



FIRST FINANCIAL

EMPLOYEE LEASING, INC.

CHAX

Authorization

Employer Information

Client Number:

Client Name:

d/b/a Name:

Contact Name:

Bank Information

Bank Name:

Routing Number:

Account Number:

Checking

Savings

About CHAX

CHAX is a convenient payment method that allows the Clients of First Financial Employee Leasing, Inc. to fax their check for payment. Upon receipt of the faxed check, First Financial Employee Leasing, Inc. can then enter the information into the CHAX database and create a check that will be deposited into our account. The key to CHAX is that it prints a check containing MICR characters exactly as they appear on the original check. CHAX offers a patented feature that ensures compliance within the American Banker's Association's strict standards.

**CHAX may NOT be used to duplicate Certified Checks or Money Orders.*

**CHAX may NOT be used if your payroll is delivered by a First Financial Employee Leasing, Inc. courier.*

CHAX Instructions

1. Write your check made payable to First Financial Employee Leasing, Inc.
2. Make a copy of your check and fax it to (941) 625-6334.
3. YOU retain your original check for your records.
4. Your check must be received by 2:00 p.m. on the day **PRIOR** to your delivery date.
5. FFEL will enter your check information into the CHAX software.
6. FFEL will then print and deposit your new check.
7. FFEL will send you a confirmation receipt with your next payroll verifying all information was processed correctly.

**Contact Tammie Hartman/Payment Coordinator with all CHAX questions*

Employer Authorization

I am an authorized representative of the above referenced Company and hereby authorize First Financial Employee Leasing, Inc. to utilize the CHAX program for payment of payroll services rendered. In order to utilize the CHAX program, First Financial Employee Leasing, Inc. has my permission to produce an exact replica of a faxed copy of our company check with no changes in amount or account number of the original faxed check.

Authorized Signature _____

Date _____

By signing above, I am agreeing that I am either the accountholder or have the authority of the accountholder to authorize First Financial Employee Leasing, Inc. to utilize the CHAX program to duplicate my check(s).

FFEL USE ONLY

Received by:

Processed by:

Date:

Date: