



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?

Direct deposit ☐ Yes ☐ No If yes, attach completed Authorization of Direct Deposit form.

Pay Information

Has this contractor already been paid this calendar year?

☐ Yes ☐ No

If yes, enter the total compensation and/or reimbursement amounts that you have paid the contractor during the current year.

Compensation amount \$ _____

Reimbursement amount \$ _____



Notes

Authorization for 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.

Name on bank account: _____

Bank account number: _____ Checking ____ Savings ____

Bank routing number: _____

Amount: \$ _____ or entire paycheck: ____

***Balance of pay to:**

_____ Manual (paper check)

_____ Account described below

***Note:** Split payments are not available for contractors.

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: Do not send this form with your Direct Deposit enrollment. Keep for your records.