

WJE Diagnostic Laboratory

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FINAL PAY SLIP

Employee Name: Department: Position/Status:		Employee ID No.: Date Hired: Date Separated:			
Earnings:		Deductions:		Deducted	Unpaid
TOTAL	0.00	TOTAL		0.00	0.00
NET PAY	0.00				
NEIFAI	0.00				
Prepared by:	Noted by:		Approved by	:	
		Department Head		Division	Head