

R & I Tax and Bookkeeping Service, INC.

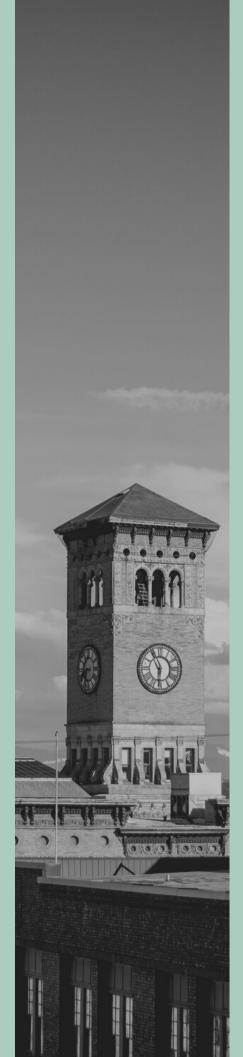
2023

New Employee Onboarding

The onboarding Plan

- Yay! You found a new employee or you're starting to use a new payroll system. Congratulations.
- Please request this information from your employee
- Please either bring the form into the office OR upload to Taxdome. Please don't send sensitive information through email.

If you aren't set up with Taxdome, just ask us! (it's free for you)



services we provide Please check off all the services you need

- Miscellaneous information
- W4 Form
- I-9 Form
- Direct Deposit Form
- Copy of their driver's license or other form of ID



Payroll Information

EMPLOYEE INFORMATION

PLEASE FILL OUT FOR EVERY EMPLOYEE WE WILL ALSO NEED THEIR:

- Copy of driver's license
- W4
- I-9
- Direct Deposit Form

Employee Name:
Email
Phone:
Date Hired:
Job Title:
Salary or Hourly:
Salary/pay
Overtime:
Benefits:



DIRECT DEPOSIT AUTHORIZATION FORM

Fill in the boxes below and sign the form.

1. Fill in all boxes above.

Last Name	First Name MI
Social Security Number	Work Phone
Action Effective Date	
Name of Financial Institution	
Account Number (Include hyphese but onit spaces and special symbols.)	Type of Account
Routing Transit Number (MI Hones must be filled. The first two numbers must be (7) through 12 or 21 through 32.)	Ownership of Account
	to the account indicated above for the purpose of expense and/or payroll. Irries and adjustments for any credit entries made in error.
Signature	Date
If the account is a joint account or in someone else's name, that individual must also agree	to the terms stated above by signing below.
Signature	Date
HOW TO COMPLETE	THIS FORM

2. Sign and date the form. Call your financial institution to make sure they will accept direct 1234 JOHN PUBLIC TIP 19 deposits. 123 Main Street Your Town, FL 12345 Verify your account number and routing transit number with your financial institution PAY TO THE ORDER OF TIP s DOLLARS Your Town Bank Do not use a deposit slip to verify the routing number. TIP Your Town, FL 12345 Eer. Fouling Transit Number 7 ·(258888885)·: 1(234556789822)* Account Number

NOTE: THE ACCOUNT AND ROUTING MAMBER MAY APPEAR IN DIFFERENT PLACES ON YOUR CHECK.

W_4 Form

Employee's Withholding Certificate

OMB No. 1545-0074

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Give Form W-4 to your employer.

Department of the Treasury Interr

(c)

Internal Revenue Ser	rvice	Your withholdin	g is subject to review by the IRS.		
Step 1:	(a) F	irst name and middle initial	Last name	(b) :	Social security number
Enter Personal Information	Addre	255		nam	your name match the on your social security If not, to ensure you get
mornation	City o	r town, state, and ZIP code		conta	t for your earnings, act SSA at 800-772-1213 to www.ssa.gov.

Single or Married filing separately Married filing jointly or Qualifying surviving spouse

Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, other details, and privacy.

Step 2:	Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse
Multiple Jobs	also works. The correct amount of withholding depends on income earned from all of these jobs.
or Spouse	Do only one of the following.
Works	(a) Reserved for future use.
	(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below; or
	(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This
	option is generally more accurate than (b) if pay at the lower paying job is more than half of the pay at the higher paying job. Otherwise, (b) is more accurate

higher paying job. Otherwise, (b) is more accurate . .

TIP: If you have self-employment income, see page 2.

Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

Step 3:	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly):		
Claim	Multiply the number of qualifying children under age 17 by \$2,000 \$		
Dependent and Other	Multiply the number of other dependents by \$500		
Credits	Add the amounts above for qualifying children and other dependents. You may add to this the amount of any other credits. Enter the total here	3	\$
Step 4	(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here.		
(optional): Other	This may include interest, dividends, and retirement income	4(a)	\$
Adjustments	(b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter		
		4(b)	\$
	(c) Extra withholding. Enter any additional tax you want withheld each pay period	4(c)	5

Step 5: Sign Here	er penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete. nployee's signature (This form is not valid unless you sign it.) Date			
Employers	Employer's name and address	First date of	Employer identification	
Only		employment	number (EIN)	

For Privacy Act and Paperwork Reduction Act Notice, see page 3.



Date of Birth (mm/dd/yyyy)

Department of Homeland Security

Employee's Telephone Number

U.S. Citizenship and Immigration Services

START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation (Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)							
Last Name (Family Name)	First Nar	me (Given Name)		Middle Initial	Other La	ast Names	Used (if any)
Address (Street Number and Name)	Apt. Number	City or Town			State	ZIP Code	

Employee's E-mail Address

I am aware that federal law provides for in	mprisonment and/or fir	nes for false statements of	or use of false documents	in
connection with the completion of this for	rm.			

I attest, under penalty of perjury, that I am (check one of the following boxes):

U.S. Social Security Number

1. A citizen of the United States				
2. A noncitizen national of the United States (See instructions)				
3. A lawful permanent resident (Alien Registration Number/USCIS	Number):			
4. An alien authorized to work until (expiration date, if applicable, n	nm/dd/yyyy):			
Some aliens may write "N/A" in the expiration date field. (See inst	tructions)			
Aliens authorized to work must provide only one of the following docum An Alien Registration Number/USCIS Number OR Form I-94 Admission				Code - Section 1 t Write In This Space
1. Alien Registration Number/USCIS Number: OR				
2. Form I-94 Admission Number:		I		
OR		I		
3. Foreign Passport Number:		I		
Country of Issuance:		I		
		I		
Signature of Employee		Today's Date (mm/de	ปราวาว)	
	ne):	Today's Date (mm/d	^ป ากาก)	
Signature of Employee Preparer and/or Translator Certification (check or I did not use a preparer or translator.				
Preparer and/or Translator Certification (check or	nslator(s) assisted the	employee in completi	ng Section 1	
Preparer and/or Translator Certification (check or I did not use a preparer or translator. A preparer(s) and/or translator.	nslator(s) assisted the d/or translators ass	employee in completi sist an employee in	ng Section 1 completing	Section 1.)
Preparer and/or Translator Certification (check or I did not use a preparer or translator. A preparer(s) and/or tran (Fields below must be completed and signed when preparers and I attest, under penalty of perjury, that I have assisted in the c	nslator(s) assisted the d/or translators ass	employee in completi sist an employee in tion 1 of this form	ng Section 1 completing	Section 1.) the best of my
Preparer and/or Translator Certification (check or 1 did not use a preparer or translator. A preparer(s) and/or tran (Fields below must be completed and signed when preparers and 1 attest, under penalty of perjury, that I have assisted in the or knowledge the information is true and correct.	nslator(s) assisted the d/or translators ass	e employee in completi sist an employee in tion 1 of this form Today's	ng Section 1 completing and that to	Section 1.) the best of my
Preparer and/or Translator Certification (check or I did not use a preparer or translator. A preparer(s) and/or tran (Fields below must be completed and signed when preparers and I attest, under penalty of perjury, that I have assisted in the of knowledge the information is true and correct. Signature of Preparer or Translator	nslator(s) assisted the d/or translators ass completion of Sec	e employee in completi sist an employee in tion 1 of this form Today's	ng Section 1 completing and that to	Section 1.) the best of my
Preparer and/or Translator Certification (check or I did not use a preparer or translator. A preparer(s) and/or tran (Fields below must be completed and signed when preparers and I attest, under penalty of perjury, that I have assisted in the or knowledge the information is true and correct. Signature of Preparer or Translator Last Name (Family Name)	nslator(s) assisted the d/or translators ass completion of Sec	e employee in completi sist an employee in tion 1 of this form Today's	ng Section 1 completing and that to	Section 1.) the best of my

STOP

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	ND	LIST C Documents that Establish Employment Authorization
2.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		 Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye 	1.	A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT
	Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document		 color, and address ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or 		 (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
L	that contains a photograph (Form I-766)		information such as name, date of birth, gender, height, eye color, and address 3. School ID card with a photograph	2.	by the Department of State (Forms DS-1350, FS-545, FS-240)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and		 Voter's registration card U.S. Military card or draft record 	3.	Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States
	 b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; 		6. Military dependent's ID card 7. U.S. Coast Guard Merchant Mariner Card		bearing an official seal Native American tribal document U.S. Citizen ID Card (Form I-197)
	 (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has 		 Native American tribal document Driver's license issued by a Canadian government authority 	⊢	Identification Card for Use of Resident Citizen in the United States (Form I-179)
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		For persons under age 18 who are unable to present a document listed above:	7.	Employment authorization document issued by the Department of Homeland Security
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		 School record or report card Clinic, doctor, or hospital record Day-care or nursery school record 		

Examples of many of these documents appear in the Handbook for Employers (M-274).

<u>To summarize</u>- please attach a copy of the employee's passport OR a copy of their driver's license and a copy of their social security number card