

Date of Service Termination:

Company Code:

Company Name:

Termination Information	
<b>Please check all that apply</b>	REMOVE online access for Company payroll data
	REMOVE online access for Employee Self-Service Kiosk
	REMOVE access to Pay-Net Timekeeping system* <i>*If your timekeeping is provided by a third party integration service (like AOD or Swipeclock, a separate termination/RMA form may be required)</i>
	Timekeeping Service Type:
Please REMOVE/TERMINATE all indicated Data Hosting services as of date*: <i>*Date indicated must be at least 30 days in future</i>	
Forwarding Address (used for all future correspondence)	Address: Phone: Email Address:
<b>NOTES:</b>	

***By signing below, I acknowledge and agree to the following as an authorized contact of the company indicated: this stands as a formal request to terminate any and all indicated data hosting, with the full knowledge that this releases Pay-Net of any obligation to retain this data in any way, and in the understanding that Pay-Net may permanently purge said data from their various databases at any time after the termination date given above.***

Client Name:

Client Signature:

\*\*\*Internal Use Only\*\*\*