



# AMERICAN PAYROLL ASSOCIATION

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To ensure timely mailings and notifications, please provide us with your most up-to-date contact information. If any changes occur during the year, please complete this data sheet and return to my attention.

**PLEASE PRINT CLEARLY.**

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

COMPANY: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

BUSINESS E-MAIL: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SPOUSE/PARTNER NAME: \_\_\_\_\_

**TO WHOM SHOULD PAYMENTS BE MADE OUT?:** \_\_\_\_\_

**TAX IDENTIFICATION NUMBER (IF PAYMENTS ARE BEING MADE TO SOMEONE OTHER THAN YOURSELF):**

\_\_\_\_\_

**I WOULD LIKE ALL NSB INFORMATION (INCLUDING EXPENSES) TO BE SENT TO MY:**

HOME \_\_\_\_\_ OFFICE \_\_\_\_\_