



We Add To Your Success

ACH AUTHORIZATION AGREEMENT

Client Name: _____

Address: _____

FEIN: _____ Client Number: _____

Date: _____

Client hereby authorizes Argent Payroll (hereinafter referred to as "the Processor") to initiate debits to cover obligations incurred for Client's payroll, payroll tax filings and invoice obligations by use of the Automated Clearing House ("ACH"), an electronic payment network. Client further authorizes the Processor to initiate credit or debit entries intended to correct errors made to any prior debits or credits to Client's accounts. This authorization applies to the following depository accounts:

Authorization Agreement for Direct Deposit Payroll ACH Debits/Credits: Yes No

Depository Name: _____

City _____ State _____ Zip _____

Checking Savings (Indicate type of account)

Transit/ABA Number _____ Account Number _____

Authorization Agreement for Tax Filing Debit/Credits: Yes No Same as direct deposit payroll ACH

Depository Name: _____

City _____ State _____ Zip _____

Checking Savings (Indicate type of account)

Transit/ABA Number _____ Account Number _____

Authorization Agreement for Invoice Debit/Credits: Yes No Same as direct deposit payroll ACH

Depository Name: _____

City _____ State _____ Zip _____

Checking Savings (Indicate type of account)

Transit/ABA Number _____ Account Number _____

Client acknowledges that, in order to use any services that include ACH transactions, the Processor will be the originator of the ACH transactions and will follow and be bound by the rules for ACH originators as adopted from time to time by the National Automated Clearing House Association ("NACHA"). Client agrees to obtain, maintain and provide all necessary authorizations from its employees for ACH transfers involving employees.

This authority is to remain in full force and effect until the Processor is notified by Client in writing of termination or revocation. The Processor, in its sole and exclusive discretion may appoint a third party Originating Financial Institution (hereinafter referred to as "the OFI"), as its agent for the transfer of monies, including payroll, taxes, service fees and related payments from Client to those persons designated by the Processor as payees and to process book entries to and from the Processor's and/or Client's designated accounts for the purpose of making transfers, any related corrections and adjustments and collection of fees and charges. Client and payee authorizations shall comply with National Automated Clearing House Association ("NACHA") rules and procedures. The OFI shall have no liability or responsibility to Client for following directions of the Processor. Client releases and agrees to hold the OFI harmless from all liability to Client and payees for all actions related to services the OFI provides or is to provide, except only to the extent where such a release would conflict with applicable law. The OFI and its affiliated entities are third party beneficiaries of this Agreement entitled to enforce the terms hereof.

Client Name: _____

By: _____

Please Print: _____

Name and Title of Authorized Officer of Client

Agreed to and Signed by the Processor