



**Fax to : 0870-742-0071**

**PAYROLL SUBMISSION FORM**

**Business Name**

Date of Submission   
 Pay Date   
 Page  of

No	Ref	Name	Either	Or		Complete Notes		Holidays in Hours	Notes
			Gross Pay	Std Hours	O/T Rate 1	O/T Rate 2	Other Additions		
1			£						
2			£						
3			£						
4			£						
5			£						
6			£						
7			£						
8			£						
9			£						
10			£						
11			£						
12			£						
13			£						
14			£						
15			£						
16			£						
17			£						
18			£						
19			£						
20			£						
<b>Batch Totals</b>			£						

Please note that any employee reaching the age of 21 is subject to the national minimum wage. It is your responsibility to increase pay rates to this level.

**Authorisation**

**Dated**

**For Amlink Use**

Posted By		Date		EOM		Rec'd		Sent	
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