class		Pay Code						
11108	ITERSOURCE CORPORATION										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	711857		02/18/202	02/01/202	02/01/202			250.00	0.00	0.00	250.00

1-154W Services

Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		11108	ITERSOURCE CORPORATION		250.00	0.00	0.00	250.00			
Vendor#	Vendor Name			Class	Pay Code						
16736	██████████										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	SMIJER0001		02/19/202	01/28/202	02/19/202			55.90	0.00	0.00	55.90
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		16736	██████████		55.90	0.00	0.00	55.90			
Vendor#	Vendor Name			Class	Pay Code						
16512	██████████										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	ESCJES0002		02/19/202	01/27/202	02/19/202			120.00	0.00	0.00	120.00
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		16512	██████████		120.00	0.00	0.00	120.00			
Vendor#	Vendor Name			Class	Pay Code						
14540	JINDAL X LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	202425094		01/31/202	02/01/202	03/03/202			9,225.00	0.00	0.00	9,225.00
		JAN 2025 BILLING PERIOD									
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		14540	JINDAL X LLC		9,225.00	0.00	0.00	9,225.00			
Vendor#	Vendor Name			Class	Pay Code						
16672	██████████										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	RODJOE0007		02/19/202	01/29/202	02/19/202			20.00	0.00	0.00	20.00
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		16672	██████████		20.00	0.00	0.00	20.00			
Vendor#	Vendor Name			Class	Pay Code						
W1372	JOHN B WRIGHT LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	013125		01/31/202	02/05/202	02/25/202			1,500.00	0.00	0.00	1,500.00
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		W1372	JOHN B WRIGHT LLC		1,500.00	0.00	0.00	1,500.00			
Vendor#	Vendor Name			Class	Pay Code						
16628	██████████										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	BEHJOH0001		02/19/202	01/16/202	02/19/202			55.90	0.00	0.00	55.90
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		16628	██████████		55.90	0.00	0.00	55.90			
Vendor#	Vendor Name			Class	Pay Code						
16724	██████████										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	THOJHO004		02/19/202	01/29/202	02/19/202			96.00	0.00	0.00	96.00
	THOJHO004A		02/20/202	02/03/202	03/06/202			22.72	0.00	0.00	22.72
Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		16724	██████████		118.72	0.00	0.00	118.72			
Vendor#	Vendor Name			Class	Pay Code						
16548	██████████										

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
JONJOS0001		02/19/202	01/27/202	02/19/202			40.00	0.00	0.00	40.00
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16548		[REDACTED]					40.00	0.00	0.00	40.00
Vendor#	Vendor Name			Class	Pay Code					
16572	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
WILJOY0001		02/19/202	02/03/202	02/19/202			90.53	0.00	0.00	90.53 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16572		[REDACTED]					90.53	0.00	0.00	90.53
Vendor#	Vendor Name			Class	Pay Code					
16656	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
MEZJUA0001		02/19/202	01/29/202	02/19/202			40.00	0.00	0.00	40.00 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16656		[REDACTED]					40.00	0.00	0.00	40.00
Vendor#	Vendor Name			Class	Pay Code					
16564	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
ROCJUAN0001		02/19/202	02/03/202	02/19/202			35.00	0.00	0.00	35.00 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16564		[REDACTED]					35.00	0.00	0.00	35.00
Vendor#	Vendor Name			Class	Pay Code					
16632	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
RANKAT0002		02/19/202	01/16/202	02/19/202			47.25	0.00	0.00	47.25 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16632		[REDACTED]					47.25	0.00	0.00	47.25
Vendor#	Vendor Name			Class	Pay Code					
16756	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
RESKAY0001		02/19/202	01/28/202	02/19/202			20.00	0.00	0.00	20.00
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16756		[REDACTED]					20.00	0.00	0.00	20.00
Vendor#	Vendor Name			Class	Pay Code					
16696	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
FARKEN0001		02/19/202	01/29/202	02/19/202			40.00	0.00	0.00	40.00
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16696		[REDACTED]					40.00	0.00	0.00	40.00
Vendor#	Vendor Name			Class	Pay Code					
16664	[REDACTED]									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
SMIKR0001		02/19/202	01/29/202	02/19/202			31.80	0.00	0.00	31.80 ✓
Vendor Totals: Number		Name					Gross	Discount	No-Pay	Net
16664		[REDACTED]					31.80	0.00	0.00	31.80
Vendor#	Vendor Name			Class	Pay Code					
16552	[REDACTED]									

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Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ DOWKYR0001		02/19/202	01/27/202	02/19/202			60.00	0.00	0.00	60.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	16552						60.00	0.00	0.00	60.00
Vendor#	Vendor Name				Class	Pay Code				
16720										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
012925		02/19/202	01/29/202	02/19/202			55.90	0.00	0.00	55.90
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	18720						55.90	0.00	0.00	55.90
Vendor#	Vendor Name				Class	Pay Code				
16744										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ CLILEO0001		02/19/202	01/28/202	02/19/202			15.00	0.00	0.00	15.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	16744						15.00	0.00	0.00	15.00
Vendor#	Vendor Name				Class	Pay Code				
16712										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ RUILIS0001		02/19/202	01/29/202	02/19/202			20.00	0.00	0.00	20.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	16712						20.00	0.00	0.00	20.00
Vendor#	Vendor Name				Class	Pay Code				
L1640	✓ LOWE'S BUSINESS ACCT/SYNCB				W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 020225		02/19/202	02/02/202	02/19/202			2,828.63	0.00	0.00	2,828.63 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	L1640	LOWE'S BUSINESS ACCT/SYNCB					2,828.63	0.00	0.00	2,828.63
Vendor#	Vendor Name				Class	Pay Code				
16700										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ BELLRO0001		02/19/202	01/29/202	02/19/202			80.00	0.00	0.00	80.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	16700						80.00	0.00	0.00	80.00
Vendor#	Vendor Name				Class	Pay Code				
10972	✓ M G TRUST									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 012425		02/10/202	01/24/202	02/25/202			895.00	0.00	0.00	895.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10972	M G TRUST					895.00	0.00	0.00	895.00
Vendor#	Vendor Name				Class	Pay Code				
15200	✓ MANAGED CARE PARTNERS INC.									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 6648		02/19/202	03/01/202	03/01/202			515.00	0.00	0.00	515.00 ✓
Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	15200	MANAGED CARE PARTNERS INC.					515.00	0.00	0.00	515.00
Vendor#	Vendor Name				Class	Pay Code				
16648										

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Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ HEYMAR0001		02/19/202	01/29/202	02/19/202			20.00	0.00	0.00	20.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
16648	[REDACTED]	20.00	0.00	0.00	20.00

Vendor#	Vendor Name	Class	Pay Code
16516 ✓	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ ZURNAR0001		02/19/202	01/27/202	02/19/202			38.36	0.00	0.00	38.36 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
16516	[REDACTED]	38.36	0.00	0.00	38.36

Vendor#	Vendor Name	Class	Pay Code
R1452 ✓	MARISSA ALMANZAR	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 021125		02/11/202	02/11/202	02/25/202			324.80	0.00	0.00	324.80 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
R1452	MARISSA ALMANZAR	324.80	0.00	0.00	324.80

Vendor#	Vendor Name	Class	Pay Code
M2178 ✓	MCKESSON MEDICAL SURGICAL INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 23239125		02/04/202	01/28/202	02/12/202			222.57	0.00	0.00	222.57 ✓
✓ 23250949		02/17/202	01/30/202	02/15/202			80.55	0.00	0.00	80.55 ✓
✓ 23268583		02/17/202	02/04/202	02/19/202			131.77	0.00	0.00	131.77 ✓
✓ 23292795		02/18/202	02/10/202	02/25/202			2,277.43	0.00	0.00	2,277.43 ✓
✓ 23305513		02/18/202	02/10/202	02/25/202			424.95	0.00	0.00	424.95 ✓
✓ 23322044		02/18/202	02/13/202	02/28/202			267.48	0.00	0.00	267.48 ✓
✓ 23126555		02/19/202	01/08/202	01/23/202			2,413.11	0.00	0.00	2,413.11 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
M2178	MCKESSON MEDICAL SURGICAL INC	5,817.86	0.00	0.00	5,817.86

Vendor#	Vendor Name	Class	Pay Code
11612 ✓	MEDICAL AIR SERVICES ASSOC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 2016794		02/18/202	01/10/202	02/18/202			1,638.00	0.00	0.00	1,638.00 ✓
FEBRUARY 2025										

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11612	MEDICAL AIR SERVICES ASSOC.	1,638.00	0.00	0.00	1,638.00

Vendor#	Vendor Name	Class	Pay Code
11141 ✓	MEDICAL DATA SYSTEMS, INC.		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 200115		01/31/202	01/31/202	02/25/202			680.56	0.00	0.00	680.56 ✓
✓ 200116		01/31/202	01/31/202	02/25/202			939.05	0.00	0.00	939.05 ✓
✓ 200117		01/31/202	01/31/202	02/25/202			120.38	0.00	0.00	120.38 ✓
✓ 198874		01/31/202	12/31/202	02/25/202			341.78	0.00	0.00	341.78 ✓

✓ 198875 01/31/202 12/31/202 02/25/202 1,037.82 0.00 0.00 1,037.82 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 11141 MEDICAL DATA SYSTEMS, INC. 3,119.59 0.00 0.00 3,119.59

Vendor# Vendor Name Class Pay Code
 M2470 ✓ MEDLINE INDUSTRIES INC M

Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
 2355186834 01/27/202 01/29/202 02/23/202 519.43 0.00 0.00 ~~519.43~~

*Remove
no
invoices*

2355186847 01/27/202 01/29/202 02/23/202 10.28 0.00 0.00 ~~10.28~~

2355186837 01/27/202 01/29/202 02/23/202 82.16 0.00 0.00 ~~82.16~~

2355186842 01/27/202 01/29/202 02/23/202 2,494.95 0.00 0.00 ~~2,494.95~~

2355186851 01/27/202 01/29/202 02/23/202 20.01 0.00 0.00 ~~20.01~~

2355186829 01/27/202 01/29/202 02/23/202 12.20 0.00 0.00 ~~12.20~~

2355186852 01/27/202 01/29/202 02/23/202 40.03 0.00 0.00 ~~40.03~~

2355186850 01/27/202 01/29/202 02/23/202 228.33 0.00 0.00 ~~228.33~~

2354970865 02/04/202 01/28/202 02/22/202 12.39 0.00 0.00 ~~12.39~~

2354970864 02/04/202 01/28/202 02/22/202 24.32 0.00 0.00 ~~24.32~~

2355186849 02/17/202 01/29/202 02/23/202 6,162.46 0.00 0.00 ~~6,162.46~~

2355953384 02/17/202 02/04/202 03/01/202 71.95 0.00 0.00 ~~71.95~~

2356816276 02/17/202 02/08/202 03/05/202 30.65 0.00 0.00 ~~30.65~~

2354214624 02/18/202 01/22/202 02/16/202 10,844.47 0.00 0.00 ~~10,844.47~~

2355186831 02/18/202 01/29/202 02/23/202 603.78 0.00 0.00 ~~603.78~~

2356061515 02/18/202 02/04/202 03/01/202 260.86 0.00 0.00 ~~260.86~~

✓ 2356098415 02/18/202 02/05/202 03/02/202 115.01 0.00 0.00 115.01 ✓

✓ 2356098406 02/18/202 02/05/202 03/02/202 125.12 0.00 0.00 125.12 ✓

✓ 2356098413 02/18/202 02/05/202 03/02/202 23,018.94 0.00 0.00 23,018.94 ✓

✓ 2356098416 02/18/202 02/05/202 03/02/202 115.01 0.00 0.00 115.01 ✓

✓ 2356098402 02/18/202 02/05/202 03/02/202 55.26 0.00 0.00 55.26 ✓

✓ 2356098409 02/18/202 02/05/202 03/02/202 59.54 0.00 0.00 59.54 ✓

✓ 2356098411 02/18/202 02/05/202 03/02/202 3,800.87 0.00 0.00 3,800.87 ✓

✓ 2356098414 02/18/202 02/05/202 03/02/202 459.98 0.00 0.00 459.98 ✓

✓ 2356098408 02/18/202 02/05/202 03/02/202 31.32 0.00 0.00 31.32 ✓

✓ 2356312920 02/18/202 02/06/202 03/03/202 179.51 0.00 0.00 179.51 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
M2470 MEDLINE INDUSTRIES INC 49,378.83 0.00 0.00 49,378.83

Vendor# Vendor Name Class Pay Code

10963 ✓ MEMORIAL MEDICAL CLINIC
✓ Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 012425 02/10/202 01/24/202 02/25/202 125.00 0.00 0.00 125.00 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
10963 MEMORIAL MEDICAL CLINIC 125.00 0.00 0.00 125.00

Vendor# Vendor Name Class Pay Code

10904 ✓ MERCK SHARP & DOHME LLC
✓ Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 7018015737 02/11/202 01/30/202 03/01/202 1,793.57 0.00 0.00 1,793.57 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
10904 MERCK SHARP & DOHME LLC 1,793.57 0.00 0.00 1,793.57

Vendor# Vendor Name Class Pay Code

M2621 ✓ MMC AUXILIARY GIFT SHOP W
✓ Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 020625 01/31/202 02/06/202 02/25/202 328.81 0.00 0.00 328.81 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
M2621 MMC AUXILIARY GIFT SHOP 328.81 0.00 0.00 328.81

Vendor# Vendor Name Class Pay Code

16888 ✓ [REDACTED]
✓ Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ WARMOR0001 02/19/202 01/29/202 02/19/202 10.40 0.00 0.00 10.40 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
16888 [REDACTED] 10.40 0.00 0.00 10.40

Vendor# Vendor Name Class Pay Code

13548 ✓ NACOGDOCHES TRANSCRIPTION
✓ Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ 8631 02/18/202 02/06/202 02/16/202 54.70 0.00 0.00 54.70 ✓

✓ 8638 02/18/202 02/14/202 02/24/202 33.60 0.00 0.00 33.60 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
13548 NACOGDOCHES TRANSCRIPTION 88.30 0.00 0.00 88.30

Vendor# Vendor Name Class Pay Code

16568 ✓ [REDACTED]
✓ Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ BLANAT0001 02/19/202 02/03/202 02/19/202 19.11 0.00 0.00 19.11 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
16568 [REDACTED] 19.11 0.00 0.00 19.11

Vendor# Vendor Name Class Pay Code

16508 ✓ [REDACTED]
✓ Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net
✓ CHHNEE0001 02/19/202 01/27/202 02/19/202 47.25 0.00 0.00 47.25 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
16508 [REDACTED] 47.25 0.00 0.00 47.25

Vendor#	Vendor Name	Class	Pay Code								
12096	NEOGENOMICS LABORATORIES										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	8395119		02/18/202	12/31/202	02/18/202			3,000.00	0.00	0.00	3,000.00 ✓
✓	8179001		02/19/202	10/31/202	02/19/202			2,744.00	0.00	0.00	2,744.00 ✓
✓	8284070		02/19/202	11/30/202	02/18/202			480.00	0.00	0.00	480.00 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
12096 NEOGENOMICS LABORATORIES								6,224.00	0.00	0.00	6,224.00

Vendor#	Vendor Name	Class	Pay Code								
16704	██████████										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	RODNOE0001		02/19/202	01/29/202	02/19/202			40.00	0.00	0.00	40.00 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
16704 ██████████								40.00	0.00	0.00	40.00

Vendor#	Vendor Name	Class	Pay Code								
01500	OLYMPUS AMERICA INC	M									
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	37502705		02/04/202	01/27/202	02/21/202			815.00	0.00	0.00	815.00 ✓
✓	37407667		02/17/202	01/07/202	02/01/202			1,125.00	0.00	0.00	1,125.00 ✓
✓	37546626		02/17/202	02/04/202	03/01/202			145.00	0.00	0.00	145.00 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
01500 OLYMPUS AMERICA INC								2,085.00	0.00	0.00	2,085.00

Vendor#	Vendor Name	Class	Pay Code								
01416	ORTHO CLINICAL DIAGNOSTICS										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	1853908133		01/27/202	01/27/202	02/26/202			838.33	0.00	0.00	838.33 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
01416 ORTHO CLINICAL DIAGNOSTICS								838.33	0.00	0.00	838.33

Vendor#	Vendor Name	Class	Pay Code								
16752	██████████										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	RESPAB001		02/19/202	01/28/202	02/19/202			32.50	0.00	0.00	32.50 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
16752 ██████████								32.50	0.00	0.00	32.50

Vendor#	Vendor Name	Class	Pay Code								
11155	PARAREV										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	2015272		01/31/202	02/01/202	03/03/202			3,084.00	0.00	0.00	3,084.00 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net
11155 PARAREV								3,084.00	0.00	0.00	3,084.00

Vendor#	Vendor Name	Class	Pay Code								
10152	PARTSSOURCE, LLC										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	05819562		02/17/202	01/23/202	02/22/202			61.74	0.00	0.00	61.74 ✓
Vendor Totals: Number Name								Gross	Discount	No-Pay	Net

	10152	PARTSSOURCE, LLC					61.74	0.00	0.00	61.74	
Vendor#	Vendor Name		Class		Pay Code						
12708	✓ POC ELECTRIC, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 4284		02/19/202	02/19/202	03/01/202			3,438.48	0.00	0.00	3,438.48 ✓
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	12708	POC ELECTRIC, LLC						3,438.48	0.00	0.00	3,438.48
Vendor#	Vendor Name		Class		Pay Code						
11932	✓ PRESS GANEY ASSOCIATES, INC.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ IN000690321		01/31/202	01/31/202	03/02/202			2,838.92	0.00	0.00	2,838.92 ✓
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11932	PRESS GANEY ASSOCIATES, INC.						2,838.92	0.00	0.00	2,838.92
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
	✓ 25010600		02/18/202	01/31/202	02/15/202			5,463.61	0.00	0.00	5,463.61 ✓
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	12480	PRO ENERGY PARTNERS LLC						5,463.61	0.00	0.00	5,463.61
Vendor#	Vendor Name		Class		Pay Code						
10896	✓ QIAGEN INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 999101068		02/17/202	01/22/202	02/21/202			214.17	0.00	0.00	214.17 ✓
	✓ 999175270		02/17/202	03/19/202	04/18/202			1,514.17	0.00	0.00	1,514.17 ✓
	✓ 999207870		02/17/202	04/15/202	05/15/202			364.17	0.00	0.00	364.17 ✓
	✓ 999318859		02/17/202	07/11/202	08/10/202			1,294.61	0.00	0.00	1,294.61 ✓
	✓ 999351841		02/17/202	08/07/202	09/06/202			369.61	0.00	0.00	369.61 ✓
	✓ 999431671		02/17/202	10/11/202	11/10/202			372.30	0.00	0.00	372.30 ✓
	✓ 999526722		02/17/202	01/08/202	02/07/202			1,260.00	0.00	0.00	1,260.00 ✓
	✓ 999557572		02/18/202	02/04/202	03/06/202			335.00	0.00	0.00	335.00 ✓
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	10896	QIAGEN INC						5,724.03	0.00	0.00	5,724.03
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
	✓ 27617		02/19/202	02/12/202	02/27/202			17.28	0.00	0.00	17.28 ✓
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net
	11251	RAPID PRINTING LLC						17.28	0.00	0.00	17.28
Vendor#	Vendor Name		Class		Pay Code						
11024	✓ REED, CLAYMON, MEEKER & HARGET										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 33235		02/11/202	02/06/202	02/11/202			5,950.00	0.00	0.00	5,950.00 ✓
	Vendor Totals: Number Name							Gross	Discount	No-Pay	Net

	11024	REED, CLAYMON, MEEKER & HARGET					5,950.00	0.00	0.00	5,950.00	
Vendor#	Vendor Name		Class	Pay Code							
16684	██████████										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	FLOREI0001		02/19/202	01/29/202	02/19/202			40.00	0.00	0.00	40.00 ✓
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16684	██████████						40.00	0.00	0.00	40.00
Vendor#	Vendor Name		Class	Pay Code							
15264	REPUBLIC PAIN SPECIALISTS										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	43		02/10/202	02/06/202	02/25/202			5,000.00	0.00	0.00	5,000.00 ✓
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	15264	REPUBLIC PAIN SPECIALISTS						5,000.00	0.00	0.00	5,000.00
Vendor#	Vendor Name		Class	Pay Code							
10554	REPUBLIC SERVICES #847										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	0847001378798		01/31/202	01/31/202	02/20/202			649.84	0.00	0.00	649.84 ✓
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	10554	REPUBLIC SERVICES #847						649.84	0.00	0.00	649.84 ✓
Vendor#	Vendor Name		Class	Pay Code							
16644	██████████										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	ESCROG0002		02/19/202	01/29/202	02/19/202			19.11	0.00	0.00	19.11 ✓
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16644	██████████						19.11	0.00	0.00	19.11
Vendor#	Vendor Name		Class	Pay Code							
16748	██████████										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	PERROM0001		02/19/202	01/28/202	02/19/202			20.00	0.00	0.00	20.00 ✓
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16748	██████████						20.00	0.00	0.00	20.00
Vendor#	Vendor Name		Class	Pay Code							
16576	██████████										
✓	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	RISRON0002		02/19/202	02/03/202	02/19/202			34.83	0.00	0.00	34.83 ✓
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16576	██████████						34.83	0.00	0.00	34.83
Vendor	Vendor Name		Class	Pay Code							
16584	██████████										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	RIPROY0001		02/19/202	02/03/202	02/19/202			11.94	0.00	0.00	11.94
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net
	16584	██████████						11.94	0.00	0.00	11.94
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
✓	013125		02/19/202	02/02/202	02/17/202			720.87	0.00	0.00	720.87 ✓
	Vendor Totals: Number	Name						Gross	Discount	No-Pay	Net

Minor - removed

	S1800	SHERWIN WILLIAMS					720.87	0.00	0.00	720.87	
Vendor#	Vendor Name		Class	Pay Code							
14868	✓ SINGLETON ASSOCIATES, P.A.										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 246013125001		01/31/202	02/05/202	02/25/202			13,225.86	0.00	0.00	13,225.86
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		14868	SINGLETON ASSOCIATES, P.A.					13,225.86	0.00	0.00	13,225.86
Vendor#	Vendor Name		Class	Pay Code							
11296	✓ SOUTH TEXAS BLOOD & TISSUE CEN										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ CM14193		01/31/202	01/31/202	02/25/202			-2,750.00	0.00	0.00	-2,750.00
	✓ I07047344		01/31/202	01/31/202	03/02/202			8,832.00	0.00	0.00	8,832.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11296	SOUTH TEXAS BLOOD & TISSUE CEN					6,082.00	0.00	0.00	6,082.00
Vendor#	Vendor Name		Class	Pay Code							
S2345	✓ SOUTHEAST TEXAS HEALTH SYS			W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 26989		01/31/202	01/01/202	01/31/202			6,250.00	0.00	0.00	6,250.00
		DUES FOR JAN-FEB-MARCH									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		S2345	SOUTHEAST TEXAS HEALTH SYS					6,250.00	0.00	0.00	6,250.00
Vendor#	Vendor Name		Class	Pay Code							
15236	✓ SPECIALTY PROFESSIONAL										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 1250000027		02/18/202	01/10/202	02/18/202			3,443.75	0.00	0.00	3,443.75
	✓ 1250000066		02/18/202	01/17/202	02/18/202			4,607.50	0.00	0.00	4,607.50
	✓ 1250000106		02/18/202	01/24/202	02/18/202			3,396.25	0.00	0.00	3,396.25
	✓ 1250000149		02/18/202	01/31/202	02/18/202			3,871.25	0.00	0.00	3,871.25
	✓ 1250000188		02/18/202	02/07/202	02/15/202			3,515.00	0.00	0.00	3,515.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		15236	SPECIALTY PROFESSIONAL					18,833.75	0.00	0.00	18,833.75
Vendor#	Vendor Name		Class	Pay Code							
10845	✓ STAPLES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	✓ 7003952191		01/31/202	01/31/202	03/02/202			433.32	0.00	0.00	433.32
	✓ 6023155706		02/17/202	01/31/202	01/30/202			148.41	0.00	0.00	148.41
	✓ 6023155705		02/17/202	01/31/202	02/17/202			174.99	0.00	0.00	174.99
	✓ 6023155708		02/17/202	01/31/202	02/17/202			109.92	0.00	0.00	109.92
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10845	STAPLES					866.64	0.00	0.00	866.64
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
	✓ 13388961		02/17/202	02/04/202	03/01/202			448.41	0.00	0.00	448.41

Vendor Totals:		Number	Name		Gross	Discount	No-Pay	Net			
		S3940	STERIS CORPORATION		448.41	0.00	0.00	448.41			
Vendor#	Vendor Name		Class	Pay Code							
16600	[REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	BONSTE0002		02/19/202	01/16/202	02/19/202			40.00	0.00	0.00	40.00
	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net			
		16600	[REDACTED]		40.00	0.00	0.00	40.00			
Vendor#	Vendor Name		Class	Pay Code							
14212	✓ SURGICAL DIRECT SOUTH										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	9351		02/03/202	01/28/202	02/27/202			7,625.00	0.00	0.00	7,625.00
	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net			
		14212	SURGICAL DIRECT SOUTH		7,625.00	0.00	0.00	7,625.00			
Vendor#	Vendor Name		Class	Pay Code							
16556	✓ [REDACTED]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	BURSYL0001		02/19/202	02/03/202	02/19/202			118.03	0.00	0.00	118.03
	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net			
		16556	[REDACTED]		118.03	0.00	0.00	118.03			
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
✓	95738979		02/17/202	01/24/202	02/17/202			527.44	0.00	0.00	527.44
	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net			
		14524	SYSMEX AMERICA, INC.		527.44	0.00	0.00	527.44			
Vendor#	Vendor Name		Class	Pay Code							
T2539	✓ T-SYSTEM, INC		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	2014636		01/31/202	01/31/202	03/02/202			12,620.42	0.00	0.00	12,620.42
	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net			
		T2539	T-SYSTEM, INC		12,620.42	0.00	0.00	12,620.42			
Vendor#	Vendor Name		Class	Pay Code							
T2204	✓ TEXAS MUTUAL INSURANCE CO		W								
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓	1006613515		01/31/202	02/10/202	03/04/202			7,387.15	0.00	0.00	7,387.15
	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net			
		T2204	TEXAS MUTUAL INSURANCE CO		7,387.15	0.00	0.00	7,387.15			
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
✓	0024950		02/11/202	02/05/202	02/08/202			3,646.00	0.00	0.00	3,646.00
✓	0024993		02/18/202	02/12/202	02/13/202			3,626.00	0.00	0.00	3,626.00
	Vendor Totals:	Number	Name		Gross	Discount	No-Pay	Net			
		10758	TEXAS SELECT STAFFING, LLC		7,272.00	0.00	0.00	7,272.00			
Vendor#	Vendor Name		Class	Pay Code							
10732	✓ THERAGOM, LLC										

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 225848111301		02/18/202	02/05/202	02/18/202			2,700.93	0.00	0.00	2,700.93 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10732	THERACOM, LLC	2,700.93	0.00	0.00	2,700.93

Vendor#	Vendor Name	Class	Pay Code
15396 ✓	THIRD COAST DISTRIBUTING LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 013125		02/19/202	01/31/202	01/31/202			498.03	0.00	0.00	498.03 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
15396	THIRD COAST DISTRIBUTING LLC	498.03	0.00	0.00	498.03

Vendor#	Vendor Name	Class	Pay Code
16740 ✓	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ HUYTRI0001		02/19/202	01/28/202	02/19/202			120.00	0.00	0.00	120.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
16740	[REDACTED]	120.00	0.00	0.00	120.00

Vendor#	Vendor Name	Class	Pay Code
13616 ✓	TRIOSE, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ TRI207586		01/31/202	12/27/202	02/25/202			125.88	0.00	0.00	125.88 ✓

✓ TRI210256		02/19/202	01/24/202	02/08/202			161.04	0.00	0.00	161.04 ✓
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✓ TRI210589		02/19/202	01/29/202	02/13/202			274.01	0.00	0.00	274.01 ✓
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✓ 0800035097		02/19/202	01/31/202	02/15/202			14.54	0.00	0.00	14.54 ✓
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✓ TRI211342		02/19/202	02/05/202	02/20/202			181.02	0.00	0.00	181.02 ✓
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✓ TRI169671		02/19/202	11/24/202	02/19/202			108.93	0.00	0.00	108.93 ✓
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Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13616	TRIOSE, INC	865.42	0.00	0.00	865.42

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
✓ 35FK022500		02/18/202	02/01/202	02/26/202			1,587.97	0.00	0.00	1,587.97 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11067	TRIZETTO PROVIDER SOLUTIONS	1,587.97	0.00	0.00	1,587.97

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
✓ T2502181378		02/19/202	02/18/202	02/19/202			69,148.99	0.00	0.00	69,148.99 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
C2510	TRUBRIDGE	69,148.99	0.00	0.00	69,148.99

Vendor#	Vendor Name	Class	Pay Code
15872 ✓	TYPENEX MEDICAL LLC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 24121105		02/17/202	12/18/202	02/17/202			371.32	0.00	0.00	371.32 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net

15872 TYPENEX MEDICAL LLC 371.32 0.00 0.00 371.32

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
✓ 2921052183		02/03/202	01/27/202	02/21/202			2,767.24	0.00	0.00	2,767.24 ✓
✓ 2921052191		02/03/202	01/27/202	02/21/202			95.72	0.00	0.00	95.72 ✓
✓ 2921052539		02/10/202	01/30/202	02/24/202			182.86	0.00	0.00	182.86 ✓
✓ 2921052525		02/10/202	01/30/202	02/24/202			2,112.67	0.00	0.00	2,112.67 ✓
✓ 2921052521		02/10/202	01/30/202	02/24/202			124.74	0.00	0.00	124.74 ✓
✓ 2921052542		02/10/202	01/30/202	02/24/202			139.34	0.00	0.00	139.34 ✓
✓ 2921052536		02/10/202	01/30/202	02/24/202			162.14	0.00	0.00	162.14 ✓
✓ 2921052518		02/10/202	01/30/202	02/24/202			109.66	0.00	0.00	109.66 ✓
✓ 2921052529		02/10/202	01/30/202	02/24/202			437.22	0.00	0.00	437.22 ✓
✓ 2921052534		02/10/202	01/30/202	02/24/202			375.30	0.00	0.00	375.30 ✓
✓ 2921052693		02/10/202	02/03/202	02/28/202			2,967.19	0.00	0.00	2,967.19 ✓
✓ 2921052700		02/10/202	02/03/202	02/28/202			155.08	0.00	0.00	155.08 ✓
✓ 2921053168		02/11/202	02/06/202	03/03/202			175.74	0.00	0.00	175.74 ✓
✓ 2921053167		02/11/202	02/06/202	03/03/202			191.05	0.00	0.00	191.05 ✓
✓ 2921053165		02/11/202	02/06/202	03/03/202			467.12	0.00	0.00	467.12 ✓
✓ 2921053166		02/11/202	02/06/202	03/03/202			181.87	0.00	0.00	181.87 ✓
✓ 2921053164		02/11/202	02/06/202	03/03/202			222.57	0.00	0.00	222.57 ✓
✓ 2921053162		02/11/202	02/06/202	03/03/202			196.70	0.00	0.00	196.70 ✓
✓ 2921053161		02/11/202	02/06/202	03/03/202			116.06	0.00	0.00	116.06 ✓
✓ 2921053163		02/11/202	02/06/202	03/03/202			2,570.28	0.00	0.00	2,570.28 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
 U1064 UNIFIRST HOLDINGS INC 13,750.55 0.00 0.00 13,750.55

Vendor# Vendor Name Class Pay Code

16716

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
BROUN10001		02/19/202	01/29/202	02/19/202			46.87	0.00	0.00	46.87

minor - removed

Vendor Totals: Number Name Gross Discount No-Pay Net
 16716 46.87 0.00 0.00 ~~46.87~~

Vendor# Vendor Name Class Pay Code

10768 ✓ VICTORIA MEDICAL FOUNDATION

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
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✓	202526	02/19/202 01/27/202 02/19/202	775.00	0.00	0.00	775.00	✓
✓	202553	02/19/202 01/27/202 02/19/202	775.00	0.00	0.00	775.00	✓
✓	202597	02/19/202 01/29/202 02/19/202	775.00	0.00	0.00	775.00	✓
✓	202657	02/19/202 01/29/202 02/19/202	775.00	0.00	0.00	775.00	✓
✓	2025110	02/19/202 01/29/202 02/19/202	775.00	0.00	0.00	775.00	✓
✓	2025160	02/19/202 01/30/202 02/19/202	550.00	0.00	0.00	550.00	✓
✓	2025136	02/19/202 01/30/202 02/19/202	550.00	0.00	0.00	550.00	✓
✓	2025149	02/19/202 01/30/202 02/19/202	550.00	0.00	0.00	550.00	✓
✓	2025151	02/19/202 01/30/202 02/19/202	550.00	0.00	0.00	550.00	✓
✓	2025157	02/19/202 01/30/202 02/19/202	550.00	0.00	0.00	550.00	✓
✓	2025166	02/19/202 02/03/202 02/19/202	775.00	0.00	0.00	775.00	✓
✓	5	02/19/202 02/18/202 02/19/202	200.00	0.00	0.00	200.00	✓

Vendor Totals: Number Name Gross Discount No-Pay Net
10768 VICTORIA MEDICAL FOUNDATION 7,600.00 0.00 0.00 7,600.00

Vendor# Vendor Name Class Pay Code
16676 ✓ [REDACTED]

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	LEEVIN0001	02/19/202	01/29/202	02/19/202			18.20	0.00	0.00	18.20	✓

Vendor Totals: Number Name Gross Discount No-Pay Net
16676 [REDACTED] 18.20 0.00 0.00 18.20

Vendor# Vendor Name Class Pay Code
14612 ✓ WAGEWORKS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	2052366	01/31/202	12/26/202	01/27/202			569.75	0.00	0.00	569.75	✓

Vendor Totals: Number Name Gross Discount No-Pay Net
14612 WAGEWORKS 569.75 0.00 0.00 569.75

Vendor# Vendor Name Class Pay Code
12548 ✓ WAGEWORKS, INC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
✓	0125TR118685	01/31/202	01/01/202	01/31/202			131.25	0.00	0.00	131.25	✓

Vendor Totals: Number Name Gross Discount No-Pay Net
12548 WAGEWORKS, INC 131.25 0.00 0.00 131.25

Vendor# Vendor Name Class Pay Code
16604 [REDACTED]

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	SMIWAR0001	02/19/202	01/16/202	02/19/202			38.42	0.00	0.00	38.42	

Vendor Totals: Number Name Gross Discount No-Pay Net
16604 [REDACTED] 38.42 0.00 0.00 ~~38.42~~

Vendor# Vendor Name Class Pay Code
11110 ✓ WERFEN USA LLC

minor - removed

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9111750122		02/17/202	02/03/202	02/28/202			1,256.60	0.00	0.00	1,256.60

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11110	WERFEN USA LLC	1,256.60	0.00	0.00	1,256.60

Vendor#	Vendor Name	Class	Pay Code
16620	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
ACHWIL0007		02/19/202	01/16/202	02/19/202			61.74	0.00	0.00	61.74

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
16620	[REDACTED]	61.74	0.00	0.00	61.74

Vendor#	Vendor Name	Class	Pay Code
16536	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
MORWIL0001		02/19/202	01/27/202	02/19/202			40.00	0.00	0.00	40.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
16536	[REDACTED]	40.00	0.00	0.00	40.00

Vendor#	Vendor Name	Class	Pay Code
10556	WOUND CARE SPECIALISTS		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
WCS00007179		02/19/202	02/01/202	03/02/202			7,200.00	0.00	0.00	7,200.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
10556	WOUND CARE SPECIALISTS	7,200.00	0.00	0.00	7,200.00

Vendor#	Vendor Name	Class	Pay Code
16636	[REDACTED]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
CURWYA0001		02/19/202	01/16/202	02/19/202			47.25	0.00	0.00	47.25

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
16636	[REDACTED]	47.25	0.00	0.00	47.25

Grand Totals:	Gross	Discount	No-Pay	Net
APPROVED ON	961,255.56	0.00	0.00	961,255.56

FEB 20 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

961,255.56 +
 20.00 - Pg. 2. Pat. refund minor - removed
 78.29 - Pg 3. "
 1,110.00 -
 1,075.00 + } Pg 5. incorrect amount corrected
 47.25 - Pg 6. Pat. refund minor removed
 85.00 - Pg 8. no invoice
 50.00 -
 20.00 - } Pg 16. Pat. refund minor removed
 40.00 -
 53.80 - Pg 17. Pat. refund minor removed
 11.18.27 - Pg 19. no invoices
 11.94 - Pg 23. Pat. refund minor removed
 46.87 - Pg 27. Pat. refund minor removed
 52.42 - Pg 28. "
 959,028.62 0

939,128.62 +
 2,000.16 --
 961,028.78 0
 Pg. 13
 Credit removed

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 24 2025

02/21/2025

13:49

GALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 02/17/2025

0

ap_open_invoice.template

Vendor# / Vendor Name

16004 / NITOR E LLC

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 46135		02/17/202	01/23/202	02/17/202			6,256.22	0.00	0.00	6,256.22 ✓
✓ V46136		02/17/202	01/23/202	02/17/202			6,453.11	0.00	0.00	6,453.11 ✓

Vendor Totals: Number Name
16004 NITOR E LLC

Gross Discount No-Pay Net
12,709.33 0.00 0.00 12,709.33

Report Summary

Grand Totals: Gross Discount No-Pay Net
12,709.33 0.00 0.00 12,709.33

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



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

Account Number: XXXX-XXXX-XXXX

Commercial Card Account
 ERIN CLEVINGER

Summary of Account Activity

Total Activity \$2,651.98

Send Notice of Billing Errors and Customer Service Inquiries for
 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	02/03/2025
Days in Billing Period	31

Transactions

Post Date	Trans Date	MCC	Reference Number	Description/Location	Amount
***** NOTICE MEMO ITEM(S) LISTED BELOW *****					
01/10	01/09	8599	55436875009270097592516	1 NATIONAL ASSOCIATION O FREMONT M: 2497114	49412 USA ✓ 526.00 ✓
01/10	01/09	3088	55432855009205321833190	2 SOUTHWEST 5282597530922 800-435-9792 TX CLEVINGER/ERIN DEPARTURE 03/16/25 HOU WN G OKC WN F HOU	76235 USA ✓ 369.91 ✓
01/14	01/13	8699	55436875013260132053131	3 NATIONAL ASSOCIATION O FREMONT M: 2497114	49412 USA ✓ 500.00 ✓
01/17	01/16	9399	05134375017600058939085	4 NPDB NPDB.HRSA.GOV FAIRFAX VA N120712886	22033 USA ✓ 42.50 ✓
01/24	01/23	3665	55436875024160249276871	5 HAMPTON INNS PORT LAVACA TX 83018361 CHECK IN: 01/23/2025 83018361	77979 USA ✓ 157.07 ✓
01/30	01/29	5912	55436875030160305974759	6 IMPRIMS RX 503B LEDGEWOOD NJ 1824819	USA ✓ 1,050.00 ✓
02/03	02/02	9399	05134375034600059957768	7 NPDB NPDB.HRSA.GOV FAIRFAX VA N121961230	22033 USA ✓ 5.00 ✓
02/03	02/02	9399	05134375034600059957861	8 NPDB NPDB.HRSA.GOV FAIRFAX VA N121962857	22033 USA ✓ 2.50 ✓
*****					TOTAL AMOUNT OF MEMO ITEM(S): \$2,651.98

APPROVED ON

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

Page 1 of 2

FEB 13 2025

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

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Account Number XXXX-XXXX-XXXX
 Statement Closing Date February 03, 2025

Not an invoice.
 For your records only.

ERIN CLEVINGER
 202 S ANN ST., STE A
 PORT LAVACA TX 77979-4204

00010079643

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: Citi bank

Date: 2/15/2025

Vendor Address: _____

P.O. # _____

Vendor Phone #: _____

Account # _____

Vendor Fax #: _____

Initiated By: _____

Date Required		Expense #	Department	Deliver To			Form # 9401
Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost	
1	-		National Association of			525.00	✓
2			Rural Health Clinics - Registration		3/17-3/19/25		Oklahoma City
3			for Erin Clevenger - NARHC Conf.				
4	-		Southwest Airlines - Flights for			369.91	✓
5			Erin Clevenger for NARHC Conf				
6			in Oklahoma				
7	-		National Association of RHC			500.00	✓
8			Registration for Marissa	2/10/25			
9			Almanzar - CRHCP course				
10	-		NPDB - 17 Renewals			42.50	✓

Est. Freight _____ Est. Total Cost _____ TOTAL COST _____

NOTES:

Charges made to Erin Clevenger's MC

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

Dept. Director:
Dir. Nursing:
Dir. Clinical Services:
CFO:
Administrative: <u>Erin Clevenger</u>

2

MEMORIAL MEDICAL CENTER PURCHASE ORDER

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

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

Vendor Name: Citibank
Vendor Address: _____
Vendor Phone #: _____
Vendor Fax #: _____

Date: 2/5/25
P.O. # _____
Account # _____
Initiated By: _____

Date Required		Expense #	Department	Deliver To		
Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	-		Hampton Inn and Suites			✓ 157.07
2			Helen Rhodes, MD - DB/Sign Pl. Lavaca, TX		1/23-1/27/25	
3			Rotation			
4	-		NPDB - 2 Enrollments			✓ 5.00
5	-		NPDB - 1 Enrollment			✓ 2.50
6	-		Inprimis RX - Dex-Moxi - ^{20 ct} Box			
7		525-00 +				
		369-91 +	phenyl-Lido PF ^{20 ct} Box			✓ 1050.00
8		500-00 +				
		42-50 +				
9		157-07 +				
		5-00 +				
10		2-50 +				
		1-050-00 +				
		2-651-98 +				

NOTE: _____ Est. Total Cost _____ TOTAL COST \$2,651.98

charges made to Erin Clevenger's MC

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

Dept. Director
Dir. Nursing
Dir. Clinical Services
CFO
Administrator <u>Erin Clevenger</u>

MCKESSON

STATEMENT

As of: 02/14/2025

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 SupplID:
Territory:
Customer: 632536
Date: 02/15/2025

As of: 02/14/2025 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 02/15/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account 632536 Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
--------------	----------	-------------------	--	-------------	---------------	----------------	-----	--------------	-----	-------------------	--

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 5,981.00 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,451.97
08/07/2017

If Paid By 02/18/2025,
Pay This Amount: 5,861.36 USD

If Paid After 02/18/2025,
Pay this Amount: 5,981.00 USD

Due If Paid On Time: ✓
USD 5,861.36
Disc lost if paid late: 119.64
Due If Paid Late:
USD 5,981.00

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
GALHOUN COUNTY, TEXAS

5,806.93 +
54.43 +
5,861.36 0

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

As of: 02/14/2025

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

DC: 8115
Customer INV Suppld:
Territory: 7001

Customer: 256342
Date: 02/15/2025

As of: 02/14/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 02/15/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account	632538 Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS												
02/08/2025	02/18/2025	7550092918		221364491	115Invoice	1.05	52.71		51.66	✓	7550092918	
02/08/2025	02/18/2025	7550092919		223736444	115Invoice	1.16	57.84		56.68	✓	7550092919	
02/08/2025	02/18/2025	7550092920		225754444	115Invoice	1.16	57.84		56.68	✓	7550092920	
02/10/2025	02/18/2025	7550342886		226476798	115Invoice	0.01	0.32		0.31	✓	7550342886	
02/10/2025	02/18/2025	7550342887		218365809	115Invoice	0.34	16.86		16.52	✓	7550342887	
02/10/2025	02/18/2025	7550342888		226609555	115Invoice	5.44	271.81		266.37	✓	7550342888	
02/10/2025	02/18/2025	7550342889		218798901	115Invoice	5.26	262.99		257.73	✓	7550342889	
02/10/2025	02/18/2025	7550342890		218890547	115Invoice	5.26	262.99		257.73	✓	7550342890	
02/10/2025	02/18/2025	7550342891		220116730	115Invoice	5.26	262.99		257.73	✓	7550342891	
02/10/2025	02/18/2025	7550342892		218365809	115Invoice	17.95	897.27		879.32	✓	7550342892	
02/10/2025	02/18/2025	7550342893		218576141	115Invoice	58.63	2,931.50		2,872.87	✓	7550342893	
02/12/2025	02/18/2025	7550882483		223395906	115Invoice	5.26	262.98		257.72	✓	7550882483	
02/13/2025	02/18/2025	7551150403		219022564	115Invoice	1.23	61.39		60.16	✓	7551150403	
02/13/2025	02/18/2025	7551150404		223395906	115Invoice	5.26	262.98		257.72	✓	7551150404	
02/13/2025	02/18/2025	7551150405		221691660	115Invoice	5.26	262.99		257.73	✓	7551150405	

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

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 5,925.46 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 7,859.52
02/10/2025

If Paid By 02/18/2025,
Pay This Amount: 5,806.93 USD

If Paid After 02/18/2025,
Pay this Amount: 5,925.46 USD

Due if Paid On Time: 5,806.93
USD
Disc lost if paid late: 118.53

Due if Paid Late: 5,925.46
USD

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 02/14/2025

Page: 001

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

Company: 8000

DC: 8115
Customer INV SupplD:
Territory: 7001

As of: 02/14/2025 Page: 001
Mail to: Comp: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Customer: 835437
Date: 02/15/2025

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835437 PLEASE CHECK ANY
Date: 02/15/2025 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 835437	CVS PHCY 7416/MEM MC PHS										
02/12/2025	02/18/2025	7550875328	3874718	115Invoice	1.11	55.54		54.43	✓	7550875328	•

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

TOTAL: Customer Number 835437 CVS PHCY 7416/MEM MC PHS

Subtotals: 55.54 USD

Future Due: 0.00
Past Due: 0.00
Last Payment 02/10/2025 7,859.52

If Paid By 02/18/2025,
Pay This Amount: 54.43 USD
If Paid After 02/18/2025,
Pay this Amount: 55.54 USD

Due If Paid On Time: 54.43 USD
Disc lost if paid late: 1.11
Due If Paid Late: 55.54 USD

✓ 8

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CALHOUN COUNTY, TEXAS

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MCKESSON

STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

As of: 02/21/2025

Page: 002

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

DC: 8115
 Customer INV SupplD:
 Territory:

As of: 02/21/2025 Page: 002
 Mail to: Comp: 8000

Customer: 632536
 Date: 02/21/2025

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

Cust: 632536 PLEASE CHECK ANY
 Date: 02/21/2025 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: 1,559.20 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/07/2017 2,451.97

If Paid By 02/25/2025,
 Pay This Amount:

1,528.02 USD

If Paid After 02/25/2025,
 Pay this Amount:

1,559.20 USD

Due If Paid On Time:

USD 1,528.02

Disc lost if paid late:

31.18

Due If Paid Late:

USD 1,559.20

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

118.28 +
 266.37 +
 32.02 +
 6.12 +
 368.41 +
 736.82 +
 1,528.02 *

For AR Inquiries please contact 800-867-0333

MCKESSON STATEMENT

Company: 8000

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

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 02/21/2025

Page: 001

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

DC: 8115
Customer INV Suppl:
Territory: 7001

As of: 02/21/2025 Page: 001
Mail to: Comp: 8000

Customer: 190813
Date: 02/21/2025

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 190813 PLEASE CHECK ANY
Date: 02/21/2025 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 190813 HEB PHCY 0434/MEM MED PHS										
02/19/2025	02/25/2025	7552103207	4418707	115Invoice	2.37	118.56		116.19	✓	7552103207
02/21/2025	02/26/2025	7552589321	4419309	115Invoice	0.04	2.13		2.09	✓	7552589321

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

TOTAL: Customer Number 190813 HEB PHCY 0434/MEM MED PHS

Subtotals: 120.69 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 12/23/2024 6,913.94

If Paid By 02/25/2025,
Pay This Amount:

118.28 USD

If Paid After 02/25/2025,
Pay this Amount:

120.69 USD

Due If Paid On Time:
USD

118.28

Disc lost if paid late:

2.41

Due If Paid Late:
USD

120.69

180

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CALHOUN COUNTY TEXAS

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MCKESSON STATEMENT

As of: 02/21/2025

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
816 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 256342
Date: 02/21/2025

As of: 02/21/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 02/21/2025 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	02/17/2025	02/25/2025	WALMART 1098/MEM MED PHS	227402428	115Invoice	5.44		271.81		266.37	✓	7551772223	

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: 271.81 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 02/17/2025 5,861.36

If Paid By 02/25/2025,
Pay This Amount:

266.37 USD

If Paid After 02/25/2025,
Pay this Amount:

271.81 USD

Due If Paid On Time:
USD

266.37

Disc lost if paid late:

5.44

Due If Paid Late:
USD

271.81

✓ 88

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FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 02/21/2025

Page: 001

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

Company: 8000

DC: 8115
Customer INV SupplD:
Territory: 7001

As of: 02/21/2025 Page: 001
Mail to: Comp: 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

Customer: 820405
Date: 02/21/2025

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 PLEASE CHECK ANY
Date: 02/21/2025 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 820406	HEB PHCY WHSE/MEM MED PHS										
02/20/2025	02/25/2025	7552313537	B2502-055-191120	115Invoice	0.65	32.67		32.02	✓	7552313537	

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

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

Subtotals: 32.67 USD

Future Due: 0.00
Past Due: 0.00
Last Payment 7,859.52
02/10/2025

If Paid By 02/25/2025,
Pay This Amount: 32.02 USD
If Paid After 02/25/2025,
Pay this Amount: 32.67 USD

Due If Paid On Time: 32.02
USD
Disc lost if paid late: 0.65
Due If Paid Late: 32.67
USD

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON STATEMENT

Company #000

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

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

As of: 02/21/2025

Page: 001

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

DC: 8115
 Customer INV SupplD:
 Territory: 7001

Customer: 835437
 Date: 02/21/2025

As of: 02/21/2025 Page: 001
 Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

Cust: 835437 PLEASE CHECK ANY
 Date: 02/21/2025 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
02/19/2025	02/25/2025	7552244142	622536 3890734	115Invoice	0.12	6.24		6.12	✓	7552244142

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

TOTAL: Customer Number 835437 CVS PHCY 7416/MEM MC PHS

Subtotals: 6.24 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 02/17/2025 5,861.36

If Paid By 02/25/2025,
 Pay This Amount:

6.12 USD

If Paid After 02/25/2025,
 Pay this Amount:

6.24 USD

Due If Paid On Time: 6.12
 USD
 Disc lost if paid late: 0.12
 Due If Paid Late: 6.24
 USD

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON STATEMENT

Company: 8000

CVS PHCY 10356/MEM MC PHS
 MEMORIAL MEDICAL CENTER
 VICKY KALISEK
 815 N VIRGINIA ST
 PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

As of: 02/21/2025 Page: 001

DC: 8115
 Customer INV SupplD:
 Territory: 7001

Customer: 835430
 Date: 02/21/2025

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

As of: 02/21/2025 Page: 001
 Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
 Statement for information only

Cust: 835430 PLEASE CHECK ANY
 Date: 02/21/2025 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
02/19/2025	02/25/2025	7552070981	632536 3893361	115 Invoice	7.52	375.93		368.41	✓	7552070981

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

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

Subtotals: 375.93 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 12/16/2024 2,414.03

If Paid By 02/25/2025,
 Pay This Amount: 368.41 USD

If Paid After 02/25/2025,
 Pay this Amount: 375.93 USD

Due If Paid On Time: 368.41 USD
 Disc lost if paid late: 7.52
 Due If Paid Late: 375.93 USD

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

STATEMENT

As of: 02/21/2025

Page: 001

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

Company: 8000

CVS PHCY 7475/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SupplD:
Territory: 7001

Customer: 835438
Date: 02/21/2025

As of: 02/21/2025 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835438 PLEASE CHECK ANY
Date: 02/21/2025 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
Customer Number 835438 02/19/2025	CVS PHCY 7475/MEM MC PHS 02/25/2025	7552230639	632536 3893628	115Invoice	15.04	751.86		736.82	✓	7552230639

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

TOTAL: Customer Number 835438 CVS PHCY 7475/MEM MC PHS

Subtotals: 751.86 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 2,751.69
02/03/2025

If Paid By 02/25/2025,
Pay This Amount: 736.82 USD

If Paid After 02/25/2025,
Pay this Amount: 751.86 USD

Due If Paid On Time: 736.82
USD
Disc lost if paid late: 15.04
Due If Paid Late: 751.86
USD

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333



STATEMENT

Statement Number: 69167001
Date: 02-14-2025

Serviced By: AMERISOURCEBERGEN DRUG CORP 12727 W. AIRPORT BLVD. SUGAR LAND TX 77478-6101 DEA: RA0289276 866-451-9655	Customer: WALGREENS #12494 340B MEMORIAL MEDICAL CENTER 1302 N VIRGINIA ST PORT LAVACA TX 77979-2509	Customer Number 100135284 / 037028186
		Terms Sat - Fri Due in 7 days
		Summary Not Yet Due: 0.00 Current: 1,439.34 Past Due: 0.00 Total Due: 1,439.34 Account Balance: 1,439.34

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-10-2025	02-21-2025	3205472064	7008890318	Invoice	193.22		0.00	193.22
02-10-2025	02-21-2025	3205472065	7008891048	Invoice	40.46		0.00	40.46
02-10-2025	02-21-2025	3205472066	7008900329	Invoice	32.76		0.00	32.76
02-10-2025	02-21-2025	3205472067	7008907709	Invoice	0.91		0.00	0.91
02-10-2025	02-21-2025	3205472068	7008907709	Invoice	3.85		0.00	3.85
02-11-2025	02-21-2025	3205644050	7008917592	Invoice	25.11		0.00	25.11
02-11-2025	02-21-2025	363340089	7008733190	Invoice	(10.26)		0.00	(10.26)
02-11-2025	02-21-2025	363340090	7008733190	Invoice	9.65		0.00	9.65
02-11-2025	02-21-2025	363340493	7008575942	Invoice	(4.18)		0.00	(4.18)
02-11-2025	02-21-2025	363340494	7008575942	Invoice	3.36		0.00	3.36
02-11-2025	02-21-2025	363340690	7008595116	Invoice	(2.09)		0.00	(2.09)
02-11-2025	02-21-2025	363340691	7008595116	Invoice	1.68		0.00	1.68
02-11-2025	02-21-2025	363341211	7008631476	Invoice	(2.09)		0.00	(2.09)
02-11-2025	02-21-2025	363341212	7008631476	Invoice	1.88		0.00	1.88
02-11-2025	02-21-2025	363341424	7008663760	Invoice	(2.09)		0.00	(2.09)
02-11-2025	02-21-2025	363341650	7008663760	Invoice	1.68		0.00	1.68
02-11-2025	02-21-2025	363341760	7008696730	Invoice	(3.84)		0.00	(3.84)
02-11-2025	02-21-2025	363341761	7008696730	Invoice	3.35		0.00	3.35
02-11-2025	02-21-2025	363341854	7008824718	Invoice	(6.83)		0.00	(6.83)
02-11-2025	02-21-2025	363341855	7008824718	Invoice	4.48		0.00	4.48
02-11-2025	02-21-2025	363341880	7008842482	Invoice	(9.84)		0.00	(9.84)
02-11-2025	02-21-2025	363341881	7008842482	Invoice	7.62		0.00	7.62
02-11-2025	02-21-2025	363341914	7008866727	Invoice	(2.51)		0.00	(2.51)
02-11-2025	02-21-2025	363341915	7008866727	Invoice	2.35		0.00	2.35
02-11-2025	02-21-2025	363341924	7008875078	Invoice	(4.38)		0.00	(4.38)
02-11-2025	02-21-2025	363341925	7008875078	Invoice	0.06		0.00	0.06
02-12-2025	02-21-2025	3205795589	7008927664	Invoice	40.44		0.00	40.44



STATEMENT

Number: 69167001

Date: 02-14-2025

2 of 2

Account Activity								
Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-13-2025	02-21-2025	3206945225	7008936614	invoice	0.67		0.00	0.67
02-13-2025	02-21-2025	3206945226	7008935810	invoice	20.10		0.00	20.10
02-14-2025	02-21-2025	3206092606	7008941973	invoice	1,093.72		0.00	1,093.72

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,439.34	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
02-14-2025	(6,771.24)

Reminders	
Due Date	Amount
02-21-2025	1,439.34
Total Due:	1,439.34

18

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS



STATEMENT

Statement Number: 69184680
Date: 02-14-2025

Served By:
AMERISOURCEBERGEN DRUG CORP
501 PATRIOT PARKWAY
ROANOKE TX 76262-6336

DEA: RA0316958
866-451-9655

Customer:
WALGREENS CENTRAL FILL #21373 3408
MEMORIAL MEDICAL CENTER
4100 DALE EARNHARDT WAY 200
NORTHLAKE TX 76262-2389

Remit To:
AMERISOURCEBERGEN
PO Box 978740
DALLAS TX 75397-8740

Customer Number	
100566356 / 100566356	
Terms	
Sat - Fri Due in 7 days	
Summary	
Not Yet Due:	0.00
Current:	471.73
Past Due:	0.00
Total Due:	471.73
Account Balance:	471.73

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-10-2025	02-21-2025	3205448004	7008898729	Invoice	11.24		0.00	11.24
02-10-2025	02-21-2025	3205449006	7008910507	Invoice	331.65		0.00	331.65
02-10-2025	02-21-2025	3205529046	7008917268	Invoice	20.07		0.00	20.07
02-11-2025	02-21-2025	3205894544	7008925540	Invoice	5.10		0.00	5.10
02-11-2025	02-21-2025	363348510	7008699827	Invoice	(4.60)		0.00	(4.60)
02-11-2025	02-21-2025	363348511	7008699827	Invoice	3.39		0.00	3.39
02-11-2025	02-21-2025	363348797	7008604639	Invoice	(2.98)		0.00	(2.98)
02-11-2025	02-21-2025	363348798	7008604639	Invoice	2.46		0.00	2.46
02-11-2025	02-21-2025	363348935	7008751294	Invoice	(0.94)		0.00	(0.94)
02-11-2025	02-21-2025	363348936	7008751294	Invoice	0.90		0.00	0.90
02-11-2025	02-21-2025	363349365	7008866484	Invoice	(2.57)		0.00	(2.57)
02-11-2025	02-21-2025	363349366	7008866484	Invoice	2.56		0.00	2.56
02-11-2025	02-21-2025	363349437	7008991791	Invoice	(0.94)		0.00	(0.94)
02-11-2025	02-21-2025	363349438	7008991791	Invoice	0.90		0.00	0.90
02-13-2025	02-21-2025	3205988788	7008942668	Invoice	6.54		0.00	6.54
02-14-2025	02-21-2025	3206133318	7008951127	Invoice	98.95		0.00	98.95

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
471.73	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders	
Due Date	Amount
02-21-2025	471.73
Total Due:	471.73



STATEMENT

Statement Number: 69216795
Date: 02-21-2025

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

DEA: RA0289276
866-451-9655

Customer:
WALGREENS #12494 340B
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2509

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

Customer Number	
100135284 / 037028186	
Terms	
Sat - Fri Due in 7 days	
Summary	
Not Yet Due:	0.00
Current:	1,272.39
Past Due:	0.00
Total Due:	1,272.39
Account Balance:	1,272.39

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-17-2025	02-28-2025	3206245401	7008951844	Invoice	10.43		0.00	10.43 ✓
02-17-2025	02-28-2025	3206245402	7008964831	Invoice	29.28		0.00	29.28 ✓
02-17-2025	02-28-2025	3206245403	7008972693	Invoice	54.44		0.00	54.44 ✓
02-17-2025	02-28-2025	3206245404	7008961608	Invoice	37.74		0.00	37.74 ✓
02-18-2025	02-28-2025	3206402299	7008981072	Invoice	15.16		0.00	15.16 ✓
02-18-2025	02-28-2025	3206402660	7008978810	Invoice	1.38		0.00	1.38 ✓
02-18-2025	02-28-2025	3206524803	7008987732	Invoice	1,086.01		0.00	1,086.01 ✓
02-20-2025	02-28-2025	3206656398	7009000354	Invoice	12.20		0.00	12.20 ✓
02-21-2025	02-28-2025	3206788339	7009004652	Invoice	25.75		0.00	25.75 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,272.39	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
02-21-2025	(1,911.07)

FEB 24 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Reminders	
Due Date	Amount
02-28-2025	1,272.39
Total Due:	1,272.39

✓ 83



STATEMENT

Statement Number: 69234338
Date: 02-21-2025

Served By:
AMERISOURCEBERGEN DRUG CORP
501 PATRIOT PARKWAY
ROANOKE TX 76262-6336

DEA: RA0316958
866-451-9655

Customer:
WALGREENS CENTRAL FILL #21373 340B
MEMORIAL MEDICAL CENTER
4100 DALE EARNHARDT WAY 200
NORTHLAKE TX 76262-2389

Remit To:
AMERISOURCEBERGEN
PO Box 978740
DALLAS TX 75397-8740

Customer Number	
100566356 / 100566356	
Terms	
Sat - Fri Due in 7 days	
Summary	
Not Yet Due:	0.00
Current:	1,008.00
Past Due:	0.00
Total Due:	1,008.00
Account Balance:	1,008.00

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
02-17-2025	02-28-2025	3206224625	7008960619	Invoice	9.42		0.00	9.42 ✓
02-17-2025	02-28-2025	3206224627	7008969415	Invoice	995.61		0.00	995.61 ✓
02-18-2025	02-28-2025	3206433617	7008989172	Invoice	2.97		0.00	2.97 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,008.00	0.00	0.00	0.00	0.00	0.00	0.00

APPROVED ON
FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Reminders	
Due Date	Amount
02-28-2025	1,008.00
Total Due:	1,008.00

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

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

<input type="checkbox"/> "ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	#### ENTER: ### <input type="text"/>
<input type="checkbox"/> "ENTER YOUR 4-DIGIT PIN"	<input type="text"/>
<input type="checkbox"/> "MAKE A PAYMENT, PRESS 1"	<input type="text" value="1"/>
<input type="checkbox"/> "ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★ <input type="text" value="941"/> #
<input type="checkbox"/> "IF FEDERAL TAX DEPOSIT ENTER 1"	<input type="text" value="1"/>
<input type="checkbox"/> "ENTER 2-DIGIT TAX FILING YEAR"	★ <input type="text" value="24"/>
<input type="checkbox"/> "ENTER 2-DIGIT TAX FILING ENDING MONTH"	★ <input type="text" value="03"/>
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	
<input type="checkbox"/> "ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★ <input type="text" value="\$ 114,116.20"/> #
"1 TO CONFIRM"	<input type="text" value="1"/>
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0 <input type="text" value="\$ 60,861.22"/> #
"ENTER W/CENTS AMOUNT OF MEDICARE"	<input type="text" value="\$ 14,233.78"/> #
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"	<input type="text" value="\$ 39,021.20"/> #
<input type="checkbox"/> "6-DIGIT SETTLEMENT DATE"	★ <input type="text"/>
"1 TO CONFIRM"	<input type="text" value="1"/>
<input type="checkbox"/> ACKNOWLEDGEMENT NUMBER	<input type="text"/>

CALLED IN BY:

CALLED IN DATE:

CALLED IN TIME:

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED 3/18/2014

ENTER VOID CKS AS NEGATIVE NUMBERS

PAY PERIOD: BEGIN	2/27/2025	VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: END	2/20/2025					
PAY DATE:	2/26/2025					
GROSS PAY:	\$ 527,716.11					\$ 527,716.11
DEDUCTIONS:						
A/R	\$ 300.00					\$ 300.00
ADVANC						
BOOTS						
MUTUAL CRITICAL ILLNESS						
MUTUAL ACCIDENT						
IRS TAX						
MUTUAL SHORT TERM DIS						
MUTUAL VISION	\$ 834.96					\$ 834.96
CAFÉ-D	\$ 1,284.14					\$ 1,284.14
CAFÉ-H	\$ 29,351.94					\$ 29,351.94
CAFÉ-P						
CANCER						
CHILD	\$ 570.69					\$ 570.69
CLINIC	\$ 295.00					\$ 295.00
COMBIN	\$ 250.86					\$ 250.86
CREDUN						
DENTAL						
DEP-LF						
MUTUAL TERM LIFE	\$ 1,239.82					\$ 1,239.82
MUTUAL HOSP INDEM	\$ 563.50					\$ 563.50
FED TAX	\$ 39,021.20					\$ 39,021.20
FICA-M	\$ 7,116.89					\$ 7,116.89
FICA-O	\$ 30,430.61					\$ 30,430.61
FICA-M ADDITIONAL						
FIRST C						
FLEX S	\$ 4,533.62					\$ 4,533.62
FLX-FE						
GIFT S	\$ 124.62					\$ 124.62
MUTUAL CRITICAL ILLNESS	\$ 905.36					\$ 905.36
MUTUAL ACCIDENT	\$ 648.38					\$ 648.38
MUTUAL SHORT TERM DIS	\$ 1,778.17					\$ 1,778.17
LEGAL	\$ 1,038.40					\$ 1,038.40
OTHER	\$ 4,723.41					\$ 4,723.41
NATIONAL FARM LIFE	\$ 1,256.63					\$ 1,256.63
MED BURCHARGE						
Blank						
RELAY						
REPAY						
STONEDF	\$ 895.00					\$ 895.00
STONE						
STONE 2						
STUDEN						
TSA-R	\$ 35,889.53					\$ 35,889.53
UWHOS						
TOTAL DEDUCTIONS:	\$ 163,052.73	\$ -	\$ -	\$ -	\$ -	\$ 163,052.73
NET PAY:	\$ 364,663.38	\$ -	\$ -	\$ -	\$ -	\$ 364,663.38
TOTAL CAFÉ 125 PLAN:	\$ 36,899.66					
TAXABLE PAY:	\$ 490,816.45	\$ 490,816.45				

	"CALCULATED"	From MMC Report	Difference
FICA - MED (ER)	1.45% \$ 7,116.84		
FICA - MED (EE)	1.45% \$ 7,116.84	\$ 7,116.89	\$ (0.05)
FICA - SOC SEC (ER)	6.20% \$ 30,430.62		
FICA - SOC SEC (EE)	6.20% \$ 30,430.62	\$ 30,430.61	\$ 0.01
FED WITHHOLDING	\$ 39,021.20	\$ 39,021.20	

Employees over FICA-SS Cap:
 Paycode S - Employee Reimb.:
 TOTAL: \$ -

TAX DEPOSIT:	\$ 114,116.12	\$ 114,116.20
FICA - MEDICARE	2.90% \$ 14,233.68	\$ 14,233.78
FICA - SOCIAL SECURITY	12.40% \$ 60,861.24	\$ 60,861.22
FED WITHHOLDING	\$ 39,021.20	\$ 39,021.20
TOTAL TAX:	\$ 114,116.12	\$ 114,116.20

PREPARED BY: Sariah Rubio
 PREPARED DATE: 2/24/2025

Run Date: 02/21/25
Time: 16:08

MEMORIAL MEDICAL CENTER
Payroll Register (Bi-Weekly)
Pay Period 02/07/25 - 02/20/25 Run# 1

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P2REG

Final Summary

Pay Code Summary				Deductions Summary			
PayCd	Description	Hrs	OT SH WR HO CB	Gross	Code	Amount	
1	REGULAR PAY-S1	10131.00	N N N	238620.70	A/R	300.00	A/R2 A/R3
1	REGULAR PAY-S1	2007.25	N N N N	98308.90	ADVANC		AWARDS BCBSVI
1	REGULAR PAY-S1	4.25	N 1 N N	59.50	BOOTS		CAPE H CAPE-1
1	REGULAR PAY-S1	304.25	Y N N	10069.15	CAPE-2		CAPE-3 CAPE-4
2	REGULAR PAY-S2	2387.75	N N N	67815.43	CAPE-5		CAPE-C CAPE-D 2284.14 ✓
2	REGULAR PAY-S2	110.75	Y N N	4538.59	CAPE-F		CAPE-H 29351.94 CAPE-I
3	REGULAR PAY-S3	1582.50	N N N	54532.31	CAPE-L		CAPE-P CANCER
3	REGULAR PAY-S3	107.75	Y N N	5318.20	CHILD	570.69	CLINIC 295.00 COMBIN 250.86 ✓
4	CALL BACK PAY	11.25	N 1 N N Y	515.50	CREDUN		DD ADV DENTAL
4	CALL BACK PAY	6.00	N 2 N N Y	262.47	DEP-LF		DIS-LF EAT
C	CALL PAY	2041.50	N 1 N N	4083.00	EATCSH		FEDTAX 39021.20 FICA-M 7116.89 ✓
D	DOUBLE TIME	33.25	N 1 N N	2517.39	FICA-Q	30430.61	FIRSTC FLEX S 4021.62 ✓
D	DOUBLE TIME	15.50	N 2 N N	1329.72	FLX FE		FORT D FUTA
D	DOUBLE TIME	1.25	N 3 N N	119.03	GIFT S	124.62	GRANT GRP-IN
D	DOUBLE TIME	2.75	Y 1 N N	248.90	GTL		HOSP-I HSA 512.00 ✓
D	DOUBLE TIME	4.00	Y 2 N N	386.04	ID TFF		IRSTAX LEAF
D	DOUBLE TIME	6.75	Y 3 N N	963.90	LEGAL	241.90	MASA 796.50 REALS 3657.77 ✓
E	EXTRA WAGES		N 1 N N N	1755.50	METVIS		MISC MISC/
K	EXTENDED-ILLNESS-BANK	192.00	N 1 N N	4988.10	MMCSHR		MOORCC 649.38 MOOILL 905.36 ✓
P	PAID-TIME-OFF	12.72	N N N N	539.23	MOOIND	563.50	MOOLIF 1239.82 MOOSTD 1778.17 ✓
P	PAID-TIME-OFF	1058.00	N 1 N N	29988.57	MOOVIS	834.96	MATFML 1256.63 OTHER
X	CALL PAY 2	232.00	N 1 N N	464.00	PHI		PHI*** PR FIN
Z	CALL PAY 3	96.00	N 1 N N	288.00	RBLAY		REPAY SAMS
					SCRUBS		SIGNON ST-TX
					STONDF	895.00	STONE STONE2
					STUDEX		SUNACC SUNILL
					SUNIND		SUNLIF SUNSTD
					SUNVIS		SURCHG TSA-1
					TSA-2		TSA-C TSA-P
					TSA-R	35389.53	TUTION UNIFOR 1065.64 ✓
					UN/HOS		

----- Grand Totals: 20368.47 ----- | Gross: 527716.11 ✓ | Deductions: 163052.73 ✓ | Net: 364663.38 ✓
 Checks Count: FT 204 PT 13 Other 43 Female 232 Male 27 Credit OverAmt 6 ZeroNet Term Total: 259 | *MSC*

Table with columns: ID, Description, Date, Amount, Vendor Name, Type, Audit Date, and Status. Includes entries for various service providers like VIP CARE SERVICES LLC and SINGLETON ASSOCIATES PA.

33,396.28

Handwritten initials 'DS' and 'msl'

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

LINE	ACCOUNT	DATE	AMOUNT	DESCRIPTION	DATE	AMOUNT	DESCRIPTION	DATE	AMOUNT	DESCRIPTION		
4110	76351	1	0	2025 31060893	0	2/17/2025	\$435.00	1	ORTHO SOURCE INC	P	172	
4211	76351	2	0	2025 27000715	0	2/17/2025	\$263.18	1	HEALTH AND WELLNESS SOLUTIONS PA	P	172	
4213	76351	2	0	2025 27000777	0	2/17/2025	\$1,230.00	1	MEMORIAL HERMANN SURGERY CENTER	P	702	
4215	76351	1	41	0	2025 18000644	0	2/17/2025	\$12.07	1	SINGLETON ASSOCIATES PA	P	181
4216	76351	1	54	0	2025 28000979	0	2/17/2025	\$14.21	1	SINGLETON ASSOCIATES PA	P	181
4217	76351	1	9	0	2025 28000979	0	2/17/2025	\$14.54	1	SINGLETON ASSOCIATES PA	P	181
4218	76351	1	8	0	2025 21001181	0	2/17/2025	\$29.10	1	PORT LAVACA CLINIC ASSOCIATES	P	172
4219	76351	1	0	2025 28001510	0	2/17/2025	\$42.67	1	SINGLETON ASSOCIATES PA	P	603	
4220	76351	3	43	0	2025 44001359	0	2/17/2025	\$44.36	9	CIGNA HEALTH AND LIFE INSURANCE COMPANY	P	30
4221	76351	1	49	0	2025 27001242	0	2/17/2025	\$56.19	1	USAP-TEXAS	P	178
4222	76351	3	31	0	2025 27001194	0	2/17/2025	\$62.27	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	450
4223	76351	1	11	0	2025 27001251	0	2/17/2025	\$62.37	1	TMH PHYSICIAN ASSOCIATES, PLLC	P	450
4224	76351	3	69	1	2025 29001549	0	2/17/2025	\$69.08	1	PORT LAVACA CLINIC ASSOCIATES	P	172
4226	76351	3	67	0	2025 28000957	0	2/17/2025	\$63.53	1	SINGLETON ASSOCIATES PA	P	172
4227	76351	2	42	0	2025 28000911	0	2/17/2025	\$81.52	1	SINGLETON ASSOCIATES PA	P	172
4228	76351	1	18	0	2025 28000978	0	2/17/2025	\$81.52	1	SINGLETON ASSOCIATES PA	P	172
4231	76351	1	64	0	2025 28000745	0	2/17/2025	\$112.97	1	SINGLETON ASSOCIATES PA	P	482
4235	76351	3	64	0	2025 27001227	0	2/17/2025	\$230.01	1	VICTORIA WOMEN'S CLINIC ASSOCIATES	P	172
4238	76351	3	50	0	2025 29001489	0	2/17/2025	\$289.45	1	PORT LAVACA CLINIC ASSOCIATES	P	172
4243	76351	3	28	0	2025 44001357	0	2/17/2025	\$381.50	1	VIP CARE SERVICES LLC	P	604
4250	76351	1	111	0	2025 27001200	0	2/17/2025	\$1,098.30	1	USAP-TEXAS	P	176
4252	76351	1	111	0	2025 29001389	0	2/17/2025	\$10.33	1	CITIZENS MEDICAL CENTER	P	418
4253	76351	1	111	0	2025 29001389	0	2/17/2025	\$10.33	1	SINGLETON ASSOCIATES PA	P	181
4254	76351	2	87	0	2025 24000746	0	2/17/2025	\$122.01	1	PORT LAVACA CLINIC ASSOCIATES	P	172
4260	76351	2	114	0	2025 24000777	0	2/17/2025	\$432.53	1	CITIZENS MEDICAL PROFESSIONALS	P	518
4261	76351	2	114	0	2025 24000750	0	2/17/2025	\$2,175.00	1	VICTORIA EYES CENTER	P	481
4262	76351	1	28	0	2025 29001473	0	2/17/2025	\$9.50	1	YASSON SOMBRI, MD PA	P	481
4263	76351	1	28	0	2025 27000554	0	2/17/2025	\$12.07	1	SINGLETON ASSOCIATES PA	P	172
4265	76351	1	53	1	2025 28001001	0	2/17/2025	\$11.79	1	SINGLETON ASSOCIATES PA	P	181
4266	76351	1	105	0	2025 28000908	0	2/17/2025	\$19.79	1	SINGLETON ASSOCIATES PA	P	183
4267	76351	1	112	0	2025 29001477	0	2/17/2025	\$19.79	1	SINGLETON ASSOCIATES PA	P	181
4268	76351	3	44	0	2025 27001209	0	2/17/2025	\$28.10	1	PORT LAVACA CLINIC ASSOCIATES	P	172
4269	76351	3	44	0	2025 28000910	0	2/17/2025	\$19.54	1	SINGLETON ASSOCIATES PA	P	181
4270	76351	3	52	0	2025 28000834	0	2/17/2025	\$38.52	1	SINGLETON ASSOCIATES PA	P	682
4271	76351	3	74	0	2025 27001214	0	2/17/2025	\$14.90	1	SINGLETON ASSOCIATES PA	P	603
4272	76351	3	70	0	2025 28000914	0	2/17/2025	\$38.80	1	SINGLETON ASSOCIATES PA	P	609
4273	76351	3	24	0	2025 44001349	0	2/17/2025	\$38.75	1	VIP CARE SERVICES LLC	P	604
4274	76351	3	66	0	2025 21001174	0	2/17/2025	\$44.82	1	SINGLETON ASSOCIATES PA	P	603
4275	76351	3	129	0	2025 21000627	0	2/17/2025	\$54.83	1	CITIZENS MEDICAL PROFESSIONALS	P	177
4276	76351	3	21	1	2025 29001478	0	2/17/2025	\$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	172
4277	76351	1	24	0	2025 28000915	0	2/17/2025	\$177.17	1	SINGLETON ASSOCIATES PA	P	178
4278	76351	1	91	0	2025 27001182	0	2/17/2025	\$149.40	1	WHELAN W/D PA	P	172
4279	76351	1	28	0	2025 22000297	0	2/17/2025	\$127.32	1	METHUENIST COSMETOLOGY ASSOCIATES	P	185
4280	76351	1	28	0	2025 44001381	0	2/17/2025	\$271.67	9	CIGNA HEALTH AND LIFE INSURANCE COMPANY	P	30
4281	76351	1	21	1	2025 44001347	0	2/17/2025	\$291.25	1	CHRONIC MEDICAL PROFESSIONALS	P	176
4282	76351	3	18	0	2025 44001352	0	2/17/2025	\$348.75	1	VIP CARE SERVICES LLC	P	604
4283	76351	1	28	0	2025 16000933	0	2/17/2025	\$161.21	1	USAP-TEXAS	P	405
4284	76351	1	33	0	2025 44001354	0	2/17/2025	\$620.00	1	VIP CARE SERVICES LLC	P	604
4285	76351	1	32	0	2025 44001353	0	2/17/2025	\$658.75	1	VIP CARE SERVICES LLC	P	604
4286	76351	1	82	0	2025 44001346	0	2/17/2025	\$819.25	1	VIP CARE SERVICES LLC	P	604
4287	76351	1	21	1	2025 27000610	0	2/17/2025	\$1,373.20	1	DEARBORN HEALTHCARE SYSTEM	P	186
4288	76351	1	28	0	2025 41000410	0	2/17/2025	\$2,355.60	1	HOUSTON METHUENIST SUGAR LAND HOSPITAL	P	485
4289	76351	1	22	0	2025 29001413	0	2/17/2025	\$19.25	1	CITIZENS MEDICAL PROFESSIONALS	P	188
4291	76351	3	27	0	2025 14000857	0	2/17/2025	\$52.66	1	CITIZENS MEDICAL PROFESSIONALS	P	188

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APPROVED ON
FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT — Feb 10, 2025 - February 23, 2025

Date	Bank Description	MMC Notes	Amount	CPI *Handwritten Check #
2/11/2025	PAY PLUS ACHTrans 56262472 101000699054816 P	- 3rd Party Payer Fee	-506.60	5015
2/11/2025	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	1,911.07	5505
2/10/2025	WEBFILE TAX PYMT CD 902/7835013 21000027123	- Sales Tax	1,934.63	7001
2/19/2025	PAY PLUS ACHTrans 56060415 101000697791720 P	- 3rd Party Payer Fee	-275.25	9011
2/19/2025	PAY PLUS ACHTrans 5509815 101000696005667 P	- 3rd Party Payer Fee	-188.04	9011
2/19/2025	PAY PLUS ACHTrans 55788106 10100069423615 P	- 3rd Party Payer Fee	1,072.85	9011
2/18/2025	MCKESSON DRUG AUTO ACH ACH0596105 910000189	- 340B Drug Program Expense	5,861.36	5501
2/18/2025	TEXAS COUNTY DIS RECEIVABLE 0419 21000022022	- Retirement Funding	788,165.45	8601
2/18/2025	IRS USATAXPYMT 27044933894758 9103601215138	- Payroll Taxes	118,492.49	8601
2/18/2025	FDMS FDMS PYMT 052-1733548-000 4100012363209	- Credit Card Machine Lease Fee	-406.96	9011
2/18/2025	FDMS FDMS PYMT 032-2100911-000 4100012084631	- Credit Card Machine Lease Fee	-406.96	9011
2/18/2025	FDMS FDMS PYMT 052-1743547-000 4100012083036	- Credit Card Machine Lease Fee	-406.96	9011
2/18/2025	FDMS FDMS PYMT 052-1732767-000 4100012592659	- Credit Card Machine Lease Fee	-406.96	9011
2/14/2025	PAY PLUS ACHTrans 55511658 10100069298292 P	- 3rd Party Payer Fee	-182.93	9011
2/14/2025	HEALTH EQUITY INC HealthEqui 135888 91000010	- EmpDeduct/Employer Contribut	1,112.00	860
2/14/2025	EXPERTPAY EXPERTPAY 746003411 9100001513732	- Child Support Payment	520.69	860
2/14/2025	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	8,771.74	550
2/14/2025	MEMORIAL MEDICAL PAYROLL 746003411 111122850	- Payroll	573,610.73	**
2/14/2025	HUMANIA INS CD REVERSAL 43000095758954	- Insurance Recoup for double payment	25,417.42	700
2/13/2025	PAY PLUS ACHTrans 55320473 101000691670858 P	- 3rd Party Payer Fee	-240.62	9011
2/12/2025	PAY OUT HEALTH EQUITY	- Wages/ovrs	5,840.75	800
2/12/2025	PAY PLUS ACHTrans 55143445 101000690211570 P	- 3rd Party Payer Fee	-45.10	9011
2/11/2025	PAY PLUS ACHTrans 54994022 101000698992822 P	- 3rd Party Payer Fee	-12.60	9011
2/11/2025	MCKESSON DRUG AUTO ACH ACH07389302 910000124	- 340B Drug Program Expense	7,859.52	550
2/10/2025	PAY PLUS ACHTrans 54843351 101000697853686 P	- 3rd Party Payer Fee	-29.07	9011
2/10/2025	TSYS/TRANSFIRST MERCH FEES 393009B7541616 G1	- Credit Card Processing Fee	2,413.45	9011
2/10/2025	TSYS/TRANSFIRST MERCH FEES 41395801332401 G1	- Credit Card Processing Fee	59.31	9011
2/10/2025	TSYS/TRANSFIRST MERCH FEES 41395801332393 G2	- Credit Card Processing Fee	-1,015.27	9011
2/10/2025	TSYS/TRANSFIRST MERCH FEES 41395801332385 G3	- Credit Card Processing Fee	2,856.77	9011
2/10/2025	TSYS/TRANSFIRST MERCH FEES 41395801363397 G3	- Credit Card Processing Fee	-347.63	9011
2/10/2025	HPHG LLC PT Lava MemMedCtr Pillav 11312265001	- Credit Card Processing Fee	-285.82	9011
2/10/2025	HPHG LLC PT Lava MemMedCtr Pillav 11312265001	- Health Insurance Claim Payments	104,751.38	**
2/10/2025	HPHG LLC PT Lava MemMedCtr Pillav 11312265001	- Health Insurance Claim Payments	26,333.57	**
2/10/2025	HPHG LLC PT Lava MemMedCtr Pillav 11312265001	- Health Insurance Claim Payments	72,600.00	**

1,630,759.36 +
1,911.07 -
1,934.63 -
1,880.04 -
1,072.85 -
5,861.36 -
788,165.45 -
118,492.49 -
406.96 -
406.96 -
406.96 -
406.96 -
182.93 -
1,112.00 -
520.69 -
8,771.74 -
573,610.73 -
25,417.42 -
5,840.75 -
45.10 -
12.60 -
7,859.52 -
29.07 -
2,413.45 -
59.31 -
1,015.27 -
2,856.77 -
347.63 -
285.82 -
104,751.38 -
26,333.57 -
72,600.00 -
1,036,759.36

526.60 +
275.25 +
188.04 +
1,072.85 +
187.93 +
248.62 +
15.10 +
12.60 +
29.07 +
2,550.06 10
80.06 +
45.64 +
40.03 +
120.09 +
285.82
Child Suppl.
570.69 +
570.69
CC Proc. Fee
2,613.45 +
99.31 +
1,615.27 +
2,955.72 +
347.63 +
285.86 +
7,617.24 9
0.00
2,550.06 +
285.82 +
570.69 +
7,617.24 +
11,029.81 0

Brack, CFO
Memorial Medical Center
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT — ESTIMATED ACIS
February 24, 2025
* Approved on 2.12.25 cc
** Approved on 2.05.25 cc

Date	Description	MMC Notes	Amount
February 24, 2025			0.00

Brack, CFO
Memorial Medical Center
APPROVED ON
FEB 24 2025
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Confirmation: You Have Filed Successfully

Sales and Use Tax Period Ending 01/31/2025 (2501)

Taxpayer ID: [REDACTED]	Taxpayer Name:	Entered By: Caitlin Clevenger
User ID: mmc746003412	MEMORIAL MEDICAL CENTER	Email Address:
Reference Number: [REDACTED]	Taxpayer Address:	cclevenger@mmcportlavaca.com
Date and Time of Filing:	815 N VIRGINIA ST PORT LAVACA, TX	Telephone Number: (361) 552-0272
02/19/2025, 09:25:52 AM	77979-3025	
	IP Address: [REDACTED]	

PAYMENT SUMMARY

Electronic Check	Payment Reference Number: [REDACTED]	Type of Bank Account: Checking
State Amount: \$1,465.63	Trace Number: [REDACTED]	Accountholder Name:
Local Amount: \$469.00		Memorial Medical Center Operating
Amount to Pay: \$1,934.63		Bank Routing Number: [REDACTED]
Electronic Check: \$1,934.63		Bank Account Number: [REDACTED]
		Payment Effective Date: 02/19/2025

CREDIT SUMMARY

Credits Taken

Are you taking credit to reduce taxes due on this return? No

Licensed Customs Broker Exported Sales

Did you refund sales tax for this filing period on items exported outside the United States based on a Texas Licenced Customs Broker Export Certifications? No

LOCATION SUMMARY

Loc #	Total Texas Sales	Taxable Sales	Taxable Purchases	Subject to State Tax (Rate .0625)	State Tax Due	Subject to Local Tax	Local Tax Rate	Local Tax Due
00004	23,568	23,568	0.00	23,568	1,473	23,568	0.02	471.36
SubTotal	23,568	23,568	0	23,568	1,473	23,568		471.36

Total Tax for Locations

Total Tax Due:	\$1,944.36
Timely Filing Discount:	- \$9.73
Balance Due:	\$1,934.63
Pending Payments:	- \$0.00
Total Amount Due and Payable:	\$1,934.63

(State amount due is \$1,465.63) (Local amount due is \$469.00)

Date/Time 02-10-2025 / 03:42 PM
Submitted By cclevenger256

Pay Date 01-31-2025

Employee Deposits	\$109,775.40
Employer Contributions	\$158,390.05
Group Term Life Premiums	\$0.00
Total	\$268,165.45

Comments

Payroll File January 2025.xlsx



Michelle Cumberland

From: Misty Passmore
Sent: Monday, February 17, 2025 9:28 AM
To: Michelle Cumberland
Cc: Caitlin Clevenger
Subject: RE: Humana Reversal

We called Humana and were told they paid us twice so we pulled the remits and they did in fact pay us twice. The other remit had a overpayment recovery on it so that is why there was a difference in the amounts. Other than that they were the same patients and paid amounts

From: Michelle Cumberland <mcumberland@mmcportlavaca.com>
Sent: Saturday, February 15, 2025 9:15 AM
To: Misty Passmore <mpassmore@mmcportlavaca.com>
Cc: Caitlin Clevenger <cclevenger@mmcportlavaca.com>
Subject: Humana Reversal

Hi Misty,

This popped up as an unauthorized ACH transaction. Were you expecting a reversal from Humana? We can pay it – I just want to confirm that you think it's a legitimate ACH before we do.

^	Decisions Needed (1)	\$25,417.42	MEMORIAL MEDICAL CENTER OPERATING
	UNAUTHORIZED ACH TRANSACTION	\$25,417.42	
v	Decisions Made (1)	\$1,432.14	MEMORIAL MEDICAL CENTER OPERATING
	Total (2)	\$26,849.56	

There was a deposit for the same amount on 2/11.

Detail 216844357 MEMORIAL MEDICAL OPERATING 2/11/2025 25417.42 DDA118 ACH Deposit

Thanks,

Michelle Cumberland
Controller
Memorial Medical Center
815 N Virginia St
Port Lavaca, TX 77979
Ph: 361.552.0450

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	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	\$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	\$0.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$137.00	\$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	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	\$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	\$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	1/1/2025	\$50.00	\$25.00
2025 Heath Equity Health Savings Account	1/1/2025	\$10.00	\$25.00
		\$562.00	\$550.00
	Total	\$1,112.00	

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 20 2025

MEMORIAL MEDICAL CENTER

02/20/2025
12:21

AP Open Invoice List

0
ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Due Dates Through: 03/07/2025

Vendor# Vendor Name

Class Pay Code

11824 ✓ THE CRESCENT

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 021325		02/19/202	02/13/202	03/07/202			2,244.00	0.00	0.00	2,244.00 ✓
✓ 021425	<i>ins. pmt. dep. into mmc acct. in error</i>	02/19/202	02/14/202	03/07/202			3,264.00	0.00	0.00	3,264.00 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
11824	THE CRESCENT	5,508.00	0.00	0.00	5,508.00

Grand Totals:	Gross	Discount	No-Pay	Net
	5,508.00	0.00	0.00	5,508.00

APPROVED ON

FEB 20 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FEB 20 2025

MEMORIAL MEDICAL CENTER

02/20/2025

AP Open Invoice List

0

12:21

CALHOUN COUNTY, TEXAS

Due Dates Through: 03/07/2025

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
✓ 021025		02/19/202	10/31/202	03/07/202			577.22	0.00	0.00	577.22 ✓
✓ 021225	INS amt over into mmc dot in error	02/19/202	02/12/202	03/07/202			12,124.84	0.00	0.00	12,124.84 12,124.84 ✓
✓ 021325A	"	02/19/202	02/13/202	03/07/202			17,161.68	0.00	0.00	17,161.68 ✓
✓ 021325	"	02/19/202	02/13/202	03/07/202			75,435.08	0.00	0.00	75,435.08 ✓
✓ 021425A	"	02/19/202	02/14/202	03/07/202			364.95	0.00	0.00	364.95 ✓
✓ 021425	"	02/19/202	02/14/202	03/07/202			49,940.65	0.00	0.00	49,940.65 ✓
✓ 021825	"	02/19/202	02/18/202	03/07/202			160.42	0.00	0.00	160.42 ✓
✓ 021825A	"	02/19/202	02/18/202	03/07/202			1,159.32	0.00	0.00	1,159.32 ✓

Vendor Totals: Number Name Gross Discount No-Pay Net
11836 GOLDENCREEK HEALTHCARE 156,924.16 0.00 0.00 156,924.16

Grand Totals: Gross 156,924.16 Discount 0.00 No-Pay 0.00 Net ~~156,924.16~~ 156,924.13

APPROVED ON

FEB 20 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

FEB 20 2025

MEMORIAL MEDICAL CENTER

02/20/2025
12:22

AP Open Invoice List

0
ap_open_invoice.template

Due Dates Through: 03/07/2025

CALHOUN COUNTY, TEXAS

Class Pay Code

Vendor# Vendor Name

13004 ✓ TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 021325		02/19/202	02/13/202	03/07/202			4,676.00	0.00	0.00	4,676.00 ✓
✓ 021425	<i>ins. pmt dep into mmc dat in error</i>	02/19/202	02/14/202	03/07/202			8,471.60	0.00	0.00	8,471.60 ✓
✓ 021425A		02/19/202	02/14/202	03/07/202			5,675.74	0.00	0.00	5,675.74 ✓
✓ 021825A		02/19/202	02/18/202	03/07/202			2,959.58	0.00	0.00	2,959.58 ✓
✓ 021825		02/19/202	02/18/202	03/07/202			20,131.92	0.00	0.00	20,131.92 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE	41,914.84	0.00	0.00	41,914.84

Grand Totals:	Gross	Discount	No-Pay	Net
APPROVED ON	41,914.84	0.00	0.00	41,914.84

FEB 20 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

02/20/2025
12:22

FEB 20 2025

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 03/07/2025

0

ap_open_invoice.template

Vendor# 12792 ✓ Vendor Name
CALHOUN COUNTY, TEXAS
BETHANY SENIOR LIVING

Class Pay Code

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
✓ 021425A		02/19/202	02/14/202	03/07/202			12,378.24	0.00	0.00	12,378.24 ✓
✓ 021425B	INS. pmt dep. into mmc opt. in error	02/19/202	02/14/202	03/07/202			5,630.55	0.00	0.00	5,630.55 ✓
✓ 021425		02/19/202	02/14/202	03/07/202			2,209.76	0.00	0.00	2,209.76 ✓
✓ 021325		02/19/202	02/21/203	03/07/202			6,064.01	0.00	0.00	6,064.01 ✓

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR LIVING	26,282.56	0.00	0.00	26,282.56

Grand Totals:	Gross	Discount	No-Pay	Net
	26,282.56	0.00	0.00	26,282.56

APPROVED ON

FEB 20 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Cantex Transfer
Prosperity Accounts
2/24/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACI Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Ashford Gardens		18,476.96	38,418.48	44,354.48		44,392.96	44,392.96
						Bank Balance	
						Variance	
						Leave in Balance	100.00

Routing Information for Ashford Gardens:

Ashford Health Care Center Ltd Co
IP Morgan Chase Bank

Broadmoor		61,877.95	61,777.95	16,002.56		Adjust Balance/Transfer Amt	44,291.96	
						Bank Balance	16,102.56	16,002.56
						Variance		
						Leave in Balance	100.00	

Cypress		205,113.21	205,013.21	233,970.38		Adjust Balance/Transfer Amt	16,002.56	
						Bank Balance	234,070.38	47,217.94
						Variance		
						Leave in Balance	100.00	

- Claim Payment owed to Tusculum 8,222.00
- Claim Payment owed to Tusculum 19,200.00
- Claim Payment owed to Tusculum 4,400.00
- Claim Payment owed to Tusculum 133,000.00
- Claim Payment owed to Tusculum 8,530.44
- Claim Payment owed to Tusculum 5,000.00
- Claim Payment owed to Tusculum 800.00
- Claim Payment owed to Tusculum 6,400.00
- Claim Payment owed to Tusculum 1,200.00

Fort Bend		27,916.39	27,816.39	15,778.59		Adjust Balance/Transfer Amt	47,217.94	
						Bank Balance	15,878.59	15,778.59
						Variance		
						Leave in Balance	100.00	

Southwest		47,871.35	47,634.71	78,133.25		Adjust Balance/Transfer Amt	15,778.59	
						Bank Balance	78,171.69	78,071.69
						Variance		
						Leave in Balance	100.00	

44,292.96 +
16,002.56 +
47,217.94 +
15,778.59 + Tusculum / Fort Bend / Broadmoor
78,071.69 +
201,363.74 ◊


APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Adjust Balance/Transfer Amt 78,071.69

TOTAL TRANSFERS 201,363.74

Approved: 
Steve Brock, CFO

2/24/2025

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 NIMC deposited to open account.

Arthur's Children

2/21/2025 MANAGEANDNET1718 MNS PMNT 0000000000009341
 2/20/2025 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000125
 2/14/2025 Enhanced Analysis Ch
 2/14/2025 MANAGEANDNET1718 MNS PMNT 0000000000009341
 2/14/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000210286
 2/13/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000265139
 2/12/2025 WIRE OUT ASHFORD HEALTH CARE CENTER LTD
 2/12/2025 NOVITAS SOLUTION HCLCLAIMPMT 675423 420000141

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
	5,280.00						5,280.00
	37,913.72						37,913.72
61.52							
	331.17						331.17
	20.11						20.11
	302.41						302.41
38,376.96							
	507.07						507.07
38,438.48	44,854.48						44,354.48

Brookwood

2/19/2025 Check 288
 2/14/2025 MANAGEANDNET1718 MNS PMNT 00000000000429341
 2/13/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III
 2/11/2025 AARP Supplementa HCLCLAIMPMT 746003411 124384

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
1,668.40							
	14,559.68						14,559.68
50,109.55							
	1,442.88						1,442.88
61,777.95	16,002.56						16,002.56

Devoted

2/21/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000027806028
 2/21/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000027806016
 2/21/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000027806024
 2/21/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000027806022
 2/21/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000027806020
 2/21/2025 HUMANA INS CO HCLCLAIMPMT 69035700 8300005796
 2/20/2025 AARP Supplementa HCLCLAIMPMT 746003411 124384
 2/20/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000021929045
 2/19/2025 Check 383
 2/18/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000250943
 2/18/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000022067227
 2/18/2025 DEVOTED HEALTH P HCLCLAIMPMT 21000022067225
 2/14/2025 Check 355
 2/14/2025 Deposit
 2/13/2025 NOVITAS SOLUTION HCLCLAIMPMT 676323 420000131
 2/12/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III
 2/12/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000226630
 2/11/2025 NOVITAS SOLUTION HCLCLAIMPMT 676323 420000100
 2/10/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000231721

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2, 3 & Lapse	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
	8,530.44						8,530.44
	133,000.00						133,000.00
	4,400.00						4,400.00
	19,200.00						19,200.00
	8,222.00						8,222.00
	11,396.00						11,396.00
	1,020.00						1,020.00
	800.00						800.00
1,370.05							
	6,858.74						6,858.74
	6,130.00						6,130.00
	5,000.00						5,000.00
12,100.00							
	2,604.00						2,604.00
	3,613.42						3,613.42
191,543.16							
	6,027.61						6,027.61
	12,747.92						12,747.92
	4,420.25						4,420.25
205,013.21	233,970.38						233,970.38

End 1300

2/19/2025 Check 286
 2/13/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III
 2/11/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000298718

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2, 3 & Lapse	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
1,538.33							
26,278.06							
	15,778.59						15,778.59
27,816.39	15,778.59						15,778.59

Novitas

2/19/2025 Check 1322
 2/19/2025 AARP Supplementa HCLCLAIMPMT 746003411 124384
 2/14/2025 Enhanced Analysis Ch
 2/12/2025 WIRE OUT CANTEX HEALTH CARE CENTERS III
 2/12/2025 MANAGEANDNET1718 MNS PMNT 0000000000248241
 2/12/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000226630
 2/11/2025 AARP Supplementa HCLCLAIMPMT 746003411 124384
 2/10/2025 HNB - ECHO HCLCLAIMPMT 746003411 440000231721
 2/10/2025 NOVITAS SOLUTION HCLCLAIMPMT 676323 420000145

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QJPP/Comp1	QJPP/Comp 2, 3 & Lapse	QJPP/Comp3	QJPP/Comp4&Lapse	QJPP TI	
1,512.52							
	5,100.00						5,100.00
61.50							
46,060.63							
	975.00						975.00
	19,449.10						19,449.10
	6,324.00						6,324.00
	4,410.45						4,410.45
	41,874.70						41,874.70
47,634.71	78,333.25						78,333.25

TOTALS

388,239.26	388,239.26						388,239.26
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Balances Overview

Account Name

*4357 MEMORIAL MEDICAL - OPERATING	\$2,504,613.94		\$2,657,487.89	\$2,504,613.94	\$2,271,987.00
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$44,392.96	✓	\$47,281.66	\$44,392.96	\$39,112.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$16,102.56	✓	\$21,446.22	\$16,102.56	\$16,102.56
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$234,070.38	✓	\$304,559.71	\$234,070.38	\$49,321.94
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$78,171.69	✓	\$178,150.84	\$78,171.69	\$78,171.69
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$15,878.59	✓	\$31,284.49	\$15,878.59	\$15,878.59
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$156,543.19		\$158,096.19	\$156,543.19	\$58,731.14
*4551 CAL CO INDIGENT HEALTHCARE	\$5,494.19		\$5,494.19	\$5,494.19	\$5,494.19
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00		\$100.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$2,310.77		\$2,310.77	\$2,310.77	\$2,310.77
*5506 MMC -NH BETHANY SENIOR LIVING	\$179,987.38		\$180,365.41	\$179,987.38	\$163,416.99
*3407 MMC -NH TUSCANY VILLAGE	\$592,044.04		\$612,928.69	\$592,044.04	\$544,263.25
*2998 MMC -MONEY MARKET FUND	\$263,786.57		\$263,786.57	\$263,786.57	\$263,786.57
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.73		\$39.73	\$39.73	\$39.73
Total Balance	\$4,093,535.99		\$4,463,332.36	\$4,093,535.99	\$3,508,717.38


Memorial Medical Center
 Nursing Home UPL
 Weekly Nexian Transfer
 Prosperity Accounts
 2/24/2025

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		148,337.55	148,078.58	156,284.22		156,543.19	149,688.54
						Bank Balance	156,543.19
						Variance	
						Leave in Balance	100.00
						QPP Y7 Adj 1	6,595.68
						January Interest	158.97

Routing Information for Golden Creek:
 Nexian 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.

Adjust Balance/Transfer Amt 149,688.54

Approved: 
 Steve Brock, CFO

2/24/2025

APPROVED ON
 FEB 24 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Golden State

2/21/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/21/2025 HNB - ECHO HCCLAIMPMT 746003411 440000228601
 2/21/2025 HNB - ECHO HCCLAIMPMT 746003411 440000228602
 2/21/2025 NOVITAS SOLUTION HCCLAIMPMT 676097 420000134
 2/20/2025 HNB - ECHO HCCLAIMPMT 746003411 440000285795
 2/20/2025 ACTHA ASOI HCCLAIMPMT 1588075964 51000011686
 2/19/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/19/2025 HNB - ECHO HCCLAIMPMT 746003411 440000232595
 2/18/2025 Centene Management ACH DOR705433514 1110000248
 2/18/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/14/2025 Deppol
 2/14/2025 GOLDENCREENHEALT MERC DEP 1220356 9100001069
 2/12/2025 WIRE OUT NEMION HEALTH u/b/a GOLDEN CREEK HC
 2/12/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/12/2025 GOLDENCREENHEALT MERC DEP 1220356 9100001306
 2/11/2025 GOLDENCREENHEALT MERC DEP 1220356 9100001392
 2/11/2025 GOLDENCREENHEALT MERC DEP 1220356 9100001392
 2/10/2025 TSYS/TRANSFIRST CR CD DEP 543684555876917 43
 2/10/2025 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	QIPPTI	
-	2,092.00	-	-	-	-	-	2,092.00
-	12,125.52	-	-	-	-	-	12,125.52
-	2,742.43	-	-	-	-	-	2,742.43
-	80,852.10	-	-	-	-	-	80,852.10
-	970.30	-	-	-	-	-	970.30
-	30.14	-	-	-	-	-	30.14
-	3,630.00	-	-	-	-	-	3,630.00
-	6,853.11	-	-	-	-	-	6,853.11
-	12,096.55	2,395.10	703.01	1,057.80	8,740.64	6,595.68	6,300.87
-	983.00	-	-	-	-	-	983.00
-	19,567.50	-	-	-	-	-	19,567.50
-	1,251.00	-	-	-	-	-	1,251.00
148,078.58	-	-	-	-	-	-	-
-	4,459.00	-	-	-	-	-	4,459.00
-	4,620.00	-	-	-	-	-	4,620.00
-	1,289.29	-	-	-	-	-	1,289.29
-	1,794.63	-	-	-	-	-	1,794.63
-	2.00	-	-	-	-	-	2.00
-	125.65	-	-	-	-	-	125.65
148,078.58	156,284.22	2,395.10	703.01	1,057.80	8,740.64	6,595.68	149,688.54

Balances Overview


Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$2,504,613.94	\$2,657,487.89	\$2,504,613.94	\$2,271,987.00
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$44,392.96	\$47,281.66	\$44,392.96	\$39,112.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$16,102.56	\$21,446.22	\$16,102.56	\$16,102.56
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$234,070.38	\$304,559.71	\$234,070.38	\$49,321.94
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$78,171.69	\$178,150.84	\$78,171.69	\$78,171.69
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$15,878.59	\$31,284.49	\$15,878.59	\$15,878.59
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$156,543.19	\$158,096.19	\$156,543.19	\$58,731.14
*4551 CAL CO INDIGENT HEALTHCARE	\$5,494.19	\$5,494.19	\$5,494.19	\$5,494.19
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00	\$100.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$2,310.77	\$2,310.77	\$2,310.77	\$2,310.77
*5506 MMC -NH BETHANY SENIOR LIVING	\$179,987.38	\$180,365.41	\$179,987.38	\$163,416.99
*3407 MMC -NH TUSCANY VILLAGE	\$592,044.04	\$612,928.69	\$592,044.04	\$544,263.25
*2998 MMC -MONEY MARKET FUND	\$263,786.57	\$263,786.57	\$263,786.57	\$263,786.57
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.73	\$39.73	\$39.73	\$39.73
Total Balance	\$4,093,535.99	\$4,463,332.36	\$4,093,535.99	\$3,508,717.38

Memorial Medical Center
 Nursing Home UPL
 Weekly HMG Transfer
 Prosperity Accounts
 2/24/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza		100.00					100.00	
						Bank Balance	100.00	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	-	
Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza		110.77		2,200.00			2,310.77	2,210.77
						Bank Balance	2,310.77	
						Variance	-	
						Leave in Balance	100.00	
						Adjust Balance/Transfer Amt	2,210.77	
TOTAL TRANSFERS							2,210.77	

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: 
 Steve Brock, CFO 2/24/2025

APPROVED ON
 FEB 24 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Gulf County Pizza-Pokery Pay
 No activity

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
✓	✓	-	-	-	-	-	-
		-	-	-	-	-	-

Gulf County Pizza-Pokery Pay
 2/13/2025 WPS-TMEP CONTRAC HCCLAIMPMT 2511147791 21000

Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
		QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
-	2,200.00	-	-	-	-	-	2,200.00
		-	-	-	-	-	-
		2,200.00	-	-	-	-	2,200.00
		-	-	-	-	-	-
		2,200.00	-	-	-	-	2,200.00

Balances Overview

Account Name


*4357 MEMORIAL MEDICAL - OPERATING	\$2,504,613.94	\$2,657,487.89	\$2,504,613.94	\$2,271,987.00
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$44,392.96	\$47,281.66	\$44,392.96	\$39,112.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$16,102.56	\$21,446.22	\$16,102.56	\$16,102.56
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$234,070.38	\$304,559.71	\$234,070.38	\$49,321.94
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$78,171.69	\$178,150.84	\$78,171.69	\$78,171.69
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$15,878.59	\$31,284.49	\$15,878.59	\$15,878.59
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$156,543.19	\$158,096.19	\$156,543.19	\$58,731.14
*4551 CAL CO INDIGENT HEALTHCARE	\$5,494.19	\$5,494.19	\$5,494.19	\$5,494.19
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00 ✓	\$100.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$2,310.77 ✓	\$2,310.77	\$2,310.77	\$2,310.77
*5506 MMC -NH BETHANY SENIOR LIVING	\$179,987.38	\$180,365.41	\$179,987.38	\$163,416.99
*3407 MMC -NH TUSCANY VILLAGE	\$592,044.04	\$612,928.69	\$592,044.04	\$544,263.25
*2998 MMC -MONEY MARKET FUND	\$263,786.57	\$263,786.57	\$263,786.57	\$263,786.57
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.73	\$39.73	\$39.73	\$39.73
Total Balance	\$4,093,535.99	\$4,463,332.36	\$4,093,535.99	\$3,508,717.38

Memorial Medical Center
 Nursing Home UPL
 Weekly Tuscan Transfer
 Prosperity Accounts
 2/24/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
TUSCANY		125,870.68	125,730.68	591,944.04			592,044.04	591,944.04
						Bank Balance Variance	592,044.04	
						Leave in Balance	100.00	

Adjust Balance/Transfer Amt 591,944.04

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:  Steve Brock, CFO 2/24/2025

APPROVED ON
 FEB 24 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

MMC PORTION

Insurance Value

2/21/2025 HNB - ECHO HCCLAIMPMT 746003411 440000228601
 2/21/2025 HNB - ECHO HCCLAIMPMT 746003411 440000227077
 2/21/2025 HNB - ECHO HCCLAIMPMT 746003411 440000228030
 2/19/2025 Check 1180
 2/19/2025 Deposit
 2/19/2025 HNB - ECHO HCCLAIMPMT 746003411 440000233528
 2/19/2025 HNB - ECHO HCCLAIMPMT 746003411 440000232223
 2/19/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000198
 2/18/2025 Deposit
 2/18/2025 HNB - ECHO HCCLAIMPMT 746003411 440000250948
 2/18/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000150
 2/14/2025 Deposit
 2/14/2025 Deposit
 2/14/2025 HNB - ECHO HCCLAIMPMT 746003411 440000209447
 2/14/2025 HNB - ECHO HCCLAIMPMT 746003411 440000210290
 2/12/2025 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE
 2/12/2025 HNB - ECHO HCCLAIMPMT 746003411 440000228115
 2/12/2025 HNB - ECHO HCCLAIMPMT 746003411 440000228110
 2/12/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000141
 2/10/2025 HNB - ECHO HCCLAIMPMT 746003411 440000232472

Transfer-Out

Transfer-In

QIPP/Comp 1	QIPP/Comp 2, 3 & Lapse	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI
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NH PORTION

-	9,404.06	-	-	-	9,404.06
-	14,619.11	-	-	-	14,619.11
-	23,757.62	-	-	-	23,757.62
2,967.82	-	-	-	-	-
-	11,652.50	-	-	-	11,652.50
-	5,557.17	-	-	-	5,557.17
-	3,369.36	-	-	-	3,369.36
-	275,909.56	-	-	-	275,909.56
-	41,607.00	-	-	-	41,607.00
-	95,316.69	-	-	-	95,316.69
-	11,016.01	-	-	-	11,016.01
-	28,930.83	-	-	-	28,930.83
-	12,100.00	-	-	-	12,100.00
-	2,741.23	-	-	-	2,741.23
-	3,959.60	-	-	-	3,959.60
122,762.86	-	-	-	-	-
-	6,057.39	-	-	-	6,057.39
-	5,557.17	-	-	-	5,557.17
-	30,984.68	-	-	-	30,984.68
-	9,404.06	-	-	-	9,404.06
125,730.68	591,844.04	-	-	-	591,944.04

Balances Overview

Account Name

*4357 MEMORIAL MEDICAL - OPERATING	\$2,504,613.94	\$2,657,487.89	\$2,504,613.94	\$2,271,987.00
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$44,392.96	\$47,281.66	\$44,392.96	\$39,112.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$16,102.56	\$21,446.22	\$16,102.56	\$16,102.56
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$234,070.38	\$304,559.71	\$234,070.38	\$49,321.94
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$78,171.69	\$178,150.84	\$78,171.69	\$78,171.69
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$15,878.59	\$31,284.49	\$15,878.59	\$15,878.59
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$156,543.19	\$158,096.19	\$156,543.19	\$58,731.14
*4551 CAL CO INDIGENT HEALTHCARE	\$5,494.19	\$5,494.19	\$5,494.19	\$5,494.19
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00	\$100.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$2,310.77	\$2,310.77	\$2,310.77	\$2,310.77
*5506 MMC -NH BETHANY SENIOR LIVING	\$179,987.38	\$180,365.41	\$179,987.38	\$163,416.99
*3407 MMC -NH TUSCANY VILLAGE	\$592,044.04	\$612,928.69	\$592,044.04	\$544,263.25
*2998 MMC -MONEY MARKET FUND	\$263,786.57	\$263,786.57	\$263,786.57	\$263,786.57
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.73	\$39.73	\$39.73	\$39.73
Total Balance	\$4,093,535.99	\$4,463,332.36	\$4,093,535.99	\$3,508,717.38

Memorial Medical Center
 Nursing Home UPL
 Weekly HSL Transfer
 Prosperity Accounts
 2/24/2025

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cts Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
MEMORIAL MEDICAL CENTER		52,570.92	52,502.12	179,718.56			179,987.38	175,004.02
						Bank Balance	179,987.38	
						Variance		
						Leave in Balance	100.00	
						QPP Y7 ADJ 1	4,714.56	
						January Interest	168.80	

Adjust Balance/Transfer Amt 175,004.02

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: 
 Steve Broch, CFO 2/24/2025

APPROVED ON
 FEB 24 2025
 BY COUNTY AUDITOR
 CALHOUN COUNTY, TEXAS

Account Balances

MMC PORTION

	Transfer Out	Transfer In	QPPP/Comp1	QPPP/Comp 2	QPPP/Comp3	QPPP/Comp4&Lapse	QPPP TI	NH PORTION
2/21/2025 TMHP HCLCLAIMPMT 415592101 2100024318381	-	123.00	-	-	-	-	-	123.00
2/21/2025 HNB - ECHO HCLCLAIMPMT 746003451 44000228601	-	16,162.86	-	-	-	-	-	16,162.86
2/21/2025 CENTENE CORP HCLCLAIMPMT 53101120980663	-	84.53	-	-	-	-	-	84.53
2/19/2025 HUMANA INS CO HCLCLAIMPMT 68724844 8300005007	-	11,267.13	-	-	-	-	-	11,267.13
2/19/2025 HNB - ECHO HCLCLAIMPMT 746002411 44000212535	-	3,221.31	-	-	-	-	-	3,221.31
2/19/2025 Centene Managemt ACH 0087654351A 1110000248	-	9,124.29	2,340.09	689.08	472.85	5,622.27	4,714.56	4,409.73
2/19/2025 HUMANA INS CO HCLCLAIMPMT 68686926 8300005819	-	889.76	-	-	-	-	-	889.76
2/19/2025 CENTENE CORP HCLCLAIMPMT 53101123550838	-	1,587.33	-	-	-	-	-	1,587.33
2/18/2025 Deposit	-	29,577.80	-	-	-	-	-	29,577.80
2/14/2025 NDC SWEEP FAC 02330 56009630006841 SWEEP FR	-	16,237.96	-	-	-	-	-	16,237.96
2/13/2025 Deposit	-	3,303.30	-	-	-	-	-	3,303.30
2/13/2025 Deposit	-	15,387.48	-	-	-	-	-	15,387.48
2/12/2025 Deposit	-	5,311.50	-	-	-	-	-	5,311.50
2/12/2025 WIRE OUT REG Leased OpCo LLC	52,302.12	-	-	-	-	-	-	-
2/12/2025 CENTENE CORP HCLCLAIMPMT 53101123082425	-	67,240.33	-	-	-	-	-	67,240.33
	52,302.12	179,718.58	2,340.09	689.08	472.85	5,622.27	4,714.56	175,004.02

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	\$2,504,613.94	\$2,657,487.89	\$2,504,613.94	\$2,271,987.00
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$44,392.96	\$47,281.66	\$44,392.96	\$39,112.96
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$16,102.56	\$21,446.22	\$16,102.56	\$16,102.56
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$234,070.38	\$304,559.71	\$234,070.38	\$49,321.94
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$78,171.69	\$178,150.84	\$78,171.69	\$78,171.69
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$15,878.59	\$31,284.49	\$15,878.59	\$15,878.59
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$156,543.19	\$158,096.19	\$156,543.19	\$58,731.14
*4551 CAL CO INDIGENT HEALTHCARE	\$5,494.19	\$5,494.19	\$5,494.19	\$5,494.19
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$100.00	\$100.00	\$100.00	\$100.00
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$2,310.77	\$2,310.77	\$2,310.77	\$2,310.77
*5506 MMC -NH BETHANY SENIOR LIVING	\$179,987.38 ✓	\$180,365.41	\$179,987.38	\$163,416.99
*3407 MMC -NH TUSCANY VILLAGE	\$592,044.04	\$612,928.69	\$592,044.04	\$544,263.25
*2998 MMC -MONEY MARKET FUND	\$263,786.57	\$263,786.57	\$263,786.57	\$263,786.57
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.73	\$39.73	\$39.73	\$39.73
Total Balance	\$4,093,535.99	\$4,463,332.36	\$4,093,535.99	\$3,508,717.38

Golden Creek

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E

Memorial Medical Center

Date Requested: 2/24/2025

APPROVED ON

FEB 24 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: \$ 6,595.68 ✓

G/L NUMBER: 10255040

EXPLANATION: QIPP Y7 Adj1

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY: ✓ 

Bethany

MEMORIAL MEDICAL CENTER CHECK REQUEST

P
A
Y
E
E

Memorial Medical Center

Date Requested: 2/24/2025

APPROVED ON

FEB 24 2025

BY COUNTY AUDITOR
CATHART COUNTY, TEXAS

FOR ACCT USE ONLY

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

AMOUNT: \$ 4,714.56 ✓

G/L NUMBER: 10255040

EXPLANATION: QIPP Y7 Adj1

REQUESTED BY: Caitlin Clevenger

AUTHORIZED BY:  ✓

QIPP PMTS TO MMC 2.10.25

QIPP Payment to MMC from Nursing Facilities Commissioner's Court 2/26/2025

NH Name	From Bank Acct #	Ck #	Payee	GL #	QIPP Y7 ADJ 1		TOTAL	Date
Ashford	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040		-	2/26/2025
Broadmoor	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040		-	2/26/2025
Crescent	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040		-	2/26/2025
Fort Bend	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040		-	2/26/2025
Solera	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040		-	2/26/2025
Golden Creek	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040	6,595.68	6,595.68	2/26/2025
Bethany	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040	4,714.56	4,714.56	2/26/2025
Tuscany	[REDACTED]	Prosperity	MMC - Prosperity Operating	[REDACTED]	10255040	-	-	2/26/2025
					Total:	11,310.24	11,310.24	

Note:

Approved:



Steve Brock, CFO

2/24/2025

Crescent

MEMORIAL MEDICAL CENTER CHECK REQUEST

P Tuscany Village Date Requested: 2/24/2025

A _____

Y _____

E _____

E _____

APPROVED ON

FEB 24 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: \$ 186,752.44 G/L NUMBER: 21400007

EXPLANATION: Claim pymnts owed from Crescent to Tuscany

REQUESTED BY: Caitlin Clevenger AUTHORIZED BY: [Signature]