

Handwritten initials/signature
CB (100)

CCMH FOUNDATION

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

Invoice # 03232022
Invoice date: 3/23/2022
Check Date: 3/29/2022

Pay Period 3/6/2022 thru 3/19/2022

Gross Wages	187,382.73
Accrual	2,000.00
FICA	13,830.15
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,893.59
Administration Fee	5,621.48

Sub-Total 237,833.03

Mileage	348.91
Reimbursements	-
New Employee Setup Fee	-
Credit-Air Evac	-
Credit-Patient Account	(318.86)
Credit-Clinic Account	(25.00)
Credit-Dietary	(636.00)
Credit-Scrubs	(338.80)

Total Invoice: 236,863.28

1	Net pay to First Capital Bank	138,052.07
2	Balance To Legend Bank	98,811.21