

EMPLOYEE INFORMATION

6425 Old Plank Road, Suite 111 High Point, NC 27265 [tel] 336-885-5056 [fax] 336-885-5080 www.PayrollSolutions.com

ADD	CHANGI	E	TERMINATE	(CHECK ONE)
Client Name:		_		Client ID:
Employee Number (optional):		_		
Social Security Number:				
Name:				
Address:				
City, State, Zip:				
Phone Number:				
Department (optional):				
Email Address:				
Date of Birth:				
Date of Hire (or Rehire):			Original Date of Hire:	
Gender:	Male	Female		
Hourly Rate (if applicable):				
Salary Rate (if applicable):				
Filing Status & Exemptions (Fed.):				
Filing Status & Exemptions (State):				
Pre Tax Deductions: (125 ins, 401k)				
(120 1110)				
After Tax Deductions: (loans, child supp, ins.)				
Effective date of change or termination:				
Authorized Signature:		_		Date: