Workers Compensation Annual Payroll Report

Due March 1 each year for the prior calendar year (January 1 - December 31)

How to submit: Fill in this form, save it and email it to **GNJUMC@bowerins.com** (or print, complete and scan it), or use the online form at **bowerins.com/gnjumc**.
Attach supporting documents such as quarterly payroll tax reports (NJ-927 / WR-30), federal Form 941 or a payroll register. **Do not include Social Security numbers.**

Your church

Church name

GNJ ID #

Mailing address

City

State

ZIP

Requested by (name)

Title / role

Email

Phone

Payroll year

Payroll year (January 1 - December 31)

Payroll service used, if any (ADP, Paychex...)

☐ The church had NO paid employees during this payroll year

Gross payroll by job type

Job type	# Full-time	# Part-time	Gross payroll ($)
Clergy			
Office / clerical / administrative			
Custodial / maintenance / sexton			
Preschool / daycare / childcare staff			
Music / organist / choir director			
Youth / education / other ministry staff			
Other (describe in notes)			
TOTAL			

Independent contractors (1099)

List contractors paid during the year. Contractors without their own workers compensation insurance may be counted as church employees in the audit. Attach each contractor's certificate of insurance.

Contractor name	Type of work	Amount paid ($)	COI attached? (Y/N)

Notes

Certification

I certify that the information in this report is complete and accurate to the best of my knowledge.

Prepared by (signature or typed name) | **Title** | **Date**