



COMPANY CHANGE FORM – Agency Check

Client Number: _____ Client Name: _____
Company Number: _____ Company Name: _____
Date Requested: _____ Change Effective Date: _____
(Please note: For proper audit PayData requires advance notice for company changes)

Notes or Special Instructions: _____

Agency Name: _____

Agency Address: _____

City: _____ State: _____ Zip Code: _____

Client Bank Account # _____ (if different than payroll checks)

GL # (Debit) _____ GL Offset # (Credit) _____

Frequency:

- _____ Every Pay Period
- _____ Monthly - Last Scheduled Payroll of Month
- _____ Quarterly - Last Scheduled Payroll of Month
- _____ Annually - Last Scheduled Payroll of Month

Ship to:

- _____ Client
- _____ Agency (Purple slip to processing? Yes No)

Send reports: Yes No **Delivery Method:** _____

Is client being billed for changes? Yes No If yes, amount per pay period \$ _____ Flat amount \$ _____

I agree to and authorize PAYDATA to make the above changes to our company set up.
Authorized client representative: _____ **Title:** _____
Signature: _____ **Date:** _____

<i>For PayData use only:</i>	Requestor: _____	CSR Rep: _____	Date Requested: _____
Route form to all Departments for Review		Priority:	<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low
1-CUST SVC:	_____	Date Completed:	_____
2-CSR MGR:	_____	Date Completed:	_____
FINANCE:	_____	Date Completed:	_____

The individual signing this document on behalf of a corporate party warrants that he or she has full authority to sign this document. Company acknowledges that receipt by PayData of a copy of the Agreement, by facsimile, shall constitute the legal equivalent, for all purposes, of receipt of an original Agreement. Company also acknowledges that PayData may require the use of an electronic signature procedure as an alternative method to obtain the execution of the Agreement of Company. Company agrees that the Agreement shall not be denied legal effect, validity or enforceability solely because an electronic signature or electronic record was used in its formation. Company agrees that PayData shall be entitled to rely on said facsimile Agreement, or said electronic signature, and further agrees to hold PayData harmless and indemnify PayData from any and all claims, injuries and damages, of any nature incurred or suffered by PayData as a result of its reliance upon said facsimile transmission or said electronic signature. This Agreement shall be construed and governed under the laws of Vermont