

MC @ *98*
CB *RL*

CCMH FOUNDATION

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

Invoice # 06292021
Invoice date: 6/29/2021
Check Date: 7/6/2021

Pay Period 6/13/2021 thru 6/26/2021

Gross Wages	158,163.65
Accrual	2,000.00
FICA	11,522.08
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	3,014.69
Administration Fee	4,744.91

Sub-Total 205,550.41

Mileage	747.79
Reimbursements	380.00
New Employee Setup Fee	-
Credit-Air Evac	-
Credit-Patient Account	(371.92)
Credit-Dietary	(478.00)
Credit-Scrubs	(25.00)

Total Invoice: 205,803.28

1	Net pay to First Capital Bank	113,839.02
2	Balance To Legend Bank	91,964.26

02