

# Tax Deduction Card



## EMPLOYEE'S DETAILS

Employee's Name	<input type="text"/>	Total Tax Credit	<input type="text"/>
Employee's Address	<input type="text"/>	Total Cut-Off Point	<input type="text"/>
PPS Number	<input type="text"/>	Works Payroll No.	<input type="text"/>
		Standard Rate	<input type="text"/> Higher Rate <input type="text"/>
		Tax Year	<input type="text"/>

## EMPLOYER'S DETAILS

Employer's Name	<input type="text"/>	Employer's Number	<input type="text"/>
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## PRSI CLASS

If PRSI Class changed during this employment complete these boxes

**Initial PRSI Class**

**B4** Date of Change

**C3** Other Class  **F3** Months at Other Class

**N.B: If more than two classes please furnish details on Form PRC 1**  
 If employment began (a) in Month 1 or later or (b) before Month 1 but the first pay day was in Week 1 or later, enter date of commencement at F4.  
 If employment ceased during the tax year enter date of cessation at F5

**F4**  **F5**

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	Date of Payment (DD/MM/YY)	Gross Pay (Less Superannuation) this period	Cumulative Gross Pay to Date	Cumulative Standard Rate Cut-Off Point	Cumulative Tax due at Standard Rate	Cumulative Tax Due at Higher Rate	Cumulative Gross Tax	Cumulative Tax Credit Monthly	Cumulative Tax (Cannot be less than 0)	Tax Deducted this Period	Tax Refunded this Period	Gross Income for Income Levy Purposes	Income Levy Deducted this Period	Social Insurance Monthly Record		PRSI Employee's Share	Total PRSI	Net Pay	
Month														Insurable Employment	PRSI Class				
1																			
2																			
3																			
4																			
5																			

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