FINAL PAYCHECK STATEMENT

Payroll Statement of Final Wages & Deductions Upon Separation

EMPLOYER INFORMATION

Company Name:

Address:

Phone:

Email:

EMPLOYEE & PAY INFORMATION

Employee Name:

Employee ID:

Separation Date:

Final Pay Date:

EARNINGS DETAIL

DESCRIPTION	HOURS / UNITS	RATE	TOTAL AMOUNT
Regular Hours			
Overtime Hours			
Accrued PTO / Vacation Cash-Out			
Severance Pay			
Other:			
Gross Earnings			

DEDUCTIONS & TAXES DETAIL

DESCRIPTION	TOTAL AMOUNT
Federal Income Tax	
State Income Tax	
Social Security Tax (FICA)	
Medicare Tax	
Health/Dental/Vision Insurance Deduction	
Retirement Contribution (401k, etc.)	
Other (Equipment Non-Return, Advances, etc.):	
Total Deductions	

TOTAL GROSS EARNINGS

TOTAL DEDUCTIONS

NET PAYCHECK AMOUNT

Authorized Employer Representative Signature

Date: _____

Employee Signature (Acknowledgment of Receipt)

Date: _____