

*SM DM R.L.
CB J.S.*

CCMH FOUNDATION

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

Invoice # 08252020
Invoice date: 8/25/2020
Check Date: 9/1/2020

Pay Period 8/9/2020 thru 8/22/2020

Gross Wages	143,085.34
Accrual	2,000.00
FICA	10,447.63
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,254.06
Administration Fee	4,292.56

Sub-Total 188,184.67

Mileage	790.37
Reimbursements	516.95
Credit-Air Evac	
Credit-Patient Account	(638.00)
Credit-Dietary	(559.00)
Credit-Scrubs	-

Total Invoice: 188,294.99

1	Net pay to Fidelity	103,634.54
2	Balance To Legend Bank	84,660.45

3