

## ***Salary Amendment***



EMPLOYER NAME

## DETAILS OF CHANGE

Please provide previous details along with amendments

[illegible]

### ADDITIONAL INFORMATION (inc Job Title)

--

**AUTHORISED SIGNATORY**

EMPLOYER SIGNATURE		DATE SIGNED	
--------------------	--	-------------	--

**PLEASE FORWARD THIS FORM TO TANDEM PAYROLL LTD**

Fax: 08717 143 367  
Email: [paymatters@tandempayroll.co.uk](mailto:paymatters@tandempayroll.co.uk)  
Post: Tandem Payroll Ltd, 5 Lancing Close, Werrington, Peterborough, PE4 6QX

**FOR OFFICE USE ONLY**

SIGNATURE CHECKED ☐ EXCEL ☐ BUREAU ☐ RTI ☐