EMPLOYER INFORMATION SHEET

General Information	
Business Name	Contact Name
Business Address	Phone
City, State, Zip	Fax
Filing Name (if different) Filing Address (if different)	Email
City, State, Zip	
Company TypeO S-CorpO C-CorpO LLCOO Sole ProprietorO 501c3O Other	

Payroll Information

No. of W-2 employees No. of 1099 contractors to be paid through payroll	Federal Deposit Schedule
First Date To Run Payroll MM/ DD/ YY	 Monthly Semi-Weekly Other
Federal EIN Applied For	State Deposit Schedule
State Employer Account No Applied For	Only applicable to states with income tax
State Unemployment No Applied For	 Same as federal Other
State Unemployment Insurance Rate% (if known)	
Other state tax rates, if applicable:	

Attach any historical payroll information from this calendar year for all active <u>and terminated</u> employees
U We have not run any payroll yet this year
If you will begin using our service at the start of the 2 nd , 3 rd or 4 th calendar quarter (April 1, July 1, or October 1), please include:
□ Year-to-date wages, taxes, and deductions for each employee
Dates and amounts of all payroll tax payments made to date for current year tax liabilities
If you will begin using our service in the middle of a calendar quarter, please include:
□ Year-to-date wages, taxes, and deductions for each employee as of the most recent payroll
□ Year-to-date wages, taxes, and deductions for each employee as of the end of the most recent calendar quarter (<i>not applicable if you're starting in the middle of the first calendar quarter</i>)
Payroll register or other summary for <u>each</u> payroll date in the current quarter, including total amounts for each wage item, tax, and voluntary deduction on that date.
Dates and amounts of all payroll tax payments made to date for current year tax liabilities

Notes: