

PAYROLL STATEMENT

Statement Date: _____
Pay Period: _____
Payment Method: _____

EMPLOYEE INFORMATION

Employee Name:
Employee ID:
Department:
Job Title:
Tax ID / SSN:

PAYMENT ACCOUNT DETAILS

Bank Name:
Account Number:
Routing Number:
Account Type:
Transaction ID:

Earnings	Amount
Basic Salary
Overtime Pay
Bonuses
Allowances
Gross Earnings

Deductions	Amount
Income Tax
Social Security / Pension
Health Insurance
Other Deductions
Total Deductions

Total Earnings:

Total Deductions:

NET PAY:

PREPARED BY

AUTHORIZED SIGNATURE