PAYCHEX°

Employee Profile

Employee Number/	Name				
Address			Social Security Number		
City/State			Zip	Zip Ext	
Department			Filing		Addl
Salary per pay		Federal	Status	Exemptions	
Hourly Rate 1 \$_		State R/N	Filing _ Status	Exemptions	Addl W/H Tax
Hourly Rate 2 \$_		Local	R/N	Exemptions	Alloc
Hourly Rate 3 \$					
M/F Birth Da	ate/				ate//
Paylink® Only: St	andard hours per pay _		St	andard OT hours p	er pay
Direct Deposit: □	No ☐ Yes (If yes,	employee must con	mplete Employee A	uthorization Card - 33	3187.)
	Amount			YTD or Prev	
			21.3952040 . 7200		STATE STATE OF THE
The Control of the Control	YTD or Prev YTD	QTD			
Wages					
Social Security Medicare					
Federal					
State					
DBL/SUI					
Local					

Net Pay