

Company Name

Company Address:
 Fax #: 555-555-5555
 Phone #: 555-555-5555
 www.websiteaddress.com

SALARY CERTIFICATE

Signature of employee: -----

This is to certify that Mr. / Mrs ----- S/o /
 D/o / W/o Mr. ----- residing at -----
 -----whose
 signature appears above is a permanent employee of -----
 ----- (name of
 department / institution) and he/she has drawn Pay and Allowances are as follows for the
 month of----- (month and year):

GROSS SALARY (Rs.)		DEDUCTIONS (Rs.)	
Basic Pay		EPF	
DA		Insurance	
HRA		Home loan	
Medical Allowance		Car loan	
Others / Misc		Others / Misc	
Gross Salary (1)		Total Deduction (2)	
NET SALARY (1-2) = Rs. ----- (Net Salary Rupees ----- Only)			

Date of birth : -----
 Date of joining in the present employment : -----
 Present designation : -----
 Date of retirement : -----
 This salary certificate issued for : -----

For -----

Signature and Designation of Officer Authorised

Place:
 Date:

Office Stamp:

