



W-4 Employee New Hire Form

Washington Deli Outlet: _____

Employee Name: _____

Date Of Hire: _____ Social Security Number: _____

Sex: Male Female

Primary Department: _____

Secondary Department: _____

Employee Address: _____

City: _____ State: _____ Zip Code: _____

Tax Status: Single Married Student/Exempt

Exemptions/Dependents: _____

Deductions: _____

All information on this form must be completed prior to the employees first paycheck. Please use black ink and fax back to Absolute Payroll at 301-631-5701.

Office Use

ROP: _____

Additional Comments: _____