TERMINATION PAYROLL STATEMENT

EMPLOYER INFORMATION

Company Name

Address

Phone

Email

EMPLOYEE INFORMATION

Employee Name

Employee ID

Job Title

Department

EMPLOYMENT & TERMINATION DATES

Hire Date

Termination Date

Final Pay Period From

Final Pay Period To

EARNINGS & TERMINATION PAY

Description	Hours	Rate	Total Amount
Regular Hours Worked			
Overtime Hours			
Accrued Vacation Pay Out			
Severance Pay			
Payment in Lieu of Notice			
Bonuses / Commissions			
Other:			
		Gross Earnings	

DEDUCTIONS

Description	Amount
Income Tax	
Social Security / Pension Contribution	
Health Insurance / Benefits Adjustment	
Company Property Non-Return Charges	
Other:	
Total Deductions	

Gross Earnings:	
(-) Total Deductions:	
NET TERMINATION PAY:	

Employer Representative Signature

Date:

Employee Signature (Acknowledgment of Receipt)

Date: