Ohio New Hire Reporting Form

Effective October 1, 1997 Ohio Revised Code Section 3121.89-3121.8911 requires all Ohio Employers, both public and private, to report all newly hired, rehired, or returning to work employees to the State of Ohio within 20 days of hire or rehire date.

Information about new hire reporting and online reporting is available on our Web site: www.oh-newhire.com

Send completed forms to: Ohio New Hire Reporting Center PO Box 15309 Columbus OH 42345 0300	capital	letters	and a	void c	el of accu ontact wi s an exan	th the						
Columbus, OH 43215-0309 Fax: (614) 221-7088 or toll-free fax 1 (888) 872-1611		Α	В	С		1	2	3				
EMPLOYER INFORMATION												

															IFO													
Fede	ral E	mpl	oyer	· ID	Nur	nber	(F	EIN) (PI	eas	se us	e the	same	e FEII	V as tl	ne list	ed en	nploy	⁄ee's	qua	rterly	/ wa	ges v	vill be	repo	orted	under).	:
Emp	oyer	Nar	ne:																									
Emp	loyer	Add	res	s (P	leas	e inc	dica	ate t	he a	dd	ress	whe	re th	e Inc	ome	Withh	oldir	ig O	rders	s sh	oula	l be	sent	t).		-	l .	۱ ا
																												1
			1					<u> </u>				<u> </u>	<u> </u>	1	<u> </u>			<u> </u>	<u> </u>					1]
Emp	oyer	City	/: 															,	Emp	loy	er S —	tate	e: 	Zip	Cod	de (5	digit)	:
Employer Phone (optional):												E	xten	sion:		Employer Fax (option							l):	•	•	•		_
] [
Emai	<u>. </u>		1					1									\perp	1					1	<u> </u>		<u> </u>		╣
Liliai	<u>'' </u>																											- 17
	EMPLOYEE INFORMATION Employee Social Security Number (SSN)															-												4
Emp	loye	e So	cial	Sec	curit	y Nu	mb	oer (SSI		MP	LO	/EE	INF	ORN	IAT	ION											
Emp	loye	e So	cial	Sec	curit	y Nu	mb	per (188		MP	LOY	/EE	INF		IAT		State	e of	Hire	e: []				
Emp						y Nu	mb	per (SSI		MP	LO	ÆE	INF				State	e of	Hire	e: []	М	iddle	Initia	<u> </u>
						y Nu	mb	per (MP		/EE	INF				State	e of	Hire	e: []	м	iddle	: Initia	::
Empl	oyee	e Firs] [ame): 	y Nu	mb	per (MP		ÆE	INF				State	e of	Hire	e: [м	iddle	Initia	1:
	oyee	e Firs] [ame): 	y Nu	mb	per (MP		ÆE	INF				State	e of	Hire	e: [м]	iddle	Initia	<u> </u> :
Empl	oyee	e Firs] [ame): 	y Nu	mb	per (MP		/EE	INF				State	e of	Hire	e: [м]	iddle	· Initia	<u> </u> :
Empl	oyee	e Firs	st Na	ame): 	y Nu	mb	per (SSI		MP		/EE	INF				State	e of	Hire	e: [м]	iddle	· Initia	<u>-</u> :
Empl	oyee	e Firs	st Na	ame): 	y Nu	mb	per (MP		/EE	INF				State	e of	Hire	e: [M]	iddle	: Initia	<u> </u>
Empl	oyee	E First	st Na	ame): 	y Nu	mb	per (MP		/EE	INF					e of			State	9:	Zip] 		Initia]
Empl Empl	oyee	E First	st Na	ame): 	y Nu	mb	per (MP		/EE	INF								State	3 :	Zip]]
Empl Empl	oyee	E First	st Na	ame): 	y Nu				N)	MP		/EE		En		/ee \$		Emp	bloy	ee S			Zip]]

REPORTS WILL NOT BE PROCESSED IF REQUIRED INFORMATION IS MISSING

Questions? Call us at (614) 221-5330 or toll-free 1 (888) 872-1490