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| Personal Information | | | | |
| Name of Domestic Labor : ............................................................................................................  Nationality : ......................................................................................................................................................................  Passport Number :  Passport Issuance Date : / / - / /  Passport Expiry Date : / / - / / :  Passport Issuance Location : ..........................................................................................................  Duration of Contract : ................................................................................................................................................. ّ  Date of Arrival : / / | | | | |
| Comments | Date of Receiving  Amount | Signature of Domestic Labor | Amount Paid by Household | Month | |
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\* \* I, the below signee, confirm that i have received the above mentioned amount representing my salary

lary Payment Form

S

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Ministry of Labor

Kingdom of Saudi Arabia

The employer should expedite the opening of an account for the domestic worker.

Meanwhile, this form can be used until the account has been opened.

Signature: