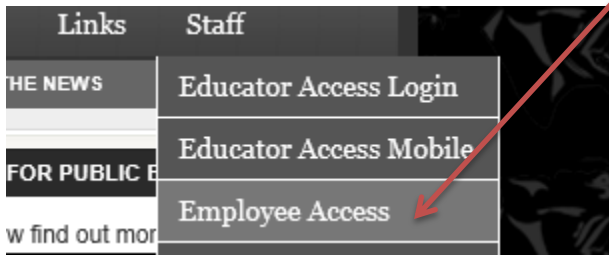
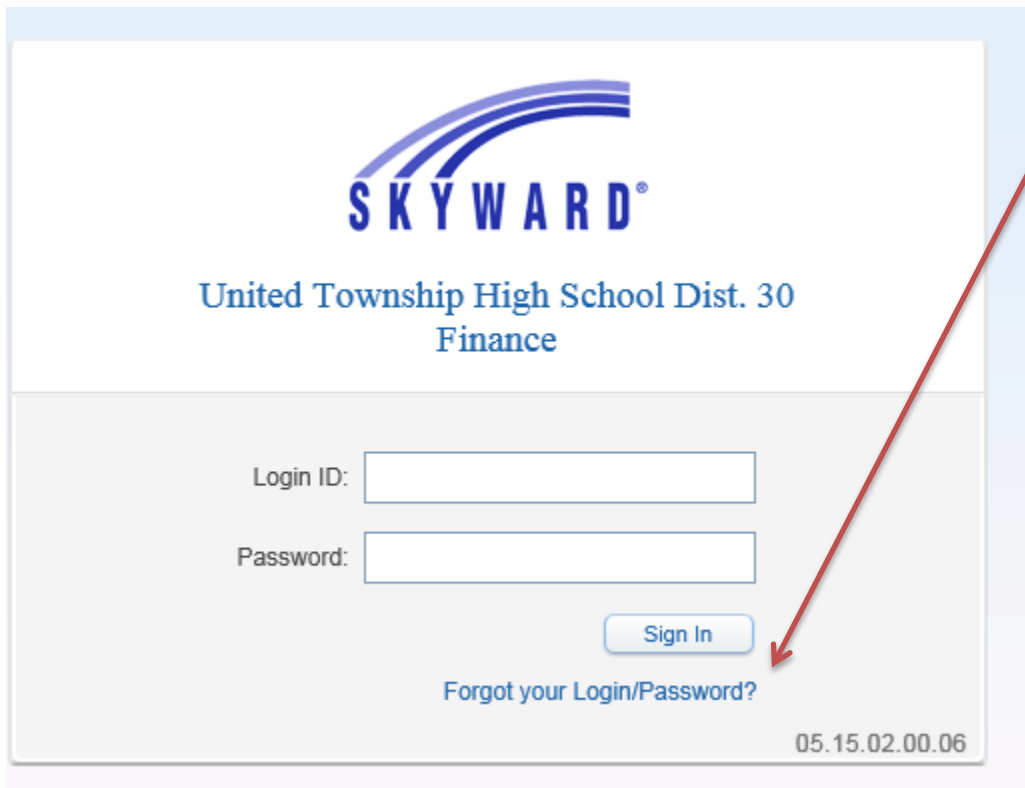


To View / Print your Advice of deposit or pay stub as it's commonly known, log into Employee Access, either from our website here or your desktop shortcut.

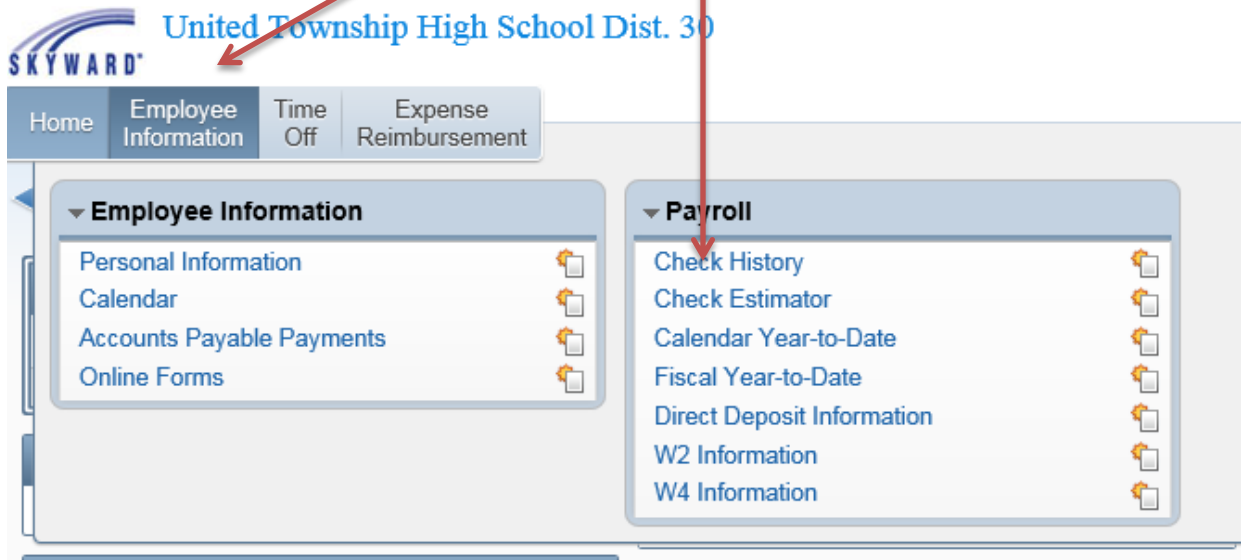


At the login below, enter your credentials, if you have forgotten, use the link here to have a reset link sent to your email.

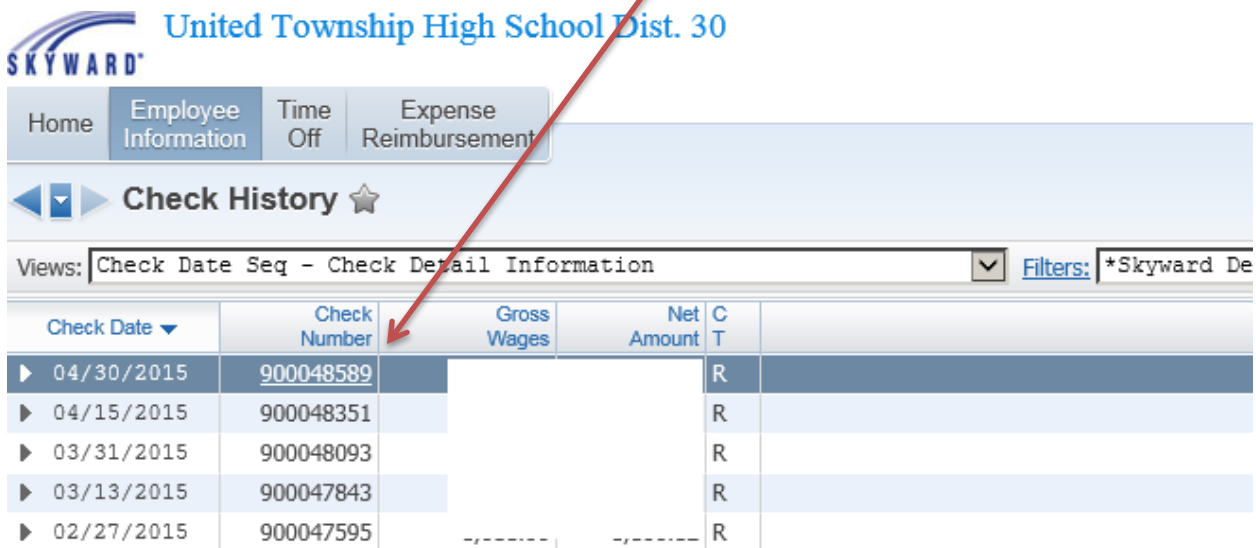


Once you are logged in, your screen may vary but should at least on top row these options: Home \ Employee Information \ Time Off \ Expense Reimbursement


To view or print the Advice of Deposit, click: **Employee Information**
click: **Check History**



On **Check History** screen choose the **check number** of the date you want to see



You will then see a full screen of the check shown below as an example.

If you choose to print the check, you will need to tell it if you want **Social Security Number** to print from the options on pop up screen after clicking here 

Check Information for .

Employer Information Name: UNITED TOWNSHIP HIGH SCHOOL DISTRICT 30 Address: 1275 AVENUE OF THE CITIES EAST MOLINE, IL 61244	Employee Information Name: <input type="text"/> Address: <input type="text"/>
---	--

Check Detail Information
Check Date: 04/30/2015 Gross Wages:
Check Number: 900048589 Net Amount:
Check Type: Regular

Taxable Wage Information

	Federal	State	FICA	Medicare
Gross Wages:	<input type="text"/>			
Minus Deductions that Decrease Tax:	<input type="text"/>			
Plus Taxable Benefits:	<input type="text"/>			
Taxable Gross Wages:	<input type="text"/>			

Pays

Description	Rate	Factor/Hours	Amount	Period End
SALARY	<input type="text"/>	<input type="text"/>	<input type="text"/>	04/16/2015

Deductions	Benefits																																																																																																										
<table border="1"><thead><tr><th rowspan="2">Description</th><th colspan="3">--Decrease Tax--</th></tr><tr><th>Amount</th><th>Fed</th><th>St</th><th>F/M</th></tr></thead><tbody><tr><td>DENTAL INS</td><td></td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>EE PD THIS-TCH</td><td></td><td>Y</td><td>Y</td><td></td></tr><tr><td>FEDERAL TAX</td><td></td><td></td><td></td><td></td></tr><tr><td>IA STATE TAX</td><td></td><td></td><td></td><td></td></tr><tr><td>MEDICAL - SINGL</td><td></td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>MEDICARE</td><td></td><td></td><td></td><td></td></tr><tr><td>U.T.E.A. - CERT</td><td></td><td></td><td></td><td></td></tr><tr><td>VISION</td><td></td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>Total:</td><td><input type="text"/></td><td></td><td></td><td></td></tr></tbody></table> <td><table border="1"><thead><tr><th rowspan="2">Description</th><th colspan="3">----Taxable----</th></tr><tr><th>Amount</th><th>Fed</th><th>St</th><th>F/M</th></tr></thead><tbody><tr><td>BD PD T.H.I.S.</td><td></td><td></td><td></td><td></td></tr><tr><td>BOARD PAID T.H.</td><td></td><td></td><td></td><td></td></tr><tr><td>LIFE INS 25,000</td><td></td><td></td><td></td><td></td></tr><tr><td>MED INS - BD PD</td><td></td><td></td><td></td><td></td></tr><tr><td>MEDICARE</td><td></td><td></td><td></td><td></td></tr><tr><td>TRS 2.2</td><td></td><td></td><td></td><td></td></tr><tr><td>TRS CERTIFIED</td><td></td><td></td><td></td><td></td></tr><tr><td>VISION - BD PD</td><td></td><td></td><td></td><td></td></tr><tr><td>Total:</td><td><input type="text"/></td><td></td><td></td><td></td></tr></tbody></table></td>	Description	--Decrease Tax--			Amount	Fed	St	F/M	DENTAL INS		Y	Y	Y	EE PD THIS-TCH		Y	Y		FEDERAL TAX					IA STATE TAX					MEDICAL - SINGL		Y	Y	Y	MEDICARE					U.T.E.A. - CERT					VISION		Y	Y	Y	Total:	<input type="text"/>				<table border="1"><thead><tr><th rowspan="2">Description</th><th colspan="3">----Taxable----</th></tr><tr><th>Amount</th><th>Fed</th><th>St</th><th>F/M</th></tr></thead><tbody><tr><td>BD PD T.H.I.S.</td><td></td><td></td><td></td><td></td></tr><tr><td>BOARD PAID T.H.</td><td></td><td></td><td></td><td></td></tr><tr><td>LIFE INS 25,000</td><td></td><td></td><td></td><td></td></tr><tr><td>MED INS - BD PD</td><td></td><td></td><td></td><td></td></tr><tr><td>MEDICARE</td><td></td><td></td><td></td><td></td></tr><tr><td>TRS 2.2</td><td></td><td></td><td></td><td></td></tr><tr><td>TRS CERTIFIED</td><td></td><td></td><td></td><td></td></tr><tr><td>VISION - BD PD</td><td></td><td></td><td></td><td></td></tr><tr><td>Total:</td><td><input type="text"/></td><td></td><td></td><td></td></tr></tbody></table>	Description	----Taxable----			Amount	Fed	St	F/M	BD PD T.H.I.S.					BOARD PAID T.H.					LIFE INS 25,000					MED INS - BD PD					MEDICARE					TRS 2.2					TRS CERTIFIED					VISION - BD PD					Total:	<input type="text"/>			
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In this pop up, it is always best to take default, and **NOT** print **Social Security Number**, unless you absolutely need it for some reason.

Print 04/30/2015 Check Information

04/30/2015 Check Information

Don't print Social Security Number
 Print last 4 digits of Social Security Number
 Print full Social Security Number

You must enter the SSN for authentication in order to print the full SSN:

[Print](#)
[Back](#)

If you print Social Security Number, be sure to have physical possession of the check at all times until you present it wherever you need to.