

Pay Slip

Emp. No. Name Dept Acc. No.

| Earnings | Number | Amount | Deductions | Amount |
|----------------|--------|--------|-----------------------------|--------|
| | | | Deduct Income (tax,non SFF) | |
| | | | Lesson under target (Tax) | |
| Total Earnings | | | Total Deduction | |

| |
|--------------|
| Payroll Date |
| |

| |
|------------|
| Net To Pay |
| |

| YTD. Income | YTD. Tax | YTD.Social Security | YTD. Prov Fund | YTD - Co. Contr ib. PF |
|-------------|----------|---------------------|----------------|------------------------|
| | | | | |

Authorized Person

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