Payroll and Earnings Statement

Employer											
Employee Name						Employee Number					
Salary For The Period:											
Beginning											
Earnings											
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total Hours	Rate Per Hour	Total	
Regular Hours Worked											
Overtime Hours											
Non Cash Compensation											
Other Amounts Due – Commission, Special Allowances Etc.											
Total Wages Or Salary											
Gratuity / Tips Received directly By The Employee											
Total Earnings											
Tax Deductions											
FICA											
Federal Income Tax Withheld											
State Income Tax Withheld											
Less total Tax deductions											
Net earnings after deductions											
Other Deductions											
Non Cash Compensation.											
Gratuity / Tips Received directly By The Employee											
Total of all other deductions											
Paid in Cas	h \square or Ch	eck 🗌 or	Account Tr	ansfer \square or o	ther 🗌 – S	pecify		Net Amo	unt Due :		
I certify the correctness of the above calculations and acknowledge the receipt of the net amount due to me.											

_____ Date ___

Employee's Signature ____