

Company Address Here

**TAXABLE MARITAL STATUS:** Single

## EMPLOYEE EARNINGS STATEMENT

**PERIOD ENDING: 02/25/2025 - 03/03/2025**

**PAY DATE :** 03/05/2025

**EMPLOYEE ID : 025145**

**CONTROL #:** 25234116

**Employee Name Here**

Employee Address Here

**SOCIAL SECURITY NUMBER:** XXX-XX-1234

EARNINGS	RATE	HOURS	THIS PERIOD	YEAR TO DATE	DEDUCTIONS	STATUTORY	THIS PERIOD	YEAR TO DATE
REGULAR	\$11.00	40.00	\$540.00	\$3,960.00		MEDICARE TAX	\$7.83	\$70.47
OVERTIME	\$20.00	5.00	\$100.00			SOCIAL SECURITY TAX	\$33.48	\$301.32
HOLIDAY	\$0.00	0.00	\$0.00			FEDERAL INCOME TAX	\$65.22	\$586.98
VACATION	\$0.00	0.00	\$0.00			STATE TAX W/H	\$38.88	\$349.92
BONUS	\$0.00	0.00	\$0.00			DEDUCTION TOTAL	\$145.41	\$1,308.69
FLOAT	\$0.00	0.00	\$0.00					
GROSS PAY			\$540.00	\$4,860.00	NET PAY \$394.59			\$3,551.31