Shakti Foundation For Disadvantaged Women **Employee Final Settlement** Reference: Shakti/ Finance /Treasury/EFS/2025/448 Date:29-09-2025 **Employee Information** Sahadat Hossen 12/Aug/25 Separation Effective Date: **Employee Name:** 18762 2 years 10 Months 25 Days Length of Service: Employee ID: Accountant 31-Jul-25 Post Name: Salary paid up to: Khilpara, Noakhali Branch / Department: Separation Type: Resignation 0525 Branch / Department Code Notice Period: 01 Month Permanent **Employment Type: Notice Period Completed:** 0 Months 1 Days 18-Sep-2022 Annual Leave Encashment Balance 0 Days Date of joining: Date of Confirmation: 1-Jul-2023 Leave without Pay (Days) 0 Days 11-Aug-2025 0189504927 Resignation Submission Date Contact Number 11-Aug-2025 Email ID: Last Working Day Salary Information Amount Day's Amount Gross 27,326 11 9,696 A.Total salary Dues **Gratuity Information** Basic Year No. of Gratuity Amount Gratuity **B.Total Gratuity Dues Additional Payment** Amount Leave Encashment TA & DA / Field trips 710 Motor Cycle Allowance \_ Ancholik Allowance \_ Shurakkha Bhata Due Distance Allowance Security Deposit 15,000 Security Deposit Interest 2,689 Over Time (March & April,2025) C.Total Additional Payment 18,399 Deductions Amount (S) Financial Misappropriation Motorcycle Loan Mobile Phone Handset Loan Mobile Phone Subsidy Security Deposit Security Deposit Interest One Month Salary Abashon Rent 300 Income Tax D.Total Deduction 300 E.Total Payable / Receivable (A+B+C-D) 27,795 **Provident Fund** Particular (S) Amount (S) Particular (S) Amount (S) 25.661 PF Loan (Principal) **Employees Contribution** Organization Contribution PF Loan (Interest) Profit on Employees Contribution 1,998 Profit on Organization Contribution 27,659 Total PF Payable Total 27,795 Total Salary & Others (E) Process and Calculation **Total Provident Fund** 27,659 is Audited bases on 55,454 Total End of Service Benefit Fifty Five Thousand Four Hundred Fifty Four Taka Only. ing documents 29.0925 Shakti Founda Approved By inance Prepared By Checked By eyed and libuA lenielni oundation Employee Acknowledgement

Receiver's Name:

Signature & Date:

Paid To Shakti Foundation

Received From/

In Words: Fifty Five Thousand Four Hundred Fifty Four Taka Only.

checked

## Employee Personal Bank Account Informaton

Required Inj	formation
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01. Employee EIN:

18762

02. Account Holder Name:

Sahadat Hossen

03. Bank Account No:

1062 7223 0001

04. Bank Name:

Bank Brae

05. Bank Branch Name:

Raipur Branch

06. Employee Mobile No:

01839 504927

Sahadat Hossen

AMP)

07. Employee Name & Signature: Sahadat Hossen,



Verified By Supervisor's

Name (BM): Md. Manun Homain

137361

Signature:

EIN: 13736 Branch Manager Shakti Foundation Verified By Supervisor's

Name (AS):

EIN:

Signature:

Date: