

EMPLOYEE No.		EMPLOYEE NAME			DATE	NAT. INS. No.	
PAYMENTS		HOURS/UNITS	RATE	AMOUNT	DEDUCTIONS		AMOUNT
THIS PERIOD				YEAR TO DATE			
NET					PAY		
PAY							

TO ACTIVATE ADHESIVE

FOLD AND PRESS FIRMLY

FOLD AND PRESS FIRMLY

TO ACTIVATE ADHESIVE

SGE 080 ©

Ref: SGE-080
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