

CB R.L.
MS JS

CCMH FOUNDATION

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

Invoice # 10202021
Invoice date: 10/20/2021
Check Date: 10/26/2021

Pay Period 10/3/2021 thru 10/16/2021

Gross Wages	161,388.00
Accrual	2,000.00
FICA	11,444.34
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,651.52
Administration Fee	4,841.64
Sub-Total	208,430.58

Mileage	319.99
Reimbursements	437.68
New Employee Setup Fee	-
Credit-Air Evac	-
Credit-Patient Account	(260.00)
Credit-Dietary	(596.00)
Credit-Scrubs	(31.25)

Total Invoice: 208,301.00

1	Net pay to First Capital Bank	118,702.46
2	Balance To Legend Bank	89,598.54

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