

EMPLOYEE INFORMATION SHEET

*Required Field

*Company # _____ *Company Name _____

*Employee Name _____

*Gender Male Female Social Security # _____ - _____ - _____ Birth Date ____ / ____ / ____

Address _____

City _____ State _____ Zip _____

For Pennsylvania Employees Only:

The following information is taken from the PA Local Earned Income Tax Residency Certification Form.

Employee residence is located in the Township or Borough of _____

*PSD Code _____ It is the employer's responsibility to provide the proper PSD code for each employee.
This can be found at <http://munstatspa.dced.state.pa.us/FindLocalTax.aspx>

Employee # _____ Dept Name _____ Dept # _____ Job # _____

Job Position _____ *Hire Date ____ / ____ / ____

Home Phone (____) _____ - _____ Mobile Phone (____) _____ - _____

Email Address _____

*Federal Form W-4

Step 1 Single or Married filing separately Married filing jointly Head of Household

Step 2 Multiple Jobs or Spouse Works

Step 3 Claim Dependents \$ _____ (Annual)

Step 4 (a) Other Income \$ _____ (Annual) (b) Deductions \$ _____ (Annual)

(c) Extra Withholding \$ _____ (Per Pay)

*Hourly Rate \$ _____ per Hour or *Salary Amount \$ _____ per Pay Period
Please provide Per Pay amount, NOT annual amount

Is Overtime calculated at 1.5 times the Regular Hourly Rate? Yes No

Local Services Tax (LST) – If you are required to pay LST (Formerly EMST) tax.

Have you filed an Exemption Certificate with your employer and local municipality? Yes No

If "Yes", indicate reason: P – Primary employer is deducting M – Military Active
 L – Low earnings (under \$12,000/year) D – Disabled Military

Voluntary Deductions (Deductions other than taxes)

If employee has any garnishment/attachments, please supply copy of the Court Order/Documentation

Deduction Name	Amt/Pct per pay period	Deduction Name	Amt/Pct per pay period
1 _____	\$ / % _____	3 _____	\$ / % _____
2 _____	\$ / % _____	4 _____	\$ / % _____

