

MM @ *JY*
CB R.L

CCMH FOUNDATION

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

Invoice # 11042022
Invoice date: 11/4/2022
Check Date: 11/8/2022

Pay Period 10/16/2022 thru 10/29/2022

Gross Wages	186,423.27
Accrual	2,000.00
FICA	13,677.22
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,811.01
Administration Fee	5,592.70
Sub-Total	236,609.28

Mileage	-
Reimbursements	500.00
New Employee Setup Fee	-
Credit-Air Evac	-
Credit-Patient Account	(475.00)
Credit-Clinic Account	-
Credit-Dietary	(898.00)
Credit-Scrubs	(520.49)

Total Invoice: 235,215.79

1	Net pay to First Capital Bank	137,910.00
2	Balance To Legend Bank	97,305.79