

**Payroll Sample Client  
Data Entry Worksheet - Grouped by Primary Department**

Pay Description	Rate	Reg Hours	OT Hours	Amount	Deduction Description	Amount
<b>Primary Department: Auxiliary staff</b>						
<b>3</b>	<b>Cooper, Dennis B</b>			<b>333-33-3334</b>		
6900 Martin Blvd. Ann Arbor, MI 48108 313-555-3333						
<b>Personal Information</b>						
Birth date:	10/25/63				Gender:	Male
Marital status:	Married				Race:	
<b>Employment Information</b>						
Hire date:	08/15/94				New hire reported:	Yes 08/16/16
Last raise date:					Inactive date:	
<b>Federal Withholding Information</b>						
Filing status:	Married				Total allowances:	0
Additional:	Additional amount				Amount/Percentage:	0.00
Nonresident alien:	No				Tax exempt:	No
EIC status:	None				Spouse W-5 in effect:	No
<b>Primary Location:</b>	Ann Arbor Location					
<b>Primary Department:</b>	Auxiliary staff					
Bonus	0.00			.		.
Wages	9.25			.		.
Sick				.		.
Vacation				.		.

<b>4</b>	<b>Fink, Chester A</b>			<b>444-44-4445</b>		
2451 Woodbury Ct. Boca Raton, FL 33431 313-555-4444						
<b>Personal Information</b>						
Birth date:	09/10/54				Gender:	Male
Marital status:	Single				Race:	
<b>Employment Information</b>						
Hire date:	07/16/92				New hire reported:	Yes 08/16/16
Last raise date:					Inactive date:	
<b>Federal Withholding Information</b>						
Filing status:	Single				Total allowances:	0
Additional:	Additional amount				Amount/Percentage:	0.00
Nonresident alien:	No				Tax exempt:	No
EIC status:	None				Spouse W-5 in effect:	No
<b>Primary Location:</b>	Ann Arbor Location					
<b>Primary Department:</b>	Auxiliary staff					
Bonus	0.00			.		.
Wages	9.25			.		.
				.		.

FOR OFFICE USE ONLY

	Employee ID	Regular Hours	OT Hours	DT Hours
Hash Totals	_____	_____	_____	_____
Grand Totals	_____	_____	_____	_____

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Data Entry Worksheet - Grouped by Primary Department**

Pay Description	Rate	Reg Hours	OT Hours	Amount	Deduction Description	Amount
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**Primary Department: Management**

**1** **Eddington, Terry J** **111-11-1112**

1459 Locust  
Dexter, MI 48130  
313-555-1111

**Personal Information**

Birth date: 06/12/50 Gender: Male  
Marital status: Married Race: White/Caucasian

**Employment Information**

Hire date: 11/25/98 New hire reported: Yes 08/16/16  
Last raise date: 12/25/08 Inactive date:

**Federal Withholding Information**

Filing status: Married, but withhold at higher single rate Total allowances: 0  
Additional: Additional amount Amount/Percentage: 0.00  
Nonresident alien: No Tax exempt: No  
EIC status: Single, head of household or qualifying widow(er) Spouse W-5 in effect: No

**Primary Location:** Ann Arbor Location

**Primary Department:** Management

Bonus	0.00			.	401(k)	.
Salary	55,000.00			.	Medical Insurance	35.17
Sick				.		.
Vacation				.		.
				.		.

**7** **Anderson, Abigail A** **777-77-7778**

3926 Market St.  
Ann Arbor, MI 48106  
313-555-7777

**Personal Information**

Birth date: 07/10/62 Gender: Female  
Marital status: Single Race:

**Employment Information**

Hire date: 09/15/95 New hire reported: Yes 08/16/16  
Last raise date: 12/25/08 Inactive date:

**Federal Withholding Information**

Filing status: Single Total allowances: 0  
Additional: Additional amount Amount/Percentage: 0.00  
Nonresident alien: No Tax exempt: No  
EIC status: None Spouse W-5 in effect: No

**Primary Location:** Fresno Location

**Primary Department:** Management

Bonus	0.00			.	401(k)	.
Salary	45,000.00			.	Medical Insurance	30.48
Sick				.		.
Vacation				.		.
				.		.

**Primary Department: Office staff**

FOR OFFICE USE ONLY

	Employee ID	Regular Hours	OT Hours	DT Hours
Hash Totals				
Grand Totals				

**Payroll Sample Client  
Data Entry Worksheet - Grouped by Primary Department**

Pay Description	Rate	Reg Hours	OT Hours	Amount	Deduction Description	Amount
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**2** **Harmon, Sarah W** **222-22-2223**

4188 Jackson Rd.  
Ann Arbor, MI 48103  
313-555-2222

**Personal Information**

Birth date:	04/14/68	Gender:	Female
Marital status:	Single	Race:	

**Employment Information**

Hire date:	05/31/96	New hire reported:	Yes 08/16/16
Last raise date:	12/25/08	Inactive date:	

**Federal Withholding Information**

Filing status:	Married	Total allowances:	0
Additional:	Additional amount	Amount/Percentage:	0.00
Nonresident alien:	No	Tax exempt:	No
EIC status:	None	Spouse W-5 in effect:	No

**Primary Location:** Ann Arbor Location

**Primary Department:** Office staff

Bonus	0.00				401(k)	
Wages	10.50				FSA	60.00
Sick						
Vacation						

**5** **Spencer, Rodney H** **555-55-5556**

16000 Warren  
Ormond Beach, FL 32174  
313-555-5555

**Personal Information**

Birth date:	01/26/65	Gender:	Male
Marital status:	Married	Race:	

**Employment Information**

Hire date:	04/06/98	New hire reported:	Yes 08/16/16
Last raise date:	12/25/08	Inactive date:	

**Federal Withholding Information**

Filing status:	Married	Total allowances:	0
Additional:	Additional amount	Amount/Percentage:	0.00
Nonresident alien:	No	Tax exempt:	No
EIC status:	None	Spouse W-5 in effect:	No

**Primary Location:** Ann Arbor Location

**Primary Department:** Office staff

Bonus	0.00				401(k)	
Wages	9.50					
Sick						
Vacation						

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	Employee ID	Regular Hours	OT Hours	DT Hours
Hash Totals	_____	_____	_____	_____
Grand Totals	_____	_____	_____	_____

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Pay Description	Rate	Reg Hours	OT Hours	Amount	Deduction Description	Amount
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<b>6</b>	<b>Sanders, Ellen E</b>				<b>667-67-6667</b>	
7230 Normandy Dr. San Jose, CA 95106 313-555-6666						
<b>Personal Information</b>						
Birth date:	04/10/60			Gender:	Female	
Marital status:	Married			Race:		
<b>Employment Information</b>						
Hire date:	08/09/91			New hire reported:	Yes 08/16/16	
Last raise date:	12/25/08			Inactive date:		
<b>Federal Withholding Information</b>						
Filing status:	Married			Total allowances:	0	
Additional:	Additional amount			Amount/Percentage:	0.00	
Nonresident alien:	No			Tax exempt:	No	
EIC status:	None			Spouse W-5 in effect:	No	
<b>Primary Location:</b>	Ann Arbor Location					
<b>Primary Department:</b>	Office staff					
Bonus	0.00			.	401(k)	.
Wages	9.50			.		.
Sick				.		.
Vacation				.		.
				.		.

<b>8</b>	<b>Beards, Jonathon T</b>				<b>888-88-8889</b>	
6004 E. Newburgh Hwy Apt. 14 Fresno, CA 93650 313-555-8888						
<b>Personal Information</b>						
Birth date:	09/12/70			Gender:	Male	
Marital status:	Single			Race:		
<b>Employment Information</b>						
Hire date:	01/05/08			New hire reported:	Yes 08/16/16	
Last raise date:	12/25/08			Inactive date:		
<b>Federal Withholding Information</b>						
Filing status:	Single			Total allowances:	2	
Additional:	Additional amount			Amount/Percentage:	0.00	
Nonresident alien:	No			Tax exempt:	No	
EIC status:	Married filing jointly			Spouse W-5 in effect:	No	
<b>Primary Location:</b>	Ann Arbor Location					
<b>Primary Department:</b>	Office staff					
Bonus	0.00			.	Medical Insurance	30.48
Wages	9.75			.		.
Sick				.		.
Vacation				.		.
				.		.

FOR OFFICE USE ONLY

	Employee ID	Regular Hours	OT Hours	DT Hours
Hash Totals	_____	_____	_____	_____
Grand Totals	_____	_____	_____	_____

**Payroll Sample Client  
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Pay Description	Rate	Reg Hours	OT Hours	Amount	Deduction Description	Amount
<b>9</b>	<b>Finnegan, Samuel E</b>			<b>990-90-9990</b>		
2154 N.Oxford St. Pasadena, CA 91188 313-555-9999						
<b>Personal Information</b>						
Birth date:	01/01/75				Gender:	Male
Marital status:	Single				Race:	
<b>Employment Information</b>						
Hire date:	02/02/02				New hire reported:	Yes 08/16/16
Last raise date:	12/25/08				Inactive date:	
<b>Federal Withholding Information</b>						
Filing status:	Single				Total allowances:	1
Additional:	Additional amount				Amount/Percentage:	2.00
Nonresident alien:	No				Tax exempt:	No
EIC status:	None				Spouse W-5 in effect:	No
<b>Primary Location:</b>	Fresno Location					
<b>Primary Department:</b>	Office staff					
Bonus	0.00			.	401(k)	.
Commission	20.00			.	Medical Insurance	30.48
Wages	9.25			.		.
Sick				.		.
Vacation				.		.

FOR OFFICE USE ONLY

	Employee ID	Regular Hours	OT Hours	DT Hours
Hash Totals	_____	_____	_____	_____
Grand Totals	_____	_____	_____	_____

**Payroll Sample Client  
Data Entry Worksheet - Grouped by Primary Department**

Pay Description	Rate	Reg Hours	OT Hours	Amount	Deduction Description	Amount
<b>New Employee:</b>	_____					
<b>Personal Information</b>						
Birth date:	_____				Gender:	_____
Marital status:	_____				Race:	_____
<b>Employment Information</b>						
Hire date:	_____				New hire reported:	_____
Last raise date:	_____				Inactive date:	_____
<b>Federal Withholding Information</b>						
Filing status:	_____				Total allowances:	_____
Additional:	_____				Amount/Percentage:	_____
Nonresident alien:	_____				Tax exempt:	_____
EIC status:	_____				Spouse W-5 in effect:	_____
<b>Primary Location:</b>	_____					
<b>Primary Department:</b>	_____					
				.		.
				.		.
				.		.

<b>New Employee:</b>	_____					
<b>Personal Information</b>						
Birth date:	_____				Gender:	_____
Marital status:	_____				Race:	_____
<b>Employment Information</b>						
Hire date:	_____				New hire reported:	_____
Last raise date:	_____				Inactive date:	_____
<b>Federal Withholding Information</b>						
Filing status:	_____				Total allowances:	_____
Additional:	_____				Amount/Percentage:	_____
Nonresident alien:	_____				Tax exempt:	_____
EIC status:	_____				Spouse W-5 in effect:	_____
<b>Primary Location:</b>	_____					
<b>Primary Department:</b>	_____					
				.		.
				.		.
				.		.

Employee count = 9

FOR OFFICE USE ONLY				
	Employee ID	Regular Hours	OT Hours	DT Hours
Hash Totals	_____	_____	_____	_____
Grand Totals	_____	_____	_____	_____

**Payroll Sample Client  
Data Entry Worksheet - Grouped by Primary Department**

Pay Description	Reg Hours	OT Hours	Amount	Deduction Description	Amount
<b>Company Totals</b>					
<b>Primary Department: Auxiliary staff</b>					
Bonus			.	401(k)	.
Commission			.	Medical Insurance	.
Salary			.	FSA	.
Wages			.		.
Sick			.		.
Vacation			.		.
Sick			.		.
Vacation			.		.
<b>Primary Department: Management</b>					
Bonus			.	401(k)	.
Commission			.	Medical Insurance	.
Salary			.	FSA	.
Wages			.		.
Sick			.		.
Vacation			.		.
Sick			.		.
Vacation			.		.
<b>Primary Department: Office staff</b>					
Bonus			.	401(k)	.
Commission			.	Medical Insurance	.
Salary			.	FSA	.
Wages			.		.
Sick			.		.
Vacation			.		.
Sick			.		.
Vacation			.		.
<b>All Departments</b>					
Bonus			.	401(k)	.
Commission			.	Medical Insurance	.
Salary			.	FSA	.
Wages			.		.
Sick			.		.
Vacation			.		.
Sick			.		.
Vacation			.		.

FOR OFFICE USE ONLY

	Employee ID	Regular Hours	OT Hours	DT Hours
Hash Totals	_____	_____	_____	_____
Grand Totals	_____	_____	_____	_____