

# EMPLOYER INFORMATION SHEET

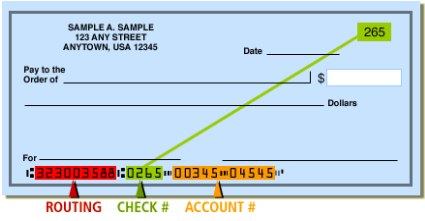
## General

Business Name: _____ Business Address: _____ City, State, Zip: _____ Filing Name (if different): _____ Filing Address (if different): _____ City, State, Zip: _____	Contact Name: _____ Phone: _____ Fax: _____ Email: _____
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Company Type:  
 S-Corp  
 C-Corp  
 LLC  
 LLP  
 Partnership  
 Sole Proprietor  
 501c3  
 Other \_\_\_\_\_

## Direct Deposit

Employer Bank Routing Number: \_\_\_\_\_  
 Employer Bank Account Number: \_\_\_\_\_



Principal Officer's Name: \_\_\_\_\_  
 Principal's Social Security Number: \_\_\_\_\_  
 Principal's Date Of Birth: \_\_\_\_\_

Federal law requires that we store and verify information about the principal officer to help prevent money laundering and the funding of terrorist activity. The principal officer is the person who is the main contact for the bank account from which electronic payments (including direct deposit) are made.

## Payroll

No. of W-2 employees _____ No. of 1099 contractors to be paid through payroll _____ First Date To Run Payroll    MM____/ DD____/ YY ____ Federal EIN _____ <input type="checkbox"/> Applied For State Employer Account No. _____ <input type="checkbox"/> Applied For State Unemployment No. _____ <input type="checkbox"/> Applied For State Unemployment Insurance Rate _____% (if known) Other state tax rates, if applicable: _____ _____	<p><b>Federal Deposit Schedule</b></p> <input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Weekly <input type="checkbox"/> Other _____ <p><b>State Deposit Schedule</b>  <i>Only applicable to states with income tax</i></p> <input type="checkbox"/> Same as federal <input type="checkbox"/> Other _____
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