# Exhibit "A"

## Winnie-Stowell Hospital District Attendance Form Please Print Legibly

NOTE: For Public Comment – If you are planning on making a public comment, please see the "Policy and Procedures" and fill out a "Public Participation Form"

REGULAR MEETING Name Address

## WINNIE STOWELL HOSPITAL DISTRICT PUBLIC COMMENT-SIGN IN SHEET

## POLICIES AND PROCEDURES FOR PUBLIC COMMENT AT BOARD OF DIRECTORS **MEETINGS**

Any Individual shall be allowed to speak but is subject to the rules set forth in above Policies and Procedures for Public Comment:

a. The Board reserves the right to limit the number of speakers to insure the completion of the posted agenda in a timely manner

b. Individuals desiring to speak shall sign-up in advance of the meeting

c. The sign-up sheet shall be available 15 minutes before the beginning of each posted meeting

d. Speakers shall be heard on a first-come first served basis, based on the sign-up sheet, time

permitting
e. The opportunity to speak shall be limited to no more than three (3) minutes, unless extended by the Board

f. The Board is not required to speak and/or respond and/or answer any speaker, as allowed under law. July 25 2016 REGING MOETING

under law.	July 25 a	2014 REGULAR MEETING
NAME		ADDRESS

# Exhibit "B"

	W	SHD Fi	nancial	Reporting	g Sheet	
Re	porting Date:	Monday, Ju	ly 25, 2016		40	
From		Sales Tax	Property Tax	County	Other	Net
MPAP Funds			\$0.00	\$0.00	\$2,474,001.68	\$2,474,001.68
Texas Comptroller			\$40,903.70	\$0.00	\$0.00	\$40,903.70
	Total:	\$0.00	\$40,903.70	\$0.00	\$2,474,001.68	\$2,514,905.38

					<b>T</b> . !
Expenses	For	Amount	Status	Funds Summary	Totals
Benckenstein & Oxford	W - 400 - 40	0.28-20-2-00-20		Prosperity Operating	\$1,984,938.58
Hubert Oxford	1/2 Retainer	-500.00		Interbank	\$2,474,101.68
Josh Heinz	1/2 Retainer	-500.00		Prosperity CD	\$104,089.64
David Sticker, CPA				TexStar	\$653,119.58
American Express (pd 331.01 by ph)	Inv June	-7.71		Net Cash Position	\$5,216,249.48
Time Warner	Inv 5/5-6/4	-170.04		Net Expenses	-\$25,151.38
Star Graphics - Lease	Inv # 49898989	-133.42	ACH	Ending Balance	\$5,191,098.10
Star Graphics - Contract	Inv # 440757				
Deputy	May RM	-100.00			
ECISD		-15,000.00	ACH	Last Month-June	
IHS		-1,059.00		Prosperity Operating	\$1,971,092.63
Quill	Inv 7107425	-187.26		Interbank	\$151,580.75
Lisa Stramecki				Prosperity CD	\$104,089.64
CNA Surety	NH Bond-G	-250.00		TexStar	\$652,908.81
CNA Surety	NH Bond-GV	-100.00		2 1 -	
CNA Surety	NH Bond-HP	-450.00			1
CNA Surety	NH Bond-MM	-450.00		Net Cash Position	\$2,879,671.83
CNA Surety	NH Bond-SB	-850.00		Net Expenses	\$0.00
Brookshire Bros Pharmacy	IC-Apr Rx's	-3,980.01		Ending Balance	\$2,879,671.83
Willcox Pharmacy	IC-Apr Rx's	-1,413.94			
Payroll - Admin					
Payroll - IC Director				Outstanding Loans	RANGE TO SERVE
Payroll - Taxes				Loan #7 Balance (11/09/15-8/4/16)	\$3,610,000.00
	· · · · · · · · · · · · · · · · · · ·	Win States I		Loan #8 Balance (2/11/16-11/6/16)	\$3,610,000.00
Expenses Paid Durin	ng July	-\$15,000.00		Loan #9 Balance (5/13/16-2/6/17)	\$3,620,000.00
Expenses Paid at July	· ,	-\$25,151.38			, , , , , , , , , , , , , , , , , , , ,
	all Expenses for June	-\$40,151.38		Outstanding LTC Invoi	ces
				LTC Inv # 1075 - Dec 2015	\$285,594.32
Nursing Home Expens	ses Paid During the Mon	th		LTC Inc # 1079 - Jan 2016	\$285,594.32
Interest (Loans 7, 8, & 9)	-151,480.75			LTC Inc # 1081 - Feb 2016	\$267,168.88
( , , , , , , , , , , , , , , , , , , ,	-151,480.75			LTC Inc # 1089 - Mar 2016	\$285,594.32
	,			LTC Inc # 1093 - Apr 2016	\$276,381.60
Upcoming Nursing Home Rev	enue/Expenses			LTC Inc # 1114 - May 2016	\$285,594.32
Expense	Amount			LTC Inv # 1075 - June 2016	\$276,381.60
Interest due Aug 31	-151,480.75			LTC Inv # 1073 - July 2016	\$285,594.32
Payment to Genesis MGRS	-760,269.23			Total:	\$2,247,903.68
aymont to defice to widi to	100,203.23			Total.	Ψ2,241,300.00

Upcoming Nursing Home Reven	ue/Expenses
Expense	Amount
Interest due Aug 31	-151,480.75
Payment to Genesis MGRS	-760,269.23
CNA Surety- CB Bond Renewal	-\$600.00
CNA Surety- H Bond Renewal	\$300.00
CNA Surety- MH Bond Renewal	-\$300.00
CNA Surety- OM Bond Renewal	-\$200.00
CNA Surety- OLM Bond Renewal	-\$300.00
CNA Surety- TW Bond Renewal	-\$500.00
Payment to Genesis MGRS	-760,269.23

Summary of District El. Pe	riod 2, 1st Qtr. Proceeds
Net Proceeds	\$1,842,509.28
Interest Cost	-\$448,629.30
LTC Cost	-\$838,357.52
	\$555,522.46

## 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

hoxfordiv@benoxford.com

Hubert Oxford, IV

July 25, 2016

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

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

Dear President Henry,

Please allow this letter to serve as a *partial invoice* for \$1,000.00 representing our retainer for work performed in July 2016. We would request that you put this invoice in line for payment at this evening's meeting.

Separately, today, we are submitting an invoice for the March 2016 time entries. Otherwise, I will be finished with my time entries and final bills for April, May, and June 2016 by the Special Meeting that will need to be called before August 16, 2016 so that the Board can vote on an 1115 Waiver Program Intergovernmental Transfer on behalf of the Winnie Community Hospital.

In the meantime, we would appreciate your payment of the July 2016 retainer of \$1,000.00 and we will give the District credit for the \$1,000.00 payment when we submit the remainder of the invoice with time entries for July 2016. If so, please draft a check in the amount of \$500.00 payable to Josh Heinz and a second check for \$500.00 to Hubert Oxford, IV.

With best wishes, I am

Sincerely,

BENCKENSTEIN & OXFORD, L.L.P.

Hubert Oxford, IV

## BENCKENSTEIN & OXFORD, L.L.P.

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

hoxfordiv@benoxford.com

Hubert Oxford, IV

July 25, 2016

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

> Re: Winnie Stowell Hospital District; Billable Invoice for March 2016 less Retainer; Our File No. 87250.

Dear President Henry,

Attached, please find the invoice for Benckenstein & Oxford, LLP for work performed in March 2016. The invoice is for \$28,725.00; however, we have reduced this invoice by \$1,000.00 to account for the retainer previously paid bringing the balance owed to \$27,725.00. We request that this invoice be paid at the July 2016 Regular Meeting.

In the month of March 2016, we spent time on:

- LTC Invoice Reconciliation: Worked extensively with the LTC Group on behalf of the
  District to reconcile amounts owed to or paid by LTC Group to the District resulting from
  refunds due District in anticipation of meeting with the LTC Group in order to negotiate
  new rate terms with the LTC Group for MPAP Period 1 and/or 2.
- 2. FQHC & Associates: Worked with FQHC & Associates to establish an agreement to assess whether the Winnie Stowell area could qualify for a Federally Qualified Health Clinic ("FQHC"); whether a FQHC could be beneficial to the Hospital; and arranged meetings with concerned citizens to discuss their concerns with FQHC & Associates.
- MPAP Reconciliation: Obtained information from nursing home to begin evaluation of proposed MPAP reconciliations and amounts of reconciliations for Eligibility Periods 1 and 2.
- 4. **Needs Assessment**: Assisted with locating and educating firm to perform needs assessment of the Winnie Community Hospital after raising concerns about the Hospital's need for two operating rooms.

With this said, we ask you to please review the invoice, and if you have any questions or concerns about the invoice, please do not hesitate to ask me. Otherwise, we would respectfully request payment of fees incurred less the retainer for March 2016 totaling \$27,725.00.

With best wishes, I am

Sincerely,

BENCKENSTEIN & OXFORD, L.L.P.

By: Hubert Oxford, IV

Enclosure

## Benckenstein & Oxford, L.L.P.

3535 Calder Avenue Suite 300 Beaumont, TX 77706

## July 25, 2016

**INVOICE #:** 

48106

HOIV

Billed through:

March 31, 2016

Client/Matter #: WSHD

87250

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

RE: Winnie-Stowell Hospital District

#### PROFESSIONAL SERVICES RENDERED

03/01/16	HOIV	Worked extensively on reviewing LTC invoices and spreadsheets to evaluate costs and to research credit and debits for refunds as well as reviewed prior e-mails concerning fair market values and reductions in price per bed night.	6.00 hrs
03/02/16	HOIV	Received confidentiality agreement for FQHC & Associates by the Winnie Community Hospital and made extensive revisions.	1.60 hrs
03/02/16	HOIV	Conference call with FQHC & Associates and counsel for Hospital concerning Confidentiality Agreement and changes to the Agreement.	0.70 hrs
03/02/16	HOIV	Exchanged five (5) e-mails with staff, hospital personnel, and counsel for the hospital regarding vendor invoices for Indigent clients.	0.20 hrs
03/02/16	HOIV	Prepared spreadsheet for Genesis itemizing legal fees in order to obtain reimbursement for District.	2.80 hrs
03/03/16	HOIV	Continued work on LTC invoices to confirm refund amount of \$28,000.00 and to reconcile amounts charged the District from July through December 2014.	4.00 hrs
03/03/16	HOIV	Conference call with Chris Portner regarding confidentiality agreement for FQHC & Associates.	0.60 hrs
03/04/16	HOIV	Drafted extensive e-mail to Chris Portner explaining concerns with Confidentiality Agreement and suggested changes relating to FQHC & Associates.	1.10 hrs
03/04/16	HOIV	Continued working with LTC Group on invoices and amounts due/to Hospital District from LTC Group resulting from overages in July, August, and September 2014.	5.40 hrs

Client-	WSHD	87250 Invoice # 48106	PAGE
03/07/16	HOIV	Received e-mail from FQHC & Associates regarding their upcoming visit and made a number of phone calls with citizens of the District to arrange time and place for meetings with FQHC & Associates.	2.50 hrs
03/07/16	HOIV	Received and reviewed e-mail and attachment from District Administrator regarding receipt of MPAP funds.	0.40 hrs
03/07/16	HOIV	Receipt and review of spreadsheets for Genesis facilities in response to request by HHSC and responded to seventeen (17) e-mails with Genesis and Caring Healthcare regarding the same.	1.80 hrs
03/07/16	HOIV	Received third round of changes to Confidentiality Agreement provided by counsel for the Hospital regarding FQHC & Associates and reviewed the changes then responded to three e-mails concerning questions raised in the revised Confidentiality Agreement.	1.30 hrs
03/07/16	HOIV	Conference call with Kim Weete of Genesis regarding MPAP payments and the basis for the payments then prepared an e-mail for Ms. Weete with spreadsheets attached that demonstrate actual Medicare days for District facilities and actual days applied to Proxy payments for July 2016.	1.40 hrs
03/08/16	HOIV	Prepared for and conducted meetings with FQHC & Associates; the Winnie Community Hospital; and the East Chambers ISD superintendent regarding a FQHC and school based FQHC.	7.50 hrs
03/08/16	HOIV	Exchanged nine (9) e-mails with LTC Group and Genesis concerning legal fees incurred by District for Genesis facilities and provided additional information in order for the legal fees to be paid.	0.80 hrs
03/09/16	HOIV	Responded to two e-mails from the East Chambers Independent School District lawyers requesting information on the property sold to the School District on Highway 124.	0.30 hrs
03/09/16	HOIV	Conference call with FQHC & Associates to discuss the prior day's meetings with interested citizens and gathered information requested after the completion of the meetings and e-mailed to the Hospital; LTC Group; and FQHC & Associates.	1.70 hrs
03/09/16	HOIV	Received e-mails from J.S. Edwards & Sherlock regarding the District's D&O Insurance and coordinated with staff to ensure the payment of the insurance renewal.	0.40 hrs
03/09/16	HOIV	Worked with Genesis and Caring Healthcare to assist with each entity providing information to the State of Texas by March 11, 2016 regarding the anticipated upcoming MPAP Reconciliation.	3.40 hrs
03/10/16	HOIV	Worked with LTC Group on MPAP Program; QIPP Status; and began discussing the cost of LTC Services compared to benefits received and the need to renegotiate the costs of services.	4.00 hrs
03/10/16	HOIV	Received e-mail from Genesis regarding call with HHSC and HHSC's suggestion to change the scope of work for the MPAP reconciliation due on March 11, 2016 and responded to the e-mail.	0.40 hrs
03/10/16	HOIV	Received e-mail from Sherrie Norris regarding Caring Healthcare's continued	0.40 hrs

Client-	WSHD	87250 Invoice # 48106	PAGE
		deposit of District's MPAP funds into their operations account and held a conference call with Gary Klein of Caring Healthcare regarding the same.	
03/11/16	HOIV	Worked with LTC Group on MPAP Program; QIPP Status; and began discussing the cost of LTC Services compared to benefits received and the need to renegotiate the costs of services.	4.00 hrs
03/11/16	HOIV	Received e-mail from Ken Broussard, owner of Jasper Facility, regarding the denial of QIPP program and exchanged nine (9) e-mails regarding a plan to move forward in the event that QIPP is approved.	0.90 hrs
03/11/16	HOIV	Worked with FQHC & Associates to take inventory of information requested by the Winnie Community Hospital and prepared and responded to several e-mails to and from Hospital personnel regarding the requests.	0.70 hrs
03/15/16	HOIV	Extensive conference calls with Board members regarding LTC and Hospital.	2.50 hrs
03/15/16	HOIV	Conference call with Chris Portner regarding FQHC and Hospital Feasibility Study.	0.70 hrs
03/15/16	HOIV	Prepared spreadsheets for approval by Managers for payment of incentive fees on March 16, 2016 and submitted to Managers for approval.	1.80 hrs
03/15/16	HOIV	Began drafting e-mail to Chris Portner regarding Indigent Care Agreement; FQHC Study; and potential Hospital Feasibility Study.	0.70 hrs
03/15/16	HOIV	Worked with staff on making payment to the LTC Group for August 2015 Invoice by having a conference call and verifying the payment amount.	0.40 hrs
03/16/16	HOIV	Finished reconciliation of LTC invoices for UPL Program and drafted extensive e-mail to LTC requesting a credit for August 2014 payment.	1.70 hrs
03/16/16	HOIV	Received e-mail from Gary Klein regarding HUD nursing home cash flow models; analyzed the models and responded to Caring Healthcare regarding the District's fact specific issues.	2.00 hrs
03/16/16	HOIV	Assisted in the reconciliation of payment to Managers for the March 2016 payment and submitted reconciliation form to staff to make transfers.	1.20 hrs
03/16/16	HOIV	Drafted extensive e-mail to Chris Portner regarding status of Indigent Care Projects and the need to perform a feasibility study in order to receive future funding from the District.	1.60 hrs
03/17/16	HOIV	Began drafting minutes for February 17, 2016 Regular Meeting.	6.00 hrs
03/17/16	HOIV	Exchanged ten (10) e-mails with the LTC March Distribution amount that were reconciled on March 24, 2016 and confirmed reconciled amount by staff and myself were correct; and exchanged multiple e-mails with Caring Healthcare to provide a date that MPAP funds would be received.	1.40 hrs
03/17/16	HOIV	Provided copies of Imaging Center agreements and analysis to FQHC and Associates and consultants scheduled to perform feasibility study of hospital.	0.30 hrs
03/17/16	HOIV	Exchanged six (6) e-mails with lawyers for ECESD on closing documents and to establish a date for closing.	0.40 hrs

Client-	WSHD	87250 Invoice # 48106	PAGE
03/17/16	HOIV	Exchanged multiple e-mails and conference calls with Health Data Resources, consultants for Winnie Community Hospital, regarding the prior work on hospital by the District to analyze the Hospital's finances during the bankruptcy and the indigent care agreement.	0.70 hrs
03/18/16	HOIV	Continued work on February Regular Meeting minutes and February 25, 2016 Special Meeting minutes.	6.00 hrs
03/18/16	HOIV	Researched 1115 Program for ambulance services and provided research results to Board.	0.80 hrs
03/18/16	HOIV	Exchanged sixteen (16) e-mails between Caring Healthcare, staff, and LTC regarding Caring Healthcare's demands to be paid Elig. Period 1, 2nd Qtr. payment immediately.	1.00 hrs
03/18/16	HOIV	Prepared e-mail to Ken Broussard, with Jasper Nursing Home, and correspondence in return, confirming that the District was not going to go forward with the CHOW because the QIPP Program delay.	0.30 hrs
03/21/16	HOIV	Held multiple conference calls with LTC Group; Health Data Resources; and District Board members regarding the status of the Winnie Community Hospital; indigent care payments; and needs assessment.	3.40 hrs
03/21/16	HOIV	Received nine (9) e-mails ECESD counsel regarding closing documents; reviewed the closing documents; and arranged for the logistics to close on the sale of the property by conducting conference calls with staff and Board members.	1.40 hrs
03/21/16	HOIV	Exchanged e-mails and conference calls with Board, staff, and Hospital counsel regarding concerns with Hospital's use of Indigent funds and the need to meet with the Hospital for explanations.	2.30 hrs
03/21/16	HOIV	Exchange four e-mails with Genesis regarding outstanding reconciliation figures for MPAP funds so that the District can pay Genesis an incentive fee.	0.30 hrs
03/22/16	HOIV	Received, read, and reviewed, draft proposal from Health Resources regarding feasibility study for Hospital and made a number of revisions to account for the fact that the agreement was going to be with the Hospital.	0.70 hrs
03/22/16	HOIV	Drafted extensive e-mail to staff and Board regarding the Winnie Community Hospital; the study performed for the Operating Room; and the need to have a needs assessment completed before any further funds are given to hospital for improvements to the facility.	1.50 hrs
03/22/16	HOIV	Met with counsel for the Winnie Community Hospital in order to convey concerns about study for Operating room and then began to modify spreadsheets for hospital programs to reconcile funds remaining.	3.70 hrs
03/22/16	HOIV	Received revised needs assessment draft agreement and reviewed the same to make sure it satisfies the District needs.	0.50 hrs
03/23/16	HOIV	Prepared for and attended March 2016 Regular Meeting.	3.00 hrs
03/23/16	HOIV	Worked with staff to revise indigent care reports and made suggested changes.	1.20 hrs

Client-	WSHD	87250 Invoice # 48106	PAGE	5
03/24/16	HOIV	Conference calls with Board; Staff; New Light Healthcare; and Hospital Counsel regarding the prior evening's Regular Board meeting and plan of actions to move forward with needs assessment and clarifying the outstanding balances of indigent care funds.	2.80 hrs	
03/24/16	HOIV	In anticipation of the repayment for Loan 5, worked with LTC on obtaining information on dates and information on the timing of the MPAP payment scheduled for payment in March 2016 by way of conference calls and e-mails.	0.80 hrs	
03/28/16	HOIV	Received and reviewed list of needed documents and participated in conference call regarding the needs assessment for the Winnie Community Hospital.	1.20 hrs	
03/29/16	HOIV	Exchanges seven (7) e-mails about arranging times for needs assessment meetings.	0.70 hrs	
03/29/16	HOIV	Exchanged eight (8) e-mails and a conference call with staff and the District's Lender regarding the District's desire to establish its own trust account in order to segregate incentive funds to Managers.	1.00 hrs	
03/29/16	HOIV	Conference calls with the District's lender and LTC Group regarding an authorized transfer of funds by Interbank and the need to immediately reverse the funds.	0.60 hrs	
03/29/16	HOIV	Worked with staff to revise and update prior indigent healthcare rates for the District to include accurate and up to date figures in order to determine the average cost of indigent care per client for 2011-2015.	6.00 hrs	
		Total fees for this matter	\$28,725.00	

## **BILLING SUMMARY:**

 Oxford, IV Hubert
 114.90 hrs @ \$250.00 /hr
 \$28,725.00

 TOTAL FEES
 \$28,725.00

 TOTAL CHARGES FOR THIS INVOICE
 \$28,725.00

 PROFESSIONAL DISCOUNT
 \$1,000.00 CR

TOTAL BALANCE NOW DUE

\$27,725.00

5

Federal ID# 74-1646478

Invoice Terms: Net 10 Days Upon Receipt
Please Reference Invoice Number on Your Check



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

0:

Order Date: 07/01/2016 Ship Date: 07/02/2016 InvoiceDate: 07/01/2016

TIN: 36-2952904

\$6.99

Sold To:

Winniestowell Hospital Distri

Po Box 1997 Winnie TX 77665-1997

901-7-28155

Ship To:

1

\$6.99/dozen

Winnie Stowell Hospital Distri Sherrie Norris 538 Broadway Winnie TX 77665

Customer PO : norris	ssherrie Order# : 93281	909 Inv	/oice# : <b>710</b> 7	<b>425</b> Accou	int# : C7769473
Item Number	Description	Color	Qty shipped	Price/UM	Extended
901-686MONTH	Post it printed tabs, monthly		1	\$7.49/pack	\$7.49
901-7QFL5AD	Quill 1/2 flags w/dispenser	Asstd	2	\$5.49/pack	\$10.98
901-75746Q	Quickstrip bus env 500/bx	White	1	\$33.99/box	\$33.99
579-720222CT	Quill brand copy paper letter	White	1	\$29.99/carton	\$29.99
901-28BEBK	Steel bookends 5 open back	Black	3	\$7.19/pair	\$21.57
901-7C1534	Qb hd file pocket, 5.25, ltr	Brown	1	\$32.99/box	\$32.99
901-7C1524H	Heavy duty file pocket, 3.5	Brown	1	\$28.99/box	\$28.99

Asstd

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

# Always Expanding Assortment.

Quill tank style highlighters

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.

\$172.99 Mdse Total: Tax: \$14.27 Shipping: Free

\$187.26 Amount Due: Due Date: 07/31/2016

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

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: 7107425 Invoice Date: 07/01/2016 Amount Due: \$187.26 Payable in U.S. Dollars

Payable to:

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



Account Ending 0-51003

\$7.71 **New Balance** \$7.71

**Minimum Payment Due** 

Payment Due Date

08/05/16<sup>‡</sup>

<sup>‡</sup>Late Payment Warning: If we do not receive your Minimum Payment Due by the Payment Due Date of 08/05/16, 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%.

See page 2 for important information about your account.

#### EARN REWARDS FASTER WITH EMPLOYEE CARDS'

Plus, here are three more reasons you can benefit from adding Employee Cards.

Stay on budget with spending limits and alerts Help save time on back-office tasks

**Every OPEN Card** offers an Employee Card option with no annual fee

Visit open.com/ecearn to get started.

## Membership Rewards® Points

Available and Pending as of 05/31/16

For up to date point balance and full program details, visit membershiprewards.com

#### **Account Summary**

Previous Balance	\$331.01
Payments/Credits	-\$662.02
New Charges	+\$338.72
Fees	+\$0.00
Interest Charged	+\$0.00

New Balance	\$7.71
Minimum Payment Due	\$7.71

Credit Limit	\$15,500.00 \$15,492.29
Available Credit  Cash Advance Limit	\$13,492.29
Available Cash	\$3,100.00

Days in Billing Period: 31

#### **Customer Care**



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

→ See page 2 for additional information.

 $\downarrow$  Please fold on the perforation below, detach and return with your payment  $\downarrow$ 

**Payment Coupon** Do not staple or use paper clips





#### 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 08/05/16

**New Balance** \$7.71

**Amount Enclosed** 

Minimum Payment Due \$7.71

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

Payments: Your payment must be sent to the payment address shown on your statement and must be received by 5 p.m. local time at that address to be credited as of the day it is received. Payments we receive after 5 p.m. will not be credited to your Account until the next day. Payments must also: (1) include the remittance coupon from your statement; (2) be made with a single check drawn on a US bank and payable in US dollars, or with a negotiable instrument payable in US dollars and clearable through the US banking system; and (3) include your Account number. If your payment does not meet all of the above requirements, crediting may be delayed and you may incur late payment fees and additional interest charges. Electronic payments must be made through an electronic payment method payable in US dollars and clearable through the US banking system. If we accept payment in a foreign currency, we will convert it into US dollars at a conversion rate that is acceptable to us, unless a particular rate is required by law. Please do not send post-dated checks as they will be deposited upon receipt. Any restrictive language on a payment we accept will have no effect on us without our express prior written approval. We will re-present to your financial institution any payment that is returned unpaid.

Permission for Electronic Withdrawal: (1) When you send a check for payment, you give us permission to electronically withdraw your payment from your deposit or other asset account. We will process checks electronically by transmitting the amount of the check, routing number, account number and check serial number to your financial institution, unless the check is not processable electronically or a less costly process is available. When we process your check electronically, your payment may be withdrawn from your deposit or other asset account as soon as the same day we receive your check, and you will not receive that cancelled check with your financial account statement. If we cannot collect the funds electronically we may issue a draft against your deposit or other asset account for the amount of the check. (2) By using Pay By Computer, Pay By Phone or any other electronic payment service of ours, you give us permission to electronically withdraw funds from the deposit or other asset account you specify in the amount you request. Payments using such services of ours received after 6:00 p.m. MST may not be credited until the next day.

How We Calculate Your Balance: We use the Average Daily Balance (ADB) method (including new transactions) to calculate the balance on which we charge interest on your Account. Call the Customer Care number listed below for more information about this balance computation method and how resulting interest charges are determined. The method we use to calculate the ADB and interest results in daily compounding of interest.

Paying Interest: Your due date is at least 25 days after the Closing Date of each billing period. We will not charge you interest on your purchases if you pay the New Balance by the due date each month. We will charge you interest on cash advances and (unless otherwise disclosed) balance transfers beginning on the transaction date.

Foreign Currency Charges: If you make a Charge in a foreign currency, we will convert it into US dollars on the date we or our agents process it.

We will charge a fee of 2.70% of the converted US dollar amount. We will choose a conversion rate that is acceptable to us for that date, unless a particular rate is required by law. The conversion rate we use is no more than the highest official rate published by a government agency or the highest interbank rate we identify from customary banking sources on the conversion date or the prior business day. This rate may differ from rates in effect on the date of your charge. Charges converted by establishments (such as airlines) will be billed at the rates such establishments use.

Credit Balance: A credit balance (designated CR) shown on this statement represents money owed to you. If within the six-month period following the date of the first statement indicating the credit balance you do not request a refund or charge enough to use up the credit balance, we will send you a check for the credit balance within 30 days if the amount is \$1.00 or more.

Credit Reporting: We may report information about your Account to credit bureaus. Late payments, missed payments, or other defaults on your Account may be reflected in your credit report.



**Customer Care & Billing Inquiries** International Collect Large Print and Braille Statements **Lost or Stolen Card Cash Advance at ATMs Inquiries** 

1-877-258-3254 1-623-492-7719

1-877-258-3254 1-800-521-6121 1-800-CASH-NOW **Hearing Impaired** TTY: 1-800-221-9950

FAX: 1-800-695-9090 In NY: 1-800-522-1897



Website: american express.com Mobile Site: amexmobile.com

**Customer Care** & Billing Inquiries P.O. BOX 981535 EL PASO, TX 79998-1535

**Payments** P.O. BOX 650448 **DALLAS TX 75265-**0448

Cha	ang	eo	f Ad	dr	ess	

If correct on front, do not use.

- To change your address online, visit www.americanexpress.com/updatecontactinfo
- For Name, Company Name, and Foreign Address or Phone changes, please call Customer Care.
- · Please print clearly in blue or black ink only in the boxes provided.

r	MAR									
Street Address										
City, State										
Zip Code										
Zip Code Area Code and Home Phone										
Area Code and Work Phone										
Email		n, k landing, krangere	 	***	 		 	 4		

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- · Save time

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AMERICAN EXPRESS



Account Ending 0-51003

### 1	Summa	ary		
Tredits   So.				Tota
Second   Payments and Credits   Second	Payments			-\$662.02
Petal   *Indicates posting date	Credits		\$0.00	
Amount/10/3/16*   JOHN E HENRY SR	Total Paym	ents and Credits		-\$662.02
Tricante	Detail	*Indicates posting date		
New Charges   Summary   Tot	Payments			Amount
New Charges   Summary   Tot	07/03/16*	JOHN E HENRY SR	PAYMENT RECEIVED - THANK YOU	-\$331.01
Summary	07/01/16*	SHERRIE NORRIS	CUSTOMER SERVICE PAYMENT THANK YOU	-\$331.01
Tot   \$338.3	New C	Charges		
SHERRIE NORRIS   Card Ending 0-51011	Summa	ary		Tota
SHERRIE NORRIS   Card Ending 0-51011	SHERRIE NO	RRIS 0-51011		\$338.72
## Detail    SHERRIE NORRIS   Card Ending 0-51011			\$338.72	
SHERRIE NORRIS Card Ending 0-51011  Amount 6/15/16 USPS 489815066425606 41831425606 WINNIE TX 800-2758777  6/26/16 INTUIT *PAYROLL 800-446-8848 CA T1-C2ACB-1E8 94043  7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM Mountain View ADVERTISING SERVICE  Fees  Amount				
Card Ending 0-51011    Amount	Detail			
Card Ending 0-51011    Amount	SHE	RRIE NORRIS		
6/15/16 USPS 489815066425606 41831425606 WINNIE TX 800-2758777  6/26/16 INTUIT *PAYROLL 800-446-8848 CA T1-C2ACB-1E8 94043  7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM Mountain View ADVERTISING SERVICE  Fees  Amoun				
WINNIE TX 800-2758777  6/26/16 INTUIT *PAYROLL \$275.3 800-446-8848 CA T1-C2ACB-1E8 94043  7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM \$40.0 Mountain View ADVERTISING SERVICE				Amount
800-2758777  6/26/16 INTUIT *PAYROLL \$275.7 800-446-8848 CA T1-C2ACB-1E8 94043  7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM \$40.6 Mountain View ADVERTISING SERVICE  Fees  Amount	06/15/16	USPS 489815066425606 41	831425606	\$22.95
6/26/16 INTUIT *PAYROLL \$275.7 800-446-8848 CA T1-C2ACB-1E8 94043  7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM \$40.0 Mountain View ADVERTISING SERVICE				
800-446-8848 CA T1-C2ACB-1E8 94043  7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM Mountain View ADVERTISING SERVICE  Fees  Amoun				
T1-C2ACB-1E8 94043  7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM \$40.0 Mountain View ADVERTISING SERVICE  Fees  Amoun	06/26/16			\$275.77
7/03/16 GOOGLE*SVCSAPPSWSHD-TX-COM \$40.0 Mountain View ADVERTISING SERVICE  Fees  Amountain				
Mountain View ADVERTISING SERVICE  Fees  Amountain View ADVERTISING SERVICE	7/02/46		TV COM	¢40.00
Fees Amount	0//03/16		-TX-COM	\$40.00
Fees				
Amou		ADVERTISING SERVICE		
	Fees			
otal Fees for this Period \$0.0				Amount
	otal Fees f	or 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			



## Membership Rewards® Monthly Statement and Program News

#### Prepared for JOHN E HENRY SR

#### Account Number 1M70555067

## Total Points Balance 39,700

## Points Earned this Period

Account Summary	May 1, 2016 - May 31, 2016
Opening Points Balance	35,139
Points Earned this Period	+4,561
Points Used this Period	0
Reinstated Points and Adjustments	0
Total Points Balance	39,700

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

#### **Questions About Your Account?**



4,561

membershiprewards.com

1-800-AXP-EARN (297-3276) International Collect: 1-336-393-1111

#### **Did You Know?**

#### **Retail Gift Cards**

Make shopping your happy place.
Terms and Conditions for the Membership Rewards® program apply.
Visit membershiprewards.com/terms or call 1-800-AXP-FARN (297-3276) for more

Visit membershiprewards.com/terms or call 1-800-AXP-EARN (297-3276) for more information. Participating partners and available rewards are subject to change without notice.

#### **Points Transaction Detail**

May 1, 2016 - May 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	0	0
Add'l Blue For Business XXXX-XXXXX0-51011	4,561	0	4,561
Total	4,561	0	4,561

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 1-336-393-1111.

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



### OPEN Savings® Summary WINNIE STOWELL HOSPI JOHN E HENRY SR Closing Date 07/11/16

Account Ending 0-51003

	Discounts
\$0.00	This Period
\$0.00	Year to Date

Membership Rewards® Points	
This Period	0
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 <u>OR</u> 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.** 

### AMERICAN EXPRESS OPEN

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66

It helps me free up time and energy so I can reinvest it back into growing my business.



Michael Morley Owner Book Solutions LLC

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.

## EARN REWARDS FASTER

#### WITH EMPLOYEE CARDS

#### Here are three ways your business can benefit from adding Employee Cards:

- Earn rewards on purchases in the same way your own Card does.<sup>1</sup>
- Stay on budget with spending limits on each Employee Card plus, request text or email alerts when an employee tries to spend above the limit.2
- Help save time on back-office tasks by using your Employee Cards with tools like ReceiptMatch<sup>SM3</sup> and Account Manager.<sup>4</sup>

Every OPEN Card offers an Employee Card option with no annual fee. Visit open.com/empcards to find the one that works best for your business.

1 Terms, conditions, and restrictions vary by individual Card products.
2 Employee Card Spending Limits may be set up online or by calling the number on the back of your Card. The Spending Limit is not a guarantee that the Employee Card Member will be able to make purchases up to that limit. There are certain purchases where the limit does not apply, such as, to example, restaurant tips and hotel stays extended beyond their original reservation period, and the overall Account capacity is taken into consideration. You agree to pay all Charges without regard to whether any Charges exceed a limit, and you agree that was ent of liable to you or any other person when a limit is not applied to any Charges and/or when Charges are incurred and billed that secced a limit. For more information on the application of the limit, please refer to the Employee Card Place and Plac

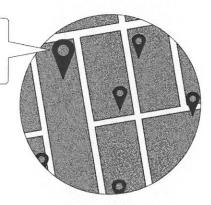
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NOW THERE ARE MORE PLACES THAN EVER TO

## USE YOUR CARD AND GET REWARDED.

More places to use your Card means more ways to:

- Get rewards on eligible purchases\*
- Consolidate your business spending
- Support small businesses in your area





Find local places to shop for your business at shopsmallnow.com/open.

\*Not all Cards are eligible to get rewards. Terms and limitations vary by Card type.

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

Due date Jul 16, 2016

Service period 07/05 - 08/04

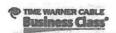
Amount due \$170.04

RECEIVED JUL 0 1 2015

#### Service address

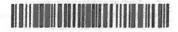
Winnie Stowell Hospital Account Phone 409-201-3922 538 Broadway Wshd Rm Winnie, TX 77665-7600

Previous balance & payments	
Balance last statement	169.95
Payments received as of Jun 26, 2016	-169.95
Current month	
Monthly services	149.94
Surcharges	9.89
Taxes and fees	10.21
Total due by Jul 16, 2016	\$170.04



7010 AIRPORT RD EL PASO TX 79906-4943 8260 1700 NO RP 26 06272016 NNNNNYYN 01 006049 0027

WINNIE STOWELL HOSPITAL WSHD RM PO BOX 1997 WINNIE, TX 77665-1997 Աիլուդիկեւը ՀԱՐԻլիլի հերիկի հայարի հերիկի հիրի հերի



Payment due date Jul 16, 2016

Account number

8260 17 029 0121119

Please write your account

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 \$170.04

Amount enclosed

TIME WARNER CABLE PO BOX 60074 CITY OF INDUSTRY CA 91716-0074 լկլյեւդկիլեննությալ կլլել կեն այկլիլել կանությալ և Winnie Stowell Hospital
Total due by Jul 16, 2016: \$170.04
Account number: 8260 17 029 0121119
Customer code: 1931
Statement date: Jun 26, 2016



	Previous balance Balance last statement	169.95
	Total previous balance	\$169.95
***************************************	Payments	
06/13	Payment - Thank You	-169.99
	Total payments	-\$169.95
***************************************	Monthly services	
	Internet/Data services	
06/26	Broadband HSD - 10mx2m	119.95
	Internet/Data services total	\$119.95
	Phone services	
06/26	BCP Reqd Svcs	0.00
	BCP HSD Port Off, BCP Account Level, BCP VIP 1, BCP Voip Port On, Primary TN Tracking, Do Not Print	
	Business Class Phone	54.95
	BCP Tracking Code, Business Class Phone	04,00
	\$29.99 BCP Uld 36mo D/t	-10.96
	Phone services total	\$43.99
	Additional discounts	
	8CP Double 3Yr W/video	-14.00
	Additional discounts total	-\$14.00
	Total monthly services	\$149.94
200	Surcharges	
	TWC PUC Recovery Fee	0.04
	State Universal Service Fund	0.73
	Federal Universal Service Fund	1.79
	Federal Subscriber Line Charge	6.50
	TWC State Cost Recovery Fee	0.83
	continued on next column	
	CONTINUED ON HEAR COISING	

continued from previous column	
Total surcharges	\$9.89
TWC imposes surcharges to recover costs of complying with its governmental obligations. Specifically, TWC chooses to impose the State Cost Recovery Fee to recover the cost of TWC's Texas Margins Tax liability.	
Taxes and fees	
State and Local Sales Tax	9.10
TWC Regulatory Recovery Fee	0.55
E911 Fee	0.50
E911 Equalization Surcharge	0.06
Total taxes and fees	\$10.21
Total due by Jul 16, 2016 \$1	70.04

#### Reach us at your convenience

#### Online

Visit us at business.twc.com/myaccount to chat with agents online, manage your services, access support tools such as FAQs and user guides, and pay your bill when it is convenient for you.

#### Over the phone

Call us anytime at **1-866-519-1263** to speak with someone live. For the most efficient service, have the phone number associated with your account or your account number available when you call.

#### Pay online

#### My Account puts you in control!

Enjoy the convenience of anytime access to your account, save time with easy, online bill payment and efficiently manage your service all in one place. Your account number and customer code are needed to register. Visit us online at business.twc.com/myaccount to get started today!

#### Pay by phone

Make a payment free of charge using our automated payment option at 1-866-519-1263 and authorize payment directly from your bank account or credit card.

#### **Customer information**

Experiencing technical issues with closed captioning? Call 1-877-892-4662, email closedcaption@twcable.com, or fax 1-877-430-1386. Address written complaints to W. Wesselman, Legal, 13820 Sunrise Valley Dr., Herndon, VA 20171, email cclssues@twcable.com, or fax 1-704-697-4935. To follow up on a written submission only, call 1-877-276-7432.

If your check is returned, you expressly authorize your bank account to be electronically debited for the amount of the check plus any applicable fees. The use of a check for payment is your acknowledgment and acceptance of this policy and its terms and conditions. Nonpayment of any portion of your TV, Internet or Phone service could result in disconnection of your TWC services.

To view the call detail for your Business Phone calls, go to business two.com/myaccount.

For information on any upcoming programming changes please consult the Legal Notices published in Beaumont Enterprise on the 1st and 3rd Monday of each month and on two.com.

Time Warner Cable is an Equal Opportunity Employer M/F/D/V/Drug free workplace. For career opportunities at Time Warner Cable, visit twc.com/careers.



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

Invoice #

62733

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

RECEIVED

Date:

7/1/2016

WINNIE STOWELL HOSPITAL DISTRICT P O BOX 1997 WINNIE, TX 77665 JUL 0 5 2015

Terms: Net receipt of invoice

Professional services for the month of August 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!!!



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

Invoice #

62733

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

RECEIVED

Date:

7/1/2016

WINNIE STOWELL HOSPITAL DISTRICT P O BOX 1997 WINNIE, TX 77665 JUL 0 5 2015

Terms: Net receipt of invoice

Professional services for the month of August 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!!!





CNA SURETY

Phone: 1-888-866-2666 Fax: 1-605-335-0357

Email: uwservices@cnasurety.com

Company#: 0601 Bond/Policy#: 71579011 Billing Date: 07/08/2016 Due Date: 09/08/2016

Premium:

\$250.00

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

**Amount Due:** 

\$250.00

Company#: 0601

Bond/Policv#: 71579011

Effective Date: 09/08/2016 Anniversary Date: 09/08/2017

Name: WINNIE-STOWELL HOSPITAL DISTRICT DBA GARRISON NURSING HOME AND REHABIL

Bond amount: \$25,000.00

Description:

TX NURSING HOMES - NURSING FACILITY RESIDENTS

Written By: WESTERN SURETY COMPANY

Your agent has requested that we bill your bond/policy directly from our office. PLEASE PAY THE AMOUNT INDICATED to CNA Surety. If this is a renewal, please submit payment at least two weeks prior to the due date to ensure proper and timely renewal of your bond/policy coverage.

If you have any questions, please contact your agent with whom the bond/policy was written.

Phone:

(409)832-7736

Agency Code:

42-23390

J. S. Edwards & Sherlock Insurance Agency, L. L. P. P. O. Box 22237

Beaumont, TX 77720

#### YOU CAN PAY ONLINE BY VISITING ONLINEPAY. CNASURETY. COM

Please detach and return the coupon below with your payment. Please send payment to the address below. For overnight payments please call 1-888-866-2666.

CNA Surety	Amount Due: \$250.
Company#: 0601	
Bond/Policy#: <b>71579011</b> Effective Date: 09/08/2016	
Name: WINNIE-STOWELL HOSPITAL DISTRICT DBA GARRISON	NURSING HOME AND REHABIL
Description: TX NURSING HOMES - NURSING FACILITY RESIDENTS	
Written By: WESTERN SURETY COMPANY	
Agency Code: 42-23390 J. S. Edwards & Sherlock	Check here if changes needed
<b>3 3 3 3 3 3 3 3 3 3</b>	and explain below.
Make Check Payable To CNA Surety	
CNA Surety Direct Bill	

## CNA SURETY

Phone: 1-888-866-2666 RECEIVED Fax: 1-605-335-0357

JUL 1 8 2016

Email: uwservices@cnasurety.com

Company#: 0601

Bond/Policy#: 71579020 Billing Date: 07/08/2016 09/08/2016 Due Date:

Premium:

\$100.00

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

**Amount Due:** 

\$100.00

\$100.00

Company#: 0601

Bond/Policv#: 71579020

Effective Date: 09/08/2016

Anniversary Date: 09/08/2017

Bond amount:

\$10,000.00

Name:

WINNIE-STOWELL HOSPITAL DISTRICT DBA GOLDEN VILLA HEALTHCARE, LLC

TX NURSING HOMES - NURSING FACILITY RESIDENTS Description:

WESTERN SURETY COMPANY Written By:

Your agent has requested that we bill your bond/policy directly from our office. PLEASE PAY THE AMOUNT INDICATED to CNA Surety. If this is a renewal, please submit payment at least two weeks prior to the due date to ensure proper and timely renewal of your bond/policy coverage.

If you have any questions, please contact your agent with whom the bond/policy was written.

Phone:

(409)832-7736

Agency Code:

42-23390

J. S. Edwards & Sherlock Insurance Agency, L. L. P. P. O. Box 22237

Beaumont, TX 77720

#### YOU CAN PAY ONLINE BY VISITING ONLINEPAY. CNASURETY. COM

Please detach and return the coupon below with your payment. Please send payment to the address below. For overnight payments please call 1-888-866-2666.

**CNA Surety** Company#:

Name:

0601

Bond/Policy#: 71579020

Effective Date: 09/08/2016

WINNIE-STOWELL HOSPITAL DISTRICT DBA GOLDEN VILLA HEALTHCARE, LLC

Description: TX NURSING HOMES - NURSING FACILITY RESIDENTS

Written By:

WESTERN SURETY COMPANY

Agency Code: 42-23390 J. S. Edwards & Sherlock

Check here if changes needed and explain below.

Amount Due:

Make Check Payable To CNA Surety

CNA Surety Direct Bill P.O. Box 957312 St Louis, MO 63195-7312



Phone: 1-888-866-2666 Fax: 1-605-335-0357

Email: uwservices@cnasurety.com

Premium:

Company#: 0601 Bond/Policy#: 71585621

Billing Date: 07/08/2016 Due Date: 09/10/2016

HIGHLAND PARK CARE CENTER P. O. BOX 1997 **WINNIE, TX 77665** 

RECEIVED

JUL 1 8 2016

\$450.00

**Amount Due:** 

\$450.00

Company#: 0601

Bond/Policy#: 71585621

Effective Date: 09/10/2016

Anniversary Date: 09/10/2017

Bond amount:

\$45,000.00

Name: Description: WINNIE-STOWELL HOSPITAL DISTRICT DBA HIGHLAND PARK CARE CENTER

TX NURSING HOMES - NURSING FACILITY RESIDENTS

WESTERN SURETY COMPANY Written By:

Your agent has requested that we bill your bond/policy directly from our office. PLEASE PAY THE AMOUNT INDICATED to CNA Surety. If this is a renewal, please submit payment at least two weeks prior to the due date to ensure proper and timely renewal of your bond/policy coverage.

If you have any questions, please contact your agent with whom the bond/policy was written.

Phone:

(409)832-7736

Agency Code:

42-23390

J. S. Edwards & Sherlock Insurance Agency, L. L. P. P. O. Box 22237\_\_\_\_

Beaumont, TX 77720

#### YOU CAN PAY ONLINE BY VISITING ONLINEPAY.CNASURETY.COM

Please detach and return the coupon below with your payment. Please send payment to the address below. For overnight payments please call 1-888-866-2666.

**CNA Surety** 

Company#: 0601

Bond/Policy#: 71585621

Effective Date: 09/10/2016

Name:

WINNIE-STOWELL HOSPITAL DISTRICT DBA HIGHLAND PARK CARE CENTER

Description: TX NURSING HOMES - NURSING FACILITY RESIDENTS

Written By:

WESTERN SURETY COMPANY

Agency Code: 42-23390 J. S. Edwards & Sherlock

**Amount Due:** 

\$450.00

Check here if changes needed and explain below.

Make Check Payable To CNA Surety

**CNA Surety Direct Bill** P.O. Box 957312 St Louis, MO 63195-7312



Phone: 1-888-866-2666 Fax: 1-605-335-0357

Email: uwservices@cnasurety.com

Company#: 0601 Bond/Policy#: 71579024

RECEIVED

Billing Date: 07/08/2016 Due Date: 09/08/2016

WINNIE STOWELL HOSPITAL DISTRICT

P. O. BOX 1997 WINNIE, TX 77665 10" 18 33

Premium:

\$450.00

Amount Due:

\$450.00

Company#: 0601

Bond/Policy#: 71579024

Effective Date: 09/08/2016

Anniversary Date: 09/08/2017

Bond amount:

\$45,000.00

Name: Description: WINNIE-STOWELL HOSPITAL DISTRICT DBA MARSHALL MANOR NURSING AND REHABI

TX NURSING HOMES - NURSING FACILITY RESIDENTS

Written By: WESTERN SURETY COMPANY

Your agent has requested that we bill your bond/policy directly from our office. PLEASE PAY THE AMOUNT INDICATED to CNA Surety. If this is a renewal, please submit payment at least two weeks prior to the due date to ensure proper and timely renewal of your bond/policy coverage.

If you have any questions, please contact your agent with whom the bond/policy was written.

Phone:

(409)832-7736

Agency Code:

42-23390

J. S. Edwards & Sherlock Insurance Agency, L. L. P. P. O. Box 22237

Beaumont, TX 77720

## YOU CAN PAY ONLINE BY VISITING ONLINEPAY. CNASURETY. COM

Please detach and return the coupon below with your payment. Please send payment to the address below. For overnight payments please call 1-888-866-2666.

**CNA Surety** 

Company#:

0601

Bond/Policy#: 71579024

Effective Date: 09/08/2016

\$450.00

Name: WINNIE-STOWELL HOSPITAL DISTRICT DBA MARSHALL MANOR NURSING AND REHABI Description: TX NURSING HOMES - NURSING FACILITY RESIDENTS

Written By:

WESTERN SURETY COMPANY

Agency Code: 42-23390 J. S. Edwards & Sherlock

Check here if changes needed and explain below.

**Amount Due:** 

Make Check Payable To CNA Surety

**CNA Surety Direct Bill** P.O. Box 957312

St Louis, MO 63195-7312



Phone: 1-888-866-2666 Fax: 1-605-335-0357

Email: uwservices@cnasurety.com

Company#: 0601 Bond/Policy#: 71579053

Billing Date: 07/08/2016 Due Date:

RECEIVED

09/08/2016

JUL 1 8 2033 WINNIE STOWELL HOSPITAL DISTRICT

P. O. BOX 1997 WINNIE, TX 77665

Premium:

\$850.00

Amount Due:

\$850.00

Company#: 0601

Bond/Policy#: 71579053

Effective Date: 09/08/2016

Anniversary Date: 09/08/2017

Bond amount:

\$85,000.00

Name:

WINNIE-STOWELL HOSPITAL DISTRICT DBA SPRING BRANCH TRANSITIONAL CARE

Description: TX NURSING HOMES - NURSING FACILITY RESIDENTS

Written By: WESTERN SURETY COMPANY

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Company#:

Bond/Policy#: 71579053

0601

Effective Date: 09/08/2016

**Amount Due:** 

\$850.00

Name: WINNIE-STOWELL HOSPITAL DISTRICT DBA SPRING BRANCH TRANSITIONAL CARE

Description: TX NURSING HOMES - NURSING FACILITY RESIDENTS

Written By: WESTERN SURETY COMPANY

Agency Code: 42-23390 J. S. Edwards & Sherlock

Check here if changes needed and explain below.

Make Check Payable To CNA Surety

**CNA Surety Direct Bill** P.O. Box 957312 St Louis, MO 63195-7312

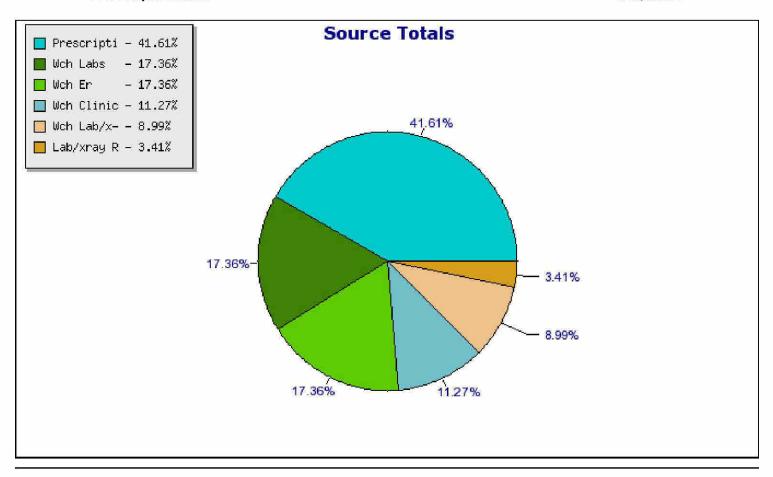
# Exhibit "C"

Page 1

## Source Totals for Batch Dates 07/01/2016 through 07/25/2016

144400 127000 127	
17.36%	\$2,250.49
17.36%	\$2,249.67
11.27%	\$1,460.42
8.99%	\$1,165.63
3.41%	\$441.67
	11.27% 8.99%

Total Expenditures \$12,961.83



#### Entry Statistics for Entry Dates 07/01/2016 through 07/25/2016

Clients Entered	3
Rapid Reg. Entered	3
Vendors Entered	0
Worksheets Entered	8
Invoices Entered	44

# **Dashboard Report**

## Winnie Stowel Hospital District Indigent Healthcare Services

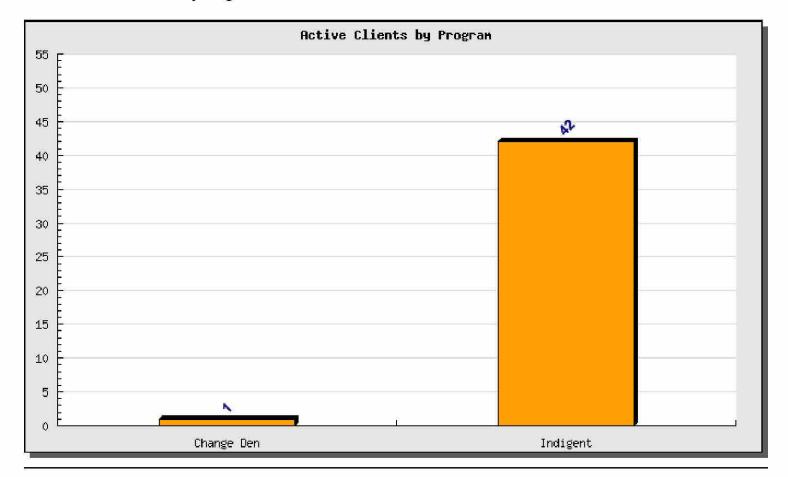
## Void Statistics for Void Dates 07/01/2016 through 07/25/2016

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

## Active Clients by Program for Eligibility Dates 07/01/2016 through 07/25/2016



**Total Clients By Program** 43



## Appointments Scheduled by Type for Appointment Dates 07/01/2016 through 07/25/2016

Renewal	0
Total Appointments Scheduled	0

Issued 07/20/16

## **GL Totals** Winnie Stowel Hospital District Indigent Healthcare Services Batch Dates 07/25/16-07/25/16

Wilcox Pharmacy P. O. Box 1850 Winnie, TX 77665 Vendor #: 18651

GL#	Description		Amount
WSHD	Wshd		1,413.94
		Expenditures Reimb/Adjustments	1,413.94 0.00
		Grand Total	1,413.94

GL	- 11	ota	IS	Detail	
	In	voi	CA	#	

Invoice #	GL#	Date in	Amt Billed	Amt Paid	Posted
036-2778*18651*19	WSHD	06/02/16	30.56	15.51	
036-2778*18651*19	WSHD	06/02/16	75.00	75.00	
036-2783*18651*61	WSHD	06/21/16	81.87	39.84	
036-2783*18651*61	WSHD	06/21/16	190.82	164.87	
036-2783*18651*61	WSHD	06/21/16	116.33	55.82	
036-2833*18651*78	WSHD	06/01/16	361.68	300.03	
036-2833*18651*78	WSHD	06/15/16	18.93	10.44	
036-2942*18651*65	WSHD	06/03/16	334.80	264.73	
036-2942*18651*65	WSHD	06/06/16	19.82	19.82	
036-2942*18651*65	WSHD	06/06/16	23.62	12.76	
036-3068*18651*41	WSHD	06/22/16	75.00	45.95	
036-3364*18651*29	WSHD	06/07/16	35.41	28.94	
036-3364*18651*29	WSHD	06/14/16	16.23	9.02	
036-3364*18651*29	WSHD	06/14/16	22.85	22.85	
036-3364*18651*29	WSHD	06/14/16	24.00	24.00	
036-3364*18651*29	WSHD	06/14/16	20.00	20.00	
036-3464*18651*7	WSHD	06/20/16	75.00	75.00	
036-3464*18651*7	WSHD	06/01/16	64.49	64.49	
1020*18651*1	WSHD	06/20/16	207.93	164.87	
	***		1,794.34	1,413.94	
	***		1,794.34	1,413.94	

19 records listed.

8 invoices listed.

#### ©IHS Issued 07/20/16

## **GL Totals**

Winnie Stowel Hospital District Indigent Healthcare Services Batch Dates 07/25/16-07/25/16

Brookshire Bros. Phar. (winnie) P.o. Box 1359 Winnie, TX 77665 Vendor #: 65460

Invoice #	GL#	Date in	Amt Billed	Amt Paid	Posted
1004*65460*7	WSHD	06/06/16	85.58	75.58	
1011*65460*6	WSHD	06/01/16	78.09	78.09	
1011*65460*6	WSHD	06/01/16	12.00	12.00	
1011*65460*6	WSHD	06/01/16	24.70	24.70	
1013*65460*4	WSHD	06/20/16	239.27	129.26	
1013*65460*4	WSHD	06/23/16	39.52	39.52	
1013*65460*4	WSHD	06/23/16	16.99	5.38	
1015*65460*4	WSHD	06/20/16	444.08	373.67	
1015*65460*4	WSHD	06/14/16	492.20	414.57	
1015*65460*4	WSHD	06/20/16	43.44	43.44	
1016*65460*2	WSHD	06/03/16	33.77	33.77	
1016*65460*2	WSHD	06/07/16	48.28	27.05	
1016*65460*2	WSHD	06/07/16	78.75	78.75	
1016*65460*2	WSHD	06/03/16	30.22	15.11	
1018*65460*1	WSHD	06/17/16	10.00	10.00	
1018*65460*1	WSHD	06/20/16	41.36	41.36	
1018*65460*1	WSHD	06/17/16	17.68	17.68	
1018*65460*1	WSHD	06/08/16	24.70	24.70	
1018*65460*1	WSHD	06/17/16	5.00	5.00	
1018*65460*1	WSHD	06/08/16	51.26	43.05	
1019*65460*1	WSHD	06/03/16	6.25	6.25	
1019*65460*1	WSHD	06/03/16	71.62	57.08	
1019*65460*1	WSHD	06/22/16	16.99	13.03	
1021*65460*1	WSHD	06/20/16	10.28	10.28	
1021*65460*1	WSHD	06/23/16	186.80	154.98	
1021*65460*1	WSHD	06/20/16	11.34	11.34	
	***		4,607.46	3,980.01	
	***		4,607.46	3,980.01	

61 records listed.
20 invoices listed.

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Issued 07/25/16

Source Totals Report Winnie Stowel Hospital District Indigent Healthcare Services

Batch Dates 07/25/2016 through 07/25/2016 For Vendor: WINNIE COMMUNITY HOSPITAL

Source	Description		Amount Billed	Amount Paid
21	Wch Clinic		3,562.00	1,460.42
24	Wch Er		5,487.00	2,249.67
25	Wch Lab/x-ray		2,843.00	1,165.63
27	Wch Labs		5,489.00	2,250.49
44	Lab/xray Readings		1,079.43	441.67
		Expenditures	18,460.43	7,567.88
		Reimb/Adjustments	0.00	0.00
		Grand Total	18 460 43	7 567 88

## **Source Totals Report Detail**

Invoice #	Source	DOS	Amount Billed	Amount Paid
036-2811*63057*6	21	06/02/2016	203.00	83.23
1002*63057*5	21	06/20/2016	271.00	111.11
1011*63057*6	21	06/14/2016	203.00	83.23
1019*63057*1	21	06/14/2016	223.00	91.43
1004*63057*6	21	06/17/2016	203.00	83.23
1004*63057*6	21	06/20/2016	30.00	12.30
1016*63057*4	21	06/07/2016	136.00	55.76
1016*63057*4	21	06/08/2016	30.00	12.30
036-2383*63057*9	21	06/01/2016	341.00	139.81
036-2383*63057*9	21	06/14/2016	203.00	83.23
036-2383*63057*9	21	06/29/2016	136.00	55.76
036-2383*63057*9	21	06/30/2016	252.00	103.32
036-3363*63057*5	21	06/06/2016	136.00	55.76
036-3217*63057*9	21	06/30/2016	136.00	55.76
036-2778*63057*7	21	06/09/2016	203.00	83.23
036-3364*63057*4	21	06/14/2016	413.00	169.33
1000*63057*11	21	06/16/2016	171.00	70.11
1020*63057*1	21	06/20/2016	136.00	55.76
036-2833*63057*4	21	06/15/2016	136.00	55.76
14 invoices, 19 line items			3,562.00	1,460.42
036-3363*63057*5	24	06/26/2016	4,423.00	1,813.43
1013*63057*1	24	06/23/2016	1,064.00	436.24
2 invoices, 2 line items			5,487.00	2,249.67
1004*63057*6	25	06/20/2016	1,796.00	736.36
036-3217*63057*9	25	06/30/2016	1,047.00	429.27
2 invoices, 2 line items			2,843.00	1,165.63
1016*63057*4	27	06/08/2016	1,084.00	444.44
036-2383*63057*9	27	06/14/2016	111.00	45.51
036-2778*63057*7	27	06/13/2016	1,169.00	479.29

Grand Totals			18,460.43	7,567.88
1 invoices, 1 line items			1,079.43	441.67
036-3426*63057*11	44	06/30/2016	1,079.43	441.67
7 invoices, 7 line items			5,489.00	2,250.49
036-2833*63057*4	27	06/02/2016	770.00	315.70
1020*63057*1	27	06/23/2016	904.00	370.64
1000*63057*11	27	06/16/2016	418.00	171.38
036-3364*63057*4	27	06/14/2016	1,033.00	423.53

16 invoices listed.

31 line items listed.