

EMPLOYER INFORMATION

Company Name

EMPLOYEE INFORMATION

First Name	Middle	Last Name	Sex	Hire Date
Street Address		Apt #	City	State Zip
Home Phone	Cellular	Email		
Date of Birth	Social Security #	Filing Status	Exemptions	
Pay Rate	\$	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly		

BANKING INFORMATION

Name of the Bank	Bank Routing Number
<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account	Bank Account Number

Attach Voided Check Here

EMPLOYEE AUTHORIZATION

I authorize Tejas Mehta, CPA, Inc. to automatically deposit my net pay from this employer to my bank account indicated above and, if necessary, to adjust or reverse a deposit for any payroll entry made to my account in error. I have attached a voided check above for the account to which funds should be directly deposited. This authorization will remain in effect until I cancel it in writing and in such time as to afford a reasonable opportunity to act on it.

Employee Signature	Date
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EMPLOYER AUTHORIZATION

I authorize Tejas Mehta, CPA, Inc. to automatically debit above listed employee's net pay from the Company's bank account and to deposit it to the employee's bank account indicated above and, if necessary, to adjust or reverse a debit for any payroll entry made to my account in error. This authorization will remain in effect until I cancel it in writing and in such time as to afford a reasonable opportunity to act on it.

Employer Signature	Date
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