COMPANY NAME:	
Address:	
Pay S	lip
Employee Name	Total Working Days
Employee ID	LOP Days
Designation	Paid Days
Department	Bank Name
Date of Joining	Bank A/c No
Gross Salary	
Earnings	
Basic Salary	
House Rent Allowances	
Conveyance Allowances	
Medical Allowances	
Special Allowances	
Gross Salary	
Net Pay	
Amount in Wo	ords

Employee Signature

Employer Signature