



**The Master's Tax Service**  
716 College Ave, Suite E  
Santa Rosa, CA 95404  
(707) 544-5732 FAX 866-649-8853

**Sample Company**  
123 Main St.  
Your City, ST 00000  
555-1212 FAX 555-1234

## Payroll Submission Sheet

Pay period ending: \_\_\_\_\_ Scheduled pay day: \_\_\_\_\_

Name	Regular Hours	Overtime Hours	Other
Bob Alexander			
Susan Campbell			
Joe Davis			
Sam Highway			
Mary Larson			
Cindy Money			
Donna Polk			
Harry Simpson			

Simply fill in the hours for each, sign below, and FAX it to 866-649-8853. Note anything unusual under "Other" or makes notes below or on an additional sheet. Salaried employees may be left blank unless there are special items in this pay period.

Signed \_\_\_\_\_