

# STATUTORY PAYROLL DEDUCTIONS & WITHHOLDING STATEMENT

## STATEMENT OF EARNINGS AND LEGAL DEDUCTIONS

<b>EMPLOYER NAME:</b>
<b>FEDERAL EIN:</b>
<b>STATE TAX ID:</b>
<b>PAY PERIOD BEGIN:</b>
<b>PAY PERIOD END:</b>
<b>PAYMENT DATE:</b>

  

<b>EMPLOYEE NAME:</b>
<b>SSN / TAX ID:</b>
<b>FILING STATUS:</b>
<b>EXEMPTIONS/ALLOW:</b>
<b>PAY RATE:</b>
<b>JOB TITLE:</b>

EARNINGS DESCRIPTION	HOURS/UNITS	CURRENT AMOUNT
Regular Wages / Salary		
Overtime Wages		
Bonuses / Commissions		
Other Gross Taxable Earnings		
<b>Total Gross Earnings (A)</b>		

STATUTORY DEDUCTIONS & TAXES WITHHELD	CURRENT AMOUNT
Federal Income Tax (FIT) Withholding	
Social Security Tax (FICA-OASDI) - Employee Portion	
Medicare Tax (FICA-HI) - Employee Portion	
State Income Tax (SIT) Withholding	
State Disability Insurance (SDI) / Family Leave Insurance	
Local / Municipal Income Tax Withholding	
Other Legal/Court-Ordered Garnishments	
<b>Total Statutory Deductions (B)</b>	

NET PAY CALCULATION	CURRENT AMOUNT
Total Gross Earnings (A)	
Less: Total Statutory Deductions (B)	

NET PAY CALCULATION	CURRENT AMOUNT
Net Pay Disbursement (A - B)	

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AUTHORIZED EMPLOYER REPRESENTATIVE SIGNATURE

Date:

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EMPLOYEE SIGNATURE (ACKNOWLEDGMENT OF RECEIPT)

Date:

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