Payable Register

Payable Detail by Vendor DBA

Fannin County, TX

Packet: APPKT03057 - 06/09/26 IHC Payable Register 2

Payable # / Payable Description	Payable Type	Post Date / Bank Code	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total

Vendor: 01223 - CONCORD RADIOLOGY — Vendor Total: **8.29**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
201205 01223 3 SDL	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	8.29	0.00	0.00	0.00	8.29
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	8.29	0.00	0.00	0.00	8.29

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		8.29	100.00%

Vendor: 01311 - Grayson County Health Clinic — Vendor Total: **45.48**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240829 01311 1 MW	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	45.48	0.00	0.00	0.00	45.48
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Vendor: 01146 - KIDNEY CARE ASSOCIATES LLP — Vendor Total: **302.06**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240829 01146 7 MW	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	181.92	0.00	0.00	0.00	181.92
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240829 01146 8 MW	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	120.14	0.00	0.00	0.00	120.14
Indigent File		Pooled Cash - Pooled Cash			No					

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description	Bank Code				On Hold					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	120.14	0.00	0.00	0.00	120.14

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		120.14	100.00%

Vendor: 01286 - Level One Emergency Physician — **Vendor Total:** **55.52**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240828 01286 11 RG	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	55.52	0.00	0.00	0.00	55.52
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	55.52	0.00	0.00	0.00	55.52

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		55.52	100.00%

Vendor: 01147 - MEDICAL CENTER OF MCKINNEY — **Vendor Total:** **139.36**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
220816 01147 3 KTN	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	139.36	0.00	0.00	0.00	139.36
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	139.36	0.00	0.00	0.00	139.36

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		139.36	100.00%

Vendor: 01168 - TEXOMACARE SPECIALTY PHYSICIANS — **Vendor Total:** **639.12**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240829 01168 7 MW	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	45.48	0.00	0.00	0.00	45.48
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240829 01168 8 MW	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	61.17	0.00	0.00	0.00	61.17
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	61.17	0.00	0.00	0.00	61.17

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		61.17	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240838 01168 2 SD	Invoice	6/9/2026	6/9/2026	6/9/2026	6/9/2026	532.47	0.00	0.00	0.00	532.47
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	532.47	0.00	0.00	0.00	532.47

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		532.47	100.00%

Payable Summary

Type	Count	Gross	Tax	Shipping	Discount	Total	Manual Payment	Balance
Invoice	9	1,189.83	0.00	0.00	0.00	1,189.83	0.00	1,189.83
	Grand Total:	**1,189.83**	**0.00**	**0.00**	**0.00**	**1,189.83**	**0.00**	**1,189.83**

Account Summary

Account	Name		Amount
100-565-4050	PRISONER MEDICAL		8.29
100-645-4110	PHYSICIAN, NON-EMERGENCY		1,042.18
100-645-4140	HOSPITAL, OUTPATIENT		139.36
		Total:	**1,189.83**