



COMPANY SETUP DETAILS

Which of the following do you have? (circle YES or NO)

Multiple Bank Accounts (separate accounts for taxes and payroll)?	YES	NO
Departments?	YES	NO
State Income Tax?	YES	NO
State Disability Insurance?	YES	NO
School District Tax?	YES	NO
Retirement Plan (401k match, 403b, Simple IRA, etc.)?	YES	NO
Workers Compensation? Provider? _____	YES	NO
Company Match (401k match, Profit Share, ER Directed)? If yes, _____ % of the employee's contribution, up to _____ % of earnings	YES	NO
Section 125 Cafeteria Plan (Flexible Spending, Medical Reimbursement)?	YES	NO

First Check Date: _____ **Second Check Date:** _____

First Input Date: _____ **Second Input Date:** _____

First Period Begin Date: _____ **Second Period Begin Date:** _____

First Period End Date: _____ **Second Period End Date:** _____

Comments: _____

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