

Supplemental Payroll Request Form



Company Code: _____ Company Name: _____

Requested By: _____ Phone: _____

Paycheck Date: _____ Sending Date: _____

Note: Please consider the selected paycheck date in relation to your normal scheduled payroll run. The amounts processed with this run will appear on the employee's check stub in the year-to-date earnings section for all subsequent payroll checks.

What tax method do you want to use? (Must check one box or provide specific instructions below)
The bonus or supplemental rate is strongly recommended for amounts exceeding an employee's normal pay period wage.

- Tax Tables** **Mandatory Taxes Only** (FMED, FSOC, SDI) **Bonus Rate** Fed 22% - CA 10.23% **Other:** _____

What type of payroll are we processing? (Must check one box)
*If you choose to include bonuses with your scheduled payroll, do you want bonuses to appear on a separate check? **Yes / No***

- Bonus** **Taxable Fringe** **Other** (Description): _____
 Gross Amount Will be grossed up if not _____
 Net – need to gross up processed with other earnings _____

Do you want the net pay direct deposited? (Must check one box)

- Yes**, for employee's setup on direct deposit **No**, all employees will receive a live payroll check

Do you want voluntary deductions taken? (Must check box)
Please consider whether 401k % and/or 401k \$ will apply to bonuses. Garnishments based on % of net pay will be taken.

- Yes**, all deductions **No deductions** except percentage of net pay garnishments **401K Only** **Other:** _____
 Percentage _____
 Flat \$ Amount _____

Special Processing Instructions: _____

Special Delivery Instructions: _____

Note: All supplemental payrolls must be finalized at least two days prior to pay date. Some supplemental runs may require wire fundings depending on size & timing.

Email completed form to IBSsupport@ibspayroll.com