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PLEASE SEE INSTRUCTIONS ON THE FOLLOWING PAGE.

NO HANDWRITTEN FORMS WILL BE ACCEPTED.

EST. 1987

SMITH and ASSOCIATES P.C.

CERTIFIED PUBLIC ACCOUNTANTS

EMPLOYEE ACTION FORM

Company ______________ Completed by ______________ Effective date of change ______________

☐ New Employee(W-4) ☐ New contractor(W-9) ☐ Rehire ☐ Employee termination

☐ Name/address change ☐ Withholding change ☐ Pay rate change ☐ Direct deposit change ☐ Other change

EMPLOYEE INFORMATION

Last, First, MI

____

SSN ______________ Birthdate ______________

Street ______________________________

City ______________ ST ______ Zip ______________

Mailing address (if different from home)

Street ______________________________

City ______________ ST ______ Zip ______________

Phone ______________ Employee # ______________

Email ______________________________

Location ______________ Dept ______________

Hire/rehire Date ______________ Job Title ______________

Seasonal (Y/N) ______ Pay schedule (M,SM,BW,W) ______

Probation (Y/N) ______ Full-time/Part-time (PT/FT) ______

Officer (Y/N) ______ Family of owner (Y/N) ______

Eligible for insurance (Y/N) ______ Date eligible ______________

Eligible for PTO (Y/N) ______ Date eligible ______________

PAY INFORMATION

Pay, Deduction, or Accrual (P/D/A)	Item name	Rate / Salary Amount / %	Add or Change (A/C)

PAYROLL TAX INFORMATION

Federal

☐ Attach W-4 or W-9 form (Required)

Employee = W-4, Contractor = W-9

State

Filing status = Single or married filing separately (S), Married (M), Head of Household (HH)

Colorado filing status ______

Colorado additional amount (per period) ______________

Other state filing status ______

Other state additional amount (per period) ______________

☐ State W-4 attached (if applicable)

DIRECT DEPOSIT INFORMATION

Direct Deposit (Y/N) ______

Attach copy of Gulf Management Direct Deposit form.

☐ Voided check or;

☐ Pre-printed bank form (no handwritten routing/account numbers)

TERMINATION INFORMATION

Termination date ______________

Current pay period begin date ______________

PTO/Vacation hours to pay ______________

Regular hours ______________ OT hours ______________

Salary proration ______________________________

Other pay items ______________________________

Deductions ______________________________

Other/notes ______________________________

PLEASE NOTIFY US OF ANY TERMINATIONS BY END OF DAY. YOU HAVE 72 HOURS TO PAY TERMINATED EMPLOYEES.

ADDITIONAL INFORMATION

Below you may add any additional information or complete fields that there was not enough room for on the form.

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EMPLOYEE ACTION FORM INSTRUCTIONS FOR USE

This fillable PDF form is the only one you will need to submit all your employee information. This includes any new employees, employee changes and employee terminations. Employees cannot be paid on the current payroll if we do not receive their info 3 days before the payroll processing due date. Always remember to include your Company name, your name, the effective date (if applicable), and check the reason for submitting the form at the top.
To submit this form;

1. Login to the Smith and Associates NetClient portal.
2. Click File Exchange under Documents on the left and select 'Employee Action Form' from the Employee Paperwork folder.
3. Click Download Selected icon and a blank form will be saved to the Download folder on your computer.
4. Open the form in Adobe Reader (do not use a web browser to open form). Fill out the form by tabbing through the fields on your computer. See the section below which pertains to the reason you are submitting the form.
5. Click the 'SAVE' button at the top right and save to your computer using the file name format of 'last name, first name DDMMYY'.
6. In the portal, click on the Upload icon and then either click Add files to select the form or drag to the dialog and click Start Upload. Also upload any other required files including a W-4 or Gulf System direct deposit authorization and bank form/voided check (see below for list of required documents depending on submission reason).
7. We will be notified of your submission and contact you if we have any questions. We will send you an acknowledgement email when we have processed the employee action.

New employees

1. Please complete any fields that are needed for your employee to be paid correctly. If you assign your own employee numbers, remember to include the number.
2. Required fields are; Name, SSN, address, job title, hire date, payroll schedule (if you have more than one), pay rate or salary, and federal form W-4 (https://www.irs.gov/pub/irs-pdf/fw4.pdf) for employees or W-9 (https://www.irs.gov/pub/irs-pdf/fw9.pdf) for contract employees. Forms from previous years are not accepted.
3. If the state withholding is different from the federal W-4, please note that, otherwise state withholding will default to the same as federal W-4 information.
4. If the employee has direct deposit, include the Gulf System direct deposit form and bank form/voided check.
5. If you have benefits, please note;
    a. part-time (PT) or full-time (FT) employee,
    b. insurance eligibility
    c. leave/PTO eligibility
6. Email is required for the employee self-serve portal setup.
7. For new employees, the add/change column does not need to be completed under the 'Pay Information' section.
8. Make sure to include any pay items for this employee such as hourly pay, salary, or commissions and any deductions such as insurance, IRA, and advance. Accrual items, such as leave/PTO, should be included here.

Employee changes

1. For changes, name and SSN are the only required fields. Please include only the fields that are changing.
2. Under the Pay Information section, mark the Add/Change column for the item.
3. For W-4 changes, please include a new W-4(s). Direct deposit changes also require a new Gulf System form and bank form/voided check.

Terminated employees

1. For employee terminations, required fields are Name, SSN, worked hours (regular/OT) or prorated salary amount, pay period begin date (first day of the pay period that the termination occurs in), and any additional pay items.
2. Prorated salary is figured by the following formula;
    a. Annual Salary * Hours worked / Hours in a year (workweek hours x 52). A dollar amount is required.
3. Only the deductions or deduction credits noted on this form will be included in the final check. Use the Other/notes field for any separate severance check information.

Additional Information

Use the lines at the bottom right of the form to include any additional information and for employee information that did not fit in the space otherwise allotted on the form.