

*DR*  
*MM*

# CCMH FOUNDATION

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

Invoice # 12152022  
Invoice date: 12/15/2022  
Check Date: 12/20/2022

Pay Period 11/27/2022 thru 12/10/2022

Gross Wages	183,316.36
Accrual	2,000.00
FICA	13,106.03
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,648.67
Administration Fee	5,499.49
Sub-Total	232,675.63

Mileage	-
Reimbursements	704.13
New Employee Setup Fee	-
Credit-Air Evac	-
Credit-Patient Account	(500.00)
Credit-Clinic Account	-
Credit-Dietary	(849.00)
Credit-Scrubs	(26.76)

Total Invoice: 232,004.00

1	Net pay to First Capital Bank	136,462.07
2	Balance To Legend Bank	95,541.93

*DR*