



Reporting Agent Authorization (State Limited Power of Attorney & Tax Information Authorization)

Table with 3 columns: 1 Co/Code, 2 Branch, 3 Federal ID Number

4 If you are a seasonal employer, check here

5 TAXPAYER LEGAL NAME (Use all capital letters. Include spaces, ampersands, and hyphens. Do not enter any other punctuation.)

6 DBA NAME (Use all capital letters. Include spaces, ampersands, and hyphens. Do not enter any other punctuation.)

7 Address (number, street, and room or suite no.) City or town, state, and ZIP code

REPORTING AGENT: ADP Tax Services, 400 West Covina Boulevard, San Dimas, CA 91773, ID # 22-3006057, 800/235-7212

Authorization of Reporting Agent to Sign and File Returns

8 Use the entry lines below to indicate the tax return(s) to be filed by the Reporting Agent. Enter the beginning year for annual tax returns or beginning quarter for quarterly tax returns.

940 Tax Year, 941 Qtr / Yr, 940-PR Tax Year, 941-PR Qtr / Yr, 941-SS Qtr / Yr, 943 Tax Year, 943-PR Tax Year, 944 Tax Year, 944-PR Tax Year, 945 Tax Year

Authorization of Reporting Agent to Make Deposits and Payments

9 Use the entry lines below to enter the starting date (the first month and year) for any tax return(s) for which the Reporting Agent is authorized to make deposits or payments.

940 Mo / Yr, 941 Mo / Yr, 943 Mo / Yr, 944 Mo / Yr, 945 Mo / Yr

Disclosure of Information to Reporting Agent

10a Check here to authorize the Reporting Agent to receive or request duplicate copies of tax information, notices, and other communications from the IRS... 10b Check here if the reporting agent also wants to receive copies of notices from the IRS

Form W-2 Series or Form 1099 Series Disclosure Authorization

11 The Reporting Agent is authorized to exchange otherwise confidential taxpayer information with the IRS, including responding to certain IRS notices relating to the Form W-2/1099 series information returns.

W-2 Tax Year, 1099 Tax Year

State and Local Authorization

12 By checking the box to the right and signing in Box 13 below, the taxpayer identified above hereby appoints ADP as Reporting Agent and grants ADP a limited power of attorney with the authority to sign and file employment tax returns and make deposits electronically...

This authorization shall include all applicable state and local forms and shall commence with the tax period indicated and shall remain in effect through all subsequent periods until either revoked by the taxpayer or terminated by ADP.

Authorization Agreement

I understand that this agreement does not relieve me, as the taxpayer, of the responsibility to ensure that all tax returns are filed and that all deposits and payments are made.

13 Signature of Taxpayer or Authorized Representative

I certify that I have the authority to execute this form and authorize disclosure of otherwise confidential information on behalf of the taxpayer.

Name (Required), Title, Signature (Required), Date (Required)