

# Payroll Invoice

July 2025

*ML*  
*BO*  
*JP*

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

Invoice # 06272025  
Invoice date: 6/27/2025  
Check Date: 7/1/2025

Pay Period

06/08/2025-06/21/2025

Gross Wages  
FICA  
Employee Benefits  
SUI  
401(k) contribution

205,833.31  
14,189.91  
34,476.12  
149.09  
3,772.40

Sub-Total

258,420.83

Credit - Air Evac  
Credit - Patient Account  
Credit - Dietary  
Credit - Scrubs  
Credit - Memorial  
Credit - Misc

(748.00)  
(621.00)  
(419.97)  
(8.00)  
(1,458.95)

Total Amount to transfer:

255,164.91

*Laura Lee Brack*  
*6.30.2025*