

CO. FILE DEPT. CLOCK VCHR. NO. 020
 20P 000380 000002 N 0000500017 1

Earnings Statement



CATALINA ISLAND MEDICAL CENTER
 PO BOX 1563
 AVALON CA 90704
 (310) 510-0700

Period Beginning: 11/22/2020
 Period Ending: 12/05/2020
 Pay Date: 12/11/2020

BRIANNA STERLING
901 FREMONT STREET
APT 531
LAS VEGAS NV 85101

Filing Status: Single/Married filing separately
 Exemptions/Allowances:
 Federal: Standard Withholding Table

Social Security Number: XXX-XX-0863

Earnings	rate	hours	this period	year to date
Regular	61.2000	6.00	367.20	11,612.40
Overtime	91.8000	26.03	2,389.55	68,006.44
Dbt Time	61.2000	10.78	1,319.47	22,521.29
Holiday	91.8000	12.45	1,142.91	
On Call	6.0000	24.00	144.00	4,096.44
Shift 1	61.2000	27.67	1,693.40	49,103.50
Shift 2	63.7000	44.33	2,823.82	57,888.77
Bonus				105.47
Callback				224.91
P.T.O.				8,812.80
Retroactive				919.69
Sick				2,203.20
Gross Pay			\$9,880.35	230,087.34

Net Pay	\$7,458.37
Checking 1	-7,458.37
Net Check	\$0.00

* Excluded from federal taxable wages

Your federal taxable wages this period are \$9,797.48

Other Benefits and Information	this period	total to date
Max Elig/Comp	9,880.35	231,112.50
Disability		44.67
Paid Time Off		41.43

Deductions	Statutory		
Federal Income Tax	-1,331.23		34,758.57
Medicare Tax	-142.07		3,306.23
Medicare Surtax	-88.18		252.14
CA State Income Tax	-777.63		18,550.03
Social Security Tax			8,537.40
CA SUI/SDI Tax			1,229.09
Other			
Dental 125	-3.09*		77.25
Medical 125	-74.50*		1,862.50
Vision 125	-5.28*		132.00
Other			64.00
Rent			437.50

Important Notes
 YOUR COMPANY PHONE NUMBER IS 310 510-0700

BASIS OF PAY: HOURLY

Additional Tax Withholding Information

Taxable Marital Status:
 CA: Single
 Exemptions/Allowances:
 CA: 10 Plus 9 With. Allowances

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 (310) 510-0700

Advice number: 0000500017
 Pay date: 12/11/2020

Deposited to the account of	account number	transit ABA	amount
BRIANNA STERLING	xxxxx4815	xxxx xxxx	\$7,458.37

THIS IS NOT A CHECK

NON-NEGOTIABLE