## Bon Secours Mercy Health Inc 1701 Mercy Health Place Cincinnati, OH 45237 +1 (877) 6927780 Nikiria Rice 148 Cherry Hill Rd Laurens, SC 29360

Name		Company				Employe		Pay Period		Pay Perio	od End C	heck Date	Check Numb	er
Nikiria Rice			rs Mercy He	alth Inc		36	5661	12/0	1/2024	12/1	4/2024 1	2/20/2024		
		1 6	ours Worked		Gross Pay	d Dra	Tay D	eductions	Employ	ee Taxes	Post Tax Deduct	innsl	Net P	av
Current		1	86.25	000000000000000000000000000000000000000	3,110.0	A MALANGERSPHORE OF	I ON U	235.08	Linpio	560.61		4.25	2,310.	200000
			516.75		12,355.0			1.004.31		1,569.87		5.50	9,755.	
YTD			510.75	L	12,355.0	Ч		1,004.31		1,309.07		3.30	9,733.	23
Earnings											Employee Tax	kes		
Description [	Dates		Hours	Rate	Amount	YTD Ho	ours Y	TD Amount	Description	n		Amour	nt Y	ΓD
Holiday				0			8	160.00	OASDI			187.8		
Education Benefit N				0			0	2,880.00				43.9		
Overtime	12/01/2024 - 1	12/07/2024	1	30	30.00					Vithholding		222.5		
Overtime	12/08/2024 - 1	12/14/2024	5.25	43.81	230.01	30	0.25	980.01	State Tax	- SC		106.2	5 287.	.59
Regular	12/01/2024 - 1	12/07/2024	40	20	800.00									
Regular	12/08/2024 - 1	12/14/2024	40	20	800.00	48	86.5	9,730.00						
SignOn	12/08/2024 - 1	12/14/2024	0	0	1,250.00		0	1,250.00						- 1
Weather Time Off				0		11	1.75	235.00						_
Earnings					3,110.01			15,235.01	Employe	e Taxes		560.6	1 1,569.	.87
		D T D	-1							Dont Tr	x Deductions			
		Pre Tax De	eductions			\		• ••		Post 18	ix Deductions	A	V	TO
Description					Amount	YTD		ription				Amou		TD
403b - Fidelity EE Pre-tax				155.51	526.89	Child					1.3		.28	
Dental					13.03	78.18		Life AD&D I	Insurance			2.8	7 17.	.22
Health Savings Acco	ount				10.00	60.00								
Medical					52.00	312.00								
Vision					4.54	27.24	<u> </u>							_
Pre Tax Deductions	\$				235.08 1	,004.31	Post	Tax Deduction	ons			4.2	5 25.	.50
		Employer Pa	id Benefits							Taxa	able Wages			V 6.5
Description					Amount	YTD	Desc	ription				Amou	nt Y	TD
Life					1.19	8.33	OASI	DI - Taxable	Wages			3,030.4	4 11,877	.59
Health Savings Acco	ount (FR)				1.10	137.50	Medi	care - Taxabl	le Wages			3,030,4		
Medical.ER								Federal Withholding - Taxable Wages				2,874.9		
Employer Paid Ben	efite			····		.314.65		Tax Taxable				2,874.9	•	
Employer Fald Berr	icino				002.00 2	.,014.00	J L							
			Federa	AND DESCRIPTION OF THE PERSON NAMED IN		State				Abs	ence Plans			
Marital Status		Single or Married filing			Sir		Description Frozen Sick Bank Dollars		Accrued	Reduce		ble		
Allawanana			separatel			-					0		0	0
Allowances	ing			0		0		Floating Holi	day		0 4.62		0 30	).19
Additional Withholdi	ing			<u> </u>		U	PTO				4.62		0 30	. 19
					Pa	yment In	nformat	tion						
Bank		,	Account Name								USD Amount			
Wells Fargo Bank		[	Dailypay				***	***8050					2,310.07 U	JSD