

Payslip

Employee Name:

Employee ID:

Department:

Designation:

Pay Period:

Payment Date:

Bank Account No:

Tax/PAN No:

EARNINGS	AMOUNT	DEDUCTIONS	AMOUNT
Basic Salary		Income Tax / TDS	
House Rent Allowance (HRA)		Provident Fund (PF)	
Conveyance Allowance		Professional Tax	
Medical Allowance		Health Insurance	
Special Allowance		Other Deductions	
Total Earnings		Total Deductions	

NET PAY

EMPLOYER SIGNATURE

EMPLOYEE SIGNATURE