



**ADVANSTAFFHR**  
COLLABORATE. EDUCATE. ELEVATE.

**Client Attestation & Indemnification Release**  
**Employee Retention Credit Year 2020**

I attest that \_\_\_\_\_ (Client Legal Name) is eligible for the Employee Retention Credit.

**2020 Tax Credits**

- I understand that ERC credits are based on the entity listed above and I affirm our eligibility for the Employee Retention Credit program.
- ASI will file one form 941X for all client companies and request a refund for taxes paid.
- ASI will refund those credits to clients upon receipt of those funds from the IRS.
- I understand and agree that all calculations and approvals must be finalized and submitted to ASI no later than June 1, 2021 for calendar year 2020 credits.
- I understand and agree that if I do not meet the 06/01/2021 deadline for the 2020 credits I will be charged an additional fee of \$750 for each 941X that ASI must file on your behalf.
- I understand that it may take some time to receive the refund from the IRS and ASI has no control on when those refunds will be issued.
- I understand that ASI will assist with calculating the tax credits on our behalf, however it is my responsibility to ensure that the credits are accurate as we are ultimately responsible for the validity of the credits claimed.

**Please complete the date ranges that you affirm eligibility to claim the Employee Retention Credit. ASI will provide a report based on the dates below and the calculation of tax credits for your review and approval.**

From Check Date \_\_\_\_/\_\_\_\_/\_\_\_\_ To Check Date \_\_\_\_/\_\_\_\_/\_\_\_\_

From Check Date \_\_\_\_/\_\_\_\_/\_\_\_\_ To Check Date \_\_\_\_/\_\_\_\_/\_\_\_\_

From Check Date \_\_\_\_/\_\_\_\_/\_\_\_\_ To Check Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Client Responsibility & Indemnification**

I am an authorized agent of the client company. I agree to defend and indemnify Advanstaff, Inc. from any adverse actions as a result of credits claimed for the Employee Retention Credit.

**Authorized Representative**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date