

SNELLING PAYROLL SERVICES
2222 Indiana Avenue
Lubbock, TX 79410

Confidential For: Jane Doe
A Sample Company

Grand Prairie, TX 75052

Payroll Contact: @ (972)

(26) **Delivery Method:** Pickup - Call

Reports Included in your Package (If Applicable)

- ▶ Tax Deposit Liabilities & Due Dates
- ▶ Payroll Register
- ▶ Special Checks Register
- ▶ Payroll Register Totals
- ▶ Payroll UI Totals
- ▶ Department Register
- ▶ General Ledger Detail Register
- ▶ General Ledger Summary Register
- ▶ Deduction Register
- ▶ Payroll Worksheet
- ▶ Payroll Checks
- ▶ Special Checks
- ▶ Tax Check

Pay Period: Weekly 11/01/06 - 11/07/09	<i>Division (0) - Central</i>	Check Date: 11/11/09
Co. No.: 26 A Sample Company	PAYROLL LABEL REPORT	Payroll Number: 6

Current Payroll Tax Liabilities

***** To-Date Tax Liabilities (Please Read) *****

Basic Company Information

A Sample Company
Grand Prairie, TX 75052
Company No: 26

Payroll Dates

Check Date: **11/11/09**
(1) Period Start Date: **11/01/06**
(1) Period End Date: **11/07/09**

Federal Deposit Freq.: **SEMI-WEEKLY**
Federal Deposit Method: **Normal**

Payroll Statistics

No. of PR Checks:	9	Total Check Net:	\$3,798.24
No. of Misc Checks:	2	Total Misc. Net:	\$214.00
No. of Tax Checks:	1		
No. of Adj. Entries:	0	Total Adj. Net:	\$0.00
No. of Void Entries:	0	Total Void Net:	\$0.00
No. of DD Vouchers:	0	Total PR Net:	\$4,012.24
Total PR Gross:	\$5,020.44		
		Bank Deposit:	\$5,102.79

Federal Tax Section

Federal Tax Deposit Liability (941)

Federal Withholding Tax	\$365.39
Earned Income Credit	(\$27.04)
Social Security (Employer Portion)	\$304.81
Social Security (Employee Portion)	\$304.81
Medicare (Employer Portion)	\$71.29
Medicare (Employee Portion)	\$71.29
Cobra Premium Assistance Credit	\$0.00
Total PR Federal 941 Liability	\$1,090.55

Total Unpaid 941 Liability -- DUE

\$1,090.55

Make a payment for this amount DUE by 11/18/2009 (Included for payment Check No: 1042)

Quarter / Year : 4-2009

Tax Type: 941

Federal Unemployment Liability (940)

Federal Unemployment Tax (FUTA)	\$39.33
Total PR Federal 940 Liability	\$39.33

Texas Tax Section

Texas Unemployment Liability

State Unemployment Tax (SUTA)	\$25.10
Smart Jobs Assessment Tax	\$5.02
Total TX PR SUTA Liability	\$30.12

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

PAYROLL LIABILITY REPORT

Payroll Number: 6

Page: A - 1

Employee Name (State for)			Dept. No.	Pays						Taxes			Deductions & Memos			Chk. No.	
Emp. No.	SSN No.	UCI		Current			Year-to-Date			Tax	Current	YTD	Deduction	Current	YTD	Type	
Pay Freq.	Tax Status			Description	Rate	Hours	Pay	Description	Hours	Amount	Description	Amount	Amount	Description	Amount	Amount	Net Pay
Division : 0 Central																	
1	Adams, John D.		1	0-Regular Pay	10.00	40.00	400.00	0-Regular Pay	40.00	400.00	Federal WH	5.65	5.65	1-Child Support	75.00	75.00	001031
	111-11-1111	TX									OASDI	23.87	23.87	2-CAF Medical	10.00	10.00	NORMAL
	Weekly	Fed: Single	2								Medicare	5.58	5.58	3-CAF Dental	5.00	5.00	
		TX N/A									EIC	(27.04)	(27.04)	4-401K Plan	50.00	50.00	
	Employee Totals			Totals:		40.00	400.00	Total YTD:	40.00	400.00		8.06			140.00		251.94
2	Watts, Frank		1	0-Regular Pay			950.00	0-Regular Pay		950.00	Federal WH	83.30	83.30	2-CAF Medical	20.00	20.00	001033
	222-22-2222	TX									OASDI	56.67	56.67	3-CAF Dental	16.00	16.00	NORMAL
	Weekly	Fed: Married	0								Medicare	13.25	13.25				
	Employee Totals			Totals:			950.00	Total YTD:		950.00		153.22			36.00		760.78
3	Brown, Tom		2	0-Regular Pay	9.50	40.00	380.00	0-Regular Pay	40.00	380.00	Federal WH	21.01	21.01	2-CAF Medical	5.00	5.00	001034
	333-33-3333	TX									OASDI	22.88	22.88	3-CAF Dental	6.00	6.00	NORMAL
	Weekly	Fed: Single	1								Medicare	5.35	5.35	5-Declining Loan	25.00	25.00	
	Employee Totals			Totals:		40.00	380.00	Total YTD:	40.00	380.00		49.24			36.00		294.76
9	Morris, Julie		3	0-Regular Pay	2.13	32.13	68.44	0-Regular Pay	32.13	68.44	Federal WH	5.00	5.00				001035
	999-99-9999	TX	3	5-Cash Tips	2.13		164.50	5-Cash Tips		164.50	OASDI	14.44	14.44				NORMAL
	Weekly	Fed: Single	3								Medicare	3.38	3.38				
	Employee Totals			Totals:		32.13	232.94	Total YTD:	32.13	232.94		22.82					45.62
Division : 1 Northwest																	
4	Brown, Jill		1	0-Regular Pay			650.00	0-Regular Pay		650.00	Federal WH	70.77	70.77	4-401K Plan	19.50	19.50	001036
	444-44-4444	TX									OASDI	40.30	40.30				NORMAL
	Weekly	Fed: Single	0								Medicare	9.43	9.43				
	Employee Totals			Totals:			650.00	Total YTD:		650.00		120.50			19.50		510.00
7	Green, Eddie		1	0-Regular Pay	15.00	40.00	600.00	0-Regular Pay	40.00	600.00	Federal WH	67.29	67.29	2-CAF Medical	25.00	25.00	001037
	777-77-7777	TX	1	OverTime Pay	22.50	3.00	67.50	3-Bonus Pay		50.00	OASDI	42.01	42.01	3-CAF Dental	15.00	15.00	NORMAL
	Weekly	Fed: Single	1	3-Bonus Pay	0.00		50.00	OverTime Pay	3.00	67.50	Medicare	9.82	9.82				
	Employee Totals			Totals:		43.00	717.50	Total YTD:	43.00	717.50		119.12			40.00		558.38
6	Black, Elizabeth G.		2	0-Regular Pay			700.00	0-Regular Pay		700.00	Federal WH	40.67	40.67				001038
	666-66-6666	TX									OASDI	43.40	43.40				NORMAL
	Weekly	Fed: Married	1								Medicare	10.15	10.15				
	Employee Totals			Totals:			700.00	Total YTD:		700.00		94.22					605.78
5	Carson, Dawn E.		2	0-Regular Pay	8.50	40.00	340.00	0-Regular Pay	40.00	340.00	Federal WH	0.93	0.93	2-CAF Medical	2.25	2.25	001039
	555-55-5555	TX									OASDI	20.94	20.94	4-401K Plan	50.00	50.00	NORMAL
	Weekly	Fed: Single	2								Medicare	4.90	4.90				
	Employee Totals			Totals:		40.00	340.00	Total YTD:	40.00	340.00		26.77			52.25		260.98
8	Jones, Susan R.		2	0-Regular Pay			650.00	0-Regular Pay		650.00	Federal WH	70.77	70.77	4-401K Plan	19.50	19.50	001040
	888-88-8888	TX									OASDI	40.30	40.30				NORMAL
	Weekly	Fed: Single	0								Medicare	9.43	9.43				
	Employee Totals			Totals:			650.00	Total YTD:		650.00		120.50			19.50		510.00

Check Type	Payee Name	Employee Number	Deduction	Check No.	Amount
	Check Date	Employee Name			
Division : 0 Central					
Employee Deduction Check	Child Support Agency	1	1-Child Support	001032	
	11/11/2009 12.00.00 AM	Adams, John			\$75.00
Memo:	**** Case #1234-23512 ****				
Company Deduction Check	Company 401K Check		4-401K Plan	001041	
	11/11/2009 12.00.00 AM	,			\$139.00
Memo:					
Federal 941 Tax Check	Any Bank USA			001042	
	11/11/2009 12.00.00 AM				\$1,090.55
Memo:	This 941 Tax Deposit for Quarter 4 is due on 11/18/09				
				Total Div Amount:	\$1,304.55
				Grand Total:	\$1,304.55

SPECIAL CHECKS REGISTER

Pay and Deduction Descriptions	Current Payroll		Month to Date		Quarter to Date		Year to Date	
	Hours	Dollars	Hours	Dollars	Hours	Dollars	Hours	Dollars
Overall Company Totals								
Pays:								
Regular Pay	192.13	4,738.44	192.13	4,738.44	192.13	4,738.44	192.13	4,738.44
OverTime Pay	3.00	67.50	3.00	67.50	3.00	67.50	3.00	67.50
3-Bonus Pay	0.00	50.00	0.00	50.00	0.00	50.00	0.00	50.00
5-Cash Tips	0.00	164.50	0.00	164.50	0.00	164.50	0.00	164.50
Total Gross Pay	195.13	5,020.44	195.13	5,020.44	195.13	5,020.44	195.13	5,020.44
Federal Tax Deductions:								
Federal Withholding (W/H)	0.00	365.39	0.00	365.39	0.00	365.39	0.00	365.39
Medicare	0.00	71.29	0.00	71.29	0.00	71.29	0.00	71.29
OASDI	0.00	304.81	0.00	304.81	0.00	304.81	0.00	304.81
EIC	0.00	(27.04)	0.00	(27.04)	0.00	(27.04)	0.00	(27.04)
Total Federal Tax Deduction	0.00	714.45	0.00	714.45	0.00	714.45	0.00	714.45
Other Deductions:								
1-Child Support	0.00	75.00	0.00	75.00	0.00	75.00	0.00	75.00
2-CAF Medical	0.00	62.25	0.00	62.25	0.00	62.25	0.00	62.25
3-CAF Dental	0.00	42.00	0.00	42.00	0.00	42.00	0.00	42.00
4-401K Plan	0.00	139.00	0.00	139.00	0.00	139.00	0.00	139.00
5-Declining Loan	0.00	25.00	0.00	25.00	0.00	25.00	0.00	25.00
Total Other Deduction	0.00	343.25	0.00	343.25	0.00	343.25	0.00	343.25
Net Pay	0.00	3,798.24	0.00	3,798.24	0.00	3,798.24	0.00	3,798.24

Pay and Deduction Descriptions	Current Payroll		Month to Date		Quarter to Date		Year to Date	
	Hours	Dollars	Hours	Dollars	Hours	Dollars	Hours	Dollars
*** START *** Division (0) Central *** START ****								
Pays:								
Regular Pay	112.13	1,798.44	112.13	1,798.44	112.13	1,798.44	112.13	1,798.44
5-Cash Tips	0.00	164.50	0.00	164.50	0.00	164.50	0.00	164.50
Total Gross Pay	112.13	1,962.94	112.13	1,962.94	112.13	1,962.94	112.13	1,962.94
Federal Tax Deductions:								
Federal Withholding (W/H)	0.00	114.96	0.00	114.96	0.00	114.96	0.00	114.96
Medicare	0.00	27.56	0.00	27.56	0.00	27.56	0.00	27.56
OASDI	0.00	117.86	0.00	117.86	0.00	117.86	0.00	117.86
EIC	0.00	(27.04)	0.00	(27.04)	0.00	(27.04)	0.00	(27.04)
Total Federal Tax Deduction	0.00	233.34	0.00	233.34	0.00	233.34	0.00	233.34
Other Deductions:								
1-Child Support	0.00	75.00	0.00	75.00	0.00	75.00	0.00	75.00
2-CAF Medical	0.00	35.00	0.00	35.00	0.00	35.00	0.00	35.00
3-CAF Dental	0.00	27.00	0.00	27.00	0.00	27.00	0.00	27.00
4-401K Plan	0.00	50.00	0.00	50.00	0.00	50.00	0.00	50.00
5-Declining Loan	0.00	25.00	0.00	25.00	0.00	25.00	0.00	25.00
Total Other Deduction	0.00	212.00	0.00	212.00	0.00	212.00	0.00	212.00
Net Pay	0.00	1,353.10	0.00	1,353.10	0.00	1,353.10	0.00	1,353.10
*** END *** Division (0) Central *** END ****								

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

PAYROLL REGISTER TOTALS

Payroll #: 6

Page: C - 2

Pay and Deduction Descriptions	Current Payroll		Month to Date		Quarter to Date		Year to Date	
	Hours	Dollars	Hours	Dollars	Hours	Dollars	Hours	Dollars
*** START *** Division (1) Northwest *** START ****								
Pays:								
Regular Pay	80.00	2,940.00	80.00	2,940.00	80.00	2,940.00	80.00	2,940.00
OverTime Pay	3.00	67.50	3.00	67.50	3.00	67.50	3.00	67.50
3-Bonus Pay	0.00	50.00	0.00	50.00	0.00	50.00	0.00	50.00
Total Gross Pay	83.00	3,057.50	83.00	3,057.50	83.00	3,057.50	83.00	3,057.50
Federal Tax Deductions:								
Federal Withholding (W/H)	0.00	250.43	0.00	250.43	0.00	250.43	0.00	250.43
Medicare	0.00	43.73	0.00	43.73	0.00	43.73	0.00	43.73
OASDI	0.00	186.95	0.00	186.95	0.00	186.95	0.00	186.95
Total Federal Tax Deduction	0.00	481.11	0.00	481.11	0.00	481.11	0.00	481.11
Other Deductions:								
2-CAF Medical	0.00	27.25	0.00	27.25	0.00	27.25	0.00	27.25
3-CAF Dental	0.00	15.00	0.00	15.00	0.00	15.00	0.00	15.00
4-401K Plan	0.00	89.00	0.00	89.00	0.00	89.00	0.00	89.00
Total Other Deduction	0.00	131.25	0.00	131.25	0.00	131.25	0.00	131.25
Net Pay	0.00	2,445.14	0.00	2,445.14	0.00	2,445.14	0.00	2,445.14
*** END *** Division (1) Northwest *** END ****								

Accrual Descriptions	Current Payroll	Month to Date	Quarter to Date	Year to Date
	Dollars	Dollars	Dollars	Dollars
Overall Company Totals				
Federal Tax Accruals:				
Federal Unemployment Insurance Tax (FUTA)	39.33	39.33	39.33	39.33
Total Federal Tax	39.33	39.33	39.33	39.33
Texas Tax Accruals:				
State Unemployment Insurance Tax (SUTA)	25.10	25.10	25.10	25.10
Smart Jobs Assessment Tax	5.02	5.02	5.02	5.02
Total Texas Tax	30.12	30.12	30.12	30.12

Accrual Descriptions	Current Payroll	Month to Date	Quarter to Date	Year to Date
	Dollars	Dollars	Dollars	Dollars
	*** START ***	Division (0) Central	*** START ****	
Federal Tax Accruals:				
Unemployment Insurance Tax (FUTA)	15.21	15.21	15.21	15.21
Total Federal Tax	15.21	15.21	15.21	15.21
Texas Tax Accruals:				
Unemployment Insurance Tax (SUTA)	9.81	9.81	9.81	9.81
Smart Jobs Assessment Tax	1.96	1.96	1.96	1.96
Total Texas Tax	11.77	11.77	11.77	11.77
	*** END ***	Division (0) Central	*** END ****	

Accrual Descriptions	Current Payroll	Month to Date	Quarter to Date	Year to Date
	Dollars	Dollars	Dollars	Dollars
	*** START ***	Division (1) Northwest	*** START ****	
Federal Tax Accruals:				
Unemployment Insurance Tax (FUTA)	24.12	24.12	24.12	24.12
Total Federal Tax	24.12	24.12	24.12	24.12
Texas Tax Accruals:				
Unemployment Insurance Tax (SUTA)	15.29	15.29	15.29	15.29
Smart Jobs Assessment Tax	3.06	3.06	3.06	3.06
Total Texas Tax	18.35	18.35	18.35	18.35
	*** END ***	Division (1) Northwest	*** END ****	

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

PAYROLL UI TOTALS

Payroll Number: 6

Page: CC - 3

Pay Descriptions	Current Payroll		Month to Date		Quarter to Date		Year to Date	
	Hours	Dollars	Hours	Dollars	Hours	Dollars	Hours	Dollars
Division: 0	Central							
Department: 1	Administration							
Regular Pay	40.00	1,350.00	40.00	1,350.00	40.00	1,350.00	40.00	1,350.00
Department Gross Pay	40.00	1,350.00	40.00	1,350.00	40.00	1,350.00	40.00	1,350.00
Department: 2	Hostess							
Regular Pay	40.00	380.00	40.00	380.00	40.00	380.00	40.00	380.00
Department Gross Pay	40.00	380.00	40.00	380.00	40.00	380.00	40.00	380.00
Department: 3	Wait Staff							
Regular Pay	32.13	68.44	32.13	68.44	32.13	68.44	32.13	68.44
5-Cash Tips	0.00	164.50	0.00	164.50	0.00	164.50	0.00	164.50
Department Gross Pay	32.13	232.94	32.13	232.94	32.13	232.94	32.13	232.94
Division Gross Pay	112.13	1,962.94	112.13	1,962.94	112.13	1,962.94	112.13	1,962.94
Division: 1	Northwest							
Department: 1	Clerical							
Regular Pay	40.00	1,250.00	40.00	1,250.00	40.00	1,250.00	40.00	1,250.00
OverTime Pay	3.00	67.50	3.00	67.50	3.00	67.50	3.00	67.50
3-Bonus Pay	0.00	50.00	0.00	50.00	0.00	50.00	0.00	50.00
Department Gross Pay	43.00	1,367.50	43.00	1,367.50	43.00	1,367.50	43.00	1,367.50
Department: 2	Supervisor							
Regular Pay	40.00	1,690.00	40.00	1,690.00	40.00	1,690.00	40.00	1,690.00
Department Gross Pay	40.00	1,690.00	40.00	1,690.00	40.00	1,690.00	40.00	1,690.00
Division Gross Pay	83.00	3,057.50	83.00	3,057.50	83.00	3,057.50	83.00	3,057.50
Total Gross Pay	195.13	5,020.44	195.13	5,020.44	195.13	5,020.44	195.13	5,020.44

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

DEPARTMENT REPORT

Payroll Number: 6

Page: D - 1

Account Number	Account Description	Current Payroll		Month-To-Date	
		Debits	Credits	Debits	Credits
Division: 0 Central					
Department: 1 Administration					
Section: ACCRUED					
102.38.42.1	FUTA (Exp)	10.40		10.40	
102.38.42.1	FUTA (Pay)		10.40		10.40
102.38.42.1	TX : SUTA (Exp)	8.09		8.09	
102.38.42.1	TX : SUTA (Pay)		8.09		8.09
Section Total:		18.49	18.49	18.49	18.49
Section: EMPLOYEE					
309.74.22.11	Regular Pay	1,350.00		1,350.00	
309.74.22.11	Net Pay		1,012.72		1,012.72
122.97.28.7	Federal W/H		88.95		88.95
122.97.28.7	OASDI (EE)		80.54		80.54
122.97.28.7	Medicare (EE)		18.83		18.83
122.97.28.7	EIC	27.04		27.04	
202.3.11.2	1-Child Support		75.00		75.00
202.3.11.2	2-CAF Medical		30.00		30.00
202.3.11.2	3-CAF Dental		21.00		21.00
202.3.11.2	4-401K Plan		50.00		50.00
Section Total:		1,377.04	1,377.04	1,377.04	1,377.04
Section: EMPLOYER					
112.49.1.9	Medicare (ER - Pay)		18.83		18.83
112.49.1.9	Medicare (ER - Exp)	18.83		18.83	
112.49.1.9	OASDI (ER - Pay)		80.54		80.54
112.49.1.9	OASDI (ER - Exp)	80.54		80.54	
Section Total:		99.37	99.37	99.37	99.37
Department Total: 1 Administration		1,494.90	1,494.90	1,494.90	1,494.90

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

GENERAL LEDGER DETAIL REPORT

Payroll Number: 6

Page: E - 1

Account Number	Account Description	Current Payroll		Month-To-Date	
		Debits	Credits	Debits	Credits
Department:	2 Hostess				
Section:	ACCRUED				
102.38.42.1	FUTA (Exp)	2.95		2.95	
102.38.42.1	FUTA (Pay)		2.95		2.95
102.38.42.1	TX : SUTA (Exp)	2.28		2.28	
102.38.42.1	TX : SUTA (Pay)		2.28		2.28
Section Total:		5.23	5.23	5.23	5.23
Section:	EMPLOYEE				
309.74.22.11	Regular Pay	380.00		380.00	
309.74.22.11	Net Pay		294.76		294.76
122.97.28.7	Federal W/H		21.01		21.01
122.97.28.7	OASDI (EE)		22.88		22.88
122.97.28.7	Medicare (EE)		5.35		5.35
202.3.11.2	2-CAF Medical		5.00		5.00
202.3.11.2	3-CAF Dental		6.00		6.00
202.3.11.2	5-Declining Loan		25.00		25.00
Section Total:		380.00	380.00	380.00	380.00
Section:	EMPLOYER				
112.49.1.9	Medicare (ER - Pay)		5.35		5.35
112.49.1.9	Medicare (ER - Exp)	5.35		5.35	
112.49.1.9	OASDI (ER - Pay)		22.88		22.88
112.49.1.9	OASDI (ER - Exp)	22.88		22.88	
Section Total:		28.23	28.23	28.23	28.23
Department Total:	2 Hostess	413.46	413.46	413.46	413.46
Department:	3 Wait Staff				
Section:	ACCRUED				
102.38.42.1	FUTA (Exp)	1.86		1.86	
102.38.42.1	FUTA (Pay)		1.86		1.86
102.38.42.1	TX : SUTA (Exp)	1.40		1.40	
102.38.42.1	TX : SUTA (Pay)		1.40		1.40
Section Total:		3.26	3.26	3.26	3.26
Section:	EMPLOYEE				
309.74.22.11	Regular Pay	68.44		68.44	
309.74.22.11	5-Cash Tips (Reported)	164.50	164.50	164.50	164.50
309.74.22.11	Net Pay		45.62		45.62
122.97.28.7	Federal W/H		5.00		5.00
122.97.28.7	OASDI (EE)		14.44		14.44
122.97.28.7	Medicare (EE)		3.38		3.38
Section Total:		232.94	232.94	232.94	232.94
Section:	EMPLOYER				
112.49.1.9	Medicare (ER - Pay)		3.38		3.38
112.49.1.9	Medicare (ER - Exp)	3.38		3.38	
112.49.1.9	OASDI (ER - Pay)		14.44		14.44
112.49.1.9	OASDI (ER - Exp)	14.44		14.44	
Section Total:		17.82	17.82	17.82	17.82
Department Total:	3 Wait Staff	254.02	254.02	254.02	254.02
Division Total:	0 Central	2,162.38	2,162.38	2,162.38	2,162.38

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

GENERAL LEDGER DETAIL REPORT

Payroll Number: 6

Page: E - 2

Account Number	Account Description	Current Payroll		Month-To-Date	
		Debits	Credits	Debits	Credits
Division:	1 Northwest				
Department:	1 Clerical				
Section:	ACCRUED				
102.38.42.1	FUTA (Exp)	10.62		10.62	
102.38.42.1	FUTA (Pay)		10.62		10.62
102.38.42.1	TX : SUTA (Exp)	8.21		8.21	
102.38.42.1	TX : SUTA (Pay)		8.21		8.21
Section Total:		18.83	18.83	18.83	18.83
Section:	EMPLOYEE				
309.74.22.11	Regular Pay	1,250.00		1,250.00	
309.74.22.11	OT Pay	67.50		67.50	
309.74.22.11	3-Bonus Pay	50.00		50.00	
309.74.22.11	Net Pay		1,068.38		1,068.38
122.97.28.7	Federal W/H		138.06		138.06
122.97.28.7	OASDI (EE)		82.31		82.31
122.97.28.7	Medicare (EE)		19.25		19.25
202.3.11.2	2-CAF Medical		25.00		25.00
202.3.11.2	3-CAF Dental		15.00		15.00
202.3.11.2	4-401K Plan		19.50		19.50
Section Total:		1,367.50	1,367.50	1,367.50	1,367.50
Section:	EMPLOYER				
112.49.1.9	Medicare (ER - Pay)		19.25		19.25
112.49.1.9	Medicare (ER - Exp)	19.25		19.25	
112.49.1.9	OASDI (ER - Pay)		82.31		82.31
112.49.1.9	OASDI (ER - Exp)	82.31		82.31	
Section Total:		101.56	101.56	101.56	101.56
Department Total:	1 Clerical	1,487.89	1,487.89	1,487.89	1,487.89

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

GENERAL LEDGER DETAIL REPORT

Payroll Number: 6

Page: E - 3

Account Number	Account Description	Current Payroll		Month-To-Date	
		Debits	Credits	Debits	Credits
Department:	2 Supervisor				
Section:	ACCRUED				
102.38.42.1	FUTA (Exp)	13.50		13.50	
102.38.42.1	FUTA (Pay)		13.50		13.50
102.38.42.1	TX : SUTA (Exp)	10.14		10.14	
102.38.42.1	TX : SUTA (Pay)		10.14		10.14
Section Total:		23.64	23.64	23.64	23.64
Section:	EMPLOYEE				
309.74.22.11	Regular Pay	1,690.00		1,690.00	
309.74.22.11	Net Pay		1,376.76		1,376.76
122.97.28.7	Federal W/H		112.37		112.37
122.97.28.7	OASDI (EE)		104.64		104.64
122.97.28.7	Medicare (EE)		24.48		24.48
202.3.11.2	2-CAF Medical		2.25		2.25
202.3.11.2	4-401K Plan		69.50		69.50
Section Total:		1,690.00	1,690.00	1,690.00	1,690.00
Section:	EMPLOYER				
112.49.1.9	Medicare (ER - Pay)		24.48		24.48
112.49.1.9	Medicare (ER - Exp)	24.48		24.48	
112.49.1.9	OASDI (ER - Pay)		104.64		104.64
112.49.1.9	OASDI (ER - Exp)	104.64		104.64	
Section Total:		129.12	129.12	129.12	129.12
Department Total:	2 Supervisor	1,842.76	1,842.76	1,842.76	1,842.76
Division Total:	1 Northwest	3,330.65	3,330.65	3,330.65	3,330.65
Grand Totals:		5,493.03	5,493.03	5,493.03	5,493.03

Pay Period: Weekly 11/01/06 - 11/07/09

Check Date: 11/11/09

Co. No: 26 A Sample Company

GENERAL LEDGER DETAIL REPORT

Payroll Number: 6

Page: E - 4

Account Number	Account Description	Current Payroll		Month-To-Date	
		Debits	Credits	Debits	Credits
102.38.42.1	Accrued Taxes	69.45	69.45	69.45	69.45
112.49.1.9	Employer Taxes	376.10	376.10	376.10	376.10
122.97.28.7	Employee Taxes	27.04	741.49	27.04	741.49
202.3.11.2	Deductions	0.00	343.25	0.00	343.25
309.74.22.11	Pays	5,020.44	3,962.74	5,020.44	3,962.74
Grand Totals:		5,493.03	5,493.03	5,493.03	5,493.03

Employee Number and Name	Current Payroll	Month-To-Date	Quarter-To-Date	Year-To-Date	Account No.
Deduction Name: 1-Child Support					
(1) Adams, John D.	75.00	75.00	75.00	75.00	
1-Child Support Deduction Total:	75.00	75.00	75.00	75.00	

Employee Number and Name	Current Payroll	Month-To-Date	Quarter-To-Date	Year-To-Date	Account No.
Deduction Name: 2-CAF Medical					
(1) Adams, John D.	10.00	10.00	10.00	10.00	
(2) Watts, Frank	20.00	20.00	20.00	20.00	
(3) Brown, Tom	5.00	5.00	5.00	5.00	
(7) Green, Eddie	25.00	25.00	25.00	25.00	
(5) Carson, Dawn E.	2.25	2.25	2.25	2.25	
2-CAF Medical Deduction Total:	62.25	62.25	62.25	62.25	

Employee Number and Name	Current Payroll	Month-To-Date	Quarter-To-Date	Year-To-Date	Account No.
Deduction Name: 3-CAF Dental					
(1) Adams, John D.	5.00	5.00	5.00	5.00	
(2) Watts, Frank	16.00	16.00	16.00	16.00	
(3) Brown, Tom	6.00	6.00	6.00	6.00	
(7) Green, Eddle	15.00	15.00	15.00	15.00	
3-CAF Dental Deduction Total:	42.00	42.00	42.00	42.00	

Employee Number and Name	Current Payroll	Month-To-Date	Quarter-To-Date	Year-To-Date	Account No.
Deduction Name: 4-401K Plan					
(1) Adams, John D.	50.00	50.00	50.00	50.00	
(2) Watts, Frank	0.00	0.00	0.00	0.00	
(3) Brown, Tom	0.00	0.00	0.00	0.00	
(9) Morris, Julie	0.00	0.00	0.00	0.00	
(4) Brown, Jill	19.50	19.50	19.50	19.50	
(7) Green, Eddle	0.00	0.00	0.00	0.00	
(6) Black, Elizabeth G.	0.00	0.00	0.00	0.00	
(5) Carson, Dawn E.	50.00	50.00	50.00	50.00	
(8) Jones, Susan R.	19.50	19.50	19.50	19.50	
4-401K Plan Deduction Total:	139.00	139.00	139.00	139.00	

Employee Number and Name	Current Payroll	Month-To-Date	Quarter-To-Date	Year-To-Date	Account No.
Deduction Name: 5-Declining Loan					
(3) Brown, Tom	25.00	25.00	25.00	25.00	
5-Declining Loan Deduction Total:	25.00	25.00	25.00	25.00	
Total Company Deductions:	343.25	343.25	343.25	343.25	

A Sample Company

Grand Prairie, TX 75052
Phone: (972)
Fax:

SNELLING PAYROLL SERVICES PAYROLL WORKSHEET FAX COVER PAGE

To Company: SNELLING PAYROLL SERVICES

From Company: (26) A Sample Company

Attention: EEC.1

Contact:

Fax: (806) 797-7125

Total Pages Including Cover:

Phone: (806) 797-3286

Date:

Please Call When Received

Please Call For Additional Instructions

Additional Notes / Comments / Requests:

* W = Work State * R = Resident State

Employee Number and Employee Name				Rates / Salary & Raise Dates	Rate Chg	Dept. No.	Regular Hours	Overtime Hours	Other Pays			Other Ded's		Automatic Pays and Deductions				
Hire	SSN No.	Federal Wh	Fx/Ext						Cd	Hours	Amount	Cd	Amount	Cd	Description	Amount	Limit	Balance
Birth	Pay Freq.	State Wh * (W)	Fx/Ext															
Type	DD	EIC	State Wh * (R)	Fx/Ext														
Division: 0															Central			
1	Adams, John D.			(1)	10.0000	0	1							D	1-Child Support	75.00		
01-01-2001	111-11-1111	Fed: Single	2	(2)		0								D	2-CAF Medical	10.00		
01-01-1956	Weekly	TX: N/A		(3)		0								D	3-CAF Dental	5.00		
Regular	DD	Single				0								D	4-401K Plan	50.00		
2	Watts, Frank			(1)		0	1							D	2-CAF Medical	20.00		
01-01-1997	222-22-2222	Fed: Married	0	(2)		0								D	3-CAF Dental	16.00		
01-01-1946	Weekly	TX: N/A		(3)		0								D	4-401K Plan	0.00		
Regular	DD	None				950.00	0											
3	Brown, Tom			(1)	9.5000	0	2							D	2-CAF Medical	5.00		
01-01-1996	333-33-3333	Fed: Single	1	(2)	10.5000	0								D	3-CAF Dental	6.00		
01-01-1970	Weekly	TX: N/A		(3)		0								D	4-401K Plan	0.00		
Regular		None				0								D	5-Declining Loan	25.00	500.00	400.00
9	Morris, Julie			(1)	2.1300	0	3							D	4-401K Plan	0.00		
03-30-2001	999-99-9999	Fed: Single	3	5.00	(2)		0											
	Weekly	TX: N/A		(3)		0												
Regular		None				0												
Division: 1															Northwest			
4	Brown, Jill			(1)		0	1							D	4-401K Plan	.03		
01-01-1995	444-44-4444	Fed: Single	0	(2)		0												
01-01-1969	Weekly	TX: N/A		(3)		0												
Regular	DD	None				650.00	0											
7	Green, Eddie			(1)	15.0000	0	1							D	2-CAF Medical	25.00		
01-01-1980	777-77-7777	Fed: Single	1	(2)		0								D	3-CAF Dental	15.00		
02-20-1971	Weekly	TX: N/A		(3)		0								D	4-401K Plan	0.00		
Regular		None				0								P	3-Bonus Pay	50.00		

* W = Work State * R = Resident State

Employee Number and Employee Name				Rates / Salary & Raise Dates	Rate Chg	Dept. No.	Regular Hours	Overtime Hours	Other Pays			Other Ded's		Automatic Pays and Deductions			
Hire	SSN No.	Federal Wh	Fx/Ext						Cd	Hours	Amount	Cd	Amount	Cd	Description	Amount	Limit
Birth	Pay Freq.	State Wh * (W)	Fx/Ext														
Type	DD	EIC	State Wh * (R)	Fx/Ext													
6	Black, Elizabeth G.			(1)	0	2							D	4-401K Plan	0.00		
01-01-1994	666-66-6666	Fed: Married	1	(2)	0												
07-27-1973	Weekly	TX: N/A		(3)	0												
Regular		None			700.00	0											
5	Carson, Dawn E.			(1)	8.5000	0	2						D	2-CAF Medical	2.25		
01-01-1995	555-55-5555	Fed: Single	2	(2)	0								D	4-401K Plan	50.00		
	Weekly	TX: N/A		(3)	0												
Regular		None			0												
8	Jones, Susan R.			(1)	0	2							D	4-401K Plan	.03		
05-21-2001	888-88-8888	Fed: Single	0	(2)	0												
	Weekly	TX: N/A		(3)	0												
Regular		None			650.00	0											

* Required Data M/S = Married or Single (Tax Filing Status) ** (W/R) = State Withholding Work State / Resident State

Emp. No.*	Div. No.	Dept. No.*	Phone	Soc. Sec. No.*	Pay Frequency*	Rate 1	Rate 2	Rate 3	Salary	
First Name*			Mid.*	Last Name*		Fed M/S *	Fed. Dep.*	Extra Fed. W/H	Fixed Fed. W/H	E I C Code
Street Address					State WH **	St (M/S) **	St. Dep **	Extra St. W/H **	State for UCI	
City			State	Zip	Hire Date	Birth Date		Termination Date		

EMPLOYEE PAYROLL INPUT FOR THIS PAY PERIOD:	Rate	Dept No	Reg Hrs	O.T. Hrs	Cd	Pay Hrs	Pay Amt	Cd	Ded Amt	Notes

* Required Data M/S = Married or Single (Tax Filing Status) ** (W/R) = State Withholding Work State / Resident State

Emp. No.*	Div. No.	Dept. No.*	Phone	Soc. Sec. No.*	Pay Frequency*	Rate 1	Rate 2	Rate 3	Salary	
First Name*			Mid.*	Last Name*		Fed M/S *	Fed. Dep.*	Extra Fed. W/H	Fixed Fed. W/H	E I C Code
Street Address					State WH **	St (M/S) **	St. Dep **	Extra St. W/H **	State for UCI	
City			State	Zip	Hire Date	Birth Date		Termination Date		

EMPLOYEE PAYROLL INPUT FOR THIS PAY PERIOD:	Rate	Dept No	Reg Hrs	O.T. Hrs	Cd	Pay Hrs	Pay Amt	Cd	Ded Amt	Notes

VOIDED CHECKS

Emp. No.	Employee Name	Soc. Sec. No.	Check Date	Check No.	Check Net

HAND WRITTEN (MANUAL) CHECKS

Emp. No.	Employee Name				Soc. Sec. No.	Emp. No.	Employee Name				Soc. Sec. No.
UCI State	Work WH State	Res. WH State	Net	Check No.		UCI State	Work WH State	Res. WH State	Net	Check No.	

Gross	Federal Withholding	Employee UCI	Deductions
Regular Pay	Social Security (OASDI)	St. Disability	Deductions
Over Time Pay	Medicare	St. WH (Work)	Deductions
Other Pays	EIC	St. WH (Res)	
Other Pays		L&I / WC	
		NJ Workforce	
		NJ HealthCare	
		Locals	

Special Notes

Gross	Federal Withholding	Employee UCI	Deductions
Regular Pay	Social Security (OASDI)	St. Disability	Deductions
Over Time Pay	Medicare	St. WH (Work)	Deductions
Other Pays	EIC	St. WH (Res)	
Other Pays		L&I / WC	
		NJ Workforce	
		NJ HealthCare	
		Locals	

Special Notes

Hand Written (Manual) / Voided Checks

***** PLEASE FAX THIS SHEET FOR PAYROLL VERIFICATION *****

Payroll Worksheet Totals
(Please include hours for New Employees in these totals.)

Total Entries: _____
Total New Employees: _____
Total Regular Hours: _____

Total Overtime Hours: _____
Total Other Hours: _____
Total Hours: _____

Other Pays and Deductions List

Pay Descriptions	Deduction Descriptions
0-Regular Pay	1-Child Support
1-Vacation Pay	2-CAF Medical
2-Sick Pay	3-CAF Dental
3-Bonus Pay	4-401K Plan
4-Holiday Pay	5-Declining Loan
5-Cash Tips	
6-Third Party Sick - Taxable	

Delivery Method: Pickup - Call One time change to: _____ Permanent Change to: _____

Next Highest EE #: 10 Next Lowest Available EE #'s: 19, 18, 17, 16, 15, 14, 13, 12, 11, 10,

Prepared By: SNELLING PAYROLL SERVICES
2222 Indiana Avenue
Lubbock, TX 79410
Phone: (806) 797-3286 Fax: (806) 797-7125
EE Control Count Figure: 45