## EMPLOYEE SSP1(L) INFORMATION

Employer Name: Demo Employer Limited

Report Date & Time: 30/08/2023 15:49

## **Employee's Details**

**Surname :** Major **Forename :** Tracy

Second Forename:

NINO: NE333876A

Works No.: 4

First Day of Sickness: 26/04/2023 Last Day of Sickness: 18/06/2023

**SSP Accrual Weeks:** 2

## **Employer's Details**

**Employer's Name :** Demo Employer Limited

**Employer's Address:** Network House

Arundel Road

uxbridge Industrial Estate

Uxbridge UB8 2RR

**United Kingdom** 

**Telephone No.:** 0161 1234 567

Fax No.:

**Date:** 30/08/2023