

Standard Payroll Payment Approval Form

Payroll Period: _____
Department: _____

Prepared By: _____
Date Prepared: _____

Employee Payment Details

#	Employee Name	Employee ID	Position	Gross Pay	Deductions	Net Pay	Remarks
1	_____	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____	_____

Summary

Total Gross Pay: _____
Total Deductions: _____
Total Net Pay: _____

Approvals

Prepared By
Date: _____

Checked By
Date: _____

Approved By
Date: _____

Important Notes

- This form must be reviewed and approved by authorized personnel before any payroll disbursement.
- Verify all employee details and payment calculations for accuracy.
- Retain the approved form for future audit and compliance purposes.
- Any manual alterations should be initialed and dated by the approver.