

LB Jim JS
MLL
RL

CCMH FOUNDATION

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

Invoice # 081319
Invoice date: 8/13/2019
Check Date: 8/20/2019

Pay Period 7/28/19 thru 8/10/19

Gross Wages	137,238.28
Accrual	2,000.00
FICA	10,040.09
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,185.73
Administration Fee	4,117.15
Sub-Total	181,686.33

Mileage	555.12
Reimbursements	726.68
Credit-Air Evac	-
Credit-Patient Account	(394.09)
Credit-Dietary	(662.00)
Credit-Scrubs	(383.27)

Total Invoice: 181,528.77

1	Net pay to Fidelity	100,004.60
2	Balance To Legend Bank	81,524.17