

Payroll Processor

### Business Name New Employee Information Sheet

## Pay Rate

Employee Name Social Security Number Street Address City State Zip Code Date of Birth Email Address **I\*PLEASE ATTACH A COPY OF YOUR SOCIAL SECURITY CARD** 

### Federal Withholding (see W-4)

Status: Single or Married Separate / Married Joint / Head of Household

Two Jobs in Household (yes /no) Amount for Dependents Claimed \$ Other Income \$ Deductions \$ Additional withholding per paycheck\$

# VA Withholding (see VA-4)

# of Personal Exemptions Additional withholding per paycheck\$

#### For Direct Deposit

Name of Bank Routing Number (9 digits) Account Number Checking or Savings (Select One) [\*ATTACH A VOIDED CHECK OR DIRECT DEPOSIT LETTER FROM BANK]

All required Forms should be completed and retained by Employer. If provided to Method CPA, for your convenience, we will maintain copies in your records (Portal). Original documents will be returned to you.