

Salary Statement for the year 2019-2020

Name of Employee (in block letters)

PAN No.

Designation School / Office

Residential Status

S.N.	Paid Month	Pay	G P	P P/S P	D A	HRA	Medical	CCA	Conv.		Total (3 to 11)	GPF Subs.	GPF Adv.	GIS	PLI/LIC	Adv.	Loan	Income tax paid	Total (13 to 19)	Net (12-20)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
1	Mar. paid in Apr.																				
2	Apr. paid in May																				
3	May paid in June																				
4	June paid in July																				
5	July paid in Aug.																				
6	Aug. paid in Sep.																				
7	Sep. paid in Oct.																				
8	Oct. paid in Nov.																				
9	Nov. paid in Dec.																				
10	Dec. paid in Jan.																				
11	Jan. paid in Feb.																				
12	Feb. paid in Mar.																				
13																					
14																					
15																					
16																					
17																					
	GRAND TOTAL																				

Signature of Employee

Signature of D.D.O. with Stamp