



Federal Allowance	0
FIT Additional:	\$200.00
FIT:	
Medicare:	

**Pay Period:** 23  
**Pay Period Start:** 10/26/2020  
**Pay Period End:** 11/08/2020  
**Check Date:** 11/13/2020

**TIN: 93-1176109**

**(503) 494-8103**

Deposit Date	Deposit Amount
11/13/2020	\$1,911.70

**Account Number:** XXXX5578

DEPOSITED TO THE Kyle D Hart  
ACCOUNT OF: Distribution Center: CDW 130  
Check Delivery Code: EMER-MED

## NON-NEGOTIABLE

**DIRECT DEPOSIT VOUCHER NON-NEGOTIABLE**

