



Employee Name:
Department:
Position/Status:

Employee ID No.:
Date Hired:
Date Separated:

Earnings:		Deductions:	Deducted	Unpaid
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TOTAL	0.00	TOTAL	0.00	0.00

NET PAY **0.00**

Prepared by: _____ Noted by: _____ Approved by: _____
 _____ Department Head _____ Division Head