

CHARLES J. READ

Employee Information Sheet

Existing and New Employee Information

Employee Name: _____

Social Security #: _____ / _____ / _____ Department _____
EXACTLY as it appears on their social security card)

Rate of Pay: _____

Please attach copies of employee's completed [Federal W4](#) and if appropriate State Withholding Certificate.

Please attach copy of the [Direct Deposit Authorization](#) available at and original bank documents to set up Direct Deposit (keep originals for your file).

Existing Employee's Current Year Payroll Information

Please attach current year employee payroll information including all earnings, deductions and taxes withheld.