

EMPLOYEE SUI DEDUCTION & PAYROLL RECONCILIATION

State Unemployment Insurance (SUI) Tracking Sheet

COMPANY NAME _____

SUI STATE ACCOUNT NUMBER _____

STATE _____

PAYROLL PERIOD (START - END) _____

PAY DATE _____

EMPLOYER SUI RATE (%) _____

Employee ID	Employee Name	Gross Wages	Exempt/Excess Wages	Subject SUI Wages	EE SUI Tax (If Applicable)	ER SUI Liability
Totals:						

SUI Liability Reconciliation

Total Subject SUI Wages _____

Employer SUI Tax Rate _____

Calculated Employer SUI Liability _____

Actual Employer SUI Liability (Per Register) _____

Variance (Discrepancy) _____

Employee Deduction Reconciliation

Total Employee SUI Withheld _____

Total Employer SUI Liability _____

Total SUI Remittance Amount Due _____

Prepared By (Signature / Date)

Approved By (Signature / Date)