

RETIREMENT FUND PAYROLL CONTRIBUTION STATEMENT

EMPLOYER INFORMATION

Company Name

Plan Name

Plan ID / ID Number

STATEMENT PERIOD

Pay Period Start

Pay Period End

Contribution Date

EMPLOYEE INFORMATION

Employee Name

Employee ID

SSN (Last 4 Digits)

Department

CONTRIBUTION BREAKDOWN

PAY DATE	GROSS EARNINGS	EMPLOYEE PRE-TAX (\$ OR %)	EMPLOYEE ROTH (\$ OR %)	EMPLOYER MATCH (\$)	TOTAL CONTRIBUTION (\$)
Total					

Prepared By (Authorized Representative Signature)

Date

Approved By (Plan Administrator Signature)

Date

This document serves as an official record of retirement fund payroll contributions.