



EMPLOYEE SET UP INFORMATION

CLIENT ID# _____

CLIENT NAME _____

DIVISION _____ **BRANCH** _____ **DEPT** _____

LAST NAME _____

FIRST NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

SOCIAL SECURITY _____

GENDER _____ **HIREDATE** _____

BIRTHDATE _____

FEDERAL STATUS: MARRIED _____ **SINGLE** _____
EXEMPTIONS _____ **ADD'TLS** _____

STATE STATUS: MARRIED _____ **SINGLE** _____
(IF APPLICABLE) EXEMPTIONS _____ **ADD'TLS** _____

SALARY PER PAYPERIOD _____

HOURLY RATE _____

DEDUCTIONS (IF ANY) _____