

Exhibit “A”

Exhibit “B”

Amount Paid on Client
Jan-Feb 2016

Client #	Term Date	Amount Paid	Source	Src Amt Paid	Amount Billed
1011	1/31/2017	2,204.28		0	5,263.25
1001	8/31/2016	118		0	246
036-3413	9/30/2016	538.08		0	1,298.00
1008	8/31/2016	762.79		0	1,722.87
036-3224	6/30/2016	2,117.26		0	4,993.51
036-3454	4/30/2016	503.67		0	1,204.00
036-2833	6/30/2016	341.65		0	497.68
036-3426	10/31/2016	81.77		0	81.77
036-2783	10/31/2016	634.19		0	1,017.00
036-2942	7/31/2016	771.72		0	1,712.63
036-3068	10/31/2016	91.9		0	150
1004	9/30/2016	241.38		0	380.32
036-2749	6/30/2016	165.31		0	165.31
1012	1/31/2017	125		0	125
036-3217	4/30/2016	573.31		0	1,207.60
036-3467	6/30/2016	668.08		0	1,533.94
036-3453	4/30/2016	37.6		0	75.06
1000	7/31/2016	97.81		0	97.81
036-3464	6/30/2016	278.98		0	278.98
036-3364	8/31/2016	233.31		0	310.59
036-2811	9/14/2016	1,651.89		0	2,248.07
036-2778	11/30/2016	190.53		0	225
036-2475	7/31/2016	222.41		0	279.64
1005	9/30/2016	121.48		0	269.07
1003	9/30/2016	2,143.48		0	4,972.24
1002	9/30/2016	155.34		0	248.05
036-3432	12/31/2016	311.68		0	454.46
036-3363	1/31/2017	503.31		0	1,206.00
1009	12/31/2016	265.87		0	578.66
036-2383	6/30/2016	131.41		0	250
Totals		16,283.49		0	33,092.51

IHC-Dashboard Feb. 2016-Paid & Number of Clients

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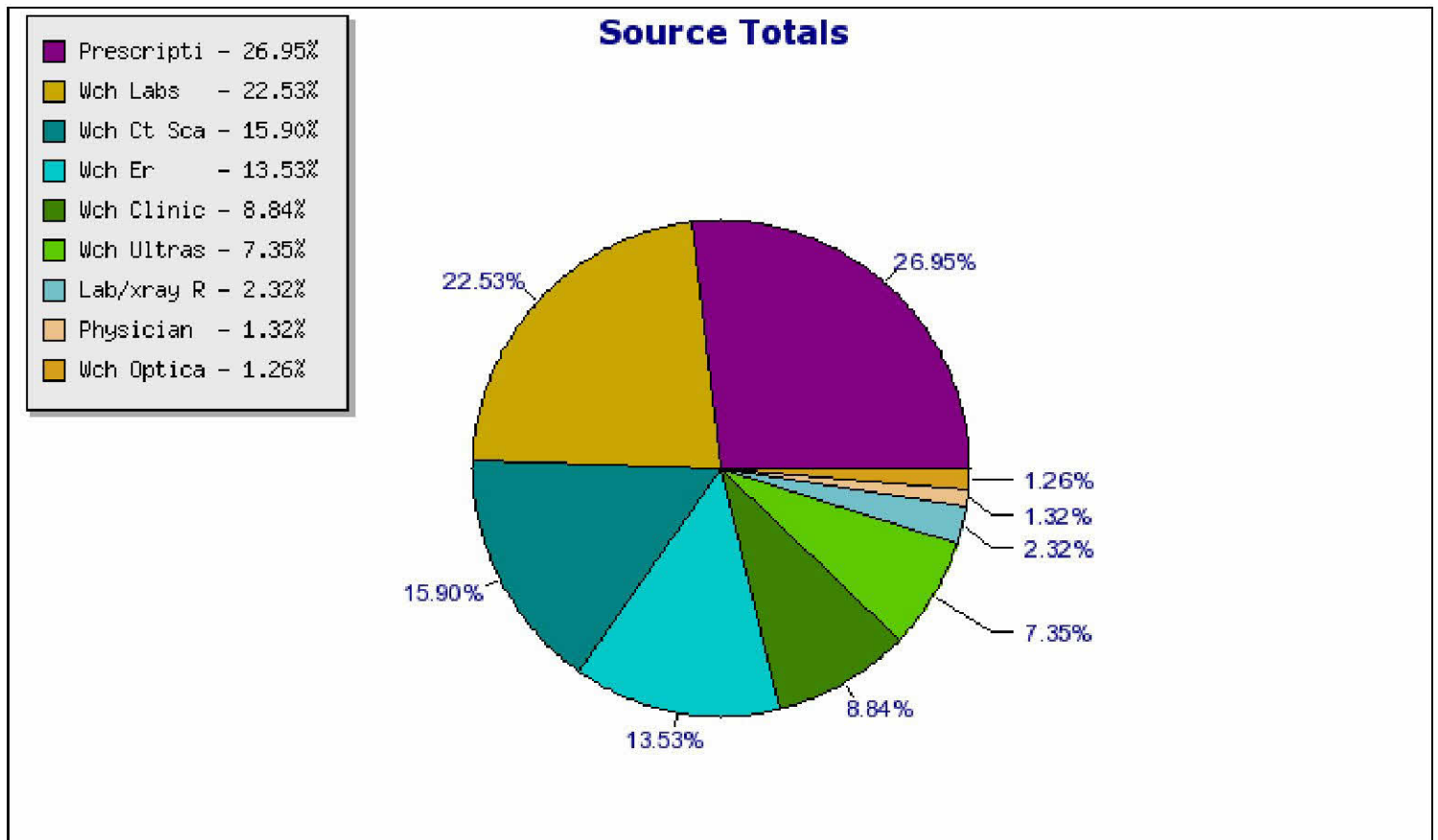
Dashboard Report
Winnie Stowel Hospital District Indigent Healthcare Services

Page 1

Source Totals for Batch Dates 03/16/2016 through 03/23/2016

Prescription Drugs	26.95%	\$2,681.79
Wch Labs	22.53%	\$2,241.88
Wch Ct Scan	15.90%	\$1,582.19
Wch Er	13.53%	\$1,346.03
Wch Clinic	8.84%	\$879.45
Wch Ultrasound	7.35%	\$731.85
Lab/xray Readings	2.32%	\$231.06
Physician Services	1.32%	\$131.41
Wch Optical Specialist	1.26%	\$125.00

Total Expenditures **\$9,950.66**



Entry Statistics for Entry Dates 03/16/2016 through 03/23/2016

Clients Entered	0
Rapid Reg. Entered	1
Vendors Entered	0
Worksheets Entered	3
Invoices Entered	24

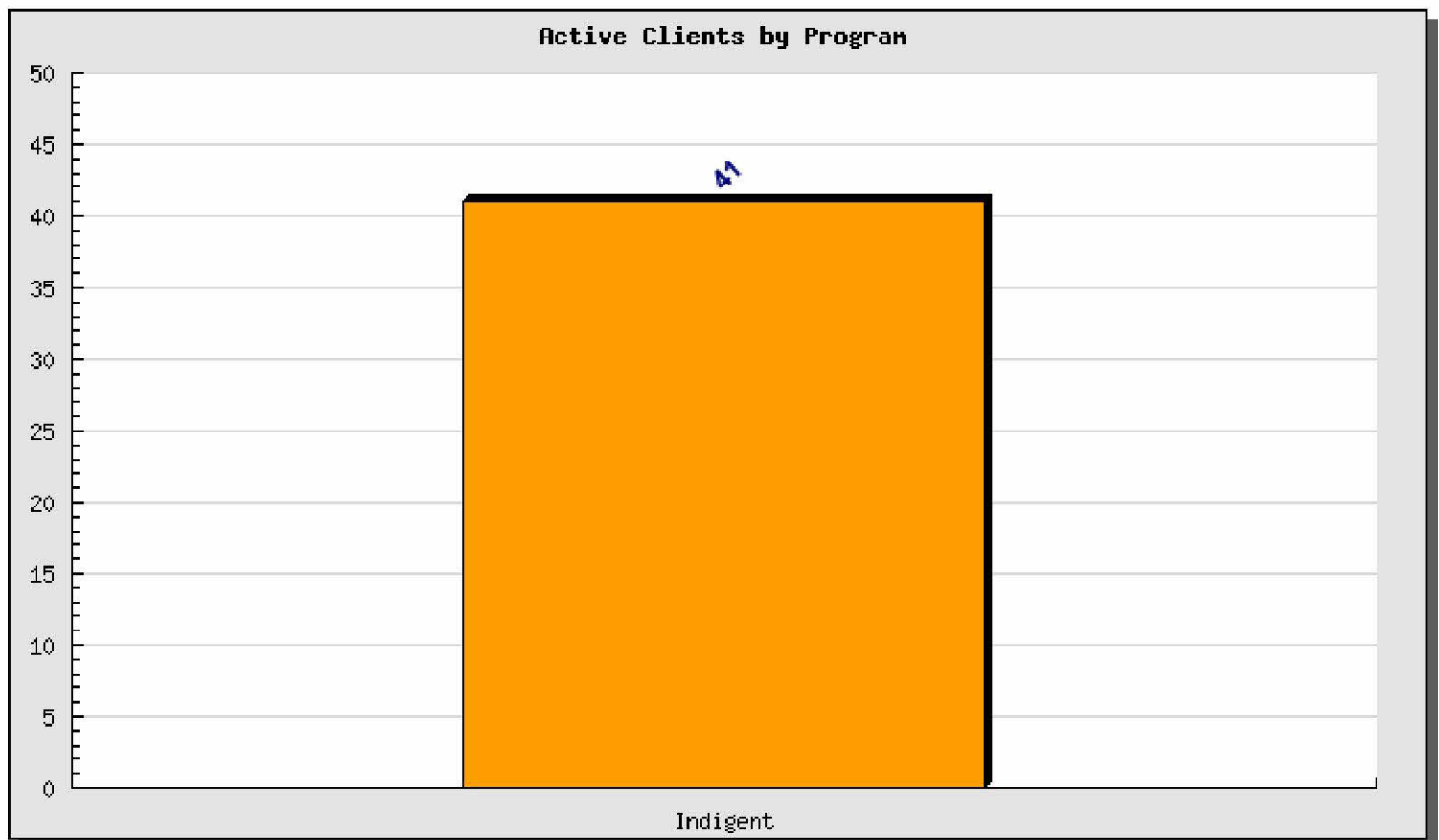
Void Statistics for Void Dates 03/16/2016 through 03/23/2016

Clients Voided	0
Vendors Voided	0
Rapid Reg. Voided	0
Invoices Voided	1

Active Clients by Program for Eligibility Dates 03/16/2016 through 03/23/2016

Indigent	41
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Total Clients By Program **41**



Appointments Scheduled by Type for Appointment Dates 03/16/2016 through 03/23/2016

New Appointment	0
Renewal	0

Total Appointments Scheduled **0**

IHC-Dashboard Jan. 2016-Paid & Number of Clients

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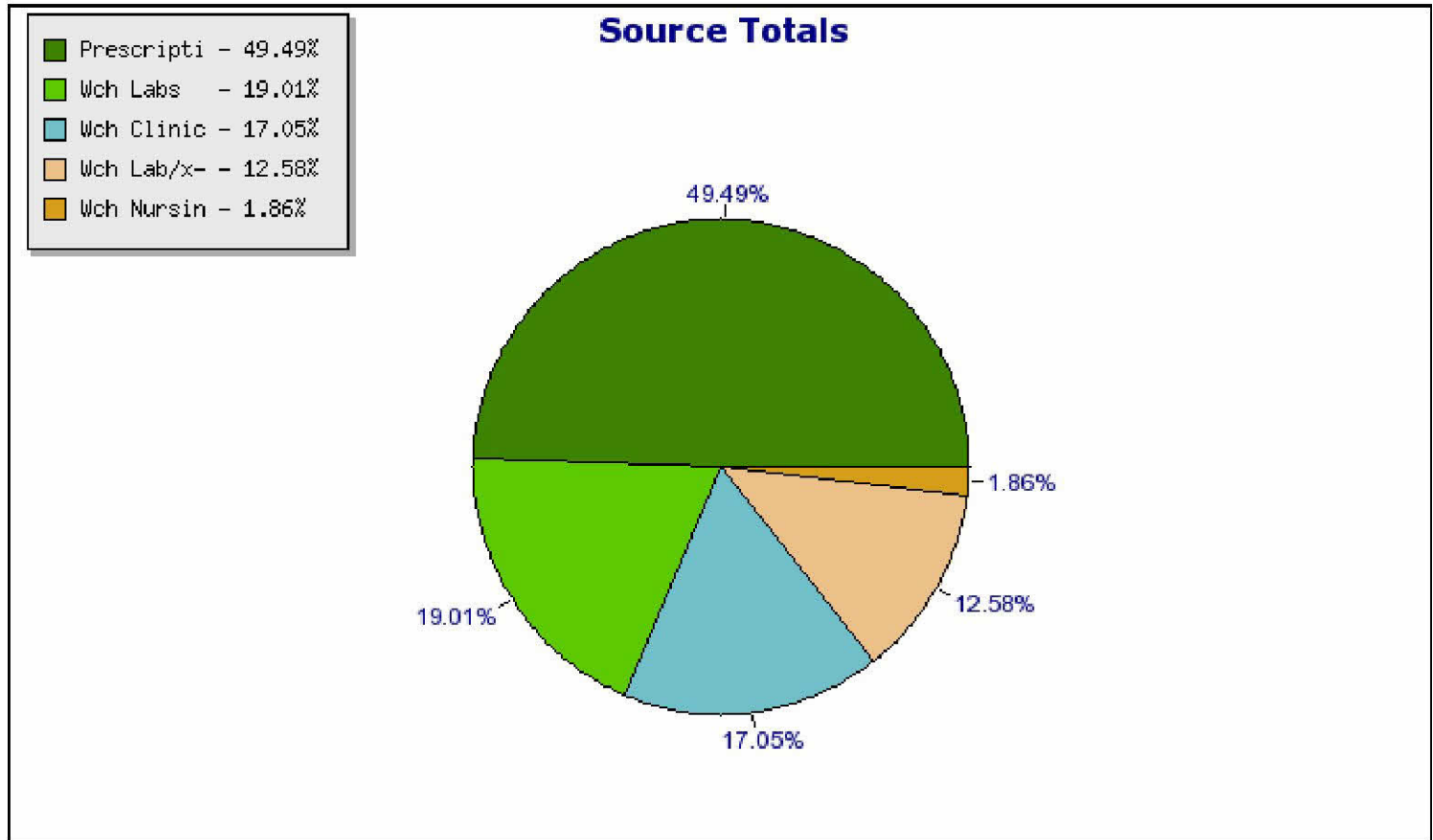
Dashboard Report

Winnie Stowel Hospital District Indigent Healthcare Services

Page 1

Source Totals for Batch Dates 02/17/2016 through 02/17/2016

Prescription Drugs	49.49%	\$3,134.09
Wch Labs	19.01%	\$1,204.17
Wch Clinic	17.05%	\$1,079.94
Wch Lab/x-ray	12.58%	\$796.63
Wch Nursing Home	1.86%	\$118.00
Total Expenditures		\$6,332.83



Entry Statistics for Entry Dates 02/17/2016 through 02/17/2016

Clients Entered	0
Rapid Reg. Entered	2
Vendors Entered	0
Worksheets Entered	2
Invoices Entered	0

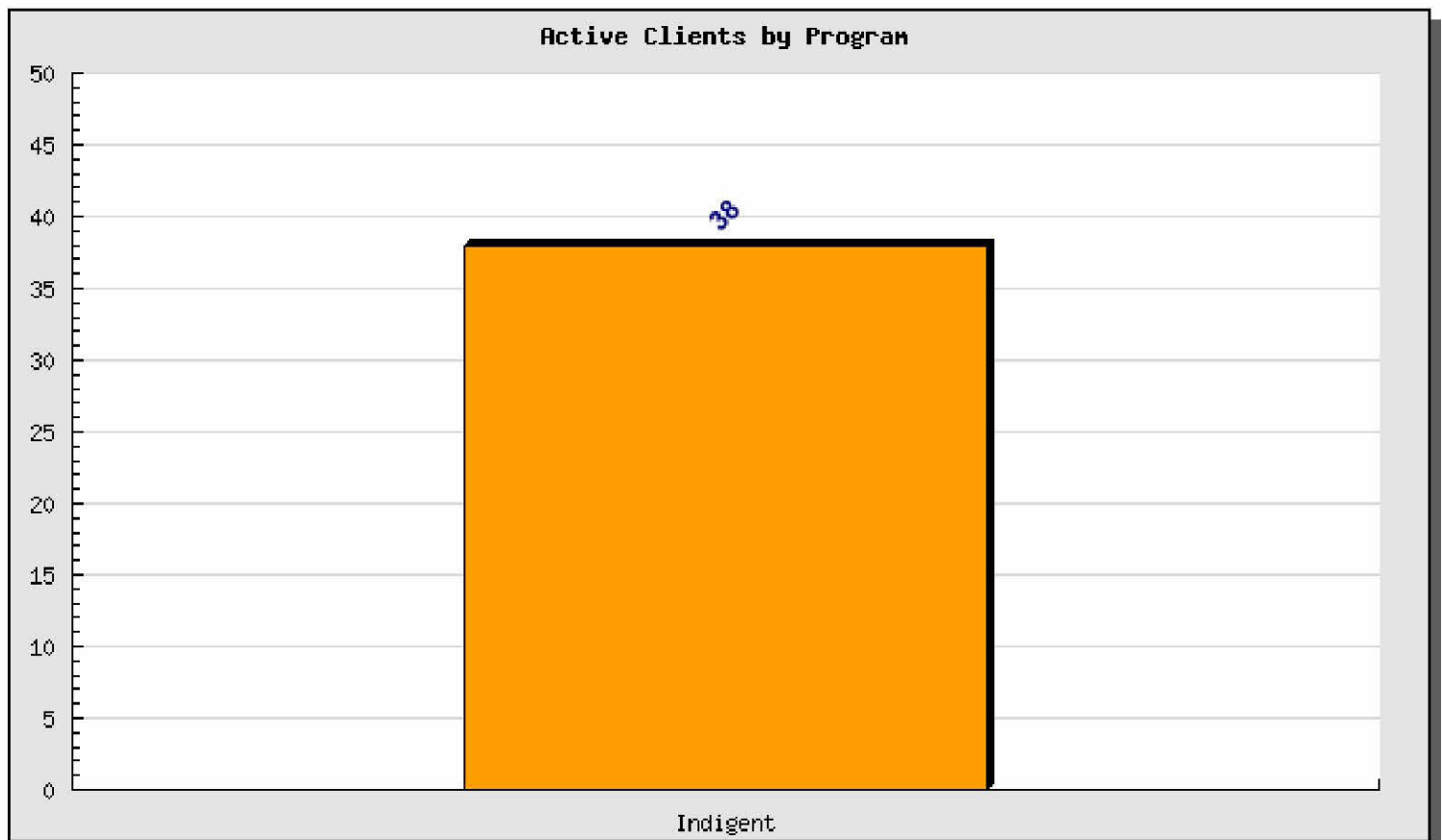
Void Statistics for Void Dates 02/17/2016 through 02/17/2016

Clients Voided	0
Vendors Voided	0
Rapid Reg. Voided	0
Invoices Voided	0

Active Clients by Program for Eligibility Dates 02/17/2016 through 02/17/2016

Indigent	38
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Total Clients By Program	38
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Appointments Scheduled by Type for Appointment Dates 02/17/2016 through 02/17/2016

New Appointment	0
Renewal	0

Total Appointments Scheduled	0
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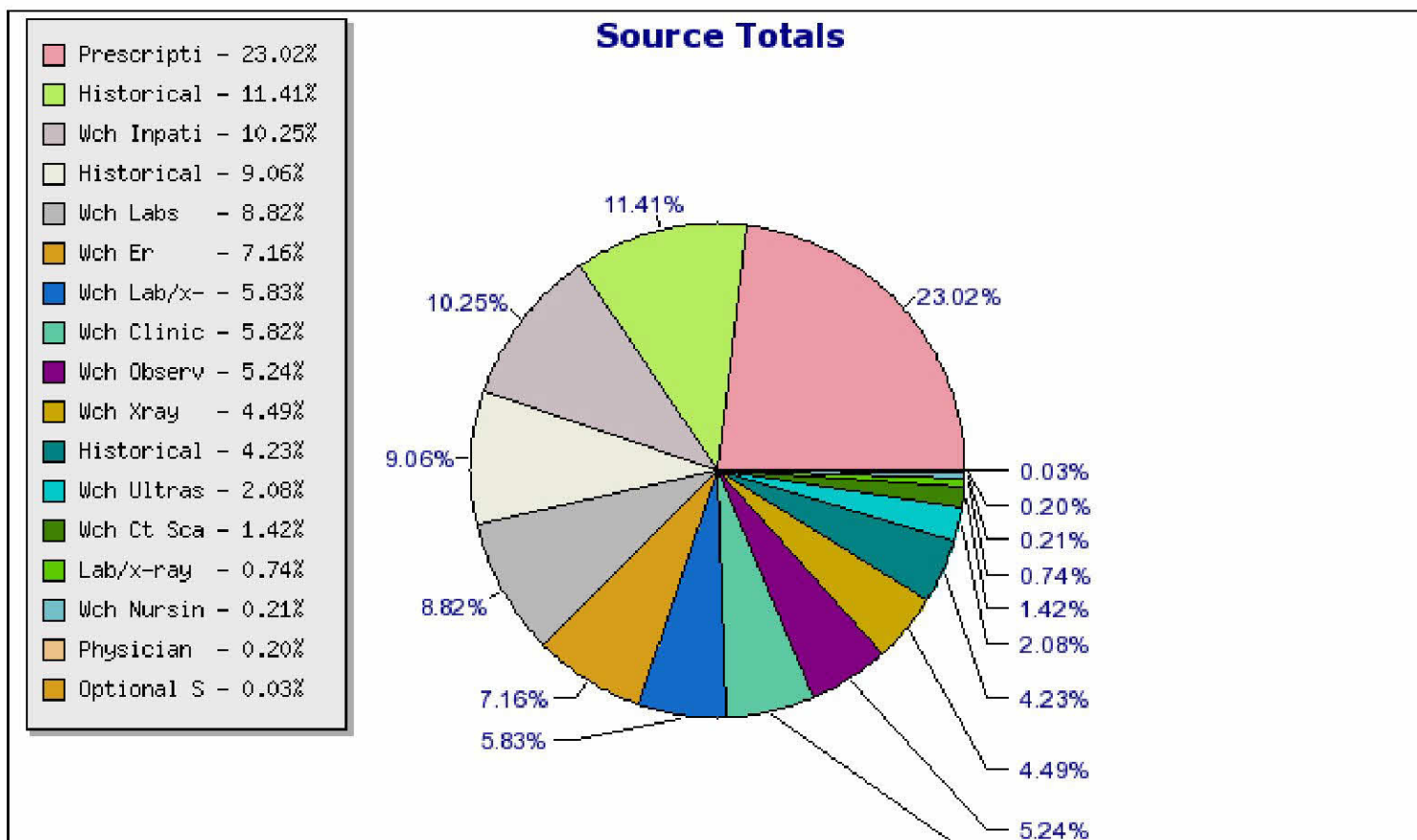
ICH-Dashboard Jan.-Dec. 2015-Paid and Number of Clients

Source Totals for Batch Dates 02/01/2015 through 01/20/2016

Prescription Drugs	23.02%	\$25,608.03
Historical Data - Wch Lab/x-ra	11.41%	\$12,689.00
Wch Inpatient	10.25%	\$11,407.65
Historical Data - Wch Er	9.06%	\$10,076.00
Wch Labs	8.82%	\$9,810.48
Wch Er	7.16%	\$7,969.13
Wch Lab/x-ray	5.83%	\$6,482.23
Wch Clinic	5.82%	\$6,479.51
Wch Observation	5.24%	\$5,830.20
Wch Xray	4.49%	\$4,991.83
Historical Data - Wch Clinic	4.23%	\$4,703.00
Wch Ultrasound	2.08%	\$2,319.55
Wch Ct Scan	1.42%	\$1,582.19
Lab/x-ray	0.74%	\$818.95
Wch Nursing Home	0.21%	\$236.00
Physician Services	0.20%	\$221.51
Optional Services	0.03%	\$29.94

Total Expenditures

\$111,255.20



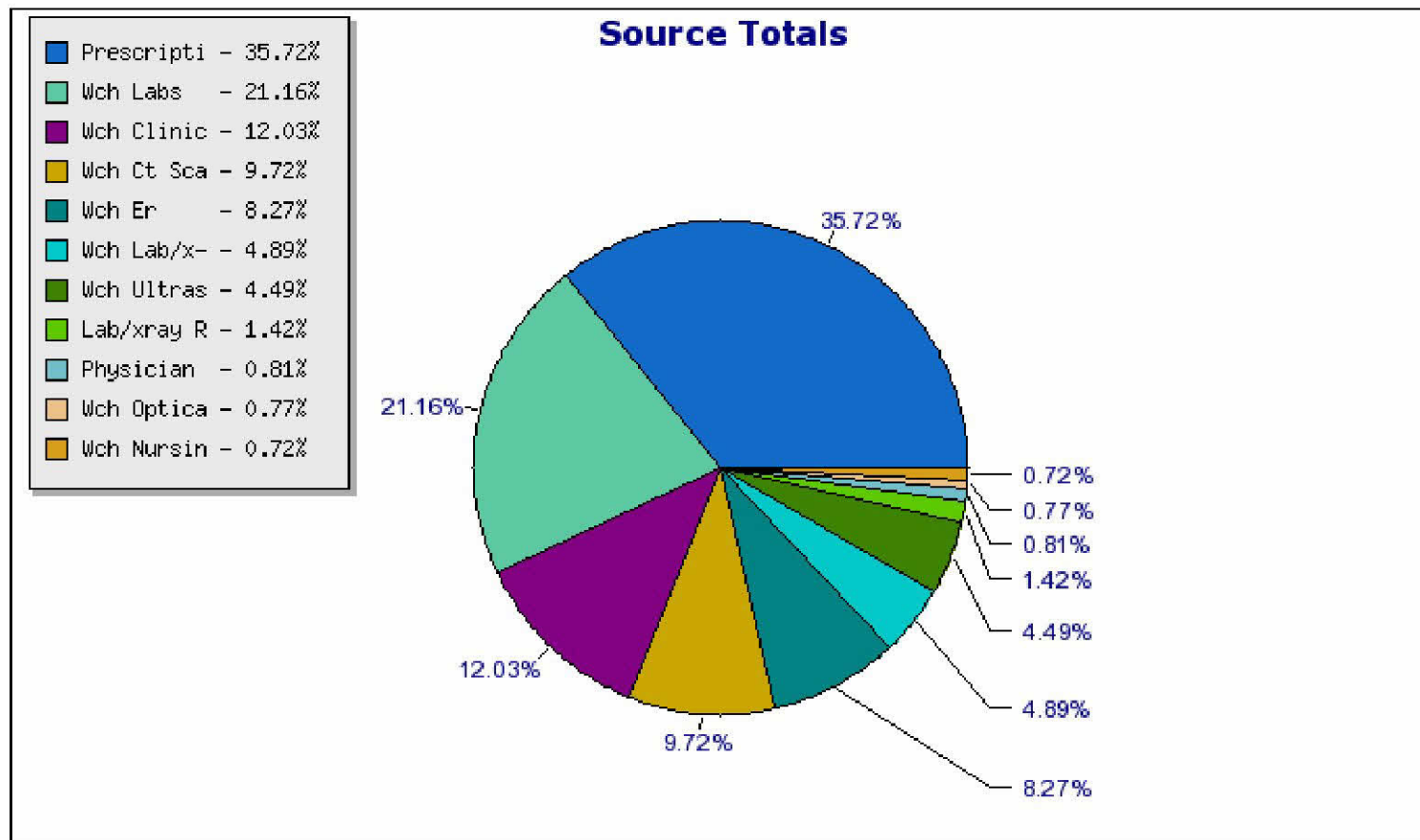
IHC-Dashboard Jan.-Feb. 2016-Paid & Number of Clients

Source Totals for Batch Dates 02/01/2016 through 03/31/2016

Prescription Drugs	35.72%	\$5,815.88
Wch Labs	21.16%	\$3,446.05
Wch Clinic	12.03%	\$1,959.39
Wch Ct Scan	9.72%	\$1,582.19
Wch Er	8.27%	\$1,346.03
Wch Lab/x-ray	4.89%	\$796.63
Wch Ultrasound	4.49%	\$731.85
Lab/xray Readings	1.42%	\$231.06
Physician Services	0.81%	\$131.41
Wch Optical Specialist	0.77%	\$125.00
Wch Nursing Home	0.72%	\$118.00

Total Expenditures

\$16,283.49



Entry Statistics for Entry Dates 02/01/2016 through 03/31/2016

Clients Entered	3
Rapid Reg. Entered	8
Vendors Entered	0
Worksheets Entered	14
Invoices Entered	245

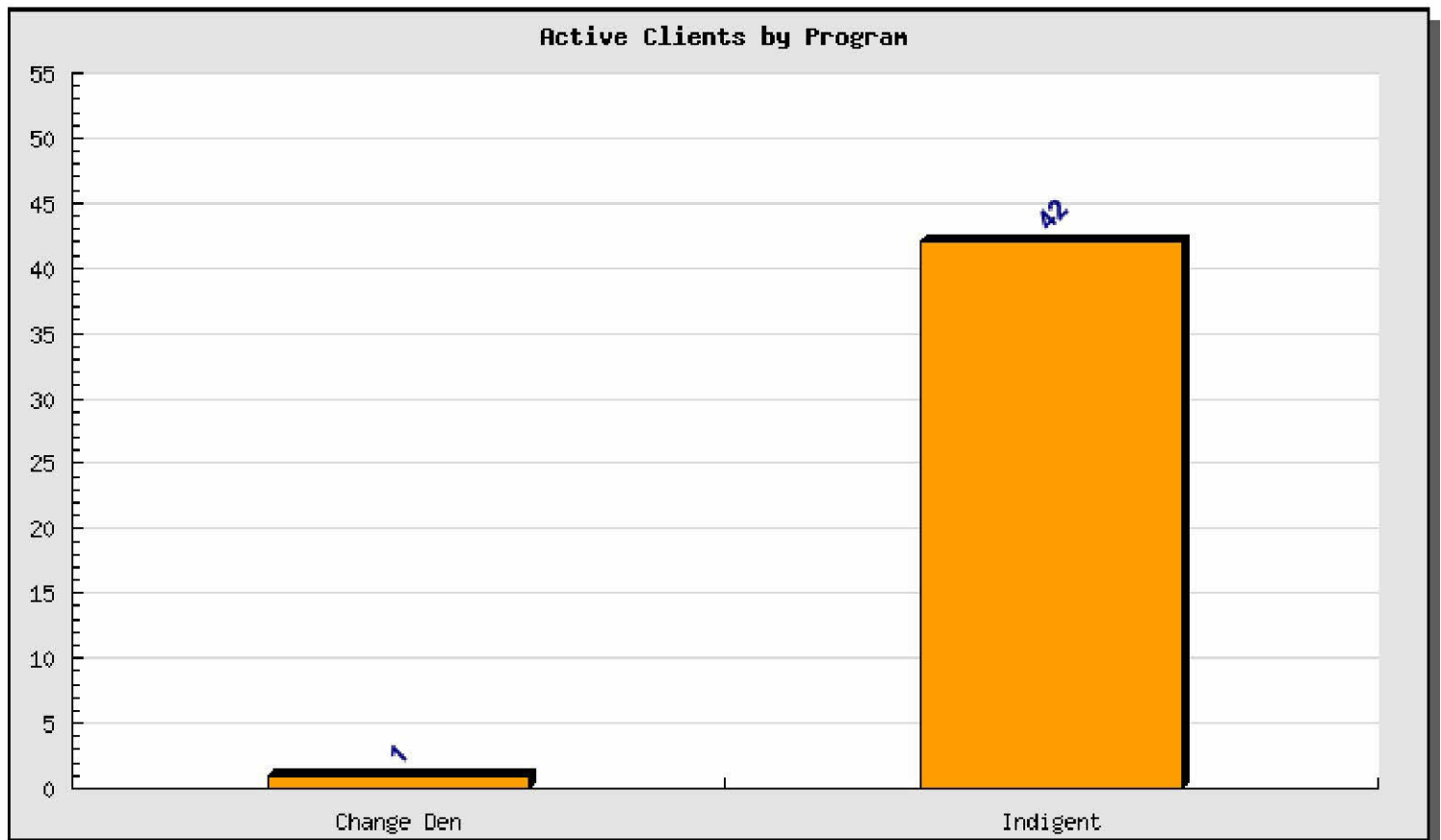
Void Statistics for Void Dates 02/01/2016 through 03/31/2016

Clients Voided	0
Vendors Voided	0
Rapid Reg. Voided	0
Invoices Voided	6

Active Clients by Program for Eligibility Dates 02/01/2016 through 03/31/2016

Change Deny WSHD	1
Indigent	42

Total Clients By Program **43**



Appointments Scheduled by Type for Appointment Dates 02/01/2016 through 03/31/2016

New Appointment	0
Renewal	0

Total Appointments Scheduled **0**

IHC-Source Total Jan.-Feb. 2016 (Billed v. Paid)

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Source Totals Report

Winnie Stowel Hospital District Indigent Healthcare
Services
Batch Dates 02/01/2016 through 03/31/2016
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	250.00	131.41
02	Prescription Drugs	7,568.95	5,815.88
21	Wch Clinic	4,779.00	1,959.39
24	Wch Er	3,283.00	1,346.03
25	Wch Lab/x-ray	1,943.00	796.63
26	Wch Ct Scan	3,859.00	1,582.19
27	Wch Labs	8,405.00	3,446.05
29	Wch Ultrasound	1,785.00	731.85
30	Wch Nursing Home	246.00	118.00
40	Wch Optical Specialist	125.00	125.00
44	Lab/xray Readings	848.56	231.06
		<hr/>	<hr/>
Expenditures		33,092.51	16,283.49
Reimb/Adjustments		0.00	0.00
		<hr/>	<hr/>
Grand Total		33,092.51	16,283.49

Source Totals Report Detail

Invoice #	Source	DOS	Amount Billed	Amount Paid
036-2383*68539*2	01	12/15/2015	150.00	80.08
036-2383*68539*2	01	12/16/2015	100.00	51.33
			<hr/>	<hr/>
1 invoices, 2 line items			250.00	131.41
036-2778*18651*10	02	01/06/2016	75.00	75.00
036-2811*65460*5	02	01/04/2016	1,034.95	930.83
036-2833*18651*75	02	02/02/2016	361.68	285.89
036-3363*65460*2	02	02/23/2016	5.00	5.00
036-3413*65460*4	02	01/28/2016	10.00	10.00
036-3453*18651*5	02	01/05/2016	37.53	18.80
036-3453*18651*8	02	02/03/2016	37.53	18.80
036-3467*65460*6	02	02/24/2016	5.00	5.00
1002*65460*3	02	01/21/2016	34.47	34.47
1004*65460*3	02	02/20/2016	85.37	75.58
1008*18651*1	02	01/12/2016	75.00	43.36
1008*18651*2	02	02/24/2016	75.00	43.36
1008*65460*2	02	02/24/2016	15.00	15.00
1011*65460*1	02	01/26/2016	33.51	11.27
036-2749*65460*9	02	02/26/2016	40.00	40.00
036-2749*65460*9	02	02/29/2016	63.31	63.31
036-2778*18651*15	02	02/04/2016	75.00	40.53
036-2778*18651*15	02	02/02/2016	75.00	75.00
036-3068*18651*33	02	01/06/2016	75.00	45.95
036-3068*18651*33	02	01/27/2016	75.00	45.95
036-3363*65460*1	02	01/25/2016	5.00	5.00
036-3363*65460*1	02	01/25/2016	5.00	5.00
036-3426*65460*6	02	01/04/2016	25.43	25.43
036-3426*65460*6	02	01/04/2016	15.00	15.00

IHC-WCH Source Totals Jan.-Dec. 2015 (Billed v. Paid)

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Source Totals Report

Winnie Stowel Hospital District Indigent Healthcare
Services
Batch Dates 02/01/2015 through 01/20/2016
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	618.00	221.51
02	Prescription Drugs	34,397.91	25,608.03
05	Lab/x-ray	4,033.36	818.95
10	Optional Services	36.22	29.94
21	Wch Clinic	14,510.00	6,479.51
22	Wch Observation	14,220.00	5,830.20
23	Wch Inpatient	19,335.00	11,407.65
24	Wch Er	18,231.00	7,969.13
25	Wch Lab/x-ray	13,505.00	6,482.23
26	Wch Ct Scan	3,859.00	1,582.19
27	Wch Labs	23,928.00	9,810.48
28	Wch Xray	6,622.00	4,991.83
29	Wch Ultrasound	3,945.00	2,319.55
30	Wch Nursing Home	468.00	236.00
91	Historical Data - Wch Clinic	4,703.00	4,703.00
94	Historical Data - Wch Er	10,076.00	10,076.00
95	Historical Data - Wch Lab/x-ra	12,689.00	12,689.00
		Expenditures	185,176.49
		Reimb/Adjustments	0.00
		Grand Total	111,255.20

Source Totals Report Detail

Invoice #	Source	DOS	Amount Billed	Amount Paid
036-2383*35793*1	01	07/30/2015	140.00	54.41
036-2383*067259*1	01	08/26/2015	78.00	12.30
036-2783*35793*1	01	08/27/2015	140.00	54.41
036-3213*067259*7	01	10/12/2015	42.00	6.42
036-3453*35793*1	01	07/30/2015	140.00	54.41
036-3467*067259*1	01	09/18/2015	78.00	39.56
6 invoices, 6 line items			618.00	221.51
036-2383*65985*1	02	07/20/2015	25.00	25.00
036-2547*65460*6	02	12/01/2015	10.00	10.00
036-2695*65460*2	02	11/13/2015	5.00	5.00
036-2749*18651*12	02	02/12/2015	30.56	15.51
036-2749*65985*27	02	06/23/2015	25.00	25.00
036-2778*18651*3	02	02/09/2015	75.00	75.00
036-2778*18651*4	02	03/04/2015	75.00	75.00
036-2778*18651*5	02	08/05/2015	75.00	75.00
036-2778*18651*6	02	09/04/2015	75.00	75.00
036-2778*18651*7	02	10/05/2015	75.00	75.00
036-2778*18651*8	02	11/09/2015	75.00	75.00
036-2778*18651*9	02	12/04/2015	75.00	75.00
036-2778*18651*12	02	07/09/2015	75.00	75.00
036-2811*65460*1	02	08/19/2015	37.66	37.66

IHC-WCH Source Total Feb. 2016 (Billed v. Paid)

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Source Totals Report

Winnie Stowel Hospital District Indigent Healthcare
Services
Batch Dates 03/16/2016 through 03/23/2016
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	250.00	131.41
02	Prescription Drugs	3,479.82	2,681.79
21	Wch Clinic	2,145.00	879.45
24	Wch Er	3,283.00	1,346.03
26	Wch Ct Scan	3,859.00	1,582.19
27	Wch Labs	5,468.00	2,241.88
29	Wch Ultrasound	1,785.00	731.85
40	Wch Optical Specialist	125.00	125.00
44	Lab/xray Readings	848.56	231.06
Expenditures		21,243.38	9,950.66
Reimb/Adjustments		0.00	0.00
Grand Total		21,243.38	9,950.66

Source Totals Report Detail

Invoice #	Source	DOS	Amount Billed	Amount Paid
036-2383*68539*2	01	12/15/2015	150.00	80.08
036-2383*68539*2	01	12/16/2015	100.00	51.33
1 invoices, 2 line items			250.00	131.41
036-2833*18651*75	02	02/02/2016	361.68	285.89
036-3363*65460*2	02	02/23/2016	5.00	5.00
036-3453*18651*8	02	02/03/2016	37.53	18.80
036-3467*65460*6	02	02/24/2016	5.00	5.00
1004*65460*3	02	02/20/2016	85.37	75.58
1008*18651*2	02	02/24/2016	75.00	43.36
1008*65460*2	02	02/24/2016	15.00	15.00
036-2749*65460*9	02	02/26/2016	40.00	40.00
036-2749*65460*9	02	02/29/2016	63.31	63.31
036-2778*18651*15	02	02/04/2016	75.00	40.53
036-2778*18651*15	02	02/02/2016	75.00	75.00
036-3426*65460*9	02	02/03/2016	15.00	15.00
036-3426*65460*9	02	02/03/2016	26.34	26.34
036-3454*65460*3	02	02/18/2016	5.00	5.00
036-3454*65460*3	02	02/18/2016	12.00	12.00
036-3464*18651*3	02	02/12/2016	64.49	64.49
036-3464*18651*3	02	02/12/2016	75.00	75.00
1000*65460*6	02	02/18/2016	29.07	29.07
1000*65460*6	02	02/19/2016	5.00	5.00
1005*65460*1	02	02/23/2016	5.00	5.00
1005*65460*1	02	02/23/2016	49.07	28.33
036-2475*65460*8	02	02/13/2016	26.44	26.44
036-2475*65460*8	02	02/13/2016	29.80	29.80
036-2475*65460*8	02	02/13/2016	34.85	34.85
036-2783*18651*57	02	02/11/2016	75.00	34.69
036-2783*18651*57	02	02/04/2016	28.73	28.73

IHC-WCH Source Totals Jan. 2016 (Billed v. Paid)

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Source Totals Report

Winnie Stowel Hospital District Indigent Healthcare
Services
Batch Dates 02/17/2016 through 02/17/2016
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
02	Prescription Drugs	4,089.13	3,134.09
21	Wch Clinic	2,634.00	1,079.94
25	Wch Lab/x-ray	1,943.00	796.63
27	Wch Labs	2,937.00	1,204.17
30	Wch Nursing Home	246.00	118.00
		11,849.13	6,332.83
Expenditures			
Reimb/Adjustments		0.00	0.00
Grand Total		11,849.13	6,332.83

Source Totals Report Detail

Invoice #	Source	DOS	Amount Billed	Amount Paid
036-2778*18651*10	02	01/06/2016	75.00	75.00
036-2811*65460*5	02	01/04/2016	1,034.95	930.83
036-3413*65460*4	02	01/28/2016	10.00	10.00
036-3453*18651*5	02	01/05/2016	37.53	18.80
1002*65460*3	02	01/21/2016	34.47	34.47
1008*18651*1	02	01/12/2016	75.00	43.36
1011*65460*1	02	01/26/2016	33.51	11.27
036-3068*18651*33	02	01/06/2016	75.00	45.95
036-3068*18651*33	02	01/27/2016	75.00	45.95
036-3363*65460*1	02	01/25/2016	5.00	5.00
036-3363*65460*1	02	01/25/2016	5.00	5.00
036-3426*65460*6	02	01/04/2016	25.43	25.43
036-3426*65460*6	02	01/04/2016	15.00	15.00
036-3464*18651*2	02	01/13/2016	64.49	64.49
036-3464*18651*2	02	01/13/2016	75.00	75.00
1004*65460*2	02	01/05/2016	10.80	6.99
1004*65460*2	02	01/05/2016	81.15	75.58
1008*65460*1	02	01/21/2016	15.00	15.00
1008*65460*1	02	01/21/2016	22.87	22.87
036-2475*65460*6	02	01/08/2016	26.06	26.06
036-2475*65460*6	02	01/08/2016	30.47	30.47
036-2475*65460*6	02	01/08/2016	35.02	35.02
036-2749*65460*6	02	01/28/2016	25.00	25.00
036-2749*65460*6	02	01/29/2016	25.00	25.00
036-2749*65460*6	02	01/29/2016	12.00	12.00
036-2783*18651*52	02	01/07/2016	75.00	49.62
036-2783*18651*52	02	01/07/2016	190.82	164.87
036-2783*18651*52	02	01/08/2016	48.63	24.13
036-2942*18651*57	02	01/06/2016	131.59	131.59
036-2942*18651*57	02	01/06/2016	16.23	9.02
036-2942*18651*57	02	01/19/2016	36.22	28.45
036-3217*65460*7	02	01/05/2016	57.27	29.70
036-3217*65460*7	02	01/28/2016	44.54	44.54
036-3217*65460*7	02	01/28/2016	431.41	179.77
1000*65460*5	02	01/19/2016	29.66	29.66

Exhibit “C”

WSHD Financial Reporting Sheet

Winnie Stowell Hospital District

Reporting Date: Wednesday, March 23, 2016

From	Sales Tax	Property Tax	County	Other	Net
MPAP Funds		\$0.00	\$0.00	\$2,768,233.80	\$2,768,233.80
Texas Comptroller	\$39,988.48	\$0.00	\$0.00	\$0.00	\$39,988.48
Total:	\$39,988.48	\$0.00	\$0.00	\$2,768,233.80	\$2,808,222.28

Expenses	For	Amount	County	Funds Summary	Totals
Benckenstein & Oxford					
Hubert Oxford		500.00		Prosperity Operating	\$1,133,905.71
Josh Heinz		500.00		Interbank	\$3,810.93
Mary Ellen Robertson	Inv 160212	171.20		Prosperity CD	\$104,000.13
American Express		355.23	1720	TexStar	\$152,594.16
Time Warner		189.72	1721		
Quill	Inv 3489538	37.54	1722	Net Expenses	\$5,911.25
The HomeTown Press		14.80		Net Income	\$2,808,222.28
Deputy		100.00		Ending Balance	\$3,936,216.74
Star Graphics	Inv 424835	32.68	1725		

Expenses	For	Amount	County	Loan Summary	Totals
IHS	Inv 62100 & 65191	1,179.00		Starting Balance	320,000.00
Brookshire Bros Pharmacy		1,584.76		Pmt 1-Due 4/30/15	-10,008.70
Willcox Pharmacy		1,097.03		Pmt 2-Due 7/30/15	-10,008.70
				Pmt 3-Due 10/30/15	-10,008.70
Entergy		102.37	1723	Pmt 4-Due 1/31/16	-10,008.70
TBCD		46.92	1724	Ending Balance	279,965.20

Loan #5 (5/8/15-2/1/16)	\$4,150,000.00	pd 2/2/2016	Closed on Bldg&Property 3/23
Interest			
Loan 6 (8/11/15-5/16/16)	\$3,610,000.00		
Interest			
Loan 7 Balance (11/5/15-8/4/16)	\$3,610,000.00		
Interest			
Loan 8 Balance (2/11/16-11/6/16)	\$3,610,000.00		
Interest			

LTC Inv # 1059 - Aug 2015	285,594.32	Pd 3/15/2016
LTC Inv # 1063 - Sep 2015	276,381.60	
LTC Inv # 1067 - Oct 2015	285,594.32	
LTC Inv # 1071 - Nov 2015	276,381.60	
LTC Inv # 1075 - Dec 2015	285,594.32	
LTC Inc # 1079 - Jan 2016	285,594.32	

Total: \$5,911.25

BENCKENSTEIN & OXFORD, L.L.P.

ATTORNEYS AT LAW
BBVA COMPASS BANK BUILDING
3535 CALDER AVENUE, SUITE 300
BEAUMONT, TEXAS 77706
TELEPHONE:(409) 833-9182
FAX: (409) 833-8819

Hubert Oxford, IV

hoxfordiv@benoxford.com

March 23, 2016

Mr. Elroy Henry, President
Winnie Stowell Hospital District
825 State Hwy 124
Winnie Texas 77665

Re: Winnie Stowell Hospital District; Invoice for February 2016 Retainer; Our File No. 87250.

Dear President Henry,

Please allow this letter to serve as a *partial* invoice for work performed in February 2016. I request that we be allowed to submit the remainder of the invoice for January 2016 and February 2016 for Benckenstein & Oxford at the next regularly scheduled meeting or a special meeting that may need to take place before the end of the month.

In the meantime, would you please pay the retainer of \$1,000.00 retainer and we will give the District credit for the \$1,000.00 payment in the upcoming invoice with time entries for January 2016 and February 2016. If so, please draft a check in the amount of \$500.00 checks payable to Josh Heinz and a second check for \$500.00 to Hubert Oxford, IV.

If you have any questions concerning the invoice or the previously prepared minutes, please do not hesitate to contact me.

With best wishes, I am

Sincerely,

BENCKENSTEIN & OXFORD, L.L.P.

By: HOIV
Hubert Oxford, IV

MARY ELLEN ROBERTSON
CERTIFIED PUBLIC ACCOUNTANT
985 IH-10 NORTH, SUITE 101
BEAUMONT, TEXAS 77706

(409) 892-8901

Invoice # 160212
February 12, 2016

Winnie-Stowell Hospital District
P. O. Box 1997
Winnie, TX 77665-1997

Payroll Services provided as follows:

Direct deposit monthly fee: January & February, 2015 @ \$15.00 each	30.00
Direct deposit per transaction fee: 8 @ \$0.15 each	1.20
Payroll processing fee: January & February, 2016 (4 PPD @ \$35.00 each)	140.00
	<hr/>
Amount Due for these services:	\$ 171.20

Please remit to:

P. O. Box 5151
Beaumont, Texas 77726



Blue for Business®
 WINNIE STOWELL HOSPI
 JOHN E HENRY SR
 Closing Date 03/11/16 Next Closing Date 04/10/16

OPEN_{SM}

Account Ending 0-51003

New Balance	\$355.23
Minimum Payment Due	\$35.00
Payment Due Date	04/05/16[‡]

‡ Late Payment Warning: If we do not receive your Minimum Payment Due by the Payment Due Date of 04/05/16, you may have to pay a late fee of up to \$38.00 and your Purchase APR may be increased to the Penalty APR of 27.49%.

Membership Rewards® Points
 Available and Pending as of 01/31/16
34,100
 For up to date point balance and full program details, visit membershprewards.com

Account Summary

Previous Balance	\$62.04
Payments/Credits	-\$62.04
New Charges	+\$355.23
Fees	+\$0.00
Interest Charged	+\$0.00

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges and each month you pay...	You will pay off the balance shown on this statement in about...	And you will pay an estimated total of...
Only the Minimum Payment Due	11 months	\$375

New Balance	\$355.23
Minimum Payment Due	\$35.00
Credit Limit	\$15,500.00
Available Credit	\$15,144.77
Cash Advance Limit	\$3,100.00
Available Cash	\$3,100.00
Days in Billing Period: 31	

If you would like information about credit counseling services, call 1-888-733-4139.

➔ See page 2 for important information about your account.

i We want you to have easy access to the most up to date version of the Membership Rewards® Terms & Conditions. The most recent Terms & Conditions are available at Membershprewards.com/terms.

➔ **See Page 5 for Important Changes to Your Account Benefits.**

Customer Care

Pay by Computer
open.com/pbc

Customer Care 1-877-258-3254 **Pay by Phone** 1-800-472-9297

➔ See page 2 for additional information.

↓ Please fold on the perforation below, detach and return with your payment ↓

Payment Coupon
Do not staple or use paper clips

Pay by Computer
open.com/pbc

Pay by Phone
1-800-472-9297

Account Ending 0-51003
 Enter 15 digit account # on all payments.
 Make check payable to American Express.

JOHN E HENRY SR
 WINNIE STOWELL HOSPI
 PO BOX 304
 WINNIE TX 77665-0304

Payment Due Date	04/05/16
New Balance	\$355.23
Minimum Payment Due	\$35.00

Check here if your address or phone number has changed. Note changes on reverse side.

AMERICAN EXPRESS
 P.O. BOX 650448
 DALLAS TX 75265-0448

\$ 355.23
Amount Enclosed



0000349992195946734 000035523000003500 07 H



Blue for Business®
 WINNIE STOWELL HOSPI
 JOHN E HENRY SR
 Closing Date 03/11/16

OPEN_{SM}

Account Ending 0-51003

Payments and Credits

Summary

	Total
Payments	-\$62.04
Credits	\$0.00
Total Payments and Credits	-\$62.04

Detail *Indicates posting date

Payments	Amount
02/21/16* JOHN E HENRY SR PAYMENT RECEIVED - THANK YOU	-\$62.04

New Charges

Summary

	Total
SHERRIE NORRIS 0-51011	\$355.23
Total New Charges	\$355.23

Detail

 **SHERRIE NORRIS**
 Card Ending 0-51011

	Amount
02/12/16 AL-T'S SEAFOOD & S 542929804649846 WINNIE TX 4092969216 TIP \$10.00	\$50.83
02/24/16 USPS 489815066425606 41831425606 WINNIE TX 800-2758777	\$98.00
02/25/16 TONY'S BARBECUE & STEAKHOU 650000007049 WINNIE TX 4092962225	\$76.39
03/02/16 GOOGLE*SVCSAPPSWSHD-TX-COM Mountain View ADVERTISING SERVICE	\$39.65
03/03/16 WILCOX PHARMACY 650000003350439 WINNIE TX 4092962497 Description Price WILCOX PHARMACY \$31.93	\$31.93
03/07/16 BARNES & NOBLE BEAUMONT TX 8662387323 Description REFER TO RECEIPT	\$58.43

Fees**Amount****Total Fees for this Period****\$0.00****Interest Charged****Amount****Total Interest Charged for this Period****\$0.00****About Trailing Interest**

You may see interest on your next statement even if you pay the new balance in full and on time and make no new charges. This is called "trailing interest." Trailing interest is the interest charged when, for example, you didn't pay your previous balance in full. When that happens we charge interest from the first day of the billing period until we receive your payment in full. You can avoid paying interest on purchases by paying your balance in full and on time each month. Please see the "When we charge interest" sub-section in your Cardmember Agreement for details.

2016 Fees and Interest Totals Year-to-Date**Amount**

Total Fees in 2016

\$0.00

Total Interest in 2016

\$0.00

Interest Charge Calculation

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

	Annual Percentage Rate	Balance Subject to Interest Rate	Interest Charge
Purchases	11.49% (v)	\$0.00	\$0.00
Cash Advances	25.49% (v)	\$0.00	\$0.00
Total			\$0.00

(v) Variable Rate



Notice of Important Membership Rewards[®] Program Changes

We are making changes to the Membership Rewards Program Terms & Conditions that affect Corporate Card Members. A summary of the changes appears below. The detailed changes can be found after the summary chart.

Summary of Changes, effective immediately	
Reinstating points forfeited for cancelling your account (Corporate Cards)	If the Linked Card Account that we cancel is a Corporate Card and we subsequently reinstate that Corporate Card, you must call us in order to reinstate points associated with that Card.

Detail of the Changes

This notice amends the Membership Rewards Program Terms & Conditions (collectively, the "Terms & Conditions") as described below. We have the right to amend as described in the Terms & Conditions. Any terms in the Terms & Conditions conflicting with this change are replaced fully and completely. Terms not changed by this notice remain in full force and effect. We encourage you to read this notice, share it with Additional Cardmembers on your account, and file it for future reference. If you have any questions about this change, please call the number on the back of your Card.

Reinstating points forfeited for cancelling your account

Effective immediately, in the Terms & Conditions, we are deleting the body of the *For Canceling Your Account* sub-section of the *Forfeiting and Getting Points Back* section and replacing it with:

If we cancel your Linked Card Account for any of the following reasons, you'll forfeit all points in your program account except as noted:

- If we cancel your Linked Card Account due to inactivity, you have 90 days to use points in your program account before they are forfeited.
- If we cancel your Linked Card Account in the event of your death, your executor or personal representative may request to use the points in your program account in a one-time redemption by calling us.
- If we cancel your Linked Card Account by accident, points in your program account will not be forfeited.

If we cancel your Linked Card Account for any other reason (including bankruptcy or insolvency), you'll forfeit all points in your program account. If we reinstate the Linked Card Account within one year, these forfeited points will be returned to your program account.

If the only Linked Card Account is a Corporate Card and has been reinstated within one year, you must contact Membership Rewards at 1-800-AXP-EARN to have the forfeited points returned to your account.

If you voluntarily cancel your enrollment in the program but keep at least one American Express[®] Card open and in good standing, you'll have up to 30 days from the date of cancellation to use any points in your program account. If you cancel your enrollment in the program and don't keep open any American Express Cards, all points in your program account will be immediately forfeited.

ID10946



Membership Rewards® Monthly Statement and Program News

Prepared for JOHN E HENRY SR

Account Number 1M70555067

Total Points Balance **34,100**

Points Earned this Period **5,953**

Account Summary January 1, 2016 - January 31, 2016

Opening Points Balance	28,147
Points Earned this Period	+5,953
Points Used this Period	0
Reinstated Points and Adjustments	0
Total Points Balance	34,100

Points Earned this Period are pending until charges are paid in full and all your accounts are in good standing.

Questions About Your Account?



membershiprewards.com

1-800-AXP-EARN (297-3276)
International Collect: 305-816-2799

Did You Know?

Use Points For Your Charges

Use your Card for charges like travel, dining, groceries, and more, then go online and use the points you earned toward your eligible charges.

Learn more at
membershiprewards.com/yourcharges

Points Transaction Detail

January 1, 2016 - January 31, 2016

Points Earned this Period	Points Activity On Eligible Charges	Bonus Points Awarded	Total Points Activity Per Card
Blue For Business XXXX-XXXXX0-51003	0	5,569 30% annual Relationship Bonus 6965	5,569
Add'l Blue For Business XXXX-XXXXX0-51011	384	0	384
Total	384	5,569	5,953

Membership Rewards points earned may be transferred or redeemed as long as all enrolled Card accounts are in good standing. Points transferred or redeemed cannot be reversed back into the program. **Forfeited points can be reinstated for a fee by calling the number provided below or visiting membershiprewards.com.** Terms and Conditions of the Membership Rewards Express® program apply. For more information, visit membershiprewards.com/terms or call 1-800-AXP-EARN (297-3276). From overseas, call collect 305-816-2799.

Prepared for
JOHN E HENRY SR
Membership Rewards® Account Number
1M70555067



OPEN Savings® Summary

WINNIE STOWELL FOSPI
JOHN E HENRY SR

Closing Date 03/11/16

Account Ending 0-51003

Discounts		Membership Rewards® Points	
This Period	\$0.00	This Period	0
Year to Date	\$0.00	Year to Date	0

Remember, you can get benefits on eligible purchases with OPEN Savings® partners¹ automatically when you use your Business Card from American Express OPEN. Learn more at opensavings.com.

Discounts will be applied in the form of a statement credit. For full terms and conditions go to opensavings.com.

The Membership Rewards points balance shown above reflects only points received through the OPEN Savings benefit and may not reflect any reversals. Please refer to your Membership Rewards account balance for the most up-to-date balance information.

¹ See individual OPEN Savings partner terms and conditions located at opensavings.com.

Get 2 additional Membership Rewards® points for each eligible dollar spent OR a 5% discount on eligible purchases with OPEN Savings® partners. Visit opensavings.com for details.



Merchant participation and offers are subject to change without notice. Maximum annual caps and exclusions may apply to the benefit you can receive. See individual OPEN Savings partner terms and conditions located at opensavings.com.

GREAT NEW PLACES

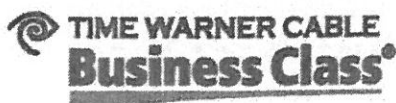
CE 121048

Nature's Plus.

Nature's Plus - distributor of natural vitamins, supplements & health foods, offers quality products to consumers through its global network of retailers.

631-293-0030 or
Naturesplus.com

Offers are made only to Cardmembers who meet certain qualifying criteria. By responding you will be disclosing to the merchant that you meet these criteria.



Customer service
Call us anytime: 1-866-519-1263
Manage your account:
business.twc.com/myaccount
Visit us online: business.twc.com

Account number
8260 17 029 0121119
Customer code 1931

RECEIVED
MAR - 3 2016

Due date	Service period	Amount due
Mar 17, 2016	03/05 - 04/04	\$189.72

Service address
Winnie Stowell Hospital
Account Phone 406-201-3922
538 Broadway
Wshd Rm
Winnie, TX 77665-7600

Previous balance & payments

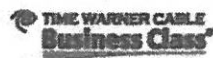
Balance last statement	339.50
Payments received as of Feb 26, 2016	-319.61
Unpaid balance	19.89

Current month

Monthly services	149.94
Surcharges	9.76
Taxes and fees	10.13

Total due by Mar 17, 2016

\$189.72



7010 AIRPORT RD EL PASO TX 79906-4943
8260 1700 NO RP 26 02272016 YNNNNYNN 01 006762 0027

WINNIE STOWELL HOSPITAL
PO BOX 1997
WSHD RM
WINNIE, TX 77665-1997



Payment due date
Mar 17, 2016

Account number
8260 17 029 0121119

Please write your account number on your check.

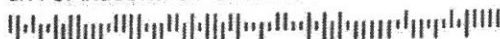
Please enclose this coupon with your payment.

**Please allow 7-10 days for delivery and payment processing. See reverse side for more convenient payment options.

Total amount due
\$189.72

Amount enclosed
189.72

TIME WARNER CABLE
PO BOX 60074
CITY OF INDUSTRY CA 91716-0074



826017029012111900189720



22709:
 Order Date : 02/15/2016
 Ship Date : 02/22/2016
 InvoiceDate : 02/22/2016
 TIN : 36-2952904

P.O. Box 37600 Philadelphia, PA 19101-0600
 Customer Service: 1-800-789-1331

0005762 01 AB 0.413 **AUTO T8 2 1638 77665-199797 -C01-P05764-I

Sold To:

Winniestowell Hospital Distri



Po Box 1997
 Winnie TX 77665-1997



Ship To:

Winnie Stowell Hospital Distri
 Sherrie Norris
 538 Broadway
 Winnie TX 77665

1638-01-06-0005765-0001-00008745

Customer PO : norrissherrie Order# : 89118094 Invoice# : 3489538 Account# : C7769473

Item Number	Description	Color	Qty shipped	Price/UM	Extended
901-281094LMP	Id card 7Mil 3.375X2.125 wht		1	\$28.69/pack	\$28.69



Remember you can check your order status & tracking, print invoices and more in the Manage My Account section on Quill.com.

Always Expanding Assortment.

Everything it takes for your business. Go to Quill.com/new

To help apply your payment properly, remember to include your **account #** on your check and remit your payment to the address shown below.

All shipping carrier fees are covered by Quill. A handling fee may apply to small orders. See Quill.com/shipping.

Track shipments, pay invoices and view past orders at My Account on Quill.com.

Customer is responsible for collection fees, court costs and reasonable attorney fees to collect unpaid accounts

Mdse Total: \$28.69
 Tax: \$2.86
 Shipping: Free
 Handling: \$5.99

Amount Due: \$37.54

Due Date: 03/23/2016

Payment Coupon: Please detach and enclose this portion with your payment. Please do not staple. Thank You.

Account Number: **C7769473**
 Winniestowell Hospital Dis



Invoice Number: **3489538**
 Invoice Date: 02/22/2016
 Amount Due: \$37.54
 Payable in U.S. Dollars

Payable to:

Quill Corporation
 P.O.Box 37600
 Philadelphia, PA 19101-0600

0011000000034895380007769473710000000037548

Place an "X" above _____ if you include any comments, suggestions and/or address changes on the back of this payment slip



4785 Eastex Freeway Beaumont, TX 77706
 P: 409-892-0671 F: 409-892-6323

CONTRACT INVOICE

Invoice Number: INV424835
 Invoice Date: 02/24/2016

RECEIVED
 MAR - 3 2016

Bill To: Winnie - Stowell Hospital District
 PO Box 1997
 Winnie, TX 77665

Customer: Winnie - Stowell Hospital District
 538 Broadway
 Winnie, TX 77665

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
3A0064	Net 30	03/25/2016	\$ 32.68	\$ 32.68	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4457-01		\$ 30.19		01/26/2016	01/25/2021
Remarks					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 01/26/2016 to 02/25/2016 overage period	\$20.19 **
Supply Shipping Charges	\$10.00
**See overage details below	\$30.19

Detail:

Equipment included under this contract

KM/227

Number	Serial Number	Base Adj.	Location						
3A2812	A7AK011001716	\$0.00	Winnie - Stowell Hospital District 538 Broadway Winnie, TX 77665						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	3A2812 - B/W	34	1,869		1,835	0	1,835	\$0.011000	\$20.19 \$20.19

Please include invoice number on check.
 Remit payment to:
 PO Box 7186
 Beaumont, TX 77726-7186
 Fed ID # 76-0385530

Invoice SubTotal	\$30.19
Tax:	\$2.49
Invoice Total	\$32.68
Balance Due:	\$32.68

Indigent Healthcare Solutions, Ltd.
2040 North Loop, 336 West, Suite 304
Conroe, TX 77304

Invoice # 62100

Phone # (800) 834-0560
Fax # (936) 756-6741

RECEIVED
MAR - 3 2016

Date: 3/1/2016

WINNIE STOWELL HOSPITAL DISTRICT
P O BOX 1997
WINNIE, TX 77665

Terms: Net receipt of invoice

Professional services for the month of April 2016

1,059.00

Total

\$1,059.00

PLEASE REMIT PAYMENT TO
INDIGENT HEALTHCARE SOLUTIONS, LTD
ATTN: KELLEY ASTOLOS
3011 ARMORY DRIVE, SUITE 190
NASHVILLE, TN 37204

THANK YOU FOR YOUR BUSINESS!!!

IHS

Indigent Healthcare Solutions, Ltd.
2040 North Loop, 336 West, Suite 304
Conroe, TX 77304

Invoice # 62191

Phone # (800) 834-0560

Fax # (936) 756-6741

RECEIVED
MAR 21 2016

Date: 3/15/2016

WINNIE STOWELL HOSPITAL DISTRICT
P O BOX 1997
WINNIE, TX 77665

Terms: Net receipt of invoice

Registration fee for the 2016 IHS Customer Advisory Conference

120.00

Total

\$120.00

PLEASE REMIT PAYMENT TO
INDIGENT HEALTHCARE SOLUTIONS, LTD
ATTN: KELLEY ASTOLOS
3011 ARMORY DRIVE, SUITE 190
NASHVILLE, TN 37204

THANK YOU FOR YOUR BUSINESS!!!

IHS

GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
 Batch Dates 03/23/16-03/23/16

Brookshire Bros. Phar. (winnie)
 P.o. Box 1359
 Winnie, TX 77665

Vendor #: 65460

GL #	Description	Amount
WSHD	Wshd	1,584.76
Expenditures		1,584.76
Reimb/Adjustments		0.00
Grand Total		1,584.76

GL Totals Detail

Invoice #	GL #	Date in	Amt Billed	Amt Paid	Posted
036-2475*65460*8	WSHD	02/13/16	26.44	26.44	
036-2475*65460*8	WSHD	02/13/16	29.80	29.80	
036-2475*65460*8	WSHD	02/13/16	34.85	34.85	
036-2749*65460*9	WSHD	02/26/16	40.00	40.00	
036-2749*65460*9	WSHD	02/29/16	63.31	63.31	
036-2811*65460*7	WSHD	02/01/16	36.13	36.13	
036-2811*65460*7	WSHD	02/26/16	36.39	36.39	
036-2811*65460*7	WSHD	02/26/16	306.60	306.60	
036-3217*65460*8	WSHD	02/26/16	25.77	25.77	
036-3217*65460*8	WSHD	02/26/16	435.73	179.77	
036-3217*65460*8	WSHD	02/26/16	44.88	44.88	
036-3224*65460*6	WSHD	02/06/16	5.00	5.00	
036-3224*65460*6	WSHD	02/06/16	5.00	5.00	
036-3224*65460*6	WSHD	02/06/16	34.33	34.33	
036-3224*65460*6	WSHD	02/08/16	10.00	10.00	
036-3224*65460*6	WSHD	02/06/16	5.00	5.00	
036-3363*65460*2	WSHD	02/23/16	5.00	5.00	
036-3426*65460*9	WSHD	02/03/16	15.00	15.00	
036-3426*65460*9	WSHD	02/03/16	26.34	26.34	
036-3432*65460*1	WSHD	02/01/16	5.00	5.00	
036-3432*65460*1	WSHD	02/29/16	15.00	15.00	
036-3432*65460*1	WSHD	02/01/16	5.00	5.00	
036-3432*65460*1	WSHD	02/01/16	15.00	15.00	
036-3432*65460*1	WSHD	02/01/16	22.46	22.46	
036-3454*65460*3	WSHD	02/18/16	12.00	12.00	
036-3454*65460*3	WSHD	02/18/16	5.00	5.00	
036-3467*65460*6	WSHD	02/24/16	5.00	5.00	
1000*65460*6	WSHD	02/18/16	29.07	29.07	
1000*65460*6	WSHD	02/19/16	5.00	5.00	
1002*65460*4	WSHD	02/08/16	22.84	22.84	
1002*65460*4	WSHD	02/19/16	6.67	6.67	
1002*65460*4	WSHD	02/08/16	19.08	6.61	
1002*65460*4	WSHD	02/19/16	28.99	28.99	
1003*65460*4	WSHD	02/19/16	16.96	16.96	
1003*65460*4	WSHD	02/19/16	42.09	24.37	

©IHS
Issued 03/08/16

GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
Batch Dates 03/23/16-03/23/16

Brookshire Bros. Phar. (winnie)
P.o. Box 1359
Winnie, TX 77665

Vendor #: 65460

Invoice #	GL #	Date in	Amt Billed	Amt Paid	Posted
1003*65460*4	WSHD	02/08/16	459.14	223.53	
1004*65460*3	WSHD	02/20/16	85.37	75.58	
1005*65460*1	WSHD	02/23/16	5.00	5.00	
1005*65460*1	WSHD	02/23/16	49.07	28.33	
1008*65460*2	WSHD	02/24/16	15.00	15.00	
1011*65460*2	WSHD	02/22/16	22.40	22.40	
1011*65460*2	WSHD	02/22/16	5.00	5.00	
1011*65460*2	WSHD	02/22/16	40.34	40.34	
1011*65460*2	WSHD	02/04/16	5.00	5.00	
1011*65460*2	WSHD	02/04/16	10.00	10.00	
	***		2,137.05	1,584.76	
	***		2,137.05	1,584.76	

45 records listed.

17 invoices listed.

Wilcox Pharmacy
 P. O. Box 1850
 Winnie, TX 77665

Vendor #: 18651

GL #	Description	Amount
WSHD	Wshd	1,097.03
	Expenditures	1,097.03
	Reimb/Adjustments	0.00
	Grand Total	1,097.03

GL Totals Detail

Invoice #	GL #	Date in	Amt Billed	Amt Paid	Posted
036-2778*18651*15	WSHD	02/04/16	75.00	40.53	
036-2778*18651*15	WSHD	02/02/16	75.00	75.00	
036-2783*18651*57	WSHD	02/11/16	75.00	34.69	
036-2783*18651*57	WSHD	02/04/16	28.73	28.73	
036-2783*18651*57	WSHD	02/11/16	190.82	164.87	
036-2833*18651*75	WSHD	02/02/16	361.68	285.89	
036-2942*18651*61	WSHD	02/02/16	11.35	11.35	
036-2942*18651*61	WSHD	02/12/16	13.27	8.10	
036-2942*18651*61	WSHD	02/01/16	131.59	131.59	
036-2942*18651*61	WSHD	02/24/16	9.82	9.82	
036-3364*18651*25	WSHD	02/29/16	16.23	9.02	
036-3364*18651*25	WSHD	02/26/16	22.85	22.85	
036-3364*18651*25	WSHD	02/29/16	24.00	24.00	
036-3364*18651*25	WSHD	02/29/16	20.00	20.00	
036-3364*18651*25	WSHD	02/26/16	35.41	28.94	
036-3453*18651*8	WSHD	02/03/16	37.53	18.80	
036-3464*18651*3	WSHD	02/12/16	75.00	75.00	
036-3464*18651*3	WSHD	02/12/16	64.49	64.49	
1008*18651*2	WSHD	02/24/16	75.00	43.36	
	***		1,342.77	1,097.03	
	***		1,342.77	1,097.03	

19 records listed.
8 invoices listed.



Entergy
PO BOX 8104
BATON ROUGE LA 70891-8104

Call 1-877-387-2499

Customer Bill

Please Bring Entire Bill When Paying In Person

PAY THIS AMOUNT	BY	03/24/2016
		\$97.78
PAY THIS AMOUNT	AFTER	03/24/2016
		\$102.37

RECEIVED
MAR 11 2016

Due date does not apply to any previous balance already past due

Account Number	QPC	Office	Cycle	Route
4261034	008	018	04	09
Service Location		1364		
2107 HIGHWAY 124 WINNIE TX 77665				

7203 01 AV 0.388 ***** 5-DIGIT 77612

WINNIE STOWELL HOSPITAL DISTRICT
PO BOX 1997
WINNIE TX 77665-1997

Billing Period	No. Days	Mail Date
02/02/2016 TO 03/03/2016	30	03/08/2016

Bill History	KWH	Days	Amount
Last Month	390	28	\$97.80
This Month	0	0	
Last Year			

0 5DC 007203 TU08 1 G

Si necesita tener la información de esta cuenta en español, favor de llamar al 1-877-387-2499 y pida que le pasen con un traductor.

Type	Meter		Meter Reading		Difference	Multiplier	Usage	Rate Code	Rider Code	Amount
	Number	Present	Previous							
KWH	9690616	18037	17617	420	1	420	220			
KW	9690616	2.22			1	2				
CONTRACT POWER KW		5	08/2015							
BILLED MINIMUM KW		5								
CUSTOMER CHARGE										34.95
DEMAND CHARGE										32.90
ENERGY CHARGE										11.81
TTC RIDER 420 KWH @ \$0.0008500										.36
FUEL ADJUSTMENT 420 KWH @ \$0.0279406										11.74
CHAMBERS COUNTY HEALTH SERVICES DISTRICT 1/2% TAX										.45
STATE SALES TAX										5.57
TOTAL MONTHLY CHARGES										97.78
THANK YOU FOR YOUR PAYMENT(S)				\$97.80						

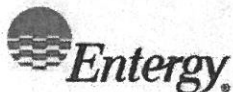
THANK YOU FOR THE PROMPT WAY YOU PAY YOUR BILL

=> Real-time payment options: My Account Online at entergy.com or by phone 800-584-1241 for a small fee.
PLEASE ADD \$1.00 FOR THE POWER TO CARE

Amount Due considered delinquent after BY date

Keep this portion for your records

Please detach and return with your check payable to Entergy



Our records show your telephone number is 409-296-1003. If your number or address has changed, check the box to the right and write the correction on the back.

Account Number QPC Office Cycle Route
4261034 008 018 04 09

WINNIE STOWELL HOSPITAL DISTRICT
PO BOX 1997
WINNIE TX 77665-1997

Due date does not apply to any previous balance already past due

PAY THIS AMOUNT	BY	03/24/2016
		\$97.78
PAY THIS AMOUNT	AFTER	03/24/2016
		\$102.37



ENTERGY
PO BOX 8104
BATON ROUGE LA 70891-8104

8018040900042610340000000977830000001023770840

