|  |  |
| --- | --- |
| [Employer's Name]  Name: [Name]  Street Address: [Street Address]  City, State, Country: [City, State, Country]  ZIP Code: [ZIP Code]  Phone: [Phone]  E-mail: [E-Mail] | **SALARY INVOICE** |

|  |  |
| --- | --- |
| Payment Period: [Start Date] to [End Date] | Date: August 4, 2018 |

**Employee’s Name**

Name: [Name]

Street Address: [Street Address]

City, State, Country: [City, State, Country]

ZIP Code: [ZIP Code]

|  |  |  |  |
| --- | --- | --- | --- |
| Payment Period | Hours | $ / Hour | Amount ($) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | Gross Pay |  |
|  |  |  |  |
| [Comments or Special Instructions] |  | Withholdings |  |
|  | | **TOTAL** |  |