

NICA IC Electronic Transfer Authorization Form

I hereby grant authority to NICA, Inc. and IC Declaration of Trust (hereinafter jointly referred to as NICA) to electronically transfer the entire net commission settlement for my usual settlement period with the company I contract with to my Comdata Electronic Funds NICA eCash® Card. This Electronic Funds Transfer should start at the next possible settlement allowing at least 10-14 business days for processing. **Authorization to STOP DIRECT DEPOSIT must be submitted in writing and may take up to 7 business days to process.**

I authorize NICA to deduct an Electronic Funds Transfer Fee of \$1.00 per settlement voucher from my gross commissions in addition to any other usual fees that may be due. This Electronic Funds Transfer Fee is a fee imposed by the vendor of the product.

I understand that Electronic Funds Transfer is offered by NICA for my convenience, subject to appropriate handling and notification. I understand that it is available to me as long as I contract with and receive commission from a participating NICA-affiliated contracting company. I understand that the Electronic Funds Transfer must consist of my net commission, in its entirety, and must be deposited in one Comdata account with no splitting of funds.

I the IC have read, understand, and had an opportunity to review the form with the representative of my choice, and freely and voluntarily execute the same.

Independent Contractor's Name (Print or Type)

Independent Contractor's Signature

Social Security or Tax ID Number

Date of Authorization

Contracting Company's Name

eCash® Card Number (If given card already)

Please choose from the following two options:

eCash® card only

eCash® card with Direct Deposit

By completing the DESTINATION BANK INFORMATION below you will be able to utilize the feature of the eCash® card that allows your funds to be electronically transferred into your checking or savings account. If you do not want to use the transfer feature of the eCash® card at this time, there is no need to complete the bottom half of the form. **If you have chosen the direct deposit option then please complete the bottom section of the form. Please allow 10-14 business days for account verification.**

DESTINATION BANK INFORMATION (PLEASE PRINT LEGIBLY)

SAVINGS CHECKING

Bank Name

Bank 9-digit Routing and Transit (ABA) Identifier

Name on Account

Bank Account Number

Please return to:

NICA, Inc.

99 Derby Street, Suite 200

Hingham, MA 02043

Or FAX: 781-556-1026