EARNINGS STATEMENT

Employee Name		**SSN**	**Employee ID**	**Check No.**	**Pay Period**	**Pay Date**

Earnings	**Rate**	**Hours/Qty**	**Current**	**Deductions**	**Current**	**YTD**
Regular	$		$	**Federal Tax**	$	$
Overtime	$		$	**State Tax**	$	$
Bonus	$		$	**Disability**	$	$
	$		$	**OASDI (Soc. Sec.)**	$	$
	$		$	**Health Insurance**	$	$
	$		$		$	$

YTD Gross	**YTD Deductions**	**YTD Net Pay**	**Current Gross**	**Current Deductions**	**Net Pay**
$	$	$	$	$	$