Deferral of Employer Social Security Tax under CARES Act

Comp	any # (Company Name			-
	As per Section 2302 of the CARES Act, I elect to defer the deposit and payment of the Employer's share of Social Security taxes on our payroll processed by NCR Payroll & HR Solutions through December 31, 2020.				
	I attest that we are eligible to defer this tax in accordance with the program rules and in relation to other COVID-19 program participation.				
	I understand that it will be my responsibility to deposit the deferred taxes by the required dates set by the IRS – 50% by 12/31/2021 and 50% by 12/31/2022.				
	This authorization is to begin with any payroll processed on or after the Effective date and remain in effect until a Stop date is provided or December 31, 2020. *Retroactive Effective Dates will not be accepted.				
Effecti	ve Date	/			
	□ I understand <u>it is my responsibility</u> as the client to contact my NCR client service representative and notify them in the event I am no longer eligible for this deferral.				
For yo	ur convenience,	emain in effect until notif please see the green bo Payroll & HR Solutions nor	ox below to terminate.		
		eferred taxes not deposit	•		
Signature	e	Name (printed)	Title	Date	-
am no termin	otified by my lend	der that my loan has bee to defer the deposit and	en forgiven, I will submit	ation under the CARES Act and a new authorization which yer's share of Social Security	
☐ The undersigned terminates the authorization to defer the deposit and payment of the Employer's share of Social Security taxes on our payroll processed by NCR Payroll & HR Solutions.					
Stop D	vate/_	/			
Signature	e	Name (printed)	Title	 Date	-

