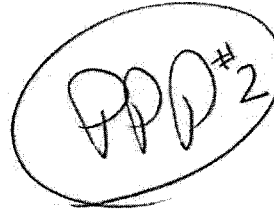


CCMH FOUNDATION



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

Invoice # 04212020
Invoice date: 4/21/2020
Check Date: 4/28/2020

Pay Period 04/05/2020 thru 04/18/2020

Gross Wages	138,603.56
Accrual	2,000.00
FICA	10,177.56
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,235.41
Administration Fee	4,158.11

Sub-Total 183,279.72

Mileage	579.60
Reimbursements	2.40
Credit-Air Evac	
Credit-Patient Account	(485.33)
Credit-Dietary	(698.00)
Credit-Scrubs	(344.12)

Total Invoice: 182,334.27

1	Net pay to Fidelity	99,952.92
2	Balance To Legend Bank	82,381.35