

## Employer's confirmation of earnings - First Certificate

West Somerset Council, West Somerset House, Killick Way, Williton, Taunton, Somerset TA4 4QA Tel: 01643 703704  
Fax: 01984 633022 Email: [benefits@westsomerset.gov.uk](mailto:benefits@westsomerset.gov.uk) Website: [www.westsomersetonline.gov.uk](http://www.westsomersetonline.gov.uk)

### To be filled in by the employee

Name	<input type="text"/>	National Insurance number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Address	<input type="text"/>	Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Signature	<input type="text"/>	Occupation	<input type="text"/>
		Payroll number	<input type="text"/>

### To be filled in by the employer

Please help your employee by filling in the information we ask for below and overleaf. Gross earnings should include any bonus, overtime, Statutory Sick Pay, Statutory Maternity Pay, commission and so on. Please return this form to your employee or to the above address.

#### Please state how you pay your employee by ticking the appropriate boxes

Weekly	<input type="checkbox"/>	Please give details of last 5 pay periods	Cash	<input type="checkbox"/>
Fortnightly	<input type="checkbox"/>	Please give details of last 3 pay periods	Cheque	<input type="checkbox"/>
Four weekly	<input type="checkbox"/>	Please give details of last 2 pay periods	Direct bank transfer	<input type="checkbox"/>
Calendar monthly	<input type="checkbox"/>	Please give details of last 2 pay periods		

Normal hours worked each week:  hours Tax code:

Date employment commenced:  /  /

**Please turn over**

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Pay period ending	Gross pay	Income tax	National Insurance (NI)	Tax Credit award	Superannuation and pension	Net pay	Number of hours worked
1	£	£	£	£	£	£	
2	£	£	£	£	£	£	
3	£	£	£	£	£	£	
4	£	£	£	£	£	£	
5	£	£	£	£	£	£	

Gross pay so far for the current year: Period from  /  /  to  /  /

Gross pay £  Tax £  NI £  Pension £  Net pay £

Are these normal earnings? Yes  No  Reasons:

Employer's name and address:

Telephone number:

Employer's authorisation stamp:

**Declaration:** The information given is true and complete.

Your signature:

Position in firm:  Date  /  /

Pay period ending	Gross pay	Income tax	National Insurance (NI)	Tax Credit award	Superannuation and pension	Net pay	Number of hours worked
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5	£	£	£	£	£	£	

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