



{{ company.title }}
{{ company.street }}
{{ company.city }}
Phone: {{ company.phone }}
Fax: {{ company.fax }}

Settlement
#{{ settlement.number }}
{{ settlement.date }}

Paid By	Check
{{ paid.date }}	{{ check.number }}

Owner Name: {{firstname}}{{lastname}} Truck: {{company}} #{{tag}} {{type}}: {{rate}}

Truck#	Trip#	Pickup	Drop-off	Rate	Net
{{tag}}	{{trip}}	{{ city }} {{ date }}	{{ city }} {{ date }}	{{ rate }}	{{ net }}
Total Payment:					{{amount.total}}

Deductions				
Date	Trip	Item	Info	Amount
{{date}}	{{trip}}	{{item}}	{{info}}	{{amount}}
Total Deductions:				{{amount.total}}

Reimbursements				
Date	Trip	Item	Info	Amount
{{date}}	{{trip}}	{{item}}	{{info}}	{{amount}}
Total Reimbursements:				{{amount.total}}

Scheduled Deductions			
Date	Item	Info	Amount
{{date}}	{{item}}	{{info}}	{{amount}}
Total Scheduled Deductions:			{{amount.total}}

Comments:
{{ comments sdfhk shdkf jashdkf jha s kdf jhaskjd
fhlk ash dfkljsa dfkjhas k f j hskldjfh kjsadhf kashfkh
askdfh askjd hfk lashed fksahd kfh sakdfhkl
asdjhf kasjd hfk asjd hfk ahklejbfaklj sbicj
aljelkjcbalkejblaksbdfkbal ajs klf asklf lkas eklf
lksebf laslkefuhl k jb fkdjb }}

Total Carrier Pay:	{{total pay}}
Total Net:	{{total net}}
Total All Deductions:	{{total deductions}}
Total Reimbursements:	{{ total reimbursements }}
YTD:	{{ ytd amount }}

Pay Balance:{{ pay amount }}