

mc *CB* *28*

Payroll Invoice

October 2024

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

Invoice # 10182024
Invoice date: 10/18/2024
Check Date: 10/22/2024

Pay Period 09/29/2024-10/12/2024

Gross Wages	203,646.04
FICA	15,083.78
Employee Benefits	24,355.48
401(k) contribution	3,193.52

Sub-Total 246,278.82

Credit -Air Evac	-
Credit - Patient Account	(755.00)
Credit - Dietary	(802.00)
Credit -Scrubs	-
Credit - Memorial	(13.00)
Credit - Misc	(50.00)
Credit - Savings Club	(810.00)

Total Amount to transfer: 243,848.82

Laura Lee Brock

10-18-2024

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