

# Wage Chart

Employer's Statement of Wage Earnings

Virginia Workers' Compensation Commission  
333 E. Franklin St., Richmond, Virginia 23219

The boxes to the right are for the use of the insurer.	Reserved	VWC File Number 000-00-00
	Insurer Claim Number	

	Employee	Address					
Name of Employee John P. Hurtworker						Date of Accident 07/10/2004	Date of Hire
	Employer	Address					
Name of Employer Virginia Workers' Compensation Commission							

**PLEASE REFER TO THE FILING INSTRUCTIONS PRINTED ON THE BACK OF THIS FORM**

Week No.	Week Ending Date	Days Worked	Gross amount paid, including overtime	Week No.	Week Ending Date	Days Worked	Gross amount paid, including overtime	Week No.	Week Ending Date	Days Worked	Gross amount paid, including overtime
1	07/18/03	5	200.00	19	11/21/03	6	240.00	37	03/26/04	6	240.00
2	07/25/03	6	240.00	20	11/28/03	5	200.00	38	04/02/04	5	200.00
3	08/01/03	5	200.00	21	12/05/03	5	200.00	39	04/09/04	5	200.00
4	08/08/03	5	200.00	22	12/12/03	5	200.00	40	04/16/04	5	200.00
5	08/15/03	5	200.00	23	12/19/03	5	200.00	41	04/23/04	5	200.00
6	08/22/03	6	240.00	24	12/26/03	5	200.00	42	04/30/04	5	200.00
7	08/29/03	5	200.00	25	01/02/04	4	160.00	43	05/07/04	5	200.00
8	09/05/03	5	200.00	26	01/09/04	5	200.00	44	05/14/04	5	200.00
9	09/12/03	5	200.00	27	01/16/04	5	200.00	45	05/21/04	4	160.00
10	09/19/03	5	200.00	28	01/23/04	5	200.00	46	05/28/04	6	280.00
11	09/26/03	5	200.00	29	01/30/04	5	200.00	47	06/04/04	5	220.00
12	10/03/03	5	200.00	30	02/06/04	5	200.00	48	06/11/04	5	220.00
13	10/10/03	5	200.00	31	02/13/04	4	160.00	49	06/18/04	5	220.00
14	10/17/03	6	288.00	32	02/20/04	6	296.00	50	06/25/04	5	220.00
15	10/24/03	6	294.00	33	02/27/04	5	200.00	51	07/02/04	5	220.00
16	10/31/03	5	200.00	34	03/05/04	5	200.00	52	07/09/04	4	176.00
17	11/07/03	5	200.00	35	03/12/04	5	200.00	<b>Totals</b>			<b>\$10,874.00</b>
18	11/14/03	5	200.00	36	03/19/04	5	200.00				

Value of perquisites for entire year: \_\_\_\_\_ Total gross earning \$ 10,874.00 Total weeks worked 52

Bonuses \$ 500.00    Electricity \$ \_\_\_\_\_  
 Meals/Lodging \$ \_\_\_\_\_    Water \$ \_\_\_\_\_  
 Meals Only \$ \_\_\_\_\_    Telephone \$ \_\_\_\_\_  
 Temporary Lodging \$ \_\_\_\_\_    Uniforms \$ \_\_\_\_\_  
 House Rent \$ \_\_\_\_\_    Laundry \$ \_\_\_\_\_  
 Tip Income \$ \_\_\_\_\_

Total value of perquisites \$ 500.00

Total earnings & perquisites \$ 11,374.00

*VWC use only:*

AWW: \_\_\_\_\_  
CR: \_\_\_\_\_

INSURER OR EMPLOYER (include name & signature)	Date	Telephone number
------------------------------------------------	------	------------------