

OS R.S.
RK JM
KEL

CCMH FOUNDATION

Clay County Memorial Hospital
310 West South Street
Henrietta, Tx 76365

Invoice # 052218
Invoice date: 5/22/2018
Check Date: 5/29/2018

Pay Period 5/6/18 thru 5/19/18

Gross Wages	126,092.56
Accrual	2,000.00
FICA	9,264.41
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,155.46
Administration Fee	3,782.78
Sub-Total	169,400.29

Mileage	641.35
Reimbursements	-
Credit-Patient Account	(867.42)
Credit-Dietary	(331.00)
Credit-Scrubs	(45.00)

Total Invoice: 168,798.22

1	Net pay to Fidelity	92,494.38
2	Balance To Wells Fargo	76,303.84