



Payment/Check/ACH Authorization

_____ (company) hereby authorizes Employer Support Services, Inc. to issue checks and make debit and credit ACH entries to the following accounts. This authorization is for the purpose of performing transaction for administration of any and all services ESS is contracted to perform including payroll, COBRA, Cafeteria, Benefits, Health Reimbursement Arrangement, Human Resources, and 401(k) Retirement Savings Plan. This authorization includes transactions for the purpose of payment of services to ESS.

ESS is authorized to use the following depositories for the purposes designated.

ALL Payroll Checks Taxes/ESS Service Fees COBRA Cafeteria HRA Benefits HR

Depository: _____

City: _____ State: _____ Zip: _____

Routing Number: _____

Account Number: _____

ALL Payroll Checks Taxes/ESS Service Fees COBRA Cafeteria HRA Benefits HR

Depository: _____

City: _____ State: _____ Zip: _____

Routing Number: _____

Account Number: _____

ALL Payroll Checks Taxes/ESS Service Fees COBRA Cafeteria HRA Benefits HR

Depository: _____

City: _____ State: _____ Zip: _____

Routing Number: _____

Account Number: _____

This authorization is to remain in full force and effect until Employer Support Services, Inc. has received written notification from _____ of its termination in such manner as to afford Employer Support Services, Inc. and the above financial institution a reasonable opportunity to act on it.

Name: _____

Date: _____

Signature: _____