** ZERO **

12/13/2016 $0.00

VIEW-XXXXXXXXXXXXXXXXXXXXX A SAMPLE-XXXXXXXXXXXXXXXXXXXXX
PO Box 10372
Napa CA 94581

SAMPLE-XXXXXXXXXXXXXXXXXXXX, VIEW-XXXXXXXXXXXXXXXXXXXX

Check Date	12/13/2016
Check Number	54321
Period End	12/13/2016
Pay Frequency	Semimonthly

SSN	XXX-XX-9999
Status	Fed: Married ST: Single
Allowances	Fed: 1 ST: 2
Additional Fed WH	11
Additional ST WH	22

Dept 1 Pay Rate	15.00
Dept 1 OT Rate	22.50

Dept 2 Pay Rate	12.750
Dept 2 OT Rate	19.125

Dept 1 Reg Hrs	0.00
Dept 1 OT Hrs	0.00
Dept 1 Reg Pay	0.00
Dept 1 OT Pay	0.00
Dept 1 Bonus	0.00
Dept 1 Inc Adj	99999.99
Dept 1 Inc Adj	99999.99
Dept 1 Tips Decl	0.00
Dept 1 Sick Pay	0.00
Dept 1 Inc Adj	99999.99
Dept 1 Inc Adj	99999.99

Dept 2 Reg Hrs	0.00
Dept 2 OT Hrs	0.00
Dept 2 Reg Pay	0.00
Dept 2 OT Pay	0.00

Total Pay	**0.00**
Sect 125	0.00
Cafeteria	0.00
Ded's	0.00
Total Ded	**0.00**
Net Pay	**0.00**
Auto Allow	0.00
Exp Reimb	0.00
Amt Paid	**0.00**

PTO	Sick Pay	PTO-B
Used	1111.11	1111.11
Avail	222.22	222.22
Bal	(666.67)	(666.67)

	CURRENT	YEAR
Total Pay	0.00	0.00
Sec 125	0.00	0.00
Gross Pay	**0.00**	**0.00**
Soc Sec	0.00	0.00
Medicare	0.00	0.00
Fed WH	0.00	0.00
ST WH	0.00	0.00
CA SDI	0.00	0.00
Local WH1	0.00	0.00
Fixed Ded1	0.00	0.00
Garnish	0.00	0.00
Tips Ded	0.00	0.00
PA UI	0.00	0.00
Retirement	0.00	0.00
Misc Ded 6	0.00	0.00
Misc Ded 7	0.00	0.00
Misc Ded 8	0.00	0.00
Net Pay	**0.00**	**0.00**

2017.10, 750L, 0 HL - xxxxxxxxxxxxxxxxx
Memo to all employees - Prints herexxxxxxxxxxxxxxxx