

**Payroll\$, Inc., New Employee Setup/Request Change Form**

**Employer/Company Name** \_\_\_\_\_

**Employee Name** as appears on SS card \_\_\_\_\_

SSN \_\_\_\_/\_\_\_\_/\_\_\_\_ Employee # \_\_\_\_\_ Division /Dept (if applicable) \_\_\_\_\_

Employee Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Employee phone # \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Employee email address \_\_\_\_\_

Hourly Rate \$ \_\_\_\_\_ OR if salaried per pay period salary \$ \_\_\_\_\_ salaried exempt from OT (mark one) YES NO

Income Tax State/Unemployment State (for example) IL/IL) \_\_\_\_\_

**IRS Federal W4 starting January 1, 2020**

\_\_\_\_ Single or Married filing separately

\_\_\_\_ Married filing jointly (or Qualifying Widow)

\_\_\_\_ Head of household (check only if you are unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

Step 2 Option(c) \_\_\_\_\_ Claim Dependents (3) \$ \_\_\_\_\_ Other Income Adjust 4(a) \$ \_\_\_\_\_ Deduct Adjust 4(b) \$ \_\_\_\_\_

Extra Withholding 4(c) \$ \_\_\_\_\_

**State W4 Status (choices are) Circle one**

Single, Married Spouse Works, Married Filed Separate, Head Household, Married (spouse does not work)

#Allowances \_\_\_\_\_ Add'l/Extra Amount \$ \_\_\_\_\_ Flat/Fixed Amount \$ \_\_\_\_\_ Exempt Status YES / NO \_\_\_\_\_

**Local W4** Mark ONLY If applicable Are you subject to City tax YES/NO, If so which City \_\_\_\_\_

Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Full-Time /Part-Time (Circle one) Gender \_\_\_\_\_

**Automatic Earnings & Deductions** (pretax/aftertax insurance, union dues, uniforms, 401k, etc.)

Description/Code	Per Pay Period Amount	Target (if applic)	Check Date/Start	Freq
_____				ppd
_____				ppd
_____				ppd
_____				ppd
_____				ppd

Completed by/Approved by: \_\_\_\_\_