

Additional Products Form

CHECK THE APPROPRIATE BOXES

Client Name _____ Client # _____

- Time and Attendance - Type _____ Pick One
- Time and Attendance - # of Clocks _____ type of clock _____ installation?
- Online Employer Employee Services Online Timesheets
- QuickBooks G/L Interface PayPros 401(k)
- Other Retirement Plan* _____ Deduction Check _____ PayPros Pay?__
- PayPros FSA Plan? (Including Medical & Dependent Care).
- Premium Only Plan (POP) - One Time Document for Pre-Tax Plans (under 100 ee's).
- Child Supports - If this box is checked, all paperwork must be submitted for each order along with statement concerning if PayPros or client will pay it.
- Other Deduction Checks. List and explain handling _____
- Direct Deposit 24 Hr Collection. Same Day-needs Mgt approval (charges apply).
- Global Debit Card. How many? _____ Please list Names, Socials & DOB on separate page.
- PayPros Benefits
- Net Checks Written on PayPros Bank Account (charges apply)
- Check Stuffing Check Signing *Vacation/Sick/PTO Accrual
- ViewChoice, but not fully paperless. Explain/list emails _____
- Additional States. Must supply the following for each state: Withholding State ID & Payment Frequency. SUI ID & Rates (broken down by all additional rates, such as DBL)

- Split Packaging. List addresses and explain (chgs apply). _____

- HR 24 Hour Answers Certified Payroll (include example & explain)

*Additional Explanation Area (detail retirement plan, company contr or vac/sick accruals,etc.)

