March 5, 2025

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

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

THE FOLLOWING MEMBERS WERE PRESENT:

Vern Lyssy
David Hall
Ronald Best
Joel Behrens
Gary Reese
Anna Goodman

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:

By: Kaddie Smith

1. Call meeting to order.

Meeting was called order at 10am by Judge Vern Lyssy

2. Invocation.

(ABSENT)

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 voiced his concerns about the 9/11 conspiracies. Hope Kurtz suggested sheriff not video for the public in the event he needed to draw his gun.

Cindy Krause gave information on the passing of Connie Hunt and Community Day.

5. Approve February 26, 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. Allow the County Clerk to sign the Tyler Technologies Sales Quotation for professional services to upload images of our Official Public Records documents (Volumes 1-71, imaged by Kofile) into our Tyler SAAS program. Funds will be deducted from our Records Management Fund. (VLL)

RESULT: APPROVED [UNANIMOUS]
MOVER: Gary Reese, Commissioner Pct 4

SECONDER: Joel Behrens, Commissioner Pct 3.

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

 Consider and take necessary action for Tax Assessor-Collector to enter into an agreement with Certified Payments for Credit Card Processing and allow the County Judge sign all documents. (VLL)

RESULT: APPROVED [UNANIMOUS]
MOVER: David Hall, Commissioner Pct 1

SECONDER: Ronald Best, Commissioner Pct 2

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

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

RESULT: APPROVED [UNANIMOUS]

MOVER: Vern Lyssy, County Judge

SECONDER: David Hall, Commissioner Pct 1

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

 Consider and take necessary action to approve the Calhoun County Adult Detention Center to purchase a Kyocera TASKalfa 3554cl Copier, Serial #19X4716322, System #11741 from Great America Financial Services for the sum of \$2,507.00. (VLL)

Pass

10. Consider and take necessary action to authorize all four Road & Bridge precincts to apply for credit with Equipment Share. (GDR)

RESULT: APPROVED [UNANIMOUS]

Joel Behrens, Commissioner Pct 3 MOVER: **SECONDER:** Ronald Best, Commissioner Pct 2

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

11. Consider and take necessary action on amending County Personnel Policy, Sections 7.01.02, 7.03.01, 7.03.02, 7.05, 7.07 and 9.07.03. (VLL)

Clarri Atkinson explained the amendment.

Effective immediately.

RESULT:

APPROVED [UNANIMOUS] RESULT:

David Hall, Commissioner Pct 1 MOVER: Gary Reese, Commissioner Pct 4 SECONDER:

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

12. Consider and take necessary action to accept proposal from Lester Contracting, Inc. to dredge boat ramp and dock area at Bill Sanders Memorial Park utilizing GOMESA funds, not to exceed \$100,000, and order that this contract be exempted from the competitive bidding process as a professional service due to the limited number of available vendors in the region that possess the specialized equipment and expertise necessary to complete the project. (GDR)

APPROVED [UNANIMOUS] RESULT: Gary Reese, Commissioner Pct 4 MOVER:

SECONDER: Joel Behrens, Commissioner Pct 3

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

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

APPROVED [UNANIMOUS]

Gary Reese, Commissioner Pct 4 MOVER: Ronald Best, Commissioner Pct 2 SECONDER:

AYES: Judge Lyssy, Commissioner Hall, Best, Behrens, Reese 14. Consider and take necessary action on the Release of the Final Payment in the amount of \$66,569.20 to Con-Metal Contractors, Inc. for the Recycle Waste Transfer Station Project. (RB)

Scott Mason explained.

RESULT:

APPROVED [UNANIMOUS]

MOVER: SECONDER: Joel Behrens, Commissioner Pct 3 Ronald Best, Commissioner Pct 2

AYES:

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

15. 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 County ISD. (VLL)

RESULT:

APPROVED [UNANIMOUS]

MOVER:

David Hall, Commissioner Pct 1

SECONDER:

Ronald Best, Commissioner Pct 2

AYES:

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

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

RESULT:

APPROVED [UNANIMOUS]

MOVER: SECONDER: Gary Reese, Commissioner Pct 4 Ronald Best, Commissioner Pct 2

AYES:

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

17. Consider and take necessary action to remove the 2019 Chev Tahoe VIN 1GNLCDEC5KR21967 from the Sheriff Department's Inventory. This vehicle will be going to auction. (VLL)

RESULT:

APPROVED [UNANIMOUS]

MOVER: SECONDER: Ronald Best, Commissioner Pct 2 Joel Behrens, Commissioner Pct 3

AYES: Judge Ly

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

18. Consider and take necessary action to accept a donation of \$100.00 from Urban Surveying, Inc. (Terry Ruddick) for CC EMS Motivational Fund. (VLL)

RESULT: APPROVED [UNANIMOUS]
MOVER: Gary Reese, Commissioner Pct 4

SECONDER: Joel Behrens, Commissioner Pct 3

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

19. 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

20. 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

County 2025:

RESULT: APPROVED [UNANIMOUS]

MOVER: David Hall, Commissioner Pct 1

SECONDER: Ronald Best, Commissioner Pct 2

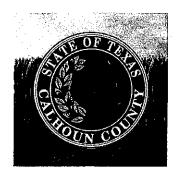
AYES: Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

Adjourned 10:30am



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 day of
for the <u>5</u> day of <u>MOPCN</u> 2025 Commissioners' Special Regular Session was submitted from the Calhoun County Judge's office to the Calhoun County Clerk's Office.
Debbee VickeRes Calhoun County Judge/Assistant



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

CALHOUN COUNTY COMMISSIONERS' COURT PACKET RECEIPT

·		
On	3/7/25	, 2025, the packet for the, 2025 Commissioners' Court Regular Session
was subn	nitted from the Ca	lhoun County Judge's office to the Calhoun County
Clerk's O	ffice.	;
		•
Calhoun (Deputy	County Clerk	

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

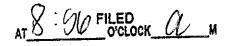
NOTICE OF MEETING

The Commissioners' Court of Calhoun County, Texas will meet on Wednesday, March 5, 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.
- Pledges of Allegiance.
- 4. General Discussion of Public Matters and Public Participation.
- 5. Approve February 26, 2025 Commissioners' Court Meeting Minutes. (VLL)
- Allow the County Clerk to sign the Tyler Technologies Sales Quotation for professional services to upload images of our Official Public Records documents (Volumes 1-71, imaged by Kofile) into our Tyler SAAS program. Funds will be deducted from our Records Management Fund. (VLL)
- Consider and take necessary action for Tax Assessor-Collector to enter into an agreement with Certified Payments for Credit Card Processing and allow the County Judge sign all documents. (VLL)
- 8. Receive the record of retirement letter from Anna Kobela, District Clerk, effective March 31, 2025, and take appropriate action. (VLL)
- Consider and take necessary action to approve the Calhoun County Adult Detention Center to purchase a Kyocera TASKalfa 3554cl Copier, Serial #19X4716322, System #11741 from Great America Financial Services for the sum of \$2,507.00. (VLL)
- 10. Consider and take necessary action to authorize all four Road & Bridge precincts to apply for credit with Equipment Share. (GDR)



FEB 28 2025

COUNTY CLEAR, CALHOUN COUNTY, TEXAS
DEPUTY: KULLUS SMUTY

- 11. Consider and take necessary action on amending County Personnel Policy, Sections 7.01.02, 7.03.01, 7.03.02, 7.05, 7.07 and 9.07.03. (VLL)
- 12. Consider and take necessary action to accept proposal from Lester Contracting, Inc. to dredge boat ramp and dock area at Bill Sanders Memorial Park utilizing GOMESA funds, not to exceed \$100,000, and order that this contract be exempted from the competitive bidding process as a professional service due to the limited number of available vendors in the region that possess the specialized equipment and expertise necessary to complete the project. (GDR)
- 13. Consider and take necessary action to accept revised Contract Agreement and Rules & Regulations for the Port O'Connor Community Center. (GDR)
- 14. Consider and take necessary action on the Release of the Final Payment in the amount of \$66,569.20 to Con-Metal Contractors, Inc. for the Recycle Waste Transfer Station Project. (RB)
- 15. 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 County ISD. (VLL)
- 16. Consider and take necessary action to accept donation of additions and renovations to the Port O'Connor Community Center and Pavilion. (GDR)
- 17. Consider and take necessary action to remove the 2019 Chev Tahoe VIN 1GNLCDEC5KR21967 from the Sheriff Department's Inventory. This vehicle will be going to auction. (VLL)
- 18. Consider and take necessary action to accept a donation of \$100.00 from Urban Surveying, Inc. (Terry Ruddick) for CC EMS Motivational Fund. (VLL)
- 19. Consider and take necessary action on budget adjustments. (VLL)
- 20. Approval of bills and payroll. (VLL)

Vern Lyssy, County Judge Calhoun County, Texas

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

04

March 5, 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

General Discussion of Public Matters and Public Participation.

Gerhardt (Gary) Jackson voiced his concerns about the 9/11 conspiracies. Hope Kurtz suggested sheriff not video for the public in the event he needed to draw his gun.

Cindy Krause gave information on the passing of Connie Hunt and Community Day.

#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.

<u>Instructions:</u> Fill out all appropriate blanks. Please print or write legibly.	
NAME: Gary Jackson	
ADDRESS: 2205 Garry Pt. Louiser	
TELEPHONE:	
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 telephonumber of the group or organization:	ne
Evidence	
Which agenda item (or items) do you wish to address?	
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	<u>the</u>
best of my knowledge and ability.	
Signature: Jany Jany	

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: Cindy Krowse
ADDRESS: 622 CR 311 PL TX 77979
TELEPHONE: 361 920.5467
PLACE OF EMPLOYMENT:
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?
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: Cindy Willian

05

5. Approve February 26, 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



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 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.

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 26, 2025

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT



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

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

 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 3500cifx 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

 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.

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

 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
AVES: Judge Lyesy, Commissioner Hall Body Bobso

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, Behrensy Reese

Indigent Healthcare:

RESULT: APPROVED [UNANIMOUS]
MOVER: David Hall, Commissioner Pct 1
SECONDER: Gary Reese, Commissioner Pct 4

AYES: Judge Lyssy, Commissioner Half, 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

06

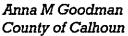
 Allow the County Clerk to sign the Tyler Technologies Sales Quotation for professional services to upload images of our Official Public Records documents (Volumes 1-71, imaged by Kofile) into our Tyler SAAS program. Funds will be deducted from our Records Management Fund. (VLL)

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

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



County Clerk





February 20, 2025

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

RE: AGENDA ITEM - Sales Quote from Tyler Technologies for Professional Services

Dear Judge Lyssy:

Please place the following item on the Commissioners' Court Agenda for March 5, 2025.

- Allow the County Clerk to sign the Tyler Technologies Sales Quotation for professional services to upload images of our Official Public Records documents (Volumes 1-71, imaged by Kofile) into our Tyler SAAS program.
- Funds will be deducted from our Records Management Fund

Sincerely,

Anna M Goodman County Clerk

na M. Boodnan



Quoted By: Quote Expiration: Quote Name: Christine Jandreau 7/5/25 Calhoun County, TX. Pilot Upload Services

Sales Quotation For:

Calhoun County 201 W Austin St Ste 10 Port Lavaca, TX 77979-4250 Phone: +1 (361) 553-4600

Professional Services

Description		Maintenance	
Records Management			
Image Upload Conversion Services – Pilot	(App.) The state of the state o		
	Total Hours	1	
	TOTAL	\$ 2,500	\$0

Summary	One Time Fees	Recurring Fees
Total Tyler Software	\$0	\$0
Total Annual	\$0	\$0
Total Tyler Services Total Third-Party Hardware, Software,	\$ 2,500	\$ 0
Services	\$ O	\$0
Summary Total	\$ 2,500	\$0
Contract Total	\$ 2,500	

Unless otherwise indicated in the contract or amendment thereto, pricing for optional items will be held For six (6) months from the Quote date or the Effective Date of the Contract, whichever is later.

Customer Approval:

Other M / Sooken Date:

3/5/25

Print Name:

Anna M Groodman P.O.#

Comments

Client agrees that items in this sales quotation are, upon Client's signature or approval of same, hereby added to the existing agreement ("Agreement") between the parties and subject to its terms. Additionally, payment for said items, as applicable but subject to any listed assumptions herein, shall conform to the following terms:

2025-515020-N3C9D0

CONFIDENTIAL

Page 1

- License fees for Tyler and third party software are invoiced upon the earlier of (i) deliver of the license key or (ii) when Tyler makes such software available for download by the Client;
- · Fees for hardware are invoiced upon delivery;
- Fees for year one of hardware maintenance are invoiced upon delivery of the hardware;
- Annual Maintenance and Support fees, SaaS fees, Hosting fees, and Subscription fees are first payable when
 Tyler makes the software available for download by the Client (for Maintenance) or on the first day of the
 month following the date this quotation was signed (for SaaS, Hosting, and Subscription), and any such fees are
 prorated to align with the applicable term under the Agreement, with renewals invoiced annually thereafter in
 accord with the Agreement.
- Fees for services included in this sales quotation shall be invoiced as indicated below.
 - o Implementation and other professional services fees shall be invoiced as delivered.
 - o Fixed-fee Business Process Consulting services shall be invoiced 50% upon delivery of the Best Practice Recommendations, by module, and 50% upon delivery of custom desktop procedures, by module.
 - o Fixed-fee conversions are invoiced 50% upon initial delivery of the converted data, by conversion option, and 50% upon Client acceptance to load the converted data into Live/Production environment, by conversion option. Where conversions are quoted as estimated, Tyler will invoice Client the actual services delivered on a time and materials basis.
 - o Except as otherwise provided, other fixed price services are invoiced upon complete delivery of the service. For the avoidance of doubt, where "Project Planning Services" are provided, payment shall be invoiced upon delivery of the Implementation Planning document. Dedicated Project Management services, if any, will be invoiced monthly in arrears, beginning on the first day of the month immediately following initiation of project planning.
 - o If Client has purchased any change management services, those services will be invoiced in accordance with the Agreement.
 - o Notwithstanding anything to the contrary stated above, the following payment terms shall apply to services fees specifically for migrations: Tyler will invoice Client 50% of any Migration Fees listed above upon Client approval of the product suite migration schedule. The remaining 50%, by line item, will be billed upon the golive of the applicable product suite. Tyler will invoice Client for any Project Management Fees listed above upon the go-live of the first product suite.
- Expenses associated with onsite services are invoiced as incurred.
- Travel Expenses will be billed as incurred according to Tyler's standard business travel policy.

2025-515020-N3C9D0 CONFIDENTIAL Page 2

Calhoun County, TX. - Pilot Upload Services:

Tyler will upload images and indexes as provided in a format that meets Tyler's data and imaging requirements, previously provided. Images/data must be provided on an external hard drive that is attached by USB cable to the County application server with Tyler having full administrative rights to application server, database server and tape backup unit.

Pilot Upload: All data and images must be in Calhoun County's possession prior to services being scheduled. Kofile is the imaging vendor. Project consists of Official Records Volumes 1 - 71.

Scope of Work:

- 1) Kofile will provide a USB drive to Calhoun County with all images and data for upload into Records Management.
- 2) Tyler services team will reach out to County for access to the hard drive.
- 3) Tyler services team will upload a sample of data/images.
- 4) Calhoun County will review pilot/samples for quality assurance and accuracy and will report any issues to Tyler Technologies.
- 5) Any additional vendor consultation services, or new uploads for corrections would be billable on a time and materials basis.
- 6) Calhoun County is a SaaS/Hosted client.

Please Note: Charges are for one - one time upload only (Pilot) and are a fixed fee. Additional charges will apply for Bulk upload once Pilot upload results are reviewed and approved by County. A quote will be provided under separate cover for Bulk upload. If needed, additional charges would apply for each additional upload, on a time and materials basis, and terms that designate a need for an additional upload include vendor error in format, or client error in review of images to ensure quality. If excessive time for upload is required due to large file size, or excessive iteration with client vendor, additional charges could apply on a time and materials basis.

07

7. Consider and take necessary action for Tax Assessor-Collector to enter into an agreement with Certified Payments for Credit Card Processing and allow the County Judge sign all documents. (VLL)

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

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



SERVICE PROVIDER AGREEMENT CREDIT CARD PROCESSING

THIS SERVICE PROVIDER AGREEMENT ("Agreement") is made and entered into by and between Certified Payments, a division of Accelerated Card Company, LLC, with offices at 100 Throckmorton Street, Suite 200, Fort Worth, TX 76102 ("Certified") and Calhoun County, TX 211 S. Ann St , Port Lavaca, TX 77079 ("Agency").

RECITALS

WHEREAS, Agency desires to accept payments from individuals or entities ("Customers") by Credit Card, pin-less Debit Card, and pin-entry Debit Card (if Agency is utilizing debit-capable equipment) ("Agency Payments").

WHEREAS, Certified is a third party service provider that performs such Services on behalf of Agency ("Services").

WHEREAS, Agency desires to engage Certified to act on behalf of Agency in providing the Services and Certified desires to provide the Services subject to the terms and conditions set forth in this Agreement.

NOW THEREFORE, in consideration of the foregoing, and the mutual promises set forth below, the parties hereto agree as follows:

- 1. DEFINITIONS. As used herein, the following terms have the meanings set forth below:
- "Agency Bank" is the Depository Financial Institution where the Agency Bank Account is maintained and receives deposits from Agency's Customers or credits from the Federal Reserve Bank on behalf of the Agency.
- "Agency Bank Account" is the account Agency has established with Agency Bank for credit card and debit card deposits from Agency's Customers as provided under the terms of this agreement, and identified on Page 3 of the Bureau Credit Card Account Setup Form, Bureau Banking Information, which is attached hereto.
- "Bureau Code" is the unique seven (7) digit Agency identifier assigned to Agency by Certified.
- "Card Issuing Bank" is a financial institution that issues cards and contracts with its cardholders for billing and payment of transactions.
- "Card Brands" are membership corporations of financial institutions that issue cards for payments of goods and services, provide card products and establish the rules and regulations governing member participation in card programs.
- "Card Holder" is an authorized user of a payment card issued by a Card Issuing Bank.
- "Chargeback" is a transaction whereby the Card Issuing Bank reverses the Agency's Payment.
- "\$elivide Fee" means the fee charged by Certified to Customers for the convenience of using the Services in making an Agency Payment.
- Credit Card" refers to a pin-less debit card or credit card issued to a Customer for payment of goods and services.
- Customer" means both consumer and corporate, individual or company that purchases or uses the Services.
- Debit Card" refers to a pin-entry debit card issued to a customer for payment of goods and services.
- "Fight End Processor" is an authorization service through which Card Issuing Banks can approve or decline individual card transactions.
- "IVH" means Integrated Voice Response system.
- "Processing Facility" refers to the appropriate credit or debit network to which Certified transmits transactions.
- 2. CERTIFIED'S OBLIGATIONS. Certified shall provide the Services as follows:
- A. Certified will provide Customers with the opportunity to make Agency Payments by Credit Card, pin-less debit card, and pin-entry debit card (if Agency is utilizing debit-capable equipment). These Agency Payments may be made through Certified's website, the Agency's website, through an IVR system, by contacting the Agency directly by telephone, or by other methods that may be offered by Certified from time to time.
- B. Certified shall begin providing the Services to Customers on a date mutually agreed upon by Certified and Agency.
- C. Certified shall collect and transmit Agency Payments from Customers using MasterCard, Visa, Discover, American Express, and the Debit Card Networks.
- D. Certified may charge each Customer a Service Fee for each Agency Payment processed. The Service Fee will be collected in addition to the corresponding Agency Payment. Exhibit A attached hereto details the Schedule of Service Fees that Certified may charge to Agency's Customers. Certified, in its sole discretion may charge Customers a minimum Service Fee for each payment and may change the amount of the Service Fee upon thirty (30) days' advance written notice to Agency. Certified will cause all funds resulting from Agency Payments to be transmitted to Agency's Bank Account; Certified shall retain all Service Fees collected by it hereunder.
- E. Except for the fees outlined in Exhibit A, Certified shall not charge Agency a fee in consideration for Certified's provision of the Services to Customers as

provided for in this Agreement; any fees payable by Agency in connection therewith will be mutually agreed upon by Certified and Agency.

- F. Certified will notify each Customer of the dollar amount of the payment and the corresponding Service Fee to be charged to the Customer and obtain Customer's approval (electronically or otherwise) of such charges prior to initiating any charges to the Customer's Credit Card or Debit Card.
- G. Certified will provide each Customer with electronic confirmation of the Agency Payment and the corresponding Service Fee.
- H. Certified will electronically collect and transmit all payment information to the appropriate Processing Facility in the most time critical manner that each facility can accept.
- i. Certified will provide Agency with online access to Agency payment data and reports summarizing the use of the Services by Agency's Customers. Agency will have the ability to import such payment data utilizing Microsoft Excel, Microsoft Access, a comma-delimited file ("CSV") or XML file. Access to Agency payment data and reports will be available 24/7.
- J. Certified will retain all logs and data for such period of time as required by applicable law and the regulations of the Card Brands and Debit Card Networks.
- K. Certified will accept American Express Card on behalf of Agency. The Discount associated with such Charges on behalf of Agency to Certified shall be paid to American Express by Certified. Payments for charges submitted on behalf of Agency shall be paid directly to Agency.
- L. Prior to initiating any refunds to a Customer's Credit Card or Debit Card, Certified will attempt to obtain permission, either orally or in writing, from the Agency's authorized representative. Unless Agency receives written authorization from Certified to the contrary, Agency may not issue refunds to the Customer by check. Certified will process such refunds in the form of a credit to the Customer's Credit Card or Debit Card that was initially charged and, in Certified's sole discretion, may refund the corresponding Service Fee payment. Certified or its authorized agent will debit the Agency's Bank Account for the amount of the Agency Payment refund.
- M. Under the rules of the Card Brands, Customer's Card Issuing Bank gives Certified a limited amount of time to dispute a Chargeback or issue a refund. Certified will provide reports to Agency of any Chargebacks either prior to or on the day the Chargeback is posted to Agency's bank account. American Express will deduct any Chargebacks from amounts owed to Agency for Charges. In the event a refund must be issued, Certified will contact Agency and Agency will account for the amount of the Agency Payment at any time during the Chargeback process. In the event a Service Fee is disputed by the cardholder, both the Agency payment and the service fee payment will be refunded to the cardholder. In no case shall a Service Fee be charged back to Certified without the Chargeback.

American Express will send requests regarding a claim, complaint, or question related to a Disputed Charge to Certified. Certified will retrieve all requested information relating to the Disputed Charge and provide such to American Express. In the event a Convenience Fee is disputed by the cardholder, the payment of that Charge will also be treated as contested. If the Disputed Charge results in a reversal of the Charge, both payment of that Charge and the Convenience Fee will be charged back by American Express. Agency payments will be charged back to Agency, Convenience Fees will be charged back to Certified Payments. In no case shall a Convenience Fee be charged back to Certified Payments without the related Charge also being charged back to Agency.

Agency will reimburse Certified for all chargeback actions or refunds of any kind, including but not limited to those resulting from overpayments, duplicate or misapplied payments or unauthorized charges. In the case of either a refund or Chargeback, where Certified is unable to collect amounts owed by Agency to Certified, Agency agrees to make amounts owed available to Certified in immediately available funds.

N. Certified shall implement policies and procedures to maintain the security of cardholder data that Certified possesses, stores, processes or transmits on behalf of Agency, or to the extent that Certified could impact the security of Agency's cardholder data environment, in accordance with applicable payment card industry security standard (PCI-DSS) requirements.

3. AGENCY'S OBLIGATIONS.

A. In addition to this Agreement, Agency hereby agrees to the Merchant Processing Terms & Conditions found at www.CertifiedPayments.net/tc, as they may be revised from time to time, and further agrees to enter into any and all applicable agreements that are required to perform the Services hereunder, including without limitation any agreements required by Visa, MasterCard, Discover, American Express, the Debit Card Networks, or the applicable sponsor bank. Such agrees to fully comply with the rules, regulations and operating procedures of the various Card Brands, including without limitation with respect to the use of specific Card logos and marks.

- B. Prior to Certified's commencement of the Services, Agency will complete in full and sign all necessary paperwork that Certified puts forth.
- C. Certified is required to fully adhere to and operate according to the rules, regulations and operating procedures of the Card Brands, the Debit Card Networks, the Bank and any rules and regulations provided by American Express and Discover. Agency agrees to immediately comply with any requests by Certified are termination of this Agreement.
- D. Certified will provide customer support to Agency's customers. In order to provide said support services Agency will include on any statements or materials provided to Agency's customers, Certified information such as Web Address, IVR Telephone Number (if applicable), assigned Bureau Code, Customer Service Phone Number or other information.
- E. Agency will not require, as a condition to making an Agency Payment, that a Cardholder agrees in any way to waive such Cardholder's right to dispute the transaction with the Card Issuing Bank for legitimate reasons.
- F. Agency agrees that Certified will be the exclusive provider of fee-based electronic payment services and that Agency may not procure similar services from any other party during the Term of this Agreement.

4. ADDITIONAL MATTERS

Service Provider Agreement, continued

- A. Confidentiality. Agency will not disclose to any third party or use for any purpose inconsistent with this Agreement, any confidential or proprietary, non-public information it obtains during the term of this Agreement regarding Certified's business, operations, financial condition, technology, systems, know-how, products, services, suppliers, customers, marketing data, plans and models and personnel. Certified will not disclose to any third party or use for any purpose inconsistent with this Agreement any confidential Customer information it receives in connection with its performance of the Services, except that Certified may use personal information provided by Customers to establish and maintain individual user accounts requested to be established by such Customers with Certified.
- B. Relationship of Parties. The performance by Certified of its duties and obligations under this Agreement shall be that of an independent contractor and nothing contained in this Agreement shall be deemed to constitute a joint venture or partnership between Certified and Agency.
- C. Capacity to Contract. Each party hereby certifies that the person executing this Agreement on its behalf is fully authorized with complete legal capacity and approval to do so.
- D. Intellectual Property. In order that Agency may promote the Services and Certified's role in providing the Services, Certified grants to Agency a revocable, non-exclusive, royalty-free license to use Certified's logo and other service marks (the "Certified Marks") for such purpose only. Agency does not have any right, title, license or interest, express or implied, in and to any object code, software, hardware, trademark, service mark, trade name, trade dress, formula, system, know-how, telephone number, telephone line, domain name, URL, copyrighted image, text, script (including, without limitation, any script used by Certified on Certified's website) or other intellectual property right of Certified. All Marks, the System and all rights therein (other than rights expressly granted in this Agreement) and goodwill pertaining thereto belong exclusively to Certified.
- E. Force Majeure. Certified is released from liability hereunder for failure to perform any of the obligations herein where such failure to perform occurs by reason of any acts of any other party or third party or any acts of God, fire, flood, storm, earthquake, tidal wave, computer or communications failure, software failure, network problem, sabotage, war, military operation, national emergency, mechanical or electrical breakdown, civil commotion, or the order, requisition, request, or recommendation of any governmental agency or acting governmental authority, Certified's compliance therewith or government proration, regulation, or priority, or any other cause beyond Certified's reasonable control whether similar or dissimilar to such causes.
- F. Remedies. Agency's sole remedy in the event of Certified's failure to perform the Services as set forth herein shall be to terminate the arrangement contemplated by this Agreement.
- G. Notice. Any notice to be given hereunder shall be in writing and may be effected by personal delivery, in writing or by registered or certified mail, return receipt requested, addressed to the proper party, at the following address:

AGENCY:

Calhoun County, TX

211 S. Ann St

Port Lavaca, TX 77079

CERTIFIED PAYMENTS: Certified Payments, a division of Accelerated Card Company, LLC

Attn: General Counsel

100 Throckmorton Street, Suite 200

Fort Worth, TX 76102

notices@certifiedpayments.net

- H. American Express. Agency warrants that it does not hold third party beneficiary rights to any agreements between Payment Service Provider and American Express and at no time will attempt to enforce any such agreements against American Express.
- 1. Agency ACKNOWLEDGES AND AGREES THAT IN NO EVENT SHALL AMERICAN EXPRESS, ITS AFFILIATES, AGENTS, SUCCESSORS, OR ASSIGNS BE LIABLE TO AGENCY FOR ANY DAMAGES, LOSSES, OR COSTS INCURRED, INCLUDING INCIDENTAL, INDIRECT, SPECULATIVE, CONSEQUENTIAL, SPECIAL, PUNITIVE, OR EXEMPLARY DAMAGES OF ANY KIND (WHETHER BASED ON CONTRACT, TORT, INCLUDING NEGLIGENCE, STRICT LIABILITY, FRAUD, OR OTHERWISE, OR STATUTES, REGULATIONS, OR ANY OTHER THEORY), ARISING OUT OF OR IN CONNECTION WITH THE AGREEMENT.I.
- J. Limitation of Liability. In no event will Certified or American Express be responsible for damages arising from delays or problems caused by any telecommuni-cations carrier or banking system or Internet Services Provider ("ISP"); provided, however, that the foregoing shall have no effect upon American Express' rights of Full Recourse, as used in the Agreement. Except as specifically indicated above, all terms and conditions of the Agreement shall remain in full force and effect.
- K. Term of Arrangement, Unless sooner terminated in accordance with the provisions of this Agreement, this Agreement shall be in effect for three (3) years from the Effective Date of this Agreement ("Term"). Thereafter, the Term will automatically extend for consecutive one (1) year periods, unless either party provides the other with written notice of termination at least sixty (60) days prior to the end of the then-current term.
- L. Termination. Certified's performance of this Agreement is subject to the rules and regulations of the Card Brands, the Debit Card Networks, federal, state and local laws or regulations applicable to the Services. Receipt of a written directive from banking regulators, a member bank, Visa, MasterCard or other credit or debit card company or brand to terminate shall be immediate upon such event.
- M. Governing Law. In the event a dispute arises between any of the parties to this agreement, all parties hereby agree that such a dispute shall be governed by the laws of the State of Texas
- N. Assignment. This Agreement may not be assigned by either party without the prior written consent of the other party, which consent shall not be unreasonably withheld; provided, however, the rights and obligations of Certified under this Agreement may be provided or fulfilled by, or assigned to, any parent, subsidiary, affiliate, successor entity (by stock or asset purchase or merger) or subcontractor of Certified.

Service Provider Agreement, continued

- O. Entire Agreement; Modifications. This Agreement, together with the exhibits and schedules hereto constitutes the entire agreement between Certified and Agency with respect to the subject matter hereof. There are no restrictions, promises, warranties, covenants or undertakings other than those expressly set forth herein and therein. This Agreement supersedes all prior negotiations, agreements, and undertakings between the parties with respect to such matter. This Agreement, including the exhibits and schedules hereto may be modified or amended only by an instrument in writing executed by the parties or their permitted assignees.
- P. Severability. If any provision of this Agreement is held by a court or arbitrator of competent jurisdiction to be contrary to law, then this Agreement shall be deemed modified to delete any such provision, and the remaining provisions of this Agreement will remain in full force and effect.
- Q. Conflicts. In the event of a conflict between the provisions explicitly stated in this Agreement and those stated in any document referenced herein, the terms explicitly stated in this Agreement shall control.
- R. Authority to Sign. Each party represents that the individual who signs this Agreement has authority to do so and to bind it to the terms and conditions of this Agreement. Each party further represents that they are authorized to sign and enter into this Agreement on behalf of their subsidiaries, affiliates and licensees

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s nave executed and d	elivered this Agreement on	<u> </u>	, 2023	_ (the "Effective Date").
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tv TX				
2/				
		Agency Signatur	e - Second Si	gnature (if required)
of Count	1Judge			····
		Printed Name at	nd Title	* * * * * * * * * * * * * * * * * * * *
025		.: <u>.</u>		
•		Date		
				4.
1	ty, TX	ty, TX	Agency Signatur	Agency Signature - Second Signat

Bv:

Authorized Representative

Printed Name and Title

2/27/25 Date

Sherri Vest, Operations Director

EXHIBIT A SCHEDULE OF FEES

Confidential

This Exhibit A to the Service Provider Agreement between Certified and Agency provides as follows:

Schedule of Service Fees.	

Certified and Agency agree to the following provisions:

Α.	2.30 % or a minimum of \$2.00 when Customer uses a Credit or Debit Card.	hall be the agreed upon Service Fee that the Agency agree	s to allow Certified to charge to Customers for tax pa	ayments
В.	2.30 % or a minimum of \$2.00 when Customer uses a Credit or Debit Card.	all be the agreed upon Service Fee that the Agency agrees	to allow Certified to charge to Customers for non-tage	x payments
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The	tees charged are subject to change by Certified.	· ·		1 4
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2	2, Schedule of Equipment Cost.			<u> </u>

POS Terminal / Equipment	Price	Quantity	Subtotal
CertPay LANE 3000 USB	\$380.00		\$
CertPay Lane 3000 ETH	\$425.00		\$
CertPay Desk 3500 ETH	\$215.00		\$
CertPay Desk 3500 WIFI	\$285.00		\$
Implementation	\$500.00		\$
Other:	\$		\$
	Equipment Total		\$

AGREEMENT (IF NO PAYMENT TYPE IS SELECTED, ACH PAYMENT	T WILL BE USED)	
□ ACH: Agency hereby authorizes Certified or its designee to autome from Agency's Bank Account. The authority is to remain in full force received written notification from Agency of its termination in such a not honored by the Agency's Bank Account for any reason, the Age	e and effect until all obligations of Agency have been performed an manner as to afford Certified or its designee reasonable opportun	nd paid in full or Certified or its designee has ity to act on it. In the case that any ACH's are
☐ Check #:		
(ONLY MAKE CHECKS PAYABLE TO CERTIFIED PAYMENTS)		
AGENCY'S ACCEPTANCE:		
AGENCY NAME: Calhoun County, TX	•	
By: Agency Signature	3 -5-2025	
Vern Lyssy County Judge		
Printed Name and Title		
CERTIFIED'S ACCEPTANCE: ACCELERATED CARD COMPANY, LLC d/b/a CERTIFIED PAYMENT	r s	
Sherri Vest	2/27/25	

ACC CP EX A 08.01.22

Authorized Representative

Printed Name and Title

Sherri Vest, Operations Director

08

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

RESULT: APPROVED [UNANIMOUS]

MOVER: Vern Lyssy, County Judge

SECONDER: David Hall, Commissioner Pct 1

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

February 18, 2025

Honorable Stephen Williams Judge of the 135th Judicial District Court

Dear Judge Williams,

Please accept this letter of resignation from my position as District Clerk of Calhoun County, Texas. My last day of work will be March 31, 2025.

My sincere gratitude for the opportunities and experiences I have had during my service to the county as clerk of the district courts. I am especially grateful for the friendships developed between myself and my colleagues. I will miss everyone very much.

Sincerely,

Anna Kabela

Calhoun County District Clerk

anna Kabela

Cc: Calhoun County Commissioners' Court County Chairman Russell Cain, Republican Party of Texas # 09

-M65

 Consider and take necessary action to approve the Calhoun County Adult Detention Center to purchase a Kyocera TASKalfa 3554cl Copier, Serial #19X4716322, System #11741 from Great America Financial Services for the sum of \$2,507.00. (VLL)

Pass



COUNTY OF CALHOUN SHERIFF BOBBIE VICKERY

211 SOUTH ANN STREET PORT LAVACA, TEXAS 77979

Committed to Community Needs

February 24, 2025

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

RE: AGENDA ITEM

Dear Judge Lyssy,

Please place the following item on the Commissioner's Court Agenda for March 5, 2025.

Consider and take action to approve the purchase of a Kyocera TASKalfa 3554cl Copier, Serial #19X4716322, System #11741 purchased from Great America Financial Services for the sum of \$2,507.00.

Rachel Martinez

CCADC - Captain

Designated Immigration Officer 287.(g)

361-553-4481 (O)

361-553-4480 (F)



2751-180-61310

GreatAmerica Financial Svcs. PO Box 660831 Dallas, TX 75266-0831 **Remittance Section**

135

Invoice Number: Agreement Number: Invoice Print Date: Due Date:

Total Due:

38450344 003-3102660-000 01/31/2025

02/23/2025 \$2,507.00

FORWARDING SERVICE REQUESTED

See reverse side for change of address

Use enclosed envelope and make check payable to:

ATTN: ANNA KABELA
CALHOUN COUNTY DETENTION
302 W LIVE OAK ST
PORT LAVACA TX 77979-4234

GreatAmerica Financial Svcs. PO Box 660831 Dallas, TX 75266-0831

դեմել Մերիայան անական անկիրան անկիր հերանի հայարան անական հերանի հերան հերանակին հերա

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Keep lower portion for your records - Please return upper portion with your payment



GreatAmerica Financial Svcs. PO Box 660831 Dallas, TX 75266-0831 Invoice Number: Due Date: Total Due:

38450344 02/23/2025 \$2,507.00

Important Messages

We appreciate your business!

We are glad you chose GreatAmerica Financial Services Corporation. Please remove the remittance portion of this invoice and include it with your payment.

Invoice Detail

Agreement 002 2407880 000, K			
Agreement 003-3102660-000: Kyocera TASKalfa 3554ci Copier	Amount	Tax	Total
1 Standard Payment	2,382.00	0.00	2,382.00
2 One-Time Origination Fee	125.00	0.00	125.00
			\$2,507.00

To pay online, visit www.accountservicing.com/payment

For more information about your invoice, please:
- Email us at customersupport-07@accountservicing.com
- Visit www.accountservicing.com

Total Due

\$2,507.00

Dishonored Checks, Drafts Or Orders Shall Be Subject To A Surcharge Of \$30



10

10. Consider and take necessary action to authorize all four Road & Bridge precincts to apply for credit with Equipment Share. (GDR)

RESULT: APPROVED [UNANIMOUS]

MOVER: Joel Behrens, Commissioner Pct 3
SECONDER: Ronald Best, Commissioner Pct 2

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



Gary D. Reese

County Commissioner County of Calhoun Precinct 4



February 25, 2025

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

RE: AGENDA ITEM

Dear Judge Meyer:

Please place the following item on the Commissioners' Court Agenda for March 5, 2025.

• Consider and take necessary action to authorize all four Road & Bridge precincts to apply for credit with Equipment Share.

Sincerely,

Gary D. Reese

GDR/at

11

11. Consider and take necessary action on amending County Personnel Policy, Sections 7.01.02, 7.03.01, 7.03.02, 7.05, 7.07 and 9.07.03. (VLL)

Clarri Atkinson explained the amendment.

Effective immediately.

RESULT: APPROVED [UNANIMOUS]

MOVER: David Hall, Commissioner Pct 1
SECONDER: Gary Reese, Commissioner Pct 4

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

Debbie Vickery

From:

clarri.atkinson@calhouncotx.org (Clarri Atkinson) <clarri.atkinson@calhouncotx.org>

Sent:

Wednesday, February 26, 2025 3:06 PM

To:

Debbie.Vickery@calhouncotx.org; vern.lyssy@calhouncotx.org; 'David Hall';

Ronny.Best@calhouncotx.org; Joel.Behrens@calhouncotx.org;

Gary.Reese@calhouncotx.org

Subject:

Agenda Item Request

Attachments:

Amended SO Hours Worked.pdf

Follow Up Flag:

Follow up

Flag Status:

Completed

Please place the following on the Court Agenda

Consider and take necessary action on amending County Personnel Policy, Sections 7.01.02, 7.03.01, 7.03.02, 7.05, 7.07 and 9.07.03

Clarri Atkinson

Calhoun County Human Resources 131 N. Virginia Ste. F Port Lavaca, TX 77979

P: 361.553.4450 F: 361-551-2181

Calhoun County Texas

7.00 Workweek and work hours

7.01.02 Effective March 9, 2025, patrol deputies and corrections officers work a fourteen (14) day work period with a minimum of eighty (80) hours. Pay, as well as compensatory and additional time earned, will be calculated on this work period.

(Amended and adopted by Commissioners' Court on March 5, 2025)

7.03 OVERTIME WORKED

7.03.01 The policy of the County is to keep overtime to a minimum. However, employees may be required to provide services in addition to normal hours or on weekends or holidays. Overtime is defined as hours worked in excess of the allowable number of hours under the Fair Labor Standards Act (FLSA): (forty (40) hours per seven (7) day work week or eighty-six (86) hours for employees on a fourteen (14) day work period). Under the FLSA, overtime applies only to employees who are not exempt from the Act's overtime provisions.

7.03.02 For employees with positions which are covered by the overtime provisions of the FLSA (non-exempt), overtime begins to accrue with the 41st hour worked during the seven (7) day work week or the 87th worked hour during the fourteen (14) day work period. All overtime for services by employees covered under FLSA must be authorized in advance by the employee's Department Head.

(Section 7.03 amended and adopted by Commissioners' Court on March 5, 2025, effective March 9,2025)

7.05 OVERTIME COMPENSATION:

Non-exempt employees are compensated for overtime worked by being given (in order to use equal time off within the same work period but before the forty (40) hours are worked in the seven (&) day workweek or fourteen (14) day work period as described in Section 7.01:

7.07 LEAVE OR HOLIDAYS TAKEN AND OVERTIME

7.07.01 If a full time employee who is subject to the overtime provisions of FLSA is required to work extra hours during a workweek in which he or she has used sick or vacation leave, compensatory or holiday time, the leave time will not be counted towards the calculation of hours worked for overtime purposes, the leave or time should be flexed in accordance with Section 7.05.01

7.07.02 For hours worked, as defined in the previous paragraph, over forty hours during the 7-day workweek or eighty-six hours during the 14-day work period, the employee will be compensated in the order stated in Section 7.05.01

(Amended and adopted by Commissioners' Court on March 5, 2025, effective March 9, 2025)

9.07.03 COMPENSATORY TIME

Patrol deputies and correction officers work a fourteen (14) day work period and must work over eighty-six (86) hours before being eligible to receive compensatory time, under the 207(k) provisions of FLSA.

(Amended and adopted by Commissioners' Court on March 5, 2025; Effective March 9, 2025)

12

12. Consider and take necessary action to accept proposal from Lester Contracting, Inc. to dredge boat ramp and dock area at Bill Sanders Memorial Park utilizing GOMESA funds, not to exceed \$100,000, and order that this contract be exempted from the competitive bidding process as a professional service due to the limited number of available vendors in the region that possess the specialized equipment and expertise necessary to complete the project. (GDR)

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 26, 2025

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

RE: AGENDA ITEM

Dear Judge Meyer:

Please place the following item on the Commissioners' Court Agenda for March 5, 2025.

 Consider and take necessary action to accept proposal from Lester Contracting, Inc. to dredge boat ramp and dock area at Bill Sanders Memorial Park and utilize GOMESA funds not to exceed \$100,000.

Sincerely,

Gary D. Reese

GDR/at

Gary Reese

From:

ken@lestercontracting.com

Sent:

Monday, February 24, 2025 10:28 AM

To:

'Gary Reese'

Subject:

FW: Swan Point Dredging

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

February 24, 2025

Dear Commissioner Gary Reese:

Please see prices and options below for dredging at Swan Point

Lump Sum Option - 6000 CY at \$15.00 = \$90,000.00

Hourly Option -

Mobilization, Seal Beds and Clean Up - \$5,000.00

60' Long Reach Excavator - \$250 per Hour D5 Dozer - \$120.00 per Hour 3 - Tandem Dump trucks at \$110.00 per Hour Each

! estimate 12 Days or 120 Hours @ \$700.00 = \$84,000.00 plus mobilization.

That may be too much time but I don't know the consistency of the material. Going to be slow dealing with the water.

Using the Hourly Rate option we will only bill for actual hours spent on the project plus mobilization charges.

Thanks,

Ken Lester, Jr.
President
Lester Contracting, Inc.
(361)552-3024



1104 Mildred Dr. Port Lavaca, Texas 77979 Phone (361) 552-5371 Fax: (361) 552-2308

2/17/2025

Calhoun County Precinct 4

Attn: Gary Reese - Precinct 4 County Commissioner

Re: Swan Point Boat Ramp Silt Removal Estimate

Mr. Reese,

Rexco, Inc. is pleased to provide the following Time & Materials Estimate for the removal and haul-off of approximately 6,000 CY of silt from the Swan Point boat ramp. We will utilize a Hitachi 350 longreach excavator, three sealed-bed tandem axle dump trucks, a Cat D4 dozer, and two laborers to perform this work. This estimate assumes a maximum of 20 days of work. Billing will be based on the actual days of work performed. Calhoun County Precinct 4 will provide a water truck, water, and an operator to rinse off the dump trucks after dumping at the dump site.

Following is the estimate breakdown:

- Equipment mob / demob: \$1,000.00 total
- Hitachi 350 longreach excavator: \$1,500.00 per day; \$1,500.00 x 20 days = \$30,000.00.
- 3x sealed-bed tandem axle dump trucks: \$972.00 per day each;
 \$972.00 x 3 trucks x 20 days = \$58,320.00
- Cat D4 dozer at the dump site: \$900.00 per day; $$900.00 \times 20 \text{ days} = $18,000.00$.
- Equipment operator transportation, 2x pickups: \$120.00 per day each;
 \$120.00 x 2 pickups x 20 days = \$4,800.00
- Labor for sealed bed / tailgate operation and Supervision: \$875.00 per day; \$875.00 x 20 days = \$17,500.00
- Total estimate: \$129,620.00

We appreciate this opportunity. If there are any questions, please feel free to contact me at (361) 920-1721.

Regards,

Neil Kucera – Project Manager / VP Rexco, Inc.

13

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

RESULT: APPROVED [UNANIMOUS]

MOVER: Gary Reese, Commissioner Pct 4

SECONDER: Ronald Best, Commissioner Pct 2.

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



Gary D. Reese

County Commissioner County of Calhoun Precinct 4



February 27, 2025

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

RE: AGENDA ITEM

Dear Judge Meyer:

Please place the following item on the Commissioners' Court Agenda for March 5, 2025.

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

Sincerely,

Gary D. Reese

GDR/at

PORT O'CONNOR COMMUNITY CENTER CONTRACT AGREEMENT

EVENT INFORMATION

Name of Organization
Address of Organization:
Duly Authorized Representative:
Name:
Cell#Email:
Address for Deposit Return:
Community Center Area(s) Needed (check all that apply):
Main Hall Pavilion Youth Room
Purpose of Use:
Date of Event:
Vendors (check all that apply)
☐ Tents ☐ Portable Facilities ☐ Fencing ☐ Other
Additional Date(s) needed for Set Up/Take Down:
Estimated number of Attendees:
Will Alcohol be allowed: Security Provided By:
If you are <u>SELLING</u> alcohol, you must have approval from the Calhoun County Commissioner Court prior to your event
Overnight use of the grounds requires 24-hour Security

Initials_____

PORT O'CONNOR COMMUNITY CENTER **CONTRACT AGREEMENT**

Definitions:

- 1.) The "Community Center" or "Port O'Connor Community Center & Pavilion" as used herein includes any hall, building, meeting room, pavilion, or any other facility including the grounds located at 3674 Hwy 185, Port O'Connor, TX
- 2.) The "Lessee" as used herein includes any person, association, public or private organization, partnership, company, or corporation that is granted a contract to use any or all part of the Community Center in accordance with these regulations.

This agreement is made and entered into this theday of	20
between Calhoun County (Lessor), and	(Lessee) is as follows:
That upon the terms, conditions, and agreement herein expressed, tunto the Lessee permission to use and occupy the following space(Port O'Connor, TX 77982 (Port O'Connor Community Center & Pavil	(s) located at 3674 Adams Ave
Main Hall Pavilion Youth Room	
For the following dates: Event Date	
Additional Set Up/Take Down Dates	<u>. </u>
For the purpose of	
And no other purpose without the written consent of the Lessor.	
The Lessee shall execute a release on the Contract Agreement and i damage to the property or injury to any persons arising out of the u	•

All rentals of the Community Center will require a signed Contract Agreement between Lessee and County, through their duly authorized representatives.

The Community Center shall not be used for any unlawful purposes. No group or activity shall cause a disturbance of the peace, or result in damage to the property, furniture, fixtures, appliances, or adjacent grounds. The County shall not discriminate against any group due to race, religion, age, sex, or color. Due to the prohibitions against government support of religions, no free use of the Community Center is permitted by any religious organization.

Initials	Initia	S	
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PORT O'CONNOR COMMUNITY CENTER CONTRACT AGREEMENT

The Rules & Regulations are a separate attachment and are a part of this Contract Agreement.

RESERVATIONS

- All reservations must be made in advance of the event date, but not more than 12 months in advance, between the hours of 8AM-4PM, Monday-Thursday with the Calhoun County Precinct 4 office located at
 - 104 E Dallas Ave., Seadrift, TX. PH 361-785-3141
- Reservations are made on a first-come, first-served basis. The County Representative will
 resolve any reservation request conflicts. A reservation for the Community Center is
 confirmed only upon receipt of a signed Contract Agreement by Lessor, accompanied by the
 required deposit payment.

FEES

Rental Fees & Deposit Fees are due at time of reservation.

RENTAL FEES	·	DEPOSIT FEES	
Main Hall	\$600/day	Main Hall	\$250
Pavilion	\$500/day	Pavilion	\$100
Youth Room	\$50/day	Youth Room	\$50
Key Deposit			\$100

Fees Owed: The Lessee agrees to pay Calhoun County the following fees for use of the property. Main Hall \$600/dav _days=_ Pavilion \$500/day x days = days = Youth Room \$50/day Total Rental Fees Due: Deposit Owed: The Lessee agrees to pay Calhoun County a separate deposit payment for the above premise(s) Main Hall: \$250 Pavilion: \$100 Youth Room: \$50 **Key Deposit:** \$100 Total Deposit Due:___ TOTAL RENTAL FEES & DEPOSITS DUE \$ Please make checks payable to: Calhoun County and mail to P.O Box 177, Seadrift, TX 77983

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PORT O'CONNOR COMMUNITY CENTER CONTRACT AGREEMENT

DEPOSIT FORFEITURE AND REFUNDS

- Cancellation within 30 days of the reserved date will result in a forfeiture of the Deposit.
 Exceptions include, but are not limited to, Power Outages, Sewer and/or Water issues, Storm Damage, or other events that prevent the use of the Community Center. All Deposits and Fees will be refunded in the event the Community Center is unusable on the reservation date.
- If any of the Rules are broken, or if the Lessee fails to pay for damages caused by them, the Security Deposit will be withheld, and you can be banned from any future use of the Community Center.
- After it is confirmed that the Lessor left the Community Center clean and without damage, with tables and chairs returned to their designated areas as specified in the Rules, and confirmation of the Key being returned, the Deposit will be refunded.
- Deposit returns must be approved in Commissioner Court, held each week (except on Holidays) and are refunded by the Calhoun County Treasurer. Please allow sufficient time for the Deposit to be processed and refunded to you.

Print Name		
Cell Number		
Organization Name		
Signature		
Date	County Representative	

COMMUNITY CENTER FACILITY RULES

LCOHOL

 For events when alcoholic beverages will be consumed, whether provided or brought in by individuals, it is MANDATORY the Lessee provide a CERTIFIED TEXAS PEACE OFFICER(S) as Security during the event.

SMOKING/VAPING

 This is a SMOKE FREE building. No smoking or vaping of any kind is permitted inside the building or within 20 feet of any doors.

DECORATIONS

- Nothing is to be hung on any walls or from any ceilings. The use of any type of tape, 3M hooks, tacks, screws, nails, etc. is not permitted. Hanging anything from any fixtures or from the ceiling grid is also not permitted.
- Open flames of any kind are not permitted. Safe Heat Chafing Fuel burners are permitted for food service use only.
- Fog and/or Foam Machines are not permitted

SAFETY

- MAX OCCUPANCY IS 250. This includes event attendees, volunteers and any vendors.
- Do not block access to any doors, corridors, hallways, or fire extinguishers
- Storage Room double doors MUST remain closed when not in use. The Storage Room has an exhaust fan that will suck the cold air from the building and vent it outside causing the A/C to not work.
- Do not prop any exterior doors open.

COOKING/CATERING/VENDORS

- No Fryers or Grills of any kind are to be used inside the building or within 20ft of any door
- Lessee is responsible for all catering/vendor arrangements. All set-up/prep work must be done during contracted rental times.
- All items belonging to any caterer, vendor, sponsor, etc shall be removed by the end of the contracted rental time unless prior arrangements are made with the County Precinct 4 office

TOURNAMENTS

No fish are permitted inside the building at any time (dead or live)

EVENT HOURS

- SUNDAY-FRIDAY: event must end by Midnight
- SATURDAY: Event must end by 1AM

SET UP/CLEAN UP

- Set Up & Clean Up is the responsibility of the Lessee
- Wipe down all tables & chairs that were used
- Reset Tables & Chairs per the diagram located on the inside of Storage Room door for our Senior Citizens
- Return the rest of the Tables/Chairs to Storage Room as they were found
- Cleaning the kitchen is the responsibility of Lessee even if a caterer was used. Wipe down all
 counters and any appliances used.
- Spot sweep/mop floors
- Remove all trash and dispose in dumpster behind building
- Lock all exterior doors and return key to drop box

I hereby acknowledge receipt of and agree to abide by the Community Center Facility Rules. I understand that any damage done to the Facility during the contracted rental term may result in a forfeiture of the Security Deposit and possible loss of future rental privileges.

Signature	
 Print Name	Date

COMMUNITY CENTER PAVILION RULES

COHOL

 For events when alcoholic beverages will be consumed, whether provided or brought in by individuals, it is MANDATORY the Lessee provide a CERTIFIED TEXAS PEACE OFFICER(S) as Security during the event.

SMOKING/VAPING

Smoking/Vaping is not permitted in restrooms or concession/storage rooms

DECORATIONS

- No drilling into any part of the building or pavilion is permitted. No use of screws, Tap cons, anchor bolts, nails, etc.
- No hangings of any kind are permitted from ceiling grids in Concession area or Restrooms

SAFETY

Do not block any Doors, Hallways, or Fire Extinguishers

COOKING/CATERING/VENDORS

- No Fryers or Grills of any kind are to be used under the pavilion covering or inside the concession/storage rooms
- Any cooking on a concreted area must have protection underneath to prevent stains on concrete
- Lessee is responsible for all catering/vendor arrangements. All set-up/prep work must be done during contracted rental times.
- All items belonging to any caterer, vendor, sponsor, etc. shall be removed by the end of the
 contracted rental time unless prior arrangements are made with the County Precinct 4 office

EVENT HOURS

- SUNDAY-FRIDAY: event must end by Midnight
- SATURDAY: Event must end by 1AM

SET UP/CLEAN UP

- Set Up & Clean Up is the responsibility of the Lessee
- Wipe down all tables & chairs that were used
- Return all Tables/Chairs to Storage Room as they were found
- Cleaning the Concession/Catering areas is the responsibility of Lessee even if a caterer and/or bartender service was used. Wipe down all counters and sinks.
- Spot sweep Concession/Catering areas
- Remove all trash and dispose in dumpster behind Community Center building
- Lock all exterior doors, rear roll up door, and Restroom doors and return key to drop box

I hereby acknowledge receipt of and agree to abide by the that any damages done to the Facility during the contract Security Deposit and possible loss of future rental privileges	ted rental term may result in a forfeiture of the
Signature	_ · · · · · · · · · · · · · · · · · · ·
Print Name	Date

14

14. Consider and take necessary action on the Release of the Final Payment in the amount of \$66,569.20 to Con-Metal Contractors, Inc. for the Recycle Waste Transfer Station Project. (RB)

Scott Mason explained.

RESULT: APPROVED [UNANIMOUS]

MOVER: Joel Behrens, Commissioner Pct 3
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 27, 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

 Consider and take necessary action on the Release of the Final Payment in the amount of \$66,569.20 to Con-Metal Contractors, Inc. for the Recycle Waste Transfer Station Project.

Sincerely, Ronald Sea

RB/lj



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

February 26, 2025

Commissioner Ronny Best Calhoun County Precinct No. 2 5812 FM 1090 Port Lavaca, Texas 77979

RE: RECOMMENDATION FOR PAYMENT NO. 6-FINAL

Recycle Waste Transfer Station Project

Dear Honorable Judge & County Commissioners,

We have reviewed Con-Metal Contractors, Inc.'s Invoice No. 26624-06R for the above referenced project. All work is complete and enclosed is Recommendation for Payment No. 6-Final for the retainage amount of \$66,596.20 for services between February 14, 2025 and February 19, 2025.

The Contractor's Guarantee and the Contractor's Conditional Waiver and Release on Final Payment are enclosed

Please call if you have any questions.

Sincerely,

G & W Engineers, Inc.

Scott P. Mason, P.E.

cc: Con-Metal Contractors, Inc

Demi Cabrera, Calhoun County Assistant Auditor

file 5310.023

Engineering • Consulting • Planning •

The AGN

Surveying

	RECOMMENDA	NATION OF PAYMENT	lo. 6-Final
OWNER's Project No.		ENGINEER's Project No.	5310.023
Project	BID NUMBER 2024.04 – RECY	CLE WASTE TRANSFER STATIO	ON PROJECT
CONTRACTOR CO	N-METAL CONTRACTORS, 1	INC.	
Contract for Recycle	Waste Transfer Station Project	Contract Date	March 27, 2024
Application Date	February 19, 2025	Application Amount	\$66,596.20
Period Start Date	February 14, 2025	Period Ending Date	February 19, 2025
date indicated above. To we believe that the App Certificate stating that all his obligations in connect In accordance with t payment to the CONTRA	the extent that we have been presolication meets the requirements of the previous payments to him under tion with the Work covered by all	bject to the limitation in the preceding below. G & W Engineers, Inc. By:	our Engineering Agreement, udes the CONTRACTOR's m to discharge in full all of
	STATEMI	ENT OF WORK	
Original Contract Price	\$650,452.75	Work to Date	\$ 665,962.00
Net Change Orders (1)	\$15,509.25	Amount Retained	\$
Current Contract Price	\$665,962.00	Subtotal	\$665,962.00
Work to be Done	\$	Previous Payments Recommended	\$(599,365.80)
		Amount Due This Payment	\$ 66,596.20

66,596.20

G & W ENGINEERS, INC. 205 W. Live Oak St. Port Lavaca, Texas 77979 (361) 552-4509



INVOICE

BILL TO:

Calhoun County

211 South Ann Street, Third Floor, Ste 301 Port Lavaca, TX 77979

ATTN:

Accounting Dept.

INVOIC	Œ #26624-06R
DATE:	02/19/2025

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

QUANTITY	DESCRIPTION OF WORK	UNIT PRICE	TOTAL
	Recycle Waste Transfer Station		
	Retainage 10%		<u>ቀ ራሪ ና</u> ፀሪ 20
	Retainage 1076		\$ 66,596.20
			·
	Total	Due This Invoice	\$ 66,596.20

CONTRACTOR'S CONDITIONAL WAIVER AND RELEASE ON FINAL PAYMENT

THE STATE OF TEXAS
COUNTY OF <u>Calhour</u> §

Project:

BID NUMBER 2024.04 - RECYCLE WASTE TRANSFER STATION PROJECT FOR CALHOUN COUNTY, TEXAS.

Job No. 5310.023

On receipt by the signer of this document of a check from CALHOUN COUNTY (maker of check) in the sum of \$\(\begin{align*} \left(\omega_c, \) 596.30 \quad \text{payable to CON-METAL CONTRACTORS, INC. (payee or payees of check)} and when the check has been properly endorsed and has been paid by the bank on which it is drawn, this document becomes effective to release any mechanic's lien right, any right arising from a payment bond that complies with a state or federal statute, any common law payment bond right, any claim for payment, and any rights under any similar ordinance, rule, or statute related to claim or payment rights for persons in the signer's position that the signer has on the property or easements of CALHOUN COUNTY (owner) located at 900 Landfill Road, Port Lavaca, Texas (location) to the following extent: BID NUMBER 2024.04 - RECYCLE WASTE TRANSFER STATION PROJECT FOR CALHOUN COUNTY, TEXAS. (job description).

This release covers the final payment to the signer for all labor, services, equipment, or materials furnished to the property or to CALHOUN COUNTY (person with whom signer contracted).

Before any recipient of this document relies on this document, the recipient should verify evidence of payment to the signer.

The signer warrants that the signer has already paid or will use the funds received from this final payment to promptly pay in full all of the signer's laborers, subcontractors, materialmen, and suppliers for all work, materials, equipment, or services provided for or to the above referenced project up to the date of this waiver and release.

CON-METAL CONTRACTORS, INC. (CONTRACTOR)
Signed By: Aslnien Perez
Print Name Jessica Perez
Title: tR Managel
SUBSCRIBED AND SWORN TO BEFORE ME by Jessica Percz,
on February 26, to certify which witness my hand and seal of
office.
DALINDA HERNANDEZ DALINDA HERNANDEZ

Notary Public, State of Texas

My Commission Expires:

DALINDA HERNANDEZ Notary ID #131646361 My Commission Expires July 17, 2026

CONTRACTOR'S GUARANTEE

I, <u>Darren Downs</u> , being <u>Vice President</u> of CON-METAL CONTRACTORS, INC. (hereinafter called "CONTRACTOR"), do hereby
make the following statements to CALHOUN COUNTY (hereinafter called "OWNER") in relation to the completed project known as BID NUMBER 2024.04 - RECYCLE WASTE
TRANSFER STATION PROJECT FOR CALHOUN COUNTY, TEXAS.
I guarantee
That all of the completed Work is free from faulty materials in every particular,
That all of the completed Work is free from improper workmanship, and
That no injury will occur from proper and usual wear,
That OWNER has been assigned all guarantees and/or warranties originally made to CONTRACTOR by suppliers and subcontractors, if any. (Such assignment does not relieve CONTRACTOR of the responsibility stated in each guarantee and/or warranty in case of failure of suppliers or subcontractors to fulfill the provisions of such guarantees and/or warranties.)
I agree
That the execution of the final certificate or the receipt of the final payment does not relieve CONTRACTOR of the responsibility for neglect of faulty materials or workmanship during the period covered by this Guarantee,
To replace or to re-execute without cost to OWNER such Work as may be found to be improper or imperfect, and
To make good all damage caused to other Work or materials, due to such required replacement or re-execution.
This Guarantee is in effect as of the 13 day of February 2025, and shall cover a period of ONE (1) FULL YEAR from said effective date.
Signed By:

15

15. 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 County ISD. (VLL)

RESULT: APPROVED [UNANIMOUS]

MOVER: David Hall, Commissioner Pct 1

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 27, 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 March 05, 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 County ISD.

Thank You,,

Mary Ann Orta

Calhoun County Elections Administrator

VOTING EQUIPMENT LEASE BASIC TERMS

DATE: 02/13/25

Lessor: Calhoun County, Texas

Lessor's Address: Calhoun County Courthouse

211 S. Ann, Port Lavaca, Texas 77979

Lessee: Calhoun County Independent School District

Lessee's Address: 524 N. Commerce St. Port Lavaca, Texas 77979

Equipment

12 (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 11 machines @ \$3,325.00 for 1 day X 3% = \$1,097.25

Rent Total: \$1,695.75

Security Deposit: \$.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:

- 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.
- 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 County ISD

By: <u>Fwan Cardwell</u>
Title: <u>Superintendent</u>

16

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

RESULT: APPROVED [UNANIMOUS]

MOVER: Gary Reese, Commissioner Pct 4
SECONDER: Ronald Best, Commissioner Pct 2

AYES: Judge Lyssy, Commissioner Hall, Best, Behrens, Reese.



Gary D. Reese

County Commissioner County of Calhoun Precinct 4



February 27, 2025

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

RE: AGENDA ITEM

Dear Judge Meyer:

Please place the following item on the Commissioners' Court Agenda for March 5, 2025.

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

Sincerely,

Gary D. Reese

GDR/at



724 Burroughsville Rd. Victoria, TX 77905 361-573-5775 info@gccbuildings.com

CONBINECTION	7			
Estimate# Estimate Date Expiration Date Reference	: EST-20240068 : 02-28-24 : 03-06-24 : 30 x 40 x 14 Service Club Building Addition	Sales Rep	: Shawn Nagel	
Bill To		Ship To		201 A 15 1 10 1 - 17 17 17 1
Port O'Conner Community nan@tisd.net	/ Center	Port O'Conner Commu 3674 Adams Ave. Port O'Conner Texas 77	•	
item & Description				Amoun
* Anchored to Top of Sia TRUSSES: BEAM - Size w. ROOF PURLIN: ZEE PUR. WALL GIRTS: ZEE PURLI ROOF PANELS: 26 ga. PI WALL PANELS: 26 ga. PI TRIM: Color TBD FASTENERS: Steelbinder SLAB (3000 PSI): 30' x 40' * 140' OF 24" * 70' OF 24" MISC / ACCESSORIES: Oty Item	DETAILED BELOW: BOLT-UP DE 14' Partially Enclosed varies per Engineered Design blarles per Engineered Design LIN - Size varies per Engineered Design Renel Galvalume Renel Galvalume Renel Color TBD 12XL* (Long-Life) 12XL* (Long-Life) 13/8 IN. Rebar 11XL* Beam w/ 5/8 IN. Rebar	Gable - 2:12 PITCH Red-Oxide Red-Oxide Ign - By-Pass w/ Main n - Flush w/ Main Fran ebar ning, Door, Install, and Trim-o	ne .	65,182.2
Access to and around build: Slab scope is estimated and Includes Windstorm Registrincludes Floodplain Permit. Building Permit not applicab PAYMENT SCHEDULE:	grade. Padwork or changes to scop site is needed for large and heavy ed is subject to Engineer Review. Chan ation / Certification. Owner to supply GCC w/ Elevation C	quipment, **Pump to ges to scope will be handled v ertificate if required by Flood;		
			Sub Total	\$65,182.25
		Total	·-	\$65,182.25

Terms & Conditions

PORT O'CONNOR COMMUNITY SERVICE CLUB ADDITION TO DONATION CENTER BUILDING

BUDGET CATEGORIES			
Direct Project Costs	2023	2024	TOTAL EXPENDITURES
Fund Raising Expenses	990.66		990.66
Site Preparation		913.96	913.96
Golden Crescent Construction		65,182.26	65,182.26
Electrical		2,487.40	2,487.40
	-		
	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·		
Totals	990.66	68,583.62	69,574.28

PORT O'CONNOR COMMUNITY CENTER FUND ASSOCIATION, INC. FACELIFT PROJECT – MAIN HALL

BUDGET CATEGORIES					
Direct Project Costs	2022	2023	2024	2025	TOTAL
Advertising	2,458.31				2,458.31
Fund Raising	4,577.09	1,080.00			5,657.09
Other Direct Expenses					·
Appliances	<u> </u>		1,557.00		1,557.00
Backsplash-Countertops		5,263.75	1,532.00		6,795.75
Electrical			2,325.00		2,325,00
Flooring		21,615.75			21,615.75
Furniture			19,544.36		19,544.36
Landscaping		<u> </u>		3,195.00	3,195.00
Painting		4,250.00	9,893.23		14,143.23
Plumbing		1,682.28	117.00		1,799,28
· · · · · · · · · · · · · · · · · · ·					
TOTALS	7,035.40	33,891.78	34,968.59	3,195.00	79,090.77

PORT O'CONNOR COMMUNITY CENTER ASSOCIATION FACELIFT PROJECT – PHASE I – COMMUNITY CENTER PAVILION

BUDGET CATEGORIES	2024	TOTAL EXPENDITURES
LAUGER COMPANIES, INC.	3-13-24	40,794.00
INITIAL CONTRACT PAYMENT	3-24-24	15,456.00
INITIAL CONTRACT PAYMENT	4-19-24	47,245.37
INITIAL CONTRACT PAYMENT	8-6-24	61,960.00
PLUMBING UPGRADES	8-6-24	2,100.00
SINK EXTRAS	8-6-24	650.00
TOTAL	· 	168,206.00

17

17. Consider and take necessary action to remove the 2019 Chev Tahoe VIN 1GNLCDEC5KR21967 from the Sheriff Department's Inventory. This vehicle will be going to auction. (VLL)

RESULT: APPROVED [UNANIMOUS]

MOVER: Ronald Best, Commissioner Pct 2
SECONDER: Joel Behrens, Commissioner Pct 3

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

CALHOUN COUNTY, TEXAS COUNTY SHERIFF'S OFFICE 211 SOUTH ANN STREET PORT LAVACA, TEXAS 77979

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

MEMO TO: VERN LYSSY, COUNTY JUDGE

SUBJECT: REMOVE VEHICLE FROM SHERIFF'S OFFICE INVENTORY

DATE: FEBRUARY 27, 2025

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

AGENDA FOR MARCH 5, 2025

* Consider and take necessary action remove a 2019 Chev Tahoe VIN 1GNLCDEC5KR21967.. Vehicle will be going to auction. Sincerely,

Bobbie Vickery

Calhoun County Sheriff

18

18. Consider and take necessary action to accept a donation of \$100.00 from Urban Surveying, Inc. (Terry Ruddick) for CC EMS Motivational Fund. (VLL)

RESULT: APPROVED [UNANIMOUS]

MOVER: Gary Reese, Commissioner Pct 4

SECONDER: Joel Behrens, Commissioner Pct 3

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

URBAN SURVEYING, INC. . VICTORIA. IX 77901-5510

DATE	INVOICE NO	COMPLEX		2653
02/26/2025	22625	EMS Motivational Fund	AMOUNT	NETAMOUNT
				100.00
	•			
į				
A77 44 44 4				
ATE 02/26/2	25	VENDOR Calhoun County	7070	
***			TOTAL	100.00

URBAN SURVEYING, INC.

2004 N. COMMERCE STREET VICTORIA, TX 77901-5510 WELLS FARGO BANK 37 6

26534

One Hundred and no/100

DATE 02/26/25 CHECK NO. **26534**

AMOUNT \$100.00

PAY TO THE CROER CALHOUN COUNTY 211 S ANN ST PORT LAVACA TX 77979

Mus Hudde O

19

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

2024

RESULT:

APPROVED [UNANIMOUS]

MOVER: SECONDER: Gary Reese, Commissioner Pct 4 Joel Behrens, Commissioner Pct 3

AYES:

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

2025

RESULT:

APPROVED [UNANIMOUS]

MOVER: SECONDER: Gary Reese, Commissioner Pct 4
Joel Behrens, Commissioner Pct 3

AYES:

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

DG TADJUS IN ENTAPPROVALLIST

HEARING DATE: Wednesday, March 5, 2025

HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME JUSTICE COURT TECHNOLOGY FUND

FUND NO: 2719

DEPARTMENT NAME: NO DEPARTMENT

AMENDMENT REASON: ADJUST BUDGET FOR NOVEMBER 2024 REVENUE AMENDMENT NO: 6989 REQUESTOR: JUSTICE COURT TECHNOLOGY FUND

ACCT NO 70753 70752 70751 70754 CAPITAL OUTLAY-JP PCT #3 CAPITAL OUTLAY-JP PCT #2 CAPITAL OUTLAY-JP PCT #1 CAPITAL OUTLAY-JP PCT #5 CAPITAL OUTLAY-JP PCT #4 999 999 999 999 AMENDMENT NO 6989 TOTAL NO GRANT NO GRANT NO GRANT NO GRANT NO GRANT NO DEPARTMENT TOTAL **INCREASE** 8 8 8 8 8 8 DECREASE REVENUE \$ \$ \$ \$ 8 \$456 \$456 \$117 \$216 \$26 \$52 \$45 EXPENDITUR \$ \$ \$ \$ 8 NOREASE FUND BAI DEGREASE) (\$456)(\$216) (\$456) (\$117) (\$52) (\$26) (\$45)

DEPARTMENT NAME: REVENUE

DEPARTMENT NAME: REVENUE

AMENDMENT NO: 6989 REQUESTOR: JUSTICE COURT TECHNOLOGY FUND

AMENDMENT REASON: ADJUST BUDGET FOR NOVEMBER 2024 REVENUE

				REVENUE	REVENUE	EXPENDITURE	EXPENDITURE	NCREASE
ACCT NO	ACCT NAME	GRANI NO	GRANT NAME	NCREASE	DECREASE	INCREASE	DECREASE	(DECREASE)
44061	FEES-JUSTICE OF PEACE-PRECINC	999	NO GRANT	\$203	\$0	\$0	\$0	\$203
44062	FEES-JUSTICE OF PEACE PRECINC	999	NO GRANT	\$42	\$0	\$0	\$0	\$42
44063	FEES-JUSTICE OF PEACE PRECINC	999	NO GRANT	\$49	\$0	\$0	\$0	\$49
44064	FEES-JUSTICE OF PEACE PRECINC	999	NO GRANT	\$24	\$0	\$0	\$0	\$24
44065	FEES-JUSTICE OF PEACE PRECINC	999	NO GRANT	\$110	\$0	\$0	\$0	\$110
46020	INT INC-JUSTICE SYSTEM	999	NO GRANT	\$28	\$0	\$0	\$0	\$28
		AA	AMENDMENT NO 6989 TOTAL	\$456	\$0	\$0	\$0	\$456
			REVENUE TOTAL	\$456	\$0	\$0	\$0	\$456
	JUSTICE (COURT T	JUSTICE COURT TECHNOLOGY FUND TOTAL	\$456	\$0	\$456	\$0	\$0

HEARING DATE: Wednesday, March 5, 2025

HEARING TYPE: REGULAR

BUDGET YEAR: 2024

FUND NAME CAP.PROJ.-CDBG-DR INFRASTRUCTURE

FUND NO: 5111

DEPARTMENT NAME: NO DEPARTMENT

DEPARTMENT NAME: NO DEPARTMENT

AMENDMENT REASON: LINE ITEM TRANSFERS FOR CHANGES IN CDBG-DR GRANT CC 8/7/24 AND CC 5/15/24 AMENDMENT NO: 6993 REQUESTOR: CAP. PROJ. CDBG-DR

(\$240,001)	\$919,458	\$1,159,459	\$ 0	\$0	NO DEPARTMENT TOTAL			
(\$240,001)	\$919,458	\$1,159,459	\$0	\$0	AMENDMENT NO 6993 TOTAL	AA		
(\$706,346)	\$0	\$706,346	\$0	\$0	LITTLE CHOCOLATE BAY PAR	492	IMPROVEMENTS-PARK	73252
(\$364,950)	\$0	\$364,950	\$0	\$0	DRAINAGE-LANE ROAD	491	IMPROVEMENTS-DRAINAGE	73153
\$6,346	\$6,346	\$0	\$0	\$0	RADIO TOWERS	494	EQUIPMENT-RADIO	72500
\$850,000	\$850,000	\$0	\$0	\$0	MAGNOLIA BEACH FIRE STAT	493	BUILDING	70650
\$24,862	\$24,862	\$0	\$0	\$0	MAGNOLIA BEACH FIRE STAT	493	GRANT SERVICES	62740
(\$20,831)	\$0	\$20,831	\$0	\$0	LITTLE CHOCOLATE BAY PAR	492	GRANT SERVICES	62740
(\$6,875)	\$0	\$6,875	\$0	\$0	DRAINAGE-LANE ROAD	491	GRANT SERVICES	62740
\$38,250	\$38,250	\$0	\$0	\$0	MAGNŐLIA BEACH FIRE STAT	493	ENGINEERING SERVICES	62454
(\$40,000)	\$0	\$40,000	\$0	\$0	LITTLE CHOCOLATE BAY PAR	492	ENGINEERING SERVICES	62454
(\$20,457)	\$0	\$20,457	\$0	\$0	DRAINAGE-LANE ROAD	491	ENGINEERING SERVICES	62454
(DEGREASE)	DECREASE	INCREASE	DECREASE	NCREASE	GRANT NAME	GRANT NO	ACCT NAME	ACC NO
NGREASE	EXPENDITURE	EXPENDITURE	REVENUE	REVENUE				
FUND BAL								٠

DEPARTMENT NAME: REVENUE

DEPARTMENT NAME: REVENUE

DEPARTMENT NAME: REVENUE

AMENDMENT REASON: LINE ITEM TRANSFERS FOR CHANGES IN CDBG-DR GRANT CC 8/7/24 AND CC 5/15/24 AMENDMENT NO: 6993 REQUESTOR: CAP. PROJ. CDBG-DR

\$240,001	\$0	\$0	\$919,458	\$1,159,459	AMENDMENT NO 6993 TOTAL	AM		
(\$6,346)	\$0	\$0	\$6,346	\$0	RADIO TOWERS	494	FEDERAL GRANT	43185
(\$913,112)	\$0	\$0	\$913,112	\$0	MAGNOLIA BEACH FIRE STAT	493	FEDERAL GRANT	43185
\$767,177	\$0	\$0	\$0	\$767,177	LITTLE CHOCOLATE BAY PAR	492	FEDERAL GRANT	43185
\$392,282	\$0	\$0	\$0	\$392,282	DRAINAGE-LANE ROAD	491	FEDERAL GRANT	43185
(DECREASE)	DECREASE	INGREASE	DECREASE	NCREASE	GRANT NAME	GRANT NO	ACCT NAME	
INCREASE		EXPENDITURE	REVENUE	REVENUE				
FUND BAL								

HEARING DATE: Wednesday, March 5, 2025

HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME CAP.PROJ.-CDBG-DR INFRASTRUCTURE

FUND NO: 5111

DEPARTMENT NAME: REVENIE	

DEPARTMENT NAME: REVENUE DEPAR	DEI		TMENT NO: 1		
REVENUE TOTAL	\$1,159,459	\$919,458	\$0	\$0	\$240,001
CAP.PROJCDBG-DR INFRASTRUCTURE TOTAL	\$1,159,459	\$919,458	\$1,159,459	\$919,458	\$0
Grand Total	\$1,159,915	60	919,458 \$1,159,915	\$919,458	\$0
					٠

HEARING DATE: Wednesday, March 5, 2025

HEARING TYPE: REGULAR BUDGET YEAR: 2025

FUND NAME GENERAL FUND

FUND NO: 1000

ACCT NO	AMEND	AMEND	DEP/			53992	ACCT NO	AMENE	AMEND	DEP			63500	<u>ACCT NO</u> 53030	AMENE	AMEND	DEP,
ACCT NAME	AMENDMENT REASON: LINE ITE	AMENDMENT NO: 6991	DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1			SUPPLIES-MISCELLANEOUS		AMENDMENT REASON: OVERDRA	AMENDMENT NO: 8995	DEPARTMENT NAME: JAIL				ACCI NAME PHOTO COPIES/SUPPLIES	AMENDMENT REASON: OVERDRA	AMENDMENT NO: 6985	DEPARTMENT NAME: EMERGENCY MANAGEMENT DEI
GRANT NO	LINE ITEM ADJUSTMENT TO PAY BILLS	REQUESTOR: CO.	AND BRIDGE-		AMENDA	990 NO 6		OVERDRAWN ACCOUNTS	REQUESTOR: CO		EMERGENCY MANAGEMENT	AMENDA		GRANI NO	OVERDRAWN ACCOUNTS	REQUESTOR: CO	RGENCY MANA
GRANT NAME	O PAY BILLS	REQUESTOR: COMMISSIONER PRECINCT #1	BRIDGE-PRECINCT #1	JAIL TOTAL	AMENDMENT NO 6995 TOTAL	NO GRANT	GRANT NAME		REQUESTOR: COUNTY AUDITOR/OVERDRAWN		ANAGEMENT TOTAL	AMENDMENT NO 6995 TOTAL	NO GRANT	SRANT NAME	1- 00411	REQUESTOR: COUNTY AUDITOR/OVERDRAWN	GEMENT
REVENUE NCREASE		VCT #1	DE	\$0	\$0	\$0	<u>NCREASE</u>		RDRAWN	mmuninininininininininininininininininin	\$0	\$0	\$0	REVENUE		RDRAWN	
REVENUE	-			\$0	\$0	\$0	REVENUE DECREASE				\$0	\$0	\$0	DECREASE SO			
EXPENDITURE INCREASE			""""""""""""""""""""""""""""""""""""""	\$600	\$600	\$600	EXPENDITURE			NT NO: 180	\$260	\$260	\$0	EXPENDITURE INCREASE \$280			PARTMENT NO: 630
EXPENDITURE DEGREASE			10	\$600	\$600	\$600	EXPENDITURE DECREASE			30 30	\$260	\$260	\$260	EXPENDITURE DEGREASE			30
NGREASE DECREASE			PARTMENT NO: 540	\$0	\$0	(\$600) \$600	INCREASE (DECREASE)			ARTMENT NO: 180	\$0	\$0	\$260	INCREASE DECREASE (\$250)			PARTMENT NO: 630

ISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL

HEARING DATE: Wednesday, March 5, 2025

HEARING TYPE: REGULAR BUDGET YEAR: 2025

FUND NAME GENERAL FUND

FUND NO: 1000

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #4 DEPARTMENT NO: 570 DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #3 DEPARTMENT NO: 560 DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1

DEPARTMENT NO: 540 AMENDMENT REASON: LINE ITEM ADJSUTMENT AMENDMENT NO: AMENDMENT REASON: LINE ITEM ADJUSTMENT AMENDMENT NO: AMENDMENT REASON: |LINE ITEM ADJUSTMENT TO PAY BILLS AMENDMENT NO: 63530 ACCT NO ACCT NO 53510 53510 73400 MACHINERY/EQUIPMENT REPAIRS **ROAD & BRIDGE SUPPLIES** MACHINERY AND EQUIPMENT ROAD & BRIDGE SUPPLIES 6994 6992 6991 ACCT NAMI **ROAD AND BRIDGE-PRECINCT #3 TOTAL ROAD AND BRIDGE-PRECINCT #1 TOTAL** REQUESTOR: COMMISSIONER PRECINCT #4 REQUESTOR: COMMISSIONER PRECINCT #3 REQUESTOR: COMMISSIONER PRECINCT #1 GRANT NO 999 999 999 999 AMENDMENT NO 6992 TOTAL AMENDMENT NO 6991 TOTAL NO GRANT NO GRANT NO GRANT NO GRANT **GRANT NAME** INCREASE REVENUE **INCREASE** REVENUE 8 \$0 \$ 8 \$ \$0 8 DECREASE REVENUE DEGREASE REVENUE 80 80 \$ 8 80 \$0 88 EXPENDITURE EXPENDITURE NCREASE NORFASE \$10,000 \$10,000 \$10,000 \$2,007 \$2,007 \$2,007 **EXPENDITURE** EXPENDITUR DECREASE DECREASE \$10,000 \$10,000 \$10,000 \$2,007 \$2,007 \$2,007 EUND BAL **NCREASE** DEGREASE DECREASE) NCREASE (\$10,000) \$10,000 (\$2,007) \$2,007 8 80 **\$0**

ACCT NO

ACCT NAME

SRANT NO

GRANT NAME

REVENUE

REVENUE DEGREASE

EXPENDITURE

EXPENDITUR

FUND BAL

INCREASE

DECREASE

HEARING DATE: Wednesday, March 5, 2025

HEARING TYPE: REGULAR BUDGET YEAR: 2025

FUND NAME GENERAL FUND

FUND NO: 1000

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

AMENDMENT NO: 2669 REQUESTOR: COMMISSIONER PRECINCT #4

AMENDMENT REASON: |LINE ITEM ADJSUTMENT ACCT NO 73400 70750 MACHINERY AND EQUIPMENT CAPITAL OUTLAY ACCT NAME **ROAD AND BRIDGE-PRECINCT #4 TOTAL** GRANT NO 999 999 AMENDMENT NO 6994 TOTAL NO GRANT NO GRANT GRANT NAME REVENUE **NCREASE** 8 \$0 \$ 8 REVENUE DECREASE 8 \$0 8 EXPENDITURE NCREASE \$46,421 \$46,421 \$46,421 EXPENDITUR DECREASE \$46,421 \$46,421 \$46,42 DECREASE. INCREASE (\$46,421) \$46,421 80 8

DEPARTMENT NAME: WASTE MANAGEMENT DEPARTMENT NO: 380

AMENDMENT REASON: LINE ITEM ADJUSTMENT AMENDHENT NO: 0990 REQUESTOR: COMMISSIONER PRECINCT #2

ACCT NO 53992 53020 SUPPLIES-MISCELLANEOUS GENERAL OFFICE SUPPLIES GRANT NO 999 999 WASTE MANAGEMENT TOTAL AMENDMENT NO 6990 TOTAL NO GRANT NO GRANT GENERAL FUND TOTAL GRANT NAME Grand Total MOREASE ŝ 8 \$0 8 8 DECREASE REVENUE 80 \$ 8 8 8 EXPENDITURE **NGREASE** \$59,488 \$59,488 \$200 \$200 \$200 **EXPENDITUR** DECREASE \$59,488 \$59,488 \$200 \$200 \$200 DEGREASE **NCREASE** FUND BA (\$200)\$200 80 S S ŝ

20

20. Approval of bills and payroll. (VLL)

MMC Bills:

RESULT: MOVER: **APPROVED [UNANIMOUS]**David Hall, Commissioner Pct 1

SECONDER:

Gary Reese, Commissioner Pct 4

AYES:

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

County 2025:

RESULT: MOVER:

APPROVED [UNANIMOUS]
David Hall, Commissioner Pct 1
Ronald Best, Commissioner Pct 2

SECONDER: AYES:

Judge Lyssy, Commissioner Hall, Best, Behrens, Reese

Adjourned 10:30am

APPROVAL LIST - 2025 BUDGET

COMMISSIONERS COURT MEETING OF

\$357,474.02

03/05/25

68,676.32 16,061.46 45,363.84 348.52 1,732.50 2,587.45 1,885.00

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494,129,11

1,000,000.00

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2
PAGE
REPORT
LIST
APPROVAL
FROM
FORWARD
BROUGHT
BALANCE

PAYROLL 2/28/2025 PAYROLL 2/28/2025	PAYROLL 2/28/2025 FEBRUARY 2025 PREMIUMS	PAYROLL 2/28/2025 PAYROLL 2/28/2025 PAYROLL 2/28/2025
FICA MEDICARE	KWH	NATIONWIDE RETIREMENT SOLUTIONS OFFICE OF THE ATTORNEY GENERAL - CHILD SUPPORT VOYA

TOTAL VENDOR DISBURSEMENTS:

TOTAL INVESTMENT ACTIVITY AND TRANSFERS BETWEEN FUNDS:

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

TOTAL AMOUNT FOR APPROVAL:

1,000,000.00	1,494,129.11
⇔	59

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
1000 - GENERAL FUND

Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document	Transaction Description	Debit	Credit
AMBULANCE OPERATIONS-SEADRIFT	340	SERVICES	65740	FRONTIER COMMUNICATIONS	2855	3617852	SEA AMB 2/25 ACT# 361-785-2911-010699-5 PHONE 2/25-3/24	81.08	
AMBULANCE OPERATIONS-SEADRIFT	Total 340							81.08	0.00
BUILDING MAINTENANCE	170	BUILDING SUPPLIES/PARTS	53610	GULF COAST HARDWARE LLC	63196	196756	MAINT 2/24 HOOK & LOCK DISC, SAND DISC, PAINT BRUSH	43.14	
		UTILITIES-AG BLDG/FAIRGROUNDS	53610	SHERWIN WILLIAMS REPUBLIC SERVICES #847	7215 8897	87171 0847001	MAINT 2/13 SCRAPER FG 2/26 ACT# 3-0847-0004638 MAR 2025 TRASH	10.79	
		UTILITIES-COURTHOUSE AND JAIL	66604	REPUBLIC SERVICES #847	8897	0847001	CH 2/26 ACT# 3-0847-0004639 MAR 2025 TRASH	447.22	
		UTILITIES-JAIL	9999	REPUBLIC SERVICES #847	8897	0847001	JAIL 2/26 ACT# 3-0847-0004640 MAR 2025 TRASH	393.66	
BUILDING MAINTENANCE	Total 170							1,135.85	0.00
CONSTABLE-PRECINCT #1	280	INTERNET SERVICES	62955	AT&T MOBILITY	5209	3617462	CONST 1 2/19 ACT# 287342783716 INTERNET 1/20- 2/19	31.25	
CONSTABLE-PRECINCT #1	Total 580							31.25	0.00
CONSTABLE-PRECINCT #3	009	INTERNET SERVICES	62955	AT&T MOBILITY	5209	3617462	CONST 3 2/19 ACT# 287342783716 INTERNET 1/20-2/19	31.25	
CONSTABLE-PRECINCT #3	Total 600							31.25	0.00
CONTINGENCIES	240	GROUP INSURANCE	51920	TEXAS ASSOCIATION OF COUNTIES	<i>1778</i>	3281020	CALCO 1/21 FEB 2025 PREMIUMS		1.72
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Credit		1.72																	
		0.00	86.99	349.48	23.44	12.74	14.27	18.52 52.69	14.02	;	29.58 94.77	134.00	209.00	134.00	243.00	252.00	717.00	234.00	350.00
Debi				·															
Transaction Description		CRT@LAWI 12/12/04	STAMPS	CRT@LAW! 12/12/24 PENS, BATTERIES, COFFEE, USBS, MIS SUPP	CRT@LAW1 1/6 CALENDARS	CRT@LAW! 1/7 PUSH PINS	CRT@LAWI 1/7 PENS	CRT@LAWI 1/7 CALENDAR CRT@LAWI 2/6 PHONE STAND	CRT@LAWI 2/6 TAPE DISPENSER	CPT@! AW1 2/2 DENIC	CRT@LAWI 2/6 FENS CRT@LAWI 2/6 STAPLERS, HOT COCOA, MIS SUP	CRT@LAWI 2/20 C# 2024-CR-0071-CC A. CRUZ	CRT@LAW1 2/20 C# 2024-CR-0180-CC, 2023-CR-0078-CC HOPKINS	CRT@LAW1 2/20 C# 2024-CR-0158-CC J. PRINCF	CRT@LAW1 2/20 C# 2024-CR-0184-CC R. THOMPSON	CRT@LAW1 2/20 C# 25-PF-0003-CC T SATINIDEDS	CRT@LAW1 2/20 C# 2023-CR-0163-CC A MINOZ	CRT@LAWI 2/20 C# 2024-CR-0168-CC T. GABCIA	CRT@LAW1 2/20 C# 2024-CR-0119-CC M. PAWLIK
Document Number		41958972		41965810	42233209	42243129	42245353	42256328 42745612	42745633	42751148	42759177	2025015	2025016	2025017	2025018	2025019	2025022	2025023	2025024
Ven		6602		6602	6602	6602	6602	2099 6602	6602	6602	6602	2606	2606	2606	2606	2606	2606	2606	2606
11e												ODEFEY WITTE WALL &	ODEFEY WITTE WALL &	ODEFEY WITTE WALL &	ODEFEY WITTE WALL &	odefey witte wall &	odefey witte wall &	ODEFEY WITTE WALL &	TE WALL &
Vendor Name		QUILL LLC		Onlice Lico	ONIT TTO	QUILL LIC		ONIT TTO	OULL LLC	QUIEL LLC	למורד רדכ	ODEFEY W	ODEFEY WI	ODEFEY WI	ODEFEY WI	ODEFEY WI	ODEFEY WI	ODEFEY WI	ODEFEY WITTE WALL &
GL Code		53020		07050	53020	53020	53020	53020	53020	53020	53020	60050	60050	00020	05009	05009	05009	05009	05009
GL Title		GENERAL OFFICE SUPPLIES									!	ADULT ASSIGNED-ATTORNEY FEES							
Dept C	Total 240	410																	
Dept Title	CONTINGENCIES	COUNTY COURT-AT-LAW																	

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Credit									0.00		0.00				
Debit	68.00	68.00	109.00	325.00	100.00	100.00	325.00	330.00	4,394.50	491.60	491.60	327.84	78.57 200.00	250.00	40.00
Transaction Description	CRT@LAW1 2/20 C# 2024-CR-0180-CC J. HOPKINS	CRT@LAW1 2/20 C# 2024-CR-0158-CC J, PRINCE	CRT@LAW1 2/20 C# 2023-CR-0078-CC R. GRIMES	CRT@LAW1 2/20 C# 2025-CR-0016-CC 1. PALACIOS	CRT@LAW1 2/20 C# 23-PF-0097-CC M. DEGOLLADO	CRT@LAW1 2/20 C# 23-PF-0096-CC M. DEGOLLADO	CRT@LAW1 2/19 C# 2025-CR-0021-CC T. HAMETT	CRT@LAW1 2/19 C# 2023-FAM-0032-CC		CO JUDGE 2/24 TRAVEL REIMB- WACO, TX 2/11- 2/14		TREAS 2/11 FOLDERS	TREAS 2/11 PAPER, COFFEE TREAS 4/17 OFFICE BOND# 71534841 4/17/25- 4/17/26	TREAS 2/28 ACT# 202920 CONF REG 6/16- 6/18	TREAS 2/28 2025 MEMBERSHIP DUES- A. NEW
Document	2025025	2025026	2025027	2025029	2025030	2025031	2025021	2025020		PO2602		42815283	42822428 7153484	R367953	264581/
Ven	2606	2606	2606	3449	3449	3449	9858	31800		EM		6602	2760	76220	7819
Vendor Name	ODEFEY WITTE WALL &	ODEFEY WITTE WALL &	ODEFEY WITTE WALL &	RIVERA JOE A	RIVERA JOE A	RIVERA JOE A	CLARK JERRY	r perez law pllc		VICKERY DEBBIE		OUIL LIC	CNA SURETY	TEXAS ASSOCIATION OF COUNTIES	TEXAS ASSOCIATION OF COUNTIES
GL Code	95009	05009	60050	05009	60050	05009	60050	63380		91699		53020	62878	66310	01699
GL Trite								LEGAL SERVICES-COURT APPOINTED		TRAINING TRAVEL OUT OF COUNTY		GENERAL OFFICE SUPPLIES	INSURANCE-SURETY BONDS	TRAINING REGISTRATION FEES/TRAVEL	
Dept C									Total 410	260	Total 260	210			
Dept Title									COUNTY COURT-AT-LAW	COUNTY JUDGE	COUNTY JUDGE	COUNTY TREASURER			

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Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document Number	Transaction Description	Debit	Credit
COUNTY TREASURER	Total 210				,			896.41	0.00
DISTRICT ATTORNEY	510	GENERAL OFFICE SUPPLIES	53020	DUDLEY ALYSHA A	1491	6573	DA 1/27 PINS FOR BADGES, FORMS	96.00	
		DUES	53020 54020	DUDLEY ALYSHA A MATTHEW BENDER & CO INC	1491	6618 4343878A	DA 2/10 FORMS DA 2/14 TX CRIM PRACTICE INSTALLMENT	87.50	
DISTRICT ATTORNEY	Total 510							1,848.73	00.0
DISTRICT CLERK	420	GENERAL OFFICE SUPPLIES	53020	COASTAL OFFICE SOLUTIONS, INC	9063	ОЕQТ30	DIST CLK 2/21 NAME PLATE	16.67	
DISTRICT CLERK	Total 420							16.67	00'0
DISTRICT COURT	430	ADULT ASSIGNED-ATTORNEY FEES	05009	DISHER DAVID A	1398	2025046	DIST CRT 2/21 C# 2025-CR-9059-DC R. CASTILLO	450.00	
			05009	RIVERA JOE A	3449	2025043	DIST CR.T 2/18 C# 2024-CR-9000-DC G. PRICE, SR	450.00	
			60050	RIVERA JOE A	3449	2025044	DIST CRT 2/18 C# 2023-CR-8918-DC N. FOWLER	2,350.00	
			60050	RIVERA JOE A	3449	2025045	DIST CRT 2/18 C# 2024-CR-8940-DC N. FOWLER	100.00	
		REGIONAL PUBLIC DEFENDER CAPITAL CASES	65405	REGIONAL PUBLIC DEFENDER	3216	FY202518	CALCO 10/1 2025 INTERLOCAL ALLOCATION	18,331.00	
DISTRICT COURT	Total 430							21,681.00	0.00
ELECTIONS	270	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	38312775	ELEC 1/13 COPIER LEASE	125.00	
			61340	GREAT AMERICA FINANCIAL	2751	38534472	ELEC 2/10 COPIER LEASE	125.00	
ELECTIONS	Total 270							250.00	0.00

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Dept Title	Dept C	GL Trite	GL, Code	Vendor Name	Ven	Document	Transaction Description	Debit	Credit
EMERGENCY COMMUNICATION DIVISION	635	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3619206	EMER COM 2/19 ACT# 287343846709 PHONE 1/20- 2/19	83.76	
EMERGENCY COMMUNICATION DIVISION	Total 635							83.76	0.00
EMERGENCY MANAGEMENT	630	PHOTO COPIES/SUPPLIES	53030	GREAT AMERICA FINANCIAL	2751	38670320	EMER MGMT 2/28 COPIER LEASE	179.00	
ı		TELEPHONE SERVICES	26199	АТ&Т МОВІLІТУ	5209	3615501	EMER MGMT 2/19 ACT# 287342194111 PHONE 1/20- 2/19	129.84	
EMERGENCY MANAGEMENT	Total 630							308.84	0.00
EMERGENCY MEDICAL SERVICES	345	GENERAL OFFICE SUPPLIES	53020	DUDLEY ALYSHA A	1491	6635	EMS 2/18 BUSINESS CARDS- C. MACEK	79.00	
			53020	GULF COAST HARDWARE LLC	63198	196548	EMS 2/16 PHONE, PHONE WALL PLATES	27.73	
		SUPPLIES/OPERATING EXPENSES	53980	BOUND TREE MEDICAL, LLC	412	85661815	EMS 2/13 ALCOHOL PADS, PULL TITE SEALS	340,24	
			53980	BOUND TREE MEDICAL, LLC	412	85664996	EMS 2/17 ORAL-NASAL CANNUAL	1,258.74	
		EMPLOYMENT EXPENSES	62430	DISA INC	1698	2724129	EMS 2/15 EMPLOYEE BACKGROUND CHECK	184.56	
		TELEPHONE SERVICES	26199	AT&T MOBILITY	5209	3615504	EMS 2/11 ACT# 826401254 LAPTOP WIFI 2/12- 3/11	279.63	
		TRAVEL/DUES/SUBSCRIPTI	66505	HALL DONNA	EM	PO3452	EMS 2/26 TRAVEL REIMB- LOLITA, TX 2/26/25	35.00	
		UTILITIES	00999	SEAPORT LAKES WATER SYSTEM LLC	1560	1895	EMS STH 2/8 WATER	33.00	
			00999	WHITE TRASH SERVICES	1952	276245	EMS STH 2/20 MAR 2025 TRASH SVC	103.04	
		VEHICLE FUEL/OIL/SERVICE	67120	AZALIA BONUZ, TAX ASSESSOR	4042	1437579	EMS 2/19 REPLACEMENT PLATES ONLY	6.50	

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Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document Number	Transaction Description	: -	:
EMERGENCY MEDICAL SERVICES	Total 345						Total Total	2,347.44	Credit 0.00
EXTENSION SERVICE	110	PROGRAM SUPPLIES	53310	GULF COAST HARDWARE LLC	63199	196613	EXT SVC 2/18 LUMBER, TAPE, HANGER,	57.40	
		VEHICLE FUEL/OIL/SERVICE	67120	AZALIA BONUZ, TAX. ASSESSOR	4042	1179637	HARDWARE EXT SVC 2/20	7.50	
			67120	AZALIA BONUZ, TAX ASSESSOR	4042	1179643	REGISTRATION EXT SVC 2/20 REGISTRATION	7.50	
EXTENSION SERVICE	Total 110								
FIRE PROTECTION-OLIVIA/P ALTO	650	SUPPLIES/OPERATING EXPENSES	53980	TRI-WHOLESALE COMPANY, INC.	7637	9301121	OPA VFD 2/20 OIL DRY	72.40	0.00
FIRE PROTECTION-OLIVIA/P ALTO	Total 650							85.80	00:00
FIRE PROTECTION-PORT O'CONNOR	089	SERVICES	65740	AXCESS FIRE & SAFETY SUPPLY IN	70630	1933	POC VFD 2/18 ANNUAL NFPA HOSE & LADDER TESTING	2,433.00	
FIRE PROTECTION-PORT O'CONNOR	Total 680							2,433.00	0.00
FIRE PROTECTION-SIX MILE	695	UTILMES	00999	VICTORIA ELECTRIC COOP, INC	8205	9812700	6MILE VFD 2/26 ACT# 981270-073 EFEC 107 207	123.68	
FIRE PROTECTION-SIX MILE	Total 695						117-111 2377 3370	123.68	0.00
INFORMATION TECHNOLOGY	275	UTILITIES-117 W. ASH ST. BUILDING	60999	CENTERPOINT ENERGY	1805	2799453	IT 2/27 ACT# 2799453-2 CCF	59.62	
			60999	REPUBLIC SERVICES #847	8897	0847001	> 1.24- 2.124 IT 2/26 ACT# 3-0847-0004634 MAR 2025 TRASH	40.64	

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					•				
Dept Title	Dept C	GI. Title	GL Code	Vendor Name	Ven	Document	Transaction Description	Debit	Credit
INFORMATION TECHNOLOGY	Total 275							100.26	0.00
JAIL OPERATIONS	180	JAJL MAINTENANCE/SUPPLIES	53420	DASH MEDICAL GLOVES INC	1514	INV1326	JAIL 2/19 GLOVES	303.60	
			53420	PERFORMANCE FOOD GROUP INC	63650	3128330	JAIL 2/27 SANITIZER, ZIPLOCK BAGS	57.19	
		GROCERIES	53955	PERFORMANCE FOOD GROUP INC	63650	3128330	JAIL 2/27 INMATE GROCERIES	1,344.21	
i		MISCELLANEOUS	63920	GUARD MASTER	2737	90684	JAIL 2/7 INSPECTION, FUSE LINKS, BLOW OFF CAPS, O-RINGS	335.00	
			63920	CRIST JEREMY	3873	005299	JAIL 2/20 CLEAN KITCHEN EXHAUST SYSTEM	915.00	
		PHYSICALS	64670	GRANT ROBERT W	2338	89	JAIL 2/14 L3 EMPLOYEE EVAL	200.00	
		PRISONER MEDICAL SERVICES	64910	SOUTHERN HEALTH PARTNERS	3460	OCP217	JAIL 1/31 JAN 2025 COST POOL OVERAGE	4,896.39	
JAIL OPERATIONS	Total 180							8,051.39	0.00
JUSTICE OF PEACE PRECINCT #2	460	POSTAGE	64790	PITNEY BOWES BANK INC PURCHASE	16931	0534106	JP2 2/5 ACT# 8000-9090-0534-1065 OVERLIMIT FEE	39.00	
JUSTICE OF PEACE PRECINCT #2	Total 460							39.00	0.00
JUSTICE OF PEACE-PRECINCT #4	480	TELEPHONE SERVICES	66192	MCI MEGA PREFERRED	5035	POMCJ0	CALCO 2/19 ACT# 08615304863 LONG DISTANCE SVC	0.04	
JUSTICE OF PEACE-PRECINCT #4	Total 480							0.04	0.00
JUSTICE OF PEACE-PRECINCT #5	490	COPY MACHINE LEASE	61340	GREAT AMERICA FINANCIAL	2751	38573245	JP5 2/14 COPIER LEASE	00.69	
		Utilities	00999	VICTORIA ELECTRIC COOP, INC	8205	5292700	JPS 2/26 ACT# \$2927-001 ELEC 1/17-2/17	70.39	

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GL Title
63070 ASSIGNED-ATTORNEY FEES
FIRE & SECURITY SERVICES 62630
62630
62630
62955
64790
66192
66192
UTILITIES-PORT O'CONNOR 66620 LIBRARY
70550
71146

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Dept Title	Dept C	GL Title	GI. Code	Vendor Name	Ven	Document Number	Transaction Description	Debit	Credit
MISCELLANEOUS	280	TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615536	MUSEUM 2/22 ACT# 361-553-6868- 083005-5 PHONE 2/22- 3/21	74.97	
			66192	MCI MEGA PREFERRED	5035	POMCI0	CALCO 2/19 ACT# 08615304863 LONG DISTANCE SVC	55.81	
MISCELLANEOUS	Total 280							130.78	0.00
NO DEPARTMENT	666	COBRA PREMIUM COLLECTED IN ADVANCE	20501	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	1,081.54	
		ACCRUED UNITED WAY	20525	UNITED WAY OF CALHOUN COUNTY	8019	PO0228	CALCO 2/26 FEB 2025 DONATIONS	10.00	
		ACCRUED MISCELLANEOUS	20533	ТМРА	7723	PO0228	CALCO 2/26 FEB 2025 PREMIUMS	286.16	
		ACCRUED INSURANCE- ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025 PREMIUMS	57.25	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	7,515.80	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025 PREMIUMS	229,599.37	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	8/1/1	3281020	CALCO 1/21 FEB 2025 PREMIUMS	459.54	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	1,130.10	
		DUE TO JP COLLECTIONS ATTORNEY	20770	MCCREARY VESELKA BRAGG ALLEN	5255	298246	JP2 1/24 COLLECTION FEES	70.50	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	298946	JP2 2/10 COLLECTION FEES	260.90	
			20770	MCCREARY VESELKA BRAGG ALLEN	5255	298947	JP2 2/10 COLLECTION FEES	471.30	
NO DEPARTMENT	Total 999							241,242.46	0.00
ROAD AND BRIDGE-PRECINCT#1	540	GENERAL OFFICE SUPPLIES	53020	DUDLEY ALYSHA A	1491	6647	RB1 2/24 BUSINESS CARDS- D. HALL	00.66	
			53020	AQUA BEVERAGE CO	68	140943	RB1 2/19 WATER	54.25	

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if Credit	1,800.00	31.98	1,152.00	9.52	173.32	640.84	264.00	71.52	41.58	313.64	35.85	120.05	91.62	38.01	4,937.48 0.00	63.25
Transaction Description Debit	RB1 2/17 300' POLY PIPE	RB1 2/20 (2) RAKES	RB1 2/18 (30) 55G LINERS	RB1 2/19 HARDWARE	RB1 2/20 UNIFORMS	RBI 2/26 ACT# 3-0847-0010464 MAR 2025 TRASH	RBI 2/19 ACT# 287336338169 CAMERA WIFI 1/20- 2/19	RB1 2/20 ACT# 287333689816 IPAD WIFI 2/21-3/20	RBI 2/15 ACT# 287343529199 PHONE 1/16- 2/15	RB1 2/26 ACT# 981270-020 ELEC 1/17- 2/17	RB1 2/26 ACT# 981270-029 ELEC 1/17- 2/17	RB1 2/26 ACT# 981270-016 ELEC 1/17- 2/17	RB1 2/26 ACT# 981270-025 ELEC 1/17- 2/17	RBI 2/26 ACT# 981270-028 ELEC 1/17- 2/17		RB2 2/10 ELBOW FITTS, O-RING, SCREWS- BLADE
Document	PO5402	196657	2621596	196644	4221705	0847001	3612500	3619203	3619209	9812700	9812700	9812700	9812700	9812700		W32080
Ven	34020	63191	6192	63191	856	8897	5209	5209	5209	8205	8205	8205	8205	8205		234
Vendor Name	INLAND DREDGING COMPANY LLC	GULF COAST HARDWARE LLC	GULF COAST PAPER CO INC	GULF COAST HARDWARE LLC	CINTAS CORPORATION LOC. 083	REPUBLIC SERVICES #847	AT&T MOBILITY	AT&T MOBILITY	AT&T MOBILITY	VICTORIA ELECTRIC COOP, INC		DOGGETT HEAVY MACHINERY SERV				
GL Code	53580	53595	53640	53992	53995	65929	66192	66192	66192	00999	00999	66614	66614	66614		53210
GL Title	PIPE	TOOLS	JANITOR SUPPLIES	SUPPLIES-MISCELLANEOUS	UNIFORMS	GARBAGE COLLECTION	TELEPHONE SERVICES			UTILITIES		UTILITIES-PARKS				MACHINERY PARTS/SUPPLIES
Dept C															Total 540	550
Dept Title															ROAD AND BRIDGE-PRECINCT #1	ROAD AND BRIDGE-PRECINCT #2

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Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document	Transaction Description	Debit	Credit
			53210	GULF COAST HARDWARE LLC	63192	196486	RB2 2/13 HARDWARE	3.19	
			53210	GULF COAST HARDWARE LLC	63192	196590	RB2 2/18 MISC SUPP	7 99	
	-		53210	GULF COAST HARDWARE LLC	63192	196600	RB2 2/18 BIT SET	13.99	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301120	RB2 2/13 CFI FUEL, FUEL FILTER CAP	119.24	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301120	RB2 2/13 CF1 BREATHER, LUBE	24.25	
			53210	VICTORIA FARM EQUIPMENT CO INC	8207	73913	RB2 2/13 PLOW BO, TOP LOCK NUT	14.85	
		KOAD & BRIDGE SUPPLIES	53510	KC LEASE SERVICE INC	2893	80995	RB2 1/31 124T 3/4" TO DUST LIMESTONE	4,648.33	
		SUTTLES-MISCELLANEOUS MACHINERY/EQUIPMENT REPAIRS	53992 63530	DANIEL INDUSTRIES CROSSROADS TIRE SERVICE LLC	3695 7059	19606 4000978	RB2 2/19 SHOP HEATER RB2 2/18 (4) TIRES	89.21	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3612124	INSTALLATION RB2 2/19 ACT# 287334092329 PHONE 1/20- 2/19	268.07	
	÷	TRAVEL IN COUNTY	66476	JUREK LESA	1088	PO5502	RB2 2/27 IN-CNTY TRAVEL REIMB- 01/01- 02/28	130.90	
		UTILITIES	00999	VICTORIA ELECTRIC COOP, INC	8205	9812700	RB2 2/26 ACT# 981270-007 ELEC 1/27- 2/26	10.97	
			00999	VICTORIA ELECTRIC COOP, INC	8205	9812700	RB2 2/26 ACT# 9812/10-010 ELEC 1/27-2/26	10.97	
			00999	VICTORIA ELECTRIC COOP, INC	8205	9812700	RB2 2/26 ACT# 981270-017 ELEC 1/17- 2/17	245.10	
			00999	VICTORIA ELECTRIC COOP, INC	8205	9812700	RB2 2/26 ACT# 981270-027 ELEC 1/17- 2/17	102.58	
		UTILITIES-PARKS	66614	VICTORIA ELECTRIC COOP, INC	8205	9812700	RB2 2/26 ACT# 981270-013 ELEC 1/17- 2/17	136,03	
ROAD AND BRIDGE-PRECINCT #2	Total 550							7,412.46	0.00
ROAD AND BRIDGE-PRECINCT #3	260	MACHINERY PARTS/SUPPLIES	53210	O REILLY AUTO PARTS	5803	0575415	RB3 2/20 TRAILER SUPP	38.32	

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Credit								40.38			40.38						
Debit	134.99	78.76	110.82	137.98	2,544.77	9.48	98.73		34.17	144.30	3,351.43	42.18	11.93	44.94	318.73	13.17	235.73
Transaction Description	RB3 2/20 CHAIN, CABLE, MIS SUP- TRAILER	RB3 2/7 HITCH PIN, BALL MNT	RB3 2/20 BATTERY, TERMINAL- TRAILER	RB3 2/19 FIL TERS	RB3 2/25 300G DIESEL, 681G UNLEADED	RB3 2/19 FRESHENER	RB3 2/19 MAILBOX SUPP	RB3 2/4 CREDIT ON RETURN OF CUT OFF WHEEL, TOWING CLIP	RB3 2/20 LOCK NUTS, DISC	RB3 2/19 UNIFORMS		RB4 2/14 FILTERS	RB4 2/19 FILTERS	RB4 2/19 OIL	RB4 2/19 MIG WELDING GUN	RB4 2/19 MAT, MOP	RB4 2/25 ACT# 361-785-3141- 010165-5 PHONE 2/25- 3/24
Document	196673	9301120	9301121	P22644	8289325	4221549	196628	9301120	9301121	4221549		9301120	9301121	9301121	9158446	4221548	3617853
Ven	63193	7637	7637	8232	3638	856	63193	7637	7637	856		7637	7637	7637	136	958	2855
Vendor Name	GULF COAST HARDWARE LLC	TRI-WHOLESALE COMPANY, INC.	TRI-WHOLESALE COMPANY, INC.	VICTORIA OLIVER COMPANY INC	NEW DISTRIBUTING CO INC	CINTAS CORPORATION LOC. 083	GULF COAST HARDWARE LLC	TRI-WHOLESALE COMPANY, INC.	TRI-WHOLESALE COMPANY, INC.	CINTAS CORPORATION LOC. 083		TRI-WHOLESALE COMPANY, INC.	TRI-WHOLESALE COMPANY, INC.	TRI-WHOLESALE COMPANY, INC.	AIRGAS USA, LLC	CINTAS CORPORATION LOC. 083	FRONTIER COMMUNICATIONS
GI. Code	53210	53210	53210	53210	53540	53640	53992	53992	53992	53995		53210	53210	53540	53595	53992	66192
GL Title					GASOLINE/OIL/DIESEL/GRE	JANITOR SUPPLIES	SUPPLIES-MISCELLANEOUS			UNIFORMS		MACHINERY PARTS/SUPPLIES		GASOLINE/OIL/DIESEL/GRE	TOOLS	SUPPLIES-MISCELLANEOUS	TELEPHONE SERVICES
Dept C											Total 560	570					
Dept Title											ROAD AND BRIDGE-PRECINCT #3	ROAD AND BRIDGE-PRECINCT #4					

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
1000 - GENERAL FUND

Credit													0.00					
Debit	0.13	183,94	88.67	117.82	61.24	38.97	223.51	21.72	135.33	111.05	54.50	55.16	1,758.72	83.37	501.44	148 22	148.22	159.92
Transaction Description	CALCO 2/19 ACT# 08615304863 LONG DISTANCE SVC	RB4 2/19 UNIFORMS	RB4 3/1 ACT# 7550020000 WATER	RB4 3/1 ACT# 7550025300 WATER	RB4 3/1 ACT# 7550084500 WATER	RB4 2/26 ACT# 44636806-001 ELEC 1/17- 2/17	RB4 2/26 ACT# 981270-001 ELEC 1/17- 2/17	RB4 2/26 ACT# 981270-005 ELEC 1/27- 2/26	RB4 2/26 ACT# 981270-006 ELEC 1/17- 2/17	RB4 2/26 ACT# 981270-009 ELEC 1/17- 2/17	RB4 2/26 ACT# 981270-011 ELEC 1/17-2/17	RB4 2/26 ACT# 981270-012 ELEC I/17- 2/17		SO 2/20 SCRAPER MATS	SO 2/13 REPL LEAK SEAL, GEAR OIL- U39	SO 2/12 OIL CHG- U2	SO 2/18 FULL SVC & OIL CHG- U45	SO 2/20 FULL SVC & OIL CHG- OSG22
Document	POMCI0	4221548	7550020	7550025	7550084	4463680	9812700	9812700	9812700	9812700	9812700	9812700		4221705	4000947	58008	50224	50258
Ven	5035	856	62370	62370	62370	8205	8205	8205	8205	8205	8205	8205		958	7059	3678	3678	3678
Vendor Name	MCI MEGA PREFERRED	CINTAS CORPORATION LOC. 083	PORT O'CONNOR IMPROVEMENT	PORT O'CONNOR IMPROVEMENT	PORT O'CONNOR IMPROVEMENT	VICTORIA ELECTRIC COOP, INC	VICTORIA ELECTRIC COOP, INC	VICTORIA ELECTRIC COOP, INC	VICTORIA ELECTRIC COOP, INC	VICTORIA ELECTRIC COOP, INC	VICTORIA ELECTRIC COOP, INC	VICTORIA ELECTRIC COOP, INC		CINTAS CORPORATION LOC. 083	CROSSROADS TIRE SERVICE LLC	KNEUPPER CARROLL	KNEUPPER CARROLL	KNEUPPER CARROLL
GL Code	26193	06599	00999	00999	00999	00999	00999	00999	00999	66600	00999	00999		53020	53520	60360	60360	60360
GL Title		UNIFORMS	UTILITIES			·								GENERAL OFFICE SUPPLIES	TIRES AND TUBES	AUTOMOTIVE REPAIRS		
Dept C													Total 570	760				
Dept Title											,		ROAD AND BRIDGE-PRECINCT #4	SHERIFF				

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
1000 - GENERAL FUND

Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document Number	Transaction Description	Debit	Credit
			60360	KNEUPPER CARROLL	3678	50315	SO 2/22 FULL SVC & OIL CHG- U48	180.00	
			60360	VICTORIA COMMUNICATION SERVICE	8229	VIC5127	SO 2/10 REMOVE EQUIP FROM AUCTION CARS	1,525.00	
		MACHINE MAINTENANCE	63500	AZALIA BONUZ, TAX ASSESSOR	4042	PO7602	SO 2/18 REGISTRATION	16.75	
		TELEPHONE SERVICES	66192	MCI MEGA PREFERRED	5035	POMCI0	CALCO 2/19 ACT# 08615304863 LONG DISTANCE SVC	12.50	
			66192	AT&T MOBILITY	5209	3612189	SO 2/19 ACT# 287284474152 PHONE 1/20-2/19	816.61	
SHERIFF	Total 760							3,592.03	00:0
WASTE MANAGEMENT	380	SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63192	196633	WASTE MGMT 2/19 HARDWARE	2.80	
			53992	GULF COAST HARDWARE LLC	63192	196761	WASTE MGMT 2/24 POWER STRIP	17.58	
			53992	GULF COAST HARDWARE LLC	63192	196762	WASTE MGMT 2/24 WALLPLATE	0.79	
		UTILITIES	00999	VICTORIA ELECTRIC COOP, INC	8205	9814860	WASTE MGMT 2/26 ACT# 981486-002 ELEC 1/17- 2/17	84.63	
			00999	VICTORIA ELECTRIC COOP, INC	8205	9814860	WASTE MGMT 2/26 ACT# 981486-003 ELEC 1/17- 2/17	67.84	
		WASTE DISPOSAL FEES	66830	REPUBLIC SERVICES #847	8897	0847001	WASTE MGMT 1/31 ACT# 3-0847-0013749 JAN 2025 TRASH	15,494.65	
WASTE MANAGEMENT	Total 380							15,668.29	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
2610 - AIRPORT FUND

Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	666	OTHER SERVICES	64320	AARC	1139	001115414	AIRPORT 2/6 2025 SWPP	650.00	
		UTILITIES	00999	ENVIKONIMENTAL INC REPUBLIC SERVICES #847	8897	0847001	TRAINING AIRPORT 2/26 ACT# 3-0847-0006197 MAR 2025	68.20	
NO DEPARTMENT	Total 999		·	-	÷		IKASH	718.20	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
2699 - JUVENILE CASE MANAGER FUND

Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document	Transaction Description	Debit	Credit
NO DEPARTMENT	666	ACCRUED INSURANCE- ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025 PREMIUMS	0.02	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	2.04	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	86.70	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025 PREMIUMS	0.19	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	0.36	
NO DEPARTMENT	Total 999							89.31	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
2716 - GRANTS FUND

Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document	Transaction Description	Debit	Credit
NO DEPARTMENT	666	ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	14.13	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025 PREMIUMS	251.78	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	5.72	
		PROGRAMS: SUMMER/AUTHOR VISITS	64970	FUN EXPRESS LLC	25151	7360135	LIBRARY 2/11 PRIZES FOR CHILDREN'S PROGRAM	381.92	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3612189	OSG 2/19 ACT# 287284474152 PHONE 1/20- 2/19	00'099	:
NO DEPARTMENT	Total 999							1,313.55	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
2736 - POC COMMUNITY CENTER

Dept Title	Dept C	GL, Title	GL Code	Vendor Name	Ven	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	666	ACCRUED INSURANCE- ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	0.01	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	0.75	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	31.92	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	CALCO 1/21 FEB 2025 PREMIUMS	0.07	
		RENTAL DEPOSITS	20820	MARWITZ CHERYL	RF3	1039	POCCC 1/15 DEPOSIT REFUND	350.00	
		UTILITIES-POC COMMUNITY CENTER	66616	PORT O'CONNOR IMPROVEMENT	62370	7550084	POCCC PAVILION 3/1 ACT# 7550084300 WATER	181.02	
			91999	PORT O'CONNOR IMPROVEMENT	62370	7550084	POCCC 3/1 ACT# 7550084400 WATER	192.33	
			91999	VICTORIA ELECTRIC COOP, INC	8205	9812700	POCCC 2/26 ACT# 981270-023 ELEC 1/17-2/17	719.65	
NO DEPARTMENT	Total 999							1,475.75	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
5111 - CAP.PROJ.-CDBG-DR INFRASTRUCTURE

Credit		Production of the state of the	00'0
Debit	16,100.00		16,100.00
Transaction Description	CAP PROJ 2/12 CHOC BAY	FK-SVCS 6/3/24-2/2/25	
Ven Document ID Number	5310011		
Ven	2601		
GL Code Vendor Name	G&W ENGINEERS, INC.		
GL Code	62454		
GL Title	ENGINEERING SERVICES		
Dept C GL Title	666		Total 999
Dept Title	NO DEPARTMENT		NO DEPARTMENT

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25

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Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	666	DUE TO OTHER GOVERNMENTS	20749	CALHOUN CO. NAVIGATION DIST.	1106	PO2025F	TAX A/C 2/28 FEB 2025 TAX COLLECS	95.90	
			20749	CALHOUN CO. WATER CONTROL	895	PO2025F	TAX A/C 2/28 FEB 2025 TAX COLLECS	76.85	
NO DEPARTMENT	Total 999							172.75	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 03.05.25
9200 - JUVENILE PROBATION FUND

Dept Title	Dept C	GL Title	GL Code	Vendor Name	Ven	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	666	ACCRUED MISCELLANEOUS	20533	TMPA	7723	PO0228	CALCO 2/26 FEB 2025	29.54	
		ACCRUED INSURANCE- ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	8777	3281020	PREMIUMS CALCO 1/21 FEB 2025 PREMIUMS	1.20	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025 PREMINAS	153,20	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025	4,745.85	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	PKEMIUMS CALCO 1/21 FEB 2025 PREMIUMS	9.68	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	3281020	CALCO 1/21 FEB 2025 PREMIUMS	22.94	
		PREVENTION & INTERVENTION - GRANT S	64839	YOUTH ADVOCATE PROGRAMS INC	9212	0120252	JUV PROB 2/12 JAN 2025 SVCS	7,566.00	
	·	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3617463	JUV PROB 2/11 ACT# 2872985876979 PHONE 1/12- 2/11	320.27	
NO DEPARTMENT	Total 999								
								12,848.68	0.00
Report Total									
			٠					357,516.12	42.10

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR --- March 5, 2025

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS		557;119.67
TOTAL TRANSFERS BETWEEN FUNDS		\$ 720,100.96
TOTAL NURSING HOME UPL EXPENSES		\$ 1,356,651,33
TOTAL INTER-GOVERNMENT TRANSFERS	the first of the second of the	\$ 10,624,73
GRAND TOTAL DISBURSEMENTS APPROVED March 5, 2025		\$ 2,644,496.69



MEMORIAL MEDICAL CENTER COMMISSIONERS COURT APPROVAL LIST FOR --- March 5, 2025

DAVADIES AND DAVOGII		
PAYABLES AND PAYROLL		
2/27/2025 Weekly Payables	441,506.57	
2/27/2025 Patient Refunds	7,450.00	
3/3/2025 McKesson-340B Prescription Expense	132.06	
3/3/2025 Amerisource Bergen-340B Prescription Expense	147.18	
3/3/2025 Amerisource Bergen-340B Prescription Expense	1,107.91	
Prosperity Electronic Bank Payments		
3/3/2025 90 Degree Benefits - employee insurance claims	35,442.54	
3/3/2025 HPHG - healh insurance premium payment	69,619.87	
3/3/2025 Pay Plus-Patient Claims Processing Fee	1,713.51	
3/3/2025 Credit Card Processing Fee	0.03	
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS		\$ 557,119,67
TRANSFERS BETWEEN FUNDS-MMC	-	
	500 000 00	
3/3/2025 Transfer from Prosperity Operating Account to Prosperity Money Market	500,000.00	
TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES 2/27/2025 MMC Operating to Ashford-Correction of insurance payment deposited into MMC Operating		
in error 2/27/2025 MMC Operating to Solera-Correction of insurance payment deposited into MMC Operating in	17,385.33	
error 2/27/2025 MMC Operating to Fort bend-Correction of insurance payment deposited into MMC Operating	9,451.29	
in error 2/27/2025 MMC Operating to Broadmoor-Correction of insurance payment deposited into MMC	5,472.68	
Operating in error 2/27/2025 MMC Operating to The Crescent-Correction of insurance payment deposited into MMC	8,015.30	
Operating in error 2/27/2025 MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into	4,923.60	
MMC Operating in error 2/27/2025 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC	81,578.70	
operating in error 2/27/2025 MMC Operating to Bethany-Correction of insurance payment deposited into MMC Operating	67,062.89	
in error	26,211.17	
TOTAL TRANSFERS BETWEEN FUNDS	and the second of the second o	\$ 720,100.96
NURSING HOME UPL EXPENSES		
3/3/2025 Nursing Home UPL-Cantex Transfer	£9£ 400 0E	
3/3/2025 Nursing Home UPL-Nexion Transfer	686,409.05	
3/3/2025 Nursing Home UPL-HMG Transfer	177,472.62	
3/3/2025 Nursing Home UPL-Tuscany Transfer	674.88	
3/3/2025 Nursing Home UPL-HSL Transfer	356,097.93 115,279.32	
	113,2/3:32	
QIPP CHECKS TO MMC		
3/3/2025 Ashford - Wellpoint QIPP Y7 Comp 1 Interim Allocation	7,305.92	
3/3/2025 Broadmoor-Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,475.29	
3/3/2025 Crescent - Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,043.06	
3/3/2025 Fort Bend - Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,291.01	
3/3/2025 Solera - Wellpoint QIPP Y7 Comp 1 Interim Allocation	2,268.43	
3/3/2025 Tuscany - Wellpoint QiPP Y7 Comp 1 Interim Allocation	4,333.81	
TOTAL NURSING HOME UPLEXPENSES		
The second secon	ا رئیشان داده است. ا	\$ 1,356,651.33
INTER-GOVERNMENT TRANSFERS		
3/3/2025 Accrued IGT DSH	10,624.73	
TOTAL INTER-GOVERNMENT TRANSFERS	· · · · · · · · · · · · · · · · · · ·	\$ 10,624.73
GRAND TOTAL DISBURSEMENTS APPROVED March 5, 2025		
Paraditional Personal rate Well Macon Ma(CU) 2 (5072)	deres de la constante	\$ 2,644,496,69

RECEIVED BY THE COUNTY AUDITOR ON

FEB 2 7 2025

MEMORIAL MEDICAL CENTER 02/27/2025 £ AP Open Invoice List 12:09 CALHOUN COUNTY, TEXAS ap_open_Invoice.template Due Dates Through: 03/20/2025 Vendor# Nendor Name Class Pay Code 11237 √ 3WON, LLC Invoice# Comment Tran Dt Inv Dt Due Dt No-Pay Check Dt Pav Gross Discount Net 3764 02/25/202 03/01/202 04/01/202 597,00 0.00 0.00 597.00 02/25/202 03/01/202 04/01/202 300.00 0.00 300.00 0.00 3937 02/25/202 05/01/202 06/01/202 199.00 0.00 0.00 199.00 Vendor Totals: Number Name Gross Discount No-Pay Net 11237 3WON, LLC 1.096.00 0.00 0.00 1,096.00 Vendor# /Vendor Name Class Pay Code A1680 4 AIRGAS USA, LLC - CENTRAL DIV М Invoice# Comment No-Pay Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount Net 5514102894 02/10/202 03/02/202 03/15/202 286.11 0.00 0.00 286.11 Vendor Totals: Number Name Gross Discount No-Pay Net A1680 AIRGAS USA, LLC - CENTRAL DIV 286.11 0.00 0.00 286.11 Vendor# /Vendor Name Class Pay Code 14028 -**AMAZON CAPITAL SERVICES** Tran Dt Inv Dt Invoice# Comment Due Dt Check Dt Pay Gross Discount No-Pay Net 1XCTNRPGY93R 02/18/202 02/10/202 03/12/202 1,682.31 0.00 0.00 1,682.31 , 1WJ4QGQ4XF79 02/18/202 02/10/202 03/12/202 850.40 0.00 850.40 0.00 GL1GVCX7M6F 02/18/202 02/11/202 03/13/202 321,96 0.00 0.00 1K7R11DMN6XY 02/18/202 02/14/202 03/16/202 925.26 0.00 0.00 XGHRM7JTRKM 02/18/202 02/15/202 03/17/202 171.47 0.00 0.00 171,47 XKWPXGV9GWQ 02/26/202 02/17/202 03/19/202 130.50 0.00 0.00 LVKQCGJC7HV 02/26/202 02/17/202 03/19/202 36.59 0.00 0.00 1WTKXRQ4KC3J 02/26/202 02/18/202 03/20/202 208.14 0.00 0.00 208.14 Vendor Totals: Number Name Gross Discount No-Pay Net 14028 AMAZON CAPITAL SERVICES 4.326.63 0.00 0.00 4,326.63 Vendor# Nendor Name Class Pay Code 12800 V AUTHORITYRX, LLC Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net 7000081231 02/18/202 02/06/202 03/08/202 3,386.02 0.00 0.00 3,386.02 Vendor Totals: Number Name Gross Discount No-Pay Net 12800 AUTHORITYRX, LLC 3,386.02 0.00 0.00 3.386.02 Vendor# /Vendor Name Class Pay Code W Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pav Net 83514227 02/19/202 01/31/202 02/25/202 323.56 0.00 0.00 323.56 Vendor Totals: Number Name Gross Discount No-Pav Net

		B1150	BAXTER HEALT	HCARE		323.56	0.00	0.00	323.56
Vendor# M2485	Vendor Name BAYER HEAL			Class M	Pay Code				
	/Invoice#	Comment	Tran Dt In	ıv Dt Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
J	6011792881			1/28/202 03/20/20	•	1,334.77	0.00	0.00	1,334.77
	Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
		M2485	BAYER HEALTH	CARE		1,334.77	0.00	0.00	1,334.77
Vendor# B1220 ~	Vendor Name BECKMAN C		ic	Class M	Pay Code				
i	r Invoice#	Comment	Tran Dt In	v Dt Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net ,
4	111839605		02/17/202 02	2/04/202 03/01/20)2	1,536.55	0.00	0.00	1,536.55
1	111859068		02/18/20202	2/13/202 03/10/20	02	5,016.58	0.00	0.00	5,016.58
1	7378571		02/19/202 02	2/14/20203/11/20	02	8,471.88	0.00	0.00	8,471.88 🗸
1	111871423		02/26/202 02	2/20/202 03/17/20	92	1,187.24	0.00	0.00	1,187.24
	Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
		B1220	BECKMAN COUL	LTER INC		16,212.25	0.00	0.00	16,212,25
Vendor#	/Vendor Name			Class	Pay Code	,			
B1320 🇸	BEEKLEY CO	RPORATIO	ON	М					
	/Invoice#	Comment	Tren Dt in	v Dt Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
1	MIN0183583		02/18/20201	1/14/202 02/18/20)2	199.00	0.00	0.00	199.00
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	Net
		B1320	BEEKLEY CORP	ORATION		199.00	0.00	0.00	199.00
Vendor#	Vendor Name			Class	Pay Code		-		
11072 🎝	BIO-RAD LAB	ORATORIE	ES, INC						
	Invoice#	Comment		v Dt Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
1	907972261	Comment		v Dt	•	Gross 618,02	Discount 0.00	No-Pay 0.00	Net 618.02
1	,	Comment	02/17/202 01)2			_	,
7	907972261	Comment	02/17/202 01	1/31/202 01/29/20	2	618.02	0.00	0.00	618.02 🗸
7	907972261 907972260		02/17/202 01	1/31/202 01/29/20 1/31/202 01/31/20	2	618.02 2,189.78	0.00	0.00 0.00 .0.00	618.02 \ 2,189.78 \ 431.55 \
111	907972261 907972260 908000005	Number	02/17/202 01 02/17/202 01 02/26/202 02	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20	2	618.02 2,189.78 431.55	0.00 0.00 0.00	0.00	618.02 /
\frac{1}{1} \text{Vendor#}	907972261 907972260 908000005 Vendor Totals:	Number 11072	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20	2	618.02 2,189.78 431.55 Gross	0.00 0.00 0.00 Discount	0.00 0.00 0.00 No-Pay	618.02 2,189.78 431.55 Net
Vendor# 81655	907972261 907972260 908000005 Vendor Totals:	Number 11072	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20	2 2 2	618.02 2,189.78 431.55 Gross	0.00 0.00 0.00 Discount	0.00 0.00 0.00 No-Pay	618.02 2,189.78 431.55 Net
4	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCI	Number 11072	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20 ATORIES, INC Class M	2 2 2	618.02 2,189.78 431.55 Gross	0.00 0.00 0.00 Discount	0.00 0.00 0.00 No-Pay	618.02 2,189.78 431.55 Net
4	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII	Number 11072 ENTIFIC CO	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Inv	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20 ATORIES, INC Class M	2 2 Pay Code Check Dt Pay	618.02 2,189.78 431.55 Gross 3,239.35	0.00 0.00 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00	618.02 2,189.78 431.55 Net 3,239.35
4	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCI	Number 11072 ENTIFIC CO Comment	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Into	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20 ATORIES, INC Class M v Dt Due Di	2 2 Pay Code Check Dt Pay	618.02 2,189.78 431.55 Gross 3,239.35	0.00 0.00 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00	618.02 2,189.78 431.55 Net 3,239.35
4	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII	Number 11072 ENTIFIC CO Comment Number	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Into	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20 ATORIES, INC Class M v Dt Due Di 2/04/202 02/18/20	2 2 Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24	0.00 0.00 0.00 Discount 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00 No-Pay 0.00	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24
4	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII	Number 11072 ENTIFIC CO Comment Number B1655	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20 ATORIES, INC Class M v Dt Due Di 2/04/202 02/18/20	2 2 Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross	0.00 0.00 Discount 0.00 Discount 0.00 Discount	0.00 0.00 0.00 No-Pay 0.00 No-Pay	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net
B1655 J	907972261 907972260 908000005 Vendor Totals: /Vendor Name BOSTON SCII Invoice# 704610457 Vendor Totals: Vendor Name	Number 11072 ENTIFIC CO Comment Number B1655	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT	1/31/202 01/29/20 1/31/202 01/31/20 2/11/202 02/26/20 ATORIES, INC Class M v Dt Due Dt 2/04/202 02/18/20	Pay Code Check DI Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross	0.00 0.00 Discount 0.00 Discount 0.00 Discount	0.00 0.00 0.00 No-Pay 0.00 No-Pay	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net
B1655 J	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII Invoice# 704610457 Vendor Totals: Vendor Name BROADMOOF Invoice# 022125	Number 11072 ENTIFIC CO Comment Number B1655 R AT CREEL Comment	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT KSIDE PARK Tran Dt Int 02/25/202 02	1/31/202 01/29/20 1/31/202 01/31/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/18/20 1/31/202 02/25/20	Pay Code Check Dt Pay TION Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross 1,005.24	0.00 0.00 0.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00 No-Pay 0.00	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net
B1655 J	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII Invoice# 704610457 Vendor Totals: Vendor Name BROADMOOF Invoice# 022125	Number 11072 ENTIFIC CO Comment Number B1655 RAT CREE Comment	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT KSIDE PARK Tran Dt Int 02/25/202 02	1/31/202 01/29/20 1/31/202 01/31/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/18/20 1/31/202 02/25/20	Pay Code Check Dt Pay TION Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross 1,005.24 Gross 5,313.46	0.00 0.00 0.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net
B1655 J	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII Invoice# 704610457 Vendor Totals: Vendor Name BROADMOOF Invoice# 022125	Number 11072 ENTIFIC CO Comment Number B1655 RAT CREEL Comment	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT KSIDE PARK Tran Dt Int 02/25/202 02 Name	1/31/202 01/29/20 1/31/202 01/31/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/25/20 1/31/202 02/25/20	Pay Code Check Dt Pay TION Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross 1,005.24 Gross 5,313.46 Gross	0.00 0.00 0.00 Discount 0.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net
81655 J Vendor# 11832	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII Invoice# 704610457 Vendor Totals: Vendor Name BROADMOOF Invoice# 022125 Vendor Totals:	Number 11072 ENTIFIC CO Comment Number B1655 RAT CREEL Comment	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT KSIDE PARK Tran Dt Int 02/25/202 02	1/31/202 01/29/20 1/31/202 01/31/20 1/31/202 01/31/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/25/20 1/31/202 02/25/20 1/31/202 02/25/20 1/31/202 02/25/20 1/31/202 02/25/20	Pay Code Check Dt Pay TION Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross 1,005.24 Gross 5,313.46	0.00 0.00 0.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net
81655 J Vendor# 11832	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII Invoice# 704610457 Vendor Totals: Vendor Name BROADMOOF Invoice# 022125 Vendor Totals:	Number 11072 ENTIFIC CO Comment Number B1655 RAT CREE Comment LY OL Number 11832	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT KSIDE PARK Tran Dt Int 02/25/202 02 Name BROADMOOR AT	1/31/202 01/29/20 1/31/202 01/31/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/26/20 1/31/202 02/25/20 1/31/202 02/25/20	Pay Code Check Dt Pay TION Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross 1,005.24 Gross 5,313.46 Gross	0.00 0.00 0.00 Discount 0.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net
Vendor# 11832 Vendor#	907972261 907972260 908000005 Vendor Totals: Vendor Name BOSTON SCII Invoice# 704610457 Vendor Totals: Vendor Name BROADMOOF Invoice# 022125 Vendor Totals:	Number 11072 ENTIFIC CO Comment Number B1655 RAT CREE Comment LY OL Number 11832	02/17/202 01 02/17/202 01 02/26/202 02 Name BIO-RAD LABOR DRPORATION Fran Dt Int 02/18/202 02 Name BOSTON SCIENT KSIDE PARK Tran Dt Int 02/25/202 02 Name BROADMOOR AT	I/31/202 01/29/20 I/31/202 01/31/20 I/31/202 02/26/20 I/31/202 02/26/20 I/ATORIES, INC Class M V Dt Due Dt I/204/202 02/18/20 I/IFIC CORPORA Class V Dt Due Dt I/21/202 02/25/20 I/IFIC CREEKSIDE P/ Class	Pay Code Check Dt Pay TION Pay Code Check Dt Pay 2	618.02 2,189.78 431.55 Gross 3,239.35 Gross 1,005.24 Gross 1,005.24 Gross 5,313.46 Gross	0.00 0.00 0.00 Discount 0.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 0.00 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 No-Pay	618.02 2,189.78 431.55 Net 3,239.35 Net 1,005.24 Net

1	196882		02/26/202 02/20/20)2 02/26/2 0:	2	109.00	0.00	0.00	109.00
	Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net
		11224	CABLES AND SENSOF	RS		109.00	0.00	0.00	109.00
Vendor# C1048 ✓	1	YTNUC		Class W	Pay Code				
i	Invoice#	Commen	Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pau	Mat
-	010125	•	02/25/202 02/25/20		•	519.00	0.00	No-Pay 0.00	Net 519.00 /
-					_	0,000	0.00	0,00	313.30
	Vendor Totals:	: Number	Name			Gross	Discount	No-Pay	Net
		C1048	CALHOUN COUNTY			519.00	0.00	0.00	519.00
	Vendor Name		•	Class	Pay Code				
14260 ./	CAREFUSION	SOLUTIO	DNS, LLC						
1	Invoice#	Comment		Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
1	70001689286		02/26/202 01/31/20	2 03/05/202	2	125.69	0.00	0.00	بر 125.69
									. 🗸
	Vendor Totals:		Name			Gross	Discount	No-Pay	Net
Vendor#	Vendor Name	14260	CAREFUSION SOLUTION		6	125.69	0.00	0.00	125.69
10541	CARESFIELD		•	Class	Pay Code				
10041 (Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Cheek Dt Dev	0	8 1	=	
/	2000291951	Commission	02/17/202 02/07/20	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
7			00 () 20c 023 () 20	e outouece	•	212.36	0.00	0.00	212.36 🗸
1	2000291952		02/17/202 02/07/20	2 03/09/202	!	348.00	0.00	0.00	348.00
J	200029230		02/18/202 02/12/20	2 03/14/202		154.14	0.00	0.00	154.14
	Vendor Totals:	Number	Mama						
						Green	Discount	No Day	*1
			Name CARESFIELD	,		Gross 714 50	Discount	No-Pay	Net
Vendor#	Vendor Name		CARESFIELD	Class	Pay Code	Gross 714.50	Discount 0.00	No-Pay 0.00	Net 714.50
Vendor# C1992	Vendor Name CDW GOVER	10541	CARESFIELD	Class M	Pay Code			-	
	j .	10541	CARESFIELD		Pay Code Check Dt Pay			0.00	714.60
	CDW GOVER	10541 NMENT, IN	CARESFIELD	M Due Dt	Check Dt Pay	714.50	0.00	-	
C1992 \	CDW GOVERI	10541 NMENT, IN	CARESFIELD IC. Tran Dt Inv Dt	M Due Dt 2 03/03/202	Check Dt Pay	714.50 Gross	0.00 Discount	0.00 No-Pay	714.50 Net
C1992 \J	CDW GOVERI Invoice# AC6AJ6K AC69/3J	10541 NMENT, IN Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202	M Due Dt 2 03/03/202	Check Dt Pay	714.50 Gross 8,256.00 249.41	0.00 Discount 0.00 0.00	0.00 No-Pay 0.00	714.50 Net 8,256.00 249.41
C1992 \J	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals:	10541 NMENT, IN Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202	M Due Dt 2 03/03/202 2 03/10/202	Check Dt Pay	714.50 Gross 8,256.00 249.41 Gross	0.00 Discount 0.00 0.00 Discount	0.00 No-Pay 0.00 0.00 No-Pay	714.50 Net 8,256.00 249.41 Net
C1992 \	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals:	10541 NMENT, IN Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202	M Due Dt 2 03/03/202 2 03/10/202 NG.	Check Dt Pay	714.50 Gross 8,256.00 249.41	0.00 Discount 0.00 0.00	0.00 No-Pay 0.00	714.50 Net 8,256.00 249.41
C1992 \(\sqrt{Vendor#} \)	CDW GOVERGINVOICE# AC6AJ6K AC69/3J Vendor Totals:	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202	M Due Dt 2 03/03/202 2 03/10/202 NG.	Check Dt Pay	714.50 Gross 8,256.00 249.41 Gross	0.00 Discount 0.00 0.00 Discount	0.00 No-Pay 0.00 0.00 No-Pay	714.50 Net 8,256.00 249.41 Net
C1992 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202	M Due Dt 2 03/03/202 2 03/10/202 NG. Class W	Check Dt Pay	714.50 Gross 8,256.00 249.41 Gross	0.00 Discount 0.00 0.00 Discount 0.00	0.00 No-Pay 0.00 0.00 No-Pay 0.00	714.50 Net 8,256.00 249.41 Net 8,505.41
C1992	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202	M Due Dt 2 03/03/202 2 03/10/202 NG. Class W Due Dt 2 02/25/202	Check Dt Pay Pay Code Check Dt Pay	714.50 Gross 8,256.00 249.41 Gross 8,505.41	0.00 Discount 0.00 0.00 Discount	0.00 No-Pay 0.00 0.00 No-Pay	714.50 Net 8,256.00 249.41 Net 8,505.41
Vendor# C1730	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT Invoice# 021325	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202	M Due Dt 2 03/03/202 2 03/10/202 NG. Class W Due Dt 2 02/25/202	Check Dt Pay Pay Code Check Dt Pay	714.50 Gross 8,256.00 249.41 Gross 8,505.41	0.00 Discount 0.00 Discount 0.00	0.00 No-Pay 0.00 0.00 No-Pay 0.00	714.50 Net 8,256.00 249.41 Net 8,505.41
Vendor# C1730	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORTINVOICE#	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202	M Due Dt 2 03/03/202 2 03/10/202 HG. Class W Due Dt 4 02/25/202	Check Dt Pay Pay Code Check Dt Pay	714.50 Gross 8,256.00 249.41 Gross 8,505.41	0.00 Discount 0.00 Discount 0.00	0.00 No-Pay 0.00 0.00 No-Pay 0.00	Net 8,256.00 249.41 Net 8,505.41 Net 100.87
Vendor# C1730	CDW GOVERNINVOICE# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORTINVOICE# 021325	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 1 5 N V	M Due Dt 2 03/03/202 2 03/10/202 NC. Class W Due Dt 2 02/25/202	Check Dt Pay Pay Code Check Dt Pay	714.50 Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87	O.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay	714.50 Net 8,256.00 249.41 Net 8,505.41
Vendor# C1730	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT Invoice# 021325	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 1 5 N V 02/26/202 02/13/202	M Due Dt 2 03/03/202 03/10/202 05. Class W Due Dt 02/25/202 02/25/202	Check Dt Pay Pay Code Check Dt Pay CL St.	714.50 Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87	O.00 Discount 0.00 Discount 0.00 Discount 0.00	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay	Net 8,256.00 249.41 Net 8,505.41 Net 100.87
Vendor# C1730	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT Invoice# 021325 021325A	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 1 5 N V 02/26/202 02/13/202	M Due Dt 2 03/03/202 03/10/202 05. Class W Due Dt 02/25/202 02/25/202	Check Dt Pay Pay Code Check Dt Pay CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87	O.00 Discount 0.00 Discount 0.00 Discount 0.00 0.00	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00	Net 8,256.00 249.41 Net 8,505.41 Net 100.87 68.92
Vendor# C1730	CDW GOVERNINVOICE# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORTINVOICE# 021325	10541 NMENT, IN Comment Number C1992	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 1 S W V 02/26/202 02/13/202	M Due Dt 2 03/03/202 03/10/202 03/10/202 05/25/202 02/25/202	Pay Code Check Dt Pay CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87	O.00 Discount 0.00 Discount 0.00 Discount 0.00 0.00	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00	Net 8,256.00 / 249.41 / Net 8,505.41 Net 100.87 /
Vendor# C1730	CDW GOVERNINVOICE# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORTINVOICE# 021325 021325A 021325B 021325C	NMENT, IN Comment Number C1992 T LAVACA Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 1 S W V 02/26/202 02/13/202	M Due Dt 2 03/03/202 03/10/202 03/10/202 05/25/202 02/25/202	Pay Code Check Dt Pay CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87 68.92 2,357.74 108.33	O.00 Discount 0.00 Discount 0.00 Discount 0.00 0.00	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 0.00	Net 8,256.00 / 249.41 / Net 8,505.41 Net 100.87 / 68.92 / 2,357.74 /
Vendor# C1730	CDW GOVERNINVOICE# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORTINVOICE# 021325 021325A 021325B 021325C Vendor Totals:	10541 NMENT, IN Comment Number C1992 F LAVACA Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 O I W. VIV 02/26/202 02/13/202 SIS W. V 02/26/202 02/13/202 SIS W. V 02/26/202 02/13/202	M Due Dt 2 03/03/202 2 03/10/202 3 03/10/202 3 03/10/202 3 03/25/202 3 03/25/202 3 03/25/202 4 03/25/202	Pay Code Check Dt Pay CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87 68.92 2,357.74 108.33 Gross	O.00 Discount 0.00 Discount 0.00 Discount 0.00 0.00 0.00 Discount	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 0.00	Net 8,256.00 / 249.41 / Net 8,505.41 Net 100.87 / 68.92 / 2,357.74 /
Vendor# C1730	CDW GOVERI Invoice# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT Invoice# 021325 021325A 021325B 021325C Vendor Totals:	10541 NMENT, IN Comment Number C1992 F LAVACA Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 1 S W V 02/26/202 02/13/202	M Due Dt 2 03/10/202 03/10/202 03/10/202 05/25/202 02/25/202 02/25/202	Pay Code Check Dt Pay CL St. CL St. CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87 68.92 2,357.74 108.33	0.00 Discount 0.00 Discount 0.00 Discount 0.00 0.00 0.00	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 0.00 0.00	Net 8,256.00 / 249.41 / Net 8,505.41 Net 100.87 / 68.92 / 2,357.74 / 108.33 /
Vendor# C1730 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	CDW GOVERNINVOICE# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORINVOICE# 021325 021325A 021325B 021325C Vendor Totals: Vendor Totals:	NMENT, IN Comment Number C1992 I LAVACA Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 S V V 02/26/202 02/13/202 8 S V V 02/26/202 02/13/202 8 S V V 02/26/202 02/13/202	M Due Dt 2 03/10/202 03/10/202 03/10/202 05/25/202 02/25/202 02/25/202 02/25/202	Pay Code Check Dt Pay CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87 68.92 2,357.74 108.33 Gross	O.00 Discount 0.00 Discount 0.00 Discount 0.00 0.00 0.00 Discount	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 0.00 0.00 No-Pay	Net 8,256.00 249.41 Net 8,505.41 Net 100.87 68.92 2,357.74 108.33 Net
Vendor# C1730 Vendor# C1168	CDW GOVERNINOICE# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT Invoice# 021325A 021325B 021325C Vendor Totals: Vendor Name COASTAL OFF	NMENT, IN Comment Number C1992 I LAVACA Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 S V V 02/26/202 02/13/202 10 V V V Name CITY OF PORT LAVACA	M Due Dt 2 03/03/202 2 03/10/202 3 03/10/202 3 03/10/202 4 02/25/202 4 02/25/202 4 02/25/202 5 02/25/202 5 02/25/202 6 02/25/202	Pay Code Check Dt Pay CL St. i CL St. i CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87 68.92 2,357.74 108.33 Gross 2,635.86	O.00 Discount O.00 Discount O.00 O.00 O.00 O.00 O.00 Discount O.00 O.00 O.00	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 0.00 0.00 No-Pay 0.00	Net 8,256.00 / 249.41 / Net 8,505.41 Net 100.87 / 68.92 / 2,357.74 / 108.33 / Net 2,635.86
Vendor# C1730 Vendor# C1168	CDW GOVERNINOICE# AC6AJ6K AC69I3J Vendor Totals: Vendor Name CITY OF PORT Invoice# 021325A 021325B 021325C Vendor Totals: Vendor Name COASTAL OFF	NMENT, IN Comment Number C1992 I LAVACA Comment	CARESFIELD IC. Tran Dt Inv Dt 02/17/202 02/01/202 02/26/202 02/08/202 Name CDW GOVERNMENT, IN Tran Dt Inv Dt 02/26/202 02/13/202 02/26/202 02/13/202 8 1 S V V 02/26/202 02/13/202 8 1 S VV 02/26/202 02/13/202	M Due Dt 2 03/03/202 2 03/10/202 3 03/10/202 3 03/10/202 3 02/25/202 3 02/25/202 4 02/25/202 4 02/25/202 5 02/25/202 5 02/25/202 5 02/25/202 5 02/25/202	Pay Code Check Dt Pay CL St. CL St. CL St.	Gross 8,256.00 249.41 Gross 8,505.41 Gross 100.87 68.92 2,357.74 108.33 Gross	O.00 Discount 0.00 Discount 0.00 Discount 0.00 0.00 0.00 Discount	0.00 No-Pay 0.00 No-Pay 0.00 No-Pay 0.00 0.00 0.00 No-Pay	Net 8,256.00 249.41 Net 8,505.41 Net 100.87 68.92 2,357.74 108.33 Net

10	EQT301691		02/18/202	2 02/25/20	2 03/07/202	?	294.06	0.00	0.00	294.06	/
V	endor Totals: N	lumber M	lame				Gross	Discount	No-Pay	Net	
• ,			COASTAL OF	FICE SOL	UTONS		588.12	0.00	0.00	588.12	
Vendor# / Ve	endor Name				Class	Pay Code	000.12	0.00	0.00	000.72	
C2150 J C	OOK MEDICAL	LINCORF	ORATED		M						
, In	voice# C	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
√ va	27004556		02/04/202	01/28/202	2 02/04/202	2	81.30	0.00	0.00	81.30	1
										•	√.
Ve	endor Totals: N		lame			•	Gross	Discount	No-Pay	Net	
M # . #		2150 (OOK MEDIC	AL INCOR	_		81.30	0,00	0.00	81.30	
Vendor# Ve	endor Name :ROSS COUNT	OV OTAC	TIME		Class	Pay Code					
				Inc. Di	Due Di	Ob Dt. D		5 2	N 5	A 4.4	
	515372	omment		Inv Di novenien	Due Dt 2 03/09/202	Check Dt Pay	Gross	Discount	No-Pay 0.00	Net 3,040.00 、	p.t.
7 "	/100/ <i>E</i>		02/10/202	02/01/202	2 03/03/202		3,040.00	0.00	0.00	3,040.00	<i>f</i>
\int 75	525127		02/25/202	02/14/202	2 03/16/202	?	3,040.00	0.00	0.00	3,040.00	1
Ve	endor Totals: N	lumber N	lame		1		Gross	Discount	No-Pay	Net	
	16	0043 C	ROSS COUN	ITRY STA	FFING		6,080,00	0.00	0.00	6,080,00	
Vendor# / Ve	endor Name				Class	Pay Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		****	*** - *** -	
10006 J CI	USTOM ASSE	MBLIES, I	NC								
,In s	voice# C	omment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
JIN	IV14770		02/18/202	02/11/202	03/13/202	!	400.73	0.00	0.00	400.73	/
	. 		_							`	<i>(</i>
Ve	endor Totals: N	-	lame				Gross	Discount	No-Pay	Net	
Mandarii Ma		0006 C	SUSTOM ASS	EMBLIES,		561 -	400.73	0.00	0.00	400.73	
Vendor# Ve	endor Name H PACE COMF	ZANIV			Class	Pay Code					
•		omment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Grass	Dinesunt	No Dou	blas	
* '	MINV393950	Ollinicit			202/21/202	•	Gross 385.00	Discount 0.00	No-Pay 0.00	Net 385.00	
1 -		:	CON	· · · · · ·	_		005.00	4,44	0.00	363.00	
Ve	andor Totals: N	umber N	lame	COI	<i>ill</i>	vice	Gross	Discount	No-Pay	Net	
	10	0842 C	H PACE CON	/PANY			385.00	0,00	0.00	385.00	
Vendor# /Ve	andor Name				Class	Pay Code				•	
10789 J DI	ISCOVERY ME	EDICAL N	TWORK INC								
		omment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
J MI	MC021525		02/26/202	02/15/202	02/16/202	!	73,211.58	0.00	00,0	73,211.58	
	de. =						_			`	1
Ve	endor Totals: No		ame				Gross	Discount	No-Pay	Net	
Vendor#,Ve		0789	ISCOVERY N	IEDICAL I			73,211.58	0.00	0.00	73,211.58	
	OWELL PEST (CONTRO			Class	Pay Code					
		omment	Tran Dt	inv Dt	Due Ot	Check Dt Pay	Gross	Discount	No-Pay	Net	,
	784				02/24/202	-	105.00	0.00	0.00	105.00 >	
~								2.00	0.44	100.00	٠.
J 45	746		02/25/202	02/24/202	02/24/202		505.00	0.00	0.00	505.00	
Ve	endor Totals: No	umber N	ame				Gross	Discount	No-Pay	Net	
	11	1291 D	OWELL PES	CONTRO	DĻ		610.00	0.00	0.00	610.00	
Vendor# Ve					Class	Pay Code			•		
	COLAB										
•											
, inv		omment	Tran Dt			Check Dt Pay	Gross	Discount	No-Pay	Net	1
, inv	volce# Co 50806019	omment			Due Dt 03/12/202		Gross 300.00	Discount 0.00	No-Pay 0.00	Net 300.00 ्	1

		11091	ECOLAB					300.00	0.00	0.00	300.00	
Vendor# 11284	Vendor Name EMERGENCY	, CTAECINI	C COLUTIO	MC.	Class	Pay Code						
11204 7	invoice#	Comment			Due Ot	Check Dt Pay	v	Gross	Discount	No-Pay	Net	
\int	44008		02/19	/202 02/28/20	2 03/10/202	2	40	,062.50	0.00	0.00	40,062.50	
•		47	- v -	ician	Ser	vices	ER	ret	M- EDM	Teb.	\sim	
	Vendor Totals:	Number 11284	Name	ICY STAFFIN	ia colum	ONE	40	Gross	Discount	No-Pay	Net	
Vendor# /	Vendor Name	11204	CIVIENCE	ICT STAFFIN	Class	Pav Code	40	,062.50	0.00	0.00	40,062.50	
10042 🗸	ERBE USA IN	C SURGIO	AL SYSTE	MS								
/	Invoice#	Comment		Dt Inv Dt	Due Dt	Check Dt Pay	/	Gross	Discount	No-Pay	Net	
√.	37142559		02/26	/202 12/11/20	2 02/26/202	2 .		169.50	0.00	0.00	169.50 🗸	
1	37155483		02/26	/202 02/04/20	2 02/26/202	2		169.50	0.00	0.00	169.50 🗸	
•	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	
M	Afradr Miss.	10042	ERBE USA	INC SURGIO				339.00	0.00	0.00	339.00	
15832 -	Vendor Name EVERON				Class	Pay Code						
1	Invoice#	Comment			Due Dt	Check Dt Pay	/	Gross	Discount	No-Pay	Net	
1	157965503	ees èro		/202 02/04/20			·	58.43	0.00	0.00	58.43	
	Vendor Totals:		VICE PERI Name	JO 9/	1	1/38/	25	Gross	Discount	No-Pay	√ Net	
	, , , , , , , , , , , , , , , , , , , ,	15832	EVERON					58.43	0.00	0.00	58.43	
	Vendor Name FISHER HEAL	THCARE			Class M	Pay Code						
	Invoice#	Comment	Tran	Ot Inv-Dt	Due Dt	Check Dt Pay	,	Gross	Discount	No-Pay	Net /	
1	6906932		01/23	/202 11/14/20	2 03/01/202	!		387.16	0.00	0.00	387.16 🗸	
1	8779148		02/18	/20202/10/20	2 03/07/202			438.38	0.00	0.00	438.38	
1	8814434		02/18	/202 02/1 1/20	2 03/08/202	!	1,	,260.36	0.00	0.00	1,260.36	
\int	8814435		02/18	/202 02/11/20	2 03/08/202	!	15,	,241.88	0.00	0.00	15,241,88 🗸	
1	8848679		02/18	/202 02/12/20	2 03/09/202	!		185.55	0.00	0.00	185.55 🗸	
1	8883090		02/18	/202 02/13/20	2 03/10/202	!		577.47	0.00	0.00	577.47 🗸	
1	8883091		02/18	/202 02/13/20/	2 03/10/202	!	5,	.840.40	0.00	0.00	5,840.40	
1	8883089		02/18	/202 02/18/20/	2 03/15/202	!		181,76	0.00	0.00	181.76	
1	8914646		02/18	/202 02/18/20:	2 03/15/202	!		129.45	0.00	0.00	129,45 🗸	
1	8745894		02/19	/202 02/07/20:	2 03/01/202	!	-1,	,001.52	0.00	0.00	-1,001.52	
√,	8944513		02/26	/202 02/1 7/20 :	2 03/1/4/202			548.84	0.00	0.00	548.84	
\mathcal{J}	8975486		02/26	/202 02/18/20	2 03/15/202			673.37	0.00	0.00	673.37	
	8975487		02/26	202 02/18/20	2 03/15/202	!		129.45	0.00	0.00	129.45 🗸	
1	9039975		02/26	202 02/20/20:	2 03/17/202		4,	780.14	0.00	0.00	4,780.14	
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net	

Vendor#	Vendor Name	F1400	FISHER HEALTHCAF	Class	Pay Code	29,372.69	0.00	0.00	29,372.6
11078	/	ICAL STA	FFING, LLC	Oidiga	, u, 0000				
	_Invoice#	Commen		Due Dt	Check Dt Pay	Gross	Discount	No-Pay	N
/	INV802602		02/25/202 02/15/	202 03/12/20	-	3,320.00	0.00	0.00	3,320.0
7									
	Vendor Totals:	: Number	Name			Gross	Discount	No-Pay	N
		11078	FUSION MEDICAL ST	TAFFING, LL	.C	3,320.00	0,00	0.00	3,320.0
Vendor#	Vendor Name			Class	Pay Code				
11836	GOLDENCRE		· ·						
	Invoice#	Commen			Check Dt Pay	Gross	Discount	No-Pay	N
	022125A		02/25/202 02/21/			7,751.53	0.00	0.00	7,751.5
			700 e-104	H XF	er	_			
	Vendor Totals:		Name			Gross	Discount	No-Pay	N
\	**	11836	GOLDENCREEK HEA			7,751.53	0.00	0.00	7,751.5
Vendor#	Yendor Name		,	Class	Pay Code				
W 1300 ~	GRAINGER	Cam	d Trans Di Jaco Di	M Dup Dt	Charle Dt. Co.	O	Diago: -4	Nia Perri	ķ.1
- 7	, Involce# 9396464670	Commen		Due Dt nevenien ener	Check Dt Pay	Gross	Discount	No-Pay	256 S
7	303040407U		02/26/202 02/05/	eue 03/02/20	.c	256.80	0.00	0.00	256.8
-	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	N
	Ventor Totals.	W1300	GRAINGER			256.80	0.00	0.00	256.8
Vendor#	/Vendor Name		ment or one which has t	Class	Pay Code	200.00	บ.นบ	0.00	200.0
G1210 J	GULF COAST	PAPER	OMPANY	M	ray oode				
412104	Invoice#	Commen		Due Dt	Check Dt Pay	Gross	Discount	No-Pay	N
/	2616952		02/17/202 02/04/		•	180.08	0.00	0.00	180.0
~					_	, , , , ,			
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	N
		G1210	GULF COAST PAPER	COMPANY	•	180.08	0.00	0.00	180.0
Vendor#	/Vendor Name			Class	Pay Code				
10334 🗸	HEALTH CAR	E LOGIST	TOS INC		•				
	invoice#	Commen	t Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross.	Discount	No-Pay	N
/	309820842		02/26/202 02/18/	202 03/15/20	2	102.00	0.00	0.00	102.0
7			•			•			
	Vendor Totals:	Number	Name			Gross	Discount	No-Pay	N
		10334	HEALTH CARE LOGIS	STICS INC		102.00	0.00	0.00	102.0
	Vendor Name			Class	Pay Code				
15208 🜙	/ HOSPITAL CA	ARE CONS	SULTANTS INC.						
1	, Invoice#	Commen			•	Gross	Discount	No-Pay	N
- $$	6765		02/19/202 02/28/			23,663.00	0.00	0.00	23,663.0
	+	1050.		MZici	an Serv			nter	
	Vendor Totals:					Gross	Discount	No-Pay	N
		15208	HOSPITAL CARE CO			23,663.00	0.00	0.00	23,663.0
- 1	Vendor Name		7.47.04	Class	Pay Code				
11108~/	ITERSOURCE	_		.	A: -	_	<u></u>	=	
1	Invoice#	Commen		Due Dt	Check Dt Pay	Gross	Discount	No-Pay	N
Ĵ	711861		02/26/202 02/25/2	20202/26/20	2	3,164.44	0.00	0.00	3,164.4
	Vander T-t-t-	Marine	Nama			A :	h a	s. =	
	Vendor Totals:					Gross	Discount	No-Pay	N
		11108	ITERSOURCE CORP		Boy Code	3,164.44	0.00	0.00	3,164.4
Vandar#	Mander Name			Class	Pay Code				
3	Vendor Name	LENGNO	ISTICS INC						
Vendor# 14432 V	LGC CLINICA			אין איינ	Charle Di Day	Over-	Discourt	N= D=	
3	LGC CLINICA Invoice#	L DIAGNO	t Tran Dt Inv Dt		Check Dt Pay	Gross	Discount	No-Pay	
3	LGC CLINICA				•	Gross 829.00	Discount 0.00	No-Pay 0.00	N- 829.0
3	LGC CLINICA Invoice#		t Tran Dt Inv Dt	202 02/17/20	2			•	

	Vendor Totals:		Nam					Gross	Discount	No-Pay	Net
Manager		14432	LGC	CLINICAL	_ DIAGNO			1,223.00	0.00	0.00	1,223.00
,	Vendor Name M G TRUST					Class	Pay Code				
1	Invoice#	Comment	t	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
1	020725			02/25/202	02/07/202	2 02/25/202	2	895.00	0.00	0.00	895.00
	Vendor Totals:		Nam	-				Gross	Discount	No-Pay	Net
		10972	MG	TRUST				895,00	0.00	0.00	895.00
- /	Vendor Name					Class	Pay Code				
MS1\87	MCKESSON N	_						_			
,	Invoice#	Comment		Tran Dt		Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
4	23248125			02/17/202	01/29/202	02/13/202	!	124.87	0.00	0,00	124.87 √
1	23359005			02/26/202	02/21/202	9 03/08/202	?	61.84	0.00	0.00	61.84 🗸
1	23361853			02/26/202	02/26/202	03/13/202	!	502.46	0.00	0.00	502.46
	Vendor Totals:	Number	Nam	ie				Gross	Discount	No-Pay	Net
		M2178	MCK	ESSON M	EDICAL S	SURGICAL	. INC	689,17	0.00	0.00	689.17
Vendor#	Nendor Name					Class	Pay Code				
M2470 🗸	MEDLINE IND	USTRIES	INC			M·	·	•			•
	Invoice#	Comment		Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net ,
/	2355186847			01/27/202	01/29/202	03/01/202	!	10.28	0.00	0.00	10.28 🗸
1	2355186852			01/27/202	01/29/202	03/01/202	!	40.03	0.00	0.00	40.03 🗸
1	2355186829			01/27/202	01/29/202	03/01/202	1	12.20	0.00	0.00	12.20
~,									2,00	5.50	/
1	2355186837			01/27/202	01/29/202	03/01/202	!	82.16	0.00	0.00	82.16 🏑
1	2355186851			01/27/202	01/29/202	03/01/202	ļ.	20.01	0.00	0.00	20.01 🗸
1	2355186842			01/27/202	01/29/202	03/01/202	!	2,494.95	0.00	0.00	2,494.95 🗸
$\int_{\mathbb{R}^{n}}$	2355186834			01/27/202	01/29/202	03/10/202	ļ	519.43	0.00	0.00	519.43
J	2354970864			02/04/202	01/28/202	03/01/202	!	24.32	0.00	0.00	24.32 🗸
1	2354970865			02/04/202	01/28/202	03/01/202	!	12.39	0.00	0.00	12.39 🗸
1	2355186849		٠	02/17/202	01/29/202	03/01/202	!	6,162,46	0.00	0.00	6,162.46 🗸
1	2355953384		٠	02/17/202	02/04/202	03/01/202	!	7 1.9 5	0.00	0.00	71.95
1	2356816276			02/17/202	02/08/202	03/09/202	!	30.65	0.00	0.00	30.65
J	2354214624			02/18/202	01/22/202	03/09/202		10,844,47	0.00	0.00	10,844,47
1	2355186831			02/18/202	01/29/202	03/09/202		603.78	0.00	0.00	603.78 🗸
1	2356061515			02/18/202	02/04/202	03/09/202		260.86	0.00	0.00	260.86 🗸
1	2356098404			02/18/202	02/05/202	03/02/202		1,902.32	0.00	0.00	1,902.32 🗸

1	2357005854		02/18/20	2 02/10/202	2 03/07/20	2	24.55	0.00	0.00	24.55 🗸
J	2357109456		02/18/20	2 02/11/202	2 03/08/20	2	93.30	0.00	0.00	93.30 🗸
1	2357143933		02/18/20	2 02/12/202	03/09/20	2	49.03	0.00	0.00	49.03 🗸
J	2357143931		02/18/20	2 02/12/202	03/09/20	2	24.74	0.00	0.00	24.74
1	2357143938			2 02/12/202			5,664,42	0.00	0.00	5,664.42
1	2357143936						·			
-1	•			202/12/202		_	633,12	0.00	0.00	633.12.✓
4	2357143932		02/18/20	202/12/202	03/09/20:	2	662.16	0.00	0.00	662.16 🗸
1	2357143925		02/18/202	202/12/202	03/09/20:	2	929.21	0.00	0.00	929.21 🏑
1	2357143935		02/18/202	02/12/202	03/09/20:	2	842.12	0.00	0.00	842.12 🗸
1	2357143930		02/18/202	02/12/202	03/09/20	2	279.08	0.00	0.00	279.08
1	2357143929		02/18/202	02/18/202	03/15/20	2	2,125,31	0.00	0.00	2,125.31
1	2357143934		02/18/202	02/18/202	03/15/202	2	24.09	0.00	0.00	24.09 🗸
1	2355186846		02/20/202	01/29/202	03/01/202	2	814.80	0.00	0.00	814.80 🗸
1	2358014206		02/26/202	02/18/202	03/15/202	2	116.47	0.00	0.00	116.47 🗸
1	2358014207		02/26/202	02/18/202	03/15/202	2	45.09	0.00	0.00	45.09 🗸
1	2358265297		02/26/202	02/19/202	03/16/202	2	106.78	0.00	0.00	106.78
J	2355186850		02/27/202	01/29/202	02/23/202	2	228.33	0.00	0.00	228.33 🗸
1	1703420830		02/27/202	02/22/202	02/22/202	2	734.68	0.00	0.00	734.68 🗸
	Vendor Totals		Name				Gross	Discount	No-Pay	Net
Vendor#/	Vendor Name	M2470	MEDLINE IND		NC Class	Pay Code	36,489.54	0.00	0,00	36,489.54
10963 -	MEMORIAL M	MEDICAL C				ŕ				
1	Invoice# 020725	Comment			Due Dt	Check Dt Pay	Gross	Discount	No Pay	Net
7	020723		02/23/202	02/07/202	UZIZ31ZUZ	•	295.00	0.00	0.00	295.00
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	Net
	£	10963	MEMORIAL M	EDICAL CL	INIC		295.00	0.00	0.00	295.00
j	Vendor Name MEMORIES U	INLIMITED	, INC.		Class	Pay Code				
	Invoice#	Comment		Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
7	183783		02/17/202	01/24/202	02/17/202	2	412. 9 4	0.00	0.00	412,94
	Vendor Totals:	Number	Name				Gross	Discount	No-Pay	√ Net
		11060	MEMORIES UI	NLIMITED,	INC.		412.94	0.00	0.00	412.94
1	Vendor Name	A144		-	Class	Pay Code				
10536 🎺	MORRIS & DI						_			
1	Invoice# 2988406	Comment		Inv Dt 01/31/202	Due Dt 02/10/202	Check Dt Pay	Gross 9,682.22	Discount 0.00	No-Pay 0.00	Net 9,682.22 V
•										

	1					
1	2993911	02/25/202 02/02/202 02/12/202	56.07	0.00	0.00	56.07 🗸
V	2992636	02/25/202 02/02/202 02/12/202	33.51	0.00	0.00	33.51
J	2993912	02/25/202 02/02/202 02/12/202	1,120.78	0.00	0.00	1,120.78
1	2996808	02/25/202 02/03/202 02/13/202	1,467.02	0.00	0.00	1,467.02 🗸
1	2996810	02/25/202 02/03/202 02/13/202	30,03	0.00	0.00	30.03 🗸
1	2998801	02/25/202 02/03/202 02/13/202	151.85	0.00	0.00	151.85 🗸
J	2998799	02/25/202 02/03/202 02/13/202	11.24	0.00	0.00	11.24
Ĵ	2998800	02/25/202 02/03/202 02/13/202	424,79	0.00	0.00	424.79 🗸
J	2996809	02/25/202 02/03/202 02/13/202	90.86	0.00	0.00	90.86 🗸
-1	/ 3001106	02/25/202 02/04/202 02/14/202	25.84	0.00	0.00	25.84
J	' 3001105	02/25/202 02/04/202 02/14/202	56 ,15	0.00	0.00	56.15 🗸
J	3004582	02/25/202 02/04/202 02/14/202	812.01	0.00	0.00	812.01 🗸
1	3002672	02/25/202 02/04/202 02/14/202	282.39	0.00	0.00	282.39 🗸
J	3001107	02/25/202 02/04/202 02/14/202	90.86	0.00	0.00	90.86 🗸
1	3004581	02/25/202 02/04/202 02/14/202	77.33	0.00	0.00	77.33 🗸
1	3006833	02/25/202 02/05/202 02/15/202	56.15	0.00	0.00	56.15
√	3007733	02/25/202 02/05/202 02/15/202	220.02	0.00	0.00	220.02 🗸
J	3010494	02/25/202 02/05/202 02/15/202	31,43	0.00	0.00	31.43 🗸
1	3006832	02/25/202 02/05/202 02/15/202	5.20	0,00	0.00	5,20 🗸
1	3006838	02/25/202 02/05/202 02/15/202	2,544.19	0.00	0.00	2,544,19 🗸
J	3006834	02/25/202 02/05/202 02/15/202	180.47	0.00	0.00	180,47
1	3010111	02/25/202 02/05/202 02/15/202	22.66	0.00	0.00	22.66 🗸
1	3006836	02/25/202 02/05/202 02/15/202	70.03	0.00	0.00	70.03 🗸
1	3010112	02/25/202 02/05/202 02/15/202	172.48	0.00	0.00	172.48
1	3012285	02/25/202 02/06/202 02/16/202	56.15	0.00	0.00	56,15 🗸
1	3015253	02/25/202 02/06/202 02/16/202	156,78	0.00	0.00	156.78 🗸
J	3015252	02/25/202 02/06/202 02/16/202	976.02	0.00	0.00	976.02 🗸
1	3014043	02/25/202 02/06/202 02/16/202	22,25	0.00	0.00	22.25 🗸

1	GM86430	02/25/202 02/07/202 02/17/202	-472.37	00,0	0,00	-472,37	
1	3022820	02/25/202 02/09/202 02/19/202	32.75	0.00	0.00	32,75 🗸	
1	3022821	02/25/202 02/09/202 02/19/202	872.90	0.00	0.00	872.90 🗸	
1	3021527	02/25/202 02/09/202 02/19/202	23.54	0.00	0.00	23.54 🗸	
1	3021528	02/25/202 02/09/202 02/19/202	29.18	0.00	0.00	29.18 🏑	
1	3024444	02/25/202 02/1 0/202 02/20/202	43.18	0.00	0.00	43.18 🗸	
1	CM86796	02/25/202 02/10/202 02/20/202	-546.78	0.00	0.00	-546.78 🗸	
\checkmark	3027005	02/25/202 02/10/202 02/20/202	378.63	0.00	0.00	378.63 🗸	
1	3027004	02/25/202 02/10/202 02/20/202	13,71	0.00	0.00	13.71 🗸	
1	3026782	02/25/202 02/10/202 02/20/202	822.91	0.00	0.00	822.91	
√	3024443	02/25/202 02/10/202 02/20/202	56.15	0.00	0.00	56.15 🗸	
1	3024442	02/25/202 02/10/202 02/20/202	84.85	0.00	0.00	84.85 🗸	
1	3032784	02/25/202 02/11/202 02/21/202	1,427.33	0.00	0.00	1,427.33 🗸	
J	3032783	02/25/202 02/11/202 02/21/202	60.54	0.00	0.00	60.54 🗸	
1	3038068	02/25/202 02/12/202 02/22/202	75.43	0.00	0.00	75.43	
1	3036839	02/25/202 02/12/202 02/22/202	33.76	0.00	0.00	33.78 🗸	
1	3035592	02/25/202 02/12/202 02/22/202	56,15	0.00	0.00	56.15 🗸	
1	3038069	02/25/202 02/12/202 02/22/202	4,215.58	0.00	0.00	4,215,58	
1	3035247	02/25/202 02/12/202 02/22/202	6,767.05	0.00	0.00	6,767.05 🗸	
1	3036838	02/25/202 02/12/202 02/22/202	31.23	0.00	0.00	31.23 🗸	
1	3044010	02/25/202 02/13/202 02/23/202	507.74	0.00	0.00	507.74 🗸	
	3040997	02/25/202 02/13/202 02/23/202	56.15	0.00	0.00	56.15	
1	3044011	02/25/202 02/13/202 02/23/202	40.75	0.00	0.00	40.75	
	3044012	02/25/202 02/13/202 02/23/202	458.35	0.00	0.00	458.35 🗸	
1	3050081	02/25/202 02/16/202 02/26/202	296,84	0.00	0.00	296.84 🗸	
1	3050083	02/25/202 02/16/202 02/26/202	19.94	0.00	0.00	19.94 🗸	
1	3048851	02/25/202 02/16/202 02/26/202	91.35	0.00	0.00	91.35	
1	3048852	02/25/202 02/16/202 02/26/202	51.53	0.00	0.00	51.53 🗸	

4	3050084	02/25/202 02/16/2	202 02/26/202	1,344,49	0.00	0.00	1,344.49
~/	/ 3055460	02/25/202 02/17/2		135.47			135.47
, i	3055459				0.00	0.00	,
7		02/25/202 02/17/2		55.56	0.00	0.00	55.56
4	3052779	02/25/202 02/17/2	02 02/27/202	144.78	0.00	0.00	144.78 🗸
1	3052778	02/25/202 02/17/2	02 02/27/202	56.15	0.00	0.00	56,15 🏑
1	3058131	02/25/202 02/18/20	02 02/28/202	56.15	0.00	0.00	56.15 🗸
1	3059263	02/25/202 02/18/20	02 02/28/202	540.31	0.00	0.00	540.31 🗸
1	3059264	02/25/202 02/18/20	02 02/28/202	17.75	0.00	0.00	17.75 🗸
1	3060849	02/25/202 02/18/20	02 02/28/202	59.49	0.00	0.00	59.49
1	3059763	02/25/202 02/18/20	02 02/28/202	247.35	0.00	0.00	247.35 🗸
1	3058130	02/25/202 02/18/20	02 02/28/202	4,701.19	0.00	0.00	4,701.19 🗸
1	3063697	02/25/202 02/19/20	02 03/01/202	56.15	0.00	0.00	56.15
1	3065341	02/25/202 02/19/20	2 03/0 1/202	47.04	0.00	0.00	47.04
J	3064729	02/25/202 02/19/20	2 03/01/202	138,20	0.00	0.00	138.20 🗸
J	3066391	02/25/202 02/19/20	2 03/01/202	297.01	0.00	0.00	297.01 🗸
1	3064728	02/25/202 02/19/20	2 03/01/202	38.53	0.00	0.00	38.53 🗸
√	3066392	02/25/202 02/19/20	2 03/01/202	804,33	0,00	0.00	804.33
1	3066591	02/25/202 02/19/20	2 03/01/202	1.73	0.00	0.00	1.73 🗸
1	CM88647	02/25/202 02/19/20	2 03/01/202	-3.18	0.00	0.00	-3.18 🗸
\checkmark	3066390	02/25/202 02/19/20	2 03/01/202	45.39	0.00	0.00	45.39
	Vendor Totals: Number	Name		Gross	Discount	No-Pay	Nel
Manalin	10536	MORRIS & DICKSON CO	D, LLC	43,239.06	0.00	0.00	43,239.06
	Vendor Name MSE ENVIRONMENTAL	DALLACILO	Class Pay Code				
11202	Invoice# Comment		Die Die Oberton F	_			
_/	101225	02/25/202 02/21/202	Due Dt	y Gross 685.00	Discount	No-Pay	Net
~				. uu,coo	0.00	0.00	685,00
	Vendor Totals: Number	Name		Gross	Discount	No-Pay	Net
* 11	17232	MSE ENVIRONMENTAL	DALLAS LLC	685.00	0.00	0.00	685.00
	Vendor Name		Class Pay Code			-	
	NATIONAL FARM LIFE I		.				
	Invoice# Comment 4415705A	Tran Dt Inv Dt 02/27/202 02/17/202	Due Dt Check Dt Pa		Discount	No-Pay	Net
7		V212112V2V2111/202	A9/01/505	2,660.54	0.00	0.00	2,660,54
,	Vendor Totals: Number	Name		Gross	Discount	No-Pay	Net

	12388	NATIONAL FARM LIFE I	NSURANO	CE	2,660.54	0.00	0.00	2,660.54	
Vendor# Vendo			Class	Pay Code					
Invoice		t Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
√ V4648	1	02/17/202 02/14/202	02/26/202	•	76,844.00	0.00	0.00	76,844.00	/
/ V4648	ý	02/21/202 02/21/202	מחפו פחו בח	3	6,196.89	0.00	0.00	6,196.89 ·	1
7	-	UZE NEGE OZIE NEGE	03/00/202	•	U, 180,08	0.00	0.00	0,180.08	V
Vendo	Totals: Number	Name	•		Gross	Discount	No-Pay	Net	
Vendor# Vendo	16004 r Name	NITOR E LLC	Class	Pay Code	83,040.89	0.00	0.00	83,040.89	
11472 VOCCL			Ciass	ray code					
/ Invoice	# Commen	t Tran D1 Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
√ 38708		02/11/20202/07/202	03/09/202	2	486.68	0.00	0.00	486.68	<i>(</i>
Vendo	Totals: Number	Name			Gross	Discount	No-Pay	Net	
	11472	OCCUPRO LLC			486.68	0.00	0.00	486.68	
Vendor#, Vendo	⁻ Name PUS AMERICA IN	ıc	Class M	Pay Code					
Invoice			Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
J 37630°	791	02/26/202 02/20/202		-	204.60	0.00	0.00	204.60	1
Mount	·				_			√	(
vendo	Totals: Number O1500	Name OLYMPUS AMERICA INC			Gross 204.60	Discount 0.00	No-Pay 0.00	Net 204,60	
Vendor# /Vendo			Class	Pay Code	204.00	0.00	0.00	204,00	
	O CLINICAL DIAG								
Invoice / 18539		t Tran Dt Inv Dt 02/18/202 02/11/202	Due Dt 03/13/202	Check Dt Pay	Gross 230,25	Discount 0.00	No-Pay 0.00	Net 230,25	
4 .0000.			. 00/ 10/202	•	EGU.EG	0.00	0.00	200.20	/
Vendo	Totals: Number	Name			Gross	Discount	No-Pay	Net	
Vendor# ,Vendo	O1416 · Name	ORTHO CLINICAL DIAG	NOSTICS Class	Pay Code	230.25	0.00	0.00	230.25	
- 1	K BIOMEDICAL, L	LC	M	ray Coue					
Invoice		t Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
√ 360950	i	02/26/202 02/05/202	02/26/202	!	654,00	0.00	0.00	654.00	/
Vendo	Totals: Number	Name			Gross	Discount	No-Pay	Net	,
	O1201	OZARK BIOMEDICAL, LL	.c		654.00	0.00	0.00	654.00	
Vendor# Vendor		÷	Class	Pay Code					
12708 ✓ POC B Invoice	LECTRIC, LLC # Comment	t Tran Dt Inv.Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	
J 4286		02/26/202 02/23/202			196.00	0.00	0.00	196.00	;
	***							~	1
Vendo	Totals: Number 12708	Name POC ELECTRIC, LLC			Gross 196.00	Discount 0.00	No-Pay 0.00	Net 196.00	
Vendor# /Vendor		, 00 2220 // 110, 220	Class	Pay Code	130.00	0.00	0.00	180.00	
•	SION DYNAMICS								
Invoice / 935799				Check Dt Pay	Gross	Discount	No-Pay	Net	7
A 200 (8)	, UTG	02/26/202 01/07/202	UZ/UD/ZUZ		204.36	0.00	0.00	204.36 ~	4
J 935824	9413	02/26/202 02/07/202	03/09/202		204.36	0.00	0.00	204.36	1
J 935827	1495	02/26/202 02/11/202	03/13/202		73.38	0.00	0.00	73.38 ¬	/
Vendo	Totals: Number	Name			Gross	Discount	No-Pay	Net	
	10372	PRECISION DYNAMICS	CORP (PD	OC)	482.10	0.00	0.00	482.10	

Vendor# Vendor Name		7.4.1CD00714.0	Class	Pay Code				
Invoice#		RANSPORT LLC	Dun Di	Ohart Di Day		ъ.		41.4
,	Commen		Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
$\sqrt{^{1316}}$		02/25/202 03/31/20	02/25/20	02	1,382.69	0.00	0.00	1,382.69
Vendor Totals	: Number	Name		•	Gross	Discount	No-Pay	Net
	16040	PRESTIGE PATIENT T	RANSPOF	RT LLC	1,382.69	0.00	0.00	1,382.69
Vendor# Vendor Name 11080 √ RADSOURC			Class	Pay Code				
, Invoice#	Comment	t Tran Ot Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
√ PSI004840		02/18/202 02/12/20	02 03/09/20	02	1,791.67	0.00	0.00	1,791.67
J PS1004884		02/18/202 02/16/20	02 03/13/20	02	1,708.33	0.00	0,00	1,708.33 🗸
Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
	11080	RADSOURCE			3,500.00	0.00	0.00	3,500,00
Vendor# Vendor Name	!		Class	Pay Code	5,014.14	0.00	0.00	0,000,00
11251 J RAPID PRIN		•	0.000	. 4, 0040				
Invoice#	Comment	t Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
/ 27760		02/25/202 02/20/20			65.00	0.00	0.00	65.00
~					05.00	0.00	0.00	/
Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
	11251	RAPID PRINTING LLC			65.00	0.00	0.00	65.00
Vendor# ,Vendor Name			Class	Pay Code	05.00	0.00	0.00	00.00
14920 REPUBLIC S		INC.	Olabo	, ay coac				
invoice#	Comment		Due Di	Check Dt Pay	Gross	Discount	No-Pay	Net
08470013797		02/27/202 02/15/20		•	113.83	0.00	0.00	113.83
3			72 027 107 EC	·-	110.00	0.00	9.00	110.00
Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
	14920	REPUBLIC SERVICES.	INC.		113.83	0.00	0.00	113,83
Vendor# , Vendor Name		,,=,,=,,=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Class	Pay Code	175,00	0.00	U,UU	110100
I i i i i i i i i i i i i i i i i i i i		LUTIONS INC	M	,				
Invoice#	Comment		Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
116682678		02/26/202 02/17/20		•	2,617,41	0,00	0.00	2.617.41 /
7		· · · · · · · · · · · · · · · · · · ·		. -	=(011.11	0.00	0.00	V
Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
	S2001	SIEMENS MEDICAL SC	DLUTIONS	INC	2,617.41	0.00	0.00	2,617.41
Vendor# /Vendor Name			Class	Pay Code	•			
S2362 √ SMITH & NE	PHEW, INC	; .						
Invoice#	Comment	t Tran Dt Inv Dt	Due Ot	Check Dt Pay	Gross	Discount	No-Pay	Net
983864019		02/26/202 02/20/20	2 02/26/20	02	374.48	0.00	0.00	374.48
4								J
Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
	82362	SMITH & NEPHEW, INC) ,		374.48	0.00	0.00	374,48
Vendor# /Vendor Name			Class	Pay Code				
12472 √ SOMETHING	MORE ME	DIA, INC.						
Invoice#	Comment	t Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
/ 2237		02/25/202 02/18/20	2 03/05/20	2	2,525.00	0.00	0.00	2,525.00
*								J
Vendor Totals	: Number	Name			Gross	Discount	No-Pay	Net
	12472	SOMETHING MORE ME	EDIA, INC.		2,525.00	0.00	0.00	2,525.00
Vendor# Vendor Name			Class	Pay Code				
11296 J SOUTH TEXA	AS BLOOD	& TISSUE CEN		-				
Invoice#	Comment	t Tran Dt Inv Dt	Due Ot	Check DI Pay	Gross	Discount	No-Pay	Net
/ CM14309		02/25/202 02/15/20	2 03/12/20	2	-1,100.00	0.00	0.00	-1,100.00
"d								•

J107047749		02/25/202 02/15/20)2 03/1 7/2 0	2	6,400.00	0.00	0.00	6,400.00
Vendor To	lais: Number Na	ame			Gross	Discount	No-Pay	Net
	11296 SC	OUTH TEXAS BLOOD	& TISSUE	CEN	5,300.00	0.00	0.00	5,300.00
Vendor# Vendor Na C1010 VSPARKLIO			Class W	Pay Code				
Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
√021625		02/26/202 02/17/20	2 02/18/20	2	155.41	0.00	0.00	155.41
Vendor To	tals: Number Na	ame			Gross	Discount	No-Pay	Net
	C1010 SF	PARKLIGHT			155.41	0.00	0.00	155.41
Vendor# /Vendor Na			Class	Pay Code				
	ASS & TINTING		M		_			
Invoice# / 124022	Comment	Tran Dt Inv Dt 02/17/202 02/08/20	Due Dt	Check Dt Pay	Gross	Discount	No-Pay 0.00	Net
7 124022		02) 17/202 02/06/20	2 03/10/20	4 .	1,600.00	0,00	0.00	1,600.00
Vendor To	tals: Number Na	ame			Gross	Discount	No-Pay	Net
	T1915 TE	EXAS GLASS & TINTI	NG		1,600,00	0.00	0,00	1,600.00
Vendor# Vendor Na			Class	Pay Code	•			
	LECT STAFFING		S S1	051-01-0		5	N- B	A.L.
Invoice# / 0025024	Comment	Tran Dt Inv Dt 02/26/202 02/15/20	Due Dt nevance e	Check Dt Pay	Gross 3,667.00	Discount 0.00	No-Pay 0.00	Net 3,667.00
1 2022024		OBJECTEDE CEI TOTE	E OEI TO/EU	_	0,007.00	0.00	0.00	0,007.00
Vendor To	tais: Number Na	ame			Gross	Discount	No-Pay	Net
	10758 TE	EXAS SELECT STAFF	ING, LLC		3,667.00	0.00	0.00	3,667.00
Vendor# Vendor Na 11908 J TMS SOU			Class	Pay Code				
Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
J INV149008	3	02/17/202 02/05/20	2 03/07/20	2	280.60	0.00	0.00	280,60
Vendor To	tals: Number Na	ame			Gross	Discount	No-Pay	Net
		AS SOUTH			280.60	0.00	0.00	280,60
Vendor# /Vendor Na	me		Class	Pay Code				
10841 🗸 TRUBRID	GE, LLC							
Invoice#	Comment	Tran Dt Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
	378	02/26/202 02/10/20	2 02/26/20	2	382,90	0.00	0.00	382.90
Vendor To	lals: Number Na	ame			Gross	Discount	No-Pay	Net
		RUBRIDGE, LLC			382.90	0.00	0.00	382.90
Vendor# Vendor Na			Class	Pay Code				
U1064√ UNIFIRST Invoice#	HOLDINGS INC Comment	Tran Dt Inv Dt	Dua Di	Chart Ot Day	0	Dinance	No Book	
/ 292105329		02/18/202 02/10/20	Due Dt 12.03/07/20	Check Dt Pay	Gross 171.04	Discount 0.00	No-Pay 0.00	Nef 171.04 ✓
4 702,0002	,	027 107202 021 10720	2 00/01/120	-	17 (,04	0.00	0.00	171.04
J 292105363	32	02/18/202 02/13/20	2 03/10/20	2	2,278.19	0.00	0.00	2,278.19 🗸
J 292105364	17	02/18/202 02/13/20	2 03/10/20	2	181.87	0.00	0.00	181.87 🏑
J 292105363	37	02/18/202 02/13/20	2 03/10/20	2	70.07	0.00	0.00	70.07 🗸
J 292105362	22	02/18/202 02/13/20	2 03/10/20	2	119.46	0.00	0.00	119.46
J 292105368	96	02/18/202 02/13/20	2 03/10/20	2	631.03	0.00	0.00	531.03 🗸
J 292105365	i3	02/18/202 02/13/20	2 03/10/20	2	162.46	0.00	0.00	162.46 🗸

1	2921053627		02/18/2020	02/13/202	9 03/10/20	2	182.61	0.00	0.00	182.61
1	2921053650		02/18/2020	02/13/202	03/10/20	2	190.73	0.00	0.00	190.73
7	2921053287		02/19/2020	2/10/202	03/07/20	2	2,823.32	0.00	0.00	2,823.32 🗸
1	2921053780		02/25/2020	2/17/202	03/14/20	2	165.44	0.00	0.00	165.44
1	2921053777		02/25/2020	2/17/202	03/14/20	2	2,323.44	0.00	0.00	2,323.44 🗸
Vendor#	Vendor Totals: N U Vendor Name WERFEN USA L	J1064	Name UNIFIRST HOLD	o(NGS IN	IC Class	Pay Code	Gross 9,199.66	Discount 0.00	No-Pay 0.00	Net 9,199.66
		Comment	Tran Dt II	nv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net
1	9111764084		02/18/2020			_	1,571.67	0.00	0.00	1,571.67
1	9111770157		02/26/2020	2/20/202	03/17/20	2	453.09	0.00	0.00	453.09 🗸
1	9111770480		02/26/2020	2/21/202	03/18/20	2	10,240.00	0.00	0.00	10,240.00 🗸
	Vendor Totals: N	lumber l	Name		•		Gross	Discount	No-Pay	Net
	[1	1110	WERFEN USA L	.LC			12,264.76	0.00	0.00	12,264.76
					21 year	o Sancione do				
Grand To			Gross		E)iscount	No-F	ay	Net	
APP	ROVED ON		454,571.56			0.00	0.0	0	454,571	1.56

FEB 27 2025

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

> 454.571.56 + 5.313.46 - Pg. 2 NH Ster removed 7.751.50 - Pg. Le NH Ster removed 441.506.57 0

RUN DATE: 02/27/25 TIME: 11:59 FEB 2 7 2025

MEMORIAL MEDICAL CENTER

EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1 APCDEDIT

	PATIENT	CALHOUN	COUN	TY, TEXAS	8		PAY	ns m					
	NUMBER	PAYEE NAME			DATE	AMOUNT			DESCRIPTION	r i jak	GL NUM		
1	1445816	0			021325	100.00	J	3	REFUND FO				
1	1457153	0	1	X	77979 021925	25.00	1	3	refund fo				
1	1506102	0	1	TX	77 9 82 022725	15.00	J	2	REFUND FOI				
1	1526107	0	J D		77901 022725	318.06	J	2	REFUND FO				
J	1533319	0	1	ΤX	77979 022725	72.02	J	2	REFUND FOI				
1	1533995	0	1	TX	77979 021925	144.00	1	' 2	REFUND FO				
J	1536125	0	1	TX	77979 022725	19.53	1	2	REFUND FO				
1	1536567	0	1	TX	77950 022725	95.15	√	2	refund fo				
4	1548725	0	1	TX	77957 021925	45.00	J	2	refund fo				
J	1551716	0	J	TX	7797 9 021925	50.00	J	3	REFUND FO				
1	1553434	0	1	TX	77978 022725	100.00	1	3	PEFUND FO				
1	1557097	0	1	TX	77979 021925	33.85	J	2	REFUND FO				
1	1565315	0	J	TX	77979 021925	58. 2 5	J	2	REFUND FO				
j	1566534	0	4	TX	78148 022725	21.00	1	2	REFUND FO				
1	1570496	0	1	TΧ	77979 021925	397.73	√	3	REFUND FO				
				TX	77979						l		

RUN DATE: 02/27/25 TIME: 11:59

MEMORIAL MEDICAL CENTER

EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE Z APCDEDIT

	PATIENT NUMBER	PAYEE NAME		DATE	TAUOMA	PAY CODE		DESCRIPTION	et nin
1	1570996			022725	164.62	1	2	REFUND FOR	
1	1571495	0]	ΥX	77901 021925	60.00	1	3	REFUND FOR	
J	1571897	01	7X ./	77957 022725	17.50	1	3	REFUND FOR	
J	1573029	0	TX	79007 021925	23.43	J	2	REFUND FOR	
1	1576684	7	.*	77465 022725	62.10	J	3	REFUND FOR	
J	1581281	0	TX	77979 022725	327.95	1	2	REFUND FOR	
1	1581959	0	, TX	77979 022725	20.00	J	5	refund for	
J	1583881	0		77979 021925	33.21	1	3	REFUND FO	
J	1584364		ŕ	32656 022725	100.00	J	2	REFUND FO	
J	1587229		•	77979 021925	202.50	J	4	REFUND FO	
J	1589186	o /	TX	77465 022725	25.00	1	3	REFUND FO	
1	1588393	0	TX .	77971 022725	100.00	J	1	refund fo	
J	1588525	0	XX	77979 021925	93.07	J	3	refund fo	
J	1588584	0	U T	84032 021925	40.00	1	2	REFUND FO	
√	1591661	0	/ ^{TX}	77465 021925	110.88	J	2	REFUND FO	
			PX .	77579				·	

RUN DATE: 02/27/25 TIME: 11:59

MEMORIAL MEDICAL CENTER
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 3 APCDEDIT

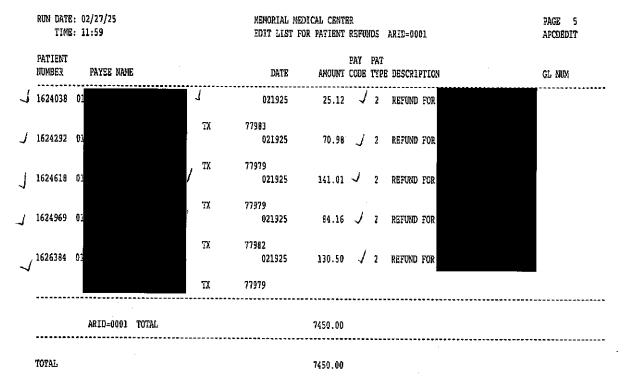
	PATIENT NUMBER		PAYEE NAME			DATE	AMOUNT	PAY CODE		DESCRI	PTION	GL NUM
1	1592403	0		į†		021925	25.00	1	3	REFUND	FOR	
1	1592553	01		f.	TX	77983 022725	63.74	J	2	REFUND	FOR	
1	1593595	0:		/	TX	77979 022725	550.00	J	2	REFUND	FOF	
1	1596446	0:			TX	77901 021925	65.60	1	2	REFUND	FOR	
1	1598387	0:		/	TX	77465 022725	33.61	1	2	REFUND	FOR	
1	1599648	0:		1	TX	77979 022725	115.23	1	2	REFUND	FOR	
J	1599659	0		J	TX	77901 021925	100.00	1	2	REFUND	FOI	
1	1602896	0:		ĺ	TX	77979 022725	12.15	j	5	REFUND	FOI	
1	1604371	0:		/	TX	77979 021925	30.6 0	J	2	REFUND	FO	
1	1605551	0:		~	TX.	77979 022725	29.30	1	2	REFUND	FOR	
1	1605726	0:		1		77979 022725	57,28	J	2	REPUND	FOR	
1	1606448	Ō:		1	TX	77979 022725	47,09	I	5	REFUND	FQI	
J	1607069	01		J		77979 021925	30.18	J	3	REFUND	FÓR	
j	1608626	01		/	TX	77979 022725	164.82	√	2	REFUND	FOR	
√	1608991	0:		/	TK	77983 021925	19.00	/	2	REFUND	ECH	
1	1609008	0:		Į	TX	77979 021925	950.03	J	3	REFUND	FOR	
					XT	77978					·	

RUN DATE: 02/27/25 TIME: 11:59

MEMORIAL MEDICAL CENTER EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 4 APCDEDIT

	PATIENT NUMBER	PAYEE NAME			DATE	AMOUNT	PAY CODE		DESCRIPTION	1	3L NUM
1	1610644	0		1	021925	94.79	J	2	REFUND FOR		
J	1611237	0.	J	TX	77978 022725	136.04	J	3	REFUND FOR		
1	1612047	0	J	TX 77	9910223 022725	100.00	1	3	REFUND FOR		
1	1612673	0	1	TX	77872 021925	100.00	1	2	REFUND FOR		
1	1612719	Q	1	TX	77979 021925	32,01	1	2	REFUND FOR		
1	1613408	0	1	TX	77979 021925	40.00	J	2	REFUND FOR		
J	1614138	0	1	TX	77979 022725	183.31	1	2	REFUND FOR		
J	1614483	C	J	TX	77979 021925	100.00	1	3	REFUND FOR		
J	1615019	0	1	TX	77979 021925	50.00	1	Ż	refund for		
J	1615389	Û	1	TX	77983 021925	50.10	J	3	REFUND FOR		
1	1616753	0	/	TX	77979 022725	58.94	J	2	REFUND FOR		
J	1619260	D	1	TX	77 979 021925	45.00	J	2	REFUND FOR		
1	1619595	0]	1	TX	77979 021925	561.80	1	2	REFUND FOR		
1	1619974	0.	1	TX	77979 022725	152.85	1	ŝ	refund for		
J	1621437	0]	J	TX	77979 021925	75.00	J	3	REFUND FOR		
1	1622032	05	1	TX .	77379 022725	60.00	J	2	REFUND FOR		
				TX	77903						I



APPROVED ON

FEB 2 7 2025

CALHOUN COUNTY TEXAS

MSKESSON

Company: 8000

MEMORIAL MEDICAL CENTER 815 N VIRGINIA STREET PORT LAVACA TX 77979

STATEMENT

AMT DUE REMITTED VIA ACH DEBIT

Statement for information only

As of: 02/28/2025

DC: 8115

Territory:

Page: 002

Customer: 632536 Date: 03/01/2025

Customer IMV SuppiD:

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

As of: 02/28/2025 Mail to:

AMT DUE REMITTED VIA ACH DEBIT Statement for information only

Cust: 632536 PLEASE CHECK ANY Date: 03/01/2025 ITEMS NOT PAID (~)

										_
Billing Date	Due Date	Receivable Number	ount 632536 Urger Reference	Description	Cash Discount	Amount (gross)	Amount (net)	P	Receivable Number	
										-

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

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

134.75 USD

blank = Current Due Item

If Paid By 03/04/2025, Pay This Amount:

Due If Paid On Time: USD

132.06

Past Due: Lost Payment 08/07/2017

Future Due:

0.00 0.00

If Paid After 03/04/2025,

132.06 USD

1 Mindele Culdad 3/3/25

2,451.97

Pay this Amount:

134.75 USD

Due If Paid Late: USD

2.69

APPROVED ON

MAR 03 2025

BY COUNTY AUDITOR CALHOLIN COUNTY, TEXAS

5.95 +

126-11 + 132 - 06 €

For AR Inquiries please contact 800-867-0333

MSKESSON

STATEMENT

As of: 02/28/2025

Page: 001

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

DC: 8115 Customer INV SupplD: Territory: 7001

As of: 02/28/2025 Mail to:

AMT DUE REMITTED VIA ACH DEBIT Statement for information only

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: 03/01/2025

Cust: 820405 PLEASE CHECK ANY Date: 03/01/2025 ITEMS NOT PAID (✔)

								Date: 03/01/202:	HEMSNU	11 PAID (*)
Billing Date	Cue Date	Receivable Number	unt 632538 Under Reference	Description	Cash Discount		Amount P (gross) F	Amount P (net) F	Receivable Number	
Customer Num 02/27/2025 PF column lege	03/04/2025	PHCY WHSE/MEM MED PH 7553704164 B25 Due Item, F = Future D	02-055-191891	115Invoice Current Due ftern	0.12		6.07	5,95 🗸	75537041	34
TOTAL: Cus	stomer Number 82	0405 HEB PHCY WHSE/MI	EM MED PHS Subtotals:		6.07 USD		· · · · · · · · · · · · · · · · · · ·			
Future Due:		0.00						Due If Pald	On Time:	
Past Due:		0.00	1! Paid By 03/04 Pay This Amount	·		5.95	USD	USD Disc lost if		5,95
Last Payment 02/24/2025		1,528.02	If Paid After 03/ Pay this Amount			6.07	USD	Due if Paid USD		0.12 6.07

APPROVED ON

MAR 03 2025

CARY COUNTY AUDITOR

For AR Inquiries please contact 800-867-0333

MSKESSON

STATEMENT

CVS PHCY 7418/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: 02/28/2025

Page: 001

DC: 8115 Customer INV SuppiD: Territory: 7001

Customer: 835437 Date: 03/01/2025

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

As of: 02/28/2025 Mail to:

AMT DUE REMITTED VIA ACH DEBIT Statement for information only

Cust: 835437 PLEASE CHECK ANY

							Date: 03/01/2025	ITEMS NOT PAID (~)
Billing Date	Due Date	Receivable National Accou Number	nt 632536 Order Reference	Description	Cash Discount	Amount P (gross) F	Amount P (net) F	Receivable Number
Customer Num 02/26/2025 PF column lege	03/04/2025	S PHCY 7416/MEM MC PHS 7553664316 Due Item, F = Future Du	3907503	115Invoice Current Due Item	2.57	128.68	126.11	7553664316
TOTAL: Cus	stomer Number 82	15437 CVS PHCY 7416/MB	MC PHS Subtotals:		128.68 USD			
Future Due:		0.00					Due If Paid	On Time:
Past Due:		0.00	if Pald By 03/04/ Pay This Amount		126,11	USD	USD Disc lost if p	126,11
Last Payment		1,528.02	If Paid After 03/0	04/2025.			Due If Paid i	2.57
02/24/2025			Pay this Amount:		128.68	USD	USD	128.68

MO GEVORAGE

MAR 03 2025

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

147.18

39.47

AmerisourceBergen

STATEMENT

Statement Number: 69285629 Date: 02-28-2025

39.47

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

DEA: RA0289276 866-451-9655

Invoice

WALGREENS #12494 340B MEMORIAL MEDICAL CENTER 1302 N VIRGINIA ST PORT LAVACA TX 77979-2509

AMERISOURCEBERGEN PO Box 905223 CHARLOTTE NC 28290-5223

Sat - Fri Due in 7 days Summary Not Yet Due: Current: 147.18 0.00

Customer Number

Past Due: Total Due:

100135284 / 037028188

Account Balance: 147.18 **Account Activity** Document Reference Number Due **Purchase Order Document** Original Last Receipt **Amount Received** Balance Date Date Number Type Amount 02-24-2025 03-07-2025 3206945267 7009015972 53.68 Invoice 0.00 53 68 02-24-2025 03-07-2025 3206945268 7009021938 învoice 6.6B 0.00 6.68 02-24-2025 03-07-2025 3206945269 7009028346 Invoice 14.92 0.00 14 92 02-25-2025 03-07-2025 3207101121 7009036075 Invoice 26.26 0.00 26.26 02-26-2025 03-07-2025 3207233977 7009044908 Invoice 6.17 0.00 6.17 02-27-2025 03-07-2025 3207375008

	Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
l	147.18	0.00	0.00	0.00	0.00	0.00	0,00

Thank You for Your Payment Date Amount 02-28-2025 (2,280.39)

APPROVED ON

MAR 03 2025

Reminders Due Date Amount 03-07-2025 147.18 Total Due: 147.18

CALHOUN COUNTY TEXAS

1 M8C

7009052097

AmerisourceBergen

AMERISOURCEBERGEN DRUG CORP

501 PATRIOT PARKWAY

DEA: RA0316958 866-451-9655

Account Activity Document

Date

02-24-2025

02-24-2025

02-24-2025

02-28-2025

Due

Date

03-07-2025

03-07-2025

03-07-2026

03-07-2025

Number

3206931439

3207548356

ROANOKE TX 76262-6336

STATEMENT

Statement Number: 69303249
Date: 02-28-2025

WALGREENS CENTRAL FILL #21373 340B MEMORIAL MEDICAL CENTER

4100 DALE EARNHARDT WAY 200 NORTHLAKE TX 76262-2389

Invoice

Invoice

AMERISOURCEBERGEN PO Box 978740 DALLAS TX 75397-8740

Summary Not Yet Due: 0.00 Current: Past Due: 1,107.91 0.00

0.00

0.00

Customer Number

Torms

100566356 / 100566356

Sat - Fri Due in 7 days

Total Due: 1,107,91 Account Balance; 1,107.91 Reference Purchase Order Document Last Receipt Original **Amount Received** Balance Number Type Amount 3206931435 7009013852 Invoice 9.58 0.00 9.58 3206931437 7009022301 Invoice 0.90 0.00 0.90

72.72

1,024.71

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,107,91	0.00	0,00	0.00	0.00	0.00	0.00

APPHOVED ON

MAR 03 2025

CALHOUN COUNTY TEXAS

Reminders	
Due Date	Amount
03-07-2025	1,107.91
Total Due:	1,107.91

72.72

1,024.71

7009031538

7009062270

100000	UNIVERSE	OCHO-22 EM	eko wor		(TIME?	in to have	nor -	AMPRICATE	DATE PATE	Suparin	Sarven Sarver	1	- 10 C C C C C C C C C C C C C C C C C C	de construcción de la construcción de	RUDI Y FAIRENNO A
4324	76351	L	1	o	2015	48001296	ø	7/24/2025	\$30,967.64	1 TRUESCRIPTS MANAGEMENT SERVICE LLC	P	517	PCS	e E	1/27/2025	2/9/2025 464334244
4325	76351	2	S.E.	1	2025	34000914	6	1/24/2025	\$89.83	E MIRO COAST MEDICAL CLINIC		164	LEOR		1/72/7025	1/22/2025 452/50256
4329	76351	3	35	1	2025	17000773	D	2/24/2025	\$10.10	1. VICTORIA ORTHOPEDIC CENTER, PLEC	P	450	1925	Ė	2/3/2025	2/3/2075 260151734
4330	76351	3		•	2025	35000883	a	2/24/2025	\$29.10	E PORT LAVAGA CLINIC ASSOCIATES	•	177	VO		1/30/2025	1/50/2025 742605610
4331	76351	3	65	1	2025	35000092	a	2/24/2025	\$49.16	1 SINGLETON ASSOCIATES PA	è	603	d us	è	12/30/2024	12/30/2024 741680498
4332	76351	3	41	a	2025	31001010	0	1/24/2025	\$59.14	1 MSNVA	•	468	URQ URA	è	11/6/2024	11/6/2024 202536458
4333	76351	3	74	0	2025	31000993	o o	2/24/2025	\$59.94	1 MEHRAN A NEZHAD MD	ř	177	d Ov	÷	1/28/2025	1/28/2025 742919415
4334	70351	3	47	۰	2025	31001034	a	2/24/2025	\$60.79	1 MSIWA	P	474	MINIS .	÷	17/7/2024	11/10/2024 202536458
4335	76351	3	21	1	2025	34000890	a	2/24/2025	\$65.89	1 PORT LAVACA CURIC	P	360	POV	ė	1/29/2025	1/29/2025 742605670
433G	763\$1	3	51	0	2025	37000811	0	3/24/2025	\$80.24	1. ASKRAF ABUSARA AND	P	452	e evs	-	1/30/2025	1/30/2025 471158090
4339	76351	3	42	0	2015	34000943		2/24/2025	\$119.72	1 PORT LAVACA CLINIC ASSOCIATES	P	172	O AB	Ė	1/29/2025	1/29/2025 742605670
4341	/6351	3	12	¢	2025	36001200	0	2/24/2025	\$650.29	1 TMM PHYSICIAM ASSOCIATES, PLIC	p	178	50	ŕ	1/11/2025	1/31/2025 300520570
4348	76360	3	19	2	2023	34000499	0	2/24/2015	\$13.17	1 SINGLETON ASSOCIATES PA	P	189	4 ERD		12/10/2024	12/30/2024 741680498
4349	76360	3	7	G	2025		D	7/24/2025	\$33.52	1 GARY F COX MD PA	,	457	OV5	Ė	1/30/2025	1/10/2025 742068224
4350	76360	3	132	6	2025		0	2/24/2025	\$35.68	I. MELISSA A. KAINER EKWIN, MD PA	P	457	qvs	è	1/30/2025	1/20/2025 200802489
4353	76350	3	37	ı		35001010	0	2/24/2025	\$55.56	I MICUSSA MILLER AN AMPC	g	728	TELM	Ė	1/21/2025	1/21/2075 742620408
4356	76360	3	74	a	2025	37000760	0	2/24/2025	\$\$9.94	1 AYO ADU, MID PLLC	P	177	CIV CIV	è	2/4/2025	2/4/2025 273135355
4357	16740	3	94	a	2025	27000717	0	7/74/2025	\$65.27	3 AMN 14 ALEMAN WEINMANN BAIL PA	μ	457	CVS		1/31/2025	1/31/2025 134257684
4159	76760	3	32	ı	2025	340001423	0	2/24/2025	\$80.64	I MACKSON COUNTY MEDICAL CLINIC OF CONA	P	532	WIAD	i	1/25/2025	1/25/2025 741738415
4363	763 5 0	3	32	i		31001041		7/24/2025	\$100.85	2 FACESON MEDICAL CLINIC FONA	P	177	CA AD	i	1/23/2025	1/23/2025 741738475
4365	76360	9	59	ţ	2035		0	2/24/2025	\$123,64	I OBGYN AFFILIATES	e	457	OVS	Ė	11/21/2024	11/25/2024 841520623
4.16E	76360	3	49	D		31000999	0	7/24/7025	\$153.60	1 VICTORIA EP PLIC	P	180	CRE	F	1/20/2025	1/20/2025 424741110
4370	76160	3	45	0	2025		0	2/24/2025	5263.05	1 VICTORIA EVE CINTER	P	457	qvs	ľ	1/20/2025	1/20/2025 742208337
4172	76160	3	33	0	2025		0	2/24/202S	\$31B.47	L US AMES PARTHERS OF 1X PA	P	405	DOV	F	12/31/2024	14/31/2024 760482007
4373	/6360	3	ž)	Ġ	2025	290014EA	Q.	2/24/2025	\$320.64	L US AMES PARTMERS OF TX PA	P	405	POA AOG	ŧ	12/31/2024	12/31/2024 760482007
4374	76360	,	63		2025	31000919	0	2/24/2025	\$326.70	1 MORTHSTAK ANESTHESIA, PA	P	1/6	CO App	Ē	11/32/2024	11/12/2024 201218565
4.175	76360	4	63	D		35000966	a	2/24/2075	\$326.70	1. NORŲKSTAR AHESTINESIA, PA	P	176	CAA	r	21/12/2024	11/17/2024 201218565
4177	76360	3	49	0	2025		a	2/74/2025	\$427.50	& VECTORIA ED REC	e	406	Q EA	ŗ	1/20/2025	1/20/2025 473152325
4387	16370	3	35	9	2025	35000995	0	1/24/2025	\$178.65	L OCEANORY EMERGENCY MEDICINE ASSOCIATES	P	189	¢ ERD	F	12/11/2024	12/11/2024 454288136
4188	76970	, .3	. <u>Q</u> _	. J	202	15000873	. 0_	1/24/1075	\$318.46	I CHESCENT WEW MEDICAL CLENICS PA	P	177	O AB	F	1/27/2025	1/27/2025 462547088
									35,442.54		•	1.1	The second secon		-,-,	The man white and was desired

Modelle Cudeland 3/3/25

APPROVED ON

MAR 03 2025

BY COUNTY AUDITORIAS

HPHG, LLC dba 90 Degree Benefits

Monthly Billing for 3/1/2025 MEMORIAL MEDICAL CENTER (MSt Grp: 76350) 815 N VIRGINIA STREET PORT LAVACA, TX 77979

Master Group Totals

SPEC AGG ADMIN FEES PPO UR CHIC MGMT FEE	175 175 175	\$57,912.20 \$7,262.50 \$3,393.25 \$700.00	Adjustments	6	\$351.92	\$58,264.12 \$7,262.50 \$3,393.25 \$700.00
---	-------------------	---	-------------	---	----------	---

Balance Forward: Payments:	-	\$59,961.33 \$59,961.33
Adjustments:	+	\$0.00
Beginning Balance:		\$0.00
Current Amount Due:	+	\$69,267.95
Current Adjustments:	+	\$351.92
Total Amount Due:		\$69,619.87
1	Middle	Cullad 3/3/25
		012122

Description EE ES EF EC 105 17 11 42

APPROVED ON

MAR 03 2025

Make Check Payable To:

Attn: Revenue Department 90 Degree Benefits PO Box 13246

Birmingham, Al. 35202

BY COUNTY AUDITOR CALHOLIN COUNTY, TEXAS

Please pay premium as billed. Changes received after billing has processed will be reflected on the next months bill. Premium payment is due by the 10th of the month.

MEMORIAL MEDICAL CENTER PROSPERITY BANK ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- Feb 24, 2025 - March 2, 2025

Date 2/28/2025 WIRE OUT CBNA INCOMING SETTLEMENT ACCOUNT 2/28/2025 PAY PLUS ACHTrans 57312760 10100069586943 P 2/28/2025 PAY PLUS ACHTrans 57312760 10100069586943 P 2/28/2025 EXPERTPAY EXPERITPAY 746003411 31000019792503 2/28/2025 EXPERTPAY EXPERITPAY 746003411 3100007768 2100002 2/28/2025 MEMORIAL MEDICAL PAYROLL 746003411 113122650 2/27/2025 PAY PLUS ACHTrans 57092938 101000694480236 P 2/27/2025 PAY PLUS ACHTrans 56957487 101000692843108 P 2/26/2025 PAY PLUS ACHTRANS 56957487 101000692843108 P 2/26/2025 PAY PLUS ACHTRANS 56714680 10100069154320 P 2/25/2025 PAY PLUS ACHTRANS 56714680 10100069154320 P 2/25/2025 PAY PLUS ACHTRANS 56714680 10100069154320 P 2/25/2025 PAY PLUS ACHTRANS 56714680 10100069154320 P	- CitiBank Corporate Card Payment - 3rd Party Payor Fee - EmpDeduct/Employer Contribut - Child Support Payment - 340B Drug Program Expense - Payroll - 3rd Party Payor Fee - Credit Card Processing Fee - 3rd Party Payor Fee - Health Insurance Premium Payment - 3rd Party Payor Fee - 3rd Party Payor Fee - 340B Drug Program Expense - 3rd Party Payor Fee - 340B Drug Program Expense - 3rd Party Payor Fee	CPSI "Handwritten Amount Check" # 2,651.98 ★ 901.567 349.81 ★ 901.568 1,112.00 ★ 800579 570.69 ★ 800580 2,280.39 ★ 550564 361,540.99 ★ 901570 853.82 ★ 901571 59,951.33 ★ 800581 304.61 ← 901572 1,528.02 ★ 500565 57.20 ← 901573
Michelle Cumbedand, Controller Memorial Medical Center PROSPE ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT - ESTIMATED Date Description 3/11/2025 - STATE COMTRIR TEXNET	-March 3, 2025 X Approved on 2,26. SALY BANK ACCRUED ISTOSH MMCNotes	349.81 ÷ 148.07 + Amount (N) 855.82 + 10,624.73 (N) 304.61 ÷
Michelle Comberland, Controller Memorial Medical Center APPROVED ON MAR 03 2925	March 3, 2025 $ \begin{array}{c} &$	57.20 + 1.713.51 0 1.713.51 + 1.713.51 + 0.03 + 1.713.51 + 1.713.54 0
BY COUNTY AUDITOR CALHOUN COUNTY TEXAS	1 • 7 1 5 • 5 4 • • 1 • 7 1 5 • 5 h • • • • • • • • • • • • • • • •	

Transaction Summary

Transaction Complete Trace #

Texas Health and Human Services Commission Memorial Medical Center Operating County

Payment Total	\$10,624.73
Bank Routing and Account Number	
Settlement Date	3/11/2025
DSH Amount	\$10,624.73
Entered By	Michelle Cumberland

Page No: 1 of 1 Run Date: 2/27/2025 Run Time: 14:04:40

	Memorial Medical Center	-	
	Transfer Request		
Amount:	\$ \$00,000.00	Date:	3/3/2025
From Account:	Prosperity Operating Account		
To Account:	Prosperity Money Market		
	MAR 03 2025	-	
ļ	BY COUNTY AUDITOR CALHOUN COUNTY TEXAS		
Explanation:	, .		
	Transfer from Prosperity Operating Account to Prosperity Money Market Account		
Requested by:	Michelle Cumberland Date: 3/3/2025		
Authorized by:	Uni Cl Date: 3/3/2025		

FEB 27 2025

MEMORIAL MEDICAL CENTER

02/27/2025 11:21

AP Open Invoice List

0 ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Due Dates Through: 03/21/2025

Class Pay Code

Vendor# / Vendor Name

11816 ASHFORD GARDENS

Involce# Comment Tran Dt Inv Dt

Due Dt Check Dt Pay

Gross 17,385.33

Discount

No-Pay

Net

022125

02/25/202 02/21/202 03/21/202

0.00

0.00

17,385.33

Vendor Totals: Number Name

11816

ASHFORD GARDENS

Gross 17,385,33 Discount 0.00

No-Pay 0.00

Net 17,385.33

Grand Totals:

Gross

17,385.33

Report Summary Discount 0.00

No-Pay 0.00

Net

17,385.33

APPROVED ON

FEB 2 7 2025

BY COUNTY AUDITOR CALHOUN COUNTY TEXAS

02/27/2025

11:11

FEB 27 202n

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 03/21/2025

Pay Code

ap_open_invoice.template

Vendor# Vendor Name OUNTY, TEXAS

11828 ✓ SOLERA WEST HOUSTON

Comment

11828

Tran Dt Inv Dt 02/25/202 02/20/202 03/21/202

Due Dt Check Dt Pay

Class

Gross 3,876.00 Discount 0.00 No-Pay 0.00

Net 3,876.00

0

/022125

ns. Pmt alexinto mmc opt. in error 02/25/202 02/21/202 03/21/202

5,575.29

0,00

0.00 5,575.29

Invoice#

022025

Vendor Totals: Number Name

WIAD YT ADJI SOLERA WEST HOUSTON

Gross 9,451.29

Discount No-Pay 0.00

Net 0.00 9,451.29

Grand Totals:

Gross 9,451.29 Report Summerry Discount 0.00

No-Pay 0.00

Net 9,451.29

APPROVED ON

FEB 2 7 2025

CALHOUN COUNTY TEXAS

FEB 2 7 2025

MEMORIAL MEDICAL CENTER

11:13

02/27/2025

CALHOUN COUNTY, TEXAS

AP Open Invoice List Due Dates Through: 03/21/2025

ap_open_invoice.template

Vendor# ,Vendor Name

Pay Code Class

11820 ✓ FORTBEND HEALTHCARE CENTER

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

Discount

No-Pay 0.00

Net 5,472.68

0

022125

02/25/202 02/21/202 03/21/202

5,472.68

Gross

0.00

Vendor Totals: Number

Name

FORTBEND HEALTHCARE CENTER

Gross 5,472.68 Discount 0.00

No-Pay 0.00

Net 5,472.68

Grand Totals:

11820

Gross 5,472.68 Report Summary Discount 0.00

No-Pay 0.00

Net 5,472.68

APPROVED ON

FEB 2 7 2025

CALHOUN CHUNTY AUDITOR

8,015.30

0 2/27/202 5 09:51	FEB 27	2025	r.		MEDICAL CENTER en Involce List	1		on open inum	0
Vendor# /Vendor N	Withonn cor	inty, texas	ţ	ue Dates T Class	Through: 03/21/2025 Pay Code	i		ap_open_invo	iice,template
11832 √ BROADM	OOR AT CREE	KSIDE PARK							
invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net /
√ 022025		02/25/20	2 02/20/2	02 03/21/20	2	422.84	0.00	0.00	422.84
,	l	ns fint	- Ole	p.inta	5 MMCOP	tin er	ror		. 1.
√ 022025A		02/25/20	2 02/20/2	02 03/21/20	2	508.20	0.00	0.00	مستمنت 508.20
•	t	1					.		
/ 022125		02/25/20	2 02/21/20	02 02/25/20	2 _	5,313.46	0.00	0.00	5,313.46
,	1	(VIPP	4-	1 AD	51_				•
_/ 022425		02/25/20	2 02/24/20	02 03/21/20		175.00	0.00	0.00	175.00 🗸
1	ţ	ns.pm	北. Ol	ep. In	to MMK	OPT IN	25101	-	. ,
√ 022425A		02/25/20	2 02/24/26	02 03/21/20	2	1,396.80	0.00	0.00	1,395,80 🗸
		t					ı		,
J 022525			02/25/20	02 03/21/20	2	200.00	0.00	0.00	200.00 🗸
	. 1.						, ,		
Vendor To	tals: Number	Name				Gross	Discount	No-Pay	Net
	11832	BROADMOOF	AT CRE	EKSIDE PA	ARK	8,015.30	0.00	0.00	8,015.30
				Fig. 1	i ediment				
Grand Totals:		Gross		Ε	Discount	No-Pa	ay	Net	

0.00

0.00

8,015.30

APPROVED ON

FEB 2 7 2025

BY COUNTY AUDITOR

02/27/2025 11:20

FEB 27 2025

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 03/21/2025

Class Pay Code

Vendor# Vendor Name CALHOUN COUNTY, TEXAS 11824 THE CRESCENT

Invoice# 022125

Comment

Tran Dt Inv Dt 02/25/202 02/21/202 03/21/202

Due Dt Check Dt Pay

Repart Summery

Discount

0.00

Gross 4,923.60

Discount 0.00 No-Pay 0.00

ap_open_invoice.template

Net 4,923.60

Vendor Totals: Number

Name 11824

THE CRESCENT

Gross 4,923.60 Discount 0.00 No-Pay 0.00

Net 4,923.60

Grand Totals:

Gross 4,923.60

No-Pay 0.00

Net 4,923.60

APPROVED ON

FEB 27 2025

BY COUNTY AUDITOR CALHOLIN COUNTY TEXAS

0

02/27/2025 11:05	FEB 27 2			АР Ор	MEDICAL CENTE en Invoice List hrough: 03/21/20			ap_open_inv	0 oice.template	
C Vendor# Vendor	ALHOUN COUNT Name	IY, TEXAS	1.2	Class	Pay Code	20				
11836 √ GOLDE	ENCREEK HEAL	THCARE			•					
, Invoice:		nt Tran Dt	Inv Dt	Due Dt	Check Dt Pay	Gross	Discount	No-Pay	Net	1
√ 022025		02/25/20	2 02/20/20	2 03/21/20	2	372.18	0.00	0.00	372.18	ン
	í	175.pm	c. Ole	w. Int	o wwe o	opt in ea	1011		1	
022125	A	02/25/20	2 02/21/20	2 03/20/20	2	7,751.53	0.00	0.00	7,751.53	<i>></i>
		QIPP	4	1 AD	11				,	
V 022425		02/25/20	2 02/24/20	2 03/21/20	2	14,298.77	0.00	0.00	14,298.77	11
		105 pm	rt. OL	ep. int	2 mmc	Opt in a	rror			
√ 022525	A			2 03/21/20		7,338.05	0.00	0.00	7,338.05	4
/		1 .					2 5			,
✓ 022525	В	02/27/20	2 02/25/20	2 03/21/20	2	16.48	0.00	0.00	16.48	1
	•	ι					L 2			
√ 022525		02/27/20	2 02/25/20	2 03/21/20	2	48,711.69	0.00	0.00	48,711.69	1
	•	``					- 4		•	Ť.,
√ 022525	С	02/27/20	2 02/25/20	2 03/21/20	2	3,090.00	0.00	0.00	3,090.00	
		1					× ,			
Vendor	Totals: Number	Name				Gross	Discount	No-Pay	Net	
	11836	GOLDENCRE	EK HEAL	THCARE		81,578.70	0.00	0.00	81,578.70	
				ficuo	ที่ อิเมหม สห					
Grand Totals:		Gross			iscount	No-P	ay	Ne	et	
		81,578.70			0.00	0.00)	81,57	8.70	
ARDD	C) (PC C)									

APPROVED ON

FEB 2 7 2025

BY COUNTY AUDITOR CALHOUN COUNTY TEXAS

67,062.89

FEB 2 7 2025

MEMORIAL MEDICAL CENTER

02/27/2025	PED 2 ((U/)	MEMORIAL MEDICAL CEN	TER			Ò
10:43	CALHOUN COUNTY, TEXAS	AP Open Invoice List Due Dates Through: 03/21/2	2025		ap_open_inv	-
Vendor# Nendor Nam	9	Class Pay Code				
13004 √TUSCANY V	'ILLAGE					
/ Invoice#	Comment Tran Dt Inv	Dt Due Dt Check Dt Pay	Gross	Discount	No-Pay	Net
√ 022025A		20/202 03/21/202	11,033.48	0.00	0.00	11,033.48 🗸
i	Ins. pmt.	alea. in to mor	ic opt ly	error		
√ 022025C		20/202 03/21/202	15,120.00	0.00	0.00	15,120.00 🗸
√ 022025B	02/25/202 02/2 N	20/202 03/21/202	6,922.95	0.00	0.00	6,922.95 🗸
J 022025	02/25/202 02/2 F\	20/202 03/21/202	697.83	0.00	0.00	697.83 🗸
J 022125		11/202 02/25/202 Y ADT 1	4,534.01	0.00	0.00	4,534.01 🗸
√ 022125A	02/26/202 02/2	1/202 03/21/202 6 Olep. into m	10,599.62	0.00	0.00	10,599.62 🛩
√ 022425B		4/202 03/21/202	7,680.00	0.00	0.00	7,680.00 🗸
√ 022425	·	4/202 03/21/202	6,494.50	0.00	0.00	6,494.50 🗸
√ 022425A	02/25/20 2 02 /2	4/202 03/21/202	3,980.50	0.00	0.00	3,980.50 🗸
Vendor Totals	: Number Name		Gross	Discount	No-Pay	Net
	13004 TUSCANY VILLAGE		67,062.89	0.00	0.00	67,062,89
	ř.	Green Summey			-	
Grand Totals:	Gross	Discount	No-Pa	ау	Net	

0.00

0.00

67,062.89

APPROVED ON

FEB 27 2025

CALHOLIA COUNTY AUDITOR TEXAS

FEB 27 2004

Gross

26,211,17

MEMORIAL MEDICAL CENTER 02/27/2025 0 AP Open Invoice List **CALHOUN COUNTY, TEXAS** 11:15 ap_open_invoice.template Due Dates Through: 03/21/2025 Vendor# / Vendor Name Class Pay Code 12792 🗸 **BETHANY SENIOR LIVING** Invoice# Comment Tran Dt Inv Dt Due Dt Check Dt Pay Gross Discount No-Pay Net 022125 02/25/202 02/21/202 03/21/202 4,059.79 0.00 0.00 4,059.79 ULAR UJ ADII 341.06 022025 02/26/202 02/20/202 03/21/202 0.00 0.00 341.06 022425B 02/26/202 02/24/202 03/21/202 0.00 674.19 0.00 022425 02/26/202 02/24/202 03/21/202 257.00 0.00 0.00 022425A 02/26/202 02/24/202 03/21/202 8,436.31 0.00 0.00 022525 02/27/202 02/25/202 03/21/202 0.00 12,442.82 0.00 Vendor Totals: Number Name Gross Discount No-Pay Net 12792 **BETHANY SENIOR LIVING** 26,211.17 0.00 0.00 26,211.17 Report Stama at **Grand Totals:**

Discount

0.00

No-Pay

0,00

Net

26,211.17

APPROVED ON FEB 2 7 2025

CALHOUN COUNTY TEXAS

Memorial Medical Center Nursing Home UPL Weekly Cantex Transfer Prosperity Accounts

3/3/2025 Today's Beginning Salance Yeanster-Out Balance 14,292.96 28,782.67 Bank Balance 36,188.55 Variance Leave in Balance 100.00 Routma Information for Ashford Gardens: Y7 Comp 1 recon 7.305.92 Ashford Health Care Center Ltd Co JP Margan Chase Bank Adjust Balance/Transfer Amt 54,548.87 16.002.56 57.024.16 16.102.56 57,124.16 Bank Balance 57,124.16 Variance Leave in Balance 100.00 Y7 Camp I recen 2,475,29 Adjust Balance/Transfer Amt 54.542.27 234,070.38 233,970.38 336,991.02 339,134 08 319,134 08 Leave in Balance 100.00 Y7 Comp 1 recon 2,043.05 Adjust Balance/Transfer Ams 356,991.02 15,878.59 15.778.59 51,370 07 61,470,07 59,079.06 Bank Balance 61,470.07 Variance Leave in Balance 100.00 Y? Comp 1 recon 2,291.01 Adjust Balance/Transfer Ams 59,079.06 78,171,69 78,071.69 209,275 87 209,375.87 Bank Balanci 209,375 87 Leave in Balance 100.00 28:782-67 + APPROVED ON 54:548-87 + Y7 Comp 1 recon MAR 03 2025 2,268.43 336:991:02 + 59 - 079 - 06 + CALHOUN COUNTY AUDITOR oution / Fort Bend / Broadmoor 207,007.44 + 686+409+06 • Adjust Balance/Transfer Amt 207,007.44 TOTAL TRANSFERS 686,409.06

Note: Dely balances of over \$5,000 will be transferred to the nursing home.

Note 2: Each account has a have balance of \$100 that MAKE deposited to open assount

Balances Overview

Ac	col	unt	· Na	me

Total Balance	\$4,274,554.54		\$4,446,459.26	\$4,274,554.54	\$4,274,554.54
77168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.76		\$39.76	\$39.76	\$39.76
*2998 MMC -MONEY MARKET FUND	\$264,700.30		\$264,700.30	\$264,700.30	\$264,700.30
*3407 MMC -NH TUSCANY VILLAGE	\$360,531.74		\$404,139.87	\$360,531.74	\$360,531.74
*5506 MMC -NH BETHANY SENIOR LIVING	\$120,415.57		\$120,415.57	\$120,415.57	\$120,415.57
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.30	\$101.30 \$10		\$101.30	\$101.30
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$774,88		\$774.88	\$774.88	\$774.88
*4551 CAL CO INDIGENT HEALTHCARE	\$5,502.40	\$5,502.40 \$5,502		\$5,502.40	\$5,502.40
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$184,432.48		\$194,272.85	\$184,432.48	\$184,432.48
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$61,470.07	1	\$61,470.07	\$61,470.07	\$61,470.07
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$209,375.87	J	\$209,375.87	\$209,375.87	\$209,375.87
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$339,134.08	1	\$351,562.59	\$339,134.08	\$339,134.08
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$57,124.16	J	\$61,952.56	\$57,124.16	\$57,124.16
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$36,188.59	J	\$36,188.59	\$36,188.59	\$36,188.59
"4357 MEMORIAL MEDICAL - OPERATING	\$2,634,763.34		\$2,735,962.65	\$2,634,763.34	\$2,634,763.34

Memorial Medical Center Nursing Home UPL Weekly Nexion Transfer Prosperity Accounts 3/3/2025

Account Pending Today's Beginning Amount to Be Transferred to Nursing Balance Nursing Home Transfer-Out Home 177,472.62 Number Transfer-In Deposits Balance 156,543.19 149,688,54 177,577.83 184,432.48 184,432.48 Bank Salance Variance Leave in Balance 100.00 QIPP Y7 Adj 1 6,595.68 January Interest 158.97 February Interest 105.21 Routina Information for Golden Creek; Nexion Health at Golden Creek Wells Fargo Bank, N.A. Adjust Balance/Transfer Amit Note: Only balances of over \$5,000 will be transferred to the nursing home. Note Z: Each account has a base balance of \$100 that MMC deposited to open account.

APPROVED ON

MAR 03 2025

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

					MMC PORTION	4		1
						QIPP/Comp4		
	Transfer-Out	Transfer-in	Chab/ courb?	QIPP/Comp 2	Q(PP/Comp3	& Lapse	QIPP TI	NH PORTION
2/28/2025 Added to Account		/ 105.21					-	105.21
2/26/2025 WIRE OUT NEXION HEALTH d/b/s GOLDEN CREEK HC	149,588,54	•					_	
2/16/2025 Deposit		156,924,13					-	
2/26/2025 TSY3/TRANSPIRST CR CO DEF 543644555876917 43							•	156,924.13
	•	16,101.39						16,101.29
2/16/2025 HOVITAS SOLUTION HCCLAIMPINT 676097 420000154	-	2.894.20						2,894,20
2/24/2025 TSYS/TRANSFIRST CR CD DEP 543684555876927 43		1,553.00						
		/	3				•	1,553.00
								·
	149,688.54	177,577.83	<u> </u>	•				177,577.83

Balances Overview

Αc	co	unt	Na	ame
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Total Balance	\$4,274,554.54	\$4,446,459.26	\$4,274,554.54	\$4,274,554.54
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.76	\$39.76	\$39.76	\$39.76
*2998 MMC -MONEY MARKET FUND	\$264,700.30	\$264,700.30	\$264,700.30	\$264,700.30
*3407 MMC -NH TUSCANY VILLAGE	\$360,531.74	\$404,139.87	\$360,531.74	\$360,531,74
*5506 MMC -NH BETHANY SÉNIOR LIVING	\$120,415.57	\$120,415.57	\$120,415.57	\$120,415.57
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.30	\$101.30	\$101.30	\$101.30
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$774.88	\$774.88	\$774.88	\$774.88
*4551 CAL CO INDIGENT HEALTHCARE	\$5,502.40	\$5,502.40	\$5,502.40	\$5,502.40
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$184,432.48	\$194,272.85	\$184,432.48	\$184,432.48
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$61,470.07	\$61,470.07	\$61,470.07	\$61,470.07
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$209,375.87	\$209,375.87	\$209,375.87	\$209,375.87
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$339,134.08	\$351,562.59	\$339,134.08	\$339,134.08
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$57,124.16	\$61,952.56	\$57,124.16	\$57,124.16
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$36,188.59	\$36,188.59	\$36,188.59	\$36,188.59
"4357 MEMORIAL MEDICAL - OPERATING	\$2,634,763.34	\$2,735,962.65	\$2,634,763.34	\$2,634,763.34

Memorial Medical Center Nursing Home UPL Weekly HMG Transfer Prosperity Accounts 3/3/2025

State Running Home	Account Humber	Previous Beginning Selence 100.00	Transfer-Out	Transfer in 674 88	Cks Ogered	Pending Osposits	Bank Balance Variance Leave in Balance	Today's Beginning Galance 774.58 774.58	Amoent to 84 Transferred to Numlee Home 674.88	
Nursing Home	Account Number	Previous Regioning Balance 2.310.77	<u>Transfer-Out</u> 2,210,77	Transfersin 1.30	Cla Greend	Pending Deposits	Adjust Belence/Transfer Amt Bank Belance Variance Leave in Balance	70day's Seginning Selence 101.10 101.10 100.00	Amount to Be Transfarred to Nursing Home	
Routing Information for Gulf Pointe Plaza:					Tor	al transfers	Adjust Balance/Transfer Amt	1.30		
Alexander and an area or						,	Z14 * .1	M. C. AA	1	

Note: Only balances of arer \$5,000 will be transferred to the nursing inone.
Note 3: Each account has a base balance of \$100 that MMC deposited to open account.

Approved: (Ni chille Culolland
Michelle Cumberland Controller
3/3/202

APPROVED ON

MAR 03 2025

CALHOUN COUNTY TEXAS

Barrier and the second of the				<u>"</u>	MMC PORTION			1
			ł	QIPP/Comp		QIPP/Comp4		
STEERING TO THE STATE OF THE ST	Transfer-Qut		QIPP/Comp1	2	QIPP/Comp3	Atapse	QIPP Ti	NH PORTION
2/28/2025 Added to Account 2/27/2025 HNB - ECHO HCCLAIMPMT 746003411 440000214108	•	0.21					-	0.21
2/25/2025 HNB - ECHO HCCLAIMPMT 746003411 44000257887	;	361.07 155.44					•	351.07
2/26/2025 HNB - ECHO HCCLAIMPMT 746003411 440000267539	J.	155.44 158.16					•	155,44
		674.88	.					158.16 674.88
								_
					MMC PORTION			
	Transfer-Out	Transfer-in	QIPP/Comp1	QIPP/Comp		QIPP/Comp4	T PEIO	NH РОВТІО М
7.728/2015 Added to Account	Transfer-Qut	Transfer-In	QIPP/Comp1	QIPP/Comp		QIPP/Comp4	QIPPTI	NH PORTION
				QIPP/Comp		QIPP/Comp4	QIPPTI	NH PORTION 1,30
2/28/2025 Added to Account	•	1.30		QIPP/Comp		QIPP/Comp4	QIPPTI	,
2/28/2025 Added to Account	2,210.77	1.30 /		QIPP/Comp		QIPP/Comp4	QIPPTI	1,30

Balances Overview

Account Name

Total Balance	\$4,274,554.54	\$4,446,459.26	\$4,274,554.54	\$4,274,554.54
*7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.76	\$39.76	\$39.76	\$39.76
*2998 MMC -MONEY MARKET FUND	\$264,700.30	\$264,700.30	\$264,700.30	\$264,700.30
*3407 MMC -NH TUSCANY VILLAGE	\$360,531.74	\$404,139.87	\$360,531.74	\$360,531.74
*5506 MMC -NH BETHANY SENIOR LIVING	\$120,415.57	\$120,415.57	\$120,415.57	\$120,415.57
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.30	\$101.30	\$101.30	\$101.30
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$774.88	√ \$774.88	\$774.88	\$774.88
*4551 CAL CO INDIGENT HEALTHCARE	\$5,502.40	\$5,502.40	\$5,502.40	\$5,502.40
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$184,432.48	\$194,272.85	\$184,432.48	\$184,432.48
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$61,470.07	\$61,470.07	\$61,470.07	\$61,470.07
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$209,375.87	\$209,375.87	\$209,375.87	\$209,375.87
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$339,134.08	\$351,562.59	\$339,134.08	\$339,134.08
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$57,124.16	\$61,952.56	\$57,124.16	\$57,124.16
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$36,188.59	\$36,188.59	\$36,188.59	\$36,188.59
*4357 MEMORIAL MEDICAL - OPERATING	\$2,634,763.34	\$2,735,962.65	\$2,634,763.34	\$2,634,763.34
Account Name				

Memorial Medical Center Nursing Home UPL Weekly Tuscany Transfer Prosperity Accounts 3/3/2025

Pervious Beginning Transfer Out Transfer Out Transfer Out Transfer Out Obs Gleared Deposits Today's Beginning Balance, Number Salance Transfer Out Transfer Out Obs Gleared Deposits Today's Beginning Balance, Number Balance Sp. 100.531.74

Bank Balance Solo Sil. 74

Bank Balance Transfer Amt 100.00

V7 Comp 1 recon 4.333.21

Note: Only bolonces of over \$5,000 will be transferred to the nursing home.

Note 2: Each occount has a base belonce of \$100 that MMC deposited to open account.

APPROVED ON

MAR 03 2025

BY COUNTY AUDITOR CALHOUN COUNTY TEXAS

		1		۸	AMC PORTION	٧		
II-Search	Transfer-Out	<u>Transfer-in</u>	QIPP/Comp 1	QIPP/Comp 2, 3 4 & Lapse	QiPP/Comp 3	QIPP/Comp 4&Lapse	QiPP Ti	NH PORTION
2/28/2025 Added to Account	-	271.08						271.08
2/28/2025 Deposit	•	186,752.44					-	186,752.44
2/27/2025 HNB - ECHO HCCLAIMPMT 746003411 440000214355	-	32,950.96					-	32,950.96
2/27/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000125	- 1	1,724.51						1,724.51
2/26/2025 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE	591,944.04	•						
2/26/2025 Deposit		26,762.08					-	26,762.08
2/26/2025 Deposit	•	41,914.84						41,914.84
2/25/2025 Deposit		2,095.00					_	2,095.00
2/25/2025 HNB - ECHO HCCLAIMPMT 746003411 440000227533		494.95						494.95
2/25/2025 WELLPOINT CO AP E-PAYMENT EE52946184 1110000	•	6,487.52	2,180,10	642.20		3,665.22	4,333.01	2,153.71
2/25/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000114	-	40,093.71	·	7,77878				40,093,71
1/24/2025 HNB - ECHO HCCLAIMPMT 746003411 440000272578		19,696.09						19,696.09
2/24/2025 NOVITAS SOLUTION HCCLAIMPMT 676201 420000139		1,188.56	j					1,188.56
-	591,944.04	360,431.74	2,180,10	642.20		3,665.22	4,333.81	356,097.93

Balances Overview

Acco	unt	Name
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Total Balance	\$4,274,554.54	\$4,446,459,26	\$4,274,554.54	\$4,274,554.54
7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.76	\$39.76	\$39.76	\$39.76
2998 MMC -MONEY MARKET FUND	\$264,700.30	\$264,700.30	\$264,700.30	\$264,700.30
3407 MMC -NH TUSCANY VILLAGE	\$360,531.74	\$404,139.87	\$360,531.74	\$360,531.74
*5506 MMC -NH BETHANY SENIOR LIVING	\$120,415.57	\$120,415.57	\$120,415.57	\$120,415.57
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.30	\$101.30	\$101.30	\$101.30
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$774.88	\$774.88	\$774.88	\$774.88
*4551 CAL CO INDIGENT HEALTHCARE	\$5,502.40	\$5,502.40	\$5,502.40	\$5,502.40
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$184,432.48	\$194,272.85	\$184,432.48	\$184,432.48
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$61,470.07	\$61,470.07	\$61,470.07	\$61,470.07
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$209,375.87	\$209,375.87	\$209,375.87	\$209,375.87
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$339,134.08	\$351,562.59	\$339,134.08	\$339,134.08
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$57,124.16	\$61,952.56	\$57,124.16	\$57,124.16
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$36,188.59	\$36,188.59	\$36,188.59	\$36,188.59
*4357 MEMORIAL MEDICAL - OPERATING	\$2,634,763,34	\$2,735,962.65	\$2,634,763.34	\$2,634,763.34

Memorial Medical Center Nursing Home UPI. Weekly HSt.Transfer Prosperity Accounts 3/3/2025

January Interest 169.40 February Interest 152.69	Previous Previous Previous Previous Pending Muraling Horse Humber Balanco Transfer-Out Transfer-In Cha Cleared Repayment Today's Segining Salance Nursing Horse 119,987-38 175,004.02 115,412.21

Nate: 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 Ams 115,279.31

Approved Michelle Cumberland, Controller 1/3/2015

APPROVED ON

MAR 03 2025

CALHOUN COUNTY AUDITOR

					MMC PORTIO	4		
	<u>Transfer-Out</u>	Transfer-in	QJPF/Comp1	QiPP/Comp 2	QIPP/Comp3	QJPP/Comp4&Lapse	QIPP YI	NH PORTION
2/28/2025 Added to Account	٠.	152.69						152.89
2/28/2025 CENTENE CORP HCCLAIMPHIT \$3101125920684	. 1	772.46						772.46
2/26/2025 WIRE OUT REG Leased SpCo LEC	175,004.02							
2/26/2025		26,282.56						26,282,56
2/26/2025 NBC SWEEP FAC 02330 56009680008801 SWEEP PR	•	10,904.85						10.904.85
2/25/2025 Depasit		29,589.19				29,589.19	10,356.22	19.232.97
2/25/2025 CENTENE CORP HCCLAIMPAIT 53101122577855		47,352,23						47,152,23
2/24/2023 HUMANA CHA OEB HCCLAIMPM? 69341548 42000011		372.03	1					378.03
_			_/					
_	175,004.02	115,432.21	ν			29,589.19	10,356.22	105,075.99

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Balances Overview

Account	Nam	e
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Total Balance	\$4,274,554.54	\$4,446,459.26	\$4,274,554.54	\$4,274,554.54
7168 MEMORIAL MEDICAL CENTER - LOCKBOX MONEY MKT	\$39.76	\$39.76	\$39.76	\$39.76
2998 MMC -MONEY MARKET FUND	\$264,700.30	\$264,700.30	\$264,700.30	\$264,700.30
3407 MMC -NH TUSCANY VILLAGE	\$360;531.74	\$404,139.87	\$360,531.74	\$360,531.74
5506 MMC -NH BETHANY SENIOR LIVING	\$120,415.57	√ \$120,415.57	\$120,415.57	\$120,415.57
'5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$101.30	\$101.30	\$101.30	\$101.30
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$774.88	\$774.88	\$774.88	\$774.88
*4551 CAL CO INDIGENT HEALTHCARE	\$5,502.40 \$5,502.40	\$5,502.40	\$5,502 .40	
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$184,432.48	\$194,272.85	\$184,432.48	\$184,432.48
*4446 MEMORIAL MEDICAL / NH FORT BEND	\$61,470.07	\$61,470.07	\$61,470.07	\$61,470.07
"4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	\$209,375.87	\$209,375.87	\$209,375.87	\$209,375.87
*4411 MEMORIAL MEDICAL / NH CRESCENT	\$339,134.08	\$351,562.59	\$339,134.08	\$339,134.08
*4403 MEMORIAL MEDICAL / NH BROADMOOR	\$57,124.16	\$61,952.56	\$57,124.16	\$57,124.16
*4381 MEMORIAL MEDICAL / NH ASHFORD	\$36,188.59	\$36,188.59	\$36,188.59	\$36,188.59
*4357 MEMORIAL MEDICAL • OPERATING	\$2,634,763.34	\$2,735,962.65	\$2,634,763.34	\$2,634,763.34

KNEW

	ial Medical Center		Date Requeste	ed:	3/3/2025
A		APPROVED	ON		
Y		MAR 03 2		FOR ACCT USE	ONLY
E		BY COUNTY AL	Y TEXAS	☐ Imprest Cash	
				Mail Check to Vendo	
MOUNT:	\$	7,305.92	G/L NUI	MBER:	10255040
XPLANATION:	Wellpoint QIPP Y7 (Comp 1 Interim Alloca	tion		
				· 1	
EQUESTED BY:	Caitlin Clevenger		AUTHORIZE	ED BY: MY	

broudmoor

P <u>Memo</u> A	rial Medical Center	Date Requested:	3/3/2025
Y	MAR 0		FOR ACCT USE ONLY Imprest Cash A/P Check Mail Check to Vendor Return Check to Dept
AMOUNT: EXPLANATION:	\$ 2,475.29 Wellpoint QIPP Y7 Comp 1 Interior	-	10255040
REQUESTED BY:	Caitlin Clevenger	AUTHORIZED BY:	ma

Crescurk

P <u>Memo</u> A	orial Medical Center	Date Req	juested:	3/3/2025
γ ——		APPROVED ON MAR 03 2025	500.4255.025	
E		BY COUNTY AUDITOR COUNTY TEXAS	FOR ACCT USE ONLY Imprest Cash A/P Check Mail Check to Vendor Return Check to Dept	(
AMOUNT:	\$	2,043.06 / G/L	NUMBER:	10255040
EXPLANATION:	Wellpoint QIPP Y7 Comp	1 Interim Allocation		
REQUESTED BY:	Caitlin Clevenger	AUTHO	RIZED BY: WW	

XOX bend

P <u>Memo</u>	ial Medical Center	Date Req	uested:	3/3/202
Α		·		
Υ ——		APPROVED ON		-
E		MAR 03 2025	FOR ACCT USE ONLY	
Ε		BY COUNTY AUDITOR CALHOUN COUNTY TEXAS	☐ Imprest Cash ☐ A/P Check	
-			Mail Check to Vendor	
			Return Check to Dept	
AMOUNT:	\$	2,291.01 J G/L	NUMBER: 1	0255040
EXPLANATION:	Wellpoint QIPP Y7 Com	p 1 Interim Allocation		
			-	
REQUESTED BY:	Caitlin Clevenger	AUTHO	DRIZED BY: NGC	<u> </u>

Soleriu

	orial Medical Center	D	ate Requested:		3/3/202
Α		APPROVED ON			
ν —		MAR 03 2025			
E		BY COUNTY AUDITOR CALHOUN COUNTY, TEX	19	FOR ACCT USE ONLY	
E		- Court South () Lay		Imprest Cash	
				A/P Check	
				Mail Check to Vendor	
				Return Check to Dept	
MOUNT:	\$	2,268.43	G/L NUMBER:		1025504
(PLANATION:	Wellpoint QIPP Y7	Comp 1 Interim Allocation			
EQUESTED BY:	Caitlin Clevenger		AUTHORIZED BY:	1	

Tuscary

A Memo	rial Medical Center		Date Reques	ted:	3/3/202
Y		APPROVED	ON	FOR ACCT USE O	ONLY
E		MAR 03 20		☐ Imprest Cash ☐ A/P Check ☐ Mail Check to Vendor ☐ Return Check to Dept	
AMOUNT:	\$	4,333.81	G/L NL	JMBER:	1025504
EXPLANATION:	Wellpoint QIPP	Y7 Comp 1 interim Allocat	ion		
· · · · · · · · · · · · · · · · · · ·					
REQUESTED BY:	Caitlin Clevenge	r	AUTHORIZ	LED BY: WW	

QIPP PMTS TO MMC 3.3.25

QIPP Payment to	QIPP Payment to MMC from Nursing Facilities		Commissioner	Commissioner's Court 3/6/2025						
NH Name	From Bank Acct #	Ck#	Payee	GL#	WELLPOINT Y? COMP 1 RECON			TOTAL		Date
Ashford	Prasperity	┷	MMC -Prosperity Operating	10255040	7,305.92			 	7.305.92	3/6/2025
Broadmoor	Prosperity	<u> </u> ^	MMC -Prosperity Operating	10255040	2,475.29					3/6/2025
Crescent	rosperity	<u> </u>	MMC -Prosperity Operating	10255040	2,043.06					3/6/2025
Fort Bend	Prosperity	Δ.	MMC -Prosperity Operating	10255040	2,291.01					3/6/2025
Solera	Prosperity		MMC -Prosperity Operating	10255040	2,268.43		-	······································		3/6/2025
Golden Creek	² rosperity	N	AMC -Prosperity Operating	10255040						3/6/2025
Bethany	³ rosperity	N	AMC -Prosperity Operating	10255040						3/6/2025
Tuscany	Prosperity		AMC -Prosperity Operating	10255040	4,333.81				4,333.81	
				Total:	20,717,52		•		20,717.52	

Approved Wille Cull ad Michelle Cumberland 3/3/2025