



Substitute Employee Name
(First Name, Middle Initial, Last Name
as stated on the Social Security Card)

Social Security Number

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____

EIN:

PIN:

_____	_____
_____	_____
_____	_____
_____	_____
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_____	_____
_____	_____
_____	_____

4. Authorized Local Employer's Signature _____

5. Print Your Name _____

6. Name of Church/School You Represent _____