



Sign and Scan Into Employee File on P: Drive and Edmunds

<u>EMPLOYEE INFORMATION</u>										
DATE OF CHANGE		EMPLOY	EE ID	NAME					DEPARTMENT	
PHONE NUMBER			SOCIAL SECURITY NUMBER EMAIL ADDRESS							
ACCOUNT INFORMATION										
ACCT	ROUTING NUMB		ER	ACCOUNT NUMBER		3	/	AMOUNT	/	PERCENT
1										
ACCT	ROUTING NUMB		ER	ACCOUNT NUMBER		`		AMOUNT	~	PERCENT
2										
ACCT	ROUTING NUMB		ER	ACCOU	NT NUMBEI	3	/	AMOUNT	~	PERCENT
3										
ACCT	ROUTING NUMBER		ER	ACCOUNT NUMBER		1	/	AMOUNT	/	PERCENT
4										
ADDITIONAL (COMMENTS	OR INSTR	LICTIONS							
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	EMPLOY	/EE								
	SIGNATU									