## **CCMH FOUNDATION**



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

Invoice #

05052021

Invoice date: 5/5/2021

Check Date:

5/11/2021

## Pay Period 4/18/2021 thru 5/1/2021

Gross Wages Accrual FICA SUI Workmen's Comp	156,211.50 2,000.00 11,375.82 - 1,361.54
Employee Benefits	24,743.54 3,054.45
401(k) contribution	4,686.35
Administration Fee	4,060.33
Sub-Total	203,433.20
Mileage	591.33
Reimbursements	320.00
New Employee Setup Fee	-
Credit-Air Evac	(207.60)
Credit-Patient Account	(207.69)
Credit-Dietary	(516.00)
Credit-Scrubs	-

Tota	I Invoice:	203,620.84
1 Net	pay to First Capital Bank	112,793.77
2 Bala	nce To Legend Bank	90,827.07