FIRST.NAME	LAST.NAME	BIRTH.DATE	COMPANY.ID	MARITAL.STATUS
Terrionna	Traylor	03/04/1998	296	S
Jacqueline	Johnson	07/06/1971	296	S
David	Rosa	30/07/1987	296	S
Victor	Avina	11/11/1997	296	S
Karime	Urias	16/08/1994	296	S
Diamond	Seiuli	25/05/1995	296	S
Norma	Avila Rendon	02/05/1978	296	S
Ana	Cruz	26/07/1980	296	S
Yamel	Chong Villa	10/07/1994	296	S
Juan	Cervantes	20/01/1998	296	S

ZIP.CODE	CITY	GENDER	EMERGENCY.PHONE	SOC.SEC.NUM
92301	Adelanto	F	625-04-9761	625-04-9761
92308	Apple Valley	F	427-21-6535	427-21-6535
92394	Victorville	M	546-99-0094	546-99-0094
92407	San Bernardino	M	620-02-7970	620-02-7970
92376	Rialto	F	604-90-8851	604-90-8851
92404	San Bernardino	M	615-82-3967	615-82-3967
92551	Moreno Valley	F	602-19-2901	602-19-2901
92504	Riverside	F	625-64-6299	625-64-6299
92507	Riverside	F	797-42-1934	797-42-1934
92879	Corona	M	609-04-6070	609-04-6070

STATUS.CODE	TYPE.CODE			LOCATION.CODE
Α	F	SB Big Lots	mail	7188140
Α	F	SB Big Lots	mail	7188140
Α	F	SB Big Lots	mail	7188140
Α	F	SB G & B Fulfill	ment	7188189
Α	F	SB Sweet Harve	est	7188061
Α	F	SB Trak Motive		7188133
Α	F	Meiko		7188031
Α	F	Meiko		7188031
Α	F	SB Nogin		7188131
Α	F	Floor & Décor		7188083

JOB.CODE	ORIG.HIRE	LAST.HIRE	PEO.START.DT	EMPLOYEE.NO
8018	23/08/2022	23/08/2022	23/08/2022	625-04-9761
8018	01/02/2019	01/02/2019	01/02/2019	427-21-6535
8018	29/07/2021	29/07/2021	29/07/2021	546-99-0094
8018	22/08/2022	22/08/2022	22/08/2022	620-02-7970
8018	23/08/2022	23/08/2022	23/08/2022	604-90-8851
8018	25/08/2022	25/08/2022	25/08/2022	615-82-3967
8018	23/08/2022	23/08/2022	23/08/2022	602-19-2901
8018	23/08/2022	23/08/2022	23/08/2022	625-64-6299
8018	08/05/2019	08/05/2019	08/05/2019	797-42-1934
8018	22/08/2022	22/08/2022	22/08/2022	609-04-6070

WORK.PHONE   WORK.EXT   MAIL.ADDR.ONE   MAIL.ADDR.TWO   MAIL.CIT
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MAIL.STATE	MAIL.ZIP	SHIFT.CODE	PAY.METHOD	EXT.PAY.RATE
			Н	15
			Н	15
			Н	15
			Н	20
			Н	16
			Н	18.5
			Н	15
			Н	15
			Н	20
			Н	18

DISCONTINUED	STD HOURS	EIC.FILING.STATUS	FEDERAL.STATUS
	4	0	Н
	4	0	SS

FEDERAL.ALLOWS	EXTRA.FEDERAL	HOME.STATE STATUS
	!	Н
		S
		S
		S
		S
		S
		S
		S
		S
		S

HOME.STATE.ALLOWS	HOME.STATE.ADDITONAL.AMOUNT
	3
	0
	0
	0
EXEMPT	
	0
	5
	3
	0
	0

WORK.STATE.STATUS	WORK.STATE.ALLOWS

WORK.STATE.ADDITIONAL.AMOUNT   OFFICER   DEPT.CODE   TERM.DATE
--

TERM. CODE	EMAIL.ADDRESS	BENEFIT.GROUP	USER.FIELD.1	USER.FIELD.2
		1		
		1		
		1		
		1		
		1		
		1		
		1		
		1		
		1		
		1		

ALT CALC HOME STATE CODE	ALT CALC WORKSTATE CODE

1099 EMPLOYEE?	PAY.GROUP	DIVISION.CODE	PROJECT.CODE	AUTO.PAY
	WEEKLY			N

AUTO.PAY.HOURS

HOME.STATE.EXEMPT.AMOUNT

WORK.STATE.SECONDARY.ALLOWS

WS.SUPP.AMOUNT	PAY.PERIOD	VETERAN	NEWLY.SEPARATED.VET
	W		
	W		
	W		
	W		
	W		
	W		
	W		
	W		
	W		
	W		

SERVICE.MEDAL.VET	OTHER.PROTECTED.VET	I9.DOCUMENT.TITLE.A

I9.ISSUING.AUTHORITY.A   I9.EXPIRATION.DATE.A
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19.DOCUMENT.TITLE.B	19.DOCUMENT.NUMBER.B	I9.ISSUING.AUTHORITY.B

I9.EXPIRATION.DATE.B   ALIEN.REG.NO   FICA.EXEMPT   UNION.CODE	I9.EXPIRATION.DATE.B	ALIEN.REG.NO	FICA.EXEMPT	UNION.CODE
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SUPERVISOR.ID	BENE.THRU.DATE	SCHOOL.DISTRICT	AGRICULTURAL

HOME.PHONE.2 ALT.PAYRATE.1 ALT.PAYRATE.2 ALT.PAYRATE.3

ALT.PAYRATE.8 ALT.PAYRATE.9 ALT.PAYRATE.10 NEW.HIRE.RPT.DATE

23/08/2022
01/02/2019
29/07/2021
22/08/2022
23/08/2022
25/08/2022
23/08/2022
23/08/2022
23/08/2022
23/08/2022
22/08/2022

MAIL.CHECK.HOME W2.ADDRESS.ONE W2.ADDRESS.TWO W2.CITY W2.STATE

		l	
W2.ZIP.CODE	LICENSE.NUMBER	ILICENSE.EXPIRE.DATE	LICENSE.STATE
IVVZ.ZII .CODL	LICENSE.INGIVIDEN	ILICENSE.EXTINE.DATE	LICLINGLIGIATE

ALLOC.LOCATION.4   ALLOC.LOCATION.5   ALLOC.DIVISION.1   ALLOC.DIVISION.2
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ALLOC.DIVISION.3	ALLOC.DIVISION.4	ALLOC.DIVISION.5	ALLOC.DEPARTMENT.1
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ALLOC.DEPARTMENT.2	ALLOC.DEPARTMENT.3	ALLOC.DEPARTMENT.4
--------------------	--------------------	--------------------

ALLOC.PROJECT.3	ALLOC.PROJECT.4	ALLOC.PROJECT.5	ALLOC.JOBS.1

ALLOC.JOBS.2   ALLOC.JOBS.3   ALLOC.JOBS.4   ALLOC.JOBS.5
---

ALLOG DEDOENTS 4	ALLOG BEBOENITO A	LALLOG DED CENTEGO	
IALLOC.PERCENTS.1	IALLOC.PERCENTS.2	IALLOC.PERCENTS.3	
IALLOCA LINCLINISA	IALLOC: LINCLIN 13.2	IALLOCII LINCLINI 3.3	

ALLOC.PERCENTS.4	ALLOC.PERCENTS.5	ONHRP.ONBOARDED

HANDBK.RCD	LAST.REVIEW	NEXT.REVIEW	NICKNAME	WORK.EMAIL
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USE.ADDED.I9.VALUES

FED.W4.FILE FED.W4.YEAR FED.W5.FILE FED.W5.YEAR FORM.I9 I9.FROM.OB

I9.RENEW.DATE I9.START.DATE I9.LAST.NAME I9.FIRST.NAME

I9.MIDDLE.NAME I9.OTHER.NAME.USED I9.SSN I9.DOB I9.ELIG2.DOCMNT

BCKGRND.TEST.DONE FORM.C112.SIGNED PSD.CODE MULTIPLE.JOBS.FED

CLAIM.DEPENDENTS.FED	OTHER.INCOME.FED	DEDUCTIONS.FED
6000		
500		
C		
C		
EXEMPT		
C	1	
10000	1	
6000	1	
C	1	
C	1	

WS.MULTIPLE.JOBS	WS.CLAIM.DEPENDENTS	WS.OTHER.INCOME
I W 3. IVIUL I IPLE. JUD3	IWS.CLAIIVI.DEPENDENTS	IVV3.OTHER.INCOIVIE

WS.DEDUCTIONS	HS.MULTIPLE.JOBS	HS.CLAIM.DEPENDENTS

HS.OTHER.INCOME	HS.DEDUCTIONS			
I 13.0 I I LIV.II VCOIVIL	III3.DEDUCTIONS	1		