

Receipt for Payments upon Termination / Expiry of Contract

I, _____, ID / Passport No. _____,
 _____, receive the following payments from my employer
 _____ on (date) _____

*in cash / by cheque/by bank autopay.

1. Wages (from _____ to _____) \$ _____
 inclusive of payment for the following :
 - (a) statutory holiday(s) (dates : _____)
 - (b) annual leave (from _____ to _____)
 - (c) sick leave (from _____ to _____)
 - (d) others (please specify) _____
2. Food allowance (from _____ to _____) \$ _____
3. Wages in lieu of notice \$ _____
4. Untaken annual leave pay (_____ days) \$ _____
5. Long service payment / severance payment \$ _____
6. Food and Travelling allowance \$ _____
7. Payment in lieu of air-ticket / return air-ticket of \$ _____
 _____ (Airline)
8. Others (a) _____ \$ _____
 (b) _____ \$ _____

Signature of Helper : _____ Signature of Employer : _____
 (Name) () (Name) ()

Witnessed by (if any)(Signature) : _____
 (Name) ()

* delete where appropriate