



**Additional payroll deductions**

<input type="checkbox"/> None	<input type="checkbox"/> Yes	<input type="checkbox"/> Authority enforced deductions	Amount
		<input type="checkbox"/> Loan repayments to the employer	Amount
		<input type="checkbox"/> Other deductions - define	Amount

**I hereby declare that the employee is not in a probationary period and there is no employers intent of contract termination.**

This confirmation will expire 30 days after the date of issue.

Salary is processed by an external company	(name, company ID number/IČO)
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Yes  No

**Issued by**

Name and surname	Position
Email	Phone number

Place \_\_\_\_\_ Date \_\_\_\_\_  
Authorized person signature / Stamp

\* Delete non-applicable

Please, save the copy of this Confirmation in case of telephonic data verification.