

Sample Receipt for Payments upon Termination/ Completion of Employment Contract

I, _____, HKID/Passport No. _____, receive the following items 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) (date(s): _____) | \$ _____ |
| | (b) annual leave (from _____ to _____) | \$ _____ |
| | (c) sick leave (from _____ to _____) | \$ _____ |
| | (d) others (please specify) : _____ | \$ _____ |
| 2 | Food allowance (from _____ to _____) | \$ _____ |
| 3 | Payment in lieu of notice | \$ _____ |
| 4 | Untaken annual leave pay (_____ days) | \$ _____ |
| 5 | Long service payment/severance payment | \$ _____ |
| 6 | Food and travelling allowance | \$ _____ |
| 7 | Return air-ticket to place of origin | |
| 8 | Others (a) _____ | \$ _____ |
| | (b) _____ | \$ _____ |

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

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

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

Note 1 : Please refer to “Practical Guide for Employment of Foreign Domestic Helpers – What foreign domestic helpers and their employers should know” for the rights and obligations of employers and FDHs.

Note 2 : This is a sample document for reference only. Parties referring to this sample should ensure that its contents are appropriate for their use before adoption. They are also reminded to seek independent professional advice where appropriate.

* Delete where inappropriate