## CERTIFICATE OF EARNED INCOME PRIVATE AND CONFIDENTIAL

## To be completed by employee: Name: Address: Employee/Works Number: NINO: Signature: To be completed by employer: Iwould be grateful if you could assist your employee by confirming the details above, providing the information requested below and returning it to: Glasgow City Council, PO Box 36, 45 John Street, Glasgow G1 1JE If you hold a National Insurance Number (NINO) which is different to that shown above please insert it here: Start date of employment **OR** Date of Increase: Please indicate how often the employee is Weekly Fortnightly 4 - Weekly Calendar Other paid. If other applies please state the (Please State) Monthly period. Please indicate the method of payment e.g. Normal Basic Pay Normal Hours Worked cash, cheque, direct to bank. £ Pay details for the last 5 Tax Paid by No of National Insurance Occupational weekly, 3 fortnightly, or 2 Pay Period Hours Gross Contributions or personal Employee monthly/4-weekly periods **Ending** Worked Pay pension (including SSP, SMP, P/P contributions P/P YTD YTD overtime bonus, etc.). If SSP or Maternity Pay is included in the gross pay please indicate clearly £ below which and how much. £ Any Additional information: Name of person Name of Business completing form Position in business **Business Address** Business telephone number I confirm that the information given is true and Please endorse with complete. business's authorisation stamp Signature: Date: