

Month / Year													
Deductions													
ESI	PF	PT	TDS	Society	Insu ranc e	Salary	Fines	Damages / Loss	Others	Total	Net Pay able	Mode of Payment Cash/ Cheque no.	Employee Signature/ Thumb Impression
25	26	27	28	29	30	31	32	33	34	35	36	37	38

Signature of the employer/ Authorised Signatory.
