

② CB
RJ
JA

CCMH FOUNDATION

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

Invoice # 12152021
Invoice date: 12/15/2021
Check Date: 12/21/2021

Pay Period 11/28/2021 thru 12/11/2021

Gross Wages	176,562.33
Accrual	2,000.00
FICA	12,269.24
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,650.90
Administration Fee	5,296.87
Sub-Total	224,884.42

Mileage	290.60
Reimbursements	-
New Employee Setup Fee	-
Credit-Air Evac	-
Credit-Patient Account	(315.78)
Credit-Dietary	(531.00)
Credit-Scrubs	(368.55)

Total Invoice: 223,959.69

1	Net pay to First Capital Bank	131,850.30
2	Balance To Legend Bank	92,109.39