Date Accepted	
Date Modepied	

Part I Tax Return Information (whole dollars only)

7 □ Electronic funds withdrawal

Part II Settle Your Account Electronically for Taxable Year 2017 **6** □ Direct deposit of refund (For Forms 100, 100S, and 100W only.)

First Payment

estimated payment amounts listed on line 8 from the account specified in Part IV.

7a Amount

TAXABLE YEAR

Corporation name

Amount Withdrawal Date

10 Routing number

11 Account number

Part V Declaration of Officer

California e-file Return Authorization for Corporations

Second Payment

intermediate service provider. If the processing of the corporation's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay or the date when the refund was sent. Sign Here Signature of officer Date Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions I declare that I have reviewed the above corporation's return and that the entries on form FTB 8453-C are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the corporation's return. I declare, however, that form FTB 8453-C accurately reflects the data on the return.) I have obtained the corporate officer's signature on form FTB 8453-C before transmitting this return to the FTB; I have provided the corporate officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2017 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-C on file for four years from the due date of the return or four years from the date the corporation return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above corporation's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge. **ERO's PTIN** Date Check if ERO's also paid if self-ER₀ signature employed Must **FFIN** Firm's name (or yours Sign if self-employed) ZIP code and address Under penalties of perjury, I declare that I have examined the above corporation's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Date

Check

if self-

employed \square

FEIN

Paid preparer's PTIN

ZIP code

FTB 8453-C 2017

Firm's name (or yours

if self-employed)

and address

Paid

preparer's

signature

Paid

Must

Sign

Preparer