

Dummy Payslip Request Form

Name:	
Surname:	
Job Title:	
Rate Per Hour:	
Hours	
Total Income	

Personal Contributions to reflect on payslip:

Medical Aid :	
Provider and plan:	
Total Medical Aid Contribution:	
Dependents	
Adult/s:	
Nature of relationship (spouse, parent, etc):	
No. of Children:	
Retirement Annuity monthly contribution:	

Travel (Log Book Compulsory) - for car allowances

Vehicle Make and Model:	
Vehicle Purchase Price:	
Business km's per month (ave monthly):	
Personal km's per month (ave monthly):	

Please note: Our Dummy Payslips do not reflect claims. This is a variable that will affect the nett from month to month. The final dummy payslip will reflect "worst case scenario" but values are also subject to change based on tax tables, annual income, etc.