

PAYROLL PRE-TAX DEDUCTION & WITHHOLDING SCHEDULE

Employee Benefit Allocations & Taxable Wage Adjustments

COMPANY NAME:

PAY PERIOD BEGIN:

EMPLOYEE NAME:

PAY PERIOD END:

EMPLOYEE ID:

CHECK DATE:

1. AUTHORIZED PRE-TAX DEDUCTIONS (SECTION 125 & QUALIFIED PLANS)

DEDUCTION DESCRIPTION	PRE-TAX AMOUNT (\$)	EMPLOYER MATCH (\$)	FREQUENCY	ACCOUNT/POLICY NUMBER
Medical Insurance Premium				
Dental Insurance Premium				
Vision Insurance Premium				
Health Savings Account (HSA)				
Flexible Spending Account (FSA)				
401(k) / 403(b) Retirement Plan				
Dependent Care Assistance				
Qualified Commuter Benefits				
Group Term Life Insurance (Up to \$50k)				
Other:				
TOTAL PRE-TAX DEDUCTIONS				

2. TAXABLE WAGE CALCULATION

Gross Earnings This Period	
Less: Total Pre-Tax Deductions (Section 1)	
Adjusted Taxable Gross Earnings	

3. STATUTORY WITHHOLDING TAXES

Federal Income Tax Withholding	
Social Security Tax (FICA)	
Medicare Tax (FICA)	

State Income Tax Withholding	
Local / City Tax Withholding	
Net Pay Calculation	

EMPLOYEE SIGNATURE

Date: _____

AUTHORIZED PAYROLL OFFICER SIGNATURE

Date: _____