

# CCMH FOUNDATION

*Jim R. R. R.*  
*Jim*

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

Invoice # 011419  
Invoice date: 1/14/2019  
Check Date: 1/22/2019

Pay Period 12/30/18 thru 1/12/19

Gross Wages	132,257.79
Accrual	2,000.00
FICA	9,655.99
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,388.14
Administration Fee	3,967.73

Sub-Total 176,374.73

Mileage	824.81
Reimbursements	80.00
Credit-Patient Account	(426.64)
Credit-Dietary	(424.00)
Credit-Scrubs	(264.04)

Total Invoice: 176,164.86

1	Net pay to Fidelity	96,964.45
2	Balance To Wells Fargo	79,200.41