

NORTH CAROLINA  
HALIFAX COUNTY  
ASSIGNED JUDGE: \_\_\_\_\_

IN THE GENERAL COURT OF JUSTICE  
DISTRICT COURT DIVISION  
FILE NO. \_\_\_\_\_

\_\_\_\_\_  
Plaintiff

vs.

**EMPLOYER WAGE AFFIDAVIT**

\_\_\_\_\_  
Defendant

\_\_\_\_\_, being duly sworn, deposes and says:  
(personnel officer)

1. That he/she is an employee of \_\_\_\_\_  
(name of company)

located in \_\_\_\_\_;

2. That \_\_\_\_\_ in the above entitled action is an  
(name of plaintiff or defendant)

employee of said company;

3. That the records attached hereto of \_\_\_\_\_'s earnings,  
(plaintiff/defendant)

deductions, company benefits and length of employment is true and correct to the best of affiant's information and belief.

This the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Affiant (Personnel Officer)

\_\_\_\_\_  
Title:

Subscribed and sworn before me  
this the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

**EARNINGS INFORMATION**

1. Earnings last calendar year, including bonus, if any:
  - a) Gross: \$ \_\_\_\_\_
  - b) Net: \$ \_\_\_\_\_
2. Present rate of pay: \$ \_\_\_\_\_ per \_\_\_\_\_ (*insert time period, ie. week, month, etc.*)  
 If employee is paid on production or commission, what is present average gross pay?  
 \$ \_\_\_\_\_ per \_\_\_\_\_ (*insert time period, ie. week, month, etc.*)
3. How often is employee paid? \_\_\_\_\_
4. Number of hours working per day? \_\_\_\_\_
5. Number of days working per week? \_\_\_\_\_
6. Deductions from gross pay per pay period:
  - a) State taxes: \$ \_\_\_\_\_
  - b) Federal taxes: \$ \_\_\_\_\_
  - c) FICA: \$ \_\_\_\_\_
  - d) Medical Insurance\* \$ \_\_\_\_\_

\*How much of medical insurance premium is allocated for coverage of children?

\$ \_\_\_\_\_ per \_\_\_\_\_.

\*Does medical insurance include medical, dental and/or other coverage? If so, what health care services are covered?

\*What are the terms of the deductible payments required under the medical coverage provided?

7. Number of exemptions claimed: \_\_\_\_\_
8. Date employee last paid: \_\_\_\_\_  
 How many pay periods, if any, are employee's earnings retained by employer? \_\_\_\_\_
9. Earnings this calendar year through date employee was last paid, including bonus, if any:
  - a) Gross: \$ \_\_\_\_\_
  - b) Net: \$ \_\_\_\_\_
10. Is employee paid a bonus? \_\_\_\_\_  
 If "yes" explain:
  - a) how bonus is computed: \_\_\_\_\_
  - b) When bonus is paid: \_\_\_\_\_
  - c) Amount paid last calendar year: \_\_\_\_\_
  - d) Amount paid this calendar year: \_\_\_\_\_
11. What pay increase, if any, has employee received in the past twelve months?

12. Nature of employment:

13. Date(s) of Hire/service:

14. Amount paid by employer on employee's behalf for:

- a) Medical Insurance:           \$\_\_\_\_\_ per \_\_\_\_\_
- b) Disability Insurance:       \$\_\_\_\_\_ per \_\_\_\_\_
- c) Dues:                         \$\_\_\_\_\_ per \_\_\_\_\_
- d) Retirement:                 \$\_\_\_\_\_ per \_\_\_\_\_
- e) Reimbursed Expenses       \$\_\_\_\_\_ per \_\_\_\_\_