

[Company Letter Head]

[Email Id]

Contact Number:

Date:

To Whom It May Concern

This is to certify that Mr. /Ms. [Employee Name]_____ Employee ID [Number], [Identification Number] is working', with [Company Name] _since [Date, Month & Year of Joining] _She/he is a Permanent employee of the company and is serving as [Designation] in the [Department Name]. Currently, she/he is drawing a monthly salary as per the following breakup:

We are issuing this letter at the request of our employee and do not hold any liability on behalf of this letter or part of this letter on our company.

Gross Salary (Rs.)		Deductions (Rs.)	
Basic Pay		EPF	
DA		Professional Tax	
HRA		TDS	
Medical Allowance		Other deductions	
Other/ Misc.		Total deductions (2)	
Gross Salary (1)			
Net Salary (1-2)			
Net Salary [Enter in Words]			

[Name of the Issuer]

[Designation the Issuer]

[Signature of the Issuer]

[Office Stamp]

[Signature of the employee]