EMPLOYEE EARNINGS RECORD

NAME (LAST)	FIRST	MIDDLE		EMP ID#	# EXEMPTIONS		SOCIAL SECURITY #	
ADDRESS			CITY			STATE		ZIP

		ATE		EAR	NINGS			TAXES		DED	UCTIONS	
QUARTER	REGULAR	О.Т.	REGULAR).Т.		FICA	W.H.				DATE EMPLOYE
	HOURS	WORKED		EAR	NINGS			TAXES		DEDUC	TIONS	
PAY PERIOD		О.Т.	REGULAR	О.Т.		TOTAL	FICA	W.H.				NET PAY
QUARTE	-R	T	ΟΤΔΙ									