

JEB WILLIAMSON, CPA, LLC

Payroll New Hire & Information Update Form

Please submit this form along with Employee Direct Deposit Authorization Form & voided check

Employer: _____

Social Security #: _____ D.O.B: _____

First Name: _____ Middle Initial: _____ Last: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Mobile #: _____

Email Address (required for web employee login): _____

Circle Filing Status (W-4): Single Married Married, but withhold at higher single rate

Circle Filing Status (A-4): Single Married Married Filing Separately Head of Family No Exemption

Number of Allowances (for W-4): _____ (for A-4): _____

Additional \$ Amount to W/H for Federal: \$ _____ for Alabama: \$ _____

Emergency Contact Name: _____ Emergency Phone#: _____

Employee Signature

X _____ Date: _____

For Internal Use

Hourly Rate: _____ Annual Salary: _____

Department/Location: _____ Hire Date: _____

Notes: _____

Employer Signature: _____ Date: _____

By signing above, employer agrees that valid and complete forms W-4, A-4, and I-9 have been collected, signed, and are retained in employer files.