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# Payroll Invoice

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

Invoice # 6012023  
Invoice date: 6/1/2023  
Check Date: 6/6/2023

Pay Period 5/14/2023 thru 05/27/2023

Gross Wages	184,487.56
FICA	13,612.61
Employee Benefits	26,940.01
401(k) contribution	2,498.00

Sub-Total 227,538.18

Mileage	-
Reimbursements	400.00

Credit-Air Evac	-
Credit-Patient Account	(417.50)
Credit-Dietary	(748.00)
Credit-Scrubs	(189.95)

Total Invoice: 226,582.73

*Laura Lee Brock, CPA*  
06.05.2023