

# STATEMENT OF SALARY AND WAGES

Earnings Statement for the Period: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tax ID/Reg No: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Employee ID: \_\_\_\_\_

Designation: \_\_\_\_\_

Earnings		Deductions	
Description	Amount	Description	Amount
Basic Salary		Provident Fund	
House Rent Allowance		Income Tax (TDS)	
Medical Allowance		Professional Tax	
Conveyance Allowance		Health Insurance	
Special Allowance		Other Deduction: _____	
Overtime / Bonus		Other Deduction: _____	
<b>Total Earnings (A)</b>		<b>Total Deductions (B)</b>	

Gross Earnings (A): \_\_\_\_\_

Total Deductions (B): \_\_\_\_\_

Net Pay Salary (A - B): \_\_\_\_\_

**Net Pay in Words:**  
\_\_\_\_\_

\_\_\_\_\_  
Authorized Employer Representative  
Signature

Date: \_\_\_\_\_

Employee Signature

Date: \_\_\_\_\_