

**NORTH CAROLINA
28th JUDICIAL DISTRICT
BUNCOMBE COUNTY**

IN THE GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION
_____-CVD-_____

_____, Plaintiff
-v-
_____, Defendant

AFFIDAVIT

(Employer Wage Affidavit)

I, _____, (please print name) a Personnel Officer, being duly sworn,
deposes and says:

1. That I am an employee of _____ [name of company] located at _____ [provide full address]; and
 2. That _____, the []Plaintiff, or []Defendant in the above entitled action, is an employee of said company; and
 3. That the records attached hereto of []Plaintiff's, or []Defendant's earnings, deductions, company benefits, and length of employment are true and correct to the best of affiant's information and belief.
 4. That my work telephone number is _____.

This the ____ day of _____, 20____.

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: \$ _____ Net: \$ _____
2. Present rate of pay: \$ _____ per _____ [*insert time period, i.e., week, month, etc.*]

* If Employee is paid on production or commission, what is present average gross pay?
\$ _____ per _____ [*insert time period, i.e., 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: \$ _____ Federal taxes: \$ _____
 - b. FICA: \$ _____ Medical Insurance \$ _____
 - i. How much of medical insurance premium is allocated for coverage of children?
\$ _____ per _____.
 - ii. Does medical insurance include medical, dental and/or other coverage? If so, what health care services are covered? _____
 - iii. What are the terms of the deductible payments required under the medical coverage provided? _____
7. Number of exemptions claimed: _____
8. Date employee last paid: _____
9. How many pay periods, if any, are employee's earnings retained by employer? _____
10. Earnings this calendar year through date employee was last paid, including bonus, if any:
 - a. Gross: \$ _____ Net: \$ _____
11. Is employee paid a bonus? _____ (yes or no) 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: _____
12. What pay increase, if any, has employee received in the past twelve months? _____
13. Nature of employment: _____
14. Date(s) of Hire/service: _____
15. 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 _____