

**PARKING INFORMATION QUESTIONNAIRE**

Rooftop Only

PARKING HANG TAG NUMBER : \_\_\_\_\_  
EMPLOYEE OF : \_\_\_\_\_  
EMPLOYEE NAME: Kim Simms  
PRIMARY VEHICLE MAKE : Ford  
PRIMARY VEHICLE MODEL: Focus  
PRIMARY VEHICLE PLATE: 123 ABC  
ALTERNATE VEHICLE MAKE: \_\_\_\_\_  
ALTERNATE VEHICLE MODEL: \_\_\_\_\_  
ALTERNATE VEHICLE PLATE: \_\_\_\_\_  
PHONE NUMBER DURING BUSINESS HOURS: \_\_\_\_\_

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OFFICE USE ONLY:

DATE RECEIVED BY CABLE ONE: \_\_\_\_\_  
DATE ENTERED IN DATABASE: \_\_\_\_\_  
DATE HANG TAG ISSUES: \_\_\_\_\_

PLEASE UPDATE WITH CURRENT INFORMATION AND RETURN TO THE FRONT DESK.

# Cable *ONE* Direct Deposit Enrollment Form

I want the convenience and safety of having my pay deposited directly to my bank account each payday. I understand that I can terminate my direct deposit of payroll arrangement simply by giving written notice to the Payroll Department.

<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Check here if you wish to start a direct deposit.

Check here if you wish to suspend your direct deposit.

Check here if this is a change to your current/previous direct deposit.

Associate Name (please print) <b>Kim Simms</b>	Social Security No. <b>123-45-6789</b>
Bank Name <b>Bank of America</b>	System Location (City) <b>Phoenix</b>
Bank/Routing Number (please confirm with bank) <b>37373737</b>	Account Number (please confirm with bank) <b>0051867986</b>

Please check one: (Your ENTIRE pay can only be directed to one account)

Deposit to:    CHECKING                     SAVINGS

**ATTACH A VOIDED CHECK FOR CHECKING ACCT OR A DEPOSIT SLIP FOR SAVINGS ACCT**

\$\$\$

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_ 19\_\_\_\_

\_\_\_\_\_ DOLLARS

VOID

FOR  
**123456789 987654321 1234**  
Bank #    Acct #    Ck #

I authorize credit entries and any adjustments to be made to my account.

Associate Signature: Kim Simms

Date: 3/15/12

Type or print your full name <b>Kim Simms</b>	Your social security number <b>123-45-6789</b>
Home address (number and street or rural route) <b>1213 Deerpath way</b>	
City or town, state, and ZIP code <b>Phoenix Az 85012</b>	

**Arizona Withholding Percentage Election Options**

Choose only one:

- 1  I choose to have Arizona withholding at the rate of  
(check only one box):  0.8%  1.3%  1.8%  2.7%  3.6%  4.2%  5.1% of my gross taxable wages.  
Additional amount to be withheld per paycheck \$ \_\_\_\_\_

- 2  I hereby elect an Arizona withholding percentage of zero, and I certify that I expect to have no Arizona tax liability for the current taxable year.

I certify that I have made the percentage election marked above.

<b>Kim Simms</b>	<b>3/15/12</b>
SIGNATURE	DATE

**EMPLOYEE'S INSTRUCTIONS**

Arizona law requires your employer to withhold Arizona income tax from your wages for work done in Arizona. This amount is applied to your Arizona income tax due when you file your tax return. The amount withheld is a percentage of your gross taxable wages of every paycheck. You may also have your employer withhold an extra amount from each paycheck. Complete this form to select a percentage and any extra amount to be withheld from each paycheck.

**What are my "Gross Taxable Wages"?**

For withholding purposes, your "gross taxable wages" are the wages that will generally be in box 1 of your federal Form W-2. It is your gross wages less any pretax deductions, such as your share of health insurance premiums.

**New Employees**

Complete this form in the first five days of employment to select an Arizona withholding percentage. You may also have your employer withhold an extra amount from each paycheck. If you do not file this form, the department requires your employer to withhold 2.7% of your gross taxable wages.

**Current Employees**

If you want to change the current amount withheld, you must file this form to change the Arizona withholding percentage or change the extra amount withheld.

**What Should I do With Form A-4?**

Give your completed Form A-4 to your employer.

**Electing a Withholding Percentage of Zero**

You may elect an Arizona withholding percentage of zero if you expect to have no Arizona income tax liability for the current year. Arizona tax liability is gross tax liability less any tax credits, such as the family tax credit, school tax credits, or credits for taxes paid to other states. If you make this election, your employer will not withhold Arizona income tax from your wages for payroll periods beginning after the date you file the form. Zero withholding does not relieve you from paying Arizona income taxes that might be due at the time you file your Arizona income tax return. If you have an Arizona tax liability when you file your return or if at any time during the current year conditions change so that you expect to have a tax liability, you should promptly file a new Form A-4 and choose a percentage that applies to you.

**Voluntary Withholding Election by Certain Nonresident Employees**

Compensation earned by nonresidents while physically working in Arizona for temporary periods is subject to Arizona income tax. However, under Arizona law, compensation paid to certain nonresident employees is not subject to Arizona income tax withholding. These nonresident employees need to review their situations and determine whether they should elect to have Arizona income taxes withheld from their Arizona source compensation. Nonresident employees may request that their employer withhold Arizona income taxes by completing this form to elect an Arizona withholding percentage.

# BeneFITs

## ASSOCIATE ENROLLMENT FORM REQUEST

TO: PAYROLL/BENEFITS DEPARTMENT

FROM: (SYSTEM NAME): \_\_\_\_\_ COMPANY: Cable One, Inc.

**Please Check One:**

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

New Hire – Full Time

Temp to Full Time

Part Time to Full Time Status

Effective Date: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Effective Date: \_\_\_\_\_

**ASSOCIATE INFORMATION:**

First Name: Kim MI: \_\_\_\_\_ Last Name: Simms

Home Address: 123 Deerpath Way City: Phoenix St: AZ Zip Code 85012

Social Security #: 123-45-6789 Date of Birth: 6/17/80 Sex:  M  F

Marital Status:  Married  Single  Same Gender Domestic Partners  
(Certification of Eligibility Required)

Benefits Eligibility Date: \_\_\_\_\_

Pay Frequency: Bi-Weekly

Hire / Rehire Date: \_\_\_\_\_

If Rehire, service re-calc date: \_\_\_\_\_

Annual Base Salary: \$ \_\_\_\_\_

System/Dept. # \_\_\_\_\_

Company Code No.: 11

Payroll ID No. \_\_\_\_\_

**DEPENDENT INFORMATION:**

**Spouse:**

First Name: Tammy MI: \_\_\_\_\_ Last Name: Simms  
Date of Birth: 10/7/82 Social Security No. 987-65-4321 Relationship: Spouse

**Children:**

First Name: Kim MI: \_\_\_\_\_ Last Name: Simms  
Date of Birth: 3/10/07 Social Security No. 4321-65-987 Relationship: SON

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_ Relationship: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_ Relationship: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_ Relationship: \_\_\_\_\_

Supplemental documentation is required for any dependent with a different last name than that of the associate.  
Copy of marriage license, birth certificate, etc., are acceptable documents.

# Form W-4 (2012)

**Purpose.** Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

**Exemption from withholding.** If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2012 expires February 18, 2013. See Pub. 505, Tax Withholding and Estimated Tax.

**Note.** If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$950 and includes more than \$300 of unearned income (for example, interest and dividends).

**Basic instructions.** If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

**Head of household.** Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

**Tax credits.** You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

**Nonwage income.** If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity

income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

**Two earners or multiple jobs.** If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

**Nonresident alien.** If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

**Check your withholding.** After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2012. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

**Future developments.** The IRS has created a page on [www.irs.gov/w4](http://www.irs.gov/w4) for information about Form W-4, at [www.irs.gov/w4](http://www.irs.gov/w4). Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted on that page.

## Personal Allowances Worksheet (Keep for your records.)

<b>A</b>	Enter "1" for <b>yourself</b> if no one else can claim you as a dependent . . . . .	<b>A</b> _____
<b>B</b>	Enter "1" if: <ul style="list-style-type: none"> <li>• You are single and have only one job; or</li> <li>• You are married, have only one job, and your spouse does not work; or</li> <li>• Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.</li> </ul>	<b>B</b> _____
<b>C</b>	Enter "1" for your <b>spouse</b> . But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.) . . . . .	<b>C</b> _____
<b>D</b>	Enter number of <b>dependents</b> (other than your spouse or yourself) you will claim on your tax return . . . . .	<b>D</b> _____
<b>E</b>	Enter "1" if you will file as <b>head of household</b> on your tax return (see conditions under <b>Head of household</b> above) . . . . .	<b>E</b> _____
<b>F</b>	Enter "1" if you have at least \$1,900 of <b>child or dependent care expenses</b> for which you plan to claim a credit . . . . .	<b>F</b> _____
<b>G</b>	<b>Child Tax Credit</b> (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. <ul style="list-style-type: none"> <li>• If your total income will be less than \$61,000 (\$90,000 if married), enter "2" for each eligible child; then <b>less "1"</b> if you have three to seven eligible children or <b>less "2"</b> if you have eight or more eligible children.</li> <li>• If your total income will be between \$61,000 and \$84,000 (\$90,000 and \$119,000 if married), enter "1" for each eligible child . . . . .</li> </ul>	<b>G</b> _____
<b>H</b>	Add lines A through G and enter total here. ( <b>Note.</b> This may be different from the number of exemptions you claim on your tax return.) ▶	<b>H</b> _____

For accuracy, complete all worksheets that apply.   

- If you plan to **itemize** or **claim adjustments to income** and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
- If you are **single and have more than one job** or are **married and you and your spouse both work** and the combined earnings from all jobs exceed \$40,000 (\$10,000 if married), see the **Two-Earners/Multiple Jobs Worksheet** on page 2 to avoid having too little tax withheld.
- If **neither** of the above situations applies, **stop here** and enter the number from line H on line 5 of Form W-4 below.

----- Separate here and give Form W-4 to your employer. Keep the top part for your records. -----

Form <b>W-4</b> Department of the Treasury Internal Revenue Service	<h2 style="margin: 0;">Employee's Withholding Allowance Certificate</h2> <p style="margin: 0;">▶ <b>Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</b></p>	OMB No. 1545-0074  <h1 style="margin: 0;">2012</h1>
1 Your first name and middle initial <span style="float: right;">Last name</span> <div style="display: flex; justify-content: space-between;"> <span>Kim</span> <span>Simms</span> </div>		2 Your social security number 123-45-6789
Home address (number and street or rural route) 1213 Deerpath Way City or town, state, and ZIP code Phoenix Az 85012		3 <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)		5 <b>2</b>
6 Additional amount, if any, you want withheld from each paycheck		6 \$
7 I claim exemption from withholding for 2012, and I certify that I meet <b>both</b> of the following conditions for exemption. <ul style="list-style-type: none"> <li>• Last year I had a right to a refund of <b>all</b> federal income tax withheld because I had <b>no</b> tax liability, <b>and</b></li> <li>• This year I expect a refund of <b>all</b> federal income tax withheld because I expect to have <b>no</b> tax liability.</li> </ul> If you meet both conditions, write "Exempt" here . . . . . ▶		7
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (This form is not valid unless you sign it.) ▶ <i>Kim Simms</i>		Date ▶ 3/15/12
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)		9 Office code (optional) <span style="float: right;">10 Employer identification number (EIN)</span>