

# Certificate of Earnings



**Private and Confidential**

**To Be Completed by the Employer**

Employee's Name		National Insurance Number	
Employee's Address		Start Date of this Employment	

Please fill in this form showing your employee's earnings.

For monthly paid staff please provide the last 2 months earnings.

For weekly paid staff please provide the last 5 weeks earnings.

For four weekly paid staff please provide details of the last three amounts that you paid.

Period Covered		Hours Worked	Gross Pay	National Insurance	Income Tax	Pension Contribution	Tax Credit	Net Pay
From	To							

Gross Income paid to this employee for the current financial year		Method of Payment e.g. cash, cheque, bacs	
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If your employee receives a bonus, profit sharing or tips please state the amount and how often it is paid	£	Frequency	
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I certify this to be a correct statement of the earnings paid to this employee		When completed return to: Woking Borough Council Benefits Section Civic Offices Gloucester Square Woking Surrey GU21 6YL
Signature of employer		
Business Address	Company Stamp	