Industrial Disability Leave/ Worker's Compensation Temporary Disability

| Name: | | | Comparis | Comparison Estimate Date of Injury: | | | | |
|----------------------------|---------------------------|---|---------------------|--|--------------------------|--------------------------------|-------------|------------------------------------|
| SSN: | | | | ing Unit: | | Date: LDW: | | |
| Waiting Period: | | | TD Rate | - | | LDW. | | |
| waiting | 1 0110d. | | _ | Work Schedule: | YES N | No | | |
| LEAVE | CREDITS AVA | ILABLE AS OF THE DATE | | | | | | |
| Sick Leav | | | | | | | | |
| Vacation: | | | Direct De | posit: | YES: | NO: | | |
| Overtime (CTO): | | 2331.23 | | oe administratively | | | | |
| Personal | | | Tax Statu | • | ., | cuirecteu, | | |
| Holiday C | - | | Federal: | \$ | Additional: | \$ | | |
| - | dits Available: | | State: | \$ | Additional: | \$ | | |
| | | | | • | _ | | | |
| INDUST | RIAL DISABIL | ITY LEAVE SECTION (IDL |) - Paid by | CSUF | | | | |
| | | eave (IDL) - This provides a be | | | " which is the emp | oloyee's gross salary le | ess | |
| | _ | leducted for mandatory deductions | | | | | | |
| | gross pay. | • | , 0 | , | • | | | |
| The follo | owing are <u>estimate</u> | <u>s</u> of monthly net benefits. | | | | | | |
| | | | | | | | | |
| (1) First | t 22 days: Ther | n choose 1 or 2 | \rightarrow | > (1) After 22 | 2 days: | | | |
| | | Gross Monthly Salary | | | \$ - | 2/3 Gross Mont | hly Salary | |
| Less | | Federal Tax withholding | | Less | \$ - | Retirement con | tribution | |
| | | State Tax withholding | | | • | (based on full s | alary) | |
| | | FICA/Medicare withholding | ı \ | | \$ - | Voluntary dedu | ctions(less | s TSA) |
| | | Retirement contribution | | TOTAL | \$ - | Est. Monthly Ne | et Benefit | |
| | | Voluntary deductions (less | TSA) | λı. | | | | |
| TOTAL | \$ - | Est. Monthly Net Benefit | | [™] (2) IDL wit | h Sick Leave S | Supplementation | | ω_ |
| | | | | Plus | \$ - | Supplementation | n | Ç Ç |
| | | | | Less | | 0 *Federal Tax | | O Z |
| | | | | | | 0 *State Tax | | CAN USE SICK ONLY |
| Sick credi | ts needed for a FU | LL MONTH of supplementation: | | | | 0 *FICA/Medicare | ا د | ~ |
| 168 hrs/21 days = 56 hours | | = 56 hours | | | | 0 Voluntary deductions (TSA) | | |
| 176 hrs/22 days = 59 hours | | | TOTAL | | \$ - Monthly Net Benefit | | | |
| | | | | | *computation | on on supplemental income only | | |
| | | | | | | | | |
| WORKE | ERS' COMPEN | SATION SECTION (TD) - F | aid by Sed | gwick. | | | | |
| | | on (TD) - This benefit pays 2/3 | | | rnings not to exc | eed a certain amoun | t | |
| | | ee is off work. The following are | | | | | | |
| | | | | | | | | |
| (3) Wor | kers' Compens | sation | | | | | | |
| ` , | \$ - | Monthly Temporary Disabil | ity (TD) Payn | nent (based or | 1 30 day) | Daily Rate: | \$0.00 | |
| Less | \$ - | Retirement Contribution (E | mployee mu | st pay directly | y to PERS.) | • | | |
| Less | | Health Insurance (Paid by | employee - I | No State Cont | tribution.) | | | |
| TOTAL | \$ - | Estimated Monthly Net Inc | ome | | Employee pays | s benefits | | |
| | | <u> </u> | | | | | | |
| (4) Wor | kers' Compens | sation with Supplementat | ion - Supple | ementation p | oaid by CSUF | | l | D ₂ |
| | \$ - | Monthly Temporary Disabil | ity (TD) Payn | nent | Hourly Rate \$ | | _ | ≱ ເ |
| Plus | | Supplementation | | | | | | 유토론 |
| Total | \$ - | Gross Benefit | | | | | | CAN USE / AVAILABLE I CREDIT |
| Less | \$ - | *Federal Tax withholding o | n <u>supplemen</u> | tal income only | <u>y.</u> | | | N USE A LABLE LI CREDITS |
| | \$ - | - *State Tax withholding on supplemental income only. | | | | | | EALL ELEAVE |
| | | *FICA/Medicare withholdin | g on <u>supplem</u> | ental income | only. | | | <u> </u> |
| | | *Retirement contribution | | | - | | | |
| | | Voluntary deductions | | | Employees pay | / | | |
| TOTAL | \$ - | Estimate Monthly Net Inco | me | | partial benefits | | | |
| | | | | | | | | |
| TOTAL | CREDITS NEE | DED FOR A FULL MONTH | I OF SUPPL | EMENTATIO | ON: I | HOURS | | |
| | | | | | | | | |
| | *computation or | n supplemental income only | | Prepared by | : | Date: | | |