

DEFENSE FINANCE AND ACCOUNTING SERVICE MILITARY LEAVE AND EARNINGS STATEMENT

ID	NAME (Last, First, MI)	SOC. SEC. NO.	GRADE	PAY DATE	YRS SVC	ETS	BRANCH	ADSN/DSSN	PERIOD COVERED
					11	230204	ARNG	5570	CHK DT 220215

ENTITLEMENTS		DEDUCTIONS		ALLOTMENTS		SUMMARY		
Type	Amount	Type	Amount	Type	Amount	+Amt Fwd		
A B C D E F G H I J K L M N O	BASIC PAY			FICA TAX	.56	+TOT ENT		.96
		.96		STATE INC TAX	.12	-TOT DED		.87
				TSP CONTRIBUTION	.19	-TOT ALMT		
						=NET AMT		.09
						-CR FWR		
						=EOM PAY		
TOTAL			.96			DIEMS	RET PLAN	

FED TAXES	Wage Period	Wage YTD	M/S	AGCY-AUTO - is the Agency Automatic contribution and shows whether or not the SM is in the Blended Retirement System. If they are it will have a dollar amount 1% base pay. If they are not it will show ".00". This SM is IN THE BRS	Other Deds	Other Income	Tax YTD	
	.23	.75			.00	.00	.00	
FICA TAXES	Wage Period	Soc Wage YTD	Soc T		Wage YTD	M/S	Ex	Tax YTD
	.96	.62			.75			.14
PAY DATA	BAQ Type	BAQ Depn	VHA Zip		AS Type	Charity YTD	TPC	PACIDN
	W DEP	CHILD	000/0				A	
TRADITIONAL PLAN (TSP)	Base Pay Rate	Base Pay C			ent	Bonus Pay Rate	Bonus Pay Current	
	3				.00	0	.00	
ROTH PLAN	Base Pay Rate	Base Pay C			ent	Bonus Pay Rate	Bonus Pay Current	
	6				.00	0	.00	
CONTRIBUTIONS TOTALS	YTD Deductions	YTD			AGCY-AUTO	YTD TSP AGCY-MATCH		
	.61				.96	.83		
CM AGCY CONTR	AGCY-AUTO				TS Bal	Lv Lost	Lv Paid	Use/Lose
	4.91					.0	.0	4.0

REMARKS: YTD ENTITLE **.34** YTD DEDUCT **.22**

YOUR CHECK WAS SENT TO: [REDACTED]

DIRECT DEPOSIT DATE: 02/15/22 AMOUNT: \$ [REDACTED].09

* AS OF 05 FEB 17, 000 HIGH TEMPO DEPLOYMENT DAYS ACCRUED SINCE 1 OCT 00 (OR SINCE ENTERING MILITARY SERVICE)

TOTAL PERFORMANCE FY 22: UTA 20 AFTP 00 ET 00 ATA 00

JPT 00 AATA 00 AANT 00 RMA 00 SUP IDT TNG 00

MCOFT 00 RMAM 00 AT/ADT 005 FHDA 000

INACTIVE DUTY TRAINING 05 FEB 22 1 05 FEB 22 2 06 FEB 22 1

INACTIVE DUTY TRAINING 06 FEB 22 2

YOUR CURRENT STATE CLAIMED IS: GEORGIA

SERVICEMEMBER GROUP LIFE INSURANCE COVERAGE: \$400,000

YOUR SGLI DEDUCTION INCLUDES TRAUMATIC INJURY PROTECTION (TSGLI)

SPOUSE SGLI COVERAGE: NONE

PLEASE VERIFY YOUR STATE OF LEGAL RESIDENCE FOR STATE INCOME TAX PURPOSE. CONTACT YOUR PAYROLL OFFICE TO FILE A NEW DD FORM 2058 TO CHANGE/ESTABLISH THE CORRECT STATE IMMEDIATELY.

-FOR UP-TO-DATE INFORMATION ON 2020 SOCIAL SECURITY TAX DEFERRAL COLLECTIONS VISIT [HTTPS://WWW.DFAS.MIL/TAXES/SOCIAL-SECURITY-DEFERRAL/MILITARY-FAQS/](https://www.dfas.mil/taxes/social-security-deferral/military-faqs/)

-MILTAX SERVICES, FOR PERSONALIZED TAX SUPPORT VISIT WWW.MILITARYONESOURCE.MIL

WWW.DFAS.MIL