



Employee Master Change Form

New Employee Rehire Termination Change

Date of Change: _____ Type of Change: _____

Company Name: _____ Employee Name: _____

Address: _____ Social Security Number: _____

_____ Phone: _____

Birthday: _____ Hourly Rate: _____

Hire Date: _____ Termination Date: _____

Direct Deposit Information Change Cancel

Bank Name: _____ Routing Number: _____

Account Type: Checking Savings Account Number: _____

Withholdings

Federal Marital Status: _____ Federal Dependents: _____

State Marital Status: _____ State Dependents: _____

Additional Withholdings: _____ Percentage or _____ Flat Dollar Amount

Deductions

401k: _____ Insurance: _____ per week Deferral: _____

Advance: _____ per week Goal: _____

Please submit all documents and information to:

Paytech Payroll Systems, Inc.

7065 North Maple Avenue, Suite 101 Fresno, California 93720

Phone: (559) 299-9180 Fax: (559) 299-9181