

Jim R.L.
CB
J.S.

CCMH FOUNDATION

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

Invoice # 07/14/2020
Invoice date: 7/14/2020
Check Date: 7/21/2020

Pay Period 6/28/2020 thru 7/11/2020

Gross Wages	146,112.64
Accrual	2,000.00
FICA	10,730.31
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,337.26
Administration Fee	4,383.38

Sub-Total 191,668.67

Mileage	634.56
Reimbursements	-
Credit-Air Evac	
Credit-Patient Account	(675.19)
Credit-Dietary	(598.00)
Credit-Scrubs	-

Total Invoice: 191,030.04

1	Net pay to Fidelity	104,650.68
2	Balance To Legend Bank	86,379.36