

CONTRACTOR INFORMATION SHEET

Complete this form for each 1099 contractor.

General Information

Contractor Type: Individual Business
Contractor Name _____
Address _____
City, State, Zip _____
Email Address _____
Social Security No./
Employer Identification No. _____

Direct Deposit Information

Will this contractor be paid by direct deposit?
 Yes If so, complete the Authorization of Direct Deposit form.
 No

Pay Information

Has this contractor already been paid this calendar year?
 Yes
If so, enter the total compensation and/or reimbursement amounts that you have paid the contractor during the current year.
 No

Compensation amount \$ _____
Reimbursement amount \$ _____

NOTES

AUTHORIZATION FOR DIRECT DEPOSIT

Complete this form for each employee or contractor electing direct deposit.

I authorize _____ to deposit my pay automatically to the account(s) indicated below and, if necessary, to adjust or reverse a deposit 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.

Primary Direct Deposit

Name on bank account: _____

Bank account number: _____ Checking ___ Savings ___

Bank routing number: _____

Amount: \$ _____ or entire paycheck: _____

* Balance of pay to:

_____ Manual (paper check)

_____ Secondary account described below

* Note: Split payments are not available for contractors.

Secondary Direct Deposit (balance after direct deposit entry above)

Name on bank account: _____

Bank account number: _____ Checking ___ Savings ___

Bank routing number: _____

Important: Please attach a voided check for each bank account to which funds should be deposited.

Employee/ Contractor signature: _____

Date: _____

Payers: Don't send us this form with your Direct Deposit enrollment. Keep for your records.