Memorandum of Understanding

PURPOSE

					of Revenue (ADOR)
and	s to ADOR, and to	receive tax accour	t information from A	ADOR in order to	resolve account
State Information					
State Name	Arizona		Agency Name	Department of Revenue	
Address	1600 W Monro	e St.	City, State, Zip	Phoenix, AZ	85007
Contact Name	Jeanette Maez	Phone	(602)716-6	052 Fax	k <u>(602)542-2072</u>
Payroll Service Co	mpany Informatio	n			
Company Name			EIN		
Address			City, State, Zip		
Contact Name		Phone		Fax	·
upon request. information on B. Confidentiality PSC agrees to information on authorized per data. C. Security PSC assumes	PSC will notify ADO its client's behalf o	OR immediately if r if a client withdra he information proate and timely tax ccess to the data and timely tax contents to t	a client authorizes less its authorization wided to specifically reports for each emas to the confidential ided and will mainta	PSC to receive control authorized person aployer. PSC agreelity requirements	ennel and to use the ees to instruct for protecting the emputer system
violated its oblunauthorized of terminate this prior to the efformation.	disclosure to third particular of the discourage	MOU, including fai arties, or failure to y giving written not nation.	lure to provide a co secure confidential ice to the other part	py of a requested information. Eithery at least sixty (60	authorization form, er party may
of both parties			o it io iii iiiiiiig aiia	orgined by addition.	200 representatives
APPROVALS					
Jeanette Ma State Agency Repre		State Agency A	uthorized Signature	<u>Administrat</u> Title	or Date
			<u> </u>		
PSC Representative	e Name	PSC Authorized	Signature	Title	Date