

REQUIRED – PLEASE COMPLETE **EVERY LINE**

Employee Name:
Address: (# / Street / Apt)
(City, State Zip)
Date of Birth:
Social Security Number:
Marital Status: (Single, Married, Married but withhold at higher Single Rate) Please Circle
Number of Dependents or Allowances:
Rate of Pay: \$ / hr. OR \$ Sal. per Payroll
Date of Hire:
OPTIONAL - Direct Deposit Information:
Bank Name: Checking/Savings ←Circle
Bank Account Number:
Bank Routing Number: