

# Oklahoma New Hire Reporting Form

OES112(03-08)

Please fill out completely and mail to: Oklahoma New Hire Reporting Center  
(PRINT or TYPE Please!) PO Box 52003  
Oklahoma City OK 73152-2003  
OR FAX to: 1-800-317-3786 or OKC Metro Area (405) 557-5350

Download a copy of this form at: [www.ok.gov/oesc/index.php?c=11](http://www.ok.gov/oesc/index.php?c=11)

OKDHS - Oklahoma Employer Services Center Information Number:  
1-866-553-2368 or OKC Metro Area (405) 522-5550

## Employer Information

Federal Employer Identification Number

			-																
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Company Name

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Payroll Processing Address Line 1

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Payroll Processing Address Line 2

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Payroll Processing Address Line 3

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Oklahoma Account Number

			-																
--	--	--	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Payroll Processing Area Code, Phone Number

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Extension

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City

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State

--	--

Country

--

ZIP Code

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## New or Rehired Employee Information

Social Security Number

			-			-													
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First Name Middle Last Name

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Mailing Address

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City

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State

--	--

ZIP Code

						-													
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Date of Birth

Month 

--	--

Day 

--	--

Year 

--	--

Occupation

--

Starting Salary

\$ 

--

Hour  
Month

Week  
Year

Commission / Other

New Hire

Recalled

State of Hire

--	--

Date Started to Work or Recalled

Month 

--	--

Day 

--	--

Year 

--	--

Dependent health insurance available?

Yes

No

Is this person currently employed with your company?

Yes

No