

Illinois Department of Revenue

IL-8655 Reporting Agent Electronic Services Authorization

Taxpayers who wish to assign a Reporting Agent (designee) to electronically file and pay on their behalf for the forms listed below must complete Form IL-8655 and submit it to the designee named. The Reporting Agent must retain this form subject to inspection by the Illinois Department of Revenue (IDOR) and the Illinois Department of Employment Security (IDES).

Step 1: Taxpayer Inf	ormation			
1 Legal name of business (as shown on tax return)			4 Federal employer identification number (FEIN)	
Doing business as (DBA) name (if different than Line 1)			Illinois Account ID	
3			6	
Street address			Unemployment Insurance Account number (UI no.)	
			7 ext.:	
City	State	Z I P	Daytime phone - include area code FAX number - include area code	
Step 2: Reporting A	gent Informa	tion		
7 Compupay Inc. DBA BenefitMall			9 59-2022495	
Reporting Agent name			Federal employer identification number (FEIN)	
8 3450 Lakeside Dr Suite	e 400			
Street address			-	
Miramar	FL	33027		
City	State	Z I P	-	
☑ UI-3/40		☐ Other		
Step 4: Signature A	uthorization			
			and to the best of my knowledge it is true, correct, and complete. I understand a responsibility to ensure that all state tax returns are filed and all taxes are	
indicated above. I also auth	orize the designee	to initiate the associ	gn and file state tax returns transmitted electronically for the tax forms ciated electronic tax payments to IDOR and IDES (for Form UI-3/40). Further, IDOR and IDES (for Form UI-3/40).	
that are filed by the designe	e, and the associat	ed payments that a	ntial tax information to the designee relating to the forms indicated above are made by the designee. I certify that I have the authority to authorize ains in effect until the taxpayer or the designee notifies the other that this	
authorization is terminated of	or revoked.			
Signature of taypayor authorize	ad officer or partner		Title Month Day Vear	

