

ABCO Payroll Services, Inc.

I authorize Summit Holdings to allow ABCO Payroll Services Inc. (Kenneth R. Reynolds) to have web site access to my workers' compensation policy information in order to complete the monthly CAP report on my behalf. I further authorize ABCO Payroll Services Inc. (Kenneth R. Reynolds) to be added as a contact with Summit Holdings.

I understand that ABCO Payroll Services Inc. and Summit Holdings will be exchanging confidential payroll and policy information on my behalf.

Policy Holder: _____

Authorizing Officer: _____ DATE: _____
Signature

Authorizing Officer: _____
Print