

BLIZZARD BUSINESS SERVICE, INC

1000 E Sturgis St, Suite 7 St Johns, MI 48879-8235 (989) 227-9979 / FAX (989) 227-9389

EMPLOYEE DETAIL INFORMATION FOR W-2'S - YEAR _____

EMPLOYER NAME _____ ID# _____ - _____

Name _____ SS# _____

Address _____

Gross Cash Wage _____ Non-Cash/Taxable Benefits _____

Taxes Withheld: FICA/Med _____ Federal _____ State _____

Pension plan? \$ _____ If your child: Gross before 18: _____ After 18: _____

Name _____ SS# _____

Address _____

Gross Cash Wage _____ Non-Cash/Taxable Benefits _____

Taxes Withheld: FICA/Med _____ Federal _____ State _____

Pension plan? \$ _____ If your child: Gross before 18: _____ After 18: _____

Name _____ SS# _____

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Address _____

Gross Cash Wage _____ Non-Cash/Taxable Benefits _____

Taxes Withheld: FICA/Med _____ Federal _____ State _____

Pension plan? \$ _____ If your child: Gross before 18: _____ After 18: _____

PAYROLL LIABILITY SCHEDULE

MONTH GROSS PD | FED W/H | STATE W/H | FED DEPOSIT* | DATE | MI DEPOSIT | DATE

JAN _____

FEB _____

MAR _____

APR _____

MAY _____

JUNE _____

JULY _____

AUG _____

SEPT _____

OCT _____

NOV _____

DEC _____

JAN (DEPOSITS ONLY) _____

TOTALS

*** (Do not include deposits made for prior year even if made in January; include deposit for December)**