

PRECISELY PAYROLL INCORPORATED
1005 NW Galveston Ave, Ste 210
BEND, OR 97701
(541) 317-0100 Fax (888) 889-6384

NEW EMPLOYEE SET-UP INFORMATION

Company name _____

Date of Hire _____ **Social Security#** _____ - _____ - _____

Full Name _____

Address _____

City _____ **State** _____ **Zip** _____

Claiming (S/M/H) _____ **Number of exemptions** _____

Additional withholdings (fwt) _____ **(swt)** _____

Pay Rate:

Department: _____ **Salary** _____

Hourly Rate 1: _____ **Rate 2:** _____

Volunteer ded (125plan) _____ **(Limit monthly)** _____

(401k plan) _____ **(Limit monthly)** _____

Sick time _____

Vacation time _____

Other Misc. Info: _____