CO. CLOCK VCHR. NO. 076 FILE DEPT. **XWW** 105996 000159 WOB

0000450141

MORRISON CHILD AND FAMILY SERVICES 11035 NE SANDY BLVD PORTLAND,OR 97220 COMPANY PH#: 503-258-4231

Taxable Marital Status: Single Exemptions/Allowances: Federal:

OR:

Earnings Statement



Period Beginning: 10/16/2018 Period Ending: 10/31/2018 Pay Date: 11/07/2018

> **DEVIN J MOUNTS** 4830 NE 11TH AVE PORTLAND OR 97211

Earnings	rate	hours	this period	year to date
Regular	15.4100	24.50	377.55	
Park/Pub Trans				637.50
Vac Pay Out				555.62
	Gross Pay		\$377.55	15,867.49
Deductions	Statutory			
	Social Security	/ Tax	-23.40	947.62
	Medicare Tax		-5.47	221.62
	OR State Inco	me Tax	-8.69	894.48
	OR Transit Ta	ıx	-0.38	0.92
	Oregon Wbf T	ax	-0.34	
	Federal Incom	e Tax		1,007.83
	Other			
	Metlife			38.50
	Vision Plan			41.58
	Net Pay		\$339.27	
	Checking		-339.27	
	Net Check		\$0.00	

Your federal taxable wages this period are \$377.55

Other Benefits and

Information	this period	total to date
Portland Sick	_	4.00
Sck		0.00
Vac		0.00

Important Notes

YOUR COMPANY'S PHONE NUMBER IS 503-258-4231

OREGON BUSINESS ID NUMBER: 0555595-4

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MORRISON CHILD AND FAMILY SERVICES 11035 NE SANDY BLVD

PORTLAND, OR 97220

COMPANY PH#: 503-258-4231

Advice number:

00000450141

11/07/2018

account number

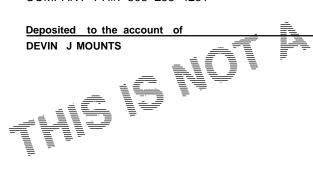
transit ABA

amount

xxxxxxxx8196

XXXX XXXX

\$339.27



NON-NEGOTIABLE