

Tax Stop, LLC 3401 Quebec Street Suite 10000 Denver, Colorado 80207 303-388-1859

Payroll Deduction Authorization Form

Authorization Agreement

Complete this form and submit it to your Payroll Department for processing.

Name: _____

Home Address: _____

City, State & Zip: _____

Social Security No. _____

E-mail _____ Phone _____

Payroll status: ___ Weekly ___ Bi-weekly ___ Monthly ___ Other _____

I hereby authorize (company name) _____ to:

___ Deduct \$ _____ each pay period until I notify you in writing to discontinue deductions. **Or**

___ Deduct \$ _____ ONE TIME, from my next paycheck.

Please direct my deduction(s) to: Tax Stop, LLC

Employee Signature

Authorized Signature: _____ Date: _____

Please submit completed form to your Payroll Department

To Be Completed By Payroll Department

Please Use the Following Information to Transfer Funds from the employee's paycheck to Tax Stop, LLC, per the employee's above stated directions.

Routing Number: **107002147**

Account Number: **462032871**

Banking Institution: **Bank of the West**

Upon completion, please fax a copy of this form to 303-377-3546 or mail to above address.

Questions? Contact the Office 303-388-1859