

# PRECISELY PAYROLL, INC.

431 NW Franklin Ave, Suite 1, Bend OR 97701  
(Phone) 541-317-0100 (Fax) 888-889-6384

## EMPLOYER INFORMATION

Common Name: \_\_\_\_\_

Name 1: \_\_\_\_\_ Sick & Vac. on Check: Y N

Name 2: \_\_\_\_\_ Master Link: Y N

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Contact: \_\_\_\_\_ Bank: \_\_\_\_\_

Referred By: \_\_\_\_\_ Accountant: \_\_\_\_\_

Workers Comp. Rate(%): \_\_\_\_\_

## TAX INFORMATION

Fed ID: \_\_\_\_\_ 943(agriculture): Y N

State ID: \_\_\_\_\_ SUI Rate: \_\_\_\_\_

Tax Service: Electronic [ ] Checks [ ]

Deposit Frequency: Monthly [ ] Semi-Weekly [ ]

## PAYROLL INFORMATION

Direct Deposit: Y N Signature Scan: Y N

Pay Period: Weekly Bi-weekly Semi-Monthly Monthly

Pay Day: \_\_\_\_\_ First Check#: \_\_\_\_\_

Period Begin: \_\_\_\_\_ End \_\_\_\_\_ Delivery Instructions \_\_\_\_\_

First Payday: \_\_\_\_\_

Previous Method: \_\_\_\_\_