



PADGETT PAYROLL - EMPLOYEE CHANGE FORM

EMPLOYER NAME: _____

Fields marked with a * are required (All other fields complete only if they are changing)

☐ **EMPLOYEE DETAIL CHANGE**

*Employee Name: _____
New Address: _____ City: _____ State: _____
New E-mail: _____ Zip Code: _____

☐ **EMPLOYEE TAX CHANGE**

Federal Marital Status: ☐ **Single** ☐ **Married** ☐ **Married but withhold at higher single rate**

Total Allowances: _____

State Total Allowances: _____

Add Local City Name: _____ EE live in local: Y or N (Circel one)

☐ **PAYROLL RATE CHANGE** (Change employee pay rate, department, frequency of pay, or from full to part-time)

New Employee Pay Rate: \$ _____ (New rate of pay for employee)

Type of Pay: ☐ **Hourly** ☐ **Salary** (Check appropriate box)

Department: _____ (If you use separate department - List department for this rate)

Pay Frequency: ☐ **Weekly** ☐ **Bi-Weekly** ☐ **Other:** _____ (Description for Other)

Status: ☐ **Full-time** ☐ **Part-time** ☐ **Temp** (How should we catagorize this employee)

☐ **DEDUCTIONS CHANGE** (Use for Child Support, Garnishments, 401K, SIMPLE, Health Ins,etc.)

Description: _____ Amount per pay period: _____ Goal Amount: _____

Note: In order to change employee information in the payroll system we need this form completed and returned to our office.

Please feel free to return to our office in any of the following formats:

Scan and email to: Payroll@PadgettToledo.com
Fax back to: 419-878-7644