

***	TAXPAY	ER INFORMATION	***			
TAXPAYER <u>:</u>				SOLE PROP.	PTSHP.	CORP.
D/B/A/ NAME						
ADDRESS:						
CITY:						
STATE:			ZIP			
PHONE:			FAX:			
CONTACT NAME:						
EMAIL ADDRESS:						
***	PAYROL	L INFORMATION	***			
PAY PERIOD:	W	BW	SM	M # C	F EMPLOYEES	
FED. ID#				DEPOSIT FREQ.	M SN	И Q
STATE REG.#				DEPOSIT FREQ.	M SN	И Q
STATE UI #		U/I % RAT	E	DEPOSIT FREQ.	M SN	И Q
PAY PERIOD STAR <u>TS:</u>			PAY PER	RIOD ENDS:		
PAY DATE:						
METHOD OF SUBMITTING PAYE	ROLL:	PHONE_	FAX	EMAIL		
	DAY:			TIME:		
METHOD OF PAYROLL DELIVE	RY:	COURIER:		U.S. MAIL:		
	TO BE DE	ELIVERED ON OR B	EFORE:			
	DELIVERY ADDRESS IF DIFFERENT:					
FIRST PAYROLL DATE WITH NE	:PS:					



*** MEDICAL COVERAGE / PEN	SION	***		
DO YOU HAVE A MEDICAL 125 (CAFETERIA) PLAN?	YES	NO		
DO YOU HAVE A PENSION / 401K PLAN, IF SO WHAT DOES IT E	NTAIL (i.e.)	COMPANY MATCH		
<<<<>PLEASE PROVIDE US WITH A SUMMARY PLAN DESCRIP	TION>>>>	•		
NEPS WRITES CHECK FOR 401K PAYMENT YES		NO		
HOW WOULD YOU LIKE US TO CUT A CHECK?	PER PAYROLL OR MONTHLY			
REPORTS FOR 401K PLAN PER		PAYROLL OR MONTH TO DATE		
*** <u>EMPLOYER SETUP</u>	***			
COPY OF VOIDED CHECK OF CHECKING/PAYROLL ACCOUNT:				
CHECKS OUT OF CLIENT'S ACCOUNT		YES NO		
OR CHECKS OUT OF NEPS ACCOUNT		YES NO		
STARTING PAYROLL CHECK NUMBER:				
WILL YOU HAVE YOUR SIGNATURE ON FILE?		YES NO	N/A IF FROM NEPS ACCT	
<<<< NOTE THERE IS A ONE TIME FEE OF \$79.00 FOR A SECU	IRITY ENC	RIPTION OF SIGNATU	IRE>>>>	
PRINT COMPANY PAID DEDUCTIONS ON PAY STUB?		YES NO		
PRINT VACATION / SICK INFORMATION ON PAY STUB?		YES NO		
PRINT SOCIAL SECURITY NUMBER ON STUB?		YES NO		
PRINT LAST 4 DIGITS OF SSN ONLY? (OPTION AVAILABLE ON C	CHECKS)	YES NO		
PRINT DIRECT DEPOSIT ACCOUNT NUMBER ON STUB?		YES NO		
DO YOU WANT <b>NEPS</b> TO MAKE THE CHECKS FOR OTHER PAYI	MENTS?	YES NO		
(i.e.) GARNISHMENTS, CREDIT UNION, 401K,etc.				
IF CHECKS ARE SIGNED WOULD YOU LIKE THEM SEALED IN E	NVELOPES	S? YES NO		
IF ANY OF YOUR DEDUCTIONS ARE EXEMPT FROM TAXES PLI	EASE ADV	ISE US AS TO		
WHICH DEDUCTIONS ARE EXEMPT AND FROM WHICH TAXES				
*** COMPANIES WITH TIPS ***				
WOULD YOU LIKE NEPS TO ADJUST TIPS DECLARED TO MEET	STATE MI	NIMUM WAGE REQUI	REMENTS? YESNO	



*** EMPLOYEE DIRECT DEPOS	SIT ***			
NUMBER OF EMPLOYEE'S WITH DIR. DEP.:				
DAYS IN ADVANCE TO DRAFT EMPLOYERS ACCOUNT:	extra \$5.00 per run for 1DAY	NO CHARGE 2 DAY		
THERE IS A \$2.00 CHARGE FOR EMPLOYEES WITH INCORREC	CT ACCOUNT INFORMATION			
ROUTING #	ACCOUNT #			
<<< <if account="" checking="" different="" from="" payroll="">&gt;</if>	>>>			
*** EFTPS TAX PAYMENTS - ACH DEBIT METH	OD (FED 941 AND STATE W/H TA	XES) ***		
FEDERAL 941 EFTPS:				
STATE WITHHOLDING ELECTRONIC DEPOSITS:	YES NO			
HOW WOULD YOU LIKE NEPS TO MAKE TAX DEPOSITS?	ON PAYROLL DATE OR ON DUE DATE			
*** TAX IMPOUNDING (UNEMP	LOYMENT TAXES) ***			
WOULD YOU LIKE NEPS TO WITHHOLD UNEMPLOYMENT TAX		/ PAYROLL?		
FEDERAL: YESNO	PER PAYROLL OR MONTH	ILY		
STATE: YESNO	PER PAYROLL OR MONTH			
*** EMDLOVED BILLING	***			
*** <u>EMPLOYER BILLING</u> NEPS WRITES CHECK FOR PAYMENT	YESNO			
NEPS DOES A DIRECT DEPOSIT FOR PAYMENT	YES NO			
	1L3NO			
SEND THE INVOICE AND CLIENT WILL MAKE THE CHECK HOW WOULD YOU LIKE TO BE BILLED?	PER PAYROLL OR MONTH	II V		
		1L T		
AMOUNT OF FEE PER PAYROLL	\$			
W - 2 CHARGE PER EMPLOYEE AT YEAR END	φ φ			
YEAR END REPORT AND FILING CHARGE	\$			



***	PAYROLL REPORTS ***	
BASIC REPORTS INCLUDED IN TH	E PAYROLL JOURNAL:	
* PAYROLL DETAILS REPORT		
* PAYROLL TOTALS REPORT		
* DEPOSIT REQUIREMENT REPOR	ग	
* CHECK REGISTER REPORT		
* TAX STATUS REPORT ***WILL BE	E INCLUDED FOR ALL THE COMPANIES THAT DO NOT PAY ALL THE TAXES EACH PAYE	ROLL'
ADDITIONAL REPORTS NEEDED T	O BE INCLUDE IN THE PAYROLL JOURNAL ( i.e.) DEPARTMENTAL, 401K, YTD, LEAVE, 6	etc.
<<< <please provide="" th="" us="" with<=""><th>DETAILS ON SPECIFIC REPORTING NEEDED&gt;&gt;&gt;&gt;</th><th></th></please>	DETAILS ON SPECIFIC REPORTING NEEDED>>>>	
***	PAYROLL WORKSHEET ***	
HOW WOULD YOU LIKE THE PAYF	ROLL WORKSHEET SET UP?	
LIST EMPLOYEES	BY LAST NAME OR BY DEPARTMENT	
INCLUDE PAY RATES	YES NO	
HOW WILL YOU BE SUBMITTING T	HE PAYROLL?	
METHOD:	PHONE FAX EMAIL	
DAY:		
TIME:		
	OLL PROCESSING PLEASE FORWARD THE INFORMATION TO US BY 3:00PM > D AFTER 3:00PM WILL BE PROCESSED ON THE NEXT BUSINESS DAY! >>>>	