

Minnesota Clerical, Inc.
Payroll Specialist



A step in the right direction!

EMPLOYEE NAME: _____

EMPLOYEE NUMBER: _____

CLIENT: _____ **DATE:** _____

PAY PERIOD:
FROM: _____ **THRU:** _____

TOTAL HOURS: _____ **HOURLY RATE:** _____

GROSS PAY: _____ **COMM/BONUS:** _____

TOTAL PAYROLL: _____

CHARGE:
0-\$250 is 21% of Total Payroll: _____

\$251-\$599 is 17% of Total Payroll: _____

\$600-\$999 is 15% of Total Payroll: _____

\$1000 & over is 14% of total payroll: _____

Total Forwarded: _____

Pay period summary:

<u>Date</u>	<u>hours</u>		<u>Date</u>	<u>hours</u>
Wed	_____		Wed	_____
Th	_____		Th	_____
Fri	_____		Fri	_____
Mon	_____		Mon	_____
Tues	_____		Tues	_____

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