

2019

**COUNTY AUDITOR
APPROVED**

**HEALTHCARE
DISBURSEMENTS**

FOR COURT DATE: FEBRUARY 18, 2019
THE ATTACHED CLAIMS AGAINST COLLIN COUNTY FOR THE
PERIOD ENDING: FEBRUARY 12, 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: \$10,062.49



Healthcare Foundation Disbursements For 2/18/19 Court



Vendor Name	Check Number	Check Date	Transaction Amount	Comment	Object Description	Account Number	Project Number
A&W WINDOW CLEANING	486707	02/12/2019	\$80.00		MAINT-WINDOW CLEANING	1040-40010-8000-56-30-0000-637401-	FMB10001
		Total for Check #486707		\$80.00			
	Total For Vendor A&W WINDOW CLEANING		\$80.00				
CONVERGINT TECHNOLOGIES	486728	02/12/2019	\$1,900.00		MAINT-FIRE SYS CERTIFICATION	1040-40010-8000-56-30-0000-637446-	FMB10001
			\$638.00		MAINT-FIRE SYS CERTIFICATION	1040-40010-8040-56-30-0000-637446-	FMB20001
		Total for Check #486728		\$2,538.00			
	Total For Vendor CONVERGINT TECHNOLOGIES		\$2,538.00				
GREENWAY MEDICAL TECHNOLOGIES	486775	02/12/2019	\$1,235.51		MAINT-SOFTWARE MAINTENANCE	1040-60001-0001-72-30-0000-637503-	
			\$1,235.51		MAINT-SOFTWARE MAINTENANCE	1040-60001-0001-72-30-0000-637503-	
			\$1,235.51		MAINT-SOFTWARE MAINTENANCE	1040-60001-0001-72-30-0000-637503-	
	Total for Check #486775		\$3,706.53				
Total For Vendor GREENWAY MEDICAL		\$3,706.53					
HEALTH IMAGING PARTNERS	486745	02/12/2019	\$24.14		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$22.99		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$24.14		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$22.99		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$22.99		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$906.85		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$22.99		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$22.99		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	

Vendor Name	Check Number	Check Date	Transaction Amount	Comment	Object Description	Account Number	Project Number
			\$29.40		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
			\$22.99		OPER-TB CLINIC	1040-60001-0001-72-30-0000-626575-	
		Total for Check #486745		\$1,122.47			
	Total For Vendor HEALTH IMAGING PARTNERS			\$1,122.47			
JAMES, KIM	486748	02/12/2019	\$57.23	MILES REIMBURSEMENT #2253	TRN/TVL-TRAVEL REIMBURSEMENT	2108-60060-9064-72-20-0000-604901-	GT258C
		Total for Check #486748		\$57.23			
	Total For Vendor JAMES, KIM			\$57.23			
LEXISNEXIS RISK DATA MANAGEMENT INC	486849	02/12/2019	\$30.00		ADMIN-DUES & SUBSCRIPTIONS	1040-60001-0001-72-30-0000-615510-	
		Total for Check #486849		\$30.00			
	Total For Vendor LEXISNEXIS RISK DATA			\$30.00			
OXFORD IMMUNOTEC INC	486747	02/12/2019	\$216.00		OPER-LAB SERVICES	2108-60001-9075-72-30-0000-626423-	GT065M
		Total for Check #486747		\$216.00			
	Total For Vendor OXFORD IMMUNOTEC INC			\$216.00			
PLANO CITY OF (UTILITY DEPT)	486732	02/12/2019	\$49.83		UTILITY-WATER/TRASH SERVICE	1040-40010-8040-56-30-0000-648001-	BUB20001
		Total for Check #486732		\$49.83			
	486733	02/12/2019	\$160.18		UTILITY-WATER/TRASH SERVICE	1040-40010-8040-56-30-0000-648001-	BUB20001
		Total for Check #486733		\$160.18			
	Total For Vendor PLANO CITY OF			\$210.01			
			\$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	486705	02/12/2019	\$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-				
			\$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 #486705			\$1,995.00				
			Total For Vendor PRIMAMED PHYSICIANS			\$1,995.00				
SEPEDA, NORMA JANETTE	486797	02/12/2019	\$33.25	MILES REIMBURSEMENT #2319	TRN/TVL-TRAVEL REIMBURSEMENT	2108-60060-9064-72-20-0000-604901-	GT258C			
			\$74.00	AUSTIN, TX TX ASSOCIATION OF	TRN/TVL-EDUCATION & CONFERENCE	2108-60060-9064-72-20-0000-604910-	GT258C			
		Total for Check #486797			\$107.25					
Total For Vendor SEPEDA, NORMA JANETTE			\$107.25							
GRAND TOTAL			\$10,062.49			NUMBER OF CHECKS - 11 NUMBER OF TRANSACTIONS - 42				