

COMPANY NAME CITY, STATE, ZIP

000001

EMPLOYEE		SOCIAL SECURITY NO.		PAY RATE	PERIOD END.	CHECK NO.
EARNINGS	HOURS	AMOUNT	YTD	DEDUCTION	AMOUNT	YTD
GROSS EARNINGS:				TOTAL DEDUCT:		
NET EARNINGS:						

COMPANY NAME CITY, STATE, ZIP

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EARNINGS	HOURS	AMOUNT	YTD	DEDUCTION	AMOUNT	YTD
GROSS EARNINGS:				TOTAL DEDUCT:		
NET EARNINGS:						

Form# 105CM

THIS CHECK IS PROTECTED BY A VOID PANTOGRAPH, MICROPRINT SIGNATURE LINE AND A HEAT SENSITIVE PADLOCK ICON. ADDITIONAL SECURITY FEATURES ARE LISTED ON BACK.

COMPANY NAME
STREET ADDRESS
CITY, STATE, ZIP
PHONE NUMBER

BANK NAME
CITY, STATE ZIP

ABA
FRACTION

000001

PAY

DATE

AMOUNT

TO THE
ORDER
OF

AUTHORIZED SIGNATURE



⑈00000 1⑈ ⑆0000000000⑆ 0000000000⑈