Fill in this information to identify the case:			
Debtor	Tehum Care Services, Inc.		
United States Ba	ankruptcy Court for the: Southern	District of Texas(State)	
Case number	23-90086		

# Official Form 410

Proof of Claim 04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

**Filers must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Pa	art 1: Identify the Clair	m		
1.	Who is the current creditor?	Brawn, Veronica L.  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor		
2.	Has this claim been acquired from someone else?	✓ No  Yes. From whom?		
3.	Where should notices and	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	
	payments to the creditor be sent?	Brawn, Veronica L. 4363 Stewart Creek Road Bruner, MO 65620		
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Bruner, no osozo		
		Contact phone <u>4175513823</u>	Contact phone	
		Contact email vbrawn@teamcenturion.com	Contact email	
		Uniform claim identifier for electronic payments in chapter 13 (if you use one):		
4.	Does this claim amend one already	☑ No		
E1-40		Yes. Claim number on court claims registry (if known)	Filed on	
5.	Do you know if anyone else has filed	<b>☑</b> No		
a proof of claim for this claim?  Yes. Who made the earlier filing?				

Official Form 410 Proof of Claim

6.	Do you have any number	☑ No
you use to identify the debtor?		Yes. Last 4 digits of the debtor's account or any number you use to identify
7.	How much is the claim?	\$ 3249.00 Does this amount include interes
		Yes. Attach statement itemiz charges required by Ba
8.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal inju
	claim?	Attach redacted copies of any documents supporting the claim required by Bank
		Limit disclosing information that is entitled to privacy, such as health care inform
		Unpaid PTO

	debtor?	Yes. Last 4 digits of the debtor's a	account or any number you use to identify the debtor:
7.	How much is the claim?	\$ 3249.00	Does this amount include interest or other charges?  ✓ No  — Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the claim?	Attach redacted copies of any docume Limit disclosing information that is entit	, lease, services performed, personal injury or wrongful death, or credit card. ents supporting the claim required by Bankruptcy Rule 3001(c). tled to privacy, such as health care information.
9.	Is all or part of the claim secured?	Claim Attachment (Off Motor vehicle Other. Describe:  Basis for perfection: Attach redacted copies of dexample, a mortgage, lien, has been filed or recorded.  Value of property: Amount of the claim that Amount of the claim that	im is secured by the debtor's principle residence, file a Mortgage Proof of ficial Form 410-A) with this Proof of Claim.  documents, if any, that show evidence of perfection of a security interest (for certificate of title, financing statement, or other document that shows the lien)  \$
10.	Is this claim based on a lease?	☐ Variable  ☑ No ☐ Yes. Amount necessary to cure	e any default as of the date of the petition.
11.	. Is this claim subject to a right of setoff?	No Yes. Identify the property:	

Official Form 410 **Proof of Claim** 

12. Is all or part of the claim entitled to priority under	☐ No			
11 U.S.C. § 507(a)?	Yes. Che	ck all that apply:		Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example,		estic support obligations (including alimony and child so $S.C. \S 507(a)(1)(A)$ or $(a)(1)(B)$ .	upport) under	\$
in some categories, the law limits the amount		\$3,350* of deposits toward purchase, lease, or rentrivices for personal, family, or household use. 11 U.S		\$
entitled to priority.	days	es, salaries, or commissions (up to \$15,150*) earned before the bankruptcy petition is filed or the debtor's never is earlier. 11 U.S.C. § 507(a)(4).	within 180 business ends,	\$ 3249.00
	☐ Taxe	s or penalties owed to governmental units. 11 U.S.C. §	§ 507(a)(8).	\$
	☐ Cont	ibutions to an employee benefit plan. 11 U.S.C. § 50	)7(a)(5).	\$
	Othe	r. Specify subsection of 11 U.S.C. § 507(a)() that a	applies.	\$
	* Amounts	are subject to adjustment on 4/01/25 and every 3 years after the	hat for cases begun	on or after the date of adjustment.
Part 3: Sign Below				
The person completing this proof of claim must sign and date it. FRBP 9011(b).  If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.  A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.  18 U.S.C. §§ 152, 157, and 3571.	I am the trust I am a guara I understand that the amount of the I have examined I declare under pure Executed on date  /s/Veronica Signature	ditor.  ditor's attorney or authorized agent.  tee, or the debtor, or their authorized agent. Bankrupton an authorized signature on this <i>Proof of Claim</i> serves claim, the creditor gave the debtor credit for any paynone information in this <i>Proof of Claim</i> and have reasonated the information in the foregoing is true and correct.  66/27/2023  MM / DD / YYYYY	Rule 3005.  as an acknowledgenents received towable belief that the	ward the debt. e information is true and correct.
	Contact phone		Email	

Official Form 410 **Proof of Claim** 

# KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 967-0491 | International 001-424-236-7244

Debtor:		
23-90086 - Tehum Care Services, Inc.		
District:		
Southern District of Texas, Houston Division		
Creditor:	Has Supporting Doo	umentation:
Brawn, Veronica L.	Yes, please n	nail physical supporting documentation
4363 Stewart Creek Road	Related Document S	Statement:
Bruner, MO, 65620	Has Related Claim:	
Phone:		D
4175513823	Related Claim Filed	ьу.
Phone 2:	Filing Party:	
Fax:	Creditor	
Email:		
vbrawn@teamcenturion.com		
Other Names Used with Debtor:	Amends Claim:	
	No	
Acquired Claim:		
	No	
Basis of Claim:	Last 4 Digits:	Uniform Claim Identifier:
Unpaid PTO	No	
Total Amount of Claim:	Includes Interest or	Charges:
3249.00	No	
Has Priority Claim:	Priority Under:	
Yes	11 U.S.C. §50	07(a)(4): 3249.00
Has Secured Claim:	Nature of Secured A	mount:
No	Value of Property:	
Based on Lease:	Annual Interest Rate	<b>.</b>
No		•
Subject to Right of Setoff:	Subject to Right of Setoff:  Arrearage Amount:	
No Basis for Perfection:		:
	Amount Unsecured:	
Submitted By:		
Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time	)	
Title:		
RN		
Company:		

# Additional Supporting Documents Received on 7/5/2023

**RECEIVED** 

JUL 0 5 2023

**KURTZMAN CARSON CONSULTANTS** 



Fill in this int	formation to identify the case:	
Debtor	Tehum Care Services, Inc.	
United States B	ankruptcy Court for the: Southern	District of Texas (State)
Case number	23-90086	

# Official Form 410

# **Proof of Claim**

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

**Filers must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Pa	art 1: Identify the Clair	1
1.	Who is the current creditor?	Brawn, Veronica L.  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor
2.	Has this claim been acquired from someone else?	✓ No           Yes. From whom?
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?  Brawn, Veronica L. 4363 Stewart Creek Road Bruner, MO 65620  Where should payments to the creditor be sent? (if different)
F	RECEIVED	Contact phone 4175513823 Contact phone
	JUL 0 5 2023	Contact email
JRIZM	IAN CARSON CONSULTANT	3
4.	Does this claim amend one already filed?	Yes. Claim number on court claims registry (if known) Filed on
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?

6. Do you hav you use to debtor?	re any number identify the	No  Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7. How much	is the claim?	\$ 3249.00 Does this amount include interest or other charges?  No  Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the claim?	basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.
		Unpaid PTO
9. Is all or par secured?	rt of the claim	✓ Yes.       The claim is secured by a lien on property.         Nature or property:       Real estate: If the claim is secured by the debtor's principle residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.         Motor vehicle       Other. Describe:         Basis for perfection:       Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)         Value of property:       \$
10. Is this clain lease?	m based on a	No  Yes. Amount necessary to cure any default as of the date of the petition.  \$
11. Is this clair		✓ No  Yes. Identify the property:

12. Is all or part of the claim entitled to priority under	☐ No		
11 U.S.C. § 507(a)?	Yes. Check	k all that apply:	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example,		stic support obligations (including alimony and child support) under S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
in some categories, the law limits the amount entitled to priority.	Up to or serv	\$3,350* of deposits toward purchase, lease, or rental of property vices for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$
entitied to priority.	days b	s, salaries, or commissions (up to \$15,150*) earned within 180 before the bankruptcy petition is filed or the debtor's business ends ever is earlier. 11 U.S.C. § 507(a)(4).	, \$_3249.00
	☐ Taxes	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$
	Contri	butions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	, \$
	Other.	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$
	* Amounts a	are subject to adjustment on 4/01/25 and every 3 years after that for cases begu	un on or after the date of adjustment.
Part 3: Sign Below			
The person completing	Check the appropr	iate box:	
this proof of claim must sign and date it.	I am the credi	itor.	
FRBP 9011(b).  If you file this claim	am the credi	itor's attorney or authorized agent.	
electronically, FRBP	am the trust	ee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.	
5005(a)(2) authorizes courts to establish local rules specifying what a signature is.			
A person who files a fraudulent claim could be fined up to \$500,000,	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.		
imprisoned for up to 5 years, or both.	I have examined the	ne information in this Proof of Claim and have reasonable belief that	the information is true and correct.
18 U.S.C. §§ 152, 157, and 3571.		nalty of perjury that the foregoing is true and correct.	
	Executed on date	06/27/2023 MM / DD / YYYY	
	4 . 10 4		
	/s/Veronica I Signature	Brawn	
	Print the name of	the person who is completing and signing this claim:	
<u> </u> 	Name	Veronica Brawn       First name     Middle name       Last	st name
	Title	RN	
	Company	Identify the corporate servicer as the company if the authorized agent is a service	er.
	Address		
	Contact phone	Email	

23-90086 - Tehum Care Services, Inc.  District:	Debtor:		
Southern District of Texas, Houston Division   Creditor:   Brawn, Veronica L   4363 Stewart Creek Road   Related Document Statement:     Bruner, MO, 65620   Has Related Claim:   No   Related Claim Filed By:     Has Related Claim Filed By:   Private Pr	23-90086 - Tehum Care Services, Inc.		
Creditor:         Brawn, Veronica L.         Yes, please mail physical supporting documentation:	District:		
Brawn, Veronica L.   Yes, please mail physical supporting documentation   Related Document Statement:   Has Related Claim:   No   No   Related Claim Filed By:	Southern District of Texas, Houston Division		
A363 Stewart Creek Road   Bruner, MO, 65620   Has Related Claim: No   No   Related Claim Filed By:   Has Related Claim: No   Related Claim Filed By:   Related Claim Filed	Creditor:	Has Supporting Docu	umentation:
## Bruner, MO, 65620    Phone:	Brawn, Veronica L.	Yes, please m	ail physical supporting documentation
Phone: 4175513823 Phone 2: Fax: Email: vbrawn@teamcenturion.com  Other Names Used with Debtor:  Basis of Claim: Unpaid PTO  Total Amount of Claim: 3249.00  Has Priority Claim: Yes  Has Secured Claim: No  Based on Lease: No  Based on Lease: No  Subject to Right of Setoff: No  Substitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN  Related Claim Filed By: Related Claim: No  Amends Claim: No Amends Claim: No Amends Claim: No Amends Claim: No Last 4 Digits: No Iniform Claim Identifier: No Iniform Claim Identifier: No Related Claim: No Related Claim Filed By: Related Claim Filed By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN	4363 Stewart Creek Road	Related Document S	tatement:
Phone:	Bruner, MO, 65620		
## 14175513823   Phone 2:	Phone:	}	D.,.
Fax: Email:	4175513823	Neialed Claim Flied E	ay.
Email:	Phone 2:	Filing Party:	
Other Names Used with Debtor:  Other Names Used with Debtor:  Amends Claim: No Acquired Claim: No  Last 4 Digits: Unpaid PTO No  Includes Interest or Charges: 3249.00  Has Priority Claim: Yes 11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No Value of Property: Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN	Fax:	Creditor	
Other Names Used with Debtor:  Amends Claim: No Acquired Claim: No Basis of Claim: Unpaid PTO  Total Amount of Claim: 3249.00  Has Priority Claim: Yes  Priority Under: Yes  11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No No  Nature of Secured Amount: Value of Property: Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN	Email:		
No Acquired Claim: No Basis of Claim: Unpaid PTO Last 4 Digits: No Includes Interest or Charges: No Has Priority Claim: Yes 11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No No Value of Property: Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured: Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN	vbrawn@teamcenturion.com		
Acquired Claim: No  Basis of Claim: Unpaid PTO No  Total Amount of Claim: 3249.00 Has Priority Claim: Yes 11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No  No  Has Secured Claim: No  Sabed on Lease: No Subject to Right of Setoff: No  Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN	Other Names Used with Debtor:	Amends Claim:	
Basis of Claim: Unpaid PTO  Total Amount of Claim: 3249.00  Has Priority Claim: Yes  11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No  Based on Lease: No Subject to Right of Setoff: No Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN  Last 4 Digits: Uniform Claim Identifier: No No Includes Interest or Charges: No		No	
Basis of Claim: Unpaid PTO  Total Amount of Claim: 3249.00  Has Priority Claim: Yes  11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No  No  No  Has Secured Claim: No  Subject to Right of Setoff: No  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title: RN		Acquired Claim:	
Unpaid PTO  Total Amount of Claim:		No	
Total Amount of Claim:	Basis of Claim: Last 4 Digits: Uniform Claim Identifier:		Uniform Claim Identifier:
3249.00 No  Has Priority Claim: Yes 11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No Value of Property:  Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title: RN			
Has Priority Claim: Yes  11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No No Value of Property:  Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title: RN	Total Amount of Claim:	includes interest or (	Charges:
Yes 11 U.S.C. §507(a)(4): 3249.00  Has Secured Claim: No Value of Secured Amount: No Value of Property:  Based on Lease: Annual Interest Rate: No Subject to Right of Setoff: Arrearage Amount: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title: RN	3249.00	No	
Has Secured Claim: No Value of Property:  Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title: RN	Has Priority Claim:	Priority Under:	
No Value of Property:  Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN	Yes	11 U.S.C. §50	7(a)(4): 3249.00
Based on Lease: No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time Title: RN	Has Secured Claim:	Nature of Secured A	mount:
No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title: RN	No	Value of Property:	
No Subject to Right of Setoff: No Basis for Perfection: Amount Unsecured:  Submitted By: Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title: RN	Based on Lease:	Annual Interest Pater	
No Basis for Perfection:  Amount Unsecured:  Submitted By:  Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title:  RN	No	***************************************	•
Amount Unsecured:  Submitted By:  Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title:  RN	Subject to Right of Setoff:	Arrearage Amount:	
Submitted By:  Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title:  RN	No	No Basis for Perfection:	
Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time  Title:  RN		Amount Unsecured:	
Title:	Submitted By:		
RN	Veronica Brawn on 27-Jun-2023 5:56:00 p.m. Eastern Time		
	Title:		
Company:	RN		
	Company:		

# One Carizon

The second second

Corizon LLC 103 Powell Court Brentwood, TN 37027 800-729-0069 Pay Statement

Period Start Date 06/13/2021
Period End Date 06/26/2021
Pay Date 07/06/2021

3865

Document

3173678

Selection of the select

Net Pay

\$1,995.22

Det	

VERONICA LEE BRAWN 4363 STEWART CREEK ROAD BRUNER, MO 65620 USA Employee Number 00985177

SSN XXX-XX-XXXX

Job RN

Pay Rate \$36,10

Biweekly

Pay Frequency

Pay Group CLC Site Cycle B02
Tax Location Ozark Correctional Ctr
Contract MOCONT - Missouri Contract
Site 00904 - Ozark Correctional Ctr

### **Earnings**

Pay Type	Hours	Pay Rate	Current	OTY
Coefficient OT	0.5000	\$18,08	\$9.04	\$409.04
Group Term Life			\$1.08	\$14.32
Hol Prem S1	0000.0	\$0.00	\$0.00	\$418.78
Hol Prem S2	0.000	\$0.00	\$0.00	\$83.59
OT Shift 1	0.2500	\$36.12	\$9.03	\$336,48
OT Shift 2	0.2500	\$37.88	\$9.47	\$9.47
OT Shift 4	0.000	\$0.00	\$0,00	\$327.60
OT Shift 5	0.0000	\$0.00	\$0.00	\$207.07
Paid Time Off	0.0000	\$0.00	\$0.00	\$8,001.43
Regular Shift 1	78.7500	\$36.10	\$2,843.48	\$25,465.42
Regular Shift 2	1.2500	\$37.85	\$47.32	\$1,691.21
Regular Shift 4	0.0000	\$0.00	\$0.00	\$4,876.38
Regular Shift 5	0,0008	\$0.00	\$0.00	· · \$75.30

### Total Hours 80.5000

### Deductions

				Employee		Employer		
Deduction	an an are a promision or are are as	. To an a commentation	The second secon	Pre-Tax	Current	YTD	Current	ΥТО
Child Sup Life	and the state of t	and confidence of the second o	of other manuals or the approximately filled processes	No	\$0.81	\$11.34	\$0.00	\$0.00
Dental				Yes	\$21.36	\$299.04	\$0.00	\$0.00
EE Sup Life				No	\$6.16	\$86.24	\$0.00	\$0.00
HSA EE				Yes	\$56.25	\$825.00	\$0.00	\$0.00
Medical			1,31	Yes	\$124,38	\$1,741.32	\$491,24	\$6,877,36
offset earn	- '			No	\$1.08	\$14,32	\$0.00	\$0.00
Spouse Sup Life	277			No	\$1.54	\$21.56	\$0.00	\$0.00
Voi AD&D EE Pd				No	\$2.08	\$29.12	\$0.00	\$0.00
Vol ID Theft	1444 tu			No	\$6.44	\$90.16	\$0.00	\$0.00
Voi Legal				No	\$8.31	\$116.34	\$0.00	\$0.00

## Taxes

Та	os .			Current	YTD
Fe	deral income Tax			\$400.89	\$5,838.79
Er	nployee Medicare			\$39.41	\$566.24
Sc	icial Security Employee Tax			\$168.49	\$2,421.15
M	O State Income Tax	National Control of the Control of t		\$87.00	\$1,278.00

Paid Time Off		N	et Pay Distribution		
Plan	Current	Balance A	ccount Number	Account Type	Amount
Ext Sick Leave	0.0000	130,3840 x	00000000004202	Savings	\$299.28
Paid Time Off	10.1600	153.7740 ×	0000000004202	Checking	\$1,695.94
		το	otal		\$1,995.22

### Pay Summary

	Gross		FIT Taxable Wages	Taxes	Deductions	Not Pay
Current	\$2,919,42	THE RESERVE OF THE PROPERTY OF THE PARTY.	\$2,717.43	\$695.79	\$228.41	\$1,995
YTO	\$41,916.09		\$39,050.73	\$10,104.18	\$3,234.44	