**Business Name** Date: \*\*/\*\*/\*\*\*\*

Name of Employee

Designation & Department Joining date Confirmation date

**Pay Slip for the month of ---------------------** No. working days

|  |  |
| --- | --- |
| Pay Amount (A) | Pay Deductions (B) |

|  |  |  |  |
| --- | --- | --- | --- |
| Basic pay (method…………………) | \*\*\*\*\*\*\*\* | Income Tax | \*\*\*\*\*\*\*\* |
| House Rent Allowance | \*\*\*\*\*\*\*\* | Professional Tax | \*\*\*\*\*\*\*\* |
| Conveyance | \*\*\*\*\*\*\*\* | Provident Fund | \*\*\*\*\*\*\*\* |
| Utilities Allowance | \*\*\*\*\*\*\*\* | Personal Loan | \*\*\*\*\*\*\*\* |
| Bonus | \*\*\*\*\*\*\*\* | Other Loan | \*\*\*\*\*\*\*\* |
| Total Basic Salary | **\*\*\*\*\*\*\*\*** | **Gross Deductions** | **\*\*\*\*\*\*\*\*** |
| Education Allowance | \*\*\*\*\*\*\*\* | Advance salary | \*\*\*\*\*\*\*\* |
| Fuel | \*\*\*\*\*\*\*\* | Deduction against Leave | \*\*\*\*\*\*\*\* |
| Leave Encashment | \*\*\*\*\*\*\*\* | EOBD (Employee Old Age Benefit Deduction) | \*\*\*\*\*\*\*\* |
| Car Allowance | \*\*\*\*\*\*\*\* | Other Deductions | \*\*\*\*\*\*\*\* |
| Maintenance Allowance | \*\*\*\*\*\*\*\* |  |  |
| Incentive / Commission | \*\*\*\*\*\*\*\* |  |  |
| Reimbursement | \*\*\*\*\*\*\*\* |  |  |
| Other Allowances | \*\*\*\*\*\*\*\* |  |  |
| Advance against Salary | \*\*\*\*\*\*\*\* |  |  |
| Cash salary / incentive | \*\*\*\*\*\*\*\* |  |  |
| Total Salary | **\*\*\*\*\*\*\*\*** | **Total Deductions** | **\*\*\*\*\*\*\*\*** |

Mark \* for important notes or facilities provided by employer

|  |  |
| --- | --- |
| Net Amount Transfer to account (Total Earnings – Total Deductions)  *(Bank Account No. (\*\*\*.\*\*\*\*\*\*\*\*/\*\*)* | \*\*\*\*\*\*\*\* |

**Approved By**

|  |  |  |
| --- | --- | --- |
| *(Sign Here)* | *(sign & Stamp)* | *(Sign & Stamp)* |
| Employee : | **Account Manager:** | **H R Manager:** |