PAY SLIP

		Year	Month		
Name		Social security number		Telephone number	
Address		Post code	Town		
Company		Employee no.		Date	
Salary period	Tax table	Account no.		Date of payment	
	•	•			

Wages type	Terms		Date	Quantity/INFO	Pr	rice/Unit	Amount
							00
							00
							00
							00
							00
							00
							00
							00
							00
							00
							00
							00
aid holiday Acc. Gross income		Tax %		Tax survey pay	00	Gross income	00
Jnpaid holiday	Acc. Tax	Tax adjustme	ent	Employer's contribution	00	Preliminary pay	
Saved holiday	Acc. Employee's contribution	Extras		Personal fee		Net income	00

Absence

Comp. leave

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Hours of work

Remaining time