

Your Logo

EMPLOYER NAME		EMPLOYEE ID		ISSUE DATE	
ADDRESS		BUSINESS UNIT		CHECK NO.	
		PAY GROUP		PAY PD BEGIN	
PHONE		BENEFITS DATE		PAY PD END	

EMPLOYEE INFORMATION		TAX TYPE	ALLOWANCES	ADD'L AMOUNT
EMPLOYEE NAME		FEDERAL		
ADDRESS		STATE		
		LOCAL		

PAY DESCRIPTION	HOURS	RATE	CURRENT PAY	YTD HOURS	YTD PAY
Regular					
Overtime					
Holiday					
Personal Day					
Vacation					
Sick Leave					
Family Leave of Absence (FMLA)					
Bonus					
CURRENT GROSS PAY				YTD TOTAL	

DEDUCTIONS	CURRENT	YTD
Federal Withholding		
Federal MED/EE		
Federal OASDI/EE		
State Withholding		
Other		
Other		
TOTALS		

TOTAL NET PAY	
CURRENT	
YTD	