

Demo Fire District

Payroll Journal: 01/21/2018-02/03/2018 (Dated:02/02/2018)

Employee, 1

xxx-xx-1111 MS: 2 EX: 0 RP: 1,642.34

	Gross	Net	Regular	Overtime	Other				
Hours Pays	1,642.34	859.77	80 1,642.34	0 0.00	0.00				
Hours Pays									Blank Area
Withhold	Fed. Tax	NYS Tax	Loc. Tax	FICA	Medicare	Health	Dental	Dif.Comp	Disability
	492.70	164.23	0.00	101.83 101.83	23.81	0.00	0.00	0.00	0.00
Withhold	Pension	Pen. Loan	Pen. Arrears	1.00			Gar/Misc	Union	Roth
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Earned Used	Sick	Vacation	Personal	Comp	Holiday	Blank Area	Family Leave		
	0.00	0.00	0.00	0.00	0.00		0.00		
	0.00	0.00	0.00	0.00	0.00		0.00		

Total

	Gross	Net	Regular	Overtime	Other				
TIHours Pays	1,642.34	859.77	80.00 1,642.34	0.00 0.00	0.00	0.00	0.00	0.00	0.00
TIHours	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Withhold	Fed. Tax	NYS Tax	Loc. Tax	FICA	Medicare	Health	Dental	Dif.Comp	Disability
	492.70	164.23	0.00	101.83	23.81	0.00	0.00	0.00	0.00
Withhold	Pension	Pen. Loan	Pen. Arrears	1.00			Gar/Misc	Union	Roth
	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Family Leave								
	0.00								

FTD:	TLFedTax	FedIncTax	FICA	Medicare	MTA	# Employees	Days
	743.98	492.70	203.66	47.62	5.58	1 \ 3	14

This foregoing report is true and correct:

Employee	101.83
Employer	101.83

Treasurer	Date	Authorized Processor	Date
		<u>Commissioners</u>	