

U.S. CUSTOMS AND BORDER PROTECTION

00687 - 0000-0

FORM AD-334
USDA
(REV. 8/17)

| | | | | | | | | | |
|------------------------------------|---|-----------|---------------------------------------|------------------------|--|--------------------------|-------------------|-----------|------------|
| SOCIAL SECURITY NO. ***-**-**** | PAY PERIOD DATE MO DA YR MO DA YR 04/10/2022 04/23/2022 | P/P 08 | T&A CONTACT POINT CU-72-0930-49-50 | ACCT. STAT. 0010 | ORGANIZATIONAL STRUCTURE CU-36-40-0010 | PERSNL OFFICE 2885 | PAY PLAN GS | GR. 12 | STEP 03 |
|------------------------------------|---|-----------|---------------------------------------|------------------------|--|--------------------------|-------------------|-----------|------------|

| | | | | | | | | | |
|-----------------------|------------|----------------------|--------------------------------|---|---------------------------------|--|--|--|--|
| SALARY \$84,655.00 | RATE PA | TYPE EMPL. F/T | SCD FOR LEAVE 12/06/2002 | RET. DEDUCTIONS THIS APPOINTMENT \$5,976.43 | STATEMENT OF EARNINGS AND LEAVE | | | | |
|-----------------------|------------|----------------------|--------------------------------|---|---------------------------------|--|--|--|--|

| EARNINGS AND DEDUCTIONS | | | | | | | |
|-------------------------|--|--------|-------------|----------|------------|--|--|
| ITEM | | HOURS | | AMOUNT | | | |
| CODE | DESCRIPTION | P/P | YR. TO DATE | P/P | YR TO DATE | | |
| 01 | REGULAR TIME | 71.00 | 595.50 | 2,879.76 | 24,125.64 | | |
| 11 | NIGHT DIFFERENTIAL | | 3.00 | | 12.18 | | |
| 21 | OVERTIME - PREMIUM RATE | | 41.50 | | 1,788.51 | | |
| 34 | FLSA | | 41.50 | | 799.28 | | |
| 45 | COST OF LIVING ALLOW. | 80.00 | 720.00 | 96.80 | 873.60 | | |
| 61 | ANNUAL LEAVE | | 25.00 | | 1,014.00 | | |
| 62 | SICK LEAVE | | 12.50 | | 507.00 | | |
| 66 | OTHER LEAVE | 9.00 | 87.00 | 365.04 | 3,479.76 | | |
| ** ** | **** PAY PERIOD HOURS & GROSS PAY **** | 160.00 | | 3,341.60 | 32,599.97 | | |
| 75 02 | RETIREMENT | | | 25.96 | 233.02 | | |
| 75 15 | TSP-FERS | | | 788.00 | 7,092.00 | | |
| | *AMT BASED ON FIXED AMT | | | | | | |
| 76 | SOCIAL SECURITY (OASDI) | | | 192.97 | 1,893.21 | | |
| 77 | FEDERAL TAX EXEMPTS MS | | | | | | |
| | EXTRA FEDERAL TAX | | | 50.00 | 450.00 | | |
| 78 | ST TAX PR EXEMPTS S99 | | | | | | |
| | EXTRA STATE TAX | | | 176.00 | 1,584.00 | | |
| 81 | FEGLI- COVERAGE \$ \$87,000 | | | 13.92 | 124.96 | | |
| 81 09 | LIFE INS-COVERAGES | | | 11.52 | 103.68 | | |
| 83 | FEHBA - ENROLL CODE 892 | | | 103.06 | 927.54 | | |
| 83 10 | DENTAL PLAN | | | 12.61 | 113.31 | | |
| 83 11 | VISION PLAN | | | 16.64 | 149.58 | | |
| 87 | UNION/ASSOCIATION DUES 10 0188 | | | 18.36 | 164.85 | | |
| 88 | CHKING/SAVING ***** | | | 350.00 | 3,150.00 | | |
| 88 40 | TSP LOAN REPAY (FED) | | | 161.86 | 1,456.74 | | |
| 97 | MEDICARE TAX WITHHELD | | | 45.13 | 442.77 | | |
| ** ** | ***** TOTAL DEDUCTIONS ***** | | | 1,966.03 | 17,885.66 | | |
| ** ** | ***** NET PAY ***** | | | 1,375.57 | 14,714.31 | | |
| ** ** | DD/EFT ROUTING NO. ***** | | | | | | |

| YEAR TO DATE LEAVE STATUS | | | | | YEAR TO DATE LEAVE STATUS | | | | | PT. HRS UNAPP | | MAX. C/O | |
|------------------------------|--|----------|----------|----------|---|---------|-------|---------|--------------------------|------------------|--|-------------|---------|
| TYPE | | ACCRUED | USED | BALANCE | TYPE | ACCRUED | USED | BALANCE | PROJECTED USE OR LOSE | | | | |
| CREDIT HOURS-BY PAY PERIOD | | | | | ANN | 64.00 | 25.00 | 260.00 | 164.00 | | | 240 00 | |
| RELIGIOUS COMP-BY PAY PERIOD | | | | | SICK | 32 | 12.50 | 636.25 | | | | LEAVE CATEG | |
| TRAVEL COMP-BY PAY PERIOD | | | | | COMP | | | | | | | 8 | |
| MILITARY | | | | | DIRECT DEPOSIT IS FAST, SAFE AND CONVENIENT. FILE, RECEIVE REFUNDS, AND PAY YOUR TAXES ELECTRONICALLY. CBP POLICY PROHIBITS ALL FORMS OF SEX.ABUSE OF INDIV.IN CBPCUSTODY,INCL.INHOLDINGFACILITIES, DURING TRANS.,AND DURING PROC.ALL SEX.ABUSE ALLEGA.ARE CONS.SIG.INCID.ANDMUST BE IMMED.REP.TO THE COMM.SIT.RM.AND THE JOINTINTAKECTR.FORADD.INFO VISIT WWW.CBP.GOV/ABOUT/CARE-IN-CUSTODY. | | | | | | | | REMARKS |
| TIME OFF AWARD | | | | | | | | | | | | | |
| BPAPRA COMPENSATORY | | | | | | | | | | | | | |
| BPAPRA OBLIGATED DEBT | | | | | | | | | | | | | |
| DISABLED VETERAN LEAVE | | | | | | | | | | | | | |
| TYPE | | 1ST YEAR | 2ND YEAR | 3RD YEAR | BALANCE | | | | | | | | |
| REST. ANN. LEAVE HRS. | | | | | | | | | | | | | |
| NAME AND ADDRESS | | | | | | | | | | | | | |

MAURY R ARROYO
URB BRISAS DEL NORTE 603
CALLE URUGUAY
MOROVIS, PR 00687-0000

Official Pay Date

05/05/2022