PERIOD ENDING	TOTAL HOURS	REGULAR EARNINGS		OVERTIME EARNINGS		TOTAL EARNINGS		DEDUCTIONS FROM EARNINGS					NET PAID	
								FICA	MEDI.	WITHHOLDING TAX		OTHER		
										FEDERAL	STATE			
MONTHLY TOTAL														
MONTHLY TOTAL														
MONTHLY TOTAL														
TOTAL 1ST QUARTER														
MONTHLY TOTAL														
MONTHLY TOTAL														
MONTHLY TOTAL														
TOTAL 2ND QUARTER														
TOTAL SIX MONTHS														

NAME: _____ SSN: _____ PAY RATE: _____

ADDRESS: _____ EXEMPTION CLASS _____ YEAR: _____

_____

PERIOD ENDING	TOTAL HOURS	REGULAR EARNINGS		OVERTIME EARNINGS		TOTAL EARNINGS		DEDUCTIONS FROM EARNINGS					NET PAID	
								FICA	MEDI.	WITHHOLDING TAX		OTHER		
										FEDERAL	STATE			
MONTHLY TOTAL														
MONTHLY TOTAL														
MONTHLY TOTAL														
TOTAL 3RD QUARTER														
TOTAL NINE MONTHS														
MONTHLY TOTAL														
MONTHLY TOTAL														
MONTHLY TOTAL														
TOTAL 4TH QUARTER														
TOTAL 12 MONTHS														

NAME: _____ SSN: _____ EX CLASS _____ PAY RATE: _____