

## **CCMH FOUNDATION**

Clay County Memorial Hospital Invoice # 03102023 310 West South Street Invoice date: 3/10/2023 Henrietta, Tx 76365 Check Date: 3/14/2023

## Pay Period 02/19/2023 thru 03/4/2023

Constant Manager	177 562 05
Gross Wages	177,563.85
Accrual	2,000.00
FICA	12,952.79
SUI	-
Workmen's Comp	1,361.54
Employee Benefits	24,743.54
401(k) contribution	2,572.75
Administration Fee	5,326.92
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Sub-Total	226,521.39
Mileage	3.90
Reimbursements	1,506.68
New Employee Setup Fee	-
Credit-Air Evac	(1,382.75)
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Credit-Patient Account	(467.50)
Credit-Clinic Account	-
Credit-Dietary	(854.00)
Credit-Scrubs	-

Total Invoice: 225,327.72

1 Net pay to First Capital Bank 131,456.63
2 Balance To Legend Bank 93,371.04

Laura Lee Brock, CPA

03.10.2023