

**Employer** \_\_\_\_\_ **Date Submitted:** \_\_\_\_\_

First Name _____ M.I. _____ Last Name _____ Address _____ City _____ State _____ Zip _____ County _____ SSN _____ DOB _____ E-Mail _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single      Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> <b>Hire</b> Date: _____ <input type="checkbox"/> <b>Termination</b> Date: _____ <input type="checkbox"/> <b>Change</b> Date: _____  Auth. Signature _____
<b>LOCATION</b> Default Location _____ Other _____ Default Department _____ Other _____	

### PAYROLL ITEMS

<b>PAY TYPE</b> ( <i>select one</i> ): <input type="checkbox"/> Salary <input type="checkbox"/> Hourly									
<b>Salary:</b> Annual Salary \$ _____									
<b>Hourly:</b> <table style="width: 100%;"> <tr> <td style="width: 50%;">Rate Type _____</td> <td style="width: 50%;">Rate Amount \$ _____</td> </tr> <tr> <td>Rate Type _____</td> <td>Rate Amount \$ _____</td> </tr> <tr> <td>Rate Type _____</td> <td>Rate Amount \$ _____</td> </tr> <tr> <td>Rate Type _____</td> <td>Rate Amount \$ _____</td> </tr> </table>		Rate Type _____	Rate Amount \$ _____	Rate Type _____	Rate Amount \$ _____	Rate Type _____	Rate Amount \$ _____	Rate Type _____	Rate Amount \$ _____
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Rate Type _____	Rate Amount \$ _____								
Rate Type _____	Rate Amount \$ _____								
Rate Type _____	Rate Amount \$ _____								
<b>DEDUCTION ITEMS</b>									
<b>Pre-Tax Items:</b> <table style="width: 100%;"> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> </table>		Item Type _____	Item Amount \$ _____	Item Type _____	Item Amount \$ _____	Item Type _____	Item Amount \$ _____	Item Type _____	Item Amount \$ _____
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Item Type _____	Item Amount \$ _____								
Item Type _____	Item Amount \$ _____								
Item Type _____	Item Amount \$ _____								
<b>After-Tax Items:</b> <table style="width: 100%;"> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> <tr><td>Item Type _____</td><td>Item Amount \$ _____</td></tr> </table>		Item Type _____	Item Amount \$ _____	Item Type _____	Item Amount \$ _____	Item Type _____	Item Amount \$ _____	Item Type _____	Item Amount \$ _____
Item Type _____	Item Amount \$ _____								
Item Type _____	Item Amount \$ _____								
Item Type _____	Item Amount \$ _____								
Item Type _____	Item Amount \$ _____								
<b>Retirement Plan Employer Match:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No      Match % _____									

### WITHHOLDING INFORMATION

<b>W-4 FEDERAL</b> <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married withhold at Single rate Total Allowances (Box 5) _____ Additional w/h _____	<b>A-4 STATE</b> Total Exemptions (Line 6) _____ Additional State w/h (Line 5) _____
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### DIRECT DEPOSIT

<input type="checkbox"/> Please attach voided check for each account (no deposit tickets)  <input type="checkbox"/> Please attach Direct Deposit Authorization form
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### NOTES

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