PAYDATA WORKFORCE SOLUTIONS

COMPANY CHANGE FORM – DBDT/ Labor Distribution

Client Number: Company Number: Date Requested: (Please note: For proper audit PayD	Company Name: Change Effective Date:	ompany changes)	
Notes or special instructions:			
New / Change: Division	Branch Department		
Code:	Description:		
Branch(es): Department(s):			
Default Rate Default Workers Comp Code General Ledger number			
Adding to Time clock and import fur Contact Security Restrictions (if any):	action: Yes No		
New / Change: Division	Branch Departmen	nt Team	
Code:	Description:		
Branch(es): Department(s):			
Default Rate Default Workers Comp Code General Ledger number			
Adding to Time clock and import fur Contact Security Restrictions (if any):	iction: Yes No		
I agree to and authorize PAYDATA	to make the above changes to	our company set up.	
Authorized client representative:		Title:	
Signature:		Date:	
For PayData use only: Requestor:	CSR Rep:	Date Requested:	
Route form to all Departments for Review 1 CSR 2 CSR MGR 3 CONVERSIONS 4 CONV AUDIT: 5 FINANCE	Priority: Date Completed: Date Completed: Date Completed: Date Completed: Date Completed:	High Medium	

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 facismile 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 facismile transmission or said electronic signature. This Agreement shall be construed and governed under the laws of Vermont