Payroll Deduction Remittance Notice

Date: _____ **Tax ID# :** _____

Company Name: _____

Company Address: _____

_____

Payroll Contact: _____

Phone #: _____ **Fax #:** _____

Period Ending: _____ **Paydate:** _____

Check #: _____ **Check Amount:** _____

*** List MUST be in Alphabetical Order or in order by Social Security # .**

Employee Name (Last Name, First Name)	Social Security #	Deduction

Employee Name (Last Name, First Name)	Social Security #	Deduction

Employee Name (Last Name, First Name)	Social Security #	Deduction