Week#	
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MEDIA DATA SERVICES INC.	
265 RT. 46, SUITE 206, TOTOWA. NEW JERSEY 075 12	Fax:973-785-2453 OFFICE:973-785-3100
COMPANY NAME	_C O. #
EMPLOYEE NUMBER: SOCIAL SECURITY NO	
STARTING DATE (MM/DD/YY): DATE OF BI	RTH
FIRST NAME	
MIDDLE NAME	
LAST NAME	
ADDRESS	
CITY	
STATE	ZIP
STATE CODE	(MEDIA USE ONLY)
HOURLY RATE \$	
SALARY PER PERIOD \$	
PAY PERIODS: WEEKLY BI-WEEKLY SEMI-MONTHLY	OTHER
MALE OR FEMALE (CIRCLE ONE)	
DEPARTMENT	
MARRIEDOR SINGLE	
FEDERAL:	
STEP 2: DO YOU HOLD MORE THAN 1 JOB: YESOR NO	
STEP 3: IF YOUR INCOME WILL BE \$200K OR LESS (\$400K OR LESS IF	MARRIED JOINTLY):
MULTIPLY # OF QUALIFYING CHILDREN < 17 BY \$2K	
MULTIPLY # OF DEPENDENTS BY \$500	
STEP 4 (OPTIONAL): OTHER INCOME (NOT FROM JOBS)	
DEDUCTIONS (IF YOU WANT YOUR WITHOLDING REE	DUCED)
EXTRA FEDERAL W/H	
OR FIXED FEDERAL W/H	
STATE:	
DEPENDENTS	
EXTRA STATE W/H	
OR FIXED STATE W/H	