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Employee Information Sheet

Re Hire <input type="checkbox"/>	New Hire <input type="checkbox"/>	Change of Information <input type="checkbox"/>
Company Name _____		
Employee Name _____		
Department # _____		
W2 employee or 1099 employee (circle one)		
Address _____		
City/St/Zip _____		
SS # _____	Birth Date _____	
	(Re)Hire Date _____	
	Separation Date _____	
Pay Type: hourly / salary exempt from O.T. / salary with OT / Commission only		
Rate of Pay \$ _____ per pay period or per hour		
Tax Filing Status married <input type="checkbox"/> or single <input type="checkbox"/>		
Federal Exemptions _____ Additional Amount _____		
State Exemptions _____ Additional Amount _____		