



Payroll Services LLC Employee Information Form

New Employee Employee Change

Company Name: _____

Location: _____

Department: _____

Full Time Part Time

Skip the paper with our electronic Onboarding!

Employee Name: _____ SSN _____ Male Female	
Address: _____ City: _____ State: _____ Zip: _____	
Hire Date: _____ Birth Date: _____ Email: _____	
Pay Type: Salary Hourly Commission 1099 Pay Rate: _____	
Tax Withholding Information: Federal Status: Attach W4 https://www.irs.gov/pub/irs-pdf/fw4.pdf State Status: Married Single Number of Exemptions: _____ Flat Amount or % _____ Exempt Check here	Direct Deposit Information: Account 1 Checking Savings Bank Name: _____ Routing Number: _____ Account Number: _____ Account 2 Checking Savings Bank Name: _____ Routing Number: _____ Account Number: _____
<p>Important!! By Submitting direct deposit information you authorize any deposit made into your account for payroll related purposes. In the event of an error by Employer, Payroll Services LLC, or Financial Institution; is authorized to return the erroneous payment to the Employer and to debit your account for the same in an amount not to exceed the amount of the erroneous deposit. This authorization shall remain in effect until revoked in writing so as to allow Employer, Payroll Services LLC and Financial institution a reasonable opportunity to act.</p>	

Fax to PRS @ 240-699-0062 or Email to your Client Services Rep.

Did you do your WOTC application?