

CUMULATIVE EARNINGS STATEMENT

Employee Name
Employee ID
Tax Identification Number
Department / Division
Statement Date
Cumulative Period Start
Cumulative Period End
Status

Earnings Breakdown

EARNINGS TYPE	CURRENT PERIOD VALUE	CUMULATIVE TO DATE VALUE
Base Salary / Hourly Wages		
Overtime Earnings		
Bonuses / Incentives		
Commissions		
Allowances / Reimbursements		
Gross Earnings Total		

Deductions Breakdown

DEDUCTION TYPE	CURRENT PERIOD VALUE	CUMULATIVE TO DATE VALUE
Statutory Income Tax Deductions		
Social Security / Pension Deductions		
Health Insurance Contribution		
Voluntary / Post-Tax Deductions		
Total Deductions		

Summary Net Balance

Net Cumulative Take-Home Pay

Historical Cumulative Summary by Fiscal Period

FISCAL PERIOD / YEAR	TOTAL GROSS EARNINGS	TOTAL DEDUCTIONS DEDUCTED	TOTAL NET PAID

Prepared By (Authorized Representative Signature)

Acknowledged By (Employee Signature)