*State of New Mexico*

*Amy Whitehead*
*County Clerk*
*575-894-2840*

*Candace Chavez*
*County Treasurer*
*575-894-3524*

*Michael Huston*
*County Assessor*
*575-894-2589*

*Tom Pestak*
*Probate Judge*
*575-740-4900*

SIERRA COUNTY
NEW MEXICO

*1712 N. Date, Suite D*
*Truth or Consequences, New Mexico 87901*

*Amber Vaughn, County Manager*
*575-894-6215 voice 575-894-9548 fax*

*County of Sierra*

*James Paxon*
*Commissioner*
*575-894-6215*

*Hank Hopkins*
*Commissioner*
*575-894-6215*

*Travis Day*
*Commissioner*
*575-894-6215*

*Joshua Baker*
*County Sheriff*
*575-894-9150*

# BOARD OF COUNTY COMMISSIONERS
## Sierra County, New Mexico
**Resolution No. 2025-77**

**Indigent Claims**

**WHEREAS,** the Board of Sierra County Commissioners has received Indigent Hospital and Medical Claim request for those persons unable to make proper restitution for Medical Services in the amount of $2,660.47

**WHEREAS,** the Sierra County Board of Commissioners desire to provide for the equitable and reasonable payment of claims, and;

**THEREFORE BE IT RESOLVED,** that the Sierra County Board of Commissioners hereby approve payment to those Indigent Hospital Claims in the amount of:

Sole Community Providers in the amount of $2,660.47

To be deducted from the proper funds appropriated in the 2025-2026 FY Budget. October 21st, 2025

Board of County Commissioners
Sierra County, NM

T. Day
TRAVIS DAY, CHAIRMAN

James E Paxon
JAMES PAXON, VICE-CHAIRMAN

William Hopkins
WILLIAM HOPKINS, COMMISSIONER

Attest:
Amy Whitehead
AMY WHITEHEAD
SIERRA COUNTY CLERK

SIERRA COUNTY INDIGENT HEALTH CARE

RESOLUTION NO. 2025-77

CLAIMS APPROVED FOR $2,660.47

| VENDOR# | NAME | TOTAL CLAIMS | AMOUNT |
|---|---|---|---|
| 2775 | LUNA COUNTY DETENTION CENTER | 1 | $1,070.00 |
| 2853 | MIMBRES MEMORIAL HOSPITAL | 1 | $66.50 |
| 3281 | SIERRA VISTA HOSPITAL | 8 | $1,523.97 |

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Issued 10/16/25

# Source Totals Report

County Of Sierra

Batch Dates 10/21/2025 through 10/21/2025

For Vendor: All Vendors

| Source | Description | Amount Billed | Amount Paid |
|---|---|---|---|
| 02 | Jail - In House Inmate Service | 1,070.00 | 1,070.00 |
| 04 | Jail - Hospital Out-Patient | 1,397.00 | 905.62 |
| 05 | Jail - Lab/X-Ray | 6,357.21 | 684.85 |
| | **Expenditures** | 8,824.21 | 2,660.47 |
| | **Reimb/Adjustments** | | |
| | **Grand Total** | **8,824.21** | **2,660.47** |

**Source Totals Report Detail**

| Invoice # | Source | DOS | Amount Billed | Amount Paid |
|---|---|---|---|---|
| INMATE*2775*80 | 02 | 08/26/2025 | 490.00 | 490.00 |
| INMATE*2775*80 | 02 | 08/26/2025 | 580.00 | 580.00 |
| **1 invoices, 2 line items** | | | **1,070.00** | **1,070.00** |
| 10740*3281*1 | 04 | 09/23/2025 | 697.00 | 452.81 |
| 18360*3281*1 | 04 | 08/29/2025 | 3.00 | 0.00 |
| 18360*3281*1 | 04 | 08/29/2025 | 697.00 | 452.81 |
| **2 invoices, 3 line items** | | | **1,397.00** | **905.62** |
| 7143*3281*1 | 05 | 08/24/2025 | 406.00 | 60.80 |
| 10740*3281*3 | 05 | 09/25/2025 | 85.00 | 10.36 |
| 30901*2853*2 | 05 | 09/04/2025 | 1,508.51 | 66.50 |
| 35024*3281*1 | 05 | 08/06/2025 | 1,153.00 | 176.25 |
| 96003*3281*2 | 05 | 07/07/2025 | 85.00 | 10.36 |
| 96003*3281*1 | 05 | 07/07/2025 | 3.00 | 0.00 |
| 96003*3281*1 | 05 | 07/07/2025 | 242.75 | 12.67 |
| 96003*3281*1 | 05 | 07/07/2025 | 161.20 | 14.96 |
| 96003*3281*1 | 05 | 07/07/2025 | 85.91 | 9.32 |
| 96003*3281*1 | 05 | 07/07/2025 | 86.00 | 19.18 |
| 96003*3281*1 | 05 | 07/07/2025 | 657.34 | 103.54 |
| 10740*3281*2 | 05 | 09/25/2025 | 295.00 | 0.00 |
| 10740*3281*2 | 05 | 09/25/2025 | 253.00 | 12.67 |
| 10740*3281*2 | 05 | 09/25/2025 | 186.50 | 15.12 |
| 10740*3281*2 | 05 | 09/25/2025 | 141.50 | 18.64 |
| 10740*3281*2 | 05 | 09/25/2025 | 92.50 | 9.32 |
| 10740*3281*2 | 05 | 09/25/2025 | 74.50 | 3.80 |
| 10740*3281*2 | 05 | 09/25/2025 | 50.50 | 18.64 |
| 10740*3281*2 | 05 | 09/25/2025 | 93.00 | 19.18 |
| 10740*3281*2 | 05 | 09/25/2025 | 697.00 | 103.54 |
| **7 invoices, 20 line items** | | | **6,357.21** | **684.85** |
| **Grand Totals** | | | **8,824.21** | **2,660.47** |

**10 invoices listed.**
**25 line items listed.**