COMPANY NAME CITY, STATE, ZIP

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

Your Custom Logo Here

STREET ADDRESS
CITY, STATE, ZIP
PHONE NUMBER

BANK NAME
CITY, STATE ZIP

ABA
FRACTION

000001

PAY

DATE

AMOUNT

TO THE
ORDER
OF

COMPANY NAME

⑈000001⑈ ⑆123456789⑆ 876543210⑈

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:					

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