

COMPANY NAME CITY, STATE, ZIP CODE
EMPLOYEE # EMPLOYEE NAME

000001

SSN

TYPE	PAY			TAXES WITHHELD	DEDUCTIONS	YEAR TO DATE
	RATE	HOURS	EARNINGS			
				F.I.C.A.		EARNINGS
				FEDERAL		F.I.C.A. W/H
				STATE		FED. W/H
						STATE W/H
						LOCAL W/H
PAY PERIOD		TOTAL	TOTAL	TOTAL	TOTAL	NET PAY

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 CODE

000001

ABA
FRACTION

PAY

AMOUNT

TO THE
ORDER OF

DIRECT DEPOSIT ADVICE SLIP
NON-NEGOTIABLE



COMPANY NAME CITY, STATE, ZIP CODE

000001