EARNINGS STATEMENT

MASTER•CARE, INC.
MASTER•CARE INC
(Work address)
604 Sutter Street, Ste 290
Folsom, CA 95630
Phone: 8558366355

ADVICE OF DEPOSIT

PAY PERIOD:

[redacted]

PAID TO:
ALEJANDRA Christine SALLEE

[redacted]

THIS IS NOT A CHECK

TIME OFF	USED (HOURS)	ACCRUED (HOURS)	BALANCE (HOURS)

DEDUCTIONS	CURRENT EMP. DEDUCTION	CURRENT CO. CONTRIBUTION	YTD EMP. DEDUCTION	YTD CO. CONTRIBUTION

[redacted]