

DATE 00001

TO

FOR

CLAIM #

BAL FOR D		TOTAL EARN	F.I.C.A.
D E P O S I T S		U.S. INC. TAX	
		STATE INC. TAX	
		MEDICARE	
TOTAL			
THIS CHECK		TOTAL DED.	
BALANCE		NET PAY	

FORM 3550 000,000 • Victor Lundeen Co., Printers • Fergus Falls, MN • 1-800-346-4870

TOWNSHIP NAME ADDRESS

PERIOD ENDING

NAME

TOTAL EARNINGS >	
F.I.C.A.	
WITHHOLDING U.S. INCOME TAX	
STATE INCOME TAX	
MEDICARE	
TOTAL DEDUCTIONS >	
NET PAY	

EMPLOYEE'S STATEMENT OF EARNINGS AND DEDUCTIONS - DETACH AND RETAIN

THIS INSTRUMENT WHEN SIGNED BY THE TREASURER SHALL BECOME A CHECK PAYABLE TO THE ORDER OF THE PAYEE NAMED FOR THE AMOUNT STATED.

ORDER - CHECK Township Name Address

00001

DATE 00-0000/000

PAY TO THE ORDER OF \$

DOLLARS

FOR Financial Institution Address

CHAIRMAN

TOWN TREASURER TOWN CLERK

⑈00001⑈ ⑆091205571⑆ 00⑈028⑈1⑈

DATE 00002

TO

FOR

CLAIM #

BAL FOR D		TOTAL EARN	F.I.C.A.
D E P O S I T S		U.S. INC. TAX	
		STATE INC. TAX	
		MEDICARE	
TOTAL			
THIS CHECK		TOTAL DED.	
BALANCE		NET PAY	

FORM 3550 000,000 • Victor Lundeen Co., Printers • Fergus Falls, MN • 1-800-346-4870

TOWNSHIP NAME ADDRESS

PERIOD ENDING

NAME

TOTAL EARNINGS >	
F.I.C.A.	
WITHHOLDING U.S. INCOME TAX	
STATE INCOME TAX	
MEDICARE	
TOTAL DEDUCTIONS >	
NET PAY	

EMPLOYEE'S STATEMENT OF EARNINGS AND DEDUCTIONS - DETACH AND RETAIN

THIS INSTRUMENT WHEN SIGNED BY THE TREASURER SHALL BECOME A CHECK PAYABLE TO THE ORDER OF THE PAYEE NAMED FOR THE AMOUNT STATED.

ORDER - CHECK Township Name Address

00002

DATE 00-0000/000

PAY TO THE ORDER OF \$

DOLLARS

FOR Financial Institution Address

CHAIRMAN

TOWN TREASURER TOWN CLERK

⑈00002⑈ ⑆091205571⑆ 00⑈028⑈1⑈

DATE 00003

TO

FOR

CLAIM #

BAL FOR D		TOTAL EARN	F.I.C.A.
D E P O S I T S		U.S. INC. TAX	
		STATE INC. TAX	
		MEDICARE	
TOTAL			
THIS CHECK		TOTAL DED.	
BALANCE		NET PAY	

FORM 3550 000,000 • Victor Lundeen Co., Printers • Fergus Falls, MN • 1-800-346-4870

TOWNSHIP NAME ADDRESS

PERIOD ENDING

NAME

TOTAL EARNINGS >	
F.I.C.A.	
WITHHOLDING U.S. INCOME TAX	
STATE INCOME TAX	
MEDICARE	
TOTAL DEDUCTIONS >	
NET PAY	

EMPLOYEE'S STATEMENT OF EARNINGS AND DEDUCTIONS - DETACH AND RETAIN

THIS INSTRUMENT WHEN SIGNED BY THE TREASURER SHALL BECOME A CHECK PAYABLE TO THE ORDER OF THE PAYEE NAMED FOR THE AMOUNT STATED.

ORDER - CHECK Township Name Address

00003

DATE 00-0000/000

PAY TO THE ORDER OF \$

DOLLARS

FOR Financial Institution Address

CHAIRMAN

TOWN TREASURER TOWN CLERK

⑈00003⑈ ⑆091205571⑆ 00⑈028⑈1⑈

The undersigned payee, in endorsing this check declares that the same is received in payment of a just and correct claim against the town, and that no part of it has heretofore been paid.

Signature of Claimant

The undersigned payee, in endorsing this check declares that the same is received in payment of a just and correct claim against the town, and that no part of it has heretofore been paid.

Signature of Claimant

The undersigned payee, in endorsing this check declares that the same is received in payment of a just and correct claim against the town, and that no part of it has heretofore been paid.

Signature of Claimant