Receipt for Payment *Termination / Full / Expiry of Contract

Ι		I.D. no	, receiv	ed the following
Payments from my Employer		(on (date)	
The Payment items as following:				
1. Wages (from	to	o)	\$
2. Travelling allowance & Food allowance				\$
3. Payment in lien of * air-ticket of			or	\$
		Airline company		
4. *Annual leave (from to		to) or	
Non-taken annual leave pay (days).		\$
5.*Long service payment/Severance payment				\$
6.*Others				\$
			Total	\$
Signature of Helper	:			
Name	:	·		
Date	:			

(*) delete where appropriate