2019

COUNTY AUDITOR APPROVED

HEALTHCARE DISBURSEMENTS

FOR COURT DATE: JANUARY 14, 2019
THE ATTACHED CLAIMS AGAINST COLLIN COUNTY FOR THE PERIOD ENDING: JANUARY 8, 2019
ARE HEREBY APPROVED IN ACCORDANCE WITH LOCAL GOVERNMENT CODE 113.064 BY THE COUNTY AUDITOR AND ARE SUBMITTED TO COMMISSIONER'S COURT FOR FINAL APPROVAL.
TOTAL DISBURSEMENTS: $18,519.62

Healthcare Foundation Disbursements For 1/14/19 Court

Vendor Name	Check Number	Check Date	Transaction Amount	Comment	Object Description	Account Number	Project Number
AMAZON BUSINESS	485429	01/08/2019	$91.92		OPER-IMMUNIZATION SUPPLIES	1040-60001-0001-72-30-0000-626113-	
		Total for Check #485429	$91.92				
	Total For Vendor AMAZON BUSINESS		$91.92				
ATMOS ENERGY	485277	01/08/2019	$20.14		UTILITY-NATURAL GAS	1040-40010-8000-56-30-0000-648003-	BUB10001
		Total for Check #485277	$20.14				
	Total For Vendor ATMOS ENERGY		$20.14				
CAVALLO ENERGY TEXAS	485413	01/08/2019	$60.25		UTILITY-ELECTRIC SERVICE	1040-40010-8040-56-30-0000-648002-	BUB20001
		Total for Check #485413	$60.25				
	485414	01/08/2019	$416.92		UTILITY-ELECTRIC SERVICE	1040-40010-8040-56-30-0000-648002-	BUB20001
		Total for Check #485414	$416.92				
	485416	01/08/2019	$579.22		UTILITY-ELECTRIC SERVICE	1040-40010-8040-56-30-0000-648002-	BUB20001
		Total for Check #485416	$579.22				
	Total For Vendor CAVALLO ENERGY TX		$1,056.39				
EMOCHA MOBILE HEALTH	485412	01/08/2019	$2,475.00	MONTHLY SUBSCRIPTION PACKAGE	ADMIN-DUES & SUBSCRIPTIONS	1040-60001-0001-72-30-0000-615510-	
			$2,475.00		ADMIN-DUES & SUBSCRIPTIONS	1040-60001-0001-72-30-0000-615510-	
		Total for Check #485412	$4,950.00				
	Total For Vendor EMOCHA MOBILE		$4,950.00				
IBM DIRECT	485208	01/08/2019	$2,795.20		MAINT-SOFTWARE MAINTENANCE	1040-60001-0001-72-30-0000-637503-	
		Total for Check #485208	$2,795.20				
	Total For Vendor IBM DIRECT		$2,795.20				

Vendor Name	Check Number	Check Date		Transaction Amount	Comment	Object Description	Account Number	Project Number
INDIGENT HEALTHCARE SOLUTIONS LTD	485260	01/08/2019		$1,837.00		MAINT-SOFTWARE MAINTENANCE	1040-60001-0001-72-30-0000-637503-	
		Total for Check #485260		$1,837.00				
	Total For Vendor INDIGENT HEALTHCARE			$1,837.00				
KORUTHU, BELSY J	485294	01/08/2019		$9.65	MILES REIMBURSEMENT #2086	TRN/TVL-TRAVEL REIMBURSEMENT	1040-60001-0001-72-20-0000-604901-	
		Total for Check #485294		$9.65				
	Total For Vendor KORUTHU, BELSY J			$9.65				
OFFICE DEPOT	485210	01/08/2019		$22.03		ADMIN-OFFICE SUPPLIES	1040-60001-0001-72-30-0000-615101-	
				$19.99		ADMIN-OFFICE SUPPLIES	1040-60001-0001-72-30-0000-615101-	
				$10.36		ADMIN-OFFICE SUPPLIES	1040-60001-0001-72-30-0000-615101-	
				$189.08		ADMIN-OFFICE SUPPLIES	1040-60001-0001-72-30-0000-615101-	
				($40.87)		ADMIN-OFFICE SUPPLIES	2108-60001-9075-72-30-0000-615101-	GT065M
				$270.21		ADMIN-OFFICE SUPPLIES	2108-60060-9064-72-30-0000-615101-	GT258D
		Total for Check #485210		$470.80				
	Total For Vendor OFFICE DEPOT			$470.80				
OXFORD IMMUNOTEC INC	485326	01/08/2019		$72.00		OPER-LAB SERVICES	2108-60001-9075-72-30-0000-626423-	GT065M
		Total for Check #485326		$72.00				
	Total For Vendor OXFORD IMMUNOTEC			$72.00				
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	

Vendor Name	Check Number	Check Date		Transaction Amount	Comment	Object Description	Account Number	Project Number
PRIMAMED PHYSICIANS ASSOCIATION	485292	01/08/2019		$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
				$105.00		OPER-PRIMARY CARE SERVICE	1040-60001-0001-72-30-0000-626437-	
		Total for Check #485292		**$1,890.00**				
	Total For Vendor PRIMAMED PHYSICIANS			**$1,890.00**				
QUESTCARE HOSPITALISTS	485293	01/08/2019		$322.16	MEDICAL SERVICES FOR HEALTHCARE	OPER-OUTPATIENT HEALTHCARE	1040-60001-0001-72-30-0000-626427-	
		Total for Check #485293		**$322.16**				
	Total For Vendor QUESTCARE			**$322.16**				
ROJAS, FRANK	485350	01/08/2019		$4,281.00	EDUCATIONAL TUITION REIMBURSE	NTF-COLLEGE EDUCATION REIMB	1040-60001-0001-72-10-0000-524216-	
		Total for Check #485350		**$4,281.00**				

Vendor Name	Check Number	Check Date		Transaction Amount	Comment	Object Description	Account Number	Project Number
	Total For Vendor ROJAS, FRANK			$4,281.00				
TAYLOR, ROGER Z MD	485282	01/08/2019		$641.28	MEDICAL SERVICES FOR HEALTHCARE	OPER-OUTPATIENT HEALTHCARE	1040-60001-0001-72-30-0000-626427-	
		Total for Check #485282		$641.28				
	Total For Vendor TAYLOR, ROGER Z MD			$641.28				
TX VASCULAR ASSOCIATES	485303	01/08/2019		$82.08	MEDICAL SERVICES FOR HEALTHCARE	OPER-OUTPATIENT HEALTHCARE	1040-60001-0001-72-30-0000-626427-	
		Total for Check #485303		$82.08				
	Total For Vendor TX VASCULAR ASSOC			$82.08				
GRAND TOTAL				$18,519.62			NUMBER OF CHECKS - 16 NUMBER OF TRANSACTIONS - 39	