

**Monthly Payment Receipt Acknowledgment Form from the Establishment  
to the Employee**

We, the establishment, located in the city of ..... with commercial registration number ..... and engaged in ....., hereby acknowledge that we have paid the monthly dues in full to the employee mentioned below, in the amount of ..... on the date of ....., which includes:

- Salary:

- Allowances:

- Deductions:

- Absences:

- Warnings:

- Other notes:  
.....

**Employee Acknowledgment**

I, the undersigned employee, hereby acknowledge that I have received in full the monthly dues as mentioned above. My signature below serves as legal proof of my receipt.

- Name:

- Signature:

- Fingerprint:

**Establishment Signature**

- Name of the Establishment:

- Name of the Representative:

- Signature:

- Stamp of the Establishment:

إقرار استلام الراتب  
Salary Acknowledgement Form

I the undersigne/

أقر أنا /

.....

.....

Passport no. / .....

أحمل جواز سفر رقم / .....

Compnay / .....

جهة العمل / .....

That I'm working to it. I have recived  
my rights amount of / .....

والتي أعمل لديها، بأني قد استلمت مستحقاتي  
المالية مبلغ وقدرة / .....

Date / .....

بتاريخ / .....

I accept that my signature in the  
declaration as a legal responsibility and  
the proof of my acceptance.

وهذا إقرار مني بذلك.

**Confessor**

المقر بما فيه

Name /

الاسم /

Signature/

التوقيع /

Thump Impression

البصمة