

**EMPLOYEE SET-UP INFORMATION**

CLIENT CODE: \_\_\_\_\_

EMPLOYEE NUMBER: \_\_\_\_\_ PSD CODE: \_\_\_\_\_ DEPT #: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_

EMPLOYEE ADDRESS: \_\_\_\_\_

NO PO BOX

CITY: \_\_\_\_\_ STATE & ZIP CODE: \_\_\_\_\_

HIRE DATE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

MARITAL STATUS:  SINGLE  MARRIED NUMBER OF EXEMPTIONS: \_\_\_\_\_

PAY RATE: \_\_\_\_\_ EMPLOYEE TYPE:  HOURLY  TIPPED  SALARIED

OVERTIME RATE: \_\_\_\_\_ TIPS P/H: \_\_\_\_\_ MEALS P/R: \_\_\_\_\_ DEPT: \_\_\_\_\_

**STATE SET-UP INFORMATION**

WORKED IN STATE: \_\_\_\_\_ ADDITIONAL STATE TAX: \_\_\_\_\_

**FEDERAL TAX SET-UP INFORMATION**

FEDERAL TAX TYPE:  EXEMPT  NORMAL  FLAT TAX  RATE & ADJUSTMENT

% OF TAX: \_\_\_\_\_ % OF GROSS: \_\_\_\_\_

ADDITIONAL FEDERAL WITHHOLDING: \_\_\_\_\_

**STANDARD PAYROLL DEDUCTIONS**

Name: \_\_\_\_\_ PreTax: Yes No Amount: \_\_\_\_\_

Name: \_\_\_\_\_ PreTax: Yes No Amount: \_\_\_\_\_

Name: \_\_\_\_\_ PreTax: Yes No Amount: \_\_\_\_\_

**If any of the above deductions should not be withheld every payroll, specific pay periods that apply:**

Deduction Name: \_\_\_\_\_ 1st Pay 2nd Pay 3rd Pay 4th Pay 5th Pay

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