



PAYROLL NO#: 01 - CITY OF ALAMO HEIGHTS

SORTED BY EMPLOYEE NO#

DATE: 4/01/2018 THRU 4/30/2018

CS-H. ARAND-	0.00	0.00	0.00	1386.46	0.00	0.00	0.00	0.00	0.00	1386.46
CANCER -	0.00	0.00	0.00	428.86	0.00	0.00	0.00	0.00	0.00	428.86
CITY LIFE -	0.00	0.00	527.41	0.00	0.00	0.00	0.00	0.00	527.41	0.00
DENTAL CHIL-	0.00	0.00	36.48	36.60	0.00	0.00	0.00	0.00	36.48	36.60
DENTAL FAM -	0.00	0.00	36.48	76.80	0.00	0.00	0.00	0.00	36.48	76.80
DENT COPAY -	0.00	0.00	48.64	0.00	0.00	0.00	0.00	0.00	48.64	0.00
DENT SPOUSE-	0.00	0.00	24.32	21.96	0.00	0.00	0.00	0.00	24.32	21.96
DENT CHILD -	0.00	0.00	317.98	437.06	0.00	0.00	0.00	0.00	317.98	437.06
DENTAL EMPL-	0.00	0.00	892.79	0.00	0.00	0.00	0.00	0.00	892.79	0.00
DENT FAMILY-	0.00	0.00	464.74	1207.64	0.00	0.00	0.00	0.00	464.74	1207.64
DENTAL SPOU-	0.00	0.00	220.14	245.52	0.00	0.00	0.00	0.00	220.14	245.52
FAM PROTECT-	0.00	0.00	0.00	463.94	0.00	0.00	0.00	0.00	0.00	463.94
GOLDS GYM -	0.00	0.00	0.00	362.02	0.00	0.00	0.00	0.00	0.00	362.02
HSA BANK -	0.00	0.00	0.00	5123.56	0.00	0.00	0.00	0.00	0.00	5123.56
HSA CHILD -	0.00	0.00	7330.20	4505.28	0.00	0.00	0.00	0.00	7330.20	4505.28
HSA EMPL -	0.00	0.00	21797.70	0.00	0.00	0.00	0.00	0.00	21797.70	0.00
HSA FAMILY -	0.00	0.00	1543.20	2551.28	0.00	0.00	0.00	0.00	1543.20	2551.28
HSA INITIAL-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HSA SPOUSE -	0.00	0.00	2700.60	3111.64	0.00	0.00	0.00	0.00	2700.60	3111.64
ICMA % RETI-	0.00	0.00	0.00	307.08	0.00	0.00	0.00	0.00	0.00	307.08
ICMA RETIRE-	0.00	0.00	0.00	2780.00	0.00	0.00	0.00	0.00	0.00	2780.00
LIFESECURE -	0.00	0.00	67.64	60.20	0.00	0.00	0.00	0.00	67.64	60.20
LT DISABLT-	0.00	0.00	1405.62	0.00	0.00	0.00	0.00	0.00	1405.62	0.00
MASA -	0.00	0.00	0.00	456.00	0.00	0.00	0.00	0.00	0.00	456.00
CH/SP LIFE -	0.00	0.00	0.00	47.52	0.00	0.00	0.00	0.00	0.00	47.52
CITY REIMBU-	0.00	0.00	0.00	9.66	0.00	0.00	0.00	0.00	0.00	9.66
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SHORT TERM -	0.00	0.00	0.00	659.63	0.00	0.00	0.00	0.00	0.00	659.63
TMRS -	0.00	0.00	69960.69	28655.71	0.00	0.00	0.00	0.00	69960.69	28655.71
VOL AD&D -	0.00	0.00	0.00	176.16	0.00	0.00	0.00	0.00	0.00	176.16
CRITICAL IL-	0.00	0.00	0.00	251.02	0.00	0.00	0.00	0.00	0.00	251.02
VIS CHILD -	0.00	0.00	43.38	39.06	0.00	0.00	0.00	0.00	43.38	39.06
VISION EMP -	0.00	0.00	195.21	0.00	0.00	0.00	0.00	0.00	195.21	0.00
VISION FAMI-	0.00	0.00	139.78	280.14	0.00	0.00	0.00	0.00	139.78	280.14
VISION SPOU-	0.00	0.00	53.02	42.46	0.00	0.00	0.00	0.00	53.02	42.46
VOL LIFE -	0.00	0.00	0.00	642.10	0.00	0.00	0.00	0.00	0.00	642.10
*TAXES*	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	362996.91	35532.17	0.00	0.00	0.00	0.00	362996.91	35532.17
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	394739.70	24473.91	0.00	0.00	0.00	0.00	394739.70	24473.91
MEDICARE -	0.00	0.00	394739.70	5723.77	0.00	0.00	0.00	0.00	394739.70	5723.77
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00