

Pay stubs may vary from this example based on your individual deductions

## Payroll Earnings Statement

Gresham-Barlow School District  
1331 NW Eastman Parkway  
Gresham, OR 97030

Pay Date: 08/23/2012-2-Monthly  
Period Ending: 08/31/2012

Deposited funds available on Pay Date.

Pay Amount: \_\_\_\_\_ \$XXXX.XX

Last Name, First MI  
Address  
City, State Zip

**NON-NEGOTIABLE**

**Earnings:**  
**Description-**  
Type of pay you are receiving  
**Reg. Units-**  
Hours beyond your regular FTE  
**O/T Units-**Hours for Overtime worked  
**Reg. Pay-**  
Wages earned @ current rate of pay  
**O/T Pay-**Wages earned @ Overtime rate

**Earnings**

Description	Rate	Reg. Units	O/T Units	Reg. Pay	O/T Pay
Overtime	\$0.00	0.00	1.50	\$0.00	\$XX.XX
Educator	\$0.00	0.00	0.00	\$XXXX.XX	\$0.00
Gross Pay				\$XXXX.XX	

**Employer Paid Benefits**

Description	Amount
AD&D Plan 10	\$.50
Early Retirement	\$118.73
FICA/Social Security	\$281.35
Kais M1 Pharm Ptax	\$1381.15
Life Plan 10	\$5.45
LTD	\$5.14
Medicare	\$65.80
Moda (ODS) D1 Orth Ptax	\$93.40
PERS Bond	\$373.52
PERS Tier 1/2	\$457.56
Unemployment	\$18.15 M
Workers Comp 8868	\$2.19
Workers Comp	\$2.49
Hourly Assessment	

**Employer Paid Benefits:**

**FICA/Social Security & Medicare-**  
Employer contribution for Federal mandated withholdings

**Insurance-**  
Employer portion of health insurance premiums including Life & AD&D

**Early Retirement-**Side account to fund the Early Retirement obligation for eligible employees per the contract

**Workers Comp 8868 or 9101-**  
State mandated worker's compensation insurance

**Workers Comp Hourly Assessment-**  
Employer portion based on the # of hours worked & multiplied by the state set rate

**Employee Deductions:**  
**Federal, State, FICA/Social Security & Medicare-**  
Employee portion of Federal and State mandated tax withholdings  
**Workers Comp Hourly Assessment-**  
Based on the # of hours worked & multiplied by the state set rate  
**PERS-**6% of gross salary-retirement contribution

**Employee Deductions**

Description	Amount
Direct Deposit Net Pay	\$XXXX.XX
Federal Income Tax	\$464.92
FICA/Social Security	\$190.59
Kais M1 Pharm Ptax	\$104.68
Medicare	\$65.80
Moda (ODS) D1 Orth Ptax	\$26.35
OSEA Local Union Dues	\$1.00
OSEA Union Dues	\$39.67
PERS Tier 1/2	\$280.14
State Income Tax	\$273.95
Workers Comp Hourly Assessment	\$2.49
<b>Net Pay</b>	<b>\$XXXX.XX</b>

**Health Insurance-**Employee paid portion of premiums for medical, dental & vision plans (Ptax listed after the plan name indicates a pre-tax deduction for out-of-pocket costs)

**OEA/OSEA Union Dues-**For Licensed and Classified staff (local dues are also listed here in the months applicable)

**Other Deductions-**Employee elected deductions such as 403b TSA's, Education Foundation, United Way, Dependent Care and Unreimbursed Medical will also be listed here if applicable

**PERS Bond-**Side account for the payment of the bonds for the refinance of the unfunded liability

**PERS Tier 1/2 or PERS OPSRP-**Employer contribution to your retirement account

**PERS Employee 6% Paid by Employer-**Employer contributions to retirement accounts for Licensed staff.

**Unemployment-** State Unemployment insurance