



Personalized Total Pay Statement

For Calendar Year Ending _____

Employee Name _____

Employee Title _____

We want you to know the “hidden compensation” that may not be evident in your tax documentation. The value of the compensation and benefits provided for you during calendar year _____ are listed below.

	Your Contribution	Employer Contribution
Wages/Salary		
Bonuses		
Unemployment Payroll Taxes		
Health Insurance		
Medical Reimbursement/Cafeteria Plan		
Dental Benefits for You/Your Family		
Health Savings Account (HSA) Contribution		
Retirement Plan Contributions		
Disaster Relief Payments		
Other		
Other		
Total Compensation Benefits for Year		
Total Hours Worked in Year		
Total Compensation and Benefits Per Hour in Year		

Additional benefits you received for
calendar year ending (_____)

Vacation Pay _____

Sick/Well Pay _____

Holiday Pay _____

Continuing Education Pay _____

Bereavement Leave _____

Other _____

We are pleased to contribute these
benefits and look forward to another
successful year!