

{{ payer name }}

{{ payer street address }}

{{ payer city address }}

{{ payer phone number }}

{{ bank name }}

{{ bank street address }}

{{ bank city address }}

{{ bank phone number }}

{{cheque number}}

DATE

{{ date }}

PAY TO THE ORDER OF:

{{ payee name }}

\$ **{{ amount }}**

{{ english amount }} Dollars

{{ pay to the order of }}

{{ street }}

{{ city state zip }}

Memo:{{ memo }}

{{ date }}

Paid By

Check

{{date}}

{{number}}

Settlement #

{{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 askjdhfklashd fksahd kfh sakdfhkl asdjhfkasjd hflkasjd hflkahklejbfakljsbicj aljelkjc balkejblaksbdfkbal ajs klf asklf lkas eklf lksebf laskefuhlk 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 }}