## **Payroll Invoice**

Clay County Memorial Hospital

310 West South Street

Henrietta, Tx 76365

## October 2025

## REVISED

Invoice #

10172025

Invoice date:

10/17/2025

Check Date:

10/21/2025

-	Period
Day	Period

09/28/2025-10/11/2025

**Gross Wages** 

FICA

**Employee Benefits** 

SUI

401(k) contribution

225,934.54

15,100.08

30,745.25

295.15

3,200.81

Sub-Total

275,275.83

Credit -Air Evac

Credit - Patient Account

Credit - Dietary

Credit -Scrubs

Credit - Memorial

Credit - Misc

(483.02)

(737.00)

(368.78)

(8.00)

(150.00)

Total Amount to transfer:

273,529.03

Laura Les Potock
10-20-2025