

Salary Payment Approval Sheet

Department	_____	Month	_____
Prepared By	_____	Date	_____/_____/____

Employee Salary Details

#	Employee Name	Employee ID	Designation	Basic Salary	Allowances	Deductions	Net Pay
1	_____	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____	_____
Total				_____	_____	_____	_____

Approvals

Prepared By	Checked By	Approved By
Signature: Name: _____ Date: ____/____/____	Signature: Name: _____ Date: ____/____/____	Signature: Name: _____ Date: ____/____/____

Important Notes:

- Ensure all salary components and deductions are accurately calculated and verified.
- Obtain required approvals before processing salary payments.
- This document should be treated as confidential and handled accordingly.
- Keep a signed and dated copy for records and audit purposes.
- Any discrepancies should be resolved prior to final approval.